



Alabama Medicaid Pharmacist

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PDL Update

Effective April 1, 2025, the Alabama Medicaid Agency updated the Preferred Drug List (PDL) to reflect the recent Pharmacy and Therapeutics (P&T) Committee's recommendations, as well as quarterly updates. The updates are listed below:

PDL Additions
Insulin Lispro—Insulins
Otezla ^{CC} —Disease-Modifying Antirheumatic Agents
PDL Deletions
Apidra—Insulins
Apidra SoloStar—Insulins
Humalog—Insulins
Liraglutide—Incretin Mimetics

*^{CC}This agent will be preferred with clinical criteria in place.

Please fax all prior authorization and override requests directly to Acentra Health at 800-748-0116. If you have questions, please call 800-748-0130 to speak with a call center representative.

Inside This Issue

PDL Update	Page 1-3
National Prescription Drug Take Back Day	Page 3
Email Contact Information Required for Providers	Page 4-5
Early/Timely Refills	Page 5

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April 1, 2025 Pharmacy Quarterly Update

Effective April 1, 2025, the Alabama Medicaid Agency will:

- **Continue to monitor the stimulant shortage affecting ADHD medications.** Should you need assistance, please contact Acentra Health at 800-748-0130 for alternative prescribing and dispensing options.
- **Require PA for generic liraglutide.** Brand Victoza will become preferred and will be billed with a Dispense as Written (DAW) Code of 9. DAW Code of 9 indicates the following: Substitution Allowed by Prescriber but Plan Requests Brand. This value is used when the prescriber has indicated, in a manner specified by prevailing law, that generic substitution is permitted, but the Plan requests the brand product to be dispensed. **The following Dispense as Written (DAW) Code 9 list is subject to change.**

Brand	Generic
Adderall XR	Dextroamphetamine/Amphetamine ER
Advair Diskus	Fluticasone/Salmeterol Inhalation Device
Advair HFA	Fluticasone/Salmeterol HFA
Bepreve	Bepotastine Besilate Ophthalmic Solution
Bethkis	Tobramycin Inhalation Solution
Concerta	Methylphenidate ER
Copaxone	Glatopa/Glatiramer
Daytrana	Methylphenidate Transdermal Patch
Dymista	Azelastine/Fluticasone Nasal Spray
Elidel	Pimecrolimus
Kazano	Alogliptin/Metformin HCL Tablet
Kitabis	Tobramycin Inhalation Solution
Kombiglyze XR	Saxagliptin-Metformin ER
Lantus	Insulin Glargine (U-100)
Nesina	Alogliptin Tablet
Onglyza	Saxagliptin HCL
Oseni	Alogliptin/Pioglitazone HCL Tablet
Pradaxa	Dabigatran

Continued on Page 3

April 1, 2025 Pharmacy Quarterly Update, continued

Brand	Generic
Spiriva Handihaler	Tiotropium Bromide
Suboxone ^{CC}	Buprenorphine/Naloxone
Symbicort	Budesonide/Formoterol Fumarate Inhalation
Toujeo	Insulin Glargine (U-300)
Toujeo Max	Insulin Glargine (U-300)
Victoza ^{CC}	Liraglutide

^{CC}This agent will be preferred with clinical criteria in place.

For additional PDL and coverage information, visit our drug-lookup site at <https://www.medicaid.alabamaservices.org/alportal/NDC%20Look%20Up/tabId/5/Default.aspx>.

National Prescription Drug Take Back Day

On Saturday, October 26, 2024, the DEA held its 27th National Prescription Drug Take Back Day. There were 4,644 sites across the United States that participated in this initiative. Three hundred fourteen tons (629,953 pounds) of unused medications were collected. The state of Alabama had 40 collections sites which brought in 3,506 pounds. Since the initiative began in September 2010, there have been 9,600 tons (19,200,440 pounds) of unused medications collected.

The next National Prescription Drug Take-Back Day is scheduled for Saturday, April 26, 2025. For more information on this initiative, please visit <https://www.dea.gov/takebackday>.

If a drug take back location is not available, the next option is to immediately flush potentially dangerous medications down the toilet. The FDA provides a [flush list](#) that should be reviewed prior to choosing this route of medication disposal. Some examples of opioid-containing medications on the flush list include: buprenorphine, hydrocodone, oxycodone and methadone .

If a medication is not on the flush list and there is no information provided in the package insert, most medications can be disposed in a home trash.

- Remove the medication from the original container.
- Mix liquid or pills with cat litter, dirt, or used coffee grounds. Tablets or capsules should not be crushed.
- Put the mixture in a sealed plastic bag or other container.
- Throw the container in the household trash.
- Delete personal information on the prescription label or medication packaging. The empty bottle or packaging can be trashed or recycled.

