

BlueCross BlueShield of Illinois BlueCross BlueShield of Montana BlueCross BlueShield of New Mexico BlueCross BlueShield of Oklahoma BlueCross BlueShield of Texas

Enhanced Drug List Updates

January 2023

| TRADE NAME (generic name) | Brand/Generic Product | Description of Change |
|---|--------------------------|---|
| NEXAVAR (sorafenib tosylate tab 200 mg (base equivalent)) | Brand | Removal, Non-Preferred Status, generics available |
| SKYRIZI (risankizumab-rzaa subcutaneous soln cartridge 360 mg/2.4ml) | Brand | Addition, Preferred Status |
| TRIUMEQ PD (abacavir-dolutegravir-lamivudine tab for oral sus 60-5-30 mg) | Brand | Addition, Preferred Status |
| VEMLIDY (tenofovir alafenamide fumarate tab 25 mg) | Brand | Addition, Preferred Status |
| VIMPAT (lacosamide oral solution 10 mg/ml) | Brand | Removal, Non-Preferred Status, generics available |

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