



Effective date: 5/21/15

Buckeye Health Plan Preferred Drug List (PDL) Updates – Q2 2015

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
Mirapex	Pramipexole Dihydrochloride	Tab	0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	Add	Add generic to PDL
Oxycodone	Oxycodone HCl	Tab	10 mg, 20 mg	Add	Add generic to PDL
Xarelto	Rivaroxaban	Tab	15 mg, 20 mg	Add	Add to PDL
Levemir	Insulin Detemir	Inj	100 Unit/ML	Add	Add to PDL
Levemir FlexTouch	Insulin Detemir	Inj	100 Unit/ML	Add	Add to PDL
Protonix	Pantoprazole Sodium	Tab	20 mg, 40 mg	Add	Add generic to PDL
Nexium 24HR	Esomeprazole Magnesium	Tab	20 mg	Add	Add OTC to PDL
Astelín	Azelastine HCl	Sol	137 MCG/SPRAY	Add	Add generic to PDL
Astepro	Azelastine HCl	Sol	0.15%	Add	Add generic to PDL

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

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Multiple	Acetaminophen-Isometheptene-Dichloral	Cap	325-65-100 MG	Delete	Remove from PDL
Anusol-HC	Hydrocortisone Acetate	Supp	25 MG	Delete	Remove from PDL
Donnatal	Belladonna Alkaloids-Phenobarbital	Tab	16.2 MG	Delete	Remove from PDL
Donnatal	Belladonna Alkaloids-Phenobarbital	Elixir	16.2 MG/5ML	Delete	Remove from PDL
Analpram-HC	Hydrocortisone Acetate w/ Pramoxine	Cream	1-1%, 2.5-1%	Delete	Remove from PDL
Benaphen Plus	Diphenhydramine & Pseudoephedrine	Cap	25-60 MG	Delete	Remove from PDL
Multiple	Chlorpheniramine Tannate-Pyrimilamine Tannate-Phenylphrine Tannate	Susp	2-12.5-5 MG/5ML	Delete	Remove from PDL
Multiple	Aspirin	Supp	60 MG	Delete	Remove from PDL
Nasacort Allergy 24HR	Triamcinolone Acetonide	Spray	55 MCG/ACT	Change	Remove ST restriction
Optivar	Azelastine HCl	Sol	0.05%	Change	Remove ST restriction
Diovan	Valsartan	Tab	40 mg, 80 mg, 160 mg, 320 mg	Change	Remove ST restriction; Install automated step to allow for HF or post-MI
Diovan HCT	Valsartan-Hydrochlorothiazide	Tab	80-12.5 MG, 160-12.5 MG, 160-25 MG, 320-12.5 MG, 320-25 MG	Change	Remove ST restriction
Zanaflex	Tizanidine HCl	Tab	2 mg, 4 mg	Change	Remove ST restriction

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Sonata	Zaleplon	Cap	5 mg	Change	Remove ST restriction
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