



| THERAPEUTIC CATEGORY | PRODUCT NAME, ROUTE OF ADMINISTRATION & MANUFACTURER | PROPOSED INDICATION | PHASE OF STUDY | SELECT AVAILABLE FDA-APPROVED THERAPIES | COMMENTS |
|-----------------------------------|---|---|---|--|---|
| Hereditary angioedema (HAE) | donidalorsen SC Ionis Pharmaceuticals | The prevention of HAE attacks in patients ages 12 years and older | Pending FDA approval 8/21/2025 | Cinryze (C1 esterase inhibitor [human]) IV, Haegarda (C1 esterase inhibitor SC [human]) SC, Orladeyo (berotralstat) oral, Takhzyro (lanadelumab-flyo) Pipeline: Andembry (garadacimab) SC (June 2025) | Donidalorsen would provide an additional treatment option for the prevention of HAE attacks that offers both monthly and bimonthly dosing frequency options. Anticipated impact: Replacement spend, pharmacy benefit |
| Inflammatory bowel disease | Tremfya (guselkumab) SC Janssen Pharmaceuticals/ Johnson & Johnson | The treatment of moderate- to-severe ulcerative colitis (UC) in adults as induction therapy (supplemental indication) | Pending FDA approval 9/22/2025 | IL-23 antagonist induction therapy options for UC (all IV administered): Omvoh (mirikizumab-mrkz), Skyrizi (risankizumab-rzaa), Tremfya, ustekinumab (e.g., Stelara, biosimilars) | Tremfya SC would replace IV infusion induction doses for UC administered at weeks 0, 4 and 8 with a self-administered SC option. This would be the only IL-23 antagonist that offers a SC induction regimen option for UC. Anticipated impact: Replacement spend, shift from medical to pharmacy benefit |
| Multiple sclerosis | tolebrutinib Oral Principia Biopharma/ Sanofi | The treatment of non- relapsing secondary progressive multiple sclerosis (SPMS) in adults | Pending FDA approval 9/28/2025 | None for non-relapsing SPMS Current therapies approved for treating SPMS are only for patients with active, relapsing disease. Some patients may continue using disease-modifying therapies that were initiated during relapsing phase of disease despite transitioning to non-relapsing SPMS. | Tolebrutinib was granted Breakthrough Therapy designation and would be the first approved treatment specifically for patients in the non-relapsing SPMS stage of MS. Anticipated impact: Incremental spend, pharmacy benefit |

| Specialty (continued) | | | | | | |
|----------------------------|--|--|---|---|--|--|
| THERAPEUTIC CATEGORY | PRODUCT NAME, ROUTE OF ADMINISTRATION & MANUFACTURER | PROPOSED INDICATION | PHASE OF STUDY | SELECT AVAILABLE FDA-APPROVED THERAPIES | COMMENTS | |
| Neurological disorders | Leqembi (lecanemab-irmb) SC (new formulation) Eisai/Biogen | The treatment of early Alzheimer's disease | Pending FDA approval 8/31/2025 | Kisunla (donanemab-azbt) IV, Leqembi (lecanemab-irmb) IV | Leqembi would be the first SC, self- or caregiver-administered, disease-modifying treatment option for early Alzheimer's disease. Similar to Leqembi IV and Kisunla IV, SC-administered Leqembi will still require brain imaging prior to and during therapy to monitor for adverse events (e.g., MRI scans). Anticipated impact: Incremental spend, shift from medical to pharmacy benefit | |
| Neuromuscular disorders | apitegromab IV Scholar Rock | The treatment of type 2 or type 3 spinal muscular atrophy (SMA) in patients ages 2–21 years receiving Spinraza (nusinersen) or Evrysdi (risdiplam) | Pending FDA approval 9/22/2025 | Pipeline: Zolgensma (onasemnogene abeparvovec-xioi)-intrathecal injection-Phase III for type 2 SMA (1Q 2026) | Apitegromab would provide an additional SMA treatment option and be the first muscle-targeting therapy for the condition. It would be used as an add-on treatment to standard of care therapies (Spinraza or Evrysdi) in non-ambulatory type 2 and type 3 SMA patients. Anticipated impact: Incremental spend, medical benefit | |
| Oncology-Oral | sunvozertinib Oral Dizal Pharmaceutical | The treatment of locally advanced or metastatic non-small cell lung cancer (NSCLC) with EGFR exon 20 insertion mutations in patients who have progressed on or after platinum-based chemotherapy | Pending FDA approval 7/7/2025 | Rybrevant (amivantamab-vmjw) IV Additional guideline-supported therapies: Enhertu (fam-trastuzumab deruxtecan-nxki if HER2-positive) IV, Keytruda (pembrolizumab) IV, Opdivo (nivolumab) IV, Opdivo (vantig (nivolumab & hyaluronidase-nvhy) SC, Tecentriq (atezolizumab) IV, Tecentriq Hybreza (atezolizumab & hyaluronidase-tqjs) SC, conventional IV chemotherapy Pipeline: zipalertinib oral (1H 2026 | Sunvozertinib was granted Breakthrough Therapy designation and would provide the first oral option for second-line or later treatment of NSCLC in patients with EGFR exon 20 insertion mutations. Anticipated impact: Incremental spend, shift from medical to pharmacy benefit | |

