



P.O. BOX 31577  
Tampa, FL 33631-3577

## UPDATE

4/8/2024

### 'Ohana QUEST Integration Medicaid Preferred Drug List

Dear Provider,

At the **April 8<sup>th</sup>, 2024** WellCare Pharmacy & Therapeutics Committee meeting, it was decided that the following changes will be made to the **'Ohana QUEST Integration Medicaid Preferred Drug List (PDL)**, effective **06/01/2024**. Please carefully review these changes.

Key	
<b>UPPER CASE</b> = Brand Name Drugs	<b>QL</b> = Quantity Limit
<b>Lower case italics</b> = Generic Drugs	<b>ST</b> = Step Therapy
<b>PDL</b> = Preferred Drug List	<b>AL</b> = Age Limit
<b>PA</b> = Prior Authorization	<b>YOA</b> = Years of Age
<b>SC</b> = Safety Concerns	<b>LU</b> = Low Utilization
<b>PC</b> = Pharmacoeconomic Considerations	<b>DD</b> = Discontinued Drug
<b>GA</b> = Generic Available	<b>CR</b> = Clinical Removal

Effective Date: **06/01/2024**

Drug Name	Therapeutic Class	Change	PDL Alternative (if applicable)
<b>ADDITIONS TO THE PDL</b>			
fluticasone HFA AG	Antiasthmatic and Bronchodilator Agents	Added to PDL	
fluticasone diskus AG	Antiasthmatic and Bronchodilator Agents	Added to PDL	
generic Suprep	Colonoscopy Preparations	Added to PDL	
dapagliflozin	Diabetic Therapy SGLT2s	Added to PDL with QL	
dapagliflozin/metformin	Diabetic Therapy SGLT2s	Added to PDL with QL	
Victoza (liraglutide)	Diabetic Therapy GLP-1s	Added to PDL with PA & QL; Revise the existing PA criteria to co-prefer Bydureon BCise, Byetta, Trulicity, and Victoza	
<b>UTILIZATION MANAGEMENT CHANGES</b>			



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Udenyca Onbody (pegfilgrastim-cbqv) Udenyca Auto Injector (pegfilgrastim-cbqv)	Hematopoietic Agents	PA Updated; Update pegfilgrastim criteria to add Udenyca Onbody and Auto Injector to preferred drugs	
Orfadin (nitisinone)	Hereditary Tyrossinemia	PA Updated; Add redirection through generic for Orfadin 20mg	
<b>REMOVALS FROM THE PDL</b>			
Siliq (brodalumab)	DMARDS/Inflammatory Condition	Removed from PDL	Taltz
Steglatro (ertugliflozin)	Diabetic Therapy SGLT2s	Removed from PDL	dapagliflozin and dapagliflozin/metformin
Segluromet (ertugliflozin/metformin)	Diabetic Therapy SGLT2s	Removed from PDL	dapagliflozin and dapagliflozin/metformin

If you have questions, 'Ohana Health Plan's Pharmacy Help Desk is available to assist providers at **1-888-846-4262**.

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.*