

This communication should be viewed by:

Facility/Practice staff

Clinical staff

Pharmacy Formulary Updates Effective December 1, 2022

To keep our valued care delivery partners up to date, MVP Health Care® (MVP) is providing you with Pharmacy Formulary Updates Effective December 1, 2022. The 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
Amvuttra™ (vutrisiran)	The treatment of the polyneuropathy of hereditary transthyretin mediated amyloidosis in adults	Medical	Medical	Medical Part D- Non-Formulary
Vivjoa™ (oteseconazole)	The reduction of incidence of recurrent vulvovaginal candidiasis (RVVC) in females with a history of RVVC who are not of reproductive potential	Tier 3	Non-Formulary	Non-Formulary
Aspruzo™ (ranolazine)	The treatment of chronic angina	Tier 3	Non-Formulary	Non-Formulary
Tascenso ODT™ (fingolimod)	The treatment of relapsing forms of multiple sclerosis, to include clinically isolated syndrome, relapsing remitting disease, and active secondary progressive disease, in patients aged 10 to 17 years and weighing up to 40 kg	Tier 3	Non-Formulary	Non-Formulary

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Questions? Contact your MVP Professional Relations Representative or call the MVP Customer Care Center for Provider Services at 1-800-684-9286.



Entadfi™ (finasteride/tadalafil)	Treatment of the signs and symptoms of benign prostatic hyperplasia in men with an enlarged prostate for up to 26 weeks. Use not recommended for >26 weeks because the incremental benefit of tadalafil decreases from 4 weeks until 26 weeks, and the incremental benefit beyond 26 weeks is unknown.	Tier 3	Non-Formulary	Non-Formulary
Zoryve™ (roflumilast)	The treatment of plaque psoriasis in patients aged 2 years and older	Tier 3	Non-Formulary	Non-Formulary

Formulary Updates

Formulary Updates for Commercial and Exchange	
Drug Name	Action
Brand Toviaz	Move to Tier 3 (Effective 1/1/2023)
Taltz, Cimzia, Kevzara, Zeposia, Orencia	Move to NF/Tier 3
Brand Selzentry	Move to Tier 3 (Effective 1/1/2023)
Brand Dexilant	Prior authorization added per Proton Pump Inhibitor Policy (Effective 12/1/2022)

Formulary Updates for Exchange	
Drug Name	Action
Brand Nilandron	Move to Tier 3 (Effective 1/1/2023)
Brand Alkeran	Move to Tier 3 (Effective 1/1/2023)
Brand Welchol	Move to Tier 3 (Effective 1/1/2023)

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