

INFORMATIONAL LETTER NO. 2685-MC-FFS-D**DATE:** May 2, 2025**TO:** Iowa Medicaid Physicians, Dentists, Advanced Registered Nurse Practitioners, Therapeutically Certified Optometrists, Podiatrists, Pharmacies, Pharmacists, Home Health Agencies (HHA), Rural Health Clinics, Clinics, Skilled Nursing Facilities, Intermediate Care Facilities (ICF), Nursing Facilities-Mental ILL, Federally Qualified Health Centers (FQHC), Indian Health Service, Maternal Health Centers, Certified Nurse Midwife, Community Mental Health, Family Planning, Residential Care Facilities, ICF/ID State and Community Based ICF/ID Providers and Physician Assistants**APPLIES TO:** Managed Care (MC), Fee-for-Service (FFS), and Dental (D)**FROM:** Iowa Department of Health and Human Services (HHS), Iowa Medicaid**RE:** June 2025 Iowa Medicaid Pharmacy Program Changes**EFFECTIVE:** June 1, 2025

1. Changes to the preferred drug list (PDL) effective June 1, 2025. Refer to the [PDL website](#)¹ to review the complete PDL.

Preferred	Non-Preferred
Erzofri ³	Alhemo
Gvoke	Alyftrek ¹
Linress 72mcg ¹	Aqneursa
Pyzchiva	Cobenfy ²
Tezspire ¹	Crenessity

¹ <https://www.iowamedicaidpdl.com/pa-pdl/preferred-drug-lists.html>

Danziten ¹
Duvyzat ¹
Femlyv
Gabarone
Hydrocortisone 2.5% Solution ¹
Hypavzi
Imkeldi Oral Solution ¹
Levetiracetam ODT ¹
Memantine-Donepezil ER Capsules
Mesna
Miplyffa
Neffy
Nimodipine Oral Solution
Opipza ²
Otulfi ¹
Potassium Chloride ER Tab 15 mEq
Prucalopride ¹
Radicava Oral Suspension
RoxyBond ¹
Selarsdi ¹
Steqeyma ¹
Timolol Hemihydrate Ophth Solution
Tramadol 75mg Tablets ¹
Vyalev SQ Injection
Yesintek ¹

Yorvit
Zepbound ⁴
Zituvimet ¹
Zituvimet XR ¹

¹Clinical prior authorization (PA) criteria apply

²Step 3

³Step 2

⁴PA required; weight loss indication not covered

2. Point of Sale Billing Updates:

- a. **ProDUR Quantity Limits:** The following quantity limit edits will be implemented. A comprehensive list of all quantity limit edits appears on the [Quantity Limit Chart](#)²

Drug Product	Quantity	Days' Supply
Cobefy 50-20mg, 100-20mg & 125-30mg	60	30
Erzofri 39mg, 78mg, 117mg, 156mg, 234mg & 351mg	1 syringe	30
Opipza 2mg & 5mg	30	30
Opipza 10mg	90	30

We encourage providers to go to the [PDL website](#)³ to view all recent changes to the PDL. If you have questions, please contact the Pharmacy Prior Authorization (PA) Helpdesk at 1-877-776-1567, locally in Des Moines at 515-256-4607, or by e-mail at pba_iapdlinfo@optum.com.

² <https://www.iowamedicaidpdl.com/billing/billing-quantity-limits.html>

³ <https://www.iowamedicaidpdl.com/>

If you have questions, please contact Iowa Medicaid Provider Services, the appropriate MCO or PAHP:

Iowa Medicaid Provider Services:

- Phone: 1-800-338-7909
- Email: imeproviderservices@hhs.iowa.gov

Managed Care Organizations (MCOs):

Iowa Total Care:

- Phone: 1-833-404-1061
- Email: providerrelations@iowatotalcare.com
- Website: <https://www.iowatotalcare.com>

Molina Healthcare of Iowa:

- Phone: 1-844-236-1464
- Email: aproviderrelations@molinahealthcare.com
- Website: <https://www.molinahealthcare.com/providers/ia/medicaid/home.aspx>
- Provider Portal: <https://www.availity.com/molinahealthcare>

Wellpoint Iowa, Inc.:

- Phone: 1-833-731-2143
- Email: ProviderSolutionsIA@wellpoint.com
- Website: <https://www.provider.wellpoint.com/iowa-provider/home>

Prepaid Ambulatory Health Plans (PAHPs):

Delta Dental:

- Phone: 1-888-472-1205
- Email: provrelations@deltadentalia.com
- Website: <https://www.deltadentalia.com/dentists/>

MCNA Dental:

- Phone: 1-855-856-6262
- Email: IA_PR_Dept@mcna.net

Website: <https://www.mcnaia.net/dentists>