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 **October 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)
Antineoplastic Agents, Kinase Inhibitors*	MEKINIST SOLUTION, TAFINLAR TABLETS (both non-preferred)
Cardiovascular, Pulmonary Arterial Hypertension*	TYVASO DPI
Hematologic, Thrombocytopenia Agents*	ALVAIZ

Tier 3 to Tier 2

Drug Class	Drug name(s)
Antidepressants, Miscellaneous	ZURZUVAE
Anti-infectives, Antivirals	PAXLOVID
Cardiovascular, Pulmonary Arterial Hypertension*	OPSYNVI, TYVASO SOL

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)
Diabetic Supplies*	KETO-DIASTIX, KETOSTIX	Talk to your doctor
Migraine*	TRUDHESA	eletriptan, naratriptan, rizatriptan, sumatriptan, zolmitriptan, NURTEC ODT, ONZETRA XSAIL, UBRELVY, ZEMBRACE SYMTOUCH

Tier 2 to Tier 3

Drug Class	Drug name(s)	Alternative(s)
Anti-infectives, Antifungals	VFEND**	voriconazole
Anti-infectives, Antiretrovirals	EMTRIVA**	emtricitabine, lamivudine

	FUZEON	Talk to your doctor
Anti-Infectives, Tetracyclines	VIBRAMYCIN SUSP**	doxycycline hyclate, VIBRAMYCIN CAPSULE
Antineoplastic Agents, Alkylating Agents	LEUKERAN, MATULANE, MYLERAN	Talk to your doctor
Antineoplastic Agents, Antimetabolites	TABLOID	Talk to your doctor
	TREXALL	methotrexate, RASUVO
Antineoplastic Agents, Hormonal	LYSODREN	Talk to your doctor
Antineoplastic Agents, Miscellaneous	ZOLINZA	Talk to your doctor
Cardiovascular, Antiarrhythmics	RYTHMOL SR**	propafenone, propafenone ER
Cardiovascular, Beta-Blocker/Diuretic Combinations	ZIAC**	bisoprolol/hydrochlorothiazide, metoprolol/hydrochlorothiazide
Dental Agents	SALAGEN**	pilocarpine
Dermatology, Acne	ONEXTON GEL	generic clindamycin/benzoyl peroxide, AKLIEF, EPIDUO, TWYNEO, WINLEVI
Gastrointestinal, Miscellaneous	UROCIT-K**	potassium citrate ER
	URSO**, URSO FORTE**	ursodiol tablets
Hematologic, Anticoagulants	FRAGMIN	enoxaparin, fondaparinux
Nutritional, Supplements, Vitamins	ROCALTROL**, ZEMPLAR**	calcitriol, doxercalciferol, paricalcitrol
Ophthalmic, Anti-inflammatories	PROLENSA*	bromfenac, diclofenac, ketorolac, ILEVRO

Key for table

UPPER CASE = brand-name medication

lower case = generic medication

*Class has existing formulary exclusions

**Multi-source Brand Product

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.

[^]Previously New to Market Block