

Pharmaceutical and Therapeutics (P&T) Committee

**P & T Committee Meeting
November 17, 2022**

Location: **Teleconference** (Due to federal PHE Declaration for the COVID-19 Pandemic) –
Open Session portion of meeting

Time: 9:30 a.m. – 4:30 p.m.

Webex Meeting Link:

<https://changehealthcare.webex.com/changehealthcare/j.php?MTID=mcf6e92b54f780383ee5622f5931860bc>

Dial In: 1-844-245-7693

Meeting Number: 2536 780 7825

Meeting Password : A9Gvp7J7UyP

Final Agenda

1. Welcome & Introductions
 - a) Committee Members and Staff
2. Committee Business
 - a) Approval of the open session minutes
 - b) Conflict of Interest Disclosure
3. Update
 - a) Preferred Drug List (PDL) – Reference IME PDL Revision Notifications
 - b) Medicaid Drug Rebate Issues
 - c) Prior Authorization Criteria/Pro-DUR edits – Reference Informational Letters and DUR Recommendations
 - d) Legislation
 - e) IME Updates
4. Public Comment (**See attachment 1 for Conflict of Interest Disclosure**) - *Due to the teleconference format, public comment will be received in **written format only** for Committee review. Comments must be provided in the format noted at Guidelines for Providing Public Comment to the Iowa Medicaid Pharmaceutical and Therapeutics (P&T) Committee and received no later than 4 p.m. CDT November 11, 2021.*
5. Closed Executive Session - *Motion to go into closed session pursuant to Iowa Code section 21.5(1)(a), to review and discuss closed-session items which are required or authorized by federal law to be kept confidential.*
 - a) Approval of the closed session minutes
 - b) Confidential Economic Review of the Iowa Medicaid PDL, Newly Released Drugs, Newly Released Generic Drugs, New Dosage Forms, and Contracts
 - c) Review and discussion of the Confidential Public Comments

RETURN TO OPEN SESSION

6. PDL discussion and deliberation
(See attachment 2 and 3 for order of discussion)
7. Final Recommendations by the P & T Committee on the Iowa Medicaid PDL (Open Session)

8. RDL discussion and deliberation
(See attachment 4 and 5 for order of discussion)
 9. Final Recommendations by the P & T Committee on the Iowa Medicaid RDL (Open Session)
 10. Review of Newly Released Drugs
(See attachment 6 for order of discussion)
 11. Final Recommendations by the P & T Committee on Newly Released Drugs (Open Session)
 12. Review of Newly Released Generic Drugs, Dosage Forms or Strengths
(See attachment 7 for order of discussion)
 13. Final Recommendations by the P & T Committee on Newly Released Generic Drugs, Dosage Forms or Strengths (Open Session)
 14. Staff Presentation
 15. Preview of next meeting
 16. Adjournment
- **Disclaimer: Closed Executive Sessions may be necessary during the deliberation process**

www.IowaMedicaidPDL.com

Next scheduled meeting: April 20, 2023 9:30am - 2:30pm

For more information contact Erin Halverson at ehalver@dhs.state.ia.us or (515) 974-3126

Attachment 1

**Iowa Medicaid Pharmaceutical and Therapeutics (P&T) Committee
Speaker Conflict of Interest Disclosure**

The Iowa Medicaid Pharmaceutical and Therapeutics (P&T) Committee and persons speaking or presenting to the Iowa Medicaid P&T Committee are asked to disclose any financial or other affiliation with organizations that may have a direct or indirect interest in the business in front of the Committee. Those persons speaking or presenting at the P&T Committee meetings are asked to disclose potential conflicts on this form. P&T Committee members disclose potential conflicts each year on a separate form.

A financial interest may include, but is not limited to, being a shareholder in the organization, being on retainer with the organization, having research or honoraria paid by the organization, or receiving other forms of remuneration from an organization. An affiliation may include holding a position on an advisory committee or some other role or benefit to a supporting organization.

The existence of such a financial relationships or affiliation does not necessarily constitute a conflict of interest and will not preclude an individual from participating or addressing the P&T Committee. This policy is intended to openly identify any potential conflicts so that the P&T Committee members and the public are able to form their own judgments.

Your responses below will be read out loud before your presentation to the P&T Committee.

Please check the box of the statement that best applies.

