



EqualityCare News

October 2007

CMS-1500
Bulletin
07-006

ATTENTION PROVIDERS

IMPORTANT INFORMATION ON TAMPER-RESISTANT RX PAD REQUIREMENT AND NEW PREFERRED STATINS

You recently received a notification from Wyoming EqualityCare (Medicaid) that on October 1, 2007 all prescriptions written for EqualityCare clients needed to be on tamper-resistant prescription pads.

On Saturday, September 29, 2007, President George W. Bush signed the "Extenders Law," delaying the implementation date for all paper Medicaid prescriptions to be written on tamper-resistant paper. Under the new law, all written Medicaid prescriptions must be on tamper-resistant prescription pads effective April 1, 2008.

CMS will issue additional guidance on this implementation delay as it becomes available. The Office of Pharmacy Services will pass any additional information on to our providers in regard to this regulation as soon as it is made available to us.

NEW PREFERRED STATIN DRUGS

Effective November 1, 2007 the new preferred statin medications will be generic Lovastatin and generic Pravastatin. Doses of Crestor 20mg and 40mg, Lipitor 40mg and 80mg, and Zocor (simvastatin) 80mg do not require prior authorization.

All patients who have been on Lescol or Lescol XL (the previous preferred statin) as of October 1, 2007 will be grandfathered in, and they will not be required to have a prior authorization to continue therapy on Lescol.

Enclosed is an updated Preferred Drug List effective November 1, 2007.

If you have any questions about the above regulation or the preferred drug list, please contact the Wyoming Department of Health, Office of Pharmacy Services at 1-800-438-5785.



**Wyoming Medicaid Pharmacy Program
Preferred Drug List
Effective 11/01/2007**

Drugs listed are preferred and do not require prior authorization.
All other medications within the following classes are non-preferred and require prior authorization.

Long Acting Opioids
Morphine Sulfate

Statins
Lovastatin
Pravastatin

Calcium Channel Blockers
Verapamil
Felodipine
Diltiazem

Overactive Bladder Agents
Oxybutynin
Detrol (tolterodine)
Ditropan XL (oxybutynin)

Skeletal Muscle Relaxants
Cyclobenzaprine

ACE Inhibitors
Captopril and Captopril/HCTZ
Enalapril and Enalapril/HCTZ
Lisinopril and Lisinopril/HCTZ

Proton Pump Inhibitors
Prilosec OTC (omeprazole)
Protonix
Prevacid for children 8 & under

NSAIDs
Ibuprofen
Naproxen



2nd Generation Antihistamines
Loratadine
Loratadine-D



For comparative cost information, please visit our website at
<http://uwyo.edu/PDL>.



Wyoming Department of Health
Public Health Insurance Program



Pharmacy
Group
6530

Important Changes! Please read!



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