Mississippi Division Of Medicaid
Provider Notice of Preferred Drug List Changes
P&T Meeting Date: August 11, 2026
PDL Changes Effective Date: October 1, 2026

The following changes will be made to the Preferred Drug List (PDL), effective October 1, 2026, pending approval by the P&T Committee, DOM, and DOM's Executive Director.

NEW PREFERRED DRUGS	
THERAPEUTIC CLASS	**RECOMMENDED for PREFERRED STATUS**
Antineoplastics Selected Systemic Enzyme Inhibitors	**Yulithira** (everolimus)
Factor Deficiency Products – Other Hemophilia Products	**Fesilty** (fibrinogen, human-chmt)
Idiopathic Pulmonary Fibrosis	**nintedanib** (except Dexcel Pharma)
Pulmonary Antihypertensives – Endothelin Receptor Antagonists	**macitentan** (except Apotex)

NEW NON-PREFERRED DRUGS	
THERAPEUTIC CLASS	**RECOMMENDED for NON-PREFERRED STATUS**
Antiemetics	**Nereus** (tradipitant)
Antineoplastics Selected Systemic Enzyme Inhibitors	**Lifyorli** (relacorilant)
Antineoplastics Selected Systemic Enzyme Inhibitors	**Veppanu** (vepdegestrant)
Antipsychotics	**Bysanti** (milsaperidone)
Antiretrovirals	**Idvynso** (doravirine/islatravir)
Antivirals, Oral	**Xocova** (ensitrelvir)
Bile Salts	**Lynavoy** (linerixibat)
Cytokine and CAM Antagonists	**Icotyde** (icotrokinra)
Idiopathic Pulmonary Fibrosis	**Ofev** (nintedanib)