

Changes to your plan's pharmacy drug list

In our ongoing effort to assist you in maximizing your health care investment while offering your plan members clinically appropriate prescription therapy, we are announcing changes to the **Standard Control Formulary + Advanced Control Specialty Formulary** effective **July 1, 2024**. A copy of the Performance Drug List is attached for your reference.

The formulary review process focused on many factors, including:

Adding products that have demonstrated enhanced clinical efficacy and/or provide more convenient dosage forms.

Formulary additions

Drug Class	Drug name(s)
Anti-Infectives, Antiretroviral Combination Agents*	CABENUVA^
Antineoplastic Agents, Kinase Inhibitors*	XALKORI ORAL PELLETS (non-preferred)
Cardiovascular, Antilipemics, Omega-3 Fatty Acids*	icosapent ethyl
Endocrine and Metabolic, Contraceptives*	EluRyng, EnilloRing, ethinyl estradiol-etonogestrel, Haloette
Endocrine and Metabolic, Enzyme Replacements*	ELFABRIO^
Gastrointestinal, Miscellaneous*	MOVANTIK

Tier 3 to Tier 2

Drug Class	Drug name(s)
Central Nervous System, Miscellaneous*	RADICAVA
Dermatology, Antiseborrheics*	ZORYVE
Endocrine and Metabolic, Androgens*	XYOSTED
Endocrine and Metabolic, Enzyme Replacements*	GALAFOLD, FABRAZYME

Removing products that may have less convenient dosage forms, more side effects or cost more than other available options on the CVS Caremark® Drug List.

Formulary exclusions

Drug Class	Drug name(s)	Alternative(s)
Anti-Infectives, Antivirals*	XERESE	acyclovir capsule, acyclovir tablet, valacyclovir
Cardiovascular, Antilipemics, Omega-3 Fatty Acids*	VASCEPA**	icosapent ethyl, omega-3 acid ethyl esters
Endocrine and Metabolic, Contraceptives*	NUVARING**	ethinyl estradiol-etonogestrel, ANNOVERA
Endocrine and Metabolic, Gaucher Disease*	VPRIV	CERDELGA, CEREZYME

