

CY2022 Medicare Formulary Changes for 3.1.2022

Name of Affected Drug	Description of Change	Reason for Change	Effective Date
NALOXONE HYDROCHLORIDE 40 MG/ML NASAL SPRAY	ADDITION OF DRUG TO FORMULARY	DRUG ADDED TO CY 2022 FORMULARY REFERENCE FILE ON 1.25.2022; ADDITION TO FORMULARY APPROVED BY CLINICAL STAFF	3.1.2022
EVEROLIMUS 1 MG ORAL TABLET	ADDITION OF DRUG TO FORMULARY	DRUG ADDED TO CY 2022 FORMULARY REFERENCE FILE ON 1.25.2022; ADDITION TO FORMULARY APPROVED BY CLINICAL STAFF	3.1.2022
HYDROXYCHLOROQUINE SULFATE 100 MG ORAL TABLET	ADDITION OF DRUG TO FORMULARY	DRUG ADDED TO CY 2022 FORMULARY REFERENCE FILE ON 1.25.2022; ADDITION TO FORMULARY APPROVED BY CLINICAL STAFF	3.1.2022
HYDROXYCHLOROQUINE SULFATE 300 MG ORAL TABLET	ADDITION OF DRUG TO FORMULARY	DRUG ADDED TO CY 2022 FORMULARY REFERENCE FILE ON 1.25.2022; ADDITION TO FORMULARY APPROVED BY CLINICAL STAFF	3.1.2022
MOBOCERTINIB 40 MG ORAL CAPSULE [EXKIVITY]	ADDITION OF DRUG TO FORMULARY	DRUG ADDED TO CY 2022 FORMULARY REFERENCE FILE ON 1.25.2022; ADDITION TO FORMULARY APPROVED BY CLINICAL STAFF	3.1.2022
SOFOBUVIR 150 MG / VELPATASVIR 37.5 MG ORAL PELLETT [EPLUSA]	ADDITION OF DRUG TO FORMULARY	DRUG ADDED TO CY 2022 FORMULARY REFERENCE FILE ON 1.25.2022; ADDITION TO FORMULARY APPROVED BY CLINICAL STAFF	3.1.2022
SOFOBUVIR 200 MG / VELPATASVIR 50 MG ORAL PELLETT [EPLUSA]	ADDITION OF DRUG TO FORMULARY	DRUG ADDED TO CY 2022 FORMULARY REFERENCE FILE ON 1.25.2022; ADDITION TO FORMULARY APPROVED BY CLINICAL STAFF	3.1.2022
ASCIMINIB 20 MG ORAL TABLET [SCSEMBLIX]	ADDITION OF DRUG TO FORMULARY	DRUG ADDED TO CY 2022 FORMULARY REFERENCE FILE ON 1.25.2022; ADDITION TO FORMULARY APPROVED BY CLINICAL STAFF	3.1.2022
ASCIMINIB 40 MG ORAL TABLET [SCSEMBLIX]	ADDITION OF DRUG TO FORMULARY	DRUG ADDED TO CY 2022 FORMULARY REFERENCE FILE ON 1.25.2022; ADDITION TO FORMULARY APPROVED BY CLINICAL STAFF	3.1.2022

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TOPIRAMATE 25 MG/ML ORAL SOLUTION [EPRONTIA]	ADDITION OF DRUG TO FORMULARY	DRUG ADDED TO CY 2022 FORMULARY REFERENCE FILE ON 1.25.2022; ADDITION TO FORMULARY APPROVED BY CLINICAL STAFF	3.1.2022
1 ML ROPEGINTERFERON ALFA-2B-NJFT 0.5 MG/ML PREFILLED SYRINGE [BESREMI]	ADDITION OF DRUG TO FORMULARY	DRUG ADDED TO CY 2022 FORMULARY REFERENCE FILE ON 1.25.2022; ADDITION TO FORMULARY APPROVED BY CLINICAL STAFF	3.1.2022
EZETIMIBE 10 MG / ROSUVASTATIN 20 MG ORAL TABLET	ADDITION OF DRUG TO FORMULARY	DRUG ADDED TO CY 2022 FORMULARY REFERENCE FILE ON 1.25.2022; ADDITION TO FORMULARY APPROVED BY CLINICAL STAFF	3.1.2022
EZETIMIBE 10 MG / ROSUVASTATIN 5 MG ORAL TABLET	ADDITION OF DRUG TO FORMULARY	DRUG ADDED TO CY 2022 FORMULARY REFERENCE FILE ON 1.25.2022; ADDITION TO FORMULARY APPROVED BY CLINICAL STAFF	3.1.2022
EZETIMIBE 10 MG / ROSUVASTATIN 40 MG ORAL TABLET	ADDITION OF DRUG TO FORMULARY	DRUG ADDED TO CY 2022 FORMULARY REFERENCE FILE ON 1.25.2022; ADDITION TO FORMULARY APPROVED BY CLINICAL STAFF	3.1.2022
EZETIMIBE 10 MG / ROSUVASTATIN 10 MG ORAL TABLET	ADDITION OF DRUG TO FORMULARY	DRUG ADDED TO CY 2022 FORMULARY REFERENCE FILE ON 1.25.2022; ADDITION TO FORMULARY APPROVED BY CLINICAL STAFF	3.1.2022
HYDROXYCHLOROQUINE SULFATE 400 MG ORAL TABLET	ADDITION OF DRUG TO FORMULARY	DRUG ADDED TO CY 2022 FORMULARY REFERENCE FILE ON 1.25.2022; ADDITION TO FORMULARY APPROVED BY CLINICAL STAFF	3.1.2022

