

UPHP MI HEALTH LINK Updates

January, 2024

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
01/01/2024	HAVRIX	<i>hepatitis a virus vaccine/pf</i>	NEW AUTO RULE		Brands
01/01/2024	<i>fluoxetine hcl</i>	<i>fluoxetine hcl</i>	REMOVE FROM FORMULARY	Generics	Non-Formulary
01/01/2024	WEGOVY	<i>semaglutide</i>	UM AUTO RULE: SUM1		*
01/01/2024	<i>assure id duo pro sfty pen ndl</i>	<i>pen needle, diabetic, safety</i>	NEW AUTO RULE		Brands
01/01/2024	<i>easy comfort safety pen needle</i>	<i>pen needle, diabetic, safety</i>	NEW AUTO RULE		Brands
01/01/2024	<i>assure id pro pen needle</i>	<i>pen needle, diabetic, safety</i>	NEW AUTO RULE		Brands
01/01/2024	<i>unifine protect</i>	<i>pen needle, diabetic disposable, safety</i>	NEW AUTO RULE		Brands
01/01/2024	<i>microdot readygard pen needle</i>	<i>pen needle, diabetic disposable, safety</i>	NEW AUTO RULE		Brands
01/13/2024	<i>lidocaine hcl</i>	<i>lidocaine hcl</i>	DRUG ATTR CHANGE OVERRIDE	Generics	Generics

BRAND-NAME DRUGS are CAPITALIZED. *Generic drugs are lower-case italics.*

UPHP MI HEALTH LINK Updates

February, 2024

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
02/01/2024	MAGOX 400	<i>magnesium oxide</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>buffered aspirin</i>	<i>aspirin/calcium carbonate/magnesium</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>children's allergy relief</i>	<i>fexofenadine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	DEKAS PLUS	<i>pediatric multivitamin no.128/vitamin k</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>multivitamin with fluoride</i>	<i>pediatric multivitamin no.242 with sodium fluoride</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>acid controller</i>	<i>famotidine</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>yargesa</i>	<i>miglustat</i>	NEW AUTO RULE		Generics
02/01/2024	<i>children's pain relief</i>	<i>acetaminophen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>stomach relief original</i>	<i>bismuth subsalicylate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>lidocan iii</i>	<i>lidocaine</i>	NEW AUTO RULE		Generics
02/01/2024	<i>pediatric iron</i>	<i>ferrous sulfate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	DEKAS PLUS	<i>multivitamin-minerals no.56/folic acid/vit k1/ubidecarenone</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>lubricating plus</i>	<i>carboxymethylcellulose sodium</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>complete allergy</i>	<i>diphenhydramine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug

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02/01/2024	<i>all day allergy relief</i>	<i>loratadine</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>allergy relief</i>	<i>loratadine</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>allergy relief</i>	<i>fexofenadine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	LAGEVRIO (EUA)	<i>molnupiravir</i>	ADD UM: QUANTITY		40 / 30 OVER TIME
02/01/2024	WEGOVY	<i>semaglutide</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>children's diphenhydramine</i>	<i>diphenhydramine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>aluminum hydroxide</i>	<i>aluminum hydroxide</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	GAVISCON	<i>magnesium carbonate/aluminum hydroxide/alginate acid</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>children's mapap</i>	<i>acetaminophen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>mag-al plus xs</i>	<i>magnesium hydroxide/aluminum hydroxide/simethicone</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>benzphetamine hcl</i>	<i>benzphetamine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>ala-hist ir</i>	<i>dexbrompheniramine maleate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>calcium antacid</i>	<i>calcium carbonate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>celltrion diatrust cov-19 home</i>	<i>covid-19 antigen immunoassay test</i>	ADD UM: SUM1		Medicaid Benefit Drug

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02/01/2024	FEVERALL	<i>acetaminophen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>women's gentle laxative</i>	<i>bisacodyl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>tussin dm</i>	<i>guaifenesin/dextromethorphan hbr</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>lice treatment</i>	<i>piperonyl butoxide/pyrethrins</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>oyster shell calcium w-vit d</i>	<i>calcium carbonate/cholecalciferol (vitamin d3)</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>cromolyn sodium</i>	<i>cromolyn sodium</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>pain relief</i>	<i>acetaminophen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>anti-itch with aloe</i>	<i>hydrocortisone/aloe vera</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	INFUVITE ADULT	<i>multivitamin infusion, adult no.4 with vitamin k</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	PAXLOVID	<i>nirmatrelvir/ritonavir</i>	NEW AUTO RULE		Brands
02/01/2024	<i>bismuth</i>	<i>bismuth subsalicylate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>children's allergy relief</i>	<i>diphenhydramine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>ammonium lactate</i>	<i>ammonium lactate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>senna laxative</i>	<i>sennosides</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>virt-gard</i>	<i>cyanocobalamin/folic acid/pyridoxine</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug

