



MaineCare Services

An Office of the
Department of Health and Human Services

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To: MaineCare Providers
From: Jennifer Cook, Pharmacy Unit Manager
Date: July 8th, 2009
Re: PDL updates: Effective 7/10/09

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

Azithromycin Powder
Fluorouracil
Metoprolol ER
Oramorph SR
Terconazole Supp
Tretinoin

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

Terazol 3 Supp
Toprol XL
Retin A Gel

The following are miscellaneous PDL changes/clarifications:

Diabetic Supplies: The MaineCare PDL has been expanded to include two new diabetic categories (Lancets and Syringes/Needles) that was previously sent in the May update. Please review the PDL at www.mainearepdl.org for preferred products in these categories.

Ketoconazole DDI: The PDL has been clarified to include a DDI on ketoconazole requiring a prior authorization when used in combination with a proton pump inhibitor.

Vitamin D: Will no longer require a dialysis diagnosis for processing the claim.