

Formulary Changes

Second Quarter 2024

Quarterly changes to Independent Health drug formularies are summarized below and are currently in effect unless otherwise noted.

Abbreviations used throughout

AL: age limit	LA: limited access (only available at certain pharmacies)	PB/PG: preferred brand/generic
BvD: prior authorization is limited to a check to see whether being billed Part B or Part D	lot: lot	QL: quantity limit
cap: capsule	MDI: metered-dose inhaler/aerosol	SC: subcutaneous
CHP: Child Health Plus (Medicare)	NF: non-formulary	SL: sublingual
cr: cream	NPB/NPG: non-preferred brand/generic	sol: solution
DF: drug formulary	ODT: orally-disintegrating tablet	SP: specialty pharmacy
IM: intramuscular	oint: ointment	ST: step therapy required
inj: injection	ophth: ophthalmic	supp: suppository
IV: intravenous	PA: prior authorization required	supp: suspension
		T (before a number): tier

New drugs reviewed

Drug name (generic name)	SP	LA	DF1, FEHB, Pharmacy Benefit Dimensions	DF2, DF3, Essential	CHP	Medicare
Alvaiz (eltrombopag)	X		NF	NF	NF	NF
Amtagvi (lifileucel)			Medical PA	Medical PA	Medical PA	Medical PA
Anktiva (nogapendekin alfa inbakicept-pmln)			Medical PA w/ST	Medical PA w/ST	Medical PA w/ST	Medical PA w/ST
Aurlumyn (iloprost)			Medical PA	Medical PA	Medical PA	Medical PA
Beqvez (fidanacogene elaparvovec-dzkt)			Medical PA	Medical PA	Medical PA	Medical PA
clobetasol ophth susp			NF	NF	NF	NF
Duvyzat (givinostat)	X	X	NPB PA w/ST	NPB PA w/ST	PB PA w/ST	NF
Eohilia (budesonide oral susp)			NPB PA	NPB PA	NF	NPB PA
Exblifep (cefepime/enmetazobactam)			Medical PA	Medical PA	Medical PA	Medical PA
Hercessi (trastuzumab-strf)			Medical PA w/ST	Medical PA w/ST	Medical PA w/ST	Medical PA w/ST
Imdelltra (tartalamab-dlle)			Medical PA	Medical PA	Medical PA	Medical PA
Jubbonti (denosumab-bbdz)	X		Medical PA w/ST	Medical PA w/ST	Medical PA w/ST	Medical PA w/ST
Legubeti (acetylcysteine oral sol)			Medical	Medical	Medical	Medical
Lenmeldy (atidarsagene autotemcel)			Medical PA	Medical PA	Medical PA	Medical PA
Letybo (letibotulinumtoxinA-wlbg)	X		Block	Block	Block	Block
Libervant (diazepam buccal film)			NPB PA except neurology	NPB PA	PB PA	NF
Lumisight (pegulicianine)			Medical	Medical	Medical	Medical
Myhibbin (mycophenolate mofetil oral susp)			NF	NF	NF	NF
Ojemda (tovorafenib)	X	X	NPB PA w/ST	NPB PA w/ST	PB PA w/ST	NPB PA w/ST
Opsynvi (macitentan/tadalafil)	X	X	NPB PA	NPB PA	PB PA	NPB PA
Opuviz (afibercept-zsyz)	X		Medical PA w/ST	Medical PA w/ST	Medical PA w/ST	Medical PA w/ST
Pivya (pivmecillinam)			NF	NF	NF	NF
Rezdiffra (resmetirom)	X	X	NF	NF	NF	NF
Rezenopy (naloxone nasal spray)			NF	NF	NF	NF
Risvan (risperidone IM)			Medical PA	Medical PA	Medical PA	NPB PA BvD
Selarsdi (ustekinumab-aekn)	X		NF	NF	NF	NF
Simlandi (adalimumab-ryvk)	X		PB PA	PB PA	PB PA	PB
Tevimbra (tislelizumab-jsgr)	X		Medical PA	Medical PA	Medical PA	Medical PA
Tryvio (aprocitentan)			NF	NF	NF	NF
Tyenne (tocilizumab-aazg IV)	X		Medical PA	Medical PA	Medical PA	Medical PA
Tyenne (tocilizumab-aazg SC)	X		NF	NF	NF	NF
Vafseo (vadadustat)	X		Medical PA	Medical PA	Medical PA	Medical PA
Voydeya (danicipan)	X	X	NPB PA	NPB PA	NF	NPB PA
Winrevair (sotatercept-csrk)	X		NPB PA	NPB PA	NF	NPB PA
Wyost (denosumab-bbdz)	X		Medical PA w/ST	Medical PA w/ST	Medical PA w/ST	Medical PA w/ST

Xolremdi (mavorixafor)	X	X	NPB PA	NPB PA	NF	NPB PA
Xromi (hydroxyurea oral sol)			NPB AL	NPB AL	PB AL	NF
Yesafili (afibercept-jbvf)	X		Medical PA w/ST	Medical PA w/ST	Medical PA w/ST	Medical PA w/ST
Zevtera (ceftobiprole medocaril)			Medical PA	Medical PA	Medical PA	Medical PA

New generic placements

Drug name (generic name)	DF1, FEHB, Pharmacy Benefit Dimensions	DF2, DF3, Essential	CHP	Medicare
Alrex (loteprednol)	NF	NF	NF	NF
Emflaza (deflazacort tabs)	T3 PA/T5 PA FEHB	T3 PA	T1 PA	NF
Rectiv (nitroglycerin rectal oint)	T3	T3	NF	T4
Thiola EC (tiopronin)	T2	T3	NF	NF

Other formulary changes

Drug name (generic name)	Applicable formularies	Changes
adalimumab-adbm	All formularies	PB PA (no PA Medicare) effective 7/1/24
antiobesity agents	Commercial	Contrave, Saxenda, Wegovy, Zepbound to T2 on DF1/FEHB; Qsymia NF all Commercial effective 4/1/24 (FEHB 1/1/25)
atovaquone/proguanil	Commercial/Medicaid	QL removed effective 3/15/24
dalfampridine	Commercial	PA exemption for neurology added
desonide oint	Commercial/Medicaid	ST removed effective 3/15/24
hyaluronates	Commercial	Euflexxa/Synvisc One covered effective 8/1/24
inhaled corticosteroids	Commercial/Medicaid	Pulmicort/Symbicort AL removed
meprobamate	DF2/DF3/Essential	add PG effective 5/1/24
risperidone IM	All formularies	Perseris, Risvan, Rykindo, Uzedy ST added through generic risperidone IM effective 1/1/25
testosterone products	Commercial/Medicaid	Androderm, Methitest, Natesto NF effective 1/1/25
Vraylar (cariprazine)	Medicare	PA removed

Coverage changes due to new indications

Drug name (generic name)	New indication	Changes
Dovato (dolutegravir/lamivudine)	lower AL on indication dropped to 12 years of age	AL changes
Edurant (ritipivirine)	lower AL now 2 years of age, lower weight limit now ≥14 kg	AL changes
Vemlidy (tenofovir alafenamide)	lower AL on indication dropped to 6 years of age	AL changes

Preferred biosimilar changes

Per Independent Health's biosimilar policy, the following changes were approved by the P&T Committee:

Generic (reference product)	Changes	Effective date
tocilizumab IV (Actemra IV)	add ST to Actemra/Tofidence through Tyenne; Tyenne preferred	8/1/2024