



## UPDATE

### WellCare Health Plan Georgia Families® and PeachCare for Kids® Preferred Drug List

09/12/2019

Dear Provider,

At the **09/12/2019** WellCare Pharmacy & Therapeutics Committee meeting, it was decided that the following changes would be made to the **WellCare Health Plans Georgia Families® and PeachCare for Kids® Medicaid Preferred Drug List (PDL)**. These changes will be effective **11/26/2019**. Please review them carefully.

Key	
<b>UPPER CASE</b> = Brand Name Drugs	<b>QL</b> = Quantity Limit
<b>Lower case italics</b> = Generic Drugs	<b>ST</b> = Step Therapy
<b>PDL</b> = Preferred Drug List	<b>AL</b> = Age Limit
<b>PA</b> = Prior Authorization	<b>YOA</b> = Years of Age
<b>SC</b> = Safety Concerns	<b>LU</b> = Low Utilization
<b>PC</b> = Pharmacoeconomic Considerations	<b>DD</b> = Discontinued Drug
<b>GA</b> = Generic Available	

Effective date of change: **11/26/2019**

Drug Name	Therapeutic Class	Change	PDL Alternative (if applicable)
<i>Permethrin 1% Lotion</i> <i>*Effective Date 7/30/2019*</i>	Dermatologic Agents	Added to PDL as a Prerequisite for Spinosad	
<i>Permethrin 5% Cream</i>	Dermatologic Agents	Removed from PDL as a Prerequisite for Spinosad/PC	

If you have any questions, please call our Pharmacy Help Desk. The toll-free number is <1-866-231-1821> Monday-Friday, 7 a.m. to 7 p.m. E.S.T.

Thank you for your care of WellCare Health Plans Georgia Families® and PeachCare for Kids® Medicaid members.

Sincerely,

WellCare Health Plans



WellCare proudly serves the Georgia Medicaid and PeachCare for Kids® members enrolled in the Georgia Families® program and women enrolled in the Planning for Healthy Babies® program.