



UPDATE 'Ohana Medicaid Preferred Drug List

April 13, 2010

Dear Provider:

At the March 25, 2010 WellCare Pharmacy & Therapeutics Committee meeting, it was decided that the following medications will be removed from the **'Ohana Medicaid Preferred Drug List (PDL)**, effective **May 17, 2010**:

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| <ul style="list-style-type: none"> • A-200[®] Lice Control Spray • Exelon[®] 2mg/mL Oral Solution • Forteo[™] 600mcg/2.4mL Injection • Loestrin[®] 24 Fe Tablets | <ul style="list-style-type: none"> • Migranal[®] 4mg/mL Nasal Spray • Mirapex[®] 0.75mg Tablets • Oxsoralen[®] 1% Lotion • Oxsoralen-Ultra[®] 10mg Capsules |
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Brand Name	Generic Name	Therapeutic Class	Alternative(s)
A-200 [®] Lice Control Spray	Permethrin 0.5%	Topical Scabicides	<ul style="list-style-type: none"> • Acticin[®] Cream 5% (QL: 60 grams/ 31 days) • Eurax[®] 10% Cream, Lotion • Ovide[®] Lotion, 0.5% (QL: 59mL/ 31 days) • Permethrin 1% Lotion (QL: 59mL/ 31 days) OTC – Covered w/Rx • Permethrin 5% Cream (QL: 60 grams/ 31 days)
Exelon [®] 2mg/mL Oral Solution	Rivastigmine Tartrate	Alzheimer's Agents • Cholinesterase inhibitors	<ul style="list-style-type: none"> • Aricept[®] 5mg, 10mg Tablets • Aricept[®] ODT 5mg, 10mg Orally Disintegrating Tablets • Exelon[®] 1.5mg, 3mg, 4.5mg, 6mg Capsules • Exelon[®] 4.6mg/24 hours, 9.5mg/ 24 hours Patches
Forteo [™] 600mcg/2.4mL Injection	Teriparatide [rDNA origin]	Hormones and Hormone Modifiers • Parathyroid Agents	<ul style="list-style-type: none"> • Calcitonin-Salmon 200unit/actuation Nasal Spray
Loestrin [®] 24 Fe Tablets	Norethindrone Acetate (1mg) and Ethinyl Estradiol (20mcg), USP and Ferrous Fumarate (75mg)	Hormones and Hormone Modifiers • Oral Combination Contraceptives	<ul style="list-style-type: none"> • Junel[®] Fe 1/20 Tablets • Microgestin[®] Fe 1/20 Tablets

Migranal® 4mg/mL Nasal Spray	Dihydroergotamine Mesylate, USP	Anti-Migraine Agents • Ergot Alkaloids	<ul style="list-style-type: none"> • Ergomar® 2mg Sublingual Tablets • Sumatriptan Succinate 5mg, 20mg Nasal Spray (QL: 12mL/ 31 days) • Sumatriptan Succinate 25mg, 50mg, 100mg Tablets (QL: 9 tablets/ 31 days) • Sumatriptan Succinate 4mg/0.5mL, 6mg/0.5mL Solution for Injection (QL: 9mL/ 31 days)
Mirapex® 0.75mg Tablets	Pramipexole Dihydrochloride	Anti-Parkinsonian Agents	<ul style="list-style-type: none"> • Pramipexole 0.125mg, 0.25mg, 0.5mg, 1mg, 1.5mg Tablets • Ropinirole HCl 0.25mg, 0.5mg, 1mg, 2mg, 3mg, 4mg, 5mg Tablets
Oxsoralen® 1% Lotion	Methoxsalen, USP	Dermatological Agents • Photosensitizing Agents ○ Porphyrins	<ul style="list-style-type: none"> • Calcipotriene 0.005% Solution • Dovonex® Cream 0.005% • Drithocrema® HP 1% Cream
Oxsoralen- Ultra® 10mg Capsules			

If you have questions, 'Ohana Health Plan's Pharmacy Help Desk—as well as its affiliated vendor, Walgreens Health Initiatives (WHI)—are available to assist providers seven days a week, 24 hours a day at **1-888-505-1198**.

Thank you for your care of 'Ohana Medicaid members.

Sincerely,

'Ohana Health Plan Pharmacy

'Ohana Health Plan, a plan offered by WellCare Health Insurance of Arizona, Inc.