Statement of No Conflicts

I do not have a current or recent (within the last 12 months) financial arrangement or affiliation with any organization that may have a direct interest in the business before the Iowa Medicaid P&T Committee.

Disclosures

I have a financial interest, affiliation or am employed by an organization that may have a direct interest in the business before the Iowa Medicaid P&T Committee

I refuse to state my affiliations

Organization (List additional on the back of the form.)	Role/Relationship (List additional on the back of the form.)

(print name)

(signature)

(date)

Attachment 2

Iowa Medicaid Preferred Drug List

Disclaimer: The Iowa P&T Committee reserves the right to re-evaluate all medications within the same therapeutic category as those on the agenda scheduled to be discussed for the PDL Review, New Drug Review, New Generic Drug Review, and New Dosage Forms Review and vote to change the PDL status of other medications currently on the PDL. It is the responsibility of the drug manufacturer to provide representation, if necessary, at the P&T Committee Meeting when a competitor's product is on the agenda for discussion.

- 1) ACE and Thiazide Combo's
- 2) ACE Inhibitors
- 3) ACE Inhibitors and CA Channel Blockers
- 4) Achondroplasia Treatments
- 5) Acne Products: Isotretinoin
- 6) Agents for Fabry's Disease
- 7) Agents for Gaucher Disease
- 8) Agents for Pheochromocytoma
- 9) Alcohol Deterrents
- 10) Allergenic Extracts
- 11) Alpha-Proteinase Inhibitor
- 12) ALS Drug
- 13) Alzheimer – Cholinomimetics
- 14) Amino Glycosides
- 15) Amyloidosis Treatments
- 16) Analgesics – Misc.
- 17) Anaphylaxis Therapy
- 18) Androgens / Anabolics
- 19) Androgens-Topical
- 20) Anorectal – Misc.
- 21) Anthelmintics
- 22) Anti-Infective Combo's – Misc.
- 23) Antianginals
- 24) Antianginals – Isosorbide Nitrate
- 25) Antiarrhythmics
- 26) Antiasthmatic – 5-Lipoxygenase Inhibitors
- 27) Antiasthmatic – Adrenergic Combos
- 28) Antiasthmatic – Anti-Cholinergics
- 29) Antiasthmatic – Anti-Inflammatory Agents
- 30) Antiasthmatic – Beta-Adrenergics
- 31) Antiasthmatic – Leukotriene Receptor Antagonists
- 32) Antiasthmatic – Misc. Respiratory Inhalants
- 33) Antiasthmatic – Mixed Adrenergics
- 34) Antiasthmatic – Mucolytics
- 35) Antiasthmatic – Nasal Misc.
- 36) Antiasthmatic – Steroid Inhalants
- 37) Antiasthmatic – Xanthines
- 38) Antibiotics – Misc.
- 39) Anti-Cataleptic Agents
- 40) Anticoagulants
- 41) Anticonvulsants
- 42) Antidepressants- MAO Inhibitors
- 43) Antidepressants- Selected SSRI'S
- 44) Antidepressants- Tri-Cyclics
- 45) Antidotes

