

# **2025 Formulary Changes**

## **EFFECTIVE DATE: 09/01/2025**

Drug Name	Alternate Drugs and Tier	Change Type	Change Reason
			REMOVAL OF BRAND NAME DRUG
	ELTROMBOPAG OLAMINE 75 MG ORAL		FROM FORMULARY DUE TO
PROMACTA 75 MG	TABLET-5	BRAND DELETION, ADD	ADDITION OF NEW GENERIC
ORAL TABLET		FRF GENERIC	EQUIVALENT
			REMOVAL OF BRAND NAME DRUG
PROMACTA 50 MG	ELTROMBOPAG OLAMINE 50 MG ORAL	BRAND DELETION, ADD	FROM FORMULARY DUE TO ADDITION
ORAL TABLET	TABLET-5	FRF GENERIC	OF NEW GENERIC EQUIVALENT
			REMOVAL OF BRAND NAME DRUG
PROMACTA 12.5 MG	ELTROMBOPAG OLAMINE 12.5 MG	BRAND DELETION, ADD	FROM FORMULARY DUE TO ADDITION
ORAL TABLET	ORAL TABLET-5	FRF GENERIC	OF NEW GENERIC EQUIVALENT
			REMOVAL OF BRAND NAME DRUG
PROMACTA 25 MG	ELTROMBOPAG OLAMINE 25 MG ORAL	BRAND DELETION, ADD	FROM FORMULARY DUE TO ADDITION
ORAL POWD PACK	POWD PACK-5	FRF GENERIC	OF NEW GENERIC EQUIVALENT
			REMOVAL OF BRAND NAME DRUG
PROMACTA 12.5 MG	ELTROMBOPAG OLAMINE 12.5 MG	BRAND DELETION, ADD	FROM FORMULARY DUE TO ADDITION
ORAL POWD PACK	ORAL POWD PACK-5	FRF GENERIC	OF NEW GENERIC EQUIVALENT
			REMOVAL OF BRAND NAME DRUG
COMPLERA 200-25-	EMTRICITABINE-RILPIVIRNE-TENOF	BRAND DELETION, ADD	FROM FORMULARY DUE TO ADDITION
300 ORAL TABLET	200-25-300 ORAL TABLET-5	FRF GENERIC	OF NEW GENERIC EQUIVALENT
			REMOVAL OF BRAND NAME DRUG
PROMACTA 25 MG	ELTROMBOPAG OLAMINE 25 MG ORAL	BRAND DELETION, ADD	FROM FORMULARY DUE TO ADDITION
ORAL TABLET	TABLET-5	FRF GENERIC	OF NEW GENERIC EQUIVALENT

### **EFFECTIVE DATE: 08/01/2025**

Drug Name	Alternate Drugs and Tier	Change Type	Change Reason
APTIOM 600 MG ORAL TABLET	ESLICARBAZEPINE ACETATE 600 MG ORAL TABLET-5	BRAND DELETION, ADD FRF GENERIC	REMOVAL OF BRAND NAME DRUG FROM FORMULARY DUE TO ADDITION OF NEW GENERIC EQUIVALENT
APTIOM 400 MG ORAL TABLET	ESLICARBAZEPINE ACETATE 400 MG ORAL TABLET-5	BRAND DELETION, ADD FRF GENERIC	REMOVAL OF BRAND NAME DRUG FROM FORMULARY DUE TO ADDITION OF NEW GENERIC EQUIVALENT
APTIOM 800 MG ORAL TABLET	ESLICARBAZEPINE ACETATE 800 MG ORAL TABLET-5	BRAND DELETION, ADD FRF GENERIC	REMOVAL OF BRAND NAME DRUG FROM FORMULARY DUE TO ADDITION OF NEW GENERIC EQUIVALENT
JYNARQUE 30 MG- 15MG ORAL TABLET SEQ	TOLVAPTAN 30 MG-15MG ORAL TABLET SEQ-5	BRAND DELETION, ADD FRF GENERIC	REMOVAL OF BRAND NAME DRUG FROM FORMULARY DUE TO ADDITION OF NEW GENERIC EQUIVALENT
JYNARQUE 90 MG- 30MG ORAL TABLET SEQ	TOLVAPTAN 90 MG-30MG ORAL TABLET SEQ-5	BRAND DELETION, ADD FRF GENERIC	REMOVAL OF BRAND NAME DRUG FROM FORMULARY DUE TO ADDITION OF NEW GENERIC EQUIVALENT
JYNARQUE 60 MG- 30MG ORAL TABLET SEQ	TOLVAPTAN 60 MG-30MG ORAL TABLET SEQ-5	BRAND DELETION, ADD FRF GENERIC	REMOVAL OF BRAND NAME DRUG FROM FORMULARY DUE TO ADDITION OF NEW GENERIC EQUIVALENT
JYNARQUE 15 MG- 15MG ORAL TABLET SEQ	TOLVAPTAN 15 MG-15MG ORAL TABLET SEQ-5	BRAND DELETION, ADD FRF GENERIC	REMOVAL OF BRAND NAME DRUG FROM FORMULARY DUE TO ADDITION OF NEW GENERIC EQUIVALENT
JYNARQUE 45 MG- 15MG ORAL TABLET SEQ	TOLVAPTAN 45 MG-15MG ORAL TABLET SEQ-5	BRAND DELETION, ADD FRF GENERIC	REMOVAL OF BRAND NAME DRUG FROM FORMULARY DUE TO ADDITION OF NEW GENERIC EQUIVALENT
APTIOM 200 MG ORAL TABLET		BRAND DELETION, ADD FRF GENERIC	REMOVAL OF BRAND NAME DRUG FROM FORMULARY DUE TO ADDITION OF NEW GENERIC EQUIVALENT

