



OCTOBER 2020

## KMAP GENERAL BULLETIN 20213

### Preferred Drug List Update

There is a Preferred Drug List (PDL) update effective October 15, 2020. Reference the [Preferred Drug List \(PDL\)](#) page on the Kansas Department of Health and Environment (KDHE) website.

The following medications are non-preferred and require a PDL Prior Authorization (PA):

- Insulin lispro vials (Humalog<sup>®</sup>) - BRAND ONLY
- Insulin lispro pens (Humalog<sup>®</sup> KwikPen<sup>®</sup> and Humalog<sup>®</sup>) - BRANDS ONLY\*

\*This does not include the Humalog<sup>®</sup> Junior KwikPen<sup>®</sup> or the Mixes.

**Note:** The effective date of the policy is October 15, 2020. The implementation of State policy by the KanCare managed care organizations (MCOs) may vary from the date noted in the Kansas Medical Assistance Program (KMAP) bulletins. The KanCare Open Claims Resolution Log on the KMAP Bulletins page documents the MCO system status for policy implementation and any associated reprocessing completion dates, once the policy is implemented.

#### KMAP

[Kansas Medical Assistance Program](#)

- [Bulletins](#)
- [Manuals](#)
- [Forms](#)

#### Customer Service

- 1-800-933-6593
- 7:30 a.m. - 5:30 p.m.  
Monday - Friday

Gainwell Technologies is the fiscal agent of KMAP.