

**Iowa Medicaid Enterprise**  
**Revisions to the Iowa Medicaid Preferred Drug List (PDL)**

*Notification Date: May 14, 2010*

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**Effective May 14, 2010** the following generic products will be **preferred** on the Iowa Medicaid Preferred Drug List (PDL):

Deferoxamine 500mg vial  
Deferoxamine 2 gram vial  
Ketorolac 0.4% ophthalmic solution  
Ketorolac 0.5% ophthalmic solution

**Effective August 14, 2010** the following brand products will be non-preferred on the Iowa Medicaid Preferred Drug List (PDL):

Acular LS 0.4% ophthalmic solution  
Acular 0.5% ophthalmic solution  
Desferal 500mg vial  
Desferal 2 gram vial

**Effective August 14, 2010** the following generic product will be non-preferred on the Iowa Medicaid Preferred Drug List (PDL):

Temazepam 7.5mg