- 46) Antidotes – Chelating Agents
- 47) Antiemetic – 5-HT₃ Receptor Antagonists/Substance P Neurokinin
- 48) Antiemetic – Anticholinergic / Dopaminergic
- 49) Antiemetic – Tetrahydrocannabinol (THC) Derivatives
- 50) Antifungals – Assorted
- 51) Antihemophilia Factor IX Agents
- 52) Antihemophilia Factor VII Agents
- 53) Antihemophilia Factor VIII Agents
- 54) Antihemophilia Factor VonWillebrand Agents
- 55) Antihemophilia Factor X Agents
- 56) Antihistamines – Non-Sedating
- 57) Antihistamines – Non-Sedating / Decongestants
- 58) Antihistamines – Other
- 59) Antihyperlipidemics
- 60) Antihypertensives – Central
- 61) Anti-IGE & Interleukin Antibodies
- 62) Anti-Inflammatories, Non-NSAID
- 63) Antileprotic
- 64) Antimalarial Agents
- 65) Antimycobacterials / Antituberculosis
- 66) Anti-Parkinsonian Drugs
- 67) Antiprotozoal Agents
- 68) Anti-Psoriatics – Non-Biologicals
- 69) Antipsychotics- Atypicals
- 70) Antipsychotics- Special Atypicals
- 71) Antipsychotics- Typical
- 72) Antispasmodics
- 73) Antispasmodics – Long Acting
- 74) Anti-Thrombocytopenics
- 75) Antithyroid Therapies
- 76) Anxiolytics-Benzodiazepines
- 77) Anxiolytics- Long Acting
- 78) Anxiolytics- Misc.
- 79) ARB Combinations
- 80) ARB/CCB
- 81) ARB/CCB Plus Diuretics
- 82) ARB's
- 83) ARB's and Diuretics
- 84) Arthritis – Misc.
- 85) Artificial Saliva / Stimulants
- 86) Atopic Dermatitis
- 87) Beta Blockers – Alpha / Beta
- 88) Beta Blockers – Cardio Selective
- 89) Beta Blockers – Non-Selective
- 90) Beta Blockers and Diuretic Combo's
- 91) Beta – Lactams / Clavulanate Combo's
- 92) BPH
- 93) Calcium Channel Blockers – Amlodipines
- 94) Calcium Channel Blockers – Diltiazems
- 95) Calcium Channel Blockers – Felodipines
- 96) Calcium Channel Blockers – Isradipines
- 97) Calcium Channel Blockers – Nifedipines
- 98) Calcium Channel Blockers – Nisoldipine
- 99) Calcium Channel Blockers – Verapamils
- 100) Carbapenems
- 101) Cardiac Glycosides
- 102) Carnitine Replenisher – Agents

- 103) CCB / Lipid
- 104) Central Precocious Puberty Agents
- 105) Cephalosporins
- 106) CGRP Inhibitors
- 107) Chelating Agents
- 108) Cholesterol – Bile Sequestrants
- 109) Cholesterol – Fibric Acid Derivatives
- 110) Cholesterol – HMG COA + Absorb Inhibitors
- 111) Cholesterol – HMG COA + Absorb Inhibitors: High Potency Drugs/Combinations
- 112) Cholesterol – HMG COA + Absorb Inhibitors: Low Potency Drugs/Combinations
- 113) Cholinergic
- 114) Compounding Materials
- 115) Contraceptives – Emergency Contraceptives
- 116) Contraceptives – Injectable
- 117) Contraceptives – Monophasic Combination O/C's
- 118) Contraceptives – Multi-Phasic Combinations
- 119) Contraceptives – Patches / Vaginal Products
- 120) Contraceptives – Progestin Only
- 121) Contraceptives – Tri-Phasic Combinations
- 122) Cough / Cold – Antitussive – Expectorant
- 123) Cough / Cold – Systemic Decongestants
- 124) Cox 2 Inhibitors – Selective
- 125) Cushings Disease Treatments
- 126) Cystic Fibrosis Agents
- 127) Cyto-Megalovirus Agents
- 128) Dental Products
- 129) Diabetic – AlphaglucoSIDase
- 130) Diabetic – Insulin
- 131) Diabetic – Insulin Penfills
- 132) Diabetic – Meglitinides
- 133) Diabetic – Non-Insulin Injectables
- 134) Diabetic – Oral Biguanides
- 135) Diabetic – Oral Sulfonylureas
- 136) Diabetic – Other
- 137) Diabetic – Sulfonylurea / Biguanide
- 138) Diabetic – Thiazol
- 139) Diabetic – Thiazol / Biguanide Combo
- 140) Direct Renin Inhibitors
- 141) Diuretics
- 142) Dopamine Receptor Agonists
- 143) Ear
- 144) Electrolytes / NutritionalS
- 145) Endocrine Metabolic Agents
- 146) Endometriosis Agents
- 147) Erythropoeisis Stimulating Agents
- 148) Estrogen Combo's
- 149) Estrogens – Patches
- 150) Estrogens – Tabs
- 151) Fluoroquinolones
- 152) GI – Anti-Flatulents / GI Stimulants
- 153) GI – Antidiarrheal / Antacid – Misc.
- 154) GI – Antiperistaltic Agents
- 155) GI – Digestive Enzymes
- 156) GI – H2-Antagonists
- 157) GI – Inflammatory Bowel Agents
- 158) GI – Irritable Bowel Syndrome Agents
- 159) GI – Misc.

