



Date: June 15, 2006

Dear Health Care Professional:

**SUBJ: Prescribing Antidepressants for  
Kentucky Medicaid Patients**

Kentucky Medicaid and First Health want to ensure that health care professionals have current information regarding antidepressants and the Preferred Drug List (PDL). [\[http://Kentucky.fhsc.com/pharmacy/default.asp\]](http://Kentucky.fhsc.com/pharmacy/default.asp) It is important for prescribers to start patients on preferred products whenever possible to help those with tiered copayments avoid higher costs and to save patients time at the pharmacy.

The following agents are Tier 1 – Preferred and *do not* require Prior Authorization:

**SSRI**

Citalopram HBr  
Paroxetine HCl  
Fluoxetine HCl

**Newer Generation**

Budeprion SR  
Bupropion HCl/ SA  
Mirtazapine/ Rapdis  
Nefazadone  
Trazadone/ HCl  
Maprotiline

“New starts” require a trial of two generic products. Patients with a medication claims history of a branded agent are allowed to continue on the brand unless therapy is discontinued for 90 days. Such discontinuation constitutes a “new start” and also requires a trial of two generic products.

While samples are an excellent resource for uninsured patients, they can create difficulties for full benefit Medicaid patients. When given branded samples, patients are stabilized on therapy that could become costly to them when a prescription is needed. It is an advantage for the patient when a preferred generic product is prescribed (when clinically appropriate) at the initiation of treatment.

While a hospitalized patient’s medications often undergo formulary substitution, it is important that during discharge planning, they are switched back to Medicaid preferred products to avoid higher outpatient pharmacy copayments.

Thank you for your help and support in decreasing costs for your Medicaid patients.

Sincerely,

Carrie Lovell, Pharm. D.  
Pharmacy Account Manager