

## PEI Pharmacare Bulletin

Issue (2022 - 11)

December 12, 2022

### NEW PRODUCT(S) ADDED TO THE PEI PHARMACARE FORMULARY (EFFECTIVE DATE: (DECEMBER 28, 2022))

Product (Generic name)	Product (Brand name)	Strength	Dosage Form	DIN	MFR
Acalabrutinib	Calquence	100 mg	Capsule	02491788	AZE
Criteria	For treatment of chronic lymphocytic leukemia (CLL)/small lymphocytic lymphoma (SLL); see the online formulary for criteria				
Program Eligibility	High Cost Drug Program, Catastrophic Drug Program				
Brolucizumab	Beovu	6 mg/0.05 ml	Prefilled syringe	02496976	NVR
Criteria	For treatment of neovascular (wet) age-related macular degeneration (AMD); see the online formulary for criteria				
Program Eligibility	High Cost Drug Program, Catastrophic Drug Program				
Cetirizine	Various generics	20 mg	Tablet	02517353 02427141	JPC MAR
Criteria	Open benefit				
Program Eligibility	Family Health Benefit Drug Program, Financial Assistance Drug Program, Generic Drug Program, Nursing Home Drug Program, Seniors Drug Program, Catastrophic Drug Program				
Entrectinib	Rozlytrek	100 mg 200 mg	Capsule	02495007 02495015	HLR
Criteria	For the first-line treatment of patients with ROS-1 positive locally advanced (not amenable to curative therapy) or metastatic non-small cell lung cancer (NSCLC).				
Program Eligibility	High Cost Drug Program, Catastrophic Drug Program				
Estrone	Estragyn	0.1%	Vaginal cream	00727369	SLP
Criteria	Open benefit				
Program Eligibility	Family Health Benefit Drug Program, Financial Assistance Drug Program, Nursing Home Drug Program, Seniors Drug Program, Catastrophic Drug Program				

Fremanezumab	Ajovy	225 mg/1.5 ml 225 mg/1.5 ml	Prefilled Syringe Autoinjector	02497859 02509474	TEV
Criteria	For the prevention of migraine in patients with a confirmed diagnosis of episodic or chronic migraine who have experienced an inadequate response, intolerance, or contraindication to at least two classes of oral prophylactic migraine medications; see the online formulary for criteria.				
Program Eligibility	Family Health Benefit Drug Program, Financial Assistance Drug Program, Nursing Home Drug Program, Seniors Drug Program, Catastrophic Drug Program				

Gilteritinib	Xospata	40 mg	Tablet	02495058	AST
Criteria	For the treatment of FMS-like tyrosine kinase 3 (FLT3)-mutated acute myeloid leukemia; see the online formulary for criteria				
Program Eligibility	High Cost Drug Program, Catastrophic Drug Program				

Granisetron	Jamp Granisetron	1 mg	Tablet	02472686	JPC
Criteria	For the prevention of nausea and vomiting in patients receiving highly/moderately emetogenic chemotherapy/radiation or patients receiving radiation therapy who have inadequate control with other available antiemetics				
Program Eligibility	Family Health Benefit Drug Program, Financial Assistance Drug Program, Generic Drug Program, Nursing Home Drug Program, Seniors Drug Program, Catastrophic Drug Program				

Leucovorin	Riv-Leucovorin	5 mg	Tablet	02493357	RIV
Criteria	Open benefit				
Program Eligibility	Family Health Benefit Drug Program, Financial Assistance Drug Program, Generic Drug Program, Nursing Home Drug Program, Seniors Drug Program, Catastrophic Drug Program				

Niraparib	Zejula	100 mg	Capsule	02489783	GSK
Criteria	For treatment of newly diagnosed advanced epithelial ovarian, fallopian tube or primary peritoneal cancer; see the online formulary for criteria For relapsed, platinum sensitive advanced epithelial ovarian, fallopian tube or primary peritoneal cancer; see the online formulary for criteria				
Program Eligibility	High Cost Drug Program, Catastrophic Drug Program				

Ocrelizumab	Ocrevus	300 mg	Vial	02467224	HLR
Criteria	For the treatment of relapsing remitting multiple sclerosis and primary progressive multiple sclerosis; see the online formulary for criteria				
Program Eligibility	High Cost Drug Program, Catastrophic Drug Program				

Olaparib	Lynparza	100 mg 150 mg	Tablet Tablet	02475200 02475219	AZE
Criteria	For treatment of metastatic, castration-resistant prostate cancer, see the online formulary for criteria For newly diagnosed advanced, BRCA-mutated, high grade epithelial ovarian, fallopian tube, or primary peritoneal cancer see the online formulary for criteria For relapsed, BRCA-mutated, high grade serous epithelial ovarian, fallopian tube or primary peritoneal cancer; see the online formulary for criteria				
Program Eligibility	High Cost Drug Program, Catastrophic Drug Program				

Tazarotene and Halobetasol propionate	Duobrii	0.01%/ 0.045%	Lotion	02499967	BLO
Criteria	Patients must have a clinical diagnosis of moderate to severe plaque psoriasis and an inadequate response to a topical high-potency corticosteroid				
Program Eligibility	Family Health Benefit Drug Program, Financial Assistance Drug Program, Nursing Home Drug Program, Seniors Drug Program, Catastrophic Drug Program				

Desiccated thyroid	Thyroid	30 mg 60 mg 125 mg	Tablet Tablet Tablet	00023949 00023957 00023965	ERF
Criteria	Open benefit				
Program Eligibility	Family Health Benefit Drug Program, Financial Assistance Drug Program, Nursing Home Drug Program, Seniors Drug Program, Catastrophic Drug Program				

