

## Provider Newsflash



A fax bulletin for the Molina Healthcare of Washington Provider Network

## **Drug Formulary Change Effective: October 1, 2019 (Medicaid)**

As we notified you in December 2017, the Health Care Authority (HCA) is creating a Preferred Drug List (PDL) for Apple Health (Medicaid) in partnership with managed care plans that serve Apple Health clients. As a continuation of those efforts, effective October 1, 2019, Molina Healthcare will make changes to the following drug classes to align with the HCA's PDL.

To find out which medications will be preferred, please see our 2019 formulary on our website at MolinaHealthcare.com on October 1, 2019.

ANTIBIOTICS: ANTI-INFECTIVE AGENTS - MISC - INHALED

**ANTIPARASITICS: SCABICIDES AND PEDICULICIDES** 

**DERMATOLOGICS: BURN PRODUCTS** 

ENDOCRINE AND METABOLIC AGENTS: ANABOLIC STEROIDS - ORAL

**ENDOCRINE AND METABOLIC AGENTS: CORTICOTROPIN** 

ENDOCRINE AND METABOLIC AGENTS: GROWTH HORMONE RECEPTOR ANTAGONISTS

ENDOCRINE AND METABOLIC AGENTS: GROWTH HORMONE RELEASING HORMONES (GHRH)

ENDOCRINE AND METABOLIC AGENTS: POSTERIOR PITUITARY HORMONES - INJECTABLE

**OPHTHALMIC AGENTS: OPHTHALMIC DECONGESTANTS** 

**OPHTHALMIC AGENTS: OPHTHALMIC NERVE GROWTH FACTORS** 

Thank you for your continued service to Molina members.