- 160) GI – Misc. Anti-Ulcer
- 161) GI – Prostaglandins
- 162) GI – Proton Pump Inhibitor
- 163) GI – Proton Pump Inhibitor / NSAID Combo
- 164) GI – Ulcer Anti-Infective
- 165) GI, Constipation-IBS-OIC
- 166) Glucocorticoids – Corticotropin
- 167) Glucocorticoids – Mineralocorticoids
- 168) Gout
- 169) Granulocyte CSF
- 170) Growth Hormone
- 171) Heart Failure Agents
- 172) Hemostatic
- 173) Hepatitis B Only
- 174) Hepatitis C Agents
- 175) Hereditary Angioedema Agents
- 176) Hereditary Tyrosinemia Type 1 (HT-1) Treatment – Agents
- 177) Herpes Agents
- 178) Hormone Receptor Modulators
- 179) Hyperparathyroid Treatment – Vitamin D Analogs
- 180) Hyperparathyroid Treatment – Vitamin D Analogs and Calcimimetics
- 181) Idiopathic Pulmonary Fibrosis
- 182) Immune Serums
- 183) Immunosuppressants
- 184) Influenza Agents
- 185) Interferon Gamma
- 186) K Removing Resins
- 187) Lincosamides / Oxazolidinones / Leprostatics
- 188) Lipodystrophy Agents
- 189) Lithium
- 190) Macrolides / Erythromycin's / Ketolides
- 191) Metabolic Modifiers-Lysosomal Storage Disorder Treatments
- 192) Migraine – Ergotamine Combinations
- 193) Migraine – Ergotamine Derivatives
- 194) Migraine – Misc
- 195) Migraine – Selective Serotonin Agonists (5HT) – Injectables
- 196) Migraine – Selective Serotonin Agonists (5HT) – Tabs
- 197) Migraine-Selective Serotonin Agonist-(5HT) Combinations
- 198) Mineralocorticoid – Receptor Antagonists
- 199) Minerals
- 200) Mouth – Anesthetics Topical Oral
- 201) Mouth – Steroids
- 202) Mouth Anti-Infectives
- 203) Mouth Antiseptics
- 204) Mucopolysaccharidosis
- 205) Multiple Sclerosis Agents
- 206) Multiple Sclerosis Agents-Interferons
- 207) Multiple Sclerosis Agents-Non-Interferons
- 208) Muscle Relaxant – Combinations
- 209) Muscle Relaxants
- 210) Muscular Atrophy Agents
- 211) Narcotic – Antagonists
- 212) Narcotics – Misc.
- 213) Narcotics – Selected
- 214) Narcotics – Long Acting
- 215) Nasal Steroid/Antihistamine Combos
- 216) Nasal Steroids

- 217) Neurologics – Misc.
- 218) Nicardipines
- 219) Nicotine Replacement Therapy
- 220) Nitro – Ointment / Cap / CR
- 221) Nitro – Patches
- 222) Nitro – Sublingual / Spray
- 223) NSAIDS
- 224) Op. Antiallergics-Antihistamines
- 225) Op. Antiallergics-Mast Cell Stabilizers
- 226) Op. Antibiotics
- 227) Op. Antiinflammatory / Steroids Opth
- 228) Op. Beta-Blockers
- 229) Op. Carbonic Anhydrase Inhibitors / Combo
- 230) Op. Cycloplegics
- 231) Op. Miotics – Direct Acting
- 232) Op. Misc.
- 233) Op. NSAID's
- 234) Op. Prostaglandins
- 235) Op. Quinolones
- 236) Op. Quinolones-Fourth Generation
- 237) Op. Rho Kinase Inhibitors
- 238) Op. Selective Alpha Adrenergic Agonists
- 239) Opioid Withdrawal Treatments
- 240) Osteoporosis
- 241) Oxytocics
- 242) Parkinsons – Anticholinergics
- 243) Parkinsons – COMT Inhibitors
- 244) Parkinsons – Selected Dopamine Agonists
- 245) Phenylketonuria
- 246) Phosphate Binders
- 247) Phosphodiesterase Inhibitors
- 248) Platelet Aggr. Inhibitors / Combo's – Misc.
- 249) Platelet Aggregation Inhibitors
- 250) Powders
- 251) Pressors
- 252) Progeria Treatments
- 253) Progestins
- 254) Psychotherapeutic Combination
- 255) PTH
- 256) Pulmonary Anti-Hypertensives
- 257) Pulmonary Anti-Hypertensives-Endothelin Receptor Antagonist
- 258) Purine Analog
- 259) Pyruvate Kinase Activators
- 260) Restless Leg Syndrome Agents
- 261) Rheumatoid Arthritis – Non-Biologicals
- 262) RSV Agents
- 263) Sedative / Hypnotics – Barbiturate
- 264) Sedative / Hypnotics – Benzodiazepines
- 265) Sedative / Hypnotics – Non-Benzodiazepines
- 266) Sickle Cell Anemia Agents
- 267) Sinus Node Inhibitors
- 268) SLE Agents
- 269) Smoking Cessation (Oral)
- 270) Somatostatic Agents
- 271) Stimulants
- 272) Stimulants- Amphetamines- Long Acting
- 273) Stimulants- Amphetamines- Short Acting

