

AmeriHealth Caritas Delaware Provider Bulletin

Effective **April 1, 2020**, AmeriHealth Caritas Delaware will be implementing a preferred drug list (PDL) around medically billed pegfilgrastim products. This will affect all AmeriHealth Caritas Delaware members who do not have primary medical insurance or Medicare Part B.

This category currently requires prior authorization for all products, and will continue to require that authorization for all products. The change is that now the preferred product must be used first, or a clinical reason for why it can't be used must be submitted.

PDL changes affecting members	
Preferred product	Products moved to non-preferred
Ziextenzo (billed under J3590)	Fulphila (billed under Q5108) Udenyca (billed under Q5111) Neulasta (billed under J2505)

Since medical drug code authorizations go to the pharmacy team, please contact PerformRx at the numbers below with any questions:

PerformRx Pharmacy Provider Services	
DSHP and DHCP groups	1-855-251-0966
DSHP-Plus groups	1-888-987-6396

