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Re: Summary of Formulary/Prior Authorization Changes Effective October 1, 2022

Your health care is our priority. That is why we are writing to tell you that on October 1, 2022, there will be changes made to Arkansas Medicaid’s Preferred Drug List (PDL) and CareSource PASSE’s management of products not on Arkansas Medicaid’s PDL. A PDL is a list of preferred drugs.

SUMMARY OF CHANGES TO THE ARKANSAS MEDICAID PDL EFFECTIVE OCTOBER 1, 2022:

THE FOLLOWING MEDICATION(S) HAVE A CHANGE IN PRIOR AUTHORIZATION/CRITERIA ON THE PDL EFFECTIVE OCTOBER 1, 2022.

Product Name	Dose(s)	Notes – If Applicable
Aimovig Autoinjector	70 mg/mL, 140 mg/mL	Updated criteria for migraine prevention
Ajovy Autoinjector, Syringe	225 mg/1.5 mL	Updated criteria for migraine prevention
Asmanex Twisthaler	110 mcg, 220 mcg	Will not require prior authorization
Belsomra Tablet	5 mg, 10 mg, 15 mg, 20 mg	Age limit of ≥18 years old added
Budesonide Ampules	0.25 mg/2 mL, 0.5 mg/2 mL, 1 mg/2 mL	Added criteria for eosinophilic esophagitis
Byetta Pen	5 mcg, 10 mcg	Updated criteria
Dayvigo Tablet	5 mg, 10 mg	Age limit of ≥18 years old added
Doxepin Tablet	3 mg, 6 mg	Age limit of ≥18 years old added
Dupixent Pen, Syringe	100 mg/0.67 mL, 200 mg/1.14 mL, 300 mg/2 mL	Added criteria for eosinophilic esophagitis
Edluar Sublingual Tablet	5 mg, 10 mg	Age limit of ≥18 years old added
Emgality Pen, Syringe	100 mg/mL, 120 mg/mL	Updated criteria for migraine prevention
Estazolam Tablet	1 mg, 2 mg	Age limit of ≥18 years old added
Eszopiclone Tablet	1 mg, 2 mg, 3 mg	Age limit of ≥18 years old added
Farxiga Tablet	5 mg, 10 mg	Updated criteria

Product Name	Dose(s)	Notes – If Applicable
Flovent HFA	44 mcg, 110 mcg, 220 mcg	Will not require prior authorization (Brand)
Flurazepam Capsule	15 mg, 30 mg	Age limit of ≥18 years old added
Jardiance Tablet	10 mg, 25 mg	Updated criteria
Quviviq Tablet	25 mg, 50 mg	Age limit of ≥18 years old added
Ramelteon Tablet	8 mg	Age limit of ≥18 years old added
Temazepam Capsule	7.5 mg, 15 mg, 22.5 mg, 30 mg	Age limit of ≥18 years old added
Victoza Pen	18 mg/3 mL	Updated criteria
Zaleplon Capsule	5 mg, 10 mg	Age limit of ≥18 years old added
Zolpidem Extended Release Tablet	6.25 mg, 12.5 mg	Age limit of ≥18 years old added
Zolpidem Sublingual Tablet	1.75 mg, 3.5 mg	Age limit of ≥18 years old added
Zolpidem Tablet	5 mg, 10 mg	Age limit of ≥18 years old added

SUMMARY OF CHANGES TO PRODUCTS NOT ON THE ARKANSAS MEDICAID PDL EFFECTIVE OCTOBER 1, 2022:

THE FOLLOWING MEDICATION(S) HAVE A CHANGE IN PRIOR AUTHORIZATION/CRITERIA EFFECTIVE OCTOBER 1, 2022.

Product Name	Dose(s)	Notes – If Applicable
Camzyos Capsule	2.5 mg, 5 mg, 10 mg, 15 mg	New criteria
Dihydroergotamine Nasal Spray	0.5 mg/spray	Updated criteria for acute migraine treatment
Elyxyb Solution	120 mg/4.8 mL	Updated criteria for acute migraine treatment
Feiba NF Vial	500 unit, 1,000 unit, 2,500 unit	Updated criteria
Hemlibra Vial	30 mg/mL, 60 mg/0.4 mL, 105 mg/0.7 mL, 150 mg/mL	Updated criteria
Novoseven RT Vial	1 mg, 2 mg, 5 mg, 8 mg	Updated criteria
Nurtec ODT Tablet	75 mg	Updated criteria for acute migraine treatment and migraine prevention

Product Name	Dose(s)	Notes – If Applicable
Qulipta Tablet	10 mg, 30 mg, 60 mg	Updated criteria for migraine prevention
Reyvow Tablet	50 mg, 100 mg	Updated criteria for acute migraine treatment
Sevenfact Vial	1 mg, 5 mg	Updated criteria
Trudhesa Nasal Spray	0.725 mg/spray	Updated criteria for acute migraine treatment
Ubrelvy Tablet	50 mg, 100 mg	Updated criteria for acute migraine treatment
Vijoice Daily Dose Pack, Tablet	50 mg, 125 mg, 250 mg	New criteria for PIK3CA-Related Overgrowth Spectrum (PROS)

What should you do?

First, talk to your prescriber. There are a few ways you and your prescriber can find medication information:

- You can look on our website at **CareSourcePASSE.com**. On the Members page, under Tools & Resources click on “Find My Prescriptions”.
- Or, call our Member Services Department at **1-833-230-2005** (TDD/TTY: 711).

We are here to help you. The CareSource PASSE Member Services Department is open Monday through Friday, 8 a.m. to 5 p.m. CST.

Sincerely,

CareSource PASSE

CareSource complies with applicable state and federal civil rights laws and does not discriminate on the basis of age, gender, gender identity, color, race, disability, national origin, marital status, sexual preference, religious affiliation, health status, or public assistance status.

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DHS Approved: 2/23/2022