

Preferred Drug List Update

January 2019 Summary

The purpose of this document is to summarize relevant updates to the preferred drug lists for managed Medicaid plans and Traditional Medicaid. Updates will be reflected on Partners For Kids preferred drug list at www.PartnersForKids.org/resources. All changes noted below are effective as of January 2019.

Changes to Preferred Drug Lists:

PLAN	DRUG	STATUS	NOTES
Buckeye	No published changes		
CareSource	Celebrex [®] (Celecoxib) 50, 100, 200, 500 mg	Non-Preferred	Step therapy required
	Clobex [®] Temovate [®] (Clobetasol Propionate) 0.05%	Non-Preferred	Step therapy required
	Diflorasone Diacetate 0.05%	Non-preferred	Step therapy required
	Fluocinonide 0.05%	Non-Preferred	Step therapy required
Molina	No published changes		
Ohio Medicaid	No published changes		
Paramount	No published changes		
United Healthcare Community	Firvanq [™] (Vancomycin) powder for oral solution	Preferred	Indicated for the treatment of C. diff; diagnosis required
	Bydureon [®] (Exenatide)	Preferred	Indicated for diabetes; step therapy required
	Victoza [®] (Liraglutide)	Preferred	Indicated for diabetes; step therapy required
	Novolog [®] (Insulin aspart) Vials and pens	Preferred	Indicated for diabetes; vials and pens are covered
	Humalog [®] (Insulin lispro) Vials and pens	Preferred	Indicted for diabetes; vials and pens are covered
	Humulin N [®] (Insulin NPH)	Preferred	Indicated for diabetes; vials and pens are covered
	Novolog [®] Mix 70/30 (Insulin aspart protamine /insulin aspart)	Modification	Pens and vials are covered
	Humalog [®] Mix 50/50, 7/25 (insulin lispro protamine /Insulin lispro	Modification	Pens and vials are covered

UHC Continued	Humulin® 70/30 (Insulin NPH /regular)	Modification	Pens and vials are covered
	Vancomycin capsule	Removed	Firvanq is an alternate option; current utilizers will be grandfathered
	Basaglar® (Insulin glargine)	Removed	Lantus (vial, pen) or Levemir are alternates. Current utilizers NOT grandfathered
	Toujeo® (Insulin glargine) 300 units/mL	Removed	Lantus (vial, pen) or Levemir are alternates. Current utilizers NOT grandfathered
	Admelog® (Insulin lispro)	Removed	Humalog or Novolog are alternates. Current utilizers will NOT be grandfathered