



STATE OF NEW YORK DEPARTMENT OF HEALTH

Corning Tower The Governor Nelson A. Rockefeller Empire State Plaza Albany, New York 12237

Richard F. Daines, M.D.
Commissioner

Wendy E. Saunders
Chief of Staff

January 22, 2008

Dear Prescriber:

On November 2, 2007, the Medicaid Pharmacy and Therapeutics (P&T) Committee re-reviewed 16 drug classes subject to the Preferred Drug Program (PDP). The Commissioner of Health has accepted the recommendations of the Committee and approved changes in the preferred or non-preferred status of certain drugs subject to the PDP. Effective February 21, 2008, prior authorization requirements will change for some drugs in the following nine drug classes:

Antihistamines - Second Generation	Anti-Emetics
Beta ₂ Adrenergic Agents - Inhaled Long Acting	Anti-Fungals
Beta ₂ Adrenergic Agents - Inhaled Short Acting	Anti-Virals
Cephalosporins - Third Generation	Fluoroquinolones - Otic
Corticosteroids - Inhaled	

Enclosed is the most up-to-date Preferred Drug List (PDL), with a full listing of preferred and non-preferred drugs for each of the drug classes currently subject to the PDP. Additional information, such as a "Quicklist" of only preferred drugs, updated prior authorization forms, and clinical criteria for the PDP and the Clinical Drug Review Program (CDRP) is available at one of the following websites:

www.nyhealth.gov or newyork.fhsc.com or www.eMedNY.org

Remember: If you prescribe the preferred drug, no further action on your part is required.

To obtain prior authorization for non-preferred drugs, please call the prior authorization clinical call center at 1-877-309-9493. Be sure to listen for the appropriate prompts. The clinical call center is available 24 hours per day, seven days per week with pharmacy technicians and pharmacists who will work with you, or your agent, to quickly obtain a prior authorization number.

Requests for prior authorization of non-preferred drugs can be faxed to the clinical call center at 1-800-268-2990. Please note that a faxed request can take up to 24 hours to be completed.

If you have any questions or wish to obtain additional information regarding the PDP, please call the clinical call center at 1-877-309-9493. Thank you for your continued support of our efforts to maintain a quality pharmacy program for Medicaid enrollees.

Sincerely,

Mary Kelley Cherubin
Preferred Drug Program Manager
Bureau of Pharmacy Policy and Operations
Office of Health Insurance Programs

Enclosure