



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
Executive Deputy Commissioner

May 15, 2009

Dear Prescriber:

The New York State Medicaid Preferred Drug Program (PDP) is expanding to include additional drug classes. Prescriptions written on or after June 10, 2009 for non-preferred drugs in the following drug classes will require prior authorization:

- Antibiotics – Topical
- Antihistamines – Intranasal
- Anti-Virals – Topical
- Direct Renin Inhibitors
- Non-Ergot Dopamine Receptor Agonists
- Non-Steroidal Anti-Inflammatory Drugs (NSAIDS) – Prescription
- Psoriasis Agents – Topical
- Skeletal Muscle Relaxants

Enclosed is the most up-to-date Quick list, providing a listing of preferred drugs for each of the therapeutic classes currently subject to the PDP. Additional information, such as 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 <http://newyork.fhsc.com> or www.eMedNY.org

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

To receive a comprehensive listing of both non-preferred and preferred agents within the therapeutic classes managed by the Preferred Drug Program, please request a Preferred Drug List (PDL) by calling the clinical call center at 1-877-309-9493.

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, 7 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 and Family Health Plus enrollees.

Sincerely,

Linda J. Jones, R.N.
Director, Medicaid Pharmacy Program
Office of Health Insurance Programs

Enclosure (Quick list 05/04/2009)