



**UnitedHealthcare Community Plan of New York
2nd Quarter 2019 Preferred Drug List Update**

UnitedHealthcare Community Plan’s Preferred Drug List (PDL) is updated quarterly by our Pharmacy and Therapeutics Committee. Please review the changes and update your references as necessary.

You may also view the changes at UHCprovider.com > Health Plans by State > Choose Your State > Medicaid (Community Plan) > Pharmacy Resources and Physician Administered Drugs.

We provided a list of available alternatives to UnitedHealthcare Community Plan members whose current treatment includes a medication removed from the PDL. Please provide affected members a prescription for a preferred alternative in one of the following ways:

- Call or fax the pharmacy.
- Use e-Script.
- Write a new prescription and give it directly to the member.

If a preferred alternative is not appropriate, please call **800-310-6826** for prior authorization for the UnitedHealthcare Community Plan member to remain on their current medication.

Changes will be effective April 1, 2019

PDL Additions

Brand Name	Generic Name	Comments	Applies to the following plans:
Aimovig™	Erenumab-aoee injection	Indicated for the preventative treatment of migraines. Prior authorization required.	CHIP Medicaid Essential Plan
Butrans®*	Buprenorphine patch	Indicated for the treatment of moderate to severe pain. Prior authorization required.	CHIP Medicaid Essential Plan
Emgality™	Galcanezumab-gnlm injection	Indicated for the preventative treatment of migraines. Prior authorization required.	CHIP Medicaid Essential Plan
Idhifa®	Enasidenib tablet	Indicated for the treatment of relapsed or refractory acute myeloid leukemia (AML). Prior authorization required. Available through specialty pharmacy.	CHIP Medicaid Essential Plan
Lokelma®	Sodium zirconium cyclosilicate suspension packet	Indicated for the treatment of chronic hyperkalemia. Prior authorization required.	CHIP Medicaid Essential Plan
Mulpleta®	Lusutrombopag tablet	Indicated for the treatment of thrombocytopenia in patients with chronic liver disease (CLD) who are scheduled to undergo a procedure. Prior authorization required. Available	CHIP Medicaid Essential Plan

		through specialty pharmacy.	
Olumiant®	Baricitinib tablet	Indicated for the treatment of moderately to severely active rheumatoid arthritis. Prior authorization required. Available through specialty pharmacy.	CHIP Medicaid
Orilissa™	Elagolix tablet	Indicated for the management of moderate to severe pain associated with endometriosis. Prior authorization required.	CHIP Medicaid Essential Plan
Repatha®	Evolocumab injection	Indicated for the treatment of heterozygous and homozygous familial hypercholesterolemia. Prior authorization required. Available through specialty pharmacy.	CHIP Medicaid Essential Plan
Tibsovo®	Ivosidenib tablet	Indicated for the treatment of relapsed or refractory AML. Prior authorization required. Available through specialty pharmacy.	CHIP Medicaid Essential Plan
Udenyca™	Pegfilgrastim-cbqv syringe	Indicated to decrease the incidence of infection in patients with non-myeloid malignancies receiving myelosuppressive anti-cancer drugs. Prior authorization required. Available through specialty pharmacy.	CHIP Medicaid Essential Plan
Zepatier®	Elbasvir-grazoprevir tablet	Indicated for the treatment of hepatitis C. Prior authorization required. Available through specialty pharmacy.	CHIP Medicaid Essential Plan

*Only generics are preferred

Removed from PDL

Brand Name	Generic Name	Comments	Applies to the following plans:
Diabinese®	Chlorpropamide tablet	Glimepiride and glipizide are alternate options. Current utilizers will be grandfathered.	CHIP Medicaid Essential Plan
Orinase®	Tolbutamide tablet	Glimepiride and glipizide are alternate options. Current utilizers will be grandfathered.	CHIP Medicaid Essential Plan
Tolinase®	Tolazamide tablet	Glimepiride and glipizide are alternate options. Current utilizers will be grandfathered.	CHIP Medicaid Essential Plan
Zytiga® 500mg	Abiraterone tablet	Abiraterone 250mg tablets are an alternate option. Current utilizers will not be grandfathered.	CHIP Medicaid Essential Plan

PDL Update Training on UHC On Air

On UHC On Air, we have an on-demand video highlighting this quarter's more impactful PDL changes.

- UnitedHealthcare Link users can access **UHC On Air** by selecting the UHC On Air tile on their Link dashboard. From there, go to **New York**, and click on **UHC Community Plan**. You'll find the Preferred Drug List Q2 Update in the videos listings.
- To access Link, go to UHCprovider.com and sign in by clicking the Link button in the top right corner. If you don't have access to Link, select the New User button.
- To learn more about Link, please visit UHCprovider.com/link.

If you have any questions, please call UnitedHealthcare Community Plan's Pharmacy Department at 800-310-6826. Thank you.