



**Division of Medical Services
Medicaid Pharmacy Program**

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April 21, 2025

RE: Preferred Drug List (PDL) updates for GLP-1 agonists

Prescribers and pharmacists,

Effective June 1, 2025, the GLP-1 agonist PDL class listed below will have noted updates to preferred options for Arkansas Medicaid beneficiaries. The **bolded medication(s)** designate product(s) that will have a change in PDL status.

Preferred Agents

- Byetta® pen (exenatide)—until no more product on the market
- **Trulicity® pen (dulaglutide)**
- Victoza® pen (liraglutide)

Point-of-Sale (POS) Approval Criteria for Preferred GLP-1 Agonists

Criteria 1

- Billed diagnosis of type 2 diabetes mellitus; **AND**
 - Metformin claim in the last 90 days; **OR**
 - Billed diagnosis of ASCVD

Criteria 2

- Medicaid pharmacy profile indicates a paid claim in the last 60 days for a GLP-1 receptor agonist

*** NOTE:** If a patient does not meet the above criteria, a prior authorization request must be submitted for the preferred agent. Non-preferred products will continue to require a prior authorization.

Non-Preferred Agents

- Exenatide (Byetta®)
- Liraglutide (generic for Victoza®)
- Mounjaro® injection (tirzepatide)
- Ozempic® injection (semaglutide)
- Rybelsus® tablet (semaglutide)
- Soliqua® injection (lixisenatide/insulin glargine)
- Xultophy® injection (insulin degludec/liraglutide)

For any questions, contact the Prime Therapeutics Help Desk at 800-424-7895.

Sincerely,

Cynthia Neuhofer, Pharm.D.
DMS Assistant Director/Pharmacy Director