



# First Health Services Corporation<sup>®</sup>

Nevada Medicaid and Nevada Check Up  
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## MEMORANDUM

TO: All Medicaid Prescribers and Pharmacies  
FROM: First Health Services  
DATE: May 16, 2005

**RE: Update to the Nevada Medicaid Preferred Drug List (PDL) and Addition of New/Revised Clinical Prior Authorization (PA) Edits**

### **Preferred Drug List:**

The Nevada Pharmacy and Therapeutics Committee of the Department of Human Resources' Division of Health Care Financing and Policy reviewed additional drug classes for the Preferred Drug List on April 28, 2005. The classes reviewed and the corresponding preferred drugs selected by the committee were as follows:

#### Drug Class

#### Preferred Drugs

Anti-Migraine Triptans

Maxalt (all dosage forms)  
Zomig (all dosage forms)  
Immitrex (injection only)

Antemetics: Oral, 5-HT<sub>3</sub>'s

Zofran added for patients < 18 years old

ADHD/Stimulants/Non-Stimulants

Provigil added for ICD-9 codes 347.00,  
347.01, 347.10, 347.11, 780.53 and 780.57

Non-preferred agents in the Triptan class will require prior authorization, effective June 1, 2005. The Zofran and Provigil changes will also become effective June 1, 2005.

A complete Preferred Drug List (PDL), including additions, is posted on the First Health Services' website at <http://nevada.fhsc.com> (select "Preferred Drug List" from the "Pharmacy" drop-down menu).

**Clinical Prior Authorization (PA) Edits:**

Several new or revised drug edits will also become effective June 1, 2005. These edits involve clinical and/or quantity limitations. The drugs affected are as follows:

<u>Drug or Drug Class</u>	<u>Change</u>
Proton Pump Inhibitors	Increase in length of approval period for GERD
ADHD Agents	PA requirement extended to Strattera®
Long-Acting Narcotics	Change in allowable Oxycontin® doses per day. Dose-per-day limitations added to Morphine Sulfate SR, Avinza®, and Kadian®

Specific details regarding each of these edits can be found at the following website: <http://www.dhcfp.state.nv.us> (click on “Medicaid Manuals” and select “Chapter 1200, Appendix A”).

If you have questions regarding the PDL or the edits described above, please contact the First Health Services Clinical Call Center at 1-800-505-9185.