

PROVIDER BULLETIN

No. 14-38

DATE: December 5, 2014

TO: All prescribers, pharmacists, and pharmacies participating in the Nebraska Medicaid Program

FROM: Courtney Miller, Deputy Director *cm*
 Division of Medicaid and Long-Term Care

BY: Jenny Minchow R.P., Pharm. D., Pharmacy Consultant

RE: Preferred Drug List (PDL) Changes

The Nebraska Medicaid Pharmaceutical and Therapeutics Committee reviewed thirty-two therapeutic classes of drugs at their November 2014 meeting. Changes to the PDL are listed below. The list which follows does not represent the complete PDL. For the complete listing of the Preferred Drug List including upcoming changes, please access the Pharmacy Magellan Medicaid Administration website at <https://nebraska.fhsc.com>. Under the Preferred Drug List tab, select ***Preferred Drug Lists, and then the PDL Document effective 01/08/2015.*** Changes to the reviewed therapeutic classes are listed in ***italics*** on the posted PDL to be implemented **January 8, 2015**.

For further information contact Jenny Minchow R.P., Pharm.D. at dhhs.MedicaidPharmacyunit@nebraska.gov.

SUMMARY OF PDL CHANGES TO BE IMPLEMENTED January 8, 2015

DRUG CLASS	PRERERRED	NON-PREFERRED
ALZHEIMER'S AGENTS	Namenda XR®	
ANTIHYPERTENSIVES, SYMPATHOLYTICS		Clorpres® Methyldopa/hydrochlorothiazide
ANTIPSORIATIC, TOPICAL	Calcipotriene Cream	Dovonex Cream ®
BILE SALTS	Ursodiol 250mg, 500mg TABLET	Ursodiol 300mg CAPSULE
BRONCHODILATORS, BETA AGONIST	Striverdi Respimat®	
COPD AGENTS		Anoro Ellipta®
CYTOKINE & CAM ANTAGONISTS		Actemra Syringe® Otezla®

DRUG CLASS	PRERERRED	NON-PREFERRED
GLUCOCORTICIDS, INHALED	GLUCOCORTICOID	
		Aerospan®
	GLUCOCORTICOID/BRONCHODILATOR	
	Advair DISKUS ® (continues to be preferred)	Advair HFA ® Breo Ellipta®
HISTAMINE II RECEPTOR BLOCKER		Cimetidine tablet
INTRANASAL RHINITIS DRUGS		Astelin®
NSAID	Meclofenamate	Etodolac Zorvolex®
ONCOLOGY AGENTS, ORAL	Kinase Inhibitors	
	Iclusig® Imbruvica® Zydelig® Zykadia®	
	Others	
	Bicalutamide (generic for Casodex)	Casodex® Nilandron®
OPHTHALMICS, ANTI- INFLAMMATORIES		Prednisolone ACETATE
OPHTHALMICS, GLAUCOMA DRUG		Betimol® Betoptic S®
SEDATIVE HYPNOTICS		Hetlioz®
STIMULANTS AND RELATED AGENTS	Strattera®	Methylin solution® Ritalin tablets®