



Re: Summary of Formulary Changes Effective October 1, 2026

Dear Health Partner,

We are dedicated to partnering with you in the most effective way to manage our members' care. CareSource routinely reviews medications available on the Preferred Drug List (PDL). We encourage you to actively work with your CareSource patients in advance of the effective date above to ensure a smooth transition.

THE FOLLOWING MEDICATIONS WILL BE NON-PREFERRED ON THE PDL EFFECTIVE OCTOBER 1, 2026

Brand Name	Generic Name	Strength(s)	Notes
	Beclomethasone Dipropionate HFA	All strengths	Quantity limit added
DermacinRx Fungizyl AL	Dimethyl Sulfoxide/ Miconazole Nitrate	2%-2%	
Widaplik	Telmisartan/Amlodipine/ Indapamide	All strengths	Step therapy added
Cardamyst nasal spray	Etripamil	70mg	Prior authorization update
Sdamlo powder for oral solution	Amlodipine Besylate	All strengths	Step therapy added
Praluent	Alirocumab	All strengths	Prior authorization update; step therapy update
Icotyde	Icotrokinra Hydrochloride	200mg	Prior authorization update
Selarsdi	Ustekinumab-aekn	All strengths	Medical Benefit - Prior authorization update
Bysanti	Milsaperidone	All strengths	Age limit added; Quantity limit added; Step therapy added
Atoncy	Atomoxetine Hydrochloride	4mg/ml	Step therapy added
	Atomoxetine Hydrochloride	4mg/ml	Step therapy added
Arynta	Lisdexamfetamine Dimesylate	10mg/ml	Step therapy added
	Sitagliptin Phosphate	All strengths	Prior authorization update
	Sitagliptin Phosphate/Metformin Hydrochloride	All strengths	Prior authorization update
	Tofacitinib Citrate tablets	All strengths	Prior authorization update
	Tofacitinib Citrate solution	1mg/ml	Prior authorization update

THE FOLLOWING MEDICATIONS WILL BE PREFERRED ON THE PDL EFFECTIVE OCTOBER 1, 2026

Brand Name	Generic Name	Strength(s)	Notes
Breztri Aerosphere	Budesonide/Glycopyrrolate/ Formoterol Fumarate	All strengths	Step therapy update

Brand Name	Generic Name	Strength(s)	Notes
Ebglyss	Lebrikizumab-lbkz	250mg/2ml	Step therapy update
Starjemza	Ustekinumab-hmny	All strengths	Prior authorization update
Tremfya	Guselkumab	All strengths	
Humalog Kwikpen	Insulin Lispro	200 units/ml	Step therapy added

THE FOLLOWING MEDICATIONS HAVE A CHANGE IN STATUS EFFECTIVE OCTOBER 1, 2026

Brand Name	Generic Name	Strength(s)	Notes
Airduo Respiclick	Fluticasone Propionate/Salmeterol	All Strengths	Removed from Statewide Uniform Preferred Drug List (SUPDL)
Airsupra	Albuterol Sulfate/Budesonide	90-80mcg	Prior authorization update
Spiriva Respimat	Tiotropium Bromide	2.5mcg	Prior authorization update
Dupixent	Dupilumab	All strengths	Prior authorization update; age limit update
Fasenra	Benralizumab	All strengths	Prior authorization update
Sitavig	Acyclovir	50mg	Removed from SUPDL
Brexafemme	Ibrexafungerp Citrate	150mg	Removed from SUPDL
Vfend tablets	Voriconazole	All strengths	Removed from SUPDL
Accuretic	Quinapril/Hydrochlorothiazide	All strengths	Removed from SUPDL
Lotrel	Amlodipine Besylate/Benazepril	All strengths	Removed from SUPDL
Micardis	Telmisartan	All strengths	Removed from SUPDL
Verelan PM	Verapamil Hydrochloride	All strengths	Removed from SUPDL
Camzyos	Mavacamten	All strengths	Prior authorization update
Evkeeza	Evinacumab-dgnb	All strengths	Prior authorization update; step therapy update
Juxtapid	Lomitapide Mesylate	All strengths	Prior authorization update; age limit update; quantity limit update; step therapy update
Leqvio	Inclisiran Sodium	284mg/1.5ml	Prior authorization update; step therapy update
Tryngolza	Olezarsen Sodium	All strengths	Step therapy updated
Onzetra Xsail	Sumatriptan Succinate	11mg	Removed from SUPDL
	Glatiramer Acetate	All strengths	Quantity limit update
Copaxone	Glatiramer Acetate	All strengths	Quantity limit update
Glatopa	Glatiramer Acetate	All strengths	Quantity limit update
Sotyktu	Deucravacitinib	6mg	Prior authorization update
Auvelity titration pack	Dextromethorphan/bupropion	30-45-105mg	Age limit added; quantity limit added
	Clonidine Hydrochloride	0.05mg	Quantity limit added
Strattera	Atomoxetine Hydrochloride	All strengths	Prior authorization update; age limit added
	Atomoxetine Hydrochloride	All strengths	Prior authorization update; age limit added
Baxfendy	Baxdrostat	All Strengths	Prior authorization update

