

Updates to Medica drug list for Minnesota Health Care Programs Effective January 1, 2021

Effective on January 1, 2021, the following changes will apply to the Minnesota Health Care Programs (MHCP) List of Covered Drugs (formulary).

In Minnesota, all managed care organizations are required to follow the Department of Human Services (DHS) Preferred Drug List (PDL). The PDL changes noted below reflect the changes to the DHS PDL effective January 1, 2021.

Removals from Formulary:

Brand name	Generic name	Preferred alternatives (for non-preferred or not covered drugs)	Therapeutic category
Tykerb	(lapatinib ditosylate)	anastrozole tablets, capecitabine tablets, exemestane tablets, Gilotrif tablets, letrozole tablets, Votrient tablets	Antineoplastic/ Immunosuppressant Drugs
Neulasta 6mg/0.6ml Syringe	(pegfilgrastim)	Fulphila, Ziexteno	Biotechnology Drugs
Neulasta Onpro 6mg/0.6ml kit	(pegfilgrastim)	Fulphila, Ziexteno	Biotechnology Drugs
Udenyca 6mg/0.6ml syringe	(pegfilgrastim-cbqv)	Fulphila, Ziexteno	Biotechnology Drugs
Crinone 4% gel	(progesterone)	medroxyprogesterone IM, progesterone IM oil, progesterone	Estrogens/Progestins
Kuvan	(sapropterin tablets and powder)	sapropterin tablets and powder	Miscellaneous Hormones
ranitidine 15mg/ml syrup	(same)	cimetidine oral solution, famotidine oral suspension, nizatidine oral soln,	Ulcer Therapy

Change in Utilization Management Criteria (applies to both brand and generic products if both covered and to all strengths unless specified)

Brand Name	Generic Name	Restrictions and comments (PA, QLs, ST, specialty drug)	Therapeutic category
DEXCOM G4 Transmitter kit	(blood glucose monitoring)	QL added: 1 kit per 135 days	Diabetes Therapy
Dexcom G5 Transmitter Kit	(blood glucose monitoring)	QL added: 1 kit per 68 days	Diabetes Therapy
Dexcom G5-G4 Sensor Kit	(blood glucose monitoring)	QL added: 4 kits per 21 days	Diabetes Therapy
Dexcom G6 Sensor	(blood glucose monitoring)	QL added: 3 kits per 23 days	Diabetes Therapy
Dexcom G6 Transmitter	(blood glucose monitoring)	QL added: 1 kit per 68 days	Diabetes Therapy
Freestyle Libre 14- Day Sensor	(blood glucose monitoring)	QL added: 2 kits per 21 days	Diabetes Therapy
Ajovy 225mg/ 1.5ml Syringe/Autoinjector (fremanezumab-vfrm)		QL added: 1 syringes per 23 days	Migraine/Cluster Headache Therapy
Clindagel,	(clindamycin phosphate topical gel, once daily 1%)	QL added: 150ml /23 days	Therapy for Acne
clindamycin phosphate topical gel, once daily 1%	(same)	QL added: 150ml /23 days	Therapy for Acne

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Asmanex HFA 50mcg inhalation	(mometasone furoate)	QL added: 1 inhaler per fill	Pulmonary Agents
Dulera HFA 50mcg/5 mcg inhalation	(mometasone/ formoterol)	QL added: 1 inhaler per fill	Pulmonary Agents

Changes to Preferred/Non-Preferred Status on Preferred Drug List (PDL)

