

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

Re: Summary of PDL Changes Effective December 15, 2024

Dear CareSource Member:

Your health care is our priority. That is why we are writing to tell you that on December 15, 2024, CareSource will change its Preferred Drug List (PDL). A PDL is a list of preferred drugs.

THE FOLLOWING MEDICINES WILL BE PREFERRED ON THE PDL EFFECTIVE DECEMBER 15, 2024.

Brand Name	Generic Name	Dose(s)	Notes
	Aprepitant	125MG-80MG	
		dose pack	
	Bosentan	125mg, 62.5 mg	
		tablets	
Ocrevus	Ocrelizumab/	Injection	Prior authorization
Zunovo	hyaluronidase		update

IF APPLICABLE: THE FOLLOWING MEDICINES WILL BE NON-PREFERRED ON THE PDL EFFECTIVE DECEMBER 15, 2024.

Brand Name	Generic Name	Dose(s)	Notes
Emend Tripack	Aprepitant	125MG-80MG	
•		dose pack	
Tracleer	Bosentan	125mg, 62.5 mg	
		tablets	

IF APPLICABLE: THE FOLLOWING MEDICINES HAVE A CHANGE IN STATUS EFFECTIVE DECEMBER 15, 2024.

Brand Name	Generic Name	Dose(s)	Notes
Benlysta	Belimumab	All strengths for medical benefit only	Add prior authorization for J0490 effective January 1, 2025
Cobenfy	Xanomeline & Trospium chloride	All strengths and dosage forms	Update to age limit, quantity limit, and prior authorization

Iqirvo	Elafibranor	80 mg tablet	Update quantity limit effective Jan 1, 2025
Kisunla	Donanemab	All strengths for medical benefit only	Requires medical benefit billing. Add prior authorization for J0175 effective January 1, 2025
Leqselvi	Deuruxolitinib	8 mg tablet	Update quantity limit effective Jan 1, 2025
Northera	Droxidopa	All strengths of capsule	Update quantity limit effective Jan 1, 2025
Ohtuvayre	Ensifentrine	3mg/ 2.5 mg unit dose ampule	Update quantity limit effective Jan 1, 2025
OnydaXR	Clonidine	0.1 mg/ mL Suspension	Update age limit, quantity limit, and prior authorization
Piasky	Crovalimab-akkz	All strengths for medical benefit only	Requires medical benefit billing. Add prior authorization effective January 1, 2025
Rykindo	Risperidone	All strengths of injection for medical benefit only	Update prior authorization for J2801 effective January 1, 2025
Sofdra	Sofpironium	12.45% Topical gel	Update quantity limit effective Jan 1, 2025

What should you do?

First, talk to your prescriber. There may be other medicines on the CareSource PDL that you can take instead. There are a few ways you and your prescriber can find medicines:

- You can look on our website at CareSource.com. On the Members page, go to Tools & Resources and click on "Find My Prescriptions".
- Or, call our Member Services Department at **1-844-607-2829** (TTY: 1-800-743-3333 or 711).

We are here to help you. The Member Services Department is open Monday through Friday, 8 a.m. to 8 p.m. Eastern Time.

Sincerely,

CareSource

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