Mississippi Division Of Medicaid Provider Notice of Preferred Drug List Changes Part Manual Advantage Changes

P&T Meeting Date: May 14, 2024

PDL Changes Effective Date: July 1, 2024



The following changes will be made to the Preferred Drug List (PDL), effective July 1, 2024, pending approval by the P&T Committee, DOM, and DOM's Executive Director.

| NEW PREFERRED DRUGS | |
|----------------------------------|----------------------------------|
| THERAPEUTIC CLASS | RECOMMENDED for |
| | PREFERRED STATUS |
| Immunologic Therapies For Asthma | Xolair (omalizumab) Autoinjector |

| NEW NON-PREFERRED DRUGS | |
|--------------------------------------|---|
| THERAPEUTIC CLASS | RECOMMENDED for NON-PREFERRED STATUS |
| Muscular Dystrophy Agents | Agamree (vamorolone) |
| Platelet Stimulating Agents | Alvaiz (eltrombopag) |
| Colony Stimulating Factors | Udenyca Onbody (pegfilgrastim- cbqv) |
| Hypoglycemics, DPP4s And Combination | Zituvio (sitagliptin) |
| Cytokine & Cam Antagonists | Zymfentra (infliximab-dyyb) |