

West Virginia Medicaid Pharmacy Solutions

January, 2024

WEST VIRGINIA MEDICAID PHARMACY SERVICES

https://dhhr.wv.gov/bms/BMS%20Pharmacy

PROVIDER SERVICES

888-483-0793 888-483-0801 (Pharmacy) 304-348-3360 Monday – Friday 8:00 am until 5:00 pm

PHARMACY HELP DESK & PHARMACY PRIOR AUTHORIZATION

(RATIONAL DRUG THERAPY PROGRAM) 800-847-3859 (Phone)

800-531-7787 (Fax) Monday – Saturday 8:30 am until 9:00 pm Sunday 12:00 pm until 6:00 pm

> MEMBER SERVICES 888-483-0797 304-348-3365 Monday – Friday 8:00 am until 5:00 pm

PREFERRED DRUG LIST

For a copy of the most recent preferred drug list, visit: https://dhhr.wv.gov/bms/BMS%20Pharmacy/

Pages/Preferred-Drug-List.aspx

STATE MAXIMUM ALLOWABLE COST (SMAC)

SMAC Review Form:

https://dhhr.wv.gov/bms/BMS%20Pharmacy/ SMAC/Pages/default.aspx

Please refer questions to Change Healthcare at 1-855-389-9504 or e-mail to: PBA_WVSMAC@changehealthcare.com

PDL Updates for 2025

The West Virginia Medicaid Pharmaceutical and Therapeutics Committee had their annual P&T meeting on October 23rd, 2024, in Charleston, WV. The meeting included members of the Bureau for Medical Services Pharmacy Team, the P&T Committee members, and vendors providing services for the pharmacy program, as well as members of the public and public speakers. On pages 2-3 of this newsletter, you will find the updates to the Preferred Drug List from that meeting that will go into effect as of 1/1/2025.

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An additional change that will be taking place in 2025 is that the Preferred Diabetic Supply List (found online at

https://dhhr.wv.gov/bms/BMS%20Pharmacy/Documents/Preferred%20Drug%20 List/WV%20-PDSL%20111-14-2024.pdf) will be updated to include the preferred syringes, needles and lancets that will be covered. Please refer to the Preferred Diabetic Supply List for specific details of which products are preferred for 2025.

The next Pharmacy and Therapeutics meeting will take place on January 22nd, 2025, from 3-5PM virtually. Please visit the Medicaid Pharmacy website for any further information.

Upcoming PDL Changes

The following changes will be made to the Preferred Drug List (PDL), effective January 1, 2025, pending approval by the Secretary of the Department of Human Services.

For a comprehensive PDL, refer to http://www.medicaid.ms.gov/providers/pharmacy/preferred-drug-list/.

NEW PREFERRED DRUGS	
THERAPEUTIC CLASS	RECOMMENDED for PREFERRED STATUS
Alzheimer's Agents	memantine HCL ER
Antibiotics, GI and Related Agents	Vancocin capsules
Antibiotics, GI and Related Agents	vancomycin capsules
Antibiotics, Vaginal	Cleocin cream (clindamycin)
Antidepressants, Other	desvenlafaxine succinate ER tablets
Antidepressants, Other	venlafaxine IR tablets
Antipsychotics, Atypical	Rykindo IM (risperidone)
Antivirals, Topical	Denavir cream (penciclovir)
Dry Eye Products	Xiidra droperette (lifitegrast)
Macrolides	clarithromycin tablets
Ophthalmics for Allergic Conjunctivitis	Eysuvis drops (loteprednol)
Oral and Topical Contraceptives	Larin FE (norethindrone-e.estradiol-iron)
Oral and Topical Contraceptives	Loryna (ethinyl estradiol/drospirenone)
Oral and Topical Contraceptives	Zafemy patch (norelgestromin/ethin.estradiol)
Pancreatic Enzymes	Pertzye (lipase/protease/amylase)
Pituitary Suppressive, LHRH	Orilissa (elagolix)

NEW NON-PREFERRED DRUGS

THERAPEUTIC CLASS	RECOMMENDED for NON-PREFERRED STATUS
Antibiotics, GI and Related Agents	Firvanq (vancomycin solution)
Antibiotics, Vaginal	Clindesse cream (clindamycin)
Antibiotics, Vaginal	Nuvessa gel (Metronidazole)
Anticonvulsants	Vigafyde solution (vigabatrin)
Antiparkinson Agents	Crexont (carbidopa/levodopa)
Antipsychotics, Atypical	Risperdal Consta IM (risperidone microspheres)
Antivirals, Topical	penciclovir cream
Bladder Relaxant Preparations	mirabegron ER

NEW NON-PREFERRED DRUGS		
THERAPEUTIC CLASS	RECOMMENDED for NON-PREFERRED STATUS	
COPD Agents	Ohtuvayre (ensifentrine)	
Diabetes Agents, DPP-4	sitagliptin-Metformin	
Diabetes Agents, DPP-4	sitagliptin	
Diabetes Agents, GLP1 Agonists	liraglutide injection	
Diabetes Agents, SGLT2 Inhibitor	dapagliflozin-metformin	
Diabetes Agents, SGLT2 Inhibitor	dapagliflozin	
Erythropoiesis Stimulating Proteins	Mircera (methoxy PEG-epoetin	
Immunosuppressives, Oral	Myhibbin (mycophenolate mofetil)	
Neuropathic Pain	gabapentin ER	
NSAIDS	diclofenac potassium	
Ophthalmic Allergic Conjunctivitis	loteprednol etabonate	
Opiate Dependence Treatments	lofexidine	
Oral and Topical Contraceptives	Xulane patch (norelgestromin/ethin.estradiol)	
Skeletal Muscle Relaxants	baclofen suspension	
Stimulants and Related Agents	Sunosi (solriamfetol)	