Brand Name	Generic Name	Status as of January 1, 2021	Therapeutic category
Glyset	(miglitol)	Non-Preferred	Hypoglycemics, Alpha-Glucosidase Inhibitors
Humalog U-100 cartridge	(insulin lispro)	Preferred	Hypoglycemics, Insulin and Related Agents
Humalog 100 unit/ml and 500 unit/ml pens	(Insulin lispro)	Preferred	Hypoglycemics, Insulin and Related Agents
Humalog Junior Kwik pen	(insulin lispro)	Preferred	Hypoglycemics, Insulin and Related Agents
Humalog Mix pen	(insulin lispro rotamine/lispro)	Preferred	Hypoglycemics, Insulin and Related Agents
insulin lispro pen/vials	(same)	Preferred	Hypoglycemics, Insulin and Related Agents
Elidel	(pimecrolimus)	Non-Preferred	Immunomodulators, Atopic Dermatitis
Cellcept suspension	(mycophenolate mofetil)	Preferred	Immunosuppressives, Oral
Flector patch	(diclofenac epolamine)	Preferred	NSAIDS
moxifloxacin 0.5% drops ophthal (gen Vigamox)	(same)	Preferred	Ophthalmic Antibiotics
Vigamox oph	(moxifloxacin oph)	Non-preferred	Ophthalmic Antibiotics
ambrisentan (oral)	(same)	Preferred	PAH Agents, Oral and Inhaled
Letairis tabs	(ambrisentan)	Non-Preferred	PAH Agents, Oral and Inhaled
Revatio oral susp	(sildenafil citrate susp)	Preferred	PAH Agents, Oral and Inhaled
sevelamer carbonate tabs	(same)	Preferred	Phosphate Binders
Renagel tabs	(sevelamer carbonate)	Non-Preferred	Phosphate Binders
Brilinta tabs	(ticagrelor)	Preferred	Platelet Aggregation Inhibitors
prasugrel tabs	(same)	Preferred	Platelet Aggregation Inhibitors
esomeprazole caps	(same)	Preferred (QL applies to 20mg only)	Proton Pump Inhibitors
lansoprazole caps	(same)	Preferred (QL applies to 15mg only)	Proton Pump Inhibitors
Adderall XR caps	(dextroamph/amphet mixed salts)	Preferred	Stimulants and Related Agents
amphetamine salt combo ER tabs	(same)	Non-Preferred	Stimulants and Related Agents
Concerta ER tabs	(methylphenidate HCl)	Preferred	Stimulants and Related Agents
Methylin soln	(methylphenidate HCl)	Preferred	Stimulants and Related Agents
methylphenidate 5mg/5ml oral soln	(same)	Preferred	Stimulants and Related Agents
methylphenidate CD	(same)	Non-Preferred	Stimulants and Related Agents

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methylphenidate chew tabs	(same)	Non-Preferred	Stimulants and Related Agents
methylphenidate ER (generic Concerta)	(same)	Non-Preferred, PA, QL	Stimulants and Related Agents
methylphenidate ER 72mg tablets	(same)	Non-Preferred, PA, QL	Stimulants and Related Agents

Additions to Preferred/Non-Preferred Status on Preferred Drug List (PDL)

Brand Name	Generic Name	Status as of January 1, 2021	Therapeutic category
Harvoni pellets	(ledipasvir/sofosbuvir pellets pack)	Non-Preferred	Hepatitis C
Sovaldi pellets	(sofosbuvir pellet pack)	Non-Preferred	Hepatitis C
Rybelsus tablets	(semaglutide)	Non-Preferred	Hypoglycemics, Incretin Mimetics/Enhancers
Trijardy Xr tablet	(empaglifloz/linaglipt/ metformin)	Non-Preferred	Hypoglycemics, Incretin Mimetics/Enhancers
insulin aspart vial/flexpen/penfil	(same)	Non-Preferred	Hypoglycemics, Insulin and Related Agents
insulin aspart/Insulin aspart protamine vial/pen (AG)	(same)	Non-Preferred	Hypoglycemics, Insulin and Related Agents
insulin lispro Jr kwikpen	(same)	Non-Preferred	Hypoglycemics, Insulin and Related Agents
insulin lispro protamine mix kwikpen	(same)	Non-Preferred	Hypoglycemics, Insulin and Related Agents
Lyumjev vial	(insulin lispro-aabc)	Non-Preferred	Hypoglycemics, Insulin and Related Agents
Lyumjev Kwikpen U- 100 and U-200	(insulin lispro-aabc)	Non-Preferred	Hypoglycemics, Insulin and Related Agents
Novolin N Pen / Novolin R Pen (OTC)	(insulin regular, human)	Non-Preferred	Hypoglycemics, Insulin and Related Agents
Semglee vial	(insulin glargine, hum.rec.analog)	Non-Preferred	Hypoglycemics, Insulin and Related Agents
Tresiba vial	(insulin degludec)	Non-Preferred	Hypoglycemics, Insulin and Related Agents
everolimus tabs (generic Zortress)	(same)	Non-Preferred	Immunosuppressives, Oral
Nexletol tabs	(bempodoic acid)	Non-Preferred	Lipotropics, Other
Nexlizet tabs	(bempodoic acid/ezetimibe)	Non-Preferred	Lipotropics, Other
Bafiertam caps	(monomethyl fumarate)	Non-Preferred	Multiple Sclerosis Agents
dalfampridine ER tabs	(same)	Non-Preferred	Multiple Sclerosis Agents
dimethyl fumerate caps	(same)	Non-Preferred	Multiple Sclerosis Agents
Kesimpta Pen	(ofatumumab)	Non-Preferred	Multiple Sclerosis Agents
Vumerity cap	(dioximel fumarate)	Non-Preferred, SP	Multiple Sclerosis Agents

