Effective date: June 22, 2020

Peach State Health Plan Preferred Drug List (PDL) Updates – Q2-2020



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. Generic products are preferred.

Drug Name	Ingredients	Dosage Form	Strength	UPDATE	Notes
GVOKE	Glucagon	SubQ Injection (Prefilled Syringe)	0.5 MG/0.1ML; 1 MG/0.2ML	ADD	Add to PDL QL = 0.02mL/day (one pen/28 days)
NAYZILAM	Midazolam	Nasal Spray	5 MG/0.1 ML	ADD	Add to PDL QL = 10 bottles/30 days (2 packages)
APRISO	Mesalamine	Capsule (Sustained Release 24HR)	0.375 GM	ADD	Add to PDL
DELZICOL	Mesalamine	Capsule (Delayed Release)	400 MG	ADD	Add to PDL

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.