

Effective date: June 29, 2018



# Peach State Health Plan

## Preferred Drug List (PDL) Updates – Q2-2018

**P**each 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.

Drug Name	Ingredients	Dosage Form	Strength	UPDATE	Notes
Betamethasone Dipropionate	Betamethasone Dipropionate	Cream	0.05%	ADD	Add to PDL; QL = 1 package/claim
BEVYXXA	Betrixaban Maleate	Capsule	40mg; 80mg	ADD	Add to PDL; QL = 42 caps/42day
BYDUREON BCISE	Exenatide Extended Release	Auto-Injector	2mg/0.85mL	ADD	Add to PDL; QL = 3.4 mL/28days
Fluoxetine HCl	Fluoxetine HCl	Tablet	20mg	ADD	Add to PDL; QL = 4 tabs/day
JULUCA	Dolutegravir Sodium-Rilpivirine HCl	Tablet	50-25mg	ADD	Add to PDL
Tetracaine HCl	Tetracaine HCl	Ophthalmic Solution	0.50%	ADD	Add to PDL
loperamide	loperamide	Capsule; Tablet	2mg	CHANGE	QL = 8 caps/day
loperamide	loperamide	Oral Solution	1mg/5ml	CHANGE	QL = 40 mL/day
rosuvastatin calcium	rosuvastatin calcium	Tablet	5mg; 10mg; 20mg; 40mg	CHANGE	QL = 1 tab/day

## Safety Edit: Opioid Prescribing Limits

**P**each State Health Plan cares about member safety. The Centers for Disease Control and Prevention (CDC) made a guide for doctors to use when prescribing medicine **for pain not caused by cancer**.<sup>1</sup> The CDC says strong pain medicines should not be used more than 7 days **for pain that is not chronic**. These strong pain medicines are called opioids. **The new day supply limit on short acting, or as needed, opioid medicine will be 7 days.** There is still a limit of two narcotic medicines every 30 days. If you are taking these medicines for cancer pain, sickle cell pain, or palliative care you will still be able to fill 30 days at a time. Doctors

<sup>1</sup> [https://www.cdc.gov/drugoverdose/pdf/guidelines\\_at-a-glance-a.pdf](https://www.cdc.gov/drugoverdose/pdf/guidelines_at-a-glance-a.pdf)

can submit a prior authorization if they feel a longer day supply is needed. The chart below shows the new limits for short acting opioid medicines on the PDL.

Drug Name	Ingredients	Dosage Form	Strength	UPDATE	Notes
Acetaminophen w/ codeine	Acetaminophen w/ codeine	Oral Solution	120-12mg/5mL	CHANGE	MDS = 7 days; QL = 30mL/day AL = at least 12 years old
Acetaminophen-Codeine #2	Acetaminophen-Codeine #2	Tablet	300-15mg	CHANGE	MDS = 7 days; QL = 6 tabs/day AL = at least 12 years old
Acetaminophen-Codeine #3	Acetaminophen-Codeine #3	Tablet	300-30mg	CHANGE	MDS = 7 days; QL = 6 tabs/day AL = at least 12 years old
Acetaminophen-codeine #4	Acetaminophen-codeine #4	Tablet	300-60mg	CHANGE	MDS = 7 days; QL = 6 tabs/day AL = at least 12 years old
Butalbital-APAP-caffeine-codeine	Butalbital-APAP-caffeine-codeine	Capsule	50-325-40-30mg	CHANGE	MDS = 7 days; QL = 4 caps/day
Butalbital-aspirin-caffeine-codeine	Butalbital-aspirin-caffeine-codeine	Capsule	50-325-40-30mg	CHANGE	MDS = 7 days; QL = 4 caps/day
Codeine sulfate	Codeine sulfate	Tablet	15mg; 30mg; 60mg	CHANGE	MDS = 7 days; QL = 2 tabs/day
Hydrocodone-acetaminophen	Hydrocodone-acetaminophen	Tablet	5-325mg; 5-500mg; 7.5-325mg; 7.5-500mg; 7.5-650mg; 10-325mg; 10-500mg; 10-650mg; 10-660mg	CHANGE	MDS = 7 days; QL = 6 tabs/day
Hydrocodone-acetaminophen	Hydrocodone-acetaminophen	Tablet	7.5-750mg	CHANGE	MDS = 7 days; QL = 5 tabs/day
Hydrocodone-acetaminophen	Hydrocodone-acetaminophen	Oral Solution	7.5-325mg/15mL	CHANGE	MDS = 7 days; QL = 180mL/day
Hydrocodone-acetaminophen	Hydrocodone-acetaminophen	Oral Solution	7.5-500mg/15mL	CHANGE	MDS = 7 days; QL = 120mL/day
Hydromorphone HCl	Hydromorphone HCl	Tablet	2mg; 4mg	CHANGE	MDS = 7 days; QL = 6 tabs/day
Hydromorphone HCl	Hydromorphone HCl	Tablet	8mg	CHANGE	MDS = 7 days; QL = 4 tabs/day
Hydromorphone HCl	Hydromorphone HCl	Suppository	3mg	CHANGE	MDS = 7 days; QL = 2 supp/day
Meperidine HCl	Meperidine HCl	Tablet	50mg; 100mg	CHANGE	MDS = 7 days; QL = 6 tabs/day

