



UPDATE

WellCare Health Plan Georgia Families® and PeachCare for Kids® Preferred Drug List

2/17/2021

Dear Provider,

At the **February 17, 2021** WellCare Pharmacy & Therapeutics Committee meeting, it was decided that the following changes would be made to the **WellCare Health Plans Georgia Families® and PeachCare for Kids® Medicaid Preferred Drug List (PDL)**. These changes will be effective **04/01/2021**. Please review them carefully.

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

Effective date of change: **04/01/2021**

| Drug Name | Therapeutic Class | Change | PDL Alternative (if applicable) |
|---|---|--|---|
| ADDITIONS TO THE PDL | | | |
| Dimethyl Fumarate Capsule Delayed Release 120 MG Oral; 240 MG Oral; Starter Pack | Psychotherapeutic And Neurological Agents - Misc. | Added to the PDL with PA | |
| REMOVALS TO THE PDL | | | |
| Januvia (<i>sitagliptin phosphate</i>) Tablet 25 MG Oral, 50 MG Oral, 100 MG Oral | Antidiabetics | Removed from PDL (Grandfathering for Existing Members) | Alogliptin Benzoate Tablet 6.25 MG Oral, 12.5 MG Oral, 25 MG Oral |

If you have any questions, please call our Pharmacy Help Desk. The toll-free number is **1-866-231-1821** Monday-Friday, 7 a.m. to 7 p.m. E.S.T.

Thank you for your care of WellCare Health Plans Georgia Families® and PeachCare for Kids® Medicaid members.

Sincerely,

WellCare Health Plans



WellCare proudly serves the Georgia Medicaid and PeachCare for Kids® members enrolled in the Georgia Families® program and women enrolled in the Planning for Healthy Babies® program.