

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

Effective July 1, 2024 (see chart below)*

DCH rebate vendor, Magellan Medicaid Administration (MMA), has reviewed specific drugs at the April 2024 DURB meeting and corresponding supplemental rebate offers. The Preferred Drug List (PDL)/Providers' Administered Drug List (PADL) decisions/changes for categories reviewed are outlined below. For a full listing of our PDL, go to www.dch.georgia.gov/pharmacy and select the "Preferred Drug Lists" option; for the PADL, go to <https://www.mmis.georgia.gov/portal/> and select "Provider Information", "Fee Schedule", then "Providers' Administered Drug List."

PREFERRED AGENTS	NON-PREFERRED AGENTS
ANTIDEPRESSANTS, OTHER	
	ZURZUVAE (ORAL) – PA
BIOLOGIC IMMUNOMODULATORS	
	LITFULO (ORAL) – PA
MACULAR DEGENERATION AGENTS	
	IZERVAY (INTRAOCULAR)* – PA
OPHTHALMICS, ANTI-INFLAMMATORY/IMMUNOMODULATOR	
	MIEBO (OPHTHALMIC) – PA

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