- 274) Stimulants- Methylphenidate
- 275) Stimulants- Methylphenidate- Long Acting
- 276) Stimulants- Other Stimulants/ Like Stimulants
- 277) Tetracyclines
- 278) Thyroid Hormones
- 279) Tissue Plasminogen Activator
- 280) Topical – Acne Preparations
- 281) Topical – Antibiotic
- 282) Topical – Antifungals
- 283) Topical – Antineoplastics
- 284) Topical – Antipruritics
- 285) Topical – Antiseborrheics
- 286) Topical – Antivirals
- 287) Topical – Astringents / Protectants
- 288) Topical – Burn Products
- 289) Topical – Cauterizing Agents
- 290) Topical – Corticosteroids-High Potency
- 291) Topical – Corticosteroids-Low Potency
- 292) Topical – Corticosteroids-Medium Potency
- 293) Topical – Emollients
- 294) Topical – Enzymes / Keratolytics / Urea
- 295) Topical – Genital Warts
- 296) Topical – Immunomodulators
- 297) Topical – Local Anesthetics
- 298) Topical – Scabicides and Pediculicides
- 299) Topical – Steroid Combinations
- 300) Topical – Steroid Local Anesthetics
- 301) Topical – Tretinoids
- 302) Urea Cycle Disorder – Agents
- 303) Urological – Misc.
- 304) Vaginal – Antifungals
- 305) Vaginal – Antibacterials
- 306) Vaginal – Estrogens
- 307) Vasopressins
- 308) Vitamins
- 309) Vitamins – Misc.

Attachment 3

Iowa Medicaid Preferred Drug List Changes

The below changes are recommended to maximize cost savings to the program, unless otherwise noted:

1. Fluticasone / Salmeterol Aerosol Powder Breath Activated to Preferred.
2. Xolair Prefilled Syringe to Preferred with Conditions.
3. Theo-24 to Non-Preferred.
4. Vimpat Oral Solution to Non-Preferred (grandfather established users with seizure diagnosis).
5. Lacosamide Oral Solution to Preferred.
6. Rixubis to Preferred.
7. Ixinity to Preferred.
8. Idlevion to Non-Preferred (grandfather existing users).
9. Kogenate FS to Non-Preferred (grandfather existing users).
10. Esperoct to Non-Preferred (grandfather existing users).
11. Adynovate to Preferred.
12. Jivi to Preferred.
13. Paliperidone ER to Preferred Step 2.
14. Chlorpromazine to Preferred.
15. Flavoxate to Non-Preferred.
16. Nebivolol to Preferred with Conditions.
17. Byetta to Non-Preferred with Conditions (grandfather existing users).
18. Ozempic to Preferred with Conditions.
19. Dermotic to Preferred.
20. Myfembree to Preferred with Conditions.
21. Clenpiq to Preferred.
22. Suprep to Non-Preferred.
23. Moviprep to Preferred.
24. Clindamycin 300mg Capsules to Preferred.
25. Sumatriptan nasal spray to Preferred with Conditions.
26. Zolmitriptan nasal spray to Non-Preferred with Conditions.
27. Glatopa to Preferred.
28. Glatiramer to Preferred.
29. Rhopressa to Non-Preferred (grandfather existing users).
30. Rocklatan to Non-Preferred (grandfather existing users).
31. Qelbree to Preferred with Conditions.
32. Fluocinolone acetonide topical oil to Preferred.

Attachment 4
Iowa Medicaid Recommended Drug List

Disclaimer: The Iowa P & T Committee reserves the right to re-evaluate all medications within the same therapeutic category as those on the agenda scheduled to be discussed for the PDL Review, New Drug Review, New Generic Drug Review, and New Dosage Forms Review and vote to change the PDL status of other medications currently on the PDL. It is the responsibility of the drug manufacturer to provide representation, if necessary, at the P & T Committee Meeting when a competitor's product is on the agenda for discussion.

