MaineCare Services
An Office of the Department of Health and Human Services
Paul R. LePage, Governor Mary C. Mayhew, Commissioner

Department of Health and Human Services
MaineCare Services
Pharmacy Unit
11 State House Station
Augusta, Maine 04333-0011
Toll Free (866) 796-2463; Fax: (207) 287-8601
TTY Users: Dial 711 (Maine Relay)

To: MaineCare Providers

From: Roger Bondeson – Director of Operations

Date: March 1st , 2013

Re: PDL Update for 3/8/13

The following medications are non-preferred and will require prior authorization:

Lexapro	Onmel	Methylphenidate ER	Bosulif	Linzess
Strivarga	Xeljanz	Xtandi	Lorzone	Binosto
Jantovan	Rizatriptan	Clobetasol Lot.	Metaxalone	

The following medications will be preferred and will not require prior authorization:

Clobex Lot. Lidocaine gel Ritalin LA Ziprasidone

The following are miscellaneous PDL changes/clarifications:

Escitalopram is preferred with usual SSRI language regarding age and previous therapy trials.

Xylocaine is no longer available and has been removed from the PDL.

Dovonex is no longer available and has been removed from the PDL.

FreeStyle Lancets is no longer available as a covered diabetic supply and has been removed from the PDL. Please review the 2013 Diabetic Supply list at www.mainecarepdl.org for covered products.

Xyzal is now a step 9 on the non-preferred side and generic **Levocetirizine** has been added as a step 8.

Ryzolt is now a step 7 on the non-preferred side.

Skelaxin is now a step 6 on the non-preferred side.

Singulair Granules will only be approved if between the ages of 6 months-5years old.

Singulair Chewables 4mg from 2years- 5years and Singulair Chewables 5mgs from 6years- 14years old.

Tramadol ER is non-preferred on the MaineCare PDL. Clarifying the difference on the PDL between long acting and short acting tramadol

Zolpidem ER is non-preferred on the MaineCare PDL. Clarifying the difference on the PDL between long acting and short acting zolpidem

Baraclude added criteria for indication for treatment of chronic Hep B virus (HBV) in adults with: evidence of active viral replication AND either evidence of persistent elevation in serum aminotransferases (ALT or AST) or histologically active disease, Patient is 16 years of age or older. Boxed warning: Use not recommended for those co-infected with HIV and HBV who are not also receiving highly active antiretroviral therapy (HAART).

Cayston added criteria and is only indicated to improve respiratory symptoms in CF patients with Pseudomonas aeruginosa. Dosing limits, as should be given TID X28 days (followed by 28 days OFF Cayston therapy). A bronchodilator should be used before administration of Cayston.

Edurant treated subjects with HIV-1 RNA greater than 100,000 copies/mL at the start of therapy experienced virologic failure (HIV-1 RNA greater than or equal to 50 copies/mL) compared to EDURANT® treated subjects with HIV-1 RNA less than or equal to 100,000 copies/mL. Regardless of HIV-1 RNA at the start of therapy, more EDURANT® treated subjects with CD4+ cell count less than 200 cells/mm3 experienced virologic failure compared to EDURANT® treated subjects with CD4+ cell count greater than or equal to 200 cells/mm3.

Stribild non-preferred for specific indication(only indicated for HIV-1 infection in adults who are antiretroviral treatment-naïve), as there is a boxed warning that this is not indicated for Hep B and has not been studied in those co-infected with HIV-1 and HBV. Should not be co-administered with other antiretroviral medications used for HIV1 infections, as this is a complete regimen

Xyrem Sol FDA reminded healthcare professionals and patients that the combined use of Xyrem (sodium oxybate) with alcohol or central nervous system (CNS) depressant drugs can markedly impair consciousness and may lead to severe breathing problems (respiratory depression)

Xalkori will be non-preferred and considered for patients with a diagnosis of locally advanced or metastatic non-small cell lung cancer (NSCLC) that is anaplastic lymphoma kinase (ALK)-positive as detected by an FDA- approved test (please included a copy of test results; and is prescribed by an oncologist; quantity limit of 60 tablets per 30 days.

Zelboraf is non-preferred with the following criteria: will be considered for patients 18 years of age or older, has a diagnosis of unresectable or metastatic melanoma with BRAF mutation as detected be an FDA-approved test, prescriber is an oncologist and with a quantity limit of 240 tablets per 30 days.