Tier 2 to Tier 3

Drug Class	Drug name(s)	Alternative(s)
Anti-infectives, Antimalarials*	MALARONE**	atovaquone-proguanil
Anti-Infectives, Antitubercular Agents*	MYAMBUTOL**	ethambutol
Anti-Infectives, Miscellaneous*	CLEOCIN**	clindamycin
	CLEOCIN PEDIATRIC SOLUTION**	clindamycin oral solution
	MACROBID**	nitrofurantoin (except NDC 16571074024)
	VANCOCIN**	vancomycin capsules
Antineoplastic Agents, Hormonal Antineoplastic Agents*	ARIMIDEX**, AROMASIN**, FEMARA**	anastrozole, exemestane, letrozole
Antineoplastic Agents, Alkylating Agents*	ALKERAN**	melphalan
Antineoplastic Agents, Miscellaneous*	HYDREA**	hydroxyurea
Cardiovascular, ACE Inhibitor Combinations*	LOTREL**	amlodipine-benazepril
Cardiovascular, Aldosterone Receptor Antagonists*	INSPIRA**	eplerenone, spironolactone
Cardiovascular, Diuretics*	ALDACTONE**	eplerenone, spironolactone
Cardiovascular, Miscellaneous*	CATAPRES-TTS**	clonidine patch
Cardiovascular, Nitrates*	NITRO-DUR**	isosorbide dinitrate (except isosorbide dinitrate 40 mg), isosorbide mononitrate, isosorbide mononitrate ext-rel, nitroglycerin patch
Central Nervous System, Antianxiety*	ANAFRANIL**	clomipramine, fluoxetine (except fluoxetine tablet 60 mg, fluoxetine tablet [generics for SARAFEM]), fluoxetine delayed-rel, fluvoxamine, fluvoxamine ext-rel, paroxetine, sertraline
Central Nervous System, Antidepressants*	NARDIL**, PARNATE**	phenelzine, tranylcypromine
	NORPRAMIN**, PAMELOR**	amitriptyline, desipramine, doxepin, imipramine hydrochloride, imipramine pamoate, nortriptyline
Central Nervous System, Antiseizure Agents*	TROKENDI XR**	generics, APTIOM, FYCOMPA, OXTELLAR XR, XCOPRI
Central Nervous System, Miscellaneous*	LITHOBID**	lithium carbonate, lithium carbonate ext-rel
Central Nervous System, Musculoskeletal Therapy Agents*	DANTRIUM**	baclofen, dantrolene, tizanidine, ZANAFLEX
Dermatology, Antibiotics*	SILVADENE**	silver sulfadiazine
Dermatology, Corticosteroids*	CLOBEX LOTION**, CLOBEX SHAMPOO**	betamethasone dipropionate augmented gel and ointment, clobetasol cream, foam (except clobetasol emollient foam), gel, lotion, ointment, and shampoo, clobetasol propionate solution, halobetasol cream and ointment
Dermatology, Local Anesthetics*	LIDODERM PATCH**	lidocaine patch
Dermatology, Miscellaneous Skin and Mucous Membrane*	CONDYLOX**	podofilox solution, imiquimod cream 3.75%, 5%, ZYCLARA
Dermatology, Scabicides and Pediculicides*	OVIDE LOTION**	ivermectin, malathion
Endocrine and Metabolic, Antidiabetics, Alpha-Glucosidase Inhibitors*	PRECOSE**	acarbose
Endocrine and Metabolic, Contraceptives*	DEPO-PROVERA**, DEPO-SUBQ	medroxyprogesterone injection
Endocrine and Metabolic, Estrogens*	DIVIGEL**	estradiol
Endocrine and Metabolic, Miscellaneous*	FORTEO**	teriparatide, PROLIA, TYMLOS

Gastrointestinal, Anticholinergics*	LEVSIN**, LEVSIN SL**	dicyclomine
Gastrointestinal, Antidiarrheals*	LOMOTIL**	diphenoxylate-atropine, loperamide
Gastrointestinal, Miscellaneous*	CYTOTEC**	misoprostol
Gastrointestinal, Rectal, Corticosteroids*	ANUSOL-HC**	hydrocortisone cream, PROCTOFOAM-HC
Genitourinary, Vaginal Anti-Infectives*	CLEOCIN CREAM 2%**	clindamycin vaginal cream
Hematologic, Anticoagulants*	ARIXTRA**	enoxaparin, fondaparinux
Hematologic, Miscellaneous*	AGRYLIN**	anagrelide
Immunologic Agents, Disease-Modifying Anti-Rheumatic Drugs (DMARDs)*	ARAVA**, PLAQUENIL**	hydroxychloroquine, leflunomide, methotrexate, sulfasalazine delayed-rel, RASUVO
Immunologic Agents, Immunosuppressants*	IMURAN**	azathioprine
Mouth, Throat, Dental Agents*	EVOXAC**	cevimeline, pilocarpine

Key for table

UPPER CASE = brand-name medication

lower case = generic medication

*Class has existing formulary exclusions

**Multi-source Brand Product

^Previously New to Market Block

Please note: The specialty copay may not be affected by the proposed changes if the plan has a fixed copay for all specialty drugs.

Mailing Process:

As always, notifications will be sent to members who are negatively affected by tier changes* or drug exclusions. Please encourage your members to use the CVS Caremark website, Caremark.com, to view the most current version of the drug list, as well as to review their prescription drug benefit information, request mail service orders and research drug information.

We appreciate the opportunity to serve you and your members' prescription benefit needs. If you have any questions regarding these changes, please do not hesitate to contact me.



*Except in the case of products that have generic equivalents available or are acute therapies.