



DATE: 05/01/2023

TO: Commonwealth of Kentucky Medicaid Provider Network

FROM: MedImpact Healthcare Systems

Subject: Over-the-Counter (OTC) List Update

Effective July 5, 2023, Kentucky Medicaid MCO Single PBM Program will update its pharmacy benefit **Over-the-Counter (OTC) Covered Drug List**. This list applies only to members enrolled with Kentucky Medicaid Managed Care Organizations (MCOs). OTC products that are not on the list will NOT be covered; however, providers are encouraged to review the updated list to identify a covered alternative for non-covered OTC products.

Frequently Asked Questions

Where can the updated OTC Covered Drug List be found?	The current and future OTC Drug List is found on the Provider Portal of the MedImpact website: Provider Documents Kentucky (medimpact.com)
What is the maximum day supply for each covered product?	Kentucky Medicaid covers up to 32 days' supply for non-maintenance medications and up to 90 days' supply for maintenance medications
What are the requirements for coverage?	All covered products require a valid prescription from an authorized provider enrolled with Kentucky Medicaid. Orders may be from a physician or other licensed practitioner within the scope of their professional practice as defined and limited by Federal and State law.

Notable Removals	Covered Alternative
Biotin	B-Complex or multivitamin containing biotin
Cetirizine 5 mg/5mL solution	Cetirizine: 1 mg/mL solution; 5 mg tablet; 10 mg tablet
Cetirizine 5 mg chewable tablet	Fexofenadine: 30 mg/5 mL suspension
Cetirizine 10 mg chewable tablet	Loratadine: 5 mg/5 mL solution; 5 mg chewable; 10 mg dissolve
Guaifenesin- Pseudoephedrine 1200 mg/120 mg	Guaifenesin- Pseudoephedrine 600 mg/60 mg
Omeprazole 20 mg (OTC)	Omeprazole 20 mg (Rx)
Polyethylene Glycol 3350 17G Powder in Packet	Polyethylene Glycol 3350 17G Powder

MedImpact Contact Information:

Program Questions	KYMCOPBM@MedImpact.com	
Pharmacy Help Desk	(800) 210-7628 [24 hours per day/ 7 days per week]	
Prior Authorizations	Phone (844) 336-2676 [8:00AM - 7:00PM EST/ 7 days per week] ; Fax (858) 357-2612	
Pharmacy Portal	https://kyportal.medimpact.com/	
BIN: 023880 / PCN: KYPROD1 / GROUP: KYM01		

