

**WEST VIRGINIA MEDICAID
PREFERRED DRUG LIST**

PHASE IV

Phase IV will be implemented on April 9, 2003. Drugs included in Phase IV are:

DRUG CLASS	PREFERRED	NON-PREFERRED
OPHTHALMICS, ALLERGIC CONJUNCTIVITIS <i>Effective 2/1/03</i> <i>Implement 4/9/03</i>	azelastine hydrochloride (Optivar) cromolyn sodium (Opticrom)◆ emedastine difumarate (Emadine) ketorolac tromethamine (Acular) ketotifen fumarate (Zaditor) levocabastine (Livostin) loteprednol (Alrex) olopatadine hydrochloride (Patanol)	lodoxamide tromethamine (Alomide) nedocromil sodium (Alocril) pemirolast potassium (Alamast)
ANTIVIRALS, GENERAL <i>Effective 2/1/03</i> <i>Implement 4/9/03</i>	acyclovir (Zovirax)◆ amantadine (Symmetrel)◆ ganciclovir (Cytovene) rimantadine (Flumadine)◆ valacyclovir (Valtrex)	famciclovir (Famvir)* valganciclovir (Valcyte) zanamivir (Relenza) oseltamivir (Tamiflu)
NASAL PREPARATIONS, OTHER <i>Effective 2/1/03</i> <i>Implement 4/9/03</i>		ipratropium nasal 0.03% (Atrovent Nasal Spray) ipratropium nasal 0.06% (Atrovent Nasal Spray) azelastine (Astelin)
ERYTHROPOIESIS STIMULATING PROTEINS <i>Effective 2/1/03</i> <i>Implement 4/9/03</i>	rHuEPO (Epogen)** rHuEPO (Procrit)**	darbepoetin (Aranesp)
PHOSPHATE BINDERS <i>Effective 2/1/03</i> <i>Implement 4/9/03</i>	calcium acetate (PhosLo) magnesium carbonate, calcium carbonate, folic acid (Magnebind 400 Rx)	sevelamer (RenaGel)*
HYPOGLYCEMICS, ALPHA-GLUCOSIDASE INHIBITORS <i>Effective 2/1/03</i> <i>Implement 4/9/03</i>	miglitol (Glyset)	acarbose (Precose)
IMMUNOMODULATORY AGENTS FOR MULTIPLE SCLEROSIS <i>Effective 2/1/03</i> <i>Implement 4/9/03</i>	interferon beta-1a (Rebif)** interferon beta-1b (Betaseron)**	glatiramer (Copaxone) interferon beta-1a (Avonex)
ANTICOAGULANTS, INJECTABLES <i>Effective 2/1/03</i> <i>Implement 4/9/03</i>	dalteparin (Fragmin)** fondaparinux (Arixtra)** enoxaparin (Lovenox)**	tinzaparin (Innohep)

DRUG CLASS	PREFERRED	NON-PREFERRED
ANTIDEPRESSANTS, SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIs) <i>Effective 2/1/03</i> <i>Implement 4/9/03</i>	citalopram (Celexa) fluoxetine (Prozac)◆ fluvoxamine (Luvox)◆ paroxetine (Paxil) paroxetine CR (Paxil CR) sertraline (Zoloft)	escitalopram (Lexapro) fluoxetine ER (Prozac Weekly) fluoxetine (Sarafem)
ANTIPSYCHOTICS, ATYPICAL <i>Effective 2/1/03</i> <i>Implement 4/9/03</i>	clozapine (Clozaril)◆ quetiapine (Seroquel) risperidone (Risperdal) ziprasidone (Geodon)	aripiprazole (Abilify) olanzapine (Zyprexa) olanzapine (Zyprexa Zydys)
ALZHEIMER'S AGENTS <i>Effective 2/1/03</i> <i>Implement 4/9/03</i>	donepezil (Aricept) galantamine (Reminyl) rivastigmine (Exelon)	tacrine (Cognex)

- ◆ Generic forms only.
- * Status pending.
- ** Prior authorization required.
- *** No prior authorization required for children through 8 years of age.
- † Prior authorization required after limits exceeded.
- ++ Prior authorization required for adults > age 18 years.
- <> New drug, not yet reviewed.