



May 25, 2022

Please read this important message from Meridian Medicaid Plan (Meridian) to all prescribers and providers.

Please be advised that coverage of the medications listed below is changing on July 1, 2022, for all members. Reference the table below for medication change information.

Impacted Medication	Change	Preferred agents
APRETUDE	Preferred after 7/1/22	NA
CARGLUMIC ACID	Preferred, with a prior authorization after 7/1/22	NA
KERENDIA (except NDC: 50419054170)	Preferred, with a prior authorization after 7/1/22	NA
LIVTENCITY	Preferred, with a prior authorization after 7/1/22	NA

Note: Active prior authorizations for these medications will not be affected.

If you have any questions, please call the Pharmacy Help Desk at **855-580-1688**.

Sincerely,

Meridian