

## BSWHP Group Value and Group Choice Formulary

### BSWHP Pharmacy and Therapeutics Committee Updates

March 2025

#### 2025 MONTHLY FORMULARY CHANGES

The changes below are reflective of the Month/Year BSWHP P&T Committee decisions.

Therapeutic Class	Medication	Group Choice Formulary Changes	Group Value 6Tier Formulary Changes	Group Value 7Tier Formulary Changes	Effective Date
Antineoplastic Agent	<b>Romvimza capsules</b> (vimseltinib)	Tier 5 SPB PA	Tier 5 SPB PA	Tier 6 SPB PA	06/01/2025
Antineoplastic Agent	<b>Gomekli capsules</b> (mirdametinib)	Tier 5 SPB PA	Tier 5 SPB PA	Tier 6 SPB PA	06/01/2025

#### YEAR-TO-DATE FORMULARY GENERIC RELEASES

(Generic drug is available at copay listed once drug is available on the market)

Therapeutic Class	Medication	Group Choice Formulary Changes	Group Value 6Tier Formulary Changes	Group Value 7Tier Formulary Changes	Effective Date
Cardiac Drug	<b>Ivabradine</b> (Corlanor)	Tier 1 PG	Tier 1 PG	Tier 2 PG	01/24/2025
Antineoplastic Agent	<b>Mercaptopurine Suspension</b> (Purixan)	Tier 6 SNPB	Tier 6 SNPB	Tier 7 SNPB	03/07/2025
Anticoagulant	<b>Rivaroxaban Tablets</b> (Xarelto)	Tier 3 PB QL	Tier 3 PB QL	Tier 4 PB QL	03/07/2025

#### Key

PA= Prior Authorization; AL= Age Limit; ST= Step Therapy; QL=Quantity Limit; PV = Preventive drugs; NF=Non-formulary; SF=Split Fill; PG = Preferred Generic; NPG=Non-Preferred Generic; PB = Preferred Brand; NPB = Non-Preferred Brand; SPG=Specialty Preferred Generic; SPB=Specialty Preferred Brand; SNPB=Specialty Non-Preferred Brand

-Drugs may be subject to coverage requirements or limits such as prior authorization. Refer to your formulary or plan documents for additional information. This list does not guarantee coverage.

BSWHP Provider Formulary Updates 2025

### YEAR-TO-DATE FORMULARY BSWHP FORMULARY CHANGES

The changes below are reflective of the Month/Year BSWHP P&T Committee decisions.

Therapeutic Class	Medication	Group Choice Formulary Changes	Group Value 6-Tier Formulary Changes	Group Value 7-Tier Formulary Changes	Effective Date
<b>Antineoplastic Agent</b>	<b>Ensacove</b> (ensartinib)	Tier 5 SPB PA	Tier 5 SPB PA	Tier 6 SPB PA	05/01/2025
<b>Antineoplastic Agent</b>	<b>Itovebi</b> (inavolisib)	Tier 5 SPB PA	Tier 5 SPB PA	Tier 6 SPB PA	03/01/2025
<b>Antineoplastic Agent</b>	<b>Revuforj</b> (revumenib)	Tier 5 SPB PA	Tier 5 SPB PA	Tier 6 SPB PA	03/01/2025
<b>Antineoplastic Agent</b>	<b>Gleostine capsules</b>	PA Added	PA Added	PA Added	01/01/2025
<b>Bowel Preps</b>	<b>All Drugs</b>	QL Added	QL Added	QL Added	01/01/2025
<b>Smoking Cessation</b>	<b>All Drugs</b>	QL Added	QL Added	QL Added	01/01/2025
<b>Vaccine</b>	<b>MResvia</b>	Tier 3 NPB AL, ACA	Tier 3 NPB AL, ACA	Tier 4 NPB AL, ACA	01/01/2025
<b>Vaccine</b>	<b>Jynneos</b>	Tier 3 NPB AL, ACA	Tier 3 NPB AL, ACA	Tier 4 NPB AL, ACA	01/01/2025

