



Provider Notice

December 23, 2022

Illinois Preferred Drug List – Upcoming 2023 Formulary Updates **[REVISED]**

January 1, 2020, all MCO’s were required to adopt the Illinois HFS Preferred Drug List to align with the Fee for Service program. An update has been made to the previously communicated changes to Humira formulary status. All Humira products will REMAIN Preferred with PA. [See Table 1.] Table 1 reflects changes with an effective date of January 1, 2023. Table 2 reflects changes effective February 1, 2023. [Note: these changes were previously communicated in the December 1, 2022, Provider notice]

Table 1. REVISED Effective January 1, 2023: [HUMIRA products will remain PREFERRED WITH PA](#)

| LABEL NAME | THERAPEUTIC CLASS | PREVIOUS FORMULARY STATUS | NEW FORMULARY STATUS |
|--|---|---------------------------|---|
| HUMIRA & HUMIRA (CF) PEN CROHNS-UC-HS STARTER PEN INJECTOR KIT & SC PEN INJECTOR KIT HUMIRA PEN PSOR-UVEITS-ADOL HS & (CF) SC PEN INJECTOR KIT HUMIRA & HUMIRA CF PEN SC PEN INJECTOR KIT and SC SYRINGE KIT HUMIRA(CF) PEDI CROHNS STARTER SC SYRINGE KIT HUMIRA(CF) PEN PEDIATRIC UC SC PEN INJECTOR KIT | ANTI-INFLAMMATORY TUMOR NECROSIS FACTOR INHIBITOR | PREFERRED WITH PA | PREFERRED WITH PA [NO CHANGE] |
| COSENTYX SENSOREADY AUTO-INJECTOR PEN & PRE-FILLED SYRINGE | DERMATOLOGICALS: ANTIPSORIATICS | NON- PREFERRED | PREFERRED WITH PA |
| STRATERRA [BRAND] ¹ ORAL CAPSULES | ADHD/ANTI-NARCOLEPSY AGENTS; MISC | NON-PREFERRED | PREFERRED <small>¹Note: Atomoxetine [GENERIC] will remain Non-Preferred</small> |

Table 2. Effective February 1, 2023: [ENBREL products will REQUIRE PRIOR AUTHORIZATION:](#)

| LABEL NAME | THERAPEUTIC CLASS | PREFERRED FORMULARY ALTERNATIVES ¹ | PA REQUIRED (YES/NO) |
|--|---|--|----------------------|
| ENBREL MINI SC CARTRIDGE / SOLUTION/ SYRINGE/PEN INJECTOR) | ANTI-INFLAMMATORY TUMOR NECROSIS FACTOR INHIBITOR | HUMIRA (BRAND): All Products | YES |
| | | CIMZIA (BRAND): CIMZIA STARTER KIT SC SYRINGE KIT and CIMZIA SC SYRINGE KIT | YES |

¹SC = Subcutaneous

Note: Above Formulary changes would be reflected in the January 2023 PDL document.

We look forward to working with you to ensure uninterrupted care for our members.

Please contact CountyCarePharmacy@cookcountyhhs.org for additional information or assistance.