



P.O. Box 8738, Dayton, OH 45401-8738 | www.CareSource.com

Re: Summary of Formulary Changes Effective April 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.

We will provide a list of CareSource patients who are taking any medication above upon your request. Please send your request via email to the email address 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.

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

Brand Name	Generic Name	Strength(s)	Notes
Aqneursa	levacetylleucine	1 gram granule packet	quantity limit update
Beovu	brovacizumab-dbl	all strengths, medical benefit only	add prior authorization for
Botox		all strengths, medical benefit only	add prior authorization for J0585
Byooviz	ranibizumab-nuna	all strengths, medical benefit only	add prior authorization for Q5124
Catapres	clonidine	all strengths of patches	age and quantity limit update effective April 15, 2025
	clonidine	all strengths of patches	age and quantity limit update effective April 15, 2025
Cimerli	ranibizumab-eqrn	all strengths, medical benefit only	add prior authorization for Q5128
Darzlaex Faspro	daratumumab and	all strengths, medical benefit only	add prior authorization for
Duopa	carbidopa/levodopa	suspension for pump	quantity limit update
Durolane	sodium hyaluronate	all strengths, medical benefit only	add prior authorization for
Dysport	abobotulinumtoxina	all strengths, medical benefit only	add prior authorization for J0586
Ebglyss	lebrikizumab-lbkz	250 mg injection pen and syringe	quantity limit update
Esbriet	pirfenidone	all strengths of tablets and capsules	quantity limit update

Erzofri	paliperidone palmitate	all strengths of injection	quantity limit update effective April 15, 2025
Euflexxa	sodium hyaluronate	all strengths, medical benefit only	add prior authorization for J7323
Gel-One	sodium hyaluronate, cross	all strengths, medical benefit only	add prior authorization for
Gelsyn-3	sodium hyaluronate	all strengths, medical benefit only	add prior authorization for J7328
Genvisc	sodium hyaluronate	all strengths, medical benefit only	add prior authorization for
Hymovis	sodium hyaluronate, modified, non-crosslinked	all strengths, medical benefit only	add prior authorization for J7322
Hyalgan; Supartz; Visco-3	sodium hyaluronate	all strengths, medical benefit only	add prior authorization for J7321
Livdelzi	seladelpar lysine	10mg capsule	quantity limit update
Lucentis	ranibizumab	all strengths, medical benefit only	add prior authorization for
Miplyffa	arimoclomol citrate	all strengths of capsules	quantity limit update
Monovisc	sodium hyaluronate,	all strengths, medical benefit only	add prior authorization for
Myobloc	rimabotulinumtoxinb	all strengths, medical benefit only	add prior authorization for J0587
Nemluvio	nemolizumab	30mg injection pen	quantity limit update
Nucynta IR & ER	tapentadol	all strengths of tablets	not covered and removed from PDL effective Jan 15, 2025
Opipza	aripiprazole	all strengths of film	age and quantity limit update effective April 15, 2025
OrthoVisc	sodium hyaluronate	all strengths, medical benefit only	add prior authorization for J7324
Riabni	rituximab-arrx	all strengths, medical benefit only	add prior authorization for
Rituxan	rituximab	all strengths, medical benefit only	add prior authorization for J9312
Ruxience	rituximab-pvvr	all strengths, medical benefit only	add prior authorization for
Synvisc; Synvisc-One	hylan g-f 20	all strengths, medical benefit only	add prior authorization for J7325
TriVisc	sodium hyaluronate	all strengths, medical benefit only	add prior authorization for
TriLuron	sodium hyaluronate	all strengths, medical benefit only	add prior authorization for J0588
Truxima	rituximab-abbs	all strengths, medical benefit only	add prior authorization for Q5115

Vijoice	alpelisib	all strengths of tablets	quantity limit update
Vyalev	foscarbidopa / foslevodopa	vial for injection	product is medical benefit only; quantity limit update
Xtampza ER	oxycodone myristate	all strengths of sprinkle capsules	not covered and removed from PDL effective Jan 15, 2025
Xeomin	incobotulinumtoxin a	all strengths, medical benefit only	add prior authorization for
Yorvipath	palopegteriparatide	all strengths of injection pen	quantity limit 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. We are here to help you with any questions. Call the CareSource RX Innovations Department at 1-844-607-2831. The department is open Monday through Friday, 8 a.m. to 6 p.m. Eastern Time (ET). Thank you for being a CareSource Health Partner.

Sincerely,

CareSource