Therapeutic Class	Medication	Group Choice Formulary Changes	Group Value 6-Tier Formulary Changes	Group Value 7-Tier Formulary Changes	Effective Date
Immunological Agent	Adalimumab-adbm kit	Non Formulary	Non Formulary	Non Formulary	01/01/2025
Antineoplastic and Adjunctive Therapeutic	Scemblix 100mg tablets	Tier 5 SPB PA	Tier 5 SPB PA	Tier 6 SPB PA	01/01/2025
Immunomodulatory Agent	Adbry injection	Tier 5 SPB PA	Tier 5 SPB PA	Tier 6 SPB PA	01/01/2025
Antineoplastic and Adjunctive Therapeutic	Torpenz tablets	Non Formulary	Non Formulary	Non Formulary	01/01/2025
Analgesic Anti-Inflammatory	Otezla tablets	Tier 4 SPG	Tier 4 SPG	Tier 5 SPG	01/01/2025
Antineoplastic and Adjunctive Therapeutic	Retevmo tablets	Tier 4 SPG	Tier 4 SPG	Tier 5 SPG	01/01/2025
Vaccine	Flumist nasal liquid 202425	Tier 4 SPG	Tier 4 SPG	Tier 5 SPG	01/01/2025
Ophthalmic Agent	Cyclosporine Emulsion 0.05% Ophthalmic	Tier 1 PG	Tier 1 PG	Tier 1 PG	01/01/2025
Caloric Agent Amino Acid	PKU Golike bar	Tier 2 PB	Tier 2 PB	Tier 3 PB	01/01/2025
Antineoplastic and Adjunctive Therapeutic	Truqap pak	Tier 5 SPB PA	Tier 5 SPB PA	Tier 6 SPB PA	01/01/2025
Oncology Agent	Itovebi tablets	Tier 5 SPB PA	Tier 5 SPB PA	Tier 6 SPB PA	01/01/2025

Therapeutic Class	Medication	Group Choice Formulary Changes	Group Value 6-Tier Formulary Changes	Group Value 7-Tier Formulary Changes	Effective Date
Antineoplastic and Adjunctive Therapeutic	Ojemda	Tier 5 SPB PA	Tier 5 SPB PA	Tier 6 SPB PA	01/01/2025
Antineoplastic and Adjunctive Therapeutic	Xeloda	Tier 5 SPB PA	Tier 5 SPB PA	Tier 6 SPB PA	01/01/2025
Antineoplastic and Adjunctive Therapeutic	Fruzaqla capsules	Tier 5 SPB PA	Tier 5 SPB PA	Tier 6 SPB PA	01/01/2025
Antineoplastic and Adjunctive Therapeutic	Ogsiveo tablets	Tier 5 SPB PA	Tier 5 SPB PA	Tier 6 SPB PA	01/01/2025
Caloric Agent	PKU Sphere liquid Next 15	Tier 2 PB	Tier 2 PB	Tier 3 PB	01/01/2025
Contraceptive Agent	Opill	Tier 2 PB ACA	Tier 2 PB ACA	Tier 3 PB ACA	01/01/2025
Antiretroviral	Apretude	Tier 3 NPB ACA	Tier 3 NPB ACA	Tier 4 NPB ACA	01/01/2025

Therapeutic Class	Medication	Group Choice Formulary Changes	Group Value 6-Tier Formulary Changes	Group Value 7-Tier Formulary Changes	Effective Date
Antiarrhythmic	quinidine gluconate 324mg ER tablets	Non Formulary	Non Formulary	Non Formulary	01/01/2025
Antiarrhythmic	quinidine sulfate 200mg, 300mg tablets	Non Formulary	Non Formulary	Non Formulary	01/01/2025
Nitrate and Nitrite	isosorbide dinitrate 40mg tablets	Non Formulary	Non Formulary	Non Formulary	01/01/2025
Antineoplastic Agents	Voranigo (vorasidenib)	Tier 5 SPB PA	Tier 5 SPB PA	Tier 6 SPB PA	01/01/2025
Dermatological Agent	Podcon 25 solution	Tier 2 PB	Tier 2 PB	Tier 3 PB	01/01/2025
Multivitamin Preparation	Quflora pediatric chewable 1mg	Tier 3 NPB	Tier 3 NPB	Tier 4 NPB	01/01/2025
Anticonvulsant	felbamate 600/5mL Suspension	Tier 3 NPB	Tier 3 NPB	Tier 4 NPB	01/01/2025
Azole Antifungal	posaconazole 100mg DR tablets	Tier 3 NPB	Tier 3 NPB	Tier 4 NPB	01/01/2025