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02/01/2024	<i>binaxnow covid-19 ag self test</i>	<i>covid-19 antigen immunoassay test</i>	ADD UM: SUM1		Medicaid Benefit Drug
02/01/2024	<i>ergocalciferol</i>	<i>ergocalciferol (vitamin d2)</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>lidocaine</i>	<i>lidocaine</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	REFRESH LACRI-LUBE	<i>mineral oil/petrolatum,white</i>	ADD UM: SUM1		Medicaid Benefit Drug
02/01/2024	<i>allergy relief</i>	<i>diphenhydramine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>children's allergy relief</i>	<i>loratadine</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	COLACE CLEAR	<i>docusate sodium</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>tolnaftate</i>	<i>tolnaftate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>pilot covid-19 at-home test</i>	<i>covid-19 antigen immunoassay test</i>	ADD UM: SUM1		Medicaid Benefit Drug
02/01/2024	<i>lithium</i>	<i>lithium citrate</i>	NEW AUTO RULE		Generics
02/01/2024	DIALYVITE 5000	<i>multivitamins with minerals no. 11/folic acid</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>glipizide</i>	<i>glipizide</i>	NEW AUTO RULE		Generics
02/01/2024	<i>saxagliptin hcl</i>	<i>saxagliptin hcl</i>	NEW AUTO RULE		Generics
02/01/2024	FIRST AID ANTISEPTIC	<i>povidone-iodine</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>8 hour acetaminophen</i>	<i>acetaminophen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	BREO ELLIPTA	<i>fluticasone furoate/vilanterol trifenate</i>	NEW AUTO RULE		Brands

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02/01/2024	STROVITE ONE	<i>multivit with mins10/folic acid/vit d3/a lipoic acid/lutein</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>zaditor</i>	<i>ketotifen fumarate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>magnesium oxide</i>	<i>magnesium oxide</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>pharbedryl</i>	<i>diphenhydramine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>infants' pain reliever</i>	<i>acetaminophen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>option 2</i>	<i>levonorgestrel</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	COLACE	<i>docusate sodium</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	TRI-VI-FLOR	<i>pediatric multivitamin a,c,and d3 no.38 with sodium fluoride</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>multivitamin with fluoride</i>	<i>pediatric multivitamins no.17 with sodium fluoride</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>laxative</i>	<i>bisacodyl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>clearlax</i>	<i>polyethylene glycol 3350</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>children's cetirizine hcl</i>	<i>cetirizine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	VITAL-D RX	<i>vit b complex no.4/vit d3/ascorbic acid/folic acid/zinc oxid</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>laxative suppository</i>	<i>bisacodyl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug

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02/01/2024	<i>baza antifungal</i>	<i>miconazole nitrate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>quickvue at-home covid-19 test</i>	<i>covid-19 antigen immunoassay test</i>	ADD UM: SUM1		Medicaid Benefit Drug
02/01/2024	MAG-AL PLUS	<i>magnesium hydroxide/aluminum hydroxide/simethicone</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	REFRESH TEARS	<i>carboxymethylcellulose sodium</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>ed-apap</i>	<i>acetaminophen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>docusate sodium</i>	<i>docusate sodium</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>fiber</i>	<i>psyllium husk (with sugar)</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	PAXLOVID (EUA)	<i>nirmatrelvir/ritonavir</i>	REMOVE UM: QUANTITY	30 / 30 DAYS	
02/01/2024	<i>infant-toddler iron</i>	<i>ferrous sulfate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>clotrimazole</i>	<i>clotrimazole</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>ferrous gluconate</i>	<i>ferrous gluconate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	TUMS X-STR	<i>calcium carbonate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>omeprazole</i>	<i>omeprazole</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>bisacodyl</i>	<i>bisacodyl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>3 day vaginal</i>	<i>miconazole nitrate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug

