

Changes to your plan's pharmacy drug list

In our ongoing effort to assist you in maximizing your health care investment while offering your plan members clinically appropriate prescription therapy, we are announcing changes to the **Standard Control Formulary + Advanced Control Specialty Formulary** effective **July 1, 2023**. A copy of the Performance Drug List and Advanced Control Specialty Formulary are attached for your reference.

The formulary review process focused on many factors, including:

Adding products that have demonstrated enhanced clinical efficacy and/or provide more convenient dosage forms.

Formulary additions

Drug Class	Drug name(s)
Cardiovascular, Antilipemics, PCSK9 Inhibitors*	REPATHA
Hematologic, Erythropoiesis-Stimulating Agents*	ARANESP, PROCRIT
Ophthalmic, Glaucoma*	bimatoprost ophthalmic solution 0.03%
Respiratory, Alpha-1 Antitrypsin Deficiency*	ZEMAIRA

Removing products that may have less convenient dosage forms, more side effects or cost more than other available options on the CVS Caremark® Drug List.

Formulary exclusions

Drug Class	Drug name(s)	Alternative(s)
Anti-Infectives, Antivirals, Hepatitis B*	VEMLIDY	entecavir, lamivudine, tenofovir disoproxil fumarate
Antipsychotics, Atypical*	LATUDA**	aripiprazole, clozapine, lurasidone, olanzapine, quetiapine, quetiapine ext-rel, risperidone, ziprasidone, VRAYLAR
Antiseizure Agents*	BANZEL**, FINTEPLA	clobazam, clonazepam, lamotrigine, rufinamide, topiramate, TROKENDI XR
	DIACOMIT	Talk to your doctor
	VIMPAT**	carbamazepine, carbamazepine ext-rel, divalproex sodium, divalproex sodium ext-rel, gabapentin, lacosamide, lamotrigine, lamotrigine ext-rel, levetiracetam, levetiracetam ext-rel, oxcarbazepine, phenobarbital, phenytoin, phenytoin sodium extended, primidone, tiagabine, topiramate, valproic acid, zonisamide, APTIOM, FYCOMPA, OXTELLAR XR, TROKENDI XR, XCOPRI
Asthma, Steroid Inhalants*	FLOVENT HFA	PULMICORT FLEXHALER (For all members); QVAR INHALER (For members 5 years of age and under ONLY)
Attention Deficit Hyperactivity Disorder*	DYANAVEL XR, JORNAY PM, MYDAYIS	amphetamine-dextroamphetamine mixed salts ext-rel, dexamethylphenidate ext-rel, methylphenidate ext-rel, AZSTARYS, VYVANSE
Cancer, Prostate*	FIRMAGON	ELIGARD
Cardiovascular, Antilipemics*	LOVAZA**	omega-3 acid ethyl esters, VASCEPA

Cardiovascular, Antilipemics, PCSK9 Inhibitors*	PRALUENT	REPATHA
Cystic Fibrosis*	BETHKIS**, KITABIS**	tobramycin inhalation solution
Hyperkalemia	LOKELMA	VELTASSA
Kidney Disease, Phosphate Binders*	REVELA**	calcium acetate, sevelamer carbonate, AURYXIA, VELPHORO
Kidney Disease, Vasopressin Receptor Antagonists	JYNARQUE	Talk to your doctor
Multiple Sclerosis*	AUBAGIO**	dimethyl fumarate delayed-rel, fingolimod, glatiramer, teriflunomide, AVONEX, BETASERON, COPAXONE, KESIMPTA, MAYZENT, OCREVUS, REBIF, TYSABRI, VUMERITY, ZEPOSIA
Nutritional/ Supplements, Vitamins and Minerals*	All Brand Multivitamins, FLORIVA, FLORIVA PLUS, POLY-VI-FLOR, POLY-VI-FLOR WITH IRON, TRI-VI-FLOR	generic multivitamins
Ophthalmic, Glaucoma*	LUMIGAN, RHOPRESSA, ROCKLATAN, VYZULTA	bimatoprost, latanoprost, travoprost, ZIOPTAN

Tier 2 to Tier 3

Drug Class	Drug name(s)	Alternative(s)
Anti-Infectives, Antivirals, Hepatitis B*	BARACLUDE SOLUTION	entecavir tablets, lamivudine, tenofovir disoproxil fumarate
Antipsychotics, Atypical*	CAPLYTA	aripiprazole, clozapine, lurasidone, olanzapine, quetiapine, quetiapine ext-rel, risperidone, ziprasidone, VRAYLAR
Endocrine and Metabolic, Androgens*	ANDRODERM	testosterone gel (except authorized generics for TESTIM and VOGELXO), testosterone solution, NATESTO
Kidney Disease, Phosphate Binders*	PHOSLYRA SOL	calcium acetate, sevelamer carbonate, AURYXIA, VELPHORO

UPPER CASE = brand-name medication

lower case = generic medication

*Class has existing formulary exclusions

**Multi-source Brand Product

^Previously New to Market Block

Please note: The specialty copay may not be affected by the proposed changes if the plan has a fixed copay for all specialty drugs.

Mailing Process:

As always, notifications will be sent to members who are negatively affected by tier changes* or drug exclusions. Please encourage your members to use the CVS Caremark website, Caremark.com, to view the most current version of the drug list, as well as to review their prescription drug benefit information, request mail service orders and research drug information.

We appreciate the opportunity to serve you and your members' prescription benefit needs. If you have any questions regarding these changes, please do not hesitate to contact me.



*Except in the case of products that have generic equivalents available or are acute therapies.

