

Re: Summary of Formulary Changes Effective October 1, 2025

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, 2025.

Brand Name	Generic Name	Strength(s)	Notes
Cosentyx	Secukinumab	All strengths of injection	
Siliq	Brodalumab	210mg/1.5ml injection	
Bonsity	Teriparatide	20mcg/dose injection	Prior authorization update
	Teriparatide (Authorized generic Bonsity)	20mcg/dose injection	Prior authorization update
	Teriparatide (Authorized	20mcg/dose injection	Prior authorization update
	generic, generic Forteo)		

We will provide a list of CareSource patients who are taking any medication above, upon your request. Email PharmacyConversionProgram@CareSource.com with your request. Include medication names and your secure fax number. We will fax you a list of patients who have been prescribed these medications.

THE FOLLOWING MEDICATIONS HAVE A CHANGE IN STATUS EFFECTIVE OCTOBER 1, 2025.

Brand Name	Generic Name	Strength(s)	Notes
Khindivi	Hydrocortisone	1mg/ml oral solution	Prior authorization update
Yorvipath	Palopegteriparatide	All strengths of injection	Prior authorization update
Tryvio	Aprocitentan	12.5mg tablet	Prior authorization update
Letairis	Ambrisentan	All strengths of tablet	Prior authorization update
Opsumit	Macitentan	10mg tablet	Prior authorization update
Opsynvi	Macitentan/tadalafil	All strengths of tablet	Prior authorization update
Zepbound	Tirzepatide	All strengths of injection	Prior authorization update
Furoscix	Furosemide	80mg/10ml injection	Prior authorization update
Onapgo	Apomorphine	4.9mg/ml cartridge	Prior authorization update;
	hydrochloride		medical benefit
Chenodal	Chenodiol	250mg tablet	Prior authorization update;
			quantity limit added
Cholbam	Cholic acid	All strengths of capsule	Prior authorization update;
			quantity limit added
Blujepa	Gepotidacin	750mg tablet	Prior authorization update;
			quantity limit added
Gomekli	Mirdametinib	All strengths of capsule	Prior authorization update
		and tablet for oral	
		suspension	
Romvimza	Vimseltinib	All strengths of capsule	Prior authorization update;
			quantity limit added

Brand Name	Generic Name	Strength(s)	Notes
Ctexli	Chenodiol	250mg tablet	Prior authorization update; quantity limit added
lluvien	Fluocinolone acetonide	0.19mg implant	Prior authorization update; medical benefit
Vykat XR	Diazoxide choline	All strengths of tablet	Prior authorization update; quantity limit added
Imaavy	Nipocalimab-aahu	185mg/ml injection	Prior authorization update; medical benefit
Uplizna	Inebilizumab-cdon	100mg/10ml injection	Prior authorization update; medical benefit
Apretude	Cabotegravir	600mg/3ml injection	Prior authorization update; medical benefit
Galafold	Migalastat hydrochloride	123mg capsule	Prior authorization update
Izervay	Avacincaptad pegol	20mg/ml solution	Prior authorization update; medical benefit
Koselugo	Selumetinib sulfate	All strengths of capsule	Prior authorization update
Livmarli	Maralixibat chloride	All strengths of tablet and solution	Prior authorization update; quantity limit added
Mycapssa	Octreotide acetate	20mg capsule	Prior authorization update
Ozurdex	Dexamethasone	0.7mg implant	Prior authorization update; medical benefit
Rystiggo	Rozanolixizumab-noli	All strengths of injection	Prior authorization update; medical benefit
Epysqli	Eculizumab-aagh	300mg/30ml injection	Prior authorization update; medical benefit
Bkemv	Eculizumab-aeeb	300mg/30ml injection	Prior authorization update; medical benefit
Soliris	Eculizumab	300mg/30ml injection	Prior authorization update; medical benefit
Somavert	Pegvisomant	All strengths of injection	Prior authorization update
Susvimo	Ranibizumab	100mg/ml solution	Prior authorization update; medical benefit
Turalio	Pexidartinib hydrochloride	All strengths of capsule	Prior authorization update
Vyvgart	Efgartigimod alfa-fcab	400mg/20ml injection	Prior authorization update
Vyvgart Hytrulo	Efgartigimod alfa and hyaluronidase-qvfc	All strengths of injection	Prior authorization update; quantity limit added
Zilbrysq	Zilucoplan sodium	All strengths of injection	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 <u>formulary search tools</u> 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.

We are here to help with any 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).

Sincerely,

CareSource

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