



07/01/2020

Re: Summary of Formulary Changes Effective July 1, 2020

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 JULY 1, 2020.

Brand Name	Generic Name	Strength(s)	Notes
Annovera	Segesterone acetate and ethinyl estradiol	0.013-0.15 mg	
Asparlas	Calaspargase-mknl	3750 units/5 mL	
Nubeqa	Darolutamide	300 mg	
Turalio	Pexidartinib	200 mg	

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 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 you with any questions. Call the **CareSource RX Innovations** Department at **1-800-488-0134**.

The Department is open Monday through Friday, 8 a.m. to 6 p.m. Thank you for being a CareSource health partner.