

This provides notice of changes being made to the Michigan Preferred Drug List (PDL)/ Single PDL effective May 1, 2025

New Drugs Added to the PDL

- 1. Crexont (carbidopa/levodopa) extended-release capsules** - added to the PDL class: Anti-Parkinson's Agents- Other as non-preferred with the additional medication-specific criteria:
 - Patient is 18 years or older; **AND**
 - Prescribed by or in consultation with a neurologist
 - Length of approval: Up to 1 year
- 2. Ebglyss (lebrikizumab-lbkz) pen/syringe** – added to the PDL class: Oral Hypoglycemics - Combinations as non-preferred with additional medication-specific criteria:
 - Diagnosis of moderate to severe atopic dermatitis; **AND**
 - Patient is 12 years of age or older; **AND**
 - Patient weighs at least 40 kg (88 lbs)
 - Quantity Limit: 1 pen (2mL) per 28-day days (special allowance for initial and subsequent induction fills)
 - Length of approval: 6 months
- 3. Neffy (epinephrine) nasal spray** - added to the PDL class: Epinephrine Self-Administered as non-preferred with additional medication-specific criteria:
 - Therapeutic failure or contraindication to the use of a preferred medication; **AND**
 - Patient weighs at least 30kg
 - Quantity limit: 4 sprays (2 pkgs) per fill
 - Length of approval: 1 year
- 4. Nemluvio (nemolizumab-ilto) pen** - added to the PDL class: Immunomodulators – Agents for Atopic Dermatitis and new PDL class: Immunomodulators – Agents to Treat Prurigo Nodularis as non-preferred with additional medication-specific criteria:

Atopic Dermatitis:

Initial

- Diagnosis of moderate to severe atopic dermatitis; **AND**
- Patient is 12 years of age or older
- Quantity Limit: 1 pen (30mg) per 28 days (special allowance of 2 pens for loading dose)
- Length of approval: 6 months

Renewal

- Documentation submitted demonstrating a positive response to therapy.
 - Prescriber attests the patient has achieved clear or almost clear skin, and in accordance with the product label, the patient will be transitioned to a dosage of 1 pen (30 mg) every 8 weeks. *NOTE: renewal PA will limit dosage accordingly; OR*
 - Prescriber attests the patient has not achieved clear or almost clear skin yet but has had a positive response to therapy. Prescriber is requesting continuation of dosage of 1 pen (30 mg) every 4 weeks.
- Length of renewal: 6 months

Prurigo Nodularis:

- Diagnosis for prurigo nodularis; **AND**
- Patient is 18 years of age or older; **AND**
- Prescribed by or in consultation with a dermatologist, allergist or immunologist
- Quantity Limit: 1 pen (30mg) per 28 days (special allowance of 2 pens for loading dose and patients weighing ≥ 90 kg)
- Length of approval: 1 year

5. **Vyalev (foslevodopa and foscarbidopa) vials** - added to the PDL class: Anti-Parkinson's Agents- Other as non-preferred with the additional medication-specific criteria:
- Patient is 18 years of age or older; **AND**
 - Diagnosis of Parkinson's disease that is levodopa-responsive; **AND**
 - Prescribed by or in consultation with a neurologist; **AND**
 - Prescriber attests that the patient is experiencing persistent motor fluctuations with a minimum of 2.5 hours of "off" time per day despite optimized carbidopa/levodopa therapy
 - Length of approval: Up to 1 year

PDL Class Category: Cardiovascular Classes

1. **Angiotensin-II Receptor Neprilysin Inhibitors (ARNIs)**

- Move only the Entresto (sacubitril/valsartan) Sprinkles to non-preferred with medication-specific criteria to allow PDL bypass if patient is unable to swallow tablets.
- Entresto (tablets) would remain PDL preferred.

2. **Beta Blockers**

- Move bisoprolol tablets to preferred
- Move Bystolic (nebivolol) tablets to non-preferred
- Move carvedilol ER tablets to non-preferred – grandfather existing members for 90 days to allow transition
- Move nadolol tablets to preferred
- Move Hemangeol (propranolol) oral solution to preferred with max age edit of 1 year

3. **Calcium Channel Blockers-Dihydropyridine**

- Move Norliqva (amlodipine) oral solution to preferred with existing clinical PA

4. **Lipotropics: Statins**

- Move ezetimibe/simvastatin tablets (generic for Vytorin) to preferred

5. **Cardiovascular Class Criteria Review**

- **ARNIs:** Entresto Sprinkles (sacubitril/valsartan) – add medication-specific criteria to allow PDL bypass if patient is unable to swallow.
- **Beta Blockers:** Hemangeol (propranolol) oral solution – add Patient age < 1 year

PDL Class Category: Ophthalmic Classes

1. **Glaucoma: Carbonic Anhydrase Inhibitors**

- Move Azopt (brinzolamide) eye drops to non-preferred
- Move brinzolamide eye drops (generic for Azopt) to preferred

2. **Ophthalmic Anti-Inflammatory/Immunomodulator**

- Move only Restasis Multidose drops (cyclosporine) to non-preferred.
- Restasis Single-Use to remain preferred.

Brand Preferred Products (Brand over Generic) Changes:

1. **Remove** Azopt (brinzolamide)