


























PHARMACY BENEFIT UPDATE

WINTER 2019

Preferred Drug List (PDL) News:


This issue of the Pharmacy Benefit Updates contains January 1, 2020 changes to the Preferred Drug List.


PREFERRED			
Afstyla	Aimovig 	Asacol HD	Avonex Pre-filled Syringes and Auto-Injector
Azopt	Carbidopa/Levodopa/Entacapone	Cinryze 	Clobazam tablets and suspension
Colchicine capsules (labeler 00143 only)	Combivent Respimat	Dexamethasone Sodium Phosphate 0.1% Ophthalmic Solution	Diclofenac 1% Gel
Diclofenac 0.1% Ophthalmic Solution	Diclofenac 1.5% Topical Solution	Dysport 	Esomeprazole
Famotidine Oral Suspension (Age ≤ 2 years)	Firazyr 	FML Forte 0.25% Ophthalmic Suspension	Hemangeol 
Ixinity	Lidocaine 4% Patch (OTC) Available NDCs: 46122045021 00536120215 70000036601	Mesalamine Suppositories	Methylphenidate SA OSM (authorized generic for Concerta) labeler 10147 ONLY
Nevanac Ophthalmic Suspension	Pentasa CR 500mg	Perseris	Pimecrolimus (authorized generic for Elidel) labeler 68682 ONLY
Pregabalin	Profilnine	Promacta	Rixubis
Ruconest 	Sevelamer Carbonate Tablets	Solifenacin	Takhzyro 
Utibron Neohaler	Venlafaxine IR	Xarelto 2.5mg 	XTampza ER
Zyprexa Relprevv			

NON-PREFERRED			
Abilify Maintena 	Aricept 23mg	Bupropion XL 450mg	Canasa Suppositories
Clomipramine 	Clonidine ER 	Comtan	Daytrana Patches 
Delzicol	Donezepil 23mg	Donezepil ODT 	Elidel
Exelon Patch 	Flurbiprofen 0.03% Ophthalmic Solution	Fondaparinux	Fosrenol
Galantamine ER Capsules 	Galantamine Tablets 	Humulin N U-100 	Humulin R U-100 
Humulin 70/30 	Gynazole-1	Ilevro Ophthalmic Suspension	Lansoprazole ODT
Lotemax SM	Lupaneta Pack	Lyrica Capsules	Methylphenidate Chewable Tablets 
Naproxen Tablets 275mg and 550mg	Naproxen Oral Suspension	Neupro Patch 	Nizatidine
Novolin N U-100 	Novolin R U-100 	Novolin 70/30 	Pred-G Ophthalmic Suspension
Procrit	Protriptyline 	Renagel	Rivastigmine Capsules 
Sklice	Stavelo	Terconazole Vaginal Cream and Suppositories	Tudorza Pressair
Uloric	Vandazole Vaginal Gel		

To review the complete PDL please refer to:
<http://dvha.vermont.gov/for-providers/preferred-drug-list-clinical-criteria>

Note:

 Indicates that current users will be grandfathered.

 Indicates that the drug will require a clinical Prior Authorization