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Zeposia caps	(ozanimod hydrochloride)	Non-Preferred, SP	Multiple Sclerosis Agents
Ztildo patch	(lidocaine)	Non-Preferred	Neuropathic Pain
Arthrotec tabs	(diclofenac sod/misoprostol)	Non-Preferred	NSAIDS
diclofenac patch (AG of Flector)	(same)	Non-Preferred	NSAIDS
diclofenac sod/misoprostol tabs	(same)	Non-Preferred	NSAIDS
Zerviate oph drops	(cetirizine hcl)	Non-Preferred	Ophthalmics, for Allergic conjunctivits
fluorometholone ophthal	(same)	Preferred	Ophthalmic, Anti-Inflammatories
prednisolone acet ophthal	(same)	Preferred	Ophthalmic, Anti-Inflammatories
Xelpros drops	(latanoprost)	Non-Preferred	Ophthalmic, Glaucoma Agents
ciprofloxacin/ fluocinolone otic (AG)	(same)	Non-Preferred	Otic Antibiotics
sildenafil suspension	(same)	Non-Preferred	PAH Agents, Oral and Inhaled
esomeprazole susp	(same)	Non-Preferred (QL applies to 10mg and 20mg strengths only)	Proton Pump Inhibitors
Zegerid caps/packet	(omeprazole/sod bicarb)	Non-Preferred (applies to the 10-1.1mg strength capsule and the 20-1680mg packets only)	Proton Pump Inhibitors
Dayvigo tabs	(lemborexant)	Non-Preferred	Proton Pump Inhibitors
Droxia caps	(hydroxyurea)	Preferred	Sickle Cell Disease Treatments
Endari powder pack	(glutamine)	Preferred	Sickle Cell Disease Treatments
Oxbryta tab	(voxelotor)	Preferred	Sickle Cell Disease Treatments
Siklos tabs	(hydroxyurea)	Non-Preferred	Sickle Cell Disease Treatments
amphetamine salt combo ER suspension	(same)	Non-Preferred	Stimulants and Related Agents
methylphenidate soln (AG) 10mg/5ml	(same)	Non-Preferred, PA, QL	Stimulants and Related Agents
methylphenidate ER (AG of Aptnesio XR)	(same)	Non-Preferred, PA	Stimulants and Related Agents
mesalamine oral (generic Lialda)	(same)	Non-preferred, PA	Ulcerative Colitis
mesalamine ER (generic Apriso)	(same)	Non-preferred, PA	Ulcerative Colitis

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Brand Name	Generic Name	Status as of January 1, 2021	Therapeutic category
Daklinza tabs	(daclatasvir dihydro)	Non-formulary	Hepatitis C Agents
Olysio tabs	(simeprevir)	Non-formulary	Hepatitis C Agents
Viekira XR tab pack	(ombita/praritap/riton/ dasabuvir)	Formulary, QL, PA	Hepatitis C Agents

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Juxtapid caps	(lomitapide mesylate)	Formulary, PA, SP	Lipotropics, Other
Lofibra tabs	(fenofibrate)	Non-formulary	Lipotropics, Other
lidopure 5% patch	(lidocaine)	Non-formulary	Neuropathic Pain
diclofenac 1% gel	(same)	Formulary, QL	NSAIDS
Aggrenox caps	(aspirin/dipyridamole)	Non-formulary	Platelet Aggregation Inhibitors
Durlaza caps	(aspirin)	Non-formulary	Platelet Aggregation Inhibitors
Yosplara tabs	(aspirin/omeprazole)	Non-formulary	Platelet Aggregation Inhibitors
armodafinil tabs	(same)	Formulary, PA, QL	Stimulants and Related Agents
Dexedrine tabs	(dextroamphe/amphet mixed salts)	Non-formulary	Stimulants and Related Agents
Methylin chew tabs	(methylphenidate hcl)	Non-formulary	Stimulants and Related Agents

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