

Listed below are Preferred Drug List changes for the State of Georgia Fee-For-Service Medicaid and PeachCare for Kids Programs

Effective July 1, 2022 (see chart below)*

DCH rebate vendor Magellan Medicaid Administration (MMA) has reviewed 2022 supplemental rebate offers with DCH and also reviewed specific drug categories at the May 2022 DURB meeting. The Preferred Drug List (PDL)/Provider's Administered Drug List (PADL) decisions or changes for new drugs or categories reviewed are outlined below. **Those drugs highlighted in red indicate a change from current PDL status.** For a full listing of our PDL, go to www.dch.georgia.gov/pharmacy and select the "preferred product list" option.

PREFERRED AGENTS	NON-PREFERRED AGENTS
ALZHEIMER'S AGENTS	
	ADUHELM (INTRAVEN) (PADL)
ANTIMIGRAINE AGENTS, OTHER	
QULIPTA (ORAL)	
UBRELVY (ORAL)	
ANTIPSYCHOTICS	
	LYBALVI (ORAL)
BIOLOGIC IMMUNOMODULATORS	
ENBREL VIAL (SUBCUTANEOUS)	
KEVZARA PEN (SUBCUTANEOUS)	
KEVZARA SYRINGE (SUBCUTANEOUS)	
TALTZ AUTOINJECTOR (SUBCUTANE.)	
TALTZ SYRINGE (SUBCUTANE.)	
XELJANZ SOLUTION (ORAL)	
GROWTH HORMONE	
	SKYTROFA CARTRIDGE (SUBCUTANEOUS)
HEMOPHILIA TREATMENT	
HEMLIBRA (SUBCUTANE.)	
KOVALTRY (INTRAVEN.)	
HIV/AIDS	
CABENUVA (INTRAMUSC) (PADL)	
DELSTRIGO (ORAL)	
IMMUNOMODULATORS, ATOPIC DERMATITIS	

PREFERRED AGENTS	NON-PREFERRED AGENTS
	OPZELURA (TOPICAL)
OPHTHALMICS, ANTI-INFLAMMATORY/IMMUNOMODULATOR	
	TYRVAYA SPRAY (NASAL)
OPIOID DEPENDENCY AGENTS	
KLOXXADO SPRAY (NASAL) (PDL & PADL)	
POTASSIUM BINDERS	
VELTASSA (ORAL)	
UTERINE DISORDER TREATMENTS	
MYFEMBREE (ORAL)	

*PADL drugs may be subject to a different effective date.