ISSUED: REPLACED:

05/01/19

CHAPTER 37: PHARMACY BENEFITS MANAGEMENT SERVICES

REVISION HISTORY LOG

I	Revised/ Issued Date	Section	Section Title	Number of Page (s)	Reason for Revision
(05/01/19	Appendix O	Preferred Drug List (PDL)/Non-Preferred Drug List (NPDL)	1	Updated link to newly created link under "Pharmacy and Prescribing Providers, Drug Appendices" for the information on the criteria, forms, and drugs in the Medicaid PDL effective 05/01/19.