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# Pharmacy Benefits Management- Medical Advisory Panel- VISN Pharmacist Executives E<sub>z</sub> - MINUTES

## Drugs (and Supplies) Added to the VA National Formulary WITHOUT Prior Authorization

- Ranibizumab 0.5MG/0.05ML INJ, SOLN (LUCENTIS)

## Drugs (and Supplies) Added to the VA National Formulary WITH Prior Authorization

- Dostarlimab-gxly inj,soln (JEMPERLI)

## Drugs (and Supplies) Not Added to the VA National Formulary

- Apomorphine (ONAPGO)
- Dupilumab (DUPIXENT) for Chronic Spontaneous Urticaria (CSU)
- Nipocalimab-aahu (IMAAVY) in Generalized Myasthenia Gravis
- Olezarsen (TRYNGOLZA) for Familial Chylomicronemia Syndrome (FCS)
- Remibrutinib (RHAPSIDO) for Chronic Spontaneous Urticaria (CSU)
- Tislelizumab-jsgr (TEVIMBRA)

## Formulary Drugs (and Supplies) with Prior Authorization Removed

- None

## Drugs (and Supplies) Removed from the VA National Formulary

- Ranibizumab-nuna INJ, SOLN (BYOOVIZ)

## New Guidance

- Semaglutide (WEGOVY) in Metabolic Dysfunction-associated Steatohepatitis

## Updated documents – Criteria for Use

- Lebrikizumab-lbkz (EBGLYSS) in Atopic Dermatitis CFU
- Lenvatinib (LENVIMA) CFU
- Nemozumab-ilto (NEMLUVIO) CFU
- Omalizumab (XOLAIR) and Biosimilars in Chronic Spontaneous Urticaria (CSU) CFU
- Resmetirom (REZDIFFRA) in Metabolic Dysfunction-associated Steatohepatitis CFU

## Updated documents – Clinical Recommendations

- Bispecific\_Antibody\_CRS\_and\_ICANS\_Neurotoxicity\_Supportive\_Care\_Guidance
- Direct Oral Anticoagulants DOAC Reversal Recommendations for Use