

Pharmacy Formulary Updates Effective June 1, 2022

The MVP Health Care® (MVP) Pharmacy and 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 mvphealthcare.com.

New Drugs (prior authorization required)

Drug Name	Indication	Commercial and Marketplace Tier	MVP Medicaid	Medicare Part D tier
Vyvgart™ (efgartigimod alfa-fcab)	The treatment of generalized myasthenia gravis in adults who are anti-acetylcholine receptor antibody positive	Medical	Medical	Medical Part D-Non-formulary
Leqvio® (inclisiran)	The treatment of clinical atherosclerotic cardiovascular disease or heterozygous familial hypercholesterolemia, as an adjunct to diet and maximally tolerated statin therapy, in adults who require additional lowering low-density lipoprotein cholesterol and the treatment of heterozygous familial hypercholesterolemia in adults	Tier 3	Non-Formulary	Non-Formulary
Recorlev® (levoketoconazole)	The treatment of endogenous hypercortisolemia in adults with Cushing's syndrome for whom surgery is not an option or has not been curative	Tier 3	Non-Formulary	Non-Formulary
Adbry™ (tralokinumab-ldrm)	The treatment of moderate-to-severe atopic dermatitis in adults whose disease is not adequately controlled with topical prescription therapies or when those therapies are not advisable	Tier 3	Non-Formulary	Non-Formulary
Kimmtrak® (tebentafusp-tebn)	The treatment of HLA-A*02:01 positive adults with unresectable or metastatic uveal melanoma	Medical	Medical	Medical Part-D, Tier 5 if RxCUI becomes available
Vabysmo® (faricimab-svoa)	The treatment of neovascular (wet) age-related macular degeneration and diabetic macular edema	Medical	Medical	Medical Part-D, Non-formulary
Enjaymo™ (sutimlimab-jome)	The treatment of adults with cold agglutinin disease to decrease the need for red blood cell transfusion due to hemolysis	Medical	Medical	Medical Part-D, Non-formulary
Apretude (cabotegravir)	The pre-exposure prophylaxis to reduce the risk of sexually acquired human immunodeficiency virus-1 infection in at-risk adults and adolescents weighing at least 35 kilograms	Medical	Medical	Medical Part-D,

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				Tier 5 if RxCUI becomes available
Tarpeyo™ (budesonide controlled release)	The reduction of proteinuria in adults with primary IgA nephropathy at risk of rapid disease progression	Tier 3	Non-Formulary	Non-Formulary
Dartisla ODT™ (glycopyrrolate)	The reduction of symptoms of peptic ulcer as an adjunct to treatment	Tier 3	Non-Formulary	Non-Formulary
Soaanz® (torsemide)	The treatment of edema associated with heart failure or renal disease in adults	Tier 3	Non-Formulary	Non-Formulary
Pemfexy™ (pemetrexed)	The initial treatment of patients with locally advanced or metastatic non-squamous, non-small cell lung cancer (NSCLC) and mesothelioma, in combination with cisplatin; as a single agent for the maintenance treatment of patients with locally advanced or metastatic non-squamous NSCLC whose disease has not progressed after 4 cycles of platinum-based first-line chemotherapy; and as a single agent for the treatment of patients with recurrent, metastatic non-squamous NSCLC after prior chemotherapy	Medical	Medical	Medical Part-D, Not Covered
Zimhi™ (naloxone)	The emergency treatment of known or suspected opioid overdose	Tier 3	Non-Formulary	Tier 4 if RxCUI becomes available
Seglentis® (celecoxib/ tramadol)	The management of acute pain in adults that is severe enough to require an opioid analgesic and for which alternative treatments are inadequate	Tier 3	Non-Formulary	Non-Formulary
Cibinqo™ (abrocitinib)	The treatment of adults with refractory, moderate-to-severe atopic dermatitis whose disease is not adequately controlled with other systemic drug products, including biologics, or when use of those therapies is inadvisable	Tier 3	Non-Formulary	Non-Formulary
Fleqsuvy™ Oral Suspension (baclofen)	Treatment of spasticity resulting from multiple sclerosis particularly for the relief of flexor spasms and concomitant pain, clonus, and muscular rigidity; may also be of some value in patients with spinal cord injuries and other spinal cord diseases.	Tier 3	Non-Formulary	Non-Formulary

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New Generics (all brands will be non-formulary, Tier 3)				
Brand Name	Generic Name	Commercial	Medicaid	Exchange
Cuvposa solution	Glycopyrrolate solution	Tier 1	Tier 1	Tier 2
Dexilant	Dexlansoprazole	Tier 1 with quantity limit 2 capsules per day	Tier 1 with quantity limit 2 capsules per day	Tier 2 with quantity limit 2 capsules per day
Restasis	Cyclosporine ophthalmic emulsion	Tier 1	Tier 1	Tier 2
Selzentry	Maraviroc	Brand Tier 2, generic Tier 1	Brand Tier 2, generic Tier 1	Brand Tier 2, generic Tier 2
Deferiprone	Ferriprox	Tier 1	Tier 1	Tier 2
Combigan	Brimidone tartrate-timolol maleate	Tier 1	Tier 1	Tier 2

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