

**To: Participating AmeriHealth Caritas Florida Providers**

**Date: October 26, 2023**

**Subject: Changes to Preferred Drug List (PDL)**

Please reference the attached Florida Pharmaceutical & Therapeutics Committee Meeting report on September 22, 2023, for changes to the PDL effective October 1, 2023.

You can find additional information on the drug formularies by visiting [www.amerihealthcaritasfl.com](http://www.amerihealthcaritasfl.com) and/or [https://ahca.myflorida.com/Medicaid/Prescribed\\_Drug/pharm\\_thera/index.shtml](https://ahca.myflorida.com/Medicaid/Prescribed_Drug/pharm_thera/index.shtml).

If you have questions about this communication, please contact your Provider Account Executive or the Provider Services department at **1-800-617-5727**.

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From the September 22, 2023  
 Florida Pharmaceutical & Therapeutics Committee Meeting  
 (Changes Effective October 1, 2023)

|  | PDL Status<br>Before Meeting | PDL Status<br>After Meeting | Comment |
|--|------------------------------|-----------------------------|---------|
| <b>ALZHEIMER'S AGENTS</b>                        |                              |                             |         |
| ADUHELM (INTRAVENOUS)                            | NA                           | Non-PDL                     |         |
| GALANTAMINE TABLET (ORAL)                        | Non-PDL                      | PDL                         |         |
| LEQEMBI (INTRAVENOUS)                            | NA                           | Non-PDL                     |         |
| RIVASTIGMINE CAPSULES (ORAL)                     | Non-PDL                      | PDL                         |         |
| <b>ANALGESICS, NARCOTICS LONG</b>                |                              |                             |         |
| BUTRANS (TRANSDERMAL)                            | Non-PDL                      | PDL                         |         |
| HYDROCODONE ER (HYSINGLA) (ORAL)                 | PDL                          | Non-PDL                     |         |
| <b>ANALGESICS, NARCOTICS SHORT</b>               |                              |                             |         |
| HYDROCODONE/IBUPROFEN (ORAL)                     | PDL                          | Non-PDL                     |         |
| OXYCODONE/APAP SOLUTION (PROLATE) (ORAL)         | NA                           | Non-PDL                     |         |
| <b>ANTIANGINAL &amp; ANTI-ISCHEMIC</b>           |                              |                             |         |
| ASPRUZYO SPRINKLE ER (ORAL)                      | NA                           | Non-PDL                     |         |
| <b>ANTIARRHYTHMICS ORAL</b>                      |                              |                             |         |
| QUINIDINE SULFATE (ORAL)                         | PDL                          | Non-PDL                     |         |
| <b>ANTIBIOTICS, GI</b>                           |                              |                             |         |
| VOWST CAPSULE (ORAL)                             | NA                           | Non-PDL                     |         |
| <b>ANTICONVULSANTS</b>                           |                              |                             |         |
| METHSUXIMIDE (ORAL)                              | NA                           | Non-PDL                     |         |
| SEZABY (INTRAVENOUS)                             | NA                           | Non-PDL                     |         |
| ZTALMY (ORAL)                                    | NA                           | Non-PDL                     |         |
| <b>ANTIFUNGALS, ORAL</b>                         |                              |                             |         |
| ITRACONAZOLE CAPSULE (ORAL)                      | Non-PDL                      | PDL                         |         |
| NOXAFIL SUSPENSION DELAYED-RELEASE PACKET (ORAL) | NA                           | Non-PDL                     |         |
| VIVJOA CAPSULE (ORAL)                            | NA                           | Non-PDL                     |         |
| <b>ANTIFUNGALS, TOPICAL</b>                      |                              |                             |         |
| SALICYLIC ACID OINTMENT (TOPICAL)                | NA                           | Non-PDL                     |         |
| <b>ANTIMIGRAINE AGENTS, OTHER</b>                |                              |                             |         |
| ZAVZPRET (NASAL)                                 | NA                           | Non-PDL                     |         |
| <b>ANTIMIGRAINE AGENTS, TRIPTANS</b>             |                              |                             |         |
| RELPAK (ORAL)                                    | Non-PDL                      | PDL                         |         |
| <b>ANTINEOPLASTIC AGENTS, TOPICAL</b>            |                              |                             |         |
| EFUDEX CREAM (TOPICAL)                           | Non-PDL                      | PDL                         |         |
| FLUOROURACIL CREAM (EFUDEX) (TOPICAL)            | PDL                          | Non-PDL                     |         |

