



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
Vaccine	Audenz (influenza A H5N1)	Intramuscular	Indicated for active immunization for the preventions of disease caused by the influenza A virus H5N1 subtype contained in the vaccine.	N/A	7/1/20
Cortisol Synthesis Inhibitor	Isturisa (osilodrostat)	Oral (Specialty)	Indicated for treatment of adult patients with Cushing's disease when pituitary surgery is not an option or has not been curative.	Tier 3 P/A	7/1/20
Antineoplastic Agent	Koselugo (selumetinib)	Oral (Specialty)	Indicated for the treatment of pediatric patients 2 years of age and older with neurofibromatosis type 1 (NF1) who have symptomatic, inoperable plexiform neurofibromas (PN).	Tier 2 P/A	7/1/20
Vaccine	MenQuadfi (meningococcal (groups A, C, Y, and W) conjugate vaccine)	Intramuscular	Indicated for treatment of meningococcal meningitis prophylaxis.	N/A	7/1/20
Antilipemic Agent	Nexletol (bempedoic acid)	Oral	Indicated as an adjunct to diet and maximally tolerated statin therapy for the treatment of adults with heterozygous familial hypercholesterolemia or established atherosclerotic cardiovascular disease who require additional lowering of LDL-C.	Tier 3 P/A	7/1/20
Antilipemic Agent	Nexlizet (bempedoic acid and ezetimibe)	Oral	Indicated as an adjunct to diet and maximally tolerated statin therapy for the treatment of adults with heterozygous familial hypercholesterolemia or established atherosclerotic cardiovascular disease who require additional lowering of LDL-C.	Tier 3 P/A	7/1/20
Antimigraine Agent	Nurtec ODT (rimegepant)	Oral	Indicated for the acute treatment of migraine with or without aura in adults.	Tier 3 P/A	7/1/20
Anti-Parkinson Agent	Ongentys (opicapone)	Oral	Indicated as adjunctive treatment to levodopa/carbidopa in patients with Parkinson's disease (PD) experiencing "off" episodes.	Tier 3	7/1/20
Antineoplastic Agent	Pemazyre (pemigatinib)	Oral (Specialty)	Indicated for the treatment of adults with previously treated, unresectable locally advanced or metastatic cholangiocarcinoma with fibroblast growth factor receptor 2 (FGFR2) fusion or other rearrangement as detected by an FDA-approved test.	Tier 2 P/A	7/1/20
Laxative, Osmotic	Pizensy (lactitol)	Oral Solution	Indicated for the treatment of chronic idiopathic constipation (CIC) in adults.	Tier 3 Step Edit	7/1/20
Antineoplastic Agent	Tukysa (tucatinib)	Oral	Indicated in combination with trastuzumab and capecitabine for treatment of adult patients with advanced unresectable or metastatic HER-2-positive breast cancer, including patients with brain metastases, who have received one or more prior anti-HER2-based regimens in the metastatic setting.	Tier 2 P/A	7/1/20

New BRAND Name Drug Additions to the Formulary

Clinical Category	Brand Name Generic Name	Route	Indications	Formulary Placement	Effective Date
Contraceptive	Twirla (ethinyl estradiol and levonorgestrel)	Oral	Indicated as a method of contraception for use in women of reproductive potential with a BMI < 30 kg/m2 for whom a combined hormonal contraceptive is appropriate.	Tier 3	7/1/20
Immunomodulatory Agent	Zeposia (ozanimod)	Oral (Specialty)	Indicated for the treatment of relapsing forms of multiple sclerosis (MS), to include clinically isolated syndrome, relapsing-remitting disease, and active secondary progressive disease in adults.	Tier 3 P/A	7/1/20

Medical Benefit

Clinical Category	Brand Name Generic Name	Route	Indications	Formulary Placement	Effective Date
Dopamine Antagonist	Barhemsys (amisulpride)	Intravenous	Indicated for the treatment of nausea/vomiting postoperative.	Medical Benefit	7/1/20
Ophthalmic Agent	Durysta (bimatoprost)	Intracameral / Ophthalmic Topical	Indicated for the treatment of glaucoma, intraocular hypertension.	Medical Benefit	7/1/20
Alpha-/Beta-Agonist	Emerphed (ephedrine sulfate)	Intravenous	Indicated for the treatment of hypotension.	Medical Benefit	7/1/20
Antineoplastic Agent	Jelmyto (mitomycin)	Intravenous	Indicated for the treatment of urothelial carcinoma.	Medical Benefit	7/1/20
Antineoplastic Agent	Pemfexy (pemetrexed)	Intravenous	Indicated for the treatment of non-small cell lung cancer, malignant pleural mesothelioma.	Medical Benefit	7/1/20
Antineoplastic Agent	Sarclisa (isatuximab-irfc)	Intravenous	Indicated for the treatment of multiple myeloma.	Medical Benefit	7/1/20
Antihemophilic Agent	Sevenfact (coagulation factor VIIa (recombinant)-jncw)	Intravenous	Indicated for treatment of hemophilia A or B with inhibitors.	Medical Benefit	7/1/20
Antineoplastic Agent	Trodrelvy (sacituzumab govitecan-hziy)	Intravenous	Indicated for treatment of breast cancer.	Medical Benefit	7/1/20
Antimigraine Agent	Vyepti (eptinezumab-jjmr)	Intravenous	Indicated for the treatment of migraine prophylaxis.	Medical Benefit	7/1/20

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.

Proventil HFA	Ultravate Lotion	
Cloderm		
Sklice		
Desonate Gel		
Taclonex Scalp		
Noxafil Oral Suspension		
Vascepa		

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.