



Re: Summary of Formulary Changes Effective April 1, 2025

Dear Health Partner,

We are dedicated to partnering with you to manage our members' care in the most effective way. The CareSource Pharmacy and Therapeutics (P&T) Committee meets regularly to review the Marketplace Drug Formulary and make updates, as necessary.

The P&T Committee met recently to update the Formulary. Please review the tables below to review Formulary changes. You can find additional information about the full Formulary and drug-specific criteria and policies at the end of this notice.

Drugs in this table will be added to the Formulary, effective April 1, 2025.

DRUG NAME	FORMULARY TIER	COVERAGE LIMITS
DABIGATRAN	1	Quantity limit of 2 capsules per day; No prior authorization (PA) or step therapy (ST) required.

Drugs in this table have changed how they are covered. This could include a change in their Formulary tier and/or adding or removing a coverage limit.

DRUG NAME	COVERAGE CHANGE
BIMZELX	Hidradenitis Suppurativa (HS) criteria requires trial and failure of at least two preferred biologic DMARDS.
BRIXADI	Tier 3, Quantity limit removed.
BUNAVAIL FILM [®]	Tier 3, Quantity limit removed.
DESCOVY*	Prior authorization not required, quantity limit of 1 tablet per day.
DULOXETINE	Quantity limit updated to 2 units per day.
NICOTINE PRODUCTS (CHANTIX [®] /TOBACCO CESSATION)*	Quantity limit removed (gum, lozenge, patch, spray); Chantix [®] Tier 3.
SUBLOCADE*	Tier 3, Quantity limit removed.
SUBOXONE (brand and generic films)*	Tier 3, Quantity limit removed.
VIVITROL*	Quantity limit removed.

VYALEV	Benefit updated. Medical benefit with medical necessity review.
ZUBSOLV®*	Tier 3, Quantity limit removed.

*Effective January 1, 2025

Drugs in this table were reviewed by the P&T Committee and have no changes to their Formulary status. Additional clinical updates are noted.

DRUG NAME	NOTES
AQNEURSA	Remains non-formulary pharmacy benefit. Drug-specific policy created.
COBENFY	Remains non-formulary pharmacy benefit. Drug-specific criteria created.
EBGLYSS	Remains non-formulary pharmacy benefit. Medical benefit with medical necessity review. Drug-specific policy created.
ERZOFRI	Billed to medical benefit. Drug-specific policy created.
FABHALTA	Remains non-formulary pharmacy benefit. Drug-specific policy created.
HYMPAVZI	Remains non-formulary pharmacy benefit. Drug-specific policy created.
LIVDELZI	Remains non-formulary pharmacy benefit. Drug-specific policy created.
MIPLYFFA	Remains non-formulary pharmacy benefit. Drug-specific policy created.
NEFFY	Remains non-formulary pharmacy benefit. Drug-specific criteria created.
NEMLUVIO	Remains non-formulary. Drug-specific policy created.
OCREVUS ZUNOVO	Remains non-formulary pharmacy benefit. Drug specific criteria updated for new dosage form.
OHTUVAYRE	Remains non-formulary pharmacy benefit. Drug-specific criteria created.
ONYDA XR	Remains non-formulary pharmacy benefit. Drug specific criteria updated for new dosage form.
VIGAFYDE	Remains non-formulary pharmacy benefit. Drug-specific policy created.
YORVIPATH	Remains non-formulary pharmacy benefit. Drug-specific policy created.

We will provide a list of CareSource members taking any medication upon request. Please email your request to PharmacyConversionProgram@CareSource.com. Include medication names and your secure fax number in your request. We will fax you a list of your patients who were prescribed these medications.

We know patient care is of the utmost importance to you. We sent a letter to our members who may be negatively impacted due to these changes. We recommended they contact their prescriber if they have questions.

Additional Resources

You can review the **full CareSource Marketplace Drug Formulary** on our Provider pages at **CareSource.com**. Select “Drug Formulary” from the Tools & Resources menu, under the Providers drop-down.

The Drug Formulary page also includes a link to our online Formulary Search Tool where you can find **drug coverage criteria** and links to applicable clinical and administrative policies.

We recognize each patient is unique, and we appreciate your partnership in transitioning members who may be impacted by the Formulary changes above. We are here to help with any questions. Call the CareSource Pharmacy Services department at **1-833-230-2101**. The Pharmacy department is open Monday through Friday, 8 a.m. to 5 p.m. Eastern Time (ET).

Thank you for being a CareSource health partner.

Sincerely,

CareSource

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