



MC-Rx's P&T Committee and team of dedicated clinicians have recommended the following changes to MC-Rx's National Formulary as of the effective dates shown. These decisions follow their clinical guidance and are based on safety, efficacy, side effect profile, and potential for abuse. While financial impact does not play a key role in the decision of coverage and preliminary placement, the ultimate cost of therapy of the selected products versus that of the other available products in the same therapeutic class is taken into consideration during final placement.

New BRAND Name Drug Additions to the Formulary

Clinical Category	Brand Name Generic Name	Route	Indications	Formulary Placement	Effective Date
Inflammatory Agent	Abrilada (adalimumab-afzb)	Subcutaneous (Specialty)	Indicated for the treatment of RA, JIA, PsA, AS CD, UC, Ps.	Tier 3/ P/A	4/1/20
Topical Acne Agent	Arazlo (Tazarotene)	Topical	Indicated for the topical treatment of acne vulgaris in patients 9 years of age and older.	Tier 3 P/A	4/1/20
Antineoplastic Agent	Ayvakit (avapritinib)	Oral (Specialty)	Treatment of adults with unresectable or metastatic GIST harboring a platelet-derived growth factor receptor alpha (PDGFRA) exon 18 mutation, including PDGFRA D842V mutation.	Tier 2/ P/A	4/1/20
Antineoplastic Agent	Brukina (zanubritinib)	Oral (Specialty)	Treatment of adult patients with mantle cell lymphoma (MCL) who have received at least one prior therapy.	Tier 2 P/A	4/1/20
Antipsychotic Agent	Caplyta (lumateperone)	Oral	Treatment of schizophrenia in adults.	Tier 3 P/A	4/1/20
Antihypertensive	Conjupri (levamlodipine malcate)	Oral	Treatment of hypertension in adults and pediatric patients 6 years and older to lower blood pressure.	100% Copay	4/1/20
Orexin Receptor Antagonist	Dayvigo (lemborexant)	Oral	Treatment of adult patients with insomnia characterized by difficulties with sleep onset and/or sleep maintenance	Tier 3 P/A	4/1/20
Contraceptives	Eluryng (ethinyl estradiol and etonogestrel)	Vaginal Ring	Vaginal ring indicated for use of contraception. Prevention of pregnancy.	Tier 3	4/1/20
Vaccine	Ervebo (ebola zaire vaccine, live)	Intramuscular	Prevention of disease caused by Zaire ebolavirus in individuals 18 years of age and older.	Per Vaccine design	4/1/20
Glutamate Inhibitor	Exservan (riluzole)	Oral	Treatment of amyotrophic lateral sclerosis.	Tier 3 P/A	4/1/20
Sickle Cell Anemia Agent	Oxbryta (voxelotor)	Oral (Specialty)	Treatment of sickle cell disease in patients aged 12 years and older.	Tier 3 P/A	4/1/20
Antineoplastic Agent	Reditrex (methotrexate)	Injection	Indicated for the management of patients with severe, active rheumatoid arthritis (RA) and polyarticular juvenile idiopathic arthritis (pJIA), who are intolerant of or had inadequate response to first-line therapy. Symptomatic control of severe, recalcitrant, disabling psoriasis in adults who are not adequately responsive to other forms of therapy.	Tier 3 P/A	4/1/20
Antineoplastic Agent	Tazverik (tazemetostat)	Oral (Specialty)	Inhibitor indicated for the treatment of adults and pediatric patients aged 16 years and older with metastatic or locally advanced epithelioid sarcoma not eligible for complete resection.	Tier 2 P/A	4/1/20
Antidiabetic Agent	Trijardy XR (empagliflozin, linagliptin, and metformin hydrochloride)	Oral	Indicated to reduce the risk of cardiovascular death in adults with type 2 diabetes mellitus and established cardiovascular disease.	Tier 2	4/1/20

New BRAND Name Drug Additions to the Formulary

Clinical Category	Brand Name Generic Name	Route	Indications	Formulary Placement	Effective Date
Antimigraine Preparations	Ubrelvy (ubrogepant)	Oral	Acute treatment of migraine with or without aura in adults.	Tier 3 P/A	4/1/20
Anticonvulsant	Valtoco (diazepam)	Nasal	Acute treatment of intermittent, stereotypic episodes of frequent seizure activity (i.e. seizure clusters, acute repetitive seizures) that are distinct from a patient's usual seizure pattern in patients with epilepsy 6 years of age and older.	Tier 3	4/1/20
Anticonvulsant	Xcopri (cenobamate)	Oral	Treatment of partial-onset seizures in adult patients.	Tier 3 QLL	4/1/20

Medical Benefit

Clinical Category	Brand Name Generic Name	Route	Indications	Formulary Placement	Effective Date
Sickle Cell Anemia Agent	Adakveo (crizanlizumab-tmca)	Intravenous	Vasoocclusive crises in adults and pediatric patients aged 16 years and older with sickle cell disease.	Medical Benefit	4/1/20
Hematopoietic Agent	Reblozyl (luspatercept-ammt)	Intravenous	Treatment of anemia in adult patients with beta thalassemia who require regular red blood cell (RBC) transfusions.	Medical Benefit	4/1/20
Antineoplastic Agent	Enhertu (fam-trastuzumab deruxtecanxbi)	Intravenous	Indicated for treatment of breast cancer.	Medical Benefit	4/1/20
Cephalosporin Antibiotics	Fetroja (cefiderocol)	Intravenous	Indicated for treatment of complicated urinary tract infections.	Medical Benefit	4/1/20
Therapeutic Agent	Givlaari (givosiran)	Subcutaneous	Indicated for treatment of acute hepatic porphyria.	Medical Benefit	4/1/20
Iron Preparations	Monoferric (ferric derisomaltose)	Intravenous	Indicated for treatment of iron deficiency anemia.	Medical Benefit	4/1/20
Nutritional Therapy	Nouress (cysteine hydrochloride)	Intravenous	Indicated for treatment of total parenteral nutrition.	Medical Benefit	4/1/20
Local Anesthetic	Numbrino (cocaine hydrochloride)	Nasal	Indicated for nasal anesthesia.	Medical Benefit	4/1/20
Antineoplastic Agent	Padcev (enfortumab vedotin-ejfv)	Intravenous	Indicated for treatment of urothelial carcinoma.	Medical Benefit	4/1/20
Insulin-Like Growth Factor-1 Receptor (IGF-1R) Antagonist	Tepezza (teprotumumab-trbw)	Intravenous	Indicated for treatment of thyroid eye disease.	Medical Benefit	4/1/20
Antisense Oligonucleotides	Vyondys 53 (golodirsen)	Intravenous	Indicated for treatment of Duchenne muscular dystrophy.	Medical Benefit	4/1/20

Generic Releases & Updates Within the Next 90 Days

The following drugs are expected to lose their patents and become available generically within the next 90 days.

Zohydro ER		
Hicon (Sodium Iodide I 131) Solu & Capsules		
Vimovo		
Pazeo		
ProAir HFA		
Daraprim		
Migranal		

Additional Notes

Copies of MC-Rx's National Formulary and Pocket Formulary can be found on our website, <http://www.mc-rx.com>, under the "PBM Resources/Drug and Formulary Lists" tab.