



MedStar Family Choice

UPDATE to the MEDSTAR FAMILY CHOICE FORMULARY Maryland Health Choice January 2018 Pharmacy and Therapeutics Committee Meeting

Quarterly updates will be available on this Website and more frequently on Rx Navigator.

CHANGES BELOW WILL BECOME EFFECTIVE ON OR AROUND April 1, 2017

Additions:

- Ozempic (semaglutide)
- Depo-Estradiol (estradiol cypionate) for IM injection
- Estradiol Valerate for IM injection (10, 20, and 40 mg/mL)

Additions with Prior Authorization:*

- Fasenra (benralizumab)
- Alunbrig (Brigatinib)
- Endari (L-glutamine oral powder)

Please see the PA Table on the MFC website for details of the requirements for approval and guidance on submission of clinical information

Removals: (for 7/1/2018)

- cetirizine **chewable** (5 and 10 mg chewables)- [cetirizine liquids/syrups and tablets remain on the formulary and are covered]
- tizanidine **capsules** (2, 4, and 6 mg)- [2 and 4 mg tablets remain on the formulary and are covered]
- dihydroergotamine mesylate nasal spray
- calcipotrien cream 0.005%

Removal of Prior Authorization:

- None

Managed Drug Limitations & Step Therapy**

- None

*Details of the Prior Authorization Criteria are on this website in the Prior Authorization Table.

**Details of the Step Therapy Criteria are on this website in the Step Therapy Table.