



UPDATE: Fidelis Care Medicaid Preferred Drug List

Dear Provider,

This letter documents changes to the Fidelis Care Medicaid Preferred Drug List (PDL) stemming from the Fidelis Care Pharmacy & Therapeutics meeting on 03/10/2026. Please review these changes carefully.

Effective Date: 06/01/2026

Drug Name	Therapeutic Class	Change	PDL Alternative (if applicable)
Additions to the PDL			
Omnipod Products	Diabetic Supplies	Add to Formulary w/ PA and QL; Update insulin administration methods (criterion 6) to 3 months, and blood glucose monitoring (criterion 7) to 2 months in corporate criteria (CP.PHAR.534 Insulin Delivery Systems (V-Go, Omnipod, InPen)).	
generic Teriparatide	Bone Formation Stimulating Agents - Parathyroid Hormone	Add to Formulary	
Utilization Management Changes			
Botox (onabotulinumtoxinA)	Neuromuscular Therapy Agents	Update Medicaid criteria 5: Remove CGRP trial timeframe requirement. Removal of documentation of number of headache days per month and change to prescriber attestation of continuing disability and need for additional treatment	
Aqvesme (mitapivat)	Hematopoietic Agents	Update the clinical criteria to add a step through Reblozyl for	



		transfusion-dependent beta thalassemia	
Jascayd (nerandomilast)	Pulmonary Fibrosis Treatment Agents	Update Jascayd clinical criteria (new starts only) to redirect through both Ofev and generic Esbriet for idiopathic pulmonary fibrosis, and through Ofev for progressive pulmonary fibrosis	
Zilbrysq (zilucoplan)	Antimyasthenic Agents	Add redirection of Zilbrysq via Ultomiris for generalized myasthenia gravis (gMG) indication into corporate criteria (CP.PHAR.616 Zilucoplan (Zilbrysq)).	

Key	
UPPER CASE = Brand Name Drugs	QL = Quantity Limit
Lower case italics = Generic Drugs	ST = Step Therapy
PDL = Preferred Drug List	AL = Age Limit
PA = Prior Authorization	YOA = Years of Age
SC = Safety Concerns	LU = Low Utilization
PC = Pharmacoeconomic Considerations	DD = Discontinued Drug
GA = Generic Available	CR = Clinical Removal

If you have any questions, the Fidelis Care Pharmacy Help Desk is available to assist providers at **1-888-453-2534**.

Thank you for your commitment to delivering quality care to Fidelis Care Medicaid members.

Sincerely,

Fidelis Care Pharmacy