

Effective date: September 23, 2019



Peach State Health Plan Preferred Drug List (PDL) Updates – Q3-2019

Peach State Health Plan looks at the medications on the Preferred Drug List (PDL) every three months. Medicines are added, removed or changed due to industry standards, availability, or how much it is used. Below are changes to the PDL this quarter. Generic products are preferred.

| Drug Name | Ingredients | Dosage Form | Strength | UPDATE | Notes |
|----------------|----------------|-----------------------|--------------|--------|-----------------------------|
| PROGRAF | Tacrolimus | Packet For Suspension | 0.2 MG; 1 MG | ADD | Add to PDL; PA Required |
| Desoximetasone | Desoximetasone | Cream | 0.25% | ADD | Add to PDL; QL = 2GM/day |
| Desoximetasone | Desoximetasone | Gel | 0.05% | ADD | Add to PDL; QL = 2GM/day |
| Desoximetasone | Desoximetasone | Ointment | 0.25% | ADD | Add to PDL; QL = 2GM/day |

For a copy of the preferred drug list (PDL), you may call Member Services at 1-800-704-1484 (TTY/TTD 1-800-255-0056) or visit the Peach State Health Plan website at www.pshp.com

For more information on these programs, please visit our website at www.pshp.com, or refer to the Peach State Health Plan member handbook.