



MaineCare Services
An Office of the
Department of Health and Human Services

John E. Baldacci, Governor

Brenda M. Harvey, Commissioner

Department of Health and Human Services
MaineCare Services
442 Civic Center Drive
11 State House Station
Augusta, Maine 04333-0011
Tel: (207) 287-2674; Fax: (207) 287-2675
TTY: 1-800-423-4331

To: MaineCare Providers
From: Jennifer Palow, Pharmacy Director
Date: July 23rd, 2010
Re: PDL Updates Effective: July 30th, 2010

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

Maxipime	Risperidone ODT
Sandostatin	Nuvigil
Toprol XL	Voltaren Soln
Colestid	Acular LS
Tripase	Rythmol

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

Cefepime HCl	Ketorolac Opth 0.4%
Octreotide INJ	Diclofenac Opth 0.1%
Metoprolol ER	Colestipol

The following are miscellaneous PDL changes/clarifications:

ARB combination products: As seen with angiotensin receptor blockers (ARB's), combination products like Azor and Exforge are only available without PA if a patient is on current diabetic therapy or has had a prior trial of ACE therapy.

Zenpep: Clinical PA is required to establish CF diagnosis and medical necessity. In all cases except with cystic fibrosis patients, objective evidence of pancreatic insufficiency (fat malabsorption test etc...) must be supplied.

Atypical Antipsychotics: Prior authorization will be required for preferred medications to assure the indication for use is in accordance with FDA approved or literature supported evidence-based best practices. The approved indications that will be allowed under MaineCare are:

- Schizophrenia
- Bipolar Disorder
- Agitation related to Autism
- Severe behavioral dyscontrol with risk of imminent need for emergency services such as the emergency room, crisis services, or an inpatient psychiatric facility

Nutritionals: For children under the age of 5, MaineCare will not provide milk- or soy-based standard infant formulas. Regular formulas may be sought through your nearest WIC office. MaineCare will continue to cover **medical food** for all participants in MaineCare when medical necessity is met.

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