

Just the Fax

A fax bulletin from Molina Healthcare of Michigan (MHM) August 7, 2020

SINGLE PREFERRED DRUG LIST (PDL) ADDITIONAL INFORMATION

Molina Healthcare has modified the authorization requirements for certain medications in effort to assist providers and members with the transition to the Michigan Department of Health and Human Services' (MDHHS) Single Preferred Drug List (PDL) that goes into effective October 1, 2020.

Molina will allow certain medications that are listed on the Single PDL to be filled at the pharmacy without the need for prior authorization **effective immediately**. These medications include:

ADVAIR HFA INHALER	All strengths
BEVESPI AEROSPHERE	Inhaler
DULERA INHALER	All Strengths
ELIQUIS	All Strengths
ENTRESTO	All Strengths
FLOVENT HFA INHALER	All Strengths
HUMALOG	Vial, cartridge, kwikpen
HUMALOG JR.	Kwikpen
HUMALOG MIX 75/25 AND 50/50	Vial, Kwikpen
HUMULIN 70/30	Vial
LANTUS	Vial, Pen
PRADAXA	All Strengths
PROVENTIL HFA	Inhaler – generic covered
SPIRIVA	18mcg capsule HandiHaler
SYMBICORT	All strengths – generic covered
XARELTO	All Strengths

The change will enable providers to begin the required transition to new medications now instead of waiting to make the change on October 1, 2020 effective date.

Again, providers may refer to the MDHHS Medicaid Preferred Drug list: https://michigan.magellanrx.com/provider/external/medicaid/mi/doc/en-us/MIRx_PDL.pdf or can contact MDHHSPharmacyServices@michigan.gov or concerns.

If you have additional questions, please contact your Provider Service Representative at 248.729.0905 or email MHMProviderServicesMailbox@MolinaHealthcare.com