# **EFFECTIVE DATE: 06/01/2025**

Drug Name	Alternate Drugs and Tier	Change Type	Change Reason
			REMOVAL OF BRAND NAME DRUG
PURIXAN 20 MG/ML	MERCAPTOPURINE 20 MG/ML ORAL	BRAND DELETION, ADD	FROM FORMULARY DUE TO ADDITION
ORAL ORAL SUSP	ORAL SUSP-5	FRF GENERIC	OF NEW GENERIC EQUIVALENT

### **EFFECTIVE DATE: 04/01/2025**

Drug Name	Alternate Drugs and Tier	Change Type	<b>Change Reason</b>
TRUSELTIQ 75 MG/DAY ORAL		DELETION OF DRUG FROM	NO LONGER FDA
CAPSULE		FORMULARY	APPROVED
TRUSELTIQ 50 MG/DAY ORAL		DELETION OF DRUG FROM	NO LONGER FDA
CAPSULE		FORMULARY	APPROVED
TRUSELTIQ 100 MG/DAY ORAL		DELETION OF DRUG FROM	NO LONGER FDA
CAPSULE		FORMULARY	APPROVED
			REMOVAL OF BRAND
			NAME DRUG FROM
			FORMULARY DUE TO
		BRAND DELETION, ADD FRF	ADDITION OF NEW
MESNEX 400 MG ORAL TABLET	MESNA 400 MG ORAL TABLET-5	GENERIC	GENERIC EQUIVALENT
TRUSELTIQ 125 MG/DAY ORAL		DELETION OF DRUG FROM	NO LONGER FDA
CAPSULE		FORMULARY	APPROVED

#### **EFFECTIVE DATE: 02/01/2025**

### AFFECTED DRUG NAME / ALTERNATIVE DRUG(S) AND TIER(S)

Drug Name	Alternate Drugs and Tier
SPRYCEL 70 MG ORAL TABLET	DASATINIB 70 MG ORAL TABLET-5
SPRYCEL 80 MG ORAL TABLET	DASATINIB 80 MG ORAL TABLET-5
SPRYCEL 140 MG ORAL TABLET	DASATINIB 140 MG ORAL TABLET-5
SPRYCEL 20 MG ORAL TABLET	DASATINIB 20 MG ORAL TABLET-5
SPRYCEL 50 MG ORAL TABLET	DASATINIB 50 MG ORAL TABLET-5
SPRYCEL 100 MG ORAL TABLET	DASATINIB 100 MG ORAL TABLET-5

#### **CHANGE TYPE**

**BRAND DELETION, ADD FRF GENERIC** 

#### **CHANGE REASON**

REMOVAL OF BRAND NAME DRUG FROM FORMULARY DUE TO ADDITION OF NEW GENERIC EQUIVALENT