

MVP FASTFAX

News for West Region – Rochester/Buffalo Providers

2017 Commercial/Exchange Formulary Changes

Drug Class/Category	Excluded Drug	Preferred Drugs (NO PA Required)
Anticoagulants	Pradaxa	Eliquis, Xarelto, warfarin
	Savaysa	
Antidepressants	Aplenzin	bupropion ER/XL/SR
	Parnate	tranylcypromine, phenelzine
Anxiety	Ativan	lorazepam, alprazolam, diazepam
Diabetes	Kombiglyze XR	Tradjenta, Januvia, Janumet, Janumet XR, Jentadueto, Jentadueto XR
	Onglyza	
	Oseni	
	Kazano	
	alogliptan	
	alogliptan/metformin	
Erectile Dysfunction (quantity limits still apply)	Cialis 10mg, 20mg (2.5mg & 5mg require prior auth)	Viagra
	Levitra	
	Staxyn	
	Stendra	
Gastrointestinal	Gavilyte-H	Gavilyte-C, Gavilyte-G, Gavilyte-N
	Metozolv ODT	metoclopramide
	Zuplenz	ondansetron, ondansetron ODT
	Lotronex	alosetron
Muscle Spasm	Amrix	cyclobenzaprine, tizanidine
Respiratory	Incruse Ellipta	Spiriva Respimat/Handihaler, Combivent, Atrovent, Advair HFA/Diskus, Asmanex/HFA, Qvar, Symbicort
	Tudorza	
	Alvesco	
	Aerospan	
Seizure	Felbatol	Felbamate
	Mysoline	Primidone
Vitamins	Revesta	Folic acid & vitamin D 50,000U

New clinical edits

Drug	Clinical edit
Xifaxan 550mg	Prior authorization required
Syprine	Prior authorization required
Long acting oral stimulants (i.e. Adderall XR, Concerta, Ritalin LA, Vyvanse)	Quantity limit of 1 capsule per day

Questions? Please contact the Customer Care Center for Provider Services. Representatives are available weekdays from 8:30 a.m. – 5:00 p.m. Eastern Time at 1-800-999-3920.

