

GEORGIA MEDICAID FEE-FOR-SERVICE CONTRACEPTIVES PA SUMMARY

Preferred	Non-Preferred
All generics (Drug Group 25************************************	Amethia lo, camrese lo, levonorgestrel/ethinyl estradiol lo and all
Contraceptives) unless otherwise noted	generics for LoSeasonique
Blisovi fe, microgestin fe and all generics for Loestrin FE	Amethia, camrese, levonorgestrel/ethinyl estradiol and all generics for Seasonique
Camila, norethindrone and all generics for Ortho	Amethyst and all generics for Lybrel
Micronor	Annovera (segesterone acetate & ethinyl estradiol vaginal system)
LoSeasonique	Aranelle, leena and all generics for Tri-Norinyl
Seasonique	Balcoltra
Trinessa lo generic	Drospirenone/ethinyl estradiol, ocella, zarah and all generics for
Nuvaring (etonogestrel/ethinyl estradiol vaginal ring)	Yasmin
	Drospirenone/ethinyl estradiol, gianvi and all generics for Yaz
	Drospirenone/ethinyl estradiol/levomefolate and all generics for
	Beyaz
	ethynodiol diacetate/ethinyl estradiol 1/50 and all generics for
	Demulen 1/50
	Layolis fe chew, norethindrone/ethinyl estradiol/fe chew and all
	generics for Generess FE Chew
	Lo Loestrin FE
	Minastrin 24 FE Chew
	Natazia
	Nextstellis (drospirenone/estetrol)
	Phexxi (lactic acid/citric acid/potassium bitartrate vaginal gel)
	Quartette
	Safyral
	Slynd Tri Le amintee tri le esteralle tri le merrie end ell concrise for
	Tri-Lo sprintec, tri-lo estarylla, tri-lo marzia and all generics for Ortho Tri-Cyclen Lo EXCEPT trinessa lo
	Twirla (levonorgestrel/ethinyl estradiol transdermal system)
	Tyblume (levonorgestrel/ethinyl estradiol)
	Wymzya fe chew, norethindrone/ethinyl estradiol/fe chew and all
	generics for Femcon FE Chew
	Xulane and all generics for Ortho Evra (norelgestromin and ethinyl
	estradiol transdermal system)

LENGTH OF AUTHORIZATION: 1 year

PA CRITERIA:

Amethia Lo, Camrese Lo, Levonorgestrel/Ethinyl Estradiol Lo and All Generics for LoSeasonique

 Prescriber must submit a written letter of medical necessity stating the reasons the preferred product, brand LoSeasonique, is not appropriate for the member.

Amethia, Camrese, Levonorgestrel/Ethinyl Estradiol and All Generics for Seasonique

Prescriber must submit a written letter of medical necessity stating the reasons the preferred product, brand Seasonique, is not appropriate for the member.

<u>Annovera</u>



GEORGIA DEPARTMENT OF COMMUNITY HEALTH

- ✤ Approvable for members who are unable to swallow solid oral medications and have an intolerable side effect to Nuvaring.
- Approvable for members who are able to swallow solid oral medications and have intolerable side effects to at least two preferred contraceptives, one of which much be Nuvaring.

Layolis FE Chew, Norethindrone/Ethinyl Estradiol/FE Chew and All Generics for Generess FE Chew; Minastrin 24 FE Chew; Wymza FE Chew, Norethindrone/Ethinyl Estradiol/FE Chew and All Generics for Femcon FE Chew, Tyblume

✤ Approvable for members who are unable to swallow solid oral medications or have intolerable side effects to at least two preferred oral contraceptives.

<u>Lo Loestrin FE</u>

 Prescriber must submit a written letter of medical necessity stating the reasons the preferred products, all generics for Loestrin FE, are not appropriate for the member.

<u>Phexxi</u>

- Approvable for members who have allergies, contraindications, drug-drug interactions or intolerable side effects to hormonal contraceptives.
- Approvable for members who have an allergy, contraindication or intolerable side effect to spermacide or who have a partner that has an allergy, contraindication or intolerable side effect to spermacide.

<u>Slynd</u>

Approvable for members who have an allergy, contraindication, drug-drug interaction or intolerable side effect to estrogen-containing oral contraceptives and have an intolerable side effect to norethindrone or for members who have intolerable side effects to at least two preferred oral contraceptives.

<u>Tri-Lo Sprintec, Tri-Lo Estarylla, Tri-Lo Marzia and All Generics for Ortho-Tri-Cyclen Lo EXCEPT</u> <u>Trinessa Lo</u>

 Prescriber must submit a written letter of medical necessity stating the reasons the preferred product, generic Trinessa Lo, is not appropriate for the member.

Twirla, Xulane and All Generics for Ortho Evra

- ✤ Approvable for members who are unable to swallow solid oral medications and have an intolerable side effect to Nuvaring or is not a candidate for vaginal ring contraception.
- Approvable for members who are able to swallow solid oral medications and have intolerable side effects to at least two preferred oral contraceptives.

All Other Non-Preferred Products

Approvable for members with intolerable side effects to at least two preferred oral contraceptives.

EXCEPTIONS:

- Exceptions to these conditions of coverage are considered through the prior authorization process.
- The Prior Authorization process may be initiated by calling **OptumRx at 1-866-525-5827.**



PREFERRED DRUG LIST:

• For online access to the Preferred Drug List (PDL), please go to <u>http://dch.georgia.gov/preferred-drug-lists</u>.

PA and APPEAL PROCESS:

• For online access to the PA process, please go to <u>http://dch.georgia.gov/prior-authorization-process-and-criteria</u> and click on Prior Authorization (PA) Request Process Guide.

QUANTITY LEVEL LIMITATIONS:

• For online access to the current Quantity Level Limits (QLL), please go to <u>www.mmis.georgia.gov/portal</u>, highlight Pharmacy and click on <u>Other Documents</u>, then select the most recent quarters QLL List.