

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

Effective July 1, 2021 (see chart below)\*

DCH rebate vendor Magellan Medicaid Administration (MMA) has reviewed 2021 supplemental rebate offers with DCH and also reviewed specific drug categories at the May 2021 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](http://www.dch.georgia.gov/pharmacy) and select the "preferred product list" option.

PREFERRED AGENTS	NON-PREFERRED AGENTS
<b>ANTIMIGRAINE AGENTS, OTHER</b>	
AIMOVIG (SUBCUTANEOUS)	
NURTEC ODT (ORAL)	
	UBRELVY (ORAL)
<b>ANTIPARKINSONS AGENTS</b>	
	ONGENTYS (ORAL)
<b>DUCHENNE MUSCULAR DYSTROPHY TREATMENTS</b>	
	VILTEPSO (INTRAVEN) (PADL)
<b>HEPATITIS C TREATMENT</b>	
SOFOSBUVIR/VELPATASVIR (AG) (ORAL)	
<b>HIV/AIDS</b>	
	DOVATO (ORAL)
	JULUCA (ORAL)
	NORVIR TABLET (ORAL)
	TRIUMEQ (ORAL)
<b>MULTIPLE SCLEROSIS AGENTS</b>	
	AUBAGIO (ORAL)
	GILENYA (ORAL)
	KESIMPTA (SUBCUTANE.)
<b>VASODILATORS, CORONARY</b>	
	VERQUVO (ORAL)

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