- 1) Antineoplastics – Alkylating Agents
- 2) Antineoplastics – Androgen Biosynthesis Inhibitor
- 3) Antineoplastics – Antiadrenals
- 4) Antineoplastics – Antiandrogens
- 5) Antineoplastics – Antiestrogens
- 6) Antineoplastics – Antimetabolites
- 7) Antineoplastics – Aromatase Inhibitors
- 8) Antineoplastics – CLL 17P Deletion
- 9) Antineoplastics – Combinations
- 10) Antineoplastics – Estrogens
- 11) Antineoplastics – Folic Acid Antagonists Rescue Agents
- 12) Antineoplastics – Imidazotetrazines
- 13) Antineoplastics – LHRH Analogs
- 14) Antineoplastics – Misc.
- 15) Antineoplastics – Nitrogen Mustards
- 16) Antineoplastics – Nitrosoureas
- 17) Antineoplastics – PARP Inhibitors
- 18) Antineoplastics – Progestins
- 19) Antineoplastics – Protein-Tyrosine Kinase Inhibitors
- 20) Antineoplastics – Retinoids
- 21) Antineoplastics – Selective Retinoid X Receptor Agonists
- 22) Antineoplastics – Topoisomerase I Inhibitors
- 23) Antiretroviral Boosting Agent- Cytochrome P450 Inhibitor
- 24) Antiretroviral Combinations
- 25) Antiretrovirals – Entry Inhibitors
- 26) Antiretrovirals – Integrase Inhibitors
- 27) Antiretrovirals – Protease Inhibitors
- 28) Antiretrovirals – RTI-Non-Nucleoside Analogues
- 29) Antiretrovirals-RTI-Nucleoside/Nucleotide Analogues

Attachment 5
Recommended Drug List Changes

The below changes are recommended to maximize cost savings to the program:

1. Nexavar to Preferred with Conditions.
2. Descovy to Preferred.

Attachment 6

Newly Released Drugs

Disclaimer: The Iowa P&T Committee reserves the right to re-evaluate all medications within the same therapeutic category as those on the agenda scheduled to be discussed for the PDL Review, New Drug Review, New Generic Drug Review, and New Dosage Forms Review and vote to change the PDL status of other medications currently on the PDL. It is the responsibility of the drug manufacturer to provide representation, if necessary, at the P & T Committee Meeting when a competitor's product is on the agenda for discussion.

1. Camzyos- Recommend status on the PDL as Non-Preferred with Conditions
2. Mounjaro- Recommend status on the PDL as Non-Preferred with Conditions
3. Quviviq- Recommend status on the PDL as Non-Preferred with Conditions
4. Vtama- Recommend status on the PDL as Non-Preferred
5. Winlevi- Recommend status on the PDL as Non-Preferred with Conditions

Attachment 7

Newly Released Generic Drugs, New Dosage Forms, New Drug Names, New Drug Strengths

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NEWLY RELEASED GENERIC DRUGS		
Drug Name	Brand Name/Status on PDL/RDL	PDL/RDL Recommendation
Dabigatran	Pradaxa / Preferred	Non-Preferred with Conditions
Fesoterodine	Toviaz / Non-Preferred	Non-Preferred
Methylphenidate TD Patch	Daytrana / Non-Preferred with Conditions	Non-Preferred with Conditions
Sod Sulfate-Pot Sulf-Mg Sulf Oral Soln	Suprep / Preferred	Preferred
Sorafenib	Nexavar / Preferred with Conditions	Non-Preferred with Conditions
Vilazodone	Viibryd / Non-Preferred with Conditions	Non-Preferred with Conditions

NEW DRUG DOSAGE FORMS/STRENGTHS/COMBINATIONS/BIOSIMILARS		
Adlarity	Donepezil Tablets / Preferred	Non-Preferred with Conditions
Aspruzyo Sprinkle	Ranolazine ER Tablets / Preferred	Non-Preferred with Conditions
Dyanavel XR Chew Tab	Dyanavel XR Susp / Preferred with Conditions	Non-Preferred with Conditions
Tascenso ODT	Gilenya Capsules / Preferred with Conditions	Non-Preferred with Conditions