

| PROVIDER NOTIFICATION OF RETAIL DRUG POLICY CRITERIA CHANGE | | | |
|--|--|-------------------|----------------------------------|
| Drug Impacted | CRITERIA CHANGE | EFFECTIVE DATE | Formulary |
| Journavx | Updated indication question to match updated labeling of Journavx. | 3/8/2026 | Complete and Essential |
| Neupogen and filgrastim biosimilars | Added new biosimilar, Filkri (filgrastim-laha). | 3/8/2026 | Standard, Metallic and Essential |