



The Drug Utilization Review Board Reviewed the Following New Drugs and Supplemental Rebate Classes on March 26, 2015

The Georgia Medicaid Fee-for-Service Drug Utilization Review (DUR) Board has conducted its clinical and financial evaluations and provided its recommendations for the Department of Community Health's (DCH) final decisions on the following new drugs and supplemental rebate classes for the Georgia Medicaid Fee-for-Service Preferred Drug List (PDL). Supplemental rebate drugs with a recommendation for change in PDL status are highlighted below. The recommendations on all other supplemental rebate drugs remained the same as the current PDL status, which is located at <http://dch.georgia.gov/preferred-drug-lists>.

Anticonvulsants

The DUR Board recommended **Preferred** status for *Gabapentin (Oral) Solution*, **Preferred** status with **Prior Authorization** for *Oxtellar[®] XR (Oral) Tablet* and *Qudexy[®] XR (Oral) Capsule*, **Non-Preferred** status for *Felbatol (Oral) Tablet* and **Non-Preferred** status with **Prior Authorization** for *Aptiom[®] (Oral) Tablet*.

Antidiabetics, Non-Insulin

The DUR Board recommended **Preferred** status with **Prior Authorization** for *Tradjenta[®] (Oral) Tablet*, *Jentadueto[®] (Oral) Tablet*, *Bydureon[®] (Subcutaneous) Vial* and *Tanzeum[™] Subcutaneous) Pen* and **Non-Preferred** status with **Prior Authorization** for *Cycloset[®] (Oral) Tablet*, *Jardiance[®] (Oral) Tablet*, *Byetta[®] (Subcutaneous) Pen*, *Trulicity[™] (Subcutaneous) Pen* and *Victoza[®] (Subcutaneous) Pen with grandfathering for Victoza[®]*.

Bronchodilators, Anticholinergics

The DUR Board recommended **Preferred** status for *Ipratropium/Albuterol (Inhalation) Ampule* and **Non-Preferred** status with **Prior Authorization** for *Anoro[®] Ellipta[®] (Inhalation) Blister with Device* and *Incruse[®] Ellipta[®] (Inhalation) Blister with Device*.

Bronchodilators, Steroid Inhalants

The DUR Board recommended **Preferred** status for *Aerospan[®] (Inhalation) HFA Aerosol* and **Non-Preferred** status with **Prior Authorization** for *Asmanex[®] HFA (Inhalation) Aerosol*.

Bronchodilators, Sympathomimetics

The DUR Board recommended **Preferred** status with **Prior Authorization** for *Brovana[®] (Inhalation) Vial* and **Non-Preferred** status with **Prior Authorization** for *Albuterol Sulfate (Oral) Tablet*, *Serevent[®] Diskus[®] (Inhalation) Blister with Device* and *Striverdi[®] Respimat[®] (Inhalation) Inhaler*.

Biologic Immunomodulators

The DUR Board recommended **Non-Preferred** status with **Prior Authorization** for *Otezla[®] (Oral) Tablet* and *Stelara[®] (Subcutaneous) Syringe*.



Platelet Aggregation Inhibitors

The DUR Board recommended *Non-Preferred* status with *Prior Authorization* for *Zontivity® (Oral) Tablet*.

Antivirals, Hepatitis C Agents

The DUR Board recommended *Preferred* status with *Prior Authorization* for *Harvoni® (Oral) Tablet* and *Non-Preferred* status with *Prior Authorization* for *Viekira™ Pak (Oral) Tablet Dose Pack*.

Multiple Sclerosis (MS) Agents

The DUR Board recommended *Preferred* status for *Tecfidera® (Oral) Capsule*, *Preferred* status with *Prior Authorization* for *Ampyra® (Oral) Tablet* and *Non-Preferred* status with *Prior Authorization* for *Plegridy™ (Subcutaneous)*.

Inflammatory Bowel Agents

The DUR Board recommended *Preferred* status for *Pentasa® (Oral) Capsule 500 MG* and *Non-Preferred* status with *Prior Authorization* for *Uceris® (Oral) Tablet* and *SFRowasa® (Rectal) Enema*.

Antihyperlipidemics

The DUR Board recommended *Preferred* status for *Fenofibrate (Oral) Capsules* and *Vytorin® (Oral) Tablet* and *Non-Preferred* status with *Prior Authorization* for *Colestipol (Oral) Granules/Packets*, *Prevalite® (Oral) Packets* and *Trilipix® (Oral) Capsule*.

Antihypertensives, Angiotensin Receptor Blocker-Calcium Channel Blocker Combinations

The DUR Board recommended *Preferred* status with *Prior Authorization* for *Azor® (Oral) Tablet* and *Tribenzor® (Oral) Tablet*.

Antihypertensives, Angiotensin Receptor Blockers

The DUR Board recommended *Preferred* status for *Atacand® (Oral) Tablet*, *Benicar®/Benicar® HCT (Oral) Tablets*, *Diovan® (Oral) Tablet*, *Irbesartan/Irbesartan HCTZ (Oral) Tablets*, *Micardis®/Micardis® HCT (Oral) Tablets* and *Valsartan HCTZ (Oral) Tablet*.

Corticosteroids, Oral

The DUR Board recommended *Non-Preferred* status with *Prior Authorization* for *Veripred® 20 (Oral) Solution*.

Dermatologics, Scabicides-Pediculocides

The DUR Board recommended *Preferred* status with *Prior Authorization* for *Natroba® (Topical) Suspension* and *Non-Preferred* status with *Prior Authorization* for *Ulesfia® (Topical) Lotion*.



Digestive Enzymes

The DUR Board recommended *Non-Preferred* status with *Prior Authorization* for *Zenpep® (Oral) Capsule with grandfathering*.

Migraine Products

The DUR Board recommended *Preferred* status for *Relpax® (Oral) Tablet*.

Multivitamins, Prenatal

The DUR Board recommended *Prenate® DHA Products* as the *Sole Preferred Prenatal Vitamins with DHA*.

Nasal Steroids

The DUR Board recommended *Non-Preferred* status with *Prior Authorization* for *Beconase® AQ (Nasal) Spray* and *Qnasl® (Nasal) Aerosol*.

Ophthalmics, Antiinfectives

The DUR Board recommended *Preferred* status for *Zymaxid® (Ophthalmic) Drops*.

Ophthalmics, Antiinflammatories

The DUR Board recommended *Non-Preferred* status with *Prior Authorization* for *Nevanac® (Ophthalmic) Drops Suspension*.

Opioid Agonists, Partial Agonist

The DUR Board recommended *Preferred* status with *Prior Authorization* for *Bunavail® (Buccal) Film with step of Suboxone® (Sublingual) Film* and *Non-Preferred* status with *Prior Authorization* for *Zubsolv® (Sublingual) Tablet*.

Urinary Prostatic Hypertrophy

The DUR Board recommended *Preferred* status for *Alfuzosin (Oral) Tablet*.

Attention Deficit Hyperactivity Disorder Agents

The DUR Board recommended *Preferred* status with *Prior Authorization* for *Quillivant® XR (Oral) Suspension* and *Strattera® (Oral) Capsule*.