

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

Notification Date: May 24, 2021

Due to the discontinuation of the preferred drug, Gianvi, the following PDL change will be implemented:

Effective June 4, 2021 the following product will be **preferred** on the Iowa Medicaid Preferred Drug List (PDL):

- Drospirinone-ethinyl estradiol tablet 3-0.02mg (generic Yaz)

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.