



**To:** MaineCare Providers  
**From:** Anne-Marie Toderico, Director of  
Pharmacy  
**Date:** April 7, 2022  
**Re:** PDL Update for **04/08/2022**

## MaineCare PDL Update for April 8, 2022

The following medication(s) have recently been added/changed to the MaineCare PDL as **preferred**:

- Apretude
- Migranal
- Xifaxan 200mg

The following medication(s) have recently been added to the MaineCare PDL as **preferred** and with updated PDL criteria:

- Diclofenac sodium 1% gel has dosing limits, please see dosage consolidation list.

The following medication(s) have been recently added/changed to the MaineCare PDL as **non-preferred** and will require prior authorization.

- Elyxyb
- Leqvio
- Lofena
- Meloxicam Caps
- Skytrofa
- Susvimo
- Tavneos
- Tyrvaya

The following medication(s) have recently been added to the MaineCare PDL as **non-preferred** and with new PDL criteria:

- Adbry: Preferred drugs also indicated for this condition, including topical steroids, cyclosporin AND calcineurin inhibitors must be tried and failed due to lack of efficacy or intolerable side effects before non-preferred drugs will be approved, unless an acceptable clinical exception is offered on the Prior Authorization form, such as the presence of a condition that prevents usage of the preferred drug or a significant potential drug interaction between another drug and the preferred drug(s) exists. Additionally, after trials above approvals would be granted for Mild Atopic Dermatitis: 1. Eucrisa, 2. Opzelura. For Moderate Atopic Dermatitis: 1. Dupixent, 2. Rinvoq. For Moderate/Severe Atopic Dermatitis: 1. Dupixent, 2. Rinvoq Note: If unable to use TCIs then a trial of Eucrisa could be recommended before Dupixent.
- Besremi: PA required to confirm FDA approved indication.
- Eprontia Soln: Initial monotherapy for the treatment of partial-onset or primary generalized tonic-clonic seizures in patients 2 years of age and older. Adjunctive therapy for the treatment of partial-onset seizures, primary generalized tonic-clonic seizures, and seizures associated with Lennox Gastaut

syndrome in patients 2 years of age and older. The preventive treatment of migraine in patients 12 years and older. Will require a step through topiramate.

- Livtency is a substrate of CYP3A4. Coadministration of Livtency® with strong inducers of CYP3A4 is not recommended, except for selected anticonvulsants.
- Recorlev is associated with dose-related QT interval prolongation. QT interval prolongation may lead to life-threatening ventricular dysrhythmias such as Torsades de pointes.
- Scemblix is for the treatment of adult patients with: Philadelphia chromosome-positive chronic myeloid leukemia (Ph+ CML) in chronic phase (CP), previously treated with two or more tyrosine kinase inhibitors (TKIs). PA required to confirm appropriate diagnosis and testing.
- Tezspire is for adult and pediatric patients aged 12 years and older with severe asthma.
- Voxzogo: To increase linear growth in pediatric patients with achondroplasia who are 5 years of age and older with open epiphyses. This indication is approved under accelerated approval based on an improvement in annualized growth velocity. Continued approval for this indication may be contingent upon verification and description of clinical benefit in confirmatory trial(s).
- Vyvgart is for adult patients who are anti-acetylcholine receptor (AChR) antibody positive.
- Amondys 45, Exondys®51 and Vyondys® 53 : The prescriber is, or has consulted with, a neuromuscular disorder specialist AND • The dose does not exceed 30mg/kg once weekly AND • The patient is currently on a stable corticosteroid dose for at least 6 months. Amondys 45, Exondys®51, Vyondys® 53, Note: Initial approval will be granted for 6 months. For re-approval after 6 months, the patient must demonstrate a response to therapy

The following medication(s) have recently been **removed** from the MaineCare PDL as they are no longer available:

- Biotin
- Bunavail
- Entocort Ec Cp24
- Glyset
- Nitrotab
- Nor-Qd Tabs
- Soriatane Caps