



**ITASCA MEDICAL CARE (IMCare)**  
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## ***PROVIDER UPDATE***

***June 15, 2019***  
***#2019-12***

To: Providers and Pharmacies  
From: Adam Pavek, Pharm.D., Pharmacy Director  
Date: June 15, 2019  
RE: Uniform Preferred Drug List – Department of Human Services

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Effective July 1, 2019 IMCare must follow the Minnesota Department of Human Services' (DHS) Uniform Preferred Drug List (PDL). Uniform PDL requirements are state prescribed requirements for designating a specified drug product as either preferred or non-preferred. On July 1, all non-preferred Uniform PDL drugs will be subject to DHS's Non-Preferred Drug Prior Authorization requirements. Members using a non-preferred drug prior to July 1, 2019 will be grandfathered. Therefore, IMCare anticipates minimal immediate member disruption for this change.

### **Uniform PDL**

In order to determine if a drug is preferred or non-preferred on the Uniform PDL please reference the State's Uniform Preferred Drug List

- [https://mn.gov/dhs/assets/proposed-preferred-drug-List-2019-07-01\\_tcm1053-379772.pdf](https://mn.gov/dhs/assets/proposed-preferred-drug-List-2019-07-01_tcm1053-379772.pdf)

All non-preferred Uniform PDL drugs require prior authorization utilizing DHS's Non-Preferred Drug Prior Authorization requirements.

- [https://mn.gov/dhs/assets/Nonpreferred\\_Drug\\_PA\\_Criteria\\_tcm1053-379166.pdf](https://mn.gov/dhs/assets/Nonpreferred_Drug_PA_Criteria_tcm1053-379166.pdf)

The Uniform PDL is only a portion of IMCare's complete list of covered drugs (formulary). Members enrolled with IMCare will have access to both preferred drugs on the Uniform PDL as well as other non-PDL drugs currently on IMCare's formulary.

### **IMCare Formulary Pocketbook**

In order to provide one list of formulary drugs for the convenience of providers, IMCare integrated the preferred Uniform PDL drugs into IMCare's Medicaid Formulary Pocketbook 2019. This document is where you can find the list of drugs on IMCare's formulary.

- <http://www.imcare.org/DocumentCenter/View/4722/Medicaid-Formulary-Pocketbook-2019-PDF>

\*This change does not apply to members with dual Medicare and Medicaid coverage.

For any questions or comments regarding IMCare formularies or the IMCare drug authorization process, please contact me directly at (218) 327-6765 or by email at [adam.pavek@co.itasca.mn.us](mailto:adam.pavek@co.itasca.mn.us). I greatly appreciate any and all feedback.

Respectfully,

A handwritten signature in black ink that reads "Adam J. Pavek". The signature is written in a cursive style with a large, sweeping initial "A".

Adam J. Pavek, Pharm.D.  
Pharmacy Director  
Itasca Medical Care