

# Iowa Medicaid Enterprise

## Coverage of Legend Benzoyl Peroxide

*Notification Date: October 11, 2010*

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Due to a shortage of the preferred OTC payable benzoyl peroxide products, legend benzoyl peroxide products became temporarily preferred on the Iowa Medicaid Preferred Drug List (PDL) effective March 23, 2010. **Effective November 1, 2010**, legend benzoyl peroxide gel products will be changed to non-preferred and require prior authorization, as the covered OTC benzoyl peroxide gel products are currently available. OTC benzoyl peroxide 5% and 10% gel will not require prior authorization. Please refer to the OTC Payable List by NDC located at [iowamedicaidpdl.com](http://iowamedicaidpdl.com) for a complete list of payable ndcs for these products.

Please contact the POS Helpdesk at phone (515) 256-4608 (local) or (877) 463-7671 with questions regarding coverage of legend benzoyl peroxide by Iowa Medicaid.