

Caterpillar Drug Formulary Update -- Effective Nov 1, 2024

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 Nov 1, 2024

Drug Name		Drug Name	
REZVOGLAR	T1	VIGAFYDE	T4 PA
IWILFIN	T4 PA	WAKIX	T4 PA QL
ZORYVE	T4 PA QL	TEGSEDI	T4 PA QL
WAINUA	T4 PA QL		

Additions to Caterpillar Drug Formulary -- Effective Jan 1, 2025

NOVOLIN N FLEXPEN	T1	RELION NOVOLIN R FLEXPEN	T0
NOVOLIN 70-30 FLEXPEN	T2	RELION NOVOLIN 70-30 FLEXPEN	T0
NOVOLIN R FLEXPEN	T1		
RELION NOVOLIN N FLEXPEN	T0		

Additions to Caterpillar Specialty Products List -- Effective Nov 1, 2024

Drug Name		Drug Name	

Recent New Generics -- Announced Nov 1, 2024

Brand Name		Generic Name +	
TRESIBA	T4 ST	insulin degludec	T2 ST
TOUJEO	T2	insulin glargine 300 Unit	T2 ST
ASTAGRAF XL	T4 PA	tacrolimus xl	T2 PA
LUCEMYRA	T4 PA QL	lofedidine hcl	T3 PA QL
TAZORAC 0.05% cream	T3 PA	tazarotene 0.05% cream	T2 PA
SPRYCEL	T4 PA SP	dasatinib	T3 PA SP
LANTUS	T2	insulin glargine-yfgn	T1

Tier Changes to Caterpillar Drug Formulary -- Effective Nov 1, 2024

Drug Name		Drug Name	
roflumilast	T1		

Tier Changes to Caterpillar Drug Formulary -- Effective Jan 1, 2025

Drug Name		Drug Name	
VICTOZA	T4 PA QL	FIASP	T4 ST
BYETTA	T4 PA QL	insulin lispro	T1
BYDUREON	T4 PA QL	RELION NOVOLOG	T1
OZEMPIC	T4 PA QL	liraglutide	T2 PA QL
TOUJEO	T4 ST		
LANTUS	T3 ST		
HUMULIN R 500	T4		

Deletions to Caterpillar Drug Formulary -- Effective Nov 1, 2024

Deletions		Alternative(s)
FARESTON		toremifene
IMBRUVICA 560mg		IMBRUVICA 280mg
OICALIVA		ursodiol

Deletions to Caterpillar Drug Formulary -- Effective Jan 1, 2025

Deletions		Alternative(s)
BASAGLAR		insulin glargine-yfgn or REZVOGLAR

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

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

The information regarding alternatives is not intended and should not be construed, in any way, as medical advice, opinion, diagnosis or as advice about the treatment of any specific medical condition. You should consult with your physician regarding your particular health