

## **PHARMACY FORMULARY UPDATES EFFECTIVE 3/1/2018**

MVP Health Care's Pharmacy & Therapeutics (P&T) Committee has determined that the following drugs, which have been recently approved by the FDA, will require **prior authorization** for at least the first six months following the date they are available on the market. The most current versions of our Formularies and Prior Authorization forms are available at **www.mvphealthcare.com** 

## New Drugs (prior authorization required)

Drug Name Indication		Commercial & Marketplace Tier	Medicare Part D Tier	MVP Medicaid
Yescarta	B-Cell Lymphoma	Medical	Medical (Part B)	Medical
Benznidazole	Chagas disease	Tier 3	Non-formulary	Non-formulary
Calquence	Mantle Cell Lymphoma	Tier 3	Tier 5	Non-formulary
Fasenra	Severe asthma	Medical	Non-formulary	Medical
Rebinyn	Hemophilia B	Medical	Medical (Part B)	Medical
Vyzulta	Glaucoma	Tier 3	Non-formulary	Non-formulary
Hemlibra	Hemophilia A	Tier 3	Part B	Non-formulary
Mepsevii	Sly syndrome	Medical	Medical (Part B)	Medical
Prevymis	Cytomegalovirus prophylaxis	Tier 3	Non-formulary	Non-formulary
Cinvanti	Chemotherapy N/V	Medical	Medical (Part B)	Medical
Ozempic	Type 2 diabetes	Tier 3	Non-formulary	Non-formulary
Odactra	Allergic rhinitis	Tier 3	Non-formulary	Non-formulary
Heplisav-B	Hepatitis B	Medical	Non-formulary	Medical
Juluca	HIV-1	HIV-1 Tier 3 Tier		Non-formulary
Luxturna	Retinal dystrophy	Retinal dystrophy Medical Medical		Medical
Varubi Inj	Chemotherapy N/V	Medical	Medical (Part B)	Medical
Sublocade	Opioid use disorder	Medical	Medical (Part B)	Medical

## For Commercial & Exchange (non-Medicare) business:

Formulary additions/changes								
Drug Name	Tier	Drug Name	Tier					
Carvedilol ER	1(Tier 2 Exchange)	Sildenafil 25mg, 50mg, 100mg <sup>QL</sup>	1(Tier 2 Exchange)					
Tenofovir 300mg	1(Tier 2 Exchange)	Efavirenz	1(Tier 2 Exchange)					

## **Drugs removed from PA for Commercial & Exchange business:**

Zejula	Alunbrig	Rydapt	Xadago	Imfinzi <sup>M</sup>	Intrarosa

\*May be covered under Part B if administered in the office or outpatient setting.

Therapy QL-Quantity Limits apply

M- Medical benefit

<sup>+</sup> Step

If you have any questions with respect to this notice, please contact your Professional Relations Representative.

