



P.O. Box 8738, Dayton, OH 45401-8738 | 800.488.0134 | CareSource.com

09/01/2018

Re: Summary of PDL Changes Effective October 1, 2018

Dear CareSource Member:

Your health care is our priority. That is why we are writing to tell you that on October 1, 2018, CareSource will change its Preferred Drug List (PDL). A PDL is a list of preferred drugs.

THE FOLLOWING MEDICINES WILL BE PREFERRED ON THE PDL EFFECTIVE OCTOBER 1, 2018

Brand Name	Generic Name	Dose(s)	Notes
Firvanq	Vancomycin	25 mg/mL; 50 mg/mL	Prior Authorization Required

THE FOLLOWING MEDICINES WILL BE NON-PREFERRED ON THE PDL EFFECTIVE OCTOBER 1, 2018

Brand Name	Generic Name	Dose(s)	Notes
Vancocin	Vancomycin	125 mg; 250 mg	

THE FOLLOWING MEDICINES HAVE A CHANGE IN STATUS EFFECTIVE OCTOBER 1, 2018

Brand Name	Generic Name	Dose(s)	Notes
Hepsera	Adefovir dipivoxil	10 mg	Now Requires Prior Authorization
Baraclude	Entecavir	0.5 mg; 1 mg 0.05 mg/mL	Now Requires Prior Authorization
Epivir-HBV	Lamivudine	100 mg 5.0 mg/mL	Now Requires Prior Authorization
Spinosad	Natroba	0.9%	Now Requires Prior Authorization

What should you do?

First, talk to your prescriber. There may be other medicines on the CareSource PDL that you can take instead. There are a few ways you and your prescriber can find medicines:

- You can look on our website at **CareSource.com**. Go to the Pharmacy page and click on “Preferred Drug List”.
- Or, call our Member Services Department at **1-800-488-0134** (TTY: 1-800-750-0750 or 711).

We are here to help you. The CareSource Member Services Department is open Monday through Friday, 7 a.m. to 7 p.m.

Sincerely,

CareSource Pharmacy Department

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.