

# UnitedHealthcare Community Plan of Hawaii 1<sup>st</sup> 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 January 1, 2019

#### **PDL Additions**

Brand Name	Generic Name	Comments
Erleada <sup>™</sup>	Apalutamide tablet	Indicated for the treatment of non-metastatic castration resistant prostate cancer. Prior authorization required.  Available through specialty pharmacy.
Firvanq™	Vancomycin powder for oral solution	Indicated for the treatment of <i>Clostridium difficile</i> -associated diarrhea and enterocolitis caused by <i>Staphylococcus aureus</i> . Diagnosis required.
Nocdurna®	Desmopressin acetate sublingual tablet	Indicated for the treatment of nocturnal polyuria. Prior authorization required.

### **PDL Modifications**

Brand Name	Generic Name	Comments
Lyrica®	Pregabalin capsule and	Remove prior authorization for seizure disorder only. Diagnosis
	oral solution	required.
Regranex®	Becaplermin gel	Remove prior authorization. Diagnosis required.

### **Removed from PDL**

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Brand Name	Generic Name	Comments		
Breo Ellipta	Fluticasone	Fluticasone/salmeterol (authorized generic of AirDuo		
	furoate/vilanterol	RespiClick®) is an alternate option. Current utilizers will not be		
	trifenatate inhaler	grandfathered.		
Linzess®	Linaclotide capsule	Trulance® is an alternate option. Current utilizers will not be		
		grandfathered.		

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Toujeo®	Insulin glargine pen	Basaglar® is an alternate option. Current utilizers will not be grandfathered.
Vancocin	Vancomycin capsule	Firvanq is an alternate option. Current utilizers will be grandfathered through the remainder of their current course of therapy.
Zenpep®	Pancrelipase delayed release capsule	Creon® is an alternate option. Current utilizers with cystic fibrosis will be grandfathered. Patients using Zenpep for indications other than cystic fibrosis will not be grandfathered.

## 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 Hawaii, and click on UHC Community Plan. You'll find the Preferred Drug List Q1 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.