CY2021 Medicare Formulary Chances for 2.1.2022

Name of Affected Drug	Description of Change	Reason for Change	Effective Date
NALOXONE HYDROCHLORIDE 40 MG/ML NASAL SPRAY	ADDITION OF DRUG TO FORMULARY	DRUG ADDED TO CY 2021 FORMULARY REFERENCE FILE ON 12.20.2021; ADDITION TO FORMULARY APPROVED BY CLINICAL STAFF	2.1.2022
EVEROLIMUS 1 MG ORAL TABLET	ADDITION OF DRUG TO FORMULARY	DRUG ADDED TO CY 2021 FORMULARY REFERENCE FILE ON 12.20.2021; ADDITION TO FORMULARY APPROVED BY CLINICAL STAFF	2.1.2022
HYDROXYCHLOROQUINE SULFATE 100 MG ORAL TABLET	ADDITION OF DRUG TO FORMULARY	DRUG ADDED TO CY 2021 FORMULARY REFERENCE FILE ON 12.20.2021; ADDITION TO FORMULARY APPROVED BY CLINICAL STAFF	2.1.2022
HYDROXYCHLOROQUINE SULFATE 300 MG ORAL TABLET	ADDITION OF DRUG TO FORMULARY	DRUG ADDED TO CY 2021 FORMULARY REFERENCE FILE ON 12.20.2021; ADDITION TO FORMULARY APPROVED BY CLINICAL STAFF	2.1.2022
MOBOCERTINIB 40 MG ORAL CAPSULE [EXKIVITY]	ADDITION OF DRUG TO FORMULARY	DRUG ADDED TO CY 2021 FORMULARY REFERENCE FILE ON 12.20.2021; ADDITION TO FORMULARY APPROVED BY CLINICAL STAFF	2.1.2022
SOFOSBUVIR 150 MG / VELPATASVIR 37.5 MG ORAL PELLETT [EPCUSA]	ADDITION OF DRUG TO FORMULARY	DRUG ADDED TO CY 2021 FORMULARY REFERENCE FILE ON 12.20.2021; ADDITION TO FORMULARY APPROVED BY CLINICAL STAFF	2.1.2022
SOFOSBUVIR 200 MG / VELPATASVIR 50 MG ORAL PELLETT [EPCUSA]	ADDITION OF DRUG TO FORMULARY	DRUG ADDED TO CY 2021 FORMULARY REFERENCE FILE ON 12.20.2021; ADDITION TO FORMULARY APPROVED BY CLINICAL STAFF	2.1.2022
ASCIMINIB 20 MG ORAL TABLET [SCMBLIX]	ADDITION OF DRUG TO FORMULARY	DRUG ADDED TO CY 2021 FORMULARY REFERENCE FILE ON 12.20.2021; ADDITION TO FORMULARY APPROVED BY CLINICAL STAFF	2.1.2022
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EZETIMIBE 10 MG / ROSUVASTATIN 5 MG ORAL TABLET	ADDITION OF DRUG TO FORMULARY	DRUG ADDED TO CY 2021 FORMULARY REFERENCE FILE ON 12.20.2021; ADDITION TO FORMULARY APPROVED BY CLINICAL STAFF	2.1.2022
EZETIMIBE 10 MG / ROSUVASTATIN 40 MG ORAL TABLET	ADDITION OF DRUG TO FORMULARY	DRUG ADDED TO CY 2021 FORMULARY REFERENCE FILE ON 12.20.2021; ADDITION TO FORMULARY APPROVED BY CLINICAL STAFF	2.1.2022
EZETIMIBE 10 MG / ROSUVASTATIN 10 MG ORAL TABLET	ADDITION OF DRUG TO FORMULARY	DRUG ADDED TO CY 2021 FORMULARY REFERENCE FILE ON 12.20.2021; ADDITION TO FORMULARY APPROVED BY CLINICAL STAFF	2.1.2022
HYDROXYCHLOROQUINE SULFATE 400 MG ORAL TABLET	ADDITION OF DRUG TO FORMULARY	DRUG ADDED TO CY 2021 FORMULARY REFERENCE FILE ON 12.20.2021; ADDITION TO FORMULARY APPROVED BY CLINICAL STAFF	2.1.2022