



Re: Summary of PDL Changes Effective November 1, 2025

Dear CareSource Member,

Your health care is our priority. We are writing to tell you that on November 1, 2025, CareSource will change its Preferred Drug List (PDL). A PDL is a list of preferred drugs.

THE FOLLOWING MEDICINES WILL BE PREFERRED ON THE PDL EFFECTIVE NOVEMBER 1, 2025.

Brand Name	Generic Name	Dose(s)	Notes
Tadliq	Tadalafil	20mg/5ml oral suspension	Prior authorization update
Atorvaliq	Atorvastatin calcium	20mg/5ml oral suspension	
Briumvi	Ublituximab-xiyy	150mg/6ml injection	Prior authorization update
Pyzchiva	Ustekinumab-ttwe	All strengths of injection	Prior authorization update
Selarsdi	Ustekinumab-aekn	All strengths of injection	Prior authorization update

THE FOLLOWING MEDICINES WILL BE NON-PREFERRED ON THE PDL EFFECTIVE NOVEMBER 1, 2025.

Brand Name	Generic Name	Dose(s)	Notes
Yutrepia	Treprostinil DPI	All strengths of inhalation	Prior authorization update
Lopressor	Metoprolol tartrate	10mg/ml oral solution	Prior authorization update
Tryngolza	Olezarsen	80mg/0.8ml injection	Prior authorization update
Symbravo	Meloxicam/Rizatriptan	10-20mg tablet	Prior authorization update; quantity limit added
Bafiertam DR	Monomethyl fumarate	95mg capsule	Prior authorization update
Imuldosa	Ustekinumab-srlf	All strengths of injection	Prior authorization update
Legselvi	Deuruxolitinib	8mg tablet	Prior authorization update
Nemludio	Nemolizumab-ilto	30mg injection	Prior authorization update

THE FOLLOWING MEDICINES HAVE A CHANGE IN STATUS EFFECTIVE NOVEMBER 1, 2025.

Brand Name	Generic Name	Dose(s)	Notes
Bucapsol	Buspirone	All strengths of capsule	Quantity limit added
Fanapt Titration Pack B	Iloperidone	1/2/6/8mg tablets	Quantity limit added
Fanapt Titration Pack C	Iloperidone	1/2/6mg tablets	Quantity limit added

Brand Name	Generic Name	Dose(s)	Notes
Airsupra	Albuterolsulfate/ Budesonide	90mcg/80mcg inhalation	Prior authorization update
Spiriva Respimat	Tiotropium bromide	1.25mcg inhaler	Step therapy removed
Dupixent	Dupilumab	All strengths of injection	Prior authorization update
Nucala	Mepolizumab	100mg/ml injection	Prior authorization update
Xolair	Omalizumab	All strengths of injection	Prior authorization update
Faserna	Benralizumab	All strengths of injection	Prior authorization update
Tezspire	Tezepelumab-ekko	110mg/ml injection	Prior authorization update
Cinqair	Reslizumab	10mg/ml injection	Prior authorization update
Nurtec ODT	Rimegepant sulfate	75mg tablet	Prior authorization update
Ubrelyv	Ubrogepant	All strengths of tablet	Prior authorization update
Ebglyss	Lebrikizumab-lbkz	250mg/2ml injection	Prior authorization update
Rinvoq	Upadacitinib	All strengths of tablet	Prior authorization update
Tremfya	Guselkumab	All strengths of injection	Prior authorization update
Tyenne	Tocilizumab-aazg	All strengths of injection	Prior authorization update
Otufi	Ustekinumab-aaaz	All strengths of injection	Prior authorization update
Stelara	Ustekinumab	All strengths of injection	Prior authorization update
Steqeyma	Ustekinumab-stba	All strengths of injection	Prior authorization update
	Ustekinumab-aekn (unbranded Selarsdi)	All strengths of injection	Prior authorization update
	Ustekinumab-ttwe (unbranded Pyzchiva)	All strengths of injection	Prior authorization update
Yesintek	Ustekinumab-kfce	All strengths of injection	Prior authorization update
Spravato	Esketamine hydrochloride	28mg nasal spray	Prior authorization update
Zepbound	Tirzepatide	All strengths of injection	Prior authorization update
	Hydroxyzine hydrochloride	10mg/5ml oral syrup	Quantity limit update
	Clonidine hydrochloride IR	All strengths of tablet	Quantity limit update
	Clonidine hydrochloride ER/XR	All strengths of tablet/ patch	Quantity limit update
	Guanfacine hydrochloride ER	All strengths of tablet	Quantity limit update
	Guanfacine hydrochloride IR	All strengths of tablet	Quantity limit added
Siklos	Hydroxyurea	All strengths of tablet	Prior authorization update
Xromi	Hydroxyurea	100mg/ml oral solution	Prior authorization update
Xerese	Acyclovir/ Hydrocortisone	5%/1% topical cream	Removed from Statewide Uniform Preferred Drug List (SUPDL)
AirDuo Digihaler	Fluticasone propionate/salmeterol	All strengths of inhaler	Removed from SUPDL

Brand Name	Generic Name	Dose(s)	Notes
Beconase AQ	Beclomethasone dipropionate monohydrate	42mcg nasal spray	Removed from SUPDL
Patanase	Olopatadine hydrochloride	665mcg nasal spray	Removed from SUPDL
Flovent HFA	Fluticasone propionate inhalation aerosol	All strengths of inhaler	Removed from SUPDL
Flovent Diskus	Fluticasone propionate inhalation powder	All strengths of inhaler	Removed from SUPDL
	Amantadine hydrochloride	100mg capsule	Removed from SUPDL
	Rimantadine hydrochloride	100mg tablet	Removed from SUPDL
Suprax	Cefixime	All strengths of chewable tablet and oral suspension	Removed from SUPDL
Zmax	Azithromycin extended release	27mg/ml suspension	Removed from SUPDL
Loprox	Ciclopirox olamine	8% topical solution kit	Removed from SUPDL
Calan SR	Verapamil hydrochloride, sustained release	All strengths of tablet	Removed from SUPDL

What should you do?

First, talk to your prescriber. There may be other medicines on the CareSource PDL that you can take instead. There are a few ways you and your prescriber can find medicines:

- You can look on our website at **CareSource.com/IN**. On the Members page, go to Tools & Resources, choose your plan and click on “Find My Prescriptions.”
- Or, call Member Services at **1-844-607-2829** (TTY: 1-800-743-3333 or 711).

We are here to help. Member Services is open Monday through Friday, 8 a.m. to 8 p.m., Eastern Time (ET)/7 a.m. to 7 p.m. Central Time (CT).

Sincerely,

CareSource