<https://www.dea.gov/takebackday>

<https://www.fda.gov/drugs/disposal-unused-medicines-what-you-should-know/drug-disposal-dispose-non-flush-list-medicine-trash>

Email Contact Information Required for Providers

The Alabama Medicaid Agency (Medicaid) will now require all providers to supply email address information for the following provider contact information fields: service location, pay to, mail to, patient contact/directory and contact person.

Providers in the process of becoming a Medicaid provider should provide this information in the appropriate fields of the electronic enrollment application. This information will also be required and verified for currently enrolled providers during the revalidation process. Initial enrollment applications and/or revalidation documentation submitted without the required contact information will be subject to a request for correction.

Accurate and complete provider information is important for Medicaid, providers and recipients. The provider file is utilized for revalidation, remittance payments, directories and publication communications. **Please log in to the Medicaid Web Portal today to verify and/or provide updated information.**

Providers currently enrolled may view and update fields (e.g., service location, contact information, provider mail to and pay to) by following the steps below.

NOTE: This access is only available to Account Administrator users.

Steps to Add/Update Information:

1. Log on to the Medicaid Interactive Web Portal by going to the following link and selecting Secure Site: <https://www.medicaid.alabamaservices.org/alportal/>.
2. On the **Providers** tab, select **Provider Maintenance**.
3. In the Provider Maintenance panel, select **Provider Location Contact Information** and **Provider Payer Information**.
4. Review completed fields for accuracy and update any incorrect or outdated information.
5. Complete blank fields to provide missing information (e.g., patient contact email, service location email, etc).
6. Select **Save** to submit new/updated information.

The physical service location address cannot be updated using the process outlined above. An Enrollment Update Request is required to make any changes to this information. The request must be on company letterhead and should include the following information: NPI, Medicaid Provider ID, old service location address and new service location address. A completed [W-9 Tax Form](#) must also be attached.

This form can be found in the Provider Enrollment Forms Library: https://medicaid.alabama.gov/content/9.0_Resources/9.4_Forms_Library.aspx.

Providers should submit requests to update physical service location address electronically via the web portal using the electronic upload process.

Steps to Upload Enrollment Update Requests:

1. Log into the Medicaid Interactive Web Portal by going to the following link and selecting Secure Site: <https://www.medicaid.alabamaservices.org/alportal/>.
2. On the **Trade Files** tab select **Forms**.
3. Select Form Name: **ERU—Enrollment Updates** from the dropdown menu.

Email Contact Information Required for Providers (continued)

4. Select **Search** for the appropriate form to display.
5. Complete all form fields.
6. Select **Choose Form** to attach request and/or supporting documentation from your network drive or PC. The selected file must be a PDF file.
7. Select **Submit** to submit update request and supporting documentation.
8. Upon successful submission, a barcode coversheet will be generated.

NOTE: If you do not have a PDF saved version of the request and/or required supporting documentation, the barcode coversheet may be used to fax a completed printed paper version. Fax the request and/or supporting documentation **with the barcode coversheet as page 1** to (334) 215-7416. The barcode coversheet **MUST** be page 1 to ensure receipt of attachment(s). For questions or assistance with updating contact information, please contact Provider Enrollment at 1-888-223-3630.

Early/Timely Refills

Medicaid allows timely refills, defined as utilization of 85% of opioid agonist and opioid partial agonist claims, 90% of drugs on the 3-month maintenance list, and 75% of all other medications. Timely refills are based on the days' supply on a pharmacy claim; day's supply is an integral part of a valid claim, and should represent the actual days' supply of a claim based on the prescriber's instructions and quantity of drug dispensed. Claims processed prior to timely refill allowance will require an override.

Medicaid utilizes an accumulation edit to limit dispensing of early refills to no more than seven extra days' worth of medication per 120 rolling days. Claims that exceed or result in the accumulation of more than seven extra days' worth of medication in a 120-day time period will deny.

Acentra Health is contracted with the Alabama Medicaid Agency to assist pharmacists receiving hard denials, such as early refills, therapeutic duplication and excessive quantity. Pharmacies must receive an override from Acentra Health before payment will be made. Contact **Acentra Health at 1-800-748-0130**. Only Acentra Health can issue the necessary override.

Please refer to the Alabama Medicaid Provider Billing Manual for more pharmacy-related information: https://medicaid.alabama.gov/content/Gated/7.6.1G_Provider_Manuals/7.6.1.2G_Apr2025.aspx.