



Provider Newsflash



A fax bulletin for the Molina Healthcare of Washington Provider Network

New – 90-Day Medication Refills Policy (for Medicaid)

Dear Provider:

Molina Healthcare of Washington is pleased to inform you that your patients are able to get 90 days' worth of certain medications filled at one time. A new prescription will be required in order for the pharmacy to fill a 90-day supply of medication per fill. Below is the list of medications approved for this policy:

Drug Class	Drug Name
ANTIDEPRESSANTS	•AMITRIPTYLINE •AMOXAPINE •BUPROPION IR/SR/XL •CITALOPRAM TABS •DESIPRAMINE •DOXEPIN •DULOXETINE •ESCITALOPRAM TABS •FLUOXETINE CAPS •FLUVOXAMINE IR TABS •IMIPRAMINE HCL •MIRTAZAPINE •NORTRIPTYLINE CAPS •PAROXETINE IR TABS •PHENELZINE •SERTRALINE TABS •TRANZYCPROMINE •TRAZODONE •VENLAFAXINE IR TABS/ER CAPS •VILAZODONE •VORTIOXETINE •ISOCARBOXAZID •SELEGILINE •NEFAZODONE •AMITRIPTYLINE- CHLORDIAZEPOXIDE •DESVENLAFAXINE •LEVOMILNACIPRAN •MAPROTILINE •CLOMIPRAMINE •PROTRIPTYLINE •TRIMIPRAMINE
ANTIPSYCHOTICS	•ARIPIRAZOLE •CHLORPROMAZINE •CLOZAPINE TABS •FLUPHENAZINE •HALOPERIDOL •LOXAPINE •OLANZAPINE •PALIPERIDONE ER •PERPHENAZINE •PERPHENAZINE/AMITRIPTYLINE •QUETIAPINE FUMARATE IR/ER •RISPERIDONE •THIORIDAZINE •THIOTHIXENE •TRIFLUOPERAZINE •ZIPRASIDONE
ASTHMA	•ALBUTEROL SYR •ALBUTEROL TABS •ALBUTEROL TABS ER •CROMOLYN NEBS •IPRATROPIUM NEBS •IPRATROPIUM/ALBUTEROL NEBS •ADVAIR DISKUS •ADVAIR HFA •ALVESCO •ASMANEX •BREO •DULERA •FLOVENT DISKUS • FLOVENT HFA •FLUTICASONE PROPIONATE/SALMETEROL DISKUS •PULMICORT FLEXHALER •QVAR •SEREVENT DISKUS •SYMBICORT •WIXELA INHUB •ZILUTON
DIABETES	•ACARBOSE •GLIMEPIRIDE •GLIPIZIDE •GLIPIZIDE ER •GLIPIZIDE/METFORMIN •GLYBURIDE •GLYBURIDE MICRONIZED •GLYBURIDE/METFORMIN •METFORMIN IR •METFORMIN ER •NATEGLINIDE •PIOGLITAZONE •REPAGLINIDE
HYPERTENSION	•ACEBUTOLOL •AMLODIPINE •ATENOLOL •ATENOLOL/CHLORTHALIDONE •BENAZEPRIL •BENAZEPRIL/HCTZ •BETAXOLOL •BISOPROLOL •BISOPROLOL/HCTZ •CAPTOPRIL •CARVEDILOL IR TABS •CARVEDILOL ER CAPS •CLONIDINE TABS •CLONIDINE PATCHES •DILTIAZPEM IR TABS •DILTIAZEM ER CAPS •DOXAZOSIN •ENALAPRIL •ENALAPRIL/HCTZ •EPLERENONE •FELODIPN ER •FOSINOPRIL •FOSINOPRIL/HCTZ •GUANFACINE •HYDRALAZINE •IRBESARTAN • IRBESARTAN/HCTZ •LABETALOL •LISINOPRIL •LISINOPRIL/HCTZ •LOSARTAN •LOSARTAN/HCTZ •METHYLDOPA •METOPROLOL ER •METOPROLOL IR 25, 50, 100MG TABS •METOPROLOL/HCTZ •MINOXIDIL •NADOLOL •NIFEDIPINE •NIFEDIPINE ER •OLMESARTAN •OLMESARTAN/HCTZ •PHENOXYVENZAMINE •PRAZOSIN •PROPRANOLOL •PROPRANOLOL ER •PROPRANOLOL/HCTZ •QUINAPRIL/HCTZ •RAMIPRIL •SOTALOL •TERAZOSIN •VALSARTAN •VALSARTAN/HCTZ •VERAPAMIL IR/ER TABS
LIPID-LOWERING	•ATORVASTATIN •CHOLESTYRAMINE •COLESTIPOL TABS •EZETIMIBE •FENOFIBRATE 40, 48, 54, 120, 145, 160MG TABS •GEMFIRBROZIL •LOVASTATIN •NIACIN ER •PRAVASTATIN •ROSUVASTATIN •SIMVASTATIN

Thank you for your continued service to Molina members.

Pharmacy billing or formulary questions? Please call (800) 213-5525, and select menu options 1, 2, and 2.

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