

1st Quarter 2022 preferred drug list update

UnitedHealthcare Community Plan of Florida

UnitedHealthcare Community Plan's preferred drug list (PDL) is updated quarterly by our Pharmacy and Therapeutics Committee. Please review the below changes which are effective as of **January 1, 2022**.

Changes to coverage within Preferred Drug List

Drug/ Product Name	Comments
Dexcom® CGM	These continuous glucose monitors and supplies will be available to process under the pharmacy benefit. Prior authorization is required.
Freestyle Libre® CGM	These continuous glucose monitors and supplies will be available to process under the pharmacy benefit. Prior authorization is required.

For medications which have been removed from the PDL, we have provided potential alternatives for UnitedHealthcare Community Plan members. If the drug alternative is medically appropriate, please provide members with a new prescription for a preferred alternative, via:

- Call or fax the pharmacy
- Use e-Script
- Write a new prescription and give it directly to the member (where permitted by state regulations)

If a preferred alternative is not medically appropriate, please call **800-310-6826** for prior authorization for the UnitedHealthcare Community Plan member to remain on their current medication.

You may also view the changes at UHCprovider.com/plans > Choose Your State > Medicaid (Community Plan) > Pharmacy Resources and Physician-Administered Drugs.

Contact us

If you have any questions, call UnitedHealthcare Community Plan's Pharmacy department at **800-310-6826**.
Thank you.