

Mississippi Division Of Medicaid
Provider Notice of Preferred Drug List Changes
P&T Meeting Date: May 13, 2025
PDL Changes Effective Date: July 1, 2025



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

NEW PREFERRED DRUGS	
THERAPEUTIC CLASS	RECOMMENDED for PREFERRED STATUS
Select Contraceptives (Oral Contraceptives)	Feirza (Ethinyl estradiol and norethindrone acetate)
Select Contraceptives (Oral Contraceptives)	Valtva (Ethinyl estradiol and ethynodiol diacetate)
Select Contraceptives (Oral Contraceptives)	Xarah FE (Ethinyl estradiol and norethindrone acetate)

NEW NON-PREFERRED DRUGS	
THERAPEUTIC CLASS	RECOMMENDED for NON-PREFERRED STATUS
Anticoagulants (Oral)	rivaroxaban
Cystic Fibrosis Agents	Alyftrek (vanzacaftor/tezacaftor/deutivacaftor)
Cytokine & CAM Antagonists	Idacio (adalimumab-aacf)
Cytokine & CAM Antagonists	Otulfi (ustekinumab-aaaz)
Cytokine & CAM Antagonists	Pyzchiva (ustekinumab-ttwe)
Cytokine & CAM Antagonists	Yesintek (ustekinumab-kfce)
Factor Deficiency Products (Other Hemophilia Products)	Alhemo (concizumab-mtci)
Factor Deficiency Products (Other Hemophilia Products)	Corifact (Factor XIII)
Fibromyalgia/Neuropathic Pain Agents	Gabarone (gabapentin)
Irritable Bowel Syndrome/Short Bowel Syndrome Agents/Selected Agents (Constipation)	prucalopride

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NEW NON-PREFERRED DRUGS	
THERAPEUTIC CLASS	RECOMMENDED for NON-PREFERRED STATUS
Miscellaneous Brand/Generic (Epinephrine)	Neffy (epinephrine)
Miscellaneous Brand/Generic (Miscellaneous)	Crenessity (crinecerfont)
Miscellaneous Brand/Generic (Miscellaneous)	Tryngolza (olezarsen)