



MedStar Family
Choice

DISTRICT OF COLUMBIA

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UPDATE TO THE MEDSTAR FAMILY CHOICE DISTRICT OF COLUMBIA FORMULARY

MedStar Family Choice District of Columbia (MFC-DC) has a Pharmacy and Therapeutics Committee that meets quarterly. During our October/November 2022 meetings, formulary changes were made as listed below for DC Healthy Families and DC Healthcare Alliance. **Bolded** names indicate a brand medication; other listed medications are generic.

THESE CHANGES BECOME EFFECTIVE January 1, 2023 (UNLESS INDICATED OTHERWISE).

Additions:

- Acyclovir ointment - treatment for mucocutaneous herpes simplex virus
- **Aubagio** tablets (teriflunomide) - treatment for multiple sclerosis
- Clotrimazole-betamethasone cream 1-0.05% - treatment for fungal skin infection
- Erlotinib tablets - treatment for some cancers
- Fluticasone propionate HFA inhaler - treatment for asthma, chronic obstructive pulmonary disease (COPD)
- Insulin aspart pen, vials - treatment for diabetes
- Insulin degludec flextouch pen - treatment for diabetes
- Insulin glargine pen, vials - treatment for diabetes
- Insulin lispro pen, vials - treatment for diabetes
- **Novolin** insulin products
- **Repatha** injection (evolocumab) - treatment for high cholesterol
- Rivastigmine patches - acetylcholinesterase inhibitor for dementia, Parkinson's and Alzheimer disease
- **Siliq** injection (brodalumab) - treatment for plaque psoriasis
- Sunitinib tablets - treatment for some cancers
- **Vumerity** capsules (diroximel fumarate) - treatment for multiple sclerosis

Additions with Prior Authorization Requirement: *

- **Caplyta** capsules (lumateperone) - treatment of bipolar disorder, schizophrenia
- **Fiasp** insulin products (insulin aspart) - treatment of diabetes
- **Mounjaro** injection (tirzepatide) - treatment of diabetes
- **Myrbetriq** ER tablets (mirabegron) - treatment of overactive bladder
- **Nurtec** tablets (rimegepant) - prevention and treatment of migraine
- **Oxtellar XR** tablets (oxcarbazepine) - treatment of seizures, trigeminal neuralgia
- **Relyvrio** oral (sodium phenylbutyrate/taurursodiol) - treatment for amyotrophic lateral sclerosis (ALS)
- **Sprycel** tablets (dasatinib) - treatment for some cancers
- **Vemlidy** tablets (tenofovir) - treatment of hepatitis B virus (HBV)

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

Removals:

- **Humalog** insulin products - treatment for diabetes
- **Humulin** insulin products - treatment for diabetes
- **Novolog** insulin products - treatment for diabetes
- **Semglee** insulin products (branded generic) - treatment for diabetes
- **Tresiba FlexTouch** pen (insulin degludec) - treatment for diabetes

Removal of Prior Authorization Requirement:

- Glatiramer acetate 40 mg/mL syringes - treatment for multiple sclerosis

Managed Drug Limitations & Step Therapy**

- NONE

Drug Formulary updates are also available on the MFC-DC Website at [MedStarFamilyChoiceDC.com/providers/pharmacy](https://www.MedStarFamilyChoiceDC.com/providers/pharmacy).

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

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

**It's how we
treat people.**