



Washington State Health Care Authority  
**Prescription Drug Program**

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February 10, 2010

Dear Interested Party,

Based on recommendations by the Washington State Pharmacy and Therapeutics Committee, the Department of Social and Health Services - Health and Recovery Services Administration, the Health Care Authority – PEBB Plan Management, and the Department of Labor & Industries have named the following drugs as preferred in their respective therapeutic classes on the Washington State Preferred Drug List (PDL), effective April 1, 2010:

**Note: this updated notice includes additional drug class changes effective April 1, 2010, as well as the previously announced changes dated January 13, 2010. Based on stakeholder feedback, the agencies have updated the drug class tables to make the preferred drug selections more clear.**

Alzheimer's, Drugs to Treat		Agency Coverage		
Ingredient Name	Preferred Products	LNI	Medicaid	UMP
donepezil HCL	Aricept <sup>®</sup>	No	Yes	Yes
	Aricept ODT <sup>®</sup>	No	Yes	Yes
galantamine HBR	galantamine HBR ER	No	Yes	Yes
	galantamine HBR solution	No	Yes	Yes
	galantamine HBR tablet	No	Yes	Yes
memantine HCL	Namenda <sup>®</sup> solution	No	Yes	Yes
	Namenda <sup>®</sup> tablet	No	Yes	Yes
	Namenda Titration Pak <sup>®</sup>	No	Yes	Yes
<b>Effect:</b> no change to the PDL				

Newer Antihistamines		Agency Coverage		
Ingredient Name	Preferred Products	LNI	Medicaid	UMP
cetirizine	cetirizine tablet	Yes	Yes	Yes
	cetirizine chewable	No	Yes	Yes
	cetirizine syrup	No	Yes	Yes
loratadine	loratadine tablet	Yes	Yes	Yes
	loratadine chewable	No	Yes	Yes
	loratadine syrup	No	Yes	Yes
<b>Effect:</b> makes fexofenadine hydrochloride a non-preferred drug on the PDL				

Antiplatelets		Agency Coverage		
Ingredient Name	Preferred Products	LNI	Medicaid	UMP
aspirin/dipyridamole	Aggrenox ER <sup>®</sup>	No	EPA Required	Yes
clopidogrel bisulfate	Plavix <sup>®</sup> tablet	No	EPA Required	Yes
<b>Effect:</b> no change to the PDL				

Atypical Antipsychotics		Agency Coverage		
Ingredient Name	Preferred Products	LNI	Medicaid	UMP
aripiprazole	Abilify <sup>®</sup> oral solution	Yes	Yes	Yes
	Abilify <sup>®</sup> injectable	No	EPA Required	Yes
	Abilify <sup>®</sup> tablet	Yes	Yes	Yes
	Abilify Discmelt <sup>®</sup>	Yes	Yes	Yes
clozapine	clozapine tablet	Yes	Yes	Yes
	Fazacllo <sup>®</sup>	Yes	Yes	Yes
olanzapine	Zyprexa <sup>®</sup> injectable	No	EPA Required	Yes
	Zyprexa <sup>®</sup> tablet	Yes	Yes	Yes
	Zyprexa Zydis <sup>®</sup>	Yes	Yes	Yes
paliperidone	Invega <sup>®</sup> extended release tablet	Yes	Yes	Yes
quetiapine fumarate	Seroquel <sup>®</sup> tablet	Yes	Yes	Yes
	Seroquel XR <sup>®</sup> tablet	Yes	Yes	Yes
risperidone	Risperdal Consta <sup>®</sup> injectable	No	EPA Required	Yes
	risperidone oral solution	Yes	Yes	Yes
	risperidone tablet	Yes	Yes	Yes
	risperidone ODT	Yes	Yes	Yes
ziprasidone HCL	Geodon <sup>®</sup> capsule	Yes	Yes	Yes
ziprasidone mesylate	Geodon <sup>®</sup> injectable	No	EPA Required	Yes
<b>Effect:</b> no change to the PDL				

Oral Hypoglycemics		Agency Coverage		
Ingredient Name	Preferred Product	LNI	Medicaid	UMP
glimepiride	glimepiride tablet	No	Yes	Yes
glipizide	glipizide tablet	No	Yes	Yes
	glipizide ER/XL tablet	No	Yes	Yes
glyburide	glyburide tablet	No	Yes	Yes
	glyburide micronized	No	Yes	Yes
<b>Effect:</b> no change to the PDL				

Skeletal Muscle Relaxants		Agency Coverage		
Ingredient Name	Preferred Products	L&I	Medicaid	UMP
cyclobenzaprine HCL	cyclobenzaprine HCL tablet	Yes	Yes	Yes
methocarbamol	methocarbamol tablet	Yes	Yes	Yes
Antispasticity		Agency Coverage		
Ingredient Name	Preferred Products	L&I	Medicaid	UMP
baclofen	baclofen	Yes	Yes	Yes
tizanidine HCL	tizanidine HCL	Yes	Yes	Yes
<b>Effect:</b> no change to the PDL				

Triptan		Agency Coverage		
Ingredient Name	Preferred Products	LNI	Medicaid	UMP
eletriptan HBR	Relpax <sup>®</sup> tablet	No	Yes	Yes
rizatriptan benzoate	Maxalt <sup>®</sup> tablet	No	Yes	Yes
	Maxalt-MLT <sup>®</sup>	No	Yes	Yes
sumatriptan succinate	sumatriptan succinate kit injectable	No	Yes	Yes
	sumatriptan succinate nasal spray	No	Yes	Yes
	sumatriptan succinate tablet	No	Yes	Yes
	sumatriptan succinate refill kit injectable	No	Yes	Yes
<b>Effect:</b> makes sumatriptan and Maxalt <sup>®</sup> preferred drugs on the PDL, and makes Zomig <sup>®</sup> a non-preferred drug on the PDL				

