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**West Virginia Medicaid Preferred Drug List (PDL)
Recommended Changes Summary
Pharmacy and Therapeutics Committee Meeting
October 23, 2024**

| DRUG | CURRENT PDL STATUS | 01/01/2025 PLANNED PDL STATUS | RECOMMEND GRANDFATHER EXISTING USERS | COMMENTS |
|---|---------------------------|--------------------------------------|---|-----------------|
| Alzheimer's Agents | | | | |
| memantine ER capsules | Non-Preferred | Preferred | | |
| Antibiotics, GI and Related Agents | | | | |
| Firvanq solution (vancomycin) | Preferred | Non-Preferred | | |
| Vancocin capsules (vancomycin) | Non-Preferred | Preferred | | |
| vancomycin capsules | Non-Preferred | Preferred | | |
| Antibiotics, Vaginal | | | | |
| Cleocin cream (clindamycin phosphate) | Non-Preferred | Preferred | | |
| Clindesse cream (clindamycin phosphate) | Preferred | Non-Preferred | | |
| Nuversa gel (metronidazole) | Preferred | Non-Preferred | | |
| Solosec (secindazole) | Preferred | Non-Preferred | | |

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|--|--------------------|-------------------------------|--------------------------------------|------------------|
| Anticonvulsants | | | | |
| Vigafyde solution (vigabatrin) | New to PDL | Non-Preferred | | |
| Antidepressants, Other | | | | |
| Desvenlafaxine succinate ER tablets | Non-Preferred | Preferred | | |
| Venlafaxine IR tablets | Non-Preferred | Preferred | | |
| Antiparkinson's Agents | | | | |
| Crexont ER capsules (carbidopa/levodopa) | New to PDL | Non-Preferred | | |
| Antipsychotics, Atypical | | | | |
| Risperdal Consta IM (risperidone microspheres) | Preferred | Non-Preferred | | |
| Rykindo IM (risperidone microspheres) | Non-Preferred | Preferred | | |
| Antivirals, Topical | | | | |
| Denavir cream (penciclovir) | Non-Preferred | Preferred | | |
| penciclovir cream | New to PDL | Non-Preferred | | |
| Bladder Relaxant Preparations | | | | |
| mirabegron ER tablets | New to PDL | Non-Preferred | | |
| COPD Agents | | | | |
| Ohtuvayre inhalation ampul (ensifentrine) | New to PDL | Non-Preferred | | |
| Diabetes Agents, DPP-4 Inhibitors | | | | |
| sitagliptin tablets | New to PDL | Non-Preferred | | *Generic Zituvio |
| sitagliptin/metformin tablets | New to PDL | Non-Preferred | | |
| Diabetes Agents, GLP-1 Agonists | | | | |
| liraglutide injection | New to PDL | Non-Preferred | | *Generic Victoza |

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| Diabetes Agents SGLT2 Inhibitors | | | | |
| dapagliflozin tablets | New to PDL | Non-Preferred | | *Generic Faxiga |
| dapagliflozin/metformin ER tablets | New to PDL | Non-Preferred | | *Generic Xigduo XR |
| Dry Eye Products | | | | |
| Xiidra droperette (lifitegrast) | Non-Preferred | Preferred | | |
| Erythropoiesis Stimulating Proteins | | | | |
| Mircera (methoxy PEG-epoetin) | Preferred | Non-Preferred | | |
| Immunosuppressives, Oral | | | | |
| Myhibbin oral suspension (mycophenolate mofetil) | New to PDL | Non-Preferred | | |
| Macrolides | | | | |
| clarithromycin tablets | Non-Preferred | Preferred | | |
| Neuropathic Pain | | | | |
| gabapentin ER tablets | New to PDL | Non-Preferred | | *Generic Gralise |
| NSAIDs | | | | |
| diclofenac potassium tablets | Preferred | Non-Preferred | | |
| Ophthalmics for Allergic Conjunctivitis | | | | |
| Eysuvis drops (loteprednol) | Non-Preferred | Preferred | | |
| loteprednol drops | New to PDL | Non-Preferred | | *Generic Alrex |
| Opiate Dependence Treatments | | | | |
| lofexidine tablets | New to PDL | Non-Preferred | | *Generic Lucemyra |
| | | | | |

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|--|--------------------|-------------------------------|--------------------------------------|----------|
| Oral and Topical Contraceptives | | | | |
| Larin Fe tablets (norethindrone-e. estradiol-iron) | Non-Preferred | Preferred | | |
| Loryna tablets (e. estradiol/drospirenone) | Non-Preferred | Preferred | | |
| Xulane patch (norelgestromin/e. estradiol) | Preferred | Non-Preferred | | |
| Zafemy patch (norelgestromin/e. estradiol) | Non-Preferred | Preferred | | |
| Pancreatic Enzymes | | | | |
| Pertyze capsules (Lipase/Protease/Amylase) | Non-Preferred | Preferred | | |
| Pituitary Suppressive Agents, LHRH | | | | |
| Orilissa tablets (elagolix) | Non-Preferred | Preferred | | |
| Skeletal Muscle Relaxant | | | | |
| baclofen suspension | New to PDL | Non-Preferred | | |
| Stimulants and Related Agents | | | | |
| Sunosi tablets (solriamfetol) | Preferred | Non-Preferred | | |