|                                    | PDL Status Before Meeting | PDL Status After Meeting | Comment |
|------------------------------------|---------------------------|--------------------------|---------|
| <b>ANTIPARKINSON'S AGENTS</b>      |                           |                          |         |
| ENTACAPONE (ORAL)                  | Non-PDL                   | PDL                      |         |
| <b>ANTIPSYCHOTICS</b>              |                           |                          |         |
| ABILIFY ASIMTUFII (INTRAMUSCULAR)  | NA                        | PDL                      | Auto-PA |
| CAPLYTA (ORAL)                     | Non-PDL                   | PDL                      | Auto-PA |
| FLUPHENAZINE (INJECTION)           | PDL                       | Non-PDL                  |         |
| LATUDA (ORAL)                      | PDL                       | Non-PDL                  |         |
| LURASIDONE (ORAL)                  | Non-PDL                   | PDL                      |         |
| UZEDY (SUBCUTANEOUS)               | NA                        | PDL                      | Auto-PA |
| <b>ANTIVIRALS, ORAL</b>            |                           |                          |         |
| TAMIFLU CAPSULE (ORAL)             | PDL                       | Non-PDL                  |         |
| <b>GROWTH HORMONE</b>              |                           |                          |         |
| SOGROYA (SUBCUTANEOUS)             | NA                        | Non-PDL                  |         |
| <b>HYPOGLYCEMICS, SGLT2</b>        |                           |                          |         |
| INPEFA (ORAL)                      | NA                        | Non-PDL                  |         |
| <b>LAXATIVES &amp; CATHARTICS</b>  |                           |                          |         |
| SUFLAVE POWDER (ORAL)              | NA                        | Non-PDL                  |         |
| <b>LIPOTROPICS, STATINS</b>        |                           |                          |         |
| ATORVALIQ (ORAL)                   | NA                        | Non-PDL                  |         |
| <b>MACULAR DEGENERATION AGENTS</b> |                           |                          |         |
| CIMERLI VIAL (INTRAOCULAR)         | NA                        | PDL                      |         |
| SYFOVRE (INTRAOCULAR)              | NA                        | Non-PDL                  |         |
| <b>MOVEMENT DISORDERS</b>          |                           |                          |         |
| AUSTEDO XR (ORAL)                  | NA                        | Non-PDL                  |         |
| <b>MULTIPLE SCLEROSIS AGENTS</b>   |                           |                          |         |
| AUBAGIO (ORAL)                     | PDL                       | Non-PDL                  |         |
| BRIUMVI (INTRAVENOUS)              | NA                        | Non-PDL                  |         |
| FINGOLIMOD (ORAL)                  | Non-PDL                   | PDL                      |         |
| GILENYA (ORAL)                     | PDL                       | Non-PDL                  |         |
| TASCENSO ODT (ORAL)                | NA                        | Non-PDL                  |         |
| TERIFLUNOMIDE TABLET (ORAL)        | Non-PDL                   | PDL                      |         |
| <b>ONCOLOGY, ORAL - BREAST</b>     |                           |                          |         |
| FULVESTRANT (AG) (INTRAMUSCULAR)   | Non-PDL                   | PDL                      |         |
| FULVESTRANT (INTRAMUSCULAR)        | Non-PDL                   | PDL                      |         |
| KISQALI (ORAL)                     | Non-PDL                   | PDL                      |         |
| ORSERDU (ORAL)                     | NA                        | Non-PDL                  |         |
| VERZENIO (ORAL)                    | PDL                       | Non-PDL                  |         |

