



Re: Summary of Formulary Changes Effective July 1, 2022

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 Marketplace Drug Formulary. 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 ADDED TO THE FORMULARY EFFECTIVE JULY 1, 2022:

Brand Name	Generic Name	Dose(s)	Notes – If Applicable
DEPO-SUBQ PROVERA SYRINGE	MEDROXYPROGESTERONE ACETATE	104 MG/ 0.65 ML	
INCRELEX VIAL	MECASERMIN	40 MG/4 ML	Prior authorization required

THE FOLLOWING MEDICATIONS WILL BE REMOVED FROM THE FORMULARY EFFECTIVE JULY 1, 2022:

Brand Name	Generic Name	Dose(s)	Notes – If Applicable
NORDITROPIN FLEXPRO	SOMATROPIN	5 MG/1.5; 10 MG/1.5; 15 MG/1.5; 30 MG/3	Preferred formulary alternative is Omnitrope.
KUVAN TABLET, POWDER PACKET	SAPROPTERIN	100 MG, 500 MG	Preferred formulary alternative is generic sapropterin tablets, powder packets.
KEVZARA SYRINGE, PEN	SARILUMAB	150 MG/ 1.14 ML; 200 MG/ 1.14 ML	Preferred formulary alternatives include: Actemra, Enbrel, and others
SILIQ SYRINGE	BRODALUMAB	210 MG/ 1.5 ML	Preferred formulary alternatives include: Stelara, Tremfya, Cosentyx, Enbrel, and others
OLUMIANT TABLET	BARICITINIB	1 MG, 2 MG	Preferred formulary alternatives include: Rinvoq, Xeljanz

- We will provide a list of CareSource patients who are taking any medication above upon your request. Please email your request to PharmacyConversionProgram@CareSource.com. In your request, include the medication names and your secure fax number. We will fax you a list of patients who have been prescribed these medications.
- For existing patients taking the branded products, CareSource will proactively provide prior authorization for the generic alternative. The prior authorization for the generic alternative will match the authorization for the branded product and includes a 30-day extension. To expedite processing, you can request prior authorization electronically on the [CareSource Provider Portal](#).
- For your patient's safety, it's important to cancel the brand product prescription with the pharmacy. Note that the brand product prescriptions are still available through brand medical necessity requests.

THE FOLLOWING MEDICATIONS HAVE A CHANGE IN STATUS EFFECTIVE JULY 1, 2022:

Brand Name	Generic Name	Dose(s)	Notes – If Applicable
REMICADE, AVSOLA, INFLECTRA, RENFLEXIS	INFLIXIMAB		MEDICAL BENEFIT – Inflectra and Renflexis move to preferred; Remicade and Avsola move to non-preferred
RUXIENCE, TRUXIMA, RITUXAN	RITUXIMAB		MEDICAL BENEFIT – Ruxience and Truxima move to preferred; Rituxan move to non-preferred
MVASI, ZIRABEV, AVASTIN, ALYMSYS	BEVACIZUMAB		MEDICAL BENEFIT – Mvasi and Zirabev move to preferred; Avastin and Alymsys move to non- preferred
KANJINTI, TRAZIMERA, HERCEPTIN	TRASTUZUMAB		MEDICAL BENEFIT – Kanjinti and Trazimera move to preferred; Herceptin move to nonpreferred
NEULASTA, UDENYCA, ZIEXTENZO, FULPHILA, NYVEPRIA	PEGFILGRASTIM		MEDICAL BENEFIT – Neulasta and Udenyca move to preferred; Ziextenzo, Fulphila, and

			Nyvepria move to non-preferred
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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 pages at CareSource.com. You may find your patient's plan formulary by:

- Selecting the drop down option under "Show me information for" your state and your patient's type of insurance plan
- Clicking "Tools & Resources"
- Clicking the drug formulary link within the paragraph

We recognize each patient is unique and we appreciate your partnership in making this a successful transition. We are here to help you with any questions. Call the **CareSource Pharmacy Services** Department at **1-800-479-9502**. The Department is open Monday through Friday, 8 a.m. to 5 p.m. Eastern Standard Time (EST). Thank you for being a CareSource health partner.

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