

Mississippi Division Of Medicaid
Provider Notice of Preferred Drug List Changes
P&T Meeting Date: October 22, 2024
PDL Changes Effective Date: January 1, 2025



The following changes will be made to the Preferred Drug List (PDL), effective January 1, 2025, pending approval by the P&T Committee, DOM, and DOM's Executive Director.

NEW PREFERRED DRUGS	
THERAPEUTIC CLASS	RECOMMENDED for PREFERRED STATUS
Atopic Dermatitis	Adbry Autoinjector (tralokinumab)

NEW NON-PREFERRED DRUGS	
THERAPEUTIC CLASS	RECOMMENDED for NON-PREFERRED STATUS
Angiotensin Modulators: ARB Combinations	Entresto Sprinkle (sacubitril and valsartan)
Anticholinergics & COPD Agents	Ohtuvayre (ensifentrine)
Anticonvulsants (Adjuvants)	Vigafyde (vigabatrin)
Antineoplastics – Systemic Enzyme Inhibitors	Retevmo (selpercatinib)
Antineoplastics – Systemic Enzyme Inhibitors	Voranigo (vorasidenib)
Bile Salts	Iqirvo (elafibranol)
Bile Salts	Livdelzi (seladelpar lysine)
Erythropoiesis Stimulating Proteins	Vafseo (vadadustat)
Immune Globulins	Alyglo (immune globulin)
Skeletal Muscle Relaxants	Tanlor (methocarbamol)