

## Standard Control Formulary™ April 2024 Updates

Removals	Add-Backs
4	2

## **Removals**

Drug Class	Removed Product(s)	Formulary Options
Antineoplastic Agents, Kinase Inhibitors*	IMBRUVICA	BRUKINSA, CALQUENCE
Autoimmune Agents*	HUMIRA	ADALIMUMAB-ADAZ, COSENTYX, ENBREL, HYRIMOZ, OTEZLA, RINVOQ, SKYRIZI SUBCUTANEOUS, STELARA SUBCUTANEOUS, TREMFYA, XELJANZ, XELJANZ XR
Phosphate Binder Agents*	VELPHORO	calcium acetate, sevelamer carbonate, AURYXIA
Respiratory, Beta Agonists, Short-Acting*	albuterol sulfate aerosol (NDC 00093317431)	albuterol sulfate aerosol (except NDCs 00093317431, 66993001968), levalbuterol tartrate aerosol

## **Add-Backs**

Drug Class	Product(s) Added	
Nutritional Supplements	VITALIPID N INFANT, VITLIPID N ADULT, VITLIPID N INFANT (all non-preferred)	

This chart contains references to brand-name prescription drugs that are trademarks or registered trademarks of pharmaceutical manufacturers not affiliated with CVS Health and/or one of its affiliates.

Information listed is current as of January 31, 2024 and subject to change.

<sup>\*</sup>Class has existing formulary exclusions \*\*Multi-source Brand Product