Brand Name	Generic Name	Strength(s)	Notes
Zavesa	Miglustat	100mg	Prior authorization update
Yargesa	Miglustat	100mg	Prior authorization update
	Miglustat	100mg	Prior authorization update
Filspari	Sparsentan	All strengths	Prior authorization update; quantity limit update
Tryngolza	Olezarsen Sodium	All strengths	Prior authorization update; quantity limit update
Tzield	Teplizumab-mzmv	2mg/2ml	Medical Benefit - Prior authorization update; age limit update
Cotempla XR- ODT	Methylphenidate	All strengths	Prior authorization update
	Methylphenidate ER-ODT	All strengths	Prior authorization update
Janumet	Sitagliptin Phosphate/Metformin Hydrochloride	All strengths	Prior authorization update
Januvia	Sitagliptin Phosphate	All strengths	Prior authorization update
Myrbetriq ER	Mirabegron	All strengths	Prior authorization update
	Mirabegron	All strengths	Prior authorization update
Xeljanz IR tablets	Tofacitinib Citrate	All strengths	Prior authorization update
Xeljanz solution	Tofacitinib Citrate	1mg/ml	Prior authorization update
Emtriva	Emtricitabine	200mg	Prior authorization update
	Emtricitabine	200mg	Prior authorization update
Rectiv	Nitroglycerin	0.4% (w/w)	Prior authorization update
	Nitroglycerin ointment	0.4% (w/w)	Prior authorization update
Yuvezzi	Carbachol/Brimonidine Tartrate	2.75%-0.1%	Quantity limit added
Aimovig	Erenumab-aooe	All strengths	Prior authorization update
Ajovy	Fremanezumab-vfrm	225mg/1.5ml	Prior authorization update
Emgality	Galcanezumab-gnlm	All strengths	Prior authorization update
Nurtec-ODT	Rimegepant Sulfate	75mg	Prior authorization update
Qulipta	Atogepant	All strengths	Prior authorization update
Ubrelvy	Ubrogepant	All strengths	Prior authorization update
Vyepti	Eptinezumab-jjmr	100mg/ml	Prior authorization update
Zavezpret nasal spray	Zavegepant Hydrochloride	10mg	Prior authorization update
Repatha	Evolocumab	All strengths	Prior authorization update

What you should know

We know patient care is of the utmost importance to you. We are notifying our members of this change to help ensure their treatment plan is maintained. We have asked our members to contact their prescriber if they have questions.

Additional Resources

For the most up-to-date information, please utilize the [formulary search tools](#) online. To access the complete formulary, visit the Provider Pharmacy pages at [CareSource.com](#). You may find your patient's plan formulary by clicking on:

- Your patient's CareSource plan
- Tools & Resources
- Drug Formulary

We recognize each patient is unique and we appreciate your partnership in making this a successful transition.

For questions, call Provider Services at 1-844-607-2831. We are open Monday through Friday, 8 a.m. to 8 p.m. Eastern Time (ET)/7a.m. to 7 p.m. Central Time (CT).

Thank you for being a CareSource Health Partner.

Sincerely,

CareSource

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