Therapeutic Class	Medication	Group Choice Formulary Changes	Group Value 6-Tier Formulary Changes	Group Value 7-Tier Formulary Changes	Effective Date
<b>GABA Mediated Anticonvulsant</b>	<b>pregabalin 20mg/mL suspension</b>	Tier 3 NPB	Tier 3 NPB	Tier 4 NPB	01/01/2025
<b>Phosphate Removing Agent</b>	<b>Sevelamer hcl 400mg tablets</b>	Tier 3 NPB	Tier 3 NPB	Tier 4 NPB	01/01/2025
<b>Antitussive</b>	<b>Tusnel C syrup</b> (pseudoephedrine/ Codeine/ guaifenesin)	Tier 3 NPB	Tier 3 NPB	Tier 4 NPB	01/01/2025
<b>Tumor Necrosis Factor Inhibitor</b>	<b>Cimzia</b> (certolizumab)	Tier 6 SNPB	Tier 6 SNPB	Tier 7 SNPB	01/01/2025
<b>Tumor Necrosis Factor Inhibitor</b>	<b>Adalimumab-aaty kit</b> <b>20/0.2mL,</b> <b>40/0.4mL</b> <b>80/0.8mL</b>	Tier 4 SPG	Tier 4 SPG	Tier 5 SPG	01/01/2025
<b>Tumor Necrosis Factor Inhibitor</b>	<b>Simlandi</b> (adalimumab-ryvk)	Tier 4 SPG	Tier 4 SPG	Tier 5 SPG	01/01/2025
<b>Interleukin Mediated Agent</b>	<b>Cosentyx</b> (certolizumab)	Non Formulary	Non Formulary	Non Formulary	01/01/2025
<b>Incretin Mimetics</b>	<b>Bydureon</b> (exenatide microspheres)	Non Formulary	Non Formulary	Non Formulary	01/01/2025
<b>Incretin Mimetics</b>	<b>Victoza</b> (liraglutide)	Non Formulary	Non Formulary	Non Formulary	01/01/2025
<b>Incretin Mimetics</b>	<b>Byetta</b> (exenatide)	Non Formulary	Non Formulary	Non Formulary	01/01/2025
<b>Calcium Channel Blocker</b>	<b>verapamil HCL capsules ER 24 HR 300mg</b>	Tier 2 PB	Tier 2 PB	Tier 3 PB	01/01/2025
<b>Antibacterial</b>	<b>ciprofloxacin 0.2% otic solution</b>	Tier 3 NPB	Tier 3 NPB	Tier 4 NPB	01/01/2025

Therapeutic Class	Medication	Group Choice Formulary Changes	Group Value 6-Tier Formulary Changes	Group Value 7-Tier Formulary Changes	Effective Date
Antipruritic and Local Anesthetic	Hydrocortisone acetate 1% pramoxine 1% cream	Tier 3 NPB	Tier 3 NPB	Tier 4 NPB	01/01/2025
Monoamine Oxidase Inhibitor	Phenelzine sulfate 15mg tablets	Tier 3 NPB	Tier 3 NPB	Tier 4 NPB	01/01/2025
Mydriatics	isopto atropine 1%	Tier 4 SPG	Tier 4 SPG	Tier 5 SPG	01/01/2025
Interleukin Mediated Agent Misc.	Kevzara (sarilumab) injection	Tier 6 SNPB	Tier 6 SNPB	Tier 7 SNPB	01/01/2025
Janus Kinase Inhibitor	Sotyktu (deucravacitinib) tablet	Tier 6 SNPB	Tier 6 SNPB	Tier 7 SNPB	01/01/2025
Interferon	Rebif (interferon beta1a/ albumin) injection	Tier 5 SPB PA	Tier 5 SPB PA	Tier 6 SPB PA	01/01/2025
Anticystine Agent	Cystagon (cystemine bitartrate) capsules	Tier 3 NPB	Tier 3 NPB	Tier 4 NPB	01/01/2025
Calcitonin Gene Related Peptide Antagonist	Ajovy (fremanezumab-vfrm) injection	Tier 2 PB	Tier 2 PB	Tier 3 PB	01/01/2025
Interleukin Mediated Agent	Actemra/ Actemra Actpen (tocilizumab) injection	Tier 5 SPB PA	Tier 5 SPB PA	Tier 6 SPB PA	01/01/2025

Therapeutic Class	Medication	Group Choice Formulary Changes	Group Value 6-Tier Formulary Changes	Group Value 7-Tier Formulary Changes	Effective Date
<b>Interleukin Mediated Agent</b>	<b>Taltz</b> (ixekizumab) <b>Injection</b>	Tier 5 SPB PA	Tier 5 SPB PA	Tier 6 SPB PA	01/01/2025
<b>Tumor Necrosis Factor Inhibitor, Misc.</b>	<b>Simponi</b> (golimumab) 50mg injection	Tier 6 SNPB	Tier 6 SNPB	Tier 7 SNPB	01/01/2025
<b>Cardiovascular Agents</b>	<b>Entresto</b> (sacubitril/ valsartan)	Tier 2 PB	Tier 2 PB	Tier 3 PB	01/01/2025

Scott and White Health Plan dba Baylor Scott & White Health Plan offers HMO products and serves as a third-party administrator for self-funded, employer-sponsored plans. Scott & White Care Plans dba Baylor Scott & White Care Plan offers HMO products. Baylor Scott & White Insurance Company offers EPO and PPO products and serves as a third-party administrator for self-funded, employer-sponsored plans. Baylor Scott & White Care Plan and Baylor Scott & White Insurance Company are wholly owned subsidiaries of Scott and White Health Plan. These companies are referred to collectively in this document as Baylor Scott & White Health Plan.