

Mississippi Division Of Medicaid
Provider Notice of Preferred Drug List Changes
P&T Meeting Date: November 02, 2017
PDL Changes Effective Date: January 01, 2018



The following changes will be made to the Preferred Drug List (PDL), effective January 1, 2018, pending recommendation and/or approval by the P&T Committee, DOM, and DOM's Executive Director.

For a comprehensive PDL, refer to <http://www.medicaid.ms.gov/providers/pharmacy/preferred-drug-list/>.

NEW PREFERRED DRUGS	
THERAPEUTIC CLASS	RECOMMENDED for PREFERRED STATUS
ALZHEIMER'S AGENTS	galantamine ER
ANDROGENIC AGENTS	ANDRODERM (testosterone patch)
ANDROGENIC AGENTS	testosterone gel packets
ANTICONVULSANTS	TRILEPTAL Suspension (oxcarbazepine)
ANTIFUNGALS (VAGINAL)	terconazole
ANTIMIGRAINE AGENTS, TRIPTANS	eletriptan
ANTIPSYCHOTICS	SAPHRIS (asenapine)
ANTIPSYCHOTICS	quetiapine XR
ANTIRETROVIRALS	abacavir/lamivudine
ANTIRETROVIRALS	ODEFSEY (emtricitabine/rilpivirine/tenofovir AF)
BLADDER RELAXANT PREPARATIONS	TOVIAZ (fesoterodine fumarate)
GLUCOCORTICOIDS (Inhaled)	budesonide 0.25mg and 0.5mg
GLUCOCORTICOIDS (Inhaled)	PULMICORT (budesonide) Flexhaler
HEPATITIS C TREATMENTS	MAVYRET (glecaprevir/pibrentasvir) [∞]
HYPERURICEMIA & GOUT	colchicine capsule
HYPOGLYCEMICS, MEGLITINIDES	nateglinide
HYPOGLYCEMICS, SODIUM GLUCOSE COTRANSPORTER-2 INHIBITORS	FARXIGA (dapaglifozin)
IRRITABLE BOWEL SYNDROME/SHORT BOWEL SYNDROME AGENTS/SELECTED GI AGENTS	AMITIZA (lubiprostone)
IRRITABLE BOWEL SYNDROME/SHORT BOWEL SYNDROME AGENTS/SELECTED GI AGENTS	LINZESS (linaclotide)
IRRITABLE BOWEL SYNDROME/SHORT BOWEL SYNDROME AGENTS/SELECTED GI AGENTS	VIBERZI (eluxadoline)
MISCELLANEOUS BRAND/GENERIC	epinephrine autoinject pens (labeler 49502)
OPHTHALMIC ANTIBIOTICS	TOBEX ointment (tobramycin)
OPHTHALMIC ANTIBIOTICS	ZYLET (loteprednol/tobramycin)
OTIC ANTIBIOTICS	CIPRO HC (ciprofloxacin/hydrocortisone)
OTIC ANTIBIOTICS	COLY-MYCIN S (colistin/neomycin/hydrocortisone)
OTIC ANTIBIOTICS	ofloxacin
STIMULANTS AND RELATED AGENTS	APTENSIO XR (methylphenidate)

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THERAPEUTIC CLASS	RECOMMENDED for PREFERRED STATUS
STIMULANTS AND RELATED AGENTS	armodafil
STIMULANTS AND RELATED AGENTS	methylphenidate CD (generic Metadate CD)
STIMULANTS AND RELATED AGENTS	modafinil
STIMULANTS AND RELATED AGENTS	atomoxetine

