

Caterpillar Drug Formulary Update -- Effective May 1, 2026

Active Employees and certain Retirees that are covered by the prescription drug benefit provisions of the Caterpillar Inc. Employee Health, Life and Disability Benefit Program, the Caterpillar Inc. Retiree Benefit Program, the Caterpillar Inc. Group Insurance Plan A, and the Caterpillar Inc. Group Insurance Plan B.

A complete list of medications covered on the Caterpillar Drug Formulary is available at benefits.cat.com or by calling Prime Therapeutics at 1-877-228-7909.

Additions to Caterpillar Drug Formulary -- Effective May 1, 2026

Drug Name	Drug Name
BRUKINSA T4 PA QL	LYNKUET T3 PA QL
CALQUENCE T4 PA QL	MYQORZO T4 PA QL
EKTERLY T4 PA QL	NUBEQA T4 PA QL
JUXTAPID T4 PA QL	

Additions to Caterpillar Specialty Products List -- Effective May 1, 2026

Drug Name	Drug Name
ambrisentan T4 PA SP QL	SAMSCA T4 PA SP QL
deferiprone T4 PA SP	sapropterin T4 PA SP
ENSPRYNG T4 PA SP	sorafenib T4 PA SP
KUVAN T4 PA SP	sunitinib malate T4 PA SP
mifepristone 300mg T4 PA SP	tiopronin T4 SP
nitisinone T4 PA SP	tiopronin dr T4 SP
pomalidomide T4 PA SP	

Recent New Generics -- Announced May 1, 2026

Brand Name	Generic Name +
QVAR T3 QL	beclomethasone dipropionate T2 QL
LUMIGAN T3 QL	bimatoprost .01% T2 QL
BRIVIACT TAB T4 PA QL	brivaracetam tab T4 PA QL
BRIVIACT ORAL SOLN T4 PA	brivaracetam oral soln T4 PA
FARXIGA T4 PA QL	dapagliflozin T2 PA QL
XIGDUO XR T4 PA QL	dapagliflozin-metformin er T2 PA QL
AURYXIA T4 PA	ferric citrate T4 PA
ATROVENT T3 QL	ipratropium bromide T2 QL
POMALYST T4 PA SP	pomalidomide T4 PA SP
EDURANT TAB T4	ripivirine tab T4
NUCYNTA T4 ST QL	tapentadol hcl T4 ST QL
NUCYNTA ER T4 ST QL	tapentadol er T4 ST QL
INCRUSE ELLIPTA T4 PA QL	umeclidinium ellipta T2 PA QL

Tier Changes to Caterpillar Drug Formulary -- Effective May 1, 2026

Drug Name	Drug Name
COLAZAL T4 QL	ofloxacin tab T2
erlotinib hcl T1 SP QL	PENTASA T4 QL
FOSRENOL T4 PA	pirfenidone T4 PA SP
lanthanum T3 PA	REVELA POWDER T4 PA
levorphanol T4 QL	REVELA TABLET T4
LIALDA DR 1.2gm tab T4	sacubitril-valsartan T1 QL
mesalamine ER 0.375 gram cap T1 QL	sevalamer carbonate 800mg T1
mesalamine DR 1.2 gm tablet T1 QL	sevelamer powder T4 PA
mesalamine ER 500mg cap T4 QL	

Deletions to Caterpillar Drug Formulary -- Effective May 1, 2026

Deletions	Alternative(s)
AIRDUO DIGIHALER	fluticasone/salmeterol T2 QL
AIRDUO RESPICLICK	fluticasone/salmeterol T2 QL
DIPENTUM	balsalazide T1
TARCEVA	erlotinib T1 SP QL

+ The generic may not be available in all strengths or dosage forms.

PA = Prior Authorization QL = Quantity Limit SP = Specialty Drug ST = Step Therapy

alternatives is not intended and