Tranexamic acid	Mar-Tranexamic Acid	500 mg	Tablet	02496232	MAR
Criteria	Open benefit				
Program Eligibility	Family Health Benefit Drug Program, Financial Assistance Drug Program, Generic Drug Program, Nursing Home Drug Program, Seniors Drug Program, Catastrophic Drug Program				

Valacyclovir	Apo-valacyclovir	1000 mg	Tablet	02354705	APX
Criteria	Open benefit				
Program Eligibility	Family Health Benefit Drug Program, Financial Assistance Drug Program, Generic Drug Program, Nursing Home Drug Program, Seniors Drug Program, Catastrophic Drug Program				

Adalimumab	Abrilada	40mg/0.8ml 40mg/0.8ml	Prefilled syringe Prefilled pen	02511053 02511045	PFI
Criteria	For the treatment of ankylosing spondylitis, Crohn's disease, plaque psoriasis, psoriatic arthritis, ulcerative colitis, rheumatoid arthritis, hidradenitis suppurativa and uveitis; see the online formulary for criteria				
Program Eligibility	High Cost Drug Program, Catastrophic Drug Program				

**UPDATE OF SPECIAL AUTHORIZATION CRITERIA**  
**(EFFECTIVE DATE: DECEMBER 12, 2022)**

Product (Generic name)	Product (Brand name)	Strength	Dosage Form	DIN	MFR
Dapagliflozin	Forxiga	5 mg 10 mg	Tablet	02435462 02435470	AZE
Criteria	The indication considered for coverage has expanded to include treatment of adult patients with New York Heart Association (NYHA) class II or III heart failure with reduced ejection fraction (left ventricular ejection fraction $\leq$ 40%) as an adjunct to standard of care therapies; see the online formulary for criteria				
Program Eligibility	Family Health Benefit Drug Program, Financial Assistance Drug Program, Nursing Home Drug Program, Seniors Drug Program, Catastrophic Drug Program				
Enzalutamide	Xtandi	40 mg	Capsule	02407329	AST
Criteria	The indications considered for coverage have expanded to include treatment for metastatic castration-sensitive prostate cancer and non-metastatic castration-resistant prostate cancer (high metastases risk); see the online formulary for criteria				
Program Eligibility	High Cost Drug Program, Catastrophic Drug Program				
Etanercept	Brenzys	50mg/ml	Prefilled pen injector Prefilled syringe	02455331 02455323	ORG
Criteria	The indications considered for coverage have been expanded to include plaque psoriasis and psoriatic arthritis; see the online formulary for criteria				
Program Eligibility	High Cost Drug Program, Catastrophic Drug Program				
Etanercept	Erelzi	25mg/0.5ml 50mg/ml 50mg/ml	Prefilled syringe Prefilled pen injector Prefilled syringe	02462877 02462850 02462869	SDZ
Criteria	The indications considered for coverage have been expanded to include plaque psoriasis; see the online formulary for criteria				
Program Eligibility	High Cost Drug Program, Catastrophic Drug Program				
Venetoclax	Venclexta	10 mg 50 mg 100 mg	Tablet	02458039 02458047 02458055	ABV
Criteria	The indications considered for coverage have been expanded to include combination with obinutuzumab for previously untreated chronic lymphocytic leukemia or small lymphocytic lymphoma and in combination with azacitidine for newly diagnosed acute myeloid leukemia; see the online formulary for criteria				
Program Eligibility	High Cost Drug Program, Catastrophic Drug Program				
Adalimumab	Simlandi	40mg/0.4ml  80mg/0.8ml	Prefilled syringe Prefilled autoinjector Prefilled syringe	02523949 02523957 02523965	JPC

Criteria	The indications considered for coverage have been expanded to include hidradenitis suppurativa and uveitis; see the online formulary for criteria
Program Eligibility	High Cost Drug Program, Catastrophic Drug Program

Adalimumab	Amgevita	20mg/0.4ml 40mg/0.8ml 40mg/0.8ml	Prefilled syringe Prefilled syringe Prefilled autoinjector	02459310 02459299 02459302	AMG
Criteria	The indications considered for coverage have been expanded to include hidradenitis suppurativa and uveitis; see the online formulary for criteria				
Program Eligibility	High Cost Drug Program, Catastrophic Drug Program				

Adalimumab	Hulio	20mg/0.4ml 40mg/0.8ml 40mg/0.8ml	Prefilled syringe Prefilled syringe Prefilled pen	02502380 02502399 02502402	BGP
Criteria	The indications considered for coverage have been expanded to include hidradenitis suppurativa and uveitis; see the online formulary for criteria				
Program Eligibility	High Cost Drug Program, Catastrophic Drug Program				

Adalimumab	Hyrimoz	20mg/0.4ml 40mg/0.8ml 40mg/0.8ml	Prefilled syringe Prefilled syringe Prefilled autoinjector	02505258 02492164 02492156	SND
Criteria	The indications considered for coverage have been expanded to include hidradenitis suppurativa and uveitis; see the online formulary for criteria				
Program Eligibility	High Cost Drug Program, Catastrophic Drug Program				

Adalimumab	Hadlima	40mg/0.8ml 40mg/0.8ml	Prefilled syringe Prefilled autoinjector	02473097 02473100	ORG
Criteria	The indications considered for coverage have been expanded to include hidradenitis suppurativa and uveitis; see the online formulary for criteria				
Program Eligibility	High Cost Drug Program, Catastrophic Drug Program				

## Holiday Hours

Please be advised that the Pharmacare office will be closed:

- December 23, 2022 at noon
- December 26, 2022
- December 27, 2022
- January 2, 2023