Iowa Medicaid Preferred Drug List (PDL)
New Drug Process

New Drug Entities

New drug entities (including new generics and new drug product dosage forms of existing drug entities) will be identified weekly and immediately be coded as "**Non-preferred-Prior Authorization required"** until presented at the next scheduled P&T [pharmaceutical and therapeutics] Committee meeting. If the drug category requires step therapy, the step therapy requirements must also be met, treating the new drug as a non-preferred, step 3 drug. These prior authorization and step therapy restrictions will continue through the review process, including while committee recommendations are being made, and lasting until DHS makes a final determination. The 72-hour emergency supply may not be available for medications intended for a short duration of therapy.

Exceptions to the Non-preferred default policy for new PDL drugs

There are two major potential exceptions to the non-preferred default policy for new PDL drugs:

A). If a new medication is classified as a priority drug by the FDA, the State may indicate that such a drug is preferred, until the drug is reviewed by the P&T Committee at the nearest scheduled meeting.

B). The State may decide to designate a new drug as "draft preferred" and provide immediate access and increased therapeutic choice to physicians until the drug is reviewed by the P&T Committee at the nearest scheduled meeting if:

- a new drug is therapeutically equivalent or superior to existing preferred or non-preferred choices, and
- is as safe or safer than existing preferred or non-preferred choices, and
- the net cost, adjusted for all rebates, is less expensive than all existing preferred choices.

Existing PDL Drugs

Although the State discourages supplemental rebate offers on existing PDL drugs between annual bidding periods, it may entertain such bids and may accept them if they are determined to represent significant additional savings or if they would replace a delinquent manufacturer's product or a preferred drug pulled from the marketplace or significantly restricted by the FDA. This interim preferred status will remain in effect until the drug is reviewed by the P&T Committee at the next scheduled meeting. Supplemental rebates will only be invoiced for approved drugs under contract. Draft preferred drugs with supplemental rebates will not be invoiced until approved by the Committee and accepted by the State. At that time, the supplemental rebates will be invoiced back to the effective date of the agreement, which is the date the drug began to benefit from preferred status.