NEW NON-PREFERRED DRUGS	
THERAPEUTIC CLASS	RECOMMENDED for NON-PREFERRED STATUS
ANALGESICS, NARCOTIC - SHORT ACTING	IBUDONE (hydrocodone/ibuprofen)
ANALGESICS, NARCOTIC - LONG ACTING	BUTRANS (buprenorphine)
ANDROGENIC AGENTS	ANDROGEL (testosterone gel)
ANTICONSULSANTS	lamotrigine ER
ANTICONSULSANTS	oxcarbazepine suspension
ANTICONSULSANTS	ROWEEPRA (levetiracetam)
ANTICONSULSANTS	topiramate ER (generic Qudexy XR)
ANTIEMETICS	SYNDROS (dronabinol)
ANTIMIGRAINE AGENTS, TRIPTANS	RELPAK (eletriptan)
ANTINEOPLASTICS – SELECTED SYSTEMIC ENZYME INHIBITORS	XATMEP (methotrexate)
ANTIPSYCHOTICS	aripiprazole solution
ANTIPSYCHOTICS	chlorpromazine
ANTIRETROVIRALS	ZIAGEN (abacavir sulfate)
ANTIRETROVIRALS	EPZICOM (abacavir/lamivudine)
BLADDER RELAXANT PREPARATIONS	VESICARE (solifenacin)
BONE RESORPTION SUPPRESSION AND RELATED AGENTS	TYMLOS (abaloparatide)
BRONCHODILATORS & COPD AGENTS	SEEBRI (glycopyrrolate)
COLONY STIMULATING FACTORS	NEUPOGEN Syringe and Vial (filgrastim)
CYTOKINE & CAM ANTAGONISTS	KEVZARA (sarilumab)
CYTOKINE & CAM ANTAGONISTS	RENFLIXIS (infliximab-abda)
CYTOKINE & CAM ANTAGONISTS	SILIQ (brodalumab)
CYTOKINE & CAM ANTAGONISTS	TREMFYA (guselkumab)
GLUCOCORTICOIDS (Inhaled)	ARMONAIR RESPICLICK (fluticasone)

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THERAPEUTIC CLASS	RECOMMENDED for NON-PREFERRED STATUS
GLUCOCORTICOIDS (Inhaled)	ASMANEX TWISTHALER (mometasone)
GLUCOCORTICOIDS (Inhaled)	QVAR (beclomethasone dipropionate)
GLUCOCORTICOIDS (Inhaled)	QVAR Redihaler (beclomethasone dipropionate)
GLUCOCORTICOIDS (Inhaled)	PULMICORT (budesonide) Respules
GROWTH HORMONE	OMNITROPE (somatropin)
HEPATITIS C TREATMENTS	HARVONI (ledipasvir/sofosbuvir) [∞]
HEPATITIS C TREATMENTS	SOVALDI (sofosbuvir) [∞]
HEPATITIS C TREATMENTS	TECHNIVIE (ombitasvir/paritaprevir/ritonavir) [∞]
HEPATITIS C TREATMENTS	VIEKIRA (ombitasvir/paritaprevir/ritonavir) [∞]
HEPATITIS C TREATMENTS	VIEKIRA XR (ombitasvir/paritaprevir/ritonavir) [∞]
HEPATITIS C TREATMENTS	VOSEVI (sofosbuvir/velpatasvir/voxilaprevir) [∞]
HEREDITARY ANGIOEDEMA	HAEGARDA (C1 esterase inhibitor)
HYPERURICEMIA & GOUT	DUZALLO (lesinurad/allopurinol)
HYPERURICEMIA & GOUT	MITIGARE (colchicine)
HYPOGLYCEMICS, DPP4s and COMBINATONS	JENTADUETO XR (linagliptin/metformin)
HYPOGLYCEMICS, INSULINS AND RELATED AGENTS	HUMALOG JR (insulin lispro)
IRON CHELATING AGENTS	JADENU SPRINKLES (deferasirox)
MISCELLANEOUS BRAND/GENERIC	EPIPEN (epinephrine)
MISCELLANEOUS BRAND/GENERIC	EPIPEN JR (epinephrine)
NSAIDS	naproxen 275mg and 550mg
OTIC ANTIBIOTICS	ciprofloxacin
PANCREATIC ENZYMES	pancrelipase
PARATHYROID AGENTS	ZEMPLAR (paricalcitol)
PRENATAL VITAMINS	CITRANATAL 90 DHA PACK
PRENATAL VITAMINS	CITRANATAL ASSURE COMBO PACK
PRENATAL VITAMINS	CITRANATAL B-CALM PACK
PRENATAL VITAMINS	CITRANATAL DHA PACK
PRENATAL VITAMINS	CITRANATAL HARMONY Capsule
PRENATAL VITAMINS	CITRANATAL RX Tablet
PULMONARY ANTIHYPERTENSIVES	LETAIRIS (ambrisentan)
STIMULANTS AND RELATED AGENTS	ADZENYS XR ODT (amphetamine)
STIMULANTS AND RELATED AGENTS	DAYTRANA (methylphenidate)
STIMULANTS AND RELATED AGENTS	MYDAYIS (amphetamine salt combination)
STIMULANTS AND RELATED AGENTS	PROVIGIL (modafinil)
STIMULANTS AND RELATED AGENTS	STRATTERA (atomoxetine)
ULCERATIVE COLITIS and CROHN'S AGENTS	PENTASA 250mg (mesalamine)

Users as of December 31, 2017 will be grandfathered.