



Effective date: 01/16/2017

Buckeye Health Plan Preferred Drug List (PDL) Updates – Q4 2016

Buckeye Health Plan (BHP) routinely reviews the medications available on the Preferred Drug List (PDL). Items are added, removed or modified periodically due to industry standard, market availability, and/or assessment of use. Below is the list of changes to the published PDL this quarter.

For the most current program description you may call Member Services at 1-866-246-4358 (TTY/TTD 1-800-750-0750) or visit the Buckeye Health Plan website at www.buckeyehealthplan.com.

Medicaid Preferred Drug List					
Drug Name	Ingredients	Dosage Form	Strength	Update	Notes
alogliptin	alogliptin	tablet	Various Strengths	Add	Add to PDL with a quantity limit of 1 tablet/day (generic only)
alogliptin/pioglitazone	alogliptin/pioglitazone	tablets	Various Strengths	Add	Add to PDL with a quantity limit of 1 tablet/day (generic only)
alogliptin/metformin	alogliptin/metformin	tablet	Various Strengths	Add	Add to PDL with a quantity limit of 1 tablet/day (add generic only)
Victoza	liraglutide	pen	18mg/3ml	Add	Add to PDL with PA and a quantity limit of 1.8mg (0.3 ml) daily.
lidocaine HCl	lidocaine HCl	cream	4%	Add	Add to PDL with a quantity limit of 1 package per claim
HPC	hydroxyprogesterone caproate	injection	250mg/ml	Add	Add to PDL, a quantity limit of 5ml (1250mg) per 30 days, and age limit of ≥ 16 years
Eplusa	sofosbuvir/velpatasvir	tablet	400mg/100 mg	Add	Add to PDL with PA and a quantity limit of 1 tablet daily
Onglyza	saxagliptin	tablet	2.5mg	Remove	Remove from PDL
Onglyza	saxagliptin	tablet	5mg	Remove	Remove from PDL
Kombiglyze XR	saxagliptin/metformin	tablet	2.5mg/1000 mg	Remove	Remove from PDL

Key: PDL=Preferred Drug List AL=Age Limit QL=Quantity Limit ST=Step Therapy POS=Point Of Sale message

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Kombiglyze XR	saxagliptin/metformin	tablet	5mg/500mg	Remove	Remove from PDL
Kombiglyze XR	saxagliptin/metformin	tablet	5mg/1000mg	Remove	Remove from PDL
Tradjenta	linagliptin	tablet	5 mg	Remove	Removal from PDL
lidocaine	lidocaine	ointment kit	5%	Remove	Remove from PDL
trandolapril	trandolapril	tablet	1mg, 2mg,	Change	Change quantity limit to 1 tablet per day
trandolapril	trandolapril	tablet	4mg	Change	Change quantity limit to 2 tablets per day
nevirapine	nevirapine	tablet	100mg	Change	Change quantity limit to 3 tablets per day
lidocaine	lidocaine	ointment	5%	Change	Add claim limit of 3 claims per month
Epipen-JR	epinephrine	auto-injector	0.15mg/0.3 ml	Change	Add quantity limit of 4 pens per year
Epipen	epinephrine	auto-injector	0.3mg/0.3ml	Change	Add quantity limit of 4 pens per year
spinosad	spinosad	suspension	0.9%	Change	Limited to ages \geq 6 months
spinosad	spinosad	suspension	0.9%	Change	Add age limit of \geq 21 years
Tazorac	tazarotene	cream	0.05%, 0.10%	Change	Add age limit of \geq 21 years
Tazorac	tazarotene	gel	0.05%	Change	Add age limit of \geq 21 years
Tazorac	tazarotene	gel	0.10%	Change	Add age limit of \geq 21 years
drospirenone/ethinyl estradiol	drospirenone/ethinyl estradiol	tablet	3.0mg/0.02 mg	Change	Add quantity limit of 1 tablet per day
Zovia	ethynodiol diacetate /ethinylestradiol	tablet	1mg/50mcg	Change	Add a quantity limit of 1 tablet per day

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Based on Q2 P&T 2016

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