Antidepressants - Other		Agency Coverage		
Ingredient Name	Preferred Products	LNI	Medicaid	UMP
bupropion HCL	budeprion SR	Yes	Not for smoking cessation	Yes
	budeprion XL	Yes	Not for smoking cessation	Yes
	bupropion HCL	Yes	Not for smoking cessation	Yes
	bupropion HCL SR	Yes	Not for smoking cessation	Yes
	bupropion HCL XL	Yes	Not for smoking cessation	Yes
mirtazapine	mirtazapine tablets	Yes	Yes	Yes
	mirtazapine dissolvable tablet	Yes	Yes	Yes
	mirtazapine ODT	Yes	Yes	Yes
Antidepressants - SNRI		Agency Coverage		
Ingredient Name	Preferred Products	LNI	Medicaid	UMP
venlafaxine HCL	venlafaxine HCL tablets	Yes	Yes	Yes
	venlafaxine HCL ER	Yes	Yes	Yes
Antidepressants - SSRI		Agency Coverage		
Ingredient Name	Preferred Products	LNI	Medicaid	UMP
citalopram HBR	citalopram HBR solution	Yes	Yes	Yes
	citalopram HBR tablets	Yes	Yes	Yes
fluoxetine HCL	fluoxetine capsules	Yes	Yes	Yes
	fluoxetine HCL capsules	Yes	Yes	Yes
	fluoxetine HCL solution	Yes	Yes	Yes
	fluoxetine HCL tablets	Yes	Yes	Yes
fluvoxamine maleate	fluvoxamine maleate	Yes	Yes	Yes
paroxetine HCL	paroxetine HCL suspension	Yes	Yes	Yes
	paroxetine HCL tablets	Yes	Yes	Yes
	paroxetine HCL ER	Yes	Yes	Yes
sertraline HCL	sertraline HCL concentrate	Yes	Yes	Yes
	sertraline HCL tablets	Yes	Yes	Yes
<b>Effect:</b> makes budeprion, fluvoxamine maleate and venlafaxine ER preferred drugs on the PDL and makes Effexor XR <sup>®</sup> a non-preferred drug on the PDL				

Beta Blockers		Agency Coverage		
Ingredient Name	Preferred Product	LNI	Medicaid	UMP
acebutolol HCL	acebutolol capsule	No	Yes	Yes
atenolol	atenolol tablet	No	Yes	Yes
carvedilol	carvedilol tablet	No	Yes	Yes
labetalol HCL	labetalol HCL tablet	No	Yes	Yes
metoprolol succinate	metoprolol succinate ER	No	Yes	Yes
metoprolol tartrate	metoprolol tartrate tablet	No	Yes	Yes
nadolol	nadolol tablet	No	Yes	Yes
pindolol	pindolol tablet	No	Yes	Yes
propranolol HCL	propranolol HCL solution	No	Yes	Yes
	propranolol HCL tablet	No	Yes	Yes
	propranolol HCL ER	No	Yes	Yes
timolol maleate	timolol maleate tablet	No	Yes	Yes

**Effect:** makes betaxolol a non-preferred drug on the PDL

Hepatitis C		Agency Coverage		
Ingredient Name	Preferred Product	LNI	Medicaid	UMP
peginterferon alfa-2B	Peg-Intron <sup>®</sup>	No	Yes	Yes
	Peg-Intron Redipen <sup>®</sup>	No	Yes	Yes
	Peg-Intron Redipen Pak 4 <sup>®</sup>	No	Yes	Yes

**Effect:** no change to the PDL

Long Acting Opioids		Agency Coverage		
Ingredient Name	Preferred Products	LNI	Medicaid	UMP
methadone HCL	methadone HCL concentrated	Yes	Yes	Yes
	methadone HCL solution	Yes	Yes	Yes
	methadone HCL tablets	Yes	Yes	Yes
	methadone HCL dissolvable tablet	Yes	Yes	Yes
	methadone HCL intensol concentrate	Yes	Yes	Yes
	methadose concentrate	Yes	Yes	Yes
	methadose tablets	Yes	Yes	Yes
	methadose soluble tablet	Yes	Yes	Yes
	methadose sugar-free concentrate	Yes	Yes	Yes
morphine sulfate	morphine sulfate CR	Yes	Yes	Yes
	morphine sulfate ER	Yes	Yes	Yes

**Effect:** make methadose a preferred drug on the PDL

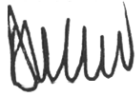
Nasal Corticosteroids		Agency Coverage		
Ingredient Name	Preferred Product	LNI	Medicaid	UMP
flunisolide	flunisolide solution	Yes	Yes	Yes
fluticasone propionate	fluticasone propionate nasal spray	Yes	Yes	Yes
triamcinolone acetonide	Nasacort AQ <sup>®</sup>	No	Yes	Yes

**Effect:** no change to the PDL

Each agency will use the common PDL according to its benefit structure. You may view the current PDL at: <http://www.rx.wa.gov/documents/washingtonpdl.pdf>

If you have other questions or comments regarding this announcement, please contact Leta Evaskus at (206) 521-2029 or by email at [leta.evaskus@hca.wa.gov](mailto:leta.evaskus@hca.wa.gov).

Sincerely,

A handwritten signature in black ink, appearing to read "Duane Thurman".

Duane Thurman  
Director, Prescription Drug Programs  
Washington State Health Care Authority