| Specialty (continued) | | | | | | |
|--------------------------|---|---|---|--|--|--|
| THERAPEUTIC CATEGORY | PRODUCT NAME, ROUTE OF ADMINISTRATION & MANUFACTURER | PROPOSED INDICATION | PHASE OF STUDY | SELECT AVAILABLE FDA-APPROVED THERAPIES | COMMENTS | |
| Oncology-Oral | zongertinib Oral Boehringer Ingelheim | The treatment of unresectable or metastatic NSCLC tumors with HER2 mutations in adults who have received prior systemic therapy | Pending FDA approval 8/18/2025 | Enhertu (fam-trastuzumab deruxtecan-nxki) IV Additional guideline- supported therapies: Kadcyla (ado-trastuzumab emtansine) IV Pipeline: sevabertinib oral (Nov 2025) | Zongertinib was granted Breakthrough Therapy designation and would provide the first oral targeted therapy for second-line or later treatment of HER2-mutant NSCLC. Anticipated impact: Incremental spend, shift from medical to pharmacy benefit | |
| Phenylketonuria (PKU) | sepiapterin Oral PTC Therapeutics | The treatment of PKU | Pending FDA approval 7/29/2025 | Palynziq (pegvaliase-pqpz) SC, sapropterin (e.g., Kuvan, Javygtor) oral | Sepiapterin would provide an additional oral PKU treatment option for patients unable to achieve sufficient disease control through a phenylalanine-restricted diet alone. Anticipated impact: Incremental spend (due to generic competition), pharmacy benefit | |



| THERAPEUTIC CATEGORY | PRODUCT NAME, ROUTE OF ADMINISTRATION & MANUFACTURER | PROPOSED INDICATION | PHASE OF STUDY | SELECT AVAILABLE FDA-APPROVED THERAPIES | COMMENTS |
|--|---|---|---|--|---|
| Cardiovascular disorders | Kerendia (finerenone) Oral Bayer HealthCare | The treatment of heart failure with a mildly reduced or preserved left ventricular ejection fraction in adults (supplemental indication) | Pending FDA approval 7/17/2025 | Guideline supported mineralocorticoid receptor antagonist (MRA) therapies: eplerenone (e.g., Inspra) oral, spironolactone (e.g., Aldactone) oral | Kerendia would provide an alternative, non- steroidal MRA treatment option that may be associated with lower rates of hyperkalemia relative to existing MRAs. Anticipated impact: Incremental spend (due to generic competition), pharmacy benefit |
| Gastrointestinal disorders – other | Wegovy (semaglutide) SC Novo Nordisk | The treatment of adults with metabolic dysfunction-associated steatohepatitis (MASH) with moderate-to-advanced liver fibrosis (stages F2 to F3 fibrosis) (supplemental indication) | Pending FDA approval 9/1/2025 | Rezdiffra (resmetirom) | Wegovy was granted Breakthrough Therapy designation. It would provide an additional MASH therapy option and would be the first GLP-1 receptor agonist approved to treat this condition. Anticipated impact: Incremental spend, pharmacy benefit |
| Obesity | Saxenda (liraglutide) SC Novo Nordisk | The treatment of obesity in patients ages 6–11 years (supplemental indication) | Pending FDA approval 7/10/2025 | None | This expanded use of Saxenda would represent the first GLP-1 receptor agonist approved to treat obesity in patients younger than 12 years of age. Anticipated impact: Incremental spend, pharmacy benefit |
| Pulmonary disorders – other | brensocatib Oral Insmed/ AstraZeneca | The treatment of non-cystic fibrosis bronchiectasis (NCFB) in patients ages 12 years and older | Pending FDA approval 8/12/2025 | None Current standard of care primarily focuses on acute treatment of pulmonary (lung) exacerbations with antibiotic therapy as well as enhancing airway clearance. | Brensocatib was granted Breakthrough Therapy designation and would become the first approved chronic maintenance treatment for NCFB. Anticipated impact: New spend, pharmacy benefit |

Non-Specialty (continued) **PHASE THERAPEUTIC** PRODUCT NAME, **PROPOSED** SELECT **COMMENTS CATEGORY ROUTE OF** INDICATION **OF STUDY AVAILABLE ADMINISTRATION &** FDA-APPROVED **MANUFACTURER THERAPIES** Women's health elinzanetant The treatment of moderate-Non-hormonal therapy Elinzanetant would become an additional Pending to-severe vasomotor options: Brisdelle (paroxetine) non-hormonal therapy option for the treatment FDA Oral oral, Veozah (fezolinetant) oral approval of vasomotor symptoms (e.g., hot flashes) symptoms associated with 8/1/2025 associated with menopause. menopause Bayer HealthCare **Anticipated impact:** Replacement spend, pharmacy benefit



Proactive surveillance of the drug pipeline can help inform your pharmacy benefits strategy.

Learn more and access our latest pipeline reports on our website at **Business.Caremark.com**

FDA (U.S. Food and Drug Administration), SC (subcutaneous), IV (intravenous).

This document contains references to brand-name prescription drugs that are trademarks or registered trademarks of pharmaceutical manufacturers not affiliated with CVS Health. The information contained herein is compiled from independent clinical sources and is provided for informational purposes only. Due to circumstances beyond CVS Health's control, prospective drug launch dates are subject to change without notice. This information should not be solely relied upon for decision-making purposes. This email includes products that may fall under a general specialty drug benefit. All products contained herein may not be provided by CVS Specialty. Dates included in this email are reflective of likely FDA approval date (otherwise known as PDUFA date). Actual approval date may occur before or after the date shown. Some drugs may not gain FDA approval at all. Dates do not reflect a projection for actual market availability. Drug launch may in some cases occur several months after FDA approval.

♥CVS caremark®