|  | PDL Status<br>Before Meeting | PDL Status<br>After Meeting | Comment |
|--|------------------------------|-----------------------------|---------|
| <b>ONCOLOGY, ORAL - HEMATOLOGIC</b>                              |                              |                             |         |
| CALQUENCE TABLET (ORAL)  | NA                           | Non-PDL                     |         |
| IMBRUVICA SUSPENSION (ORAL)                                      | NA                           | Non-PDL                     |         |
| MELPHALAN (ORAL)   | Non-PDL                      | PDL                         |         |
| REZLIDHIA (ORAL)   | NA                           | Non-PDL                     |         |
| TABLOID (ORAL)   | PDL                          | Non-PDL                     |         |
| <b>ONCOLOGY, ORAL - LUNG</b>                                     |                              |                             |         |
| ERLOTINIB (ORAL)   | Non-PDL                      | PDL                         |         |
| KRAZATI (ORAL)   | NA                           | Non-PDL                     |         |
| <b>ONCOLOGY, ORAL - OTHER</b>                                    |                              |                             |         |
| JAYPIRCA (ORAL)  | NA                           | Non-PDL                     |         |
| LYTGOBI (ORAL)   | NA                           | Non-PDL                     |         |
| ZEJULA TABLET (ORAL)   | NA                           | Non-PDL                     |         |
| <b>ONCOLOGY, ORAL - PROSTATE</b>                                 |                              |                             |         |
| FLUTAMIDE (ORAL)   | PDL                          | Non-PDL                     |         |
| XTANDI TABLET (ORAL)   | PDL                          | Non-PDL                     |         |
| <b>ONCOLOGY, ORAL - RENAL CELL</b>                               |                              |                             |         |
| EVEROLIMUS TABLET (AFINITOR) (ORAL)                              | Non-PDL                      | PDL                         |         |
| <b>ONCOLOGY, ORAL - SKIN</b>                                     |                              |                             |         |
| MEKINIST SOLUTION (ORAL)   | NA                           | Non-PDL                     |         |
| TAFINLAR SUSPENSION (ORAL)                                       | NA                           | Non-PDL                     |         |
| <b>OPHTHALMIC ANTIBIOTIC-STEROID COMBINATIONS</b>                |                              |                             |         |
| ZYLET (OPHTHALMIC)   | PDL                          | Non-PDL                     |         |
| <b>OPHTHALMICS, ANTI-INFLAMMATORIES</b>                          |                              |                             |         |
| FLUOROMETHOLONE (OPHTHALMIC)                                     | Non-PDL                      | PDL                         |         |
| XIPERE (INTRAOCULAR)   | NA                           | Non-PDL                     |         |
| <b>OPHTHALMICS, ANTI-INFLAMMATORY/IMMUNOMODULATOR</b>            |                              |                             |         |
| MIEBO (OPHTHALMIC)   | NA                           | Non-PDL                     |         |
| VERKAZIA (OPHTHALMIC)  | NA                           | Non-PDL                     |         |
| <b>PAH AGENTS, ORAL AND INHALED</b>                              |                              |                             |         |
| LIQREV SUSPENSION (ORAL)   | NA                           | Non-PDL                     |         |
| <b>PROGESTATIONAL AGENTS</b>                                     |                              |                             |         |
| HYDROXYPROGESTERONE CAPROATE MULTI DOSE VIAL<br>(INTRAMUSCULAR)  | NA                           | Non-PDL                     |         |
| HYDROXYPROGESTERONE CAPROATE SINGLE DOSE VIAL<br>(INTRAMUSCULAR) | PDL                          | Non-PDL                     |         |
| MAKENA AUTO INJECTOR (SUBCUTANEOUS)                              | PDL                          | Non-PDL                     |         |

NA = NOT APPLICABLE (FOR NEW PRODUCTS)