

**UnitedHealthcare Community Plan of Rhode Island
 Third Quarter 2017 Practitioner Bulletin**

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 **UHCCCommunityPlan.com** > For Health Care Professionals > Rhode Island > Pharmacy Program.

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 July 1, 2017.

PDL Additions

Brand Name	Generic Name	Comments
Abreva OTC cream	Docosanol cream	Indicated for treating herpes labialis.
Altace* capsule	Ramipril capsule	Indicated for treating hypertension, for post-myocardial infarction and for reduction of cardiovascular mortality, myocardial infarction and stroke.
Betapace AF* tablet	Sotalol AF tablet	Indicated for treating atrial fibrillation and atrial flutter.
Differin OTC gel 0.1%	Adapalane gel	Indicated for treating acne vulgaris.
Fuzeon injection	Enfuvirtide injection	Indicated for treating human immunodeficiency virus (HIV) infection.
Kerlone* tablet	Betaxolol tablet	Indicated for treating hypertension.
Mavik* tablet	Trandolapril tablet	Indicated for treating hypertension and for post-myocardial infarction.
Oxytrol for Women (OTC) patch	Oxybutynin patch	Indicated for treating overactive bladder (OAB).
Rubraca tablet	Rucaparib tablet	Indicated for treating ovarian cancer. Prior authorization required. Available through specialty pharmacy.
Selzentry 25mg and 75mg tablet	Maraviroc tablet	Indicated for treating human immunodeficiency virus (HIV) infection.
Soliqua injection	Insulin glargine/lixisenatide injection	Indicated for treating type 2 diabetes mellitus. Step therapy applies.
Tivicay 10mg and 25mg tablet	Dolutegravir tablet	Indicated for treating human immunodeficiency virus (HIV) infection.
Zinbryta injection	Daclizumab injection	Indicated for treating multiple sclerosis. Prior authorization required. Available through specialty pharmacy.

*Only generics are covered.

PDL Modifications

Brand Name	Generic Name	Comments
Aldara* cream	Imiquimod 5% cream	Prior authorization no longer required.
Ditropan XL* tablet	Oxybutynin ER tablet	Step therapy no longer required.
Retin-A* cream	Tretinoin cream	Step therapy applies. A history of failure, contraindication, or intolerance to Differin OTC is required.

*Only generics are covered.

PDL Deletions

Brand Name	Generic Name	Comments
Blocadren* tablet	Timolol tablet	Alternative agents are available including atenolol, metoprolol, carvedilol, sotalol, and labetalol. Current users will not be grandfathered.
Carac* 0.5% cream	Fluorouracil 0.5% cream	Alternative agents are available including imiquimod cream or fluorouracil solution.
Differin* cream and gel – RX versions	Adapalene cream and gel	Alternative formulation is available including Differin OTC. Current users will not be grandfathered.
Hepsera* tablet	Adefovir tablet	Alternative agents are available including entecavir, Viread, or lamivudine HBV. Current users will be grandfathered.
Retin-A* gel	Tretinoin gel	Alternative formulation is available including Differin OTC. Current users will not be grandfathered.
Visken* tablet	Pindolol tablet	Alternative agents are available including atenolol, metoprolol, carvedilol, sotalol, and labetalol. Current users will not be grandfathered.

*Generic versions are removed from PDL

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