

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

Notification Date: March 27, 2019

Due to the unavailability of the preferred drug, Sandostatin 1000mcg/mL, the following PDL change will be implemented:

Effective April 12, 2019 the following product will be **preferred** on the Iowa Medicaid Preferred Drug List (PDL):

- Octreotide (all strengths).

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