

SilverSummit Healthplan Preferred Drug List (PDL) Updates – Q3 2024

ilverSummit Healthplan routinely reviews medications available on the Preferred Drug List. Items are added, removed or modified periodically due to industry standard, market availability, and/or assessment of use. The document below outlines changes to the published PDL for the current quarter.

For a copy of the preferred drug list (PDL), you may call Member Services at 1-844-366-2880 (TTY/TTD 1-844-804-6086) or visit the SilverSummit Healthplan website at https://www.silversummithealthplan.com/

For the most current program description, you may call Member Services at 1-844-366-2880 (TTY/TTD 1-844-804-6086) or visit the SilverSummit Healthplan website at https://www.silversummithealthplan.com/

Drug Name	Ingredients	Dosage Form	Strength	Update	Notes
AVSOLA	infliximab	Powder for Injection	100mg	ADD	Add to PDL SP;PA
DEXAMETHA SONE SODIUM PHOSPHATE +RFID	dexamethasone	Solution for Injection	4mg/ml	REMOVE	Remove from PDL
FREESTYLE LIBRE 3/READER	N/A	Glucose Monitoring System	N/A	ADD	Add to PDL QL;AL;PA
levonorgestrel (emergency)	levonorgestrel	Tablet	1.5mg	ADD	Add to PDL; QL
liraglutide	liraglutide	Solution for Injection	18mg/3mL	ADD	Add to PDL QL;PA
PREPLUS	Prenatal multivitamin	Tablet	N/A	REMOVE	Removed from PDL
SAIZEN IJ	somatropin	Solution for Injection	N/A	REMOVE	Remove from PDL
SAIZENPREP RECONSTITUT IONKIT IJ	somatropin	Solution for Injection	N/A	REMOVE	Remove from PDL
SANDIMMUN E SOLN IV	cyclosporine	Solution for Injection	50mg/ml	ADD	Add to PDL
SIMLANDI 1- PEN KIT	adalimumab	Solution for Injection	40mg/0.4ml	ADD	Add to PDL; PA
SIMLANDI 2- PEN KIT	adalimumab	Solution for Injection	40mg/0.4ml	ADD	Add to PDL; PA