



Date: 06/15/10

Pharmacy Announcement

New Therapeutic Drug Classes Added To PDL Effective July 1, 2010

On May 3, 2010, the Pharmacy and Therapeutics (P&T) Committee of the Nevada Department of Health and Human Services' Division of Health Care Financing and Policy met to review new therapeutic drug classes for the Nevada Medicaid Preferred Drug List (PDL).

Effective July 1, 2010, all currently marketed, anti-diabetic and anti-convulsant agents will be listed as preferred agents on the PDL. The complete PDL is posted on the ["Preferred Drug List"](#) webpage.

Also effective July 1, 2010, the Psychotropics: Antipsychotics, Oral Atypical class will be added to the PDL. Below are the preferred and non-preferred agents:

Preferred	Non-Preferred
Clozapine (generic Clozaril®)	Abilify®
Fanapt®	Clozaril®
Geodon®	Fazclo®
Risperidone (generic Risperdal®)	Invega®
Seroquel®	Risperdal®
Seroquel XR®	Saphris®
	Zyprexa®

Please note: No changes were made to the typical (1st generation) antipsychotics class.

All recipients currently taking a non-preferred agent will be "grandfathered." Prior authorization may be obtained by calling the Magellan Medicaid Administration, Inc. Clinical Call Center at (800) 505-9185 or by faxing the [FH-59 Pharmacy Authorization](#) form.