



Humana Healthy Horizons® in Indiana – Indiana PathWays for Aging

This document was updated on [7/3/2025].

To view your full drug list, [click here](#). Para visualizarlo en español, [haga click aquí](#).

The Preferred Drug List for Humana Healthy Horizons® in Indiana may change during the year. These changes could mean that a drug is no longer preferred or that it has new rules for us to cover it. Below is a list of drugs that have changed.

How to read your drug list changes

- **Drug list removal:** These drugs were preferred but are now being removed from the drug list. If your drug is removed from the drug list, you may have to pay the full price of your drug.
- **Prior authorization (PA):** These drugs need approval by Humana Healthy Horizons® before we will cover them. This is called prior authorization.
- **Step therapy (ST):** These drugs have a requirement to try at least one other drug first.

Your next steps

- **Talk to your healthcare provider soon.** You should share this list with your provider. They can help you decide what to do next.
- **Request approval.** If alternative drugs do not work for you, your provider must tell Humana Healthy Horizons® why you need your current drug. Your provider can find the steps to request approval at [Humana.com/PA](https://www.humana.com/PA).



Drug list removal

Impacted drug	Alternative drug	Effective Date
AUSTEDO 12MG START TITR(WK1-4)	Austedo tablet	7/15/2025
EXENATIDE 10 MCG DOSE PEN INJ	Consult your provider	7/15/2025
GLUMETZA ER 1,000 MG TABLET	metformin ER tablet,extended release 24 hr	7/15/2025
GLUMETZA ER 500 MG TABLET	metformin ER tablet,extended release 24 hr	7/15/2025
Humalog U-100 Insulin 100 unit/mL subcutaneous solution	insulin lispro subcutaneous solution; insulin lispro subcutaneous pen	7/15/2025
LOTEMAX 0.5% EYE DROPS	Alrex eye drops,suspension; Lotemax eye gel drops	7/15/2025
NAPROXEN-ESOMEPRAZ DR 375-20MG	naproxen tablet; esomeprazole magnesium capsule,delayed release	7/15/2025
NAPROXEN-ESOMEPRAZ DR 500-20MG	naproxen tablet; esomeprazole magnesium capsule,delayed release	7/15/2025
Novolog Mix 70-30 FlexPen U-100 Insulin 100 unit/mL subcutaneous pen	Novolin 70-30 FlexPen U-100 Insulin subcutaneous; Humulin 70/30 U-100 Insulin KwikPen subcutaneous	7/15/2025
Novolog Mix 70-30 U-100 Insulin 100 unit/mL subcutaneous solution	Novolin 70/30 U-100 Insulin subcutaneous suspension; Humulin 70/30 U-100 Insulin subcutaneous suspension	7/15/2025
CHILD ALL DAY ALLERGY 1 MG/ML	Children's Allergy (cetirizine) oral solution; Children's Zyrtec Allergy oral solution	8/15/2025
EXENATIDE 5 MCG DOSE PEN INJ	Byetta subcutaneous pen injector	8/15/2025
GNP CHLD ALL DAY ALLER 1 MG/ML	Children's Allergy (cetirizine) oral solution; Children's Zyrtec Allergy oral solution	8/15/2025
MINIPRESS 2 MG CAPSULE	doxazosin tablet; prazosin capsule	8/15/2025
MINIPRESS 5 MG CAPSULE	doxazosin tablet; prazosin capsule	8/15/2025
NAMENDA XR 14 MG CAPSULE	memantine capsule sprinkle,ER 24hr	8/15/2025
NAMENDA XR 21 MG CAPSULE	memantine capsule sprinkle,ER 24hr	8/15/2025
NAMENDA XR 28 MG CAPSULE	memantine capsule sprinkle,ER 24hr	8/15/2025
NORG-EE 0.18-0.215-0.25/0.025	norgestimate-ethinyl estradiol tablet; Tri-Lo-Sprintec tablet	8/15/2025
SM ALL DAY ALLERGY 1 MG/ML SYR	cetirizine oral solution; Allergy Relief (cetirizine) oral solution	8/15/2025
SM LORATA-DINE D 24HR TABLET	Claritin-D 24 Hour tablet,extended release; Allergy and Congestion Relief tablet,extended release 24 hr	8/15/2025
SM LORATA-DINE D TABLET	Claritin-D 24 Hour tablet,extended release; Allergy and Congestion Relief tablet,extended release 24 hr	8/15/2025

Impacted drug	Alternative drug	Effective Date
VISTARIL 25 MG CAPSULE	hydroxyzine HCl tablet; promethazine tablet	8/15/2025

Drugs requiring prior authorization (PA)

