

### Illinois Medicaid Quarterly Updates

<b>Medication</b>	<b>Strength &amp; Formulation</b>	<b>Changes/Limitations</b>	<b>Effective Date</b>
Trulicity	All Strength/Formulation	Quantity Limit: 0.072ML/day	04/01/2023
Austedo	PATIENT TITRATION KIT (TBPk) and Tablets	Preferred with PA	04/01/2023
Ingrezza	Capsules and Capsule Packs	Preferred with PA	04/01/2023
Berinert		Preferred with PA	04/01/2023
Opioids	All	Initial fill limit: 5-day supply maximum	05/01/2023
Benzodiazepines	All	Initial fill limit: 14-day supply maximum	05/01/2023