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

Notification Date: March 26, 2019

Due to the unavailability of the preferred drug, loperamide 1mg/5mL, 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):
- Loperamide 1mg/7.5mL with a quantity limit of 1800mL per 30 days

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.