

Pharmacy Hot Tip: Allergy Relief

Your Summit Community Care patients on nonpreferred products may experience a pharmacy claim rejection. To avoid additional steps or delays at the pharmacy, consider prescribing preferred products whenever possible. Prior authorization may apply to select preferred products. Coverage should be verified by reviewing the *Preferred Drug List (PDL)* on the Summit Community Care provider website at <https://arkansas.magellanrx.com/provider/docs/rxinfo/PDL.pdf>. The *PDL* is subject to change quarterly.

Therapeutic class	Preferred products	Nonpreferred products
Antihistamines and Intranasal Rhinitis Agents	Azelastine (Astelin, Astepro): <ul style="list-style-type: none"> • 0.1% nasal spray (137 mcg/spray) • 0.15% nasal spray (205.5 mcg/spray) • 0.05% ophthalmic solution Cetirizine (Zyrtec): <ul style="list-style-type: none"> • 1 mg/1 mL solution • 10 mg tabs Fluticasone propionate (Flonase) nasal spray Ipratropium (Atrovent) nasal spray Loratadine (Claritin): <ul style="list-style-type: none"> • 10 mg tabs • 10 mg rapidly-disintegrating tabs • 5 mg/5 mL syrup 	Antihistamine/Pseudoephedrine combination products Azelastine/Fluticasone (Dymista) nasal spray Beclomethasone (Beconase AQ, Qnasl) nasal spray Cetirizine (Zyrtec): <ul style="list-style-type: none"> • 5 mg tabs • Chewable tabs Ciclesonide (Omnaris, Zetonna) nasal spray Desloratadine (Clarinex) <ul style="list-style-type: none"> • Syrup • Tablets • ODT Fexofenadine (Allegra) Flunisolide (Xhance, Ticanase) nasal spray Levocetirizine (Xyzal) Loratadine (Claritin): <ul style="list-style-type: none"> • Capsules Mometasone furoate (Nasonex) nasal spray Olopatadine (Patanase) nasal spray
No coverage for branded products in this class.		

If you have questions regarding this *Hot Tip*, call Provider Services at **1-844-462-0022**.

<https://provider.summitcommunitycare.com>