

**Listed below are Preferred Drug List changes for the State of Georgia
Fee-For-Service Medicaid and PeachCare for Kids Programs**

Effective October 1, 2023 (see chart below)*

DCH rebate vendor Magellan Medicaid Administration (MMA) has reviewed 2023 supplemental rebate offers with DCH and also reviewed specific drug categories at the June 2023 DURB meeting. The Preferred Drug List (PDL)/Provider’s Administered Drug List (PADL) decisions or changes for new drugs reviewed are outlined below. For a full listing of our PDL, go to www.dch.georgia.gov/pharmacy and select the “preferred product list” option.

PREFERRED AGENTS	NON-PREFERRED AGENTS
ALS AGENTS	
	RELYVRIO (ORAL) – PA
ANTIDEPRESSANTS, OTHER	
	AUVELITY (ORAL) – PA
BIOLOGIC IMMUNOMODULATORS	
	SOTYKTU (ORAL) – PA
COLONY STIMULATING FACTORS	
	ROLVEDON SYRINGE (SUBCUTANEOUS)* – PA

HEMOPHILIA TREATMENT: HEMGENIX (INTRAVEN)* - PA (PADL)

*PADL drugs may be subject to a different effective date.