Impacted drug	Alternative drug	Effective Date
Bkemv 300 mg/30 mL intravenous solution	Consult your provider	6/30/2025
Catapres-TTS-1 0.1 mg/24 hr transdermal patch	Consult your provider	6/30/2025
Catapres-TTS-2 0.2 mg/24 hr transdermal patch	Consult your provider	6/30/2025
Catapres-TTS-3 0.3 mg/24 hr transdermal patch	Consult your provider	6/30/2025
clonidine 0.1 mg/24 hr weekly transdermal patch	Consult your provider	6/30/2025
clonidine 0.2 mg/24 hr weekly transdermal patch	Consult your provider	6/30/2025
clonidine 0.3 mg/24 hr weekly transdermal patch	Consult your provider	6/30/2025
clonidine HCl 0.1 mg tablet	Consult your provider	6/30/2025
clonidine HCl 0.2 mg tablet	Consult your provider	6/30/2025
clonidine HCl 0.3 mg tablet	Consult your provider	6/30/2025
clonidine HCl ER 0.1 mg tablet,extended release,12 hr	Consult your provider	6/30/2025
clonidine HCl ER 0.17 mg tablet,extended release 24 hr	Consult your provider	6/30/2025
Empaveli 1,080 mg/20 mL subcutaneous solution	Consult your provider	6/30/2025
Epysqli 300 mg/30 mL intravenous solution	Consult your provider	6/30/2025
Fabhalta 200 mg capsule	Consult your provider	6/30/2025
guanfacine 1 mg tablet	Consult your provider	6/30/2025
guanfacine 2 mg tablet	Consult your provider	6/30/2025
guanfacine ER 1 mg tablet,extended release 24 hr	Consult your provider	6/30/2025
guanfacine ER 2 mg tablet,extended release 24 hr	Consult your provider	6/30/2025
guanfacine ER 3 mg tablet,extended release 24 hr	Consult your provider	6/30/2025

Impacted drug	Alternative drug	Effective Date
guanfacine ER 4 mg tablet,extended release 24 hr	Consult your provider	6/30/2025
Kapvay 0.1 mg tablet,extended release	Consult your provider	6/30/2025
Nexiclon XR 0.17 mg tablet,extended release	Consult your provider	6/30/2025
Onyda XR 0.1 mg/mL oral suspension,extended release	Consult your provider	6/30/2025
Piasky 340 mg/2 mL injection solution	Consult your provider	6/30/2025
Rezdiffra 100 mg tablet	Consult your provider	6/30/2025
Rezdiffra 60 mg tablet	Consult your provider	6/30/2025
Rezdiffra 80 mg tablet	Consult your provider	6/30/2025
Soliris 300 mg/30 mL intravenous solution	Consult your provider	6/30/2025
Ultomiris 100 mg/mL intravenous solution	Consult your provider	6/30/2025
Amvuttra 25 mg/0.5 mL subcutaneous syringe	Consult your provider	7/15/2025
Azmiro 200 mg/mL intramuscular syringe	Consult your provider	7/15/2025
Inzirqo 10 mg/mL oral suspension	Consult your provider	7/15/2025

Auxiliary aids and services, free of charge, are available to you.
866-274-5888 (TTY: 711), Monday through Friday, from 8:00 a.m. to 8:00 p.m., Eastern time.

Humana Inc. and its subsidiaries comply with Section 1557 by providing free auxiliary aids and services to people with disabilities when auxiliary aids and services are necessary to ensure an equal opportunity to participate. Services include qualified sign language interpreters, video remote interpretation, and written information in other formats.

English Call the number above to receive free language assistance services.

Español (Spanish) Llame al número que se indica arriba para recibir servicios gratuitos de asistencia lingüística.

Deutsch (German) Wählen Sie die oben angegebene Nummer, um kostenlose sprachliche Hilfsdienstleistungen zu erhalten.

繁體中文 (Chinese) 您可以撥打上面的電話號碼以獲得免費的語言協助服務。

العربية (Arabic): اتصل برقم الهاتف أعلاه للحصول على خدمات المساعدة اللغوية المجانية.

Nederlands (Dutch) Bel het bovenstaande nummer om gratis taalkundige hulp te ontvangen.

Français (French) Appelez le numéro ci-dessus pour recevoir des services gratuits d'assistance linguistique.

Tiếng Việt (Vietnamese) Gọi số điện thoại ở trên để nhận các dịch vụ hỗ trợ ngôn ngữ miễn phí.

Tagalog (Tagalog – Filipino) Tawagan ang numero sa itaas para makatanggap ng mga libreng serbisyo sa tulong sa wika.

한국어 (Korean) 무료 언어 지원 서비스를 받으려면 위 번호로 전화하십시오.

हिंदी (Hindi) भाषा सहायता सेवाएं मुफ्त में प्राप्त करने के लिए ऊपर के नंबर पर कॉल करें ।

日本語 (Japanese) 無料の言語支援サービスを受けるには、上記の番号までお電話ください。

Русский (Russian) Позвоните по вышеуказанному номеру, чтобы получить бесплатную языковую поддержку.

Polski (Polish) Aby skorzystać z bezpłatnej pomocy językowej, należy zadzwonić pod wyżej podany numer.

Srpsko-hrvatski (Serbo-Croatian) Nazovite gore navedeni broj ako želite besplatne usluge jezične pomoći.

Italiano (Italian) Chiamare il numero sopra indicato per ricevere servizi di assistenza linguistica gratuiti.

This notice is available at [Humana.com/IndianaDocuments](https://www.humana.com/IndianaDocuments).

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