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Meperidine HCl	Meperidine HCl	Oral Solution	50mg/5mL	CHANGE	MDS = 7 days; QL = 30mL/day
Morphine sulfate (concentrate)	Morphine sulfate (concentrate)	Oral Solution	20 mg/mL	CHANGE	MDS = 7 days; QL = 60mL/7 days
Morphine sulfate	Morphine sulfate	Oral Solution	SOLN 10; SOLN 20	CHANGE	MDS = 7 days; QL = 100mL/7 days
Morphine sulfate	Morphine sulfate	Suppository	5mg; 10mg; 20mg; 30mg	CHANGE	MDS = 7 days; QL = 6 supp/7 days
Morphine sulfate	Morphine sulfate	Tablet	15mg; 30mg	CHANGE	MDS = 7 days; QL = 6 tabs/day
Morphine sulfate	Morphine sulfate	Oral Solution	100mg/5mL (20 mg/mL)	CHANGE	MDS = 7 days; QL = 60mL/7 days
Oxycodone HCl	Oxycodone HCl	Capsule	5mg	CHANGE	MDS = 7 days; QL = 6 caps/day
Oxycodone HCl	Oxycodone HCl	Tablet	5mg; 10mg; 15mg; 20mg	CHANGE	MDS = 7 days; QL = 6 tabs/day
Oxycodone HCl (concentrate)	Oxycodone HCl (concentrate)	Oral Solution	100mg/5mL (20 mg/mL)	CHANGE	MDS = 7 days; QL = 30mL/7 days
Oxycodone HCl	Oxycodone HCl	Oral Solution	5mg/5mL	CHANGE	MDS = 7 days; QL = 30mL/day
Oxycodone HCl	Oxycodone HCl	Tablet	30mg	CHANGE	MDS = 7 days; QL = 4 tabs/day
Oxycodone w/ acetaminophen	Oxycodone w/ acetaminophen	Capsule	5-500mg	CHANGE	MDS = 7 days; QL = 6 caps/day
Oxycodone w/ acetaminophen	Oxycodone w/ acetaminophen	Tablet	5-325mg; 7.5-325mg; 7.5-500mg; 10-325mg; 10-650mg	CHANGE	MDS = 7 days; QL = 6 tabs/day
Oxycodone-aspirin	Oxycodone-aspirin	Tablet	4.8355-325mg	CHANGE	MDS = 7 days; QL = 6 tabs/day
Roxicet	Roxicet	Oral Solution	5-325mg/5mL	CHANGE	MDS = 7 days; QL = 30mL/day
Tramadol HCl	Tramadol HCl	Tablet	50mg	CHANGE	MDS = 7 days; QL = 4 tabs/day AL = at least 18 years old
Tramadol-acetaminophen	Tramadol-acetaminophen	Tablet	37.5-325mg	CHANGE	MDS = 7 days; QL = 4 tabs/day AL = at least 18 years old

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](http://www.pshp.com)  
 For more information on these programs, please visit our website at [www.pshp.com](http://www.pshp.com), or refer to the Peach State Health Plan member handbook.