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## Absolute Total Care Preferred Drug List (PDL) Updates – Q2 2021

Absolute Total Care routinely reviews the medications available in the Preferred Drug List (PDL). Items are added, removed or modified periodically due to industry standards, market availability, and/or assessment of use. Below is the list of changes to the published PDL this quarter.

| Brand Name (Generic)                | Dosage Form | Strength  | Before Update                  | After Update                     | Notes  |
|-------------------------------------|-------------|---|--------------------------------|----------------------------------|--|
| Insulin Pen Needles (all brands)    | Pen Needles | N/A   | On PDL (preferred)             | Not on PDL (non-preferred)       | Replaced by BD (brand-only) Insulin Pen Needles              |
| BD (brand-only) Insulin Pen Needles | Pen Needles | N/A   | Not on PDL (non-preferred)     | On PDL (preferred)               | Replaces Insulin Pen Needles (all brands)                    |
| Victoza (liraglutide)               | Injectable  | 18mg/3ml  | On PDL (preferred with PA; QL) | Not on PDL (non-preferred)       | Removed from PDL (Bydureon/Byetta remain on PDL with PA, QL) |
| Creon (pancrelipase)                | Capsule     | 3000 units<br>6000 units<br>12000 units<br>24000 units<br>36000 units | On PDL (preferred)             | On PDL (preferred with PA added) | PA added   |
| Pancreaze (pancrelipase)            | Capsule     | 2600 units<br>4200 units<br>10500 units<br>16800 units<br>21000 units | On PDL (preferred)             | On PDL (preferred with PA added) | PA added   |

For the most current program description you may call Provider Services at 1-866-433-6041 or visit the Absolute Total Care website at [absolutetotalcare.com](http://absolutetotalcare.com).

Key: PDL=Preferred Drug List AL=Age Limit QL=Quantity Limit MDD= Max Daily Dosage CL=Claim Limit