



Illinois Single Preferred Drug List (PDL) Provider Frequently Asked Questions (FAQs)

1. When did the PDL go into effect?

The Illinois Medicaid mandated PDL was effective January 1, 2020

2. Which beneficiaries does the Statewide PDL apply to?

Statewide PDL applies to Medicaid members only

3. What do the changes to the State PDL involve?

All Managed Care Medicaid Health Plans must cover the same medications as the State of Illinois Fee for Service Plan.

4. What is the meaning of a Preferred vs. a non-Preferred medication?

Preferred drugs are drugs that are covered on the formulary when used demonstrating FDA approved diagnosis and dosing.

Non-preferred drugs are available drugs that require prior approval and are only approved when there is clinical justification as to why the patient cannot use a preferred drug.

5. What does Preferred with PA mean?

Preferred with PA means a medication is covered as long as the utilization management criteria are met.

6. Where can the Preferred Drug List be found?

CountyCare's PDL can be found at: <http://www.countycare.com/pdl>

7. What happens if a current member cannot take a medication that is on the PDL?

Prior Authorization Medication requests are available, the member or provider may initiate a request. The Prior Authorization Medication Request Form is may be found:

<http://www.countycare.com/Media/Default/pdf/MedImpact-Prior-Auth-Medication-Request-Form.pdf>

A prior authorization request may be also be made by calling MedImpact's dedicated CountyCare line at: 888-402-1982.

Covermymeds.com also has the PDL loaded and will guide a requestor through the process

8. How will the Single PDL affect new members?

CountyCare has a continuity of care policy and process to accommodate new members. If a new member is taking a non-preferred medication, he/she will receive a transition fill of the non-preferred medication. A letter is then sent to the member and their prescriber with information about covered medications in

the therapeutic class and if the non-preferred agent is really needed, directions for obtaining a prior authorization medication request is provided.

9. What types of limits are there on the PDL?

Age limits and FDA approved dosing limits are in effect on the PDL.

10. Will all members have to change their medications?

No, there are certain therapeutic classes of medications that will be grandfathered and covered continuously, as long as the patient is stable on the medication. Therapeutic classes that will be grandfathered initially for one year include:

Behavioral Health	Oncology
Asthma /COPD	Cardiovascular
Diabetic Therapies	Immunosuppressants
Antivirals (HIV, Hepatitis B & C)	Anti-epileptics

11. How does Grandfathering work?

If the patient is compliant with the Grandfathered medication, the medication will be filled. If a member misses taking a grandfathered medication 90 days or more, the member and prescriber would need to submit a Prior Authorization Request to receive the medication.

12. What should new members do if they must take a non-preferred medication?

Prior Authorization Medication request are available, the member or provider may initiate a request. The Prior Authorization Medication Request Form is may be found:

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13. How will the single Medicaid PDL be managed?

The Illinois Drug and Therapeutics Committee meets quarterly, this committee is comprised of practicing physicians and pharmacists as well as other key stakeholders, representing various specialties who actively participate in the Illinois Medicaid Program.

After the Drugs and Therapeutics makes their recommendations, Illinois Medicaid will announce the Preferred Drug List (PDL) coverage.

14. What is the Pharmacy Help Desk phone number?

The Help Desk phone number is: 888-402-1982.