

Preferred Drug List Updates

Effective: April 1, 2016

Molina Healthcare regularly reviews and updates the Preferred Drug List (PDL). Items may be added, removed or changed. Below is the list of updates made to the PDL this quarter.

Some items require a prior authorization (PA). View the PA List to see which drugs require PA.

For a complete list of benefits, visit the Molina Healthcare website at www.MolinaHealthcare.com/Providers/OH under the "Rx Info" tab or call Provider Services at (855) 322-4079.

Brand	Generic	Dosage Form	Strength	Update	Notes
Diovan	Valsartan	Tablet	40mg; 80mg; 160mg; 320mg	Changed	Changed to PA not required
Diovan HCT	Valsartan/ Hydrochlorothiazide	Tablet	80-12.5mg; 160-12.5mg; 160-25mg; 320- 12.5mg; 320- 25mg	Changed	Changed to PA not required
Avapro	Irbesartan	Tablet	75mg; 150mg; 300mg	Changed	Changed to PA not required
Maxalt	Rizatriptan	Tablet	5mg; 10mg	Changed	Changed to PA not required
Maxalt MLT	Rizatriptan	Orally Disintegrating Tablet	5mg; 10mg	Changed	Changed to PA not required
	Acidophilus	Tablet		Added	Added to PDL
Levemir Flextouch	Insulin Detemir	Solution for Injection	100units/mL	Added	Added to PDL
Daklinza Tablet	Daclatasvir	Tablet	30mg; 60mg	Added	Added to PA List
Praluent	Alirocumab	Solution for Injection	75mg/mL; 150mg/ mL	Added	Added to PA List
Technivie	Ombitasvir; Paritaprevir; Ritonavir	Tablet	12.5-75-50mg	Added	Added to PA List
Entresto Tablet	Sacubitril; Valsartan	Tablet	24-26mg; 49- 51mg; 97-103mg	Added	Added to PA List
Synjardy Tablet	Empagliflozin; Metformin	Tablet	5-500mg; 5-1000mg; 12.5- 500mg; 12.5- 1000mg	Added	Added to PA List
Orkambi	Lumacaftor; Ivacaftor	Tablet	200-125mg	Added	Added to PA List
Keveyis Tablet	Dichlorphenamide	Tablet	50mg	Added	Added to PA List
Repatha	Evolocumab	Solution for Injection	140mg/mL	Added	Added to PA List
Rexulti Tablet	Brexipiprazole	Tablet	0.25mg; 0.5mg; 1mg; 2mg; 3mg; 4mg	Added	Added to PA List



Brand	Generic	Dosage Form	Strength	Update	Notes
Fycompa 2MG Tablet	Perampanel	Tablet	2mg; 4mg; 6mg; 8mg; 10mg; 12mg	Added	Added to PA List
Copaxone	Glatiramer	Solution for Injection	40mg/1mL	Removed	Removed from PDL
Novolog Flexpen	Insulin Aspart	Solution for Injection	100units/mL	Added	Added to PDL
	Naloxone	Solution for Injection	1mg/1mL	Change	QL changed to 4mLs per 25 days
	Naloxone	Solution for Injection	0.4mg/mL	Change	QL changed to 2mLs per 25 days
Narcan	Naloxone	Nasal Spray	4mg/0.1mL	Change	QL changed to 2 units per 25 days
	Terbinafine	Tablet	250mg	Change	QL changed to tablets per 365 days
	Fenofibrate	Micronized Capsule	43mg	Added	Added to PDL with QL of 1 capsule per day
Incruse Ellipta	Umeclidinium	Inhalation Powder	62.5/actuation	Added	Added to PDL
Tradjenta	Linagliptin	Tablet	5mg	Changed	Changed to ST on PDL; Changed to ST on PA List
Jentadueto	Linagliptin; Metformin	Tablet	2.5mg/500mg; 2.5mg/850mg; 2.5mg/1000mg	Changed	Changed to ST on PDL; Changed to ST on PA List
Januvia	Sitagliptin	Tablet	25mg; 50mg; 100mg	Changed	Changed to ST on PDL; Changed to ST on PA List
Janumet	Sitagliptin; Metformin	Tablet	50mg/500mg; 50mg/1000mg	Changed	Changed to ST on PDL; Changed to ST on PA List
	Proparacaine Hydrochloride	Ophthalmic Solution	0.50%	Added	Added to PDL
	Naphazoline Hydrochloride	Ophthalmic Solution	0.10%	Added	Added to PDL
Priftin	Rifapentine	Tablet	150mg	Changed	Changed to PA not required
	Colchicine	Tablet	0.6mg	Changed	Changed to PA not required
Ritalin LA	Methylphenidate ER	Capsule	20mg; 30mg; 40mg	Added	Added to PDL