



**GEORGIA MEDICAID FEE-FOR-SERVICE
OPHTHALMICS, ANTIINFLAMMATORIES PA SUMMARY**

Preferred	Non-Preferred
<i>Ophthalmic Corticosteroids</i>	
Alex (loteprednol suspension 0.2%) Dexamethasone solution Durezol (difluprednate emulsion) Flarex (fluorometholone suspension 0.1%) Fluorometholone suspension 0.1% generic FML (fluorometholone ointment 0.1%) FML Forte (fluorometholone suspension 0.25%) Lotemax Ointment (loteprednol ointment 0.5%) Maxidex (dexamethasone suspension) Pred Mild (prednisolone suspension 0.12%) Prednisolone solution, suspension 1% generic	Lotemax Gel (loteprednol gel 0.5%) Lotemax SM Gel (loteprednol gel 0.38%) Loteprednol suspension 0.5% generic by Oceanside (NDCs 68682-0299-##)
<i>Ophthalmic Nonsteroidal Anti-inflammatory Drugs (NSAIDs)</i>	
Diclofenac sodium 0.1% generic Ketorolac tromethamine 0.4%, 0.5% generic	Acuvail (ketorolac tromethamine 0.45%) Bromfenac 0.09% generic BromSite (bromfenac 0.075%) Ilevro (nepafenac 0.3%) Nevanac (nepafenac 0.1%) Prolensa (bromfenac 0.07%)

LENGTH OF AUTHORIZATION: 1 month

PA CRITERIA:

Lotemax Gel, Lotemax SM Gel and Loteprednol Suspension 0.5% Generic by Oceanside

- ❖ Prescriber must submit a written letter of medical necessity stating the reasons the preferred products, Lotemax Ointment, Alex and at least one other preferred ophthalmic corticosteroid, are not appropriate for the member.

Acuvail

- ❖ Prescriber must submit a written letter of medical necessity stating the reasons the preferred products, ketorolac generic as well as diclofenac generic, are not appropriate for the member.

Non-Preferred Ophthalmic NSAIDs

- ❖ Approvable for members who have experienced inadequate response, allergies, contraindications, drug-drug interactions or intolerable side effects to diclofenac generic and ketorolac generic.

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 <http://dch.georgia.gov/preferred-drug-lists>.

PA AND APPEAL PROCESS:

- For online access to the PA process, please go to www.dch.georgia.gov/prior-authorization-process-and-criteria 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 www.mmis.georgia.gov/portal, highlight Pharmacy and click on [Other Documents](#), then select the most recent quarters QLL list.