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02/01/2024	<i>diarrhea relief</i>	<i>bismuth subsalicylate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>lice killing</i>	<i>permethrin</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>vitamin d3</i>	<i>cholecalciferol (vitamin d3)</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>children's allergy</i>	<i>cetirizine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>aspirin ec</i>	<i>aspirin</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>almacone-2</i>	<i>magnesium hydroxide/aluminum hydroxide/simethicone</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>multivitamin with fluoride</i>	<i>pediatric multivitamin no.2/sodium fluoride</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>infant's ibuprofen</i>	<i>ibuprofen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>diethylpropion hcl</i>	<i>diethylpropion hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	PAXLOVID	<i>nirmatrelvir/ritonavir</i>	ADD UM: QUANTITY		30 / 30 OVER TIME
02/01/2024	<i>heartburn relief</i>	<i>famotidine</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>antacid</i>	<i>magnesium hydroxide/aluminum hydroxide/simethicone</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>miconazole nitrate</i>	<i>miconazole nitrate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	QUFLORA FE	<i>pediatric multivitamin no.151/ferrous sulfate/sod fluoride</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug

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02/01/2024	DIFFERIN	<i>adapalene</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	LIDOCAN II	<i>lidocaine</i>	NEW AUTO RULE		Generics
02/01/2024	<i>infants' ibuprofen</i>	<i>ibuprofen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>loratadine</i>	<i>loratadine</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>flowflex covid-19 ag home test</i>	<i>covid-19 antigen immunoassay test</i>	ADD UM: SUM1		Medicaid Benefit Drug
02/01/2024	TUMS SMOOTHIES	<i>calcium carbonate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>lisdexamfetamine dimesylate</i>	<i>lisdexamfetamine dimesylate</i>	NEW AUTO RULE		Generics
02/01/2024	TUMS	<i>calcium carbonate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	3-DAY VAGINAL CREAM	<i>clotrimazole</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	SAXENDA	<i>liraglutide</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>orlistat</i>	<i>orlistat</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>chromium</i>	<i>chromic chloride</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>lubrifresh pm</i>	<i>mineral oil/petrolatum,white</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>m-dryl</i>	<i>diphenhydramine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>arthritis pain</i>	<i>acetaminophen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug

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02/01/2024	<i>children's pain-fever</i>	<i>acetaminophen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>calcium 600-d3-minerals</i>	<i>calcium carbonate/cholecalciferol (vit d3)/minerals</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	OJJAARA	<i>momelotinib dihydrochloride</i>	NEW AUTO RULE		Brands
02/01/2024	REVELA	<i>sevelamer carbonate</i>	NEW AUTO RULE		Brands
02/01/2024	<i>nicotine gum</i>	<i>nicotine polacrilex</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>fabb</i>	<i>cyanocobalamin/folic acid/pyridoxine</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>fiber smooth</i>	<i>psyllium seed</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>calcium 600+minerals</i>	<i>calcium carbonate/cholecalciferol (vit d3)/minerals</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>anti-diarrheal</i>	<i>loperamide hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>first aid antibiotic</i>	<i>neomycin sulfate/bacitracin zinc/polymyxin b</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>turqoz</i>	<i>norgestrel-ethinyl estradiol</i>	NEW AUTO RULE		Generics
02/01/2024	ENEMA	<i>sodium phosphate,monobasic/sodium phosphate,dibasic</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>antacid plus anti-gas</i>	<i>magnesium hydroxide/aluminum hydroxide/simethicone</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>all day relief</i>	<i>naproxen sodium</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>infant pain-fever</i>	<i>acetaminophen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug

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02/01/2024	ZURZUVAE	<i>zuranolone</i>	NEW AUTO RULE		Brands
02/01/2024	<i>nicotine patch</i>	<i>nicotine</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>children's allergy</i>	<i>diphenhydramine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>tri-buffered aspirin</i>	<i>aspirin/calcium carbonate/magnesium</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>children's aspirin</i>	<i>aspirin</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>ibuprofen</i>	<i>ibuprofen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>risperidone er</i>	<i>risperidone microspheres</i>	NEW AUTO RULE		Generics
02/01/2024	REFRESH PLUS	<i>carboxymethylcellulose sodium</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>fluticasone propionate</i>	<i>fluticasone propionate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>clotrimazole-3</i>	<i>clotrimazole</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>multivitamin-iron-fluoride</i>	<i>pediatric multivitamin no.45/sodium fluoride/ferrous sulfate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>carestart covid-19 ag home tst</i>	<i>covid-19 antigen immunoassay test</i>	ADD UM: SUM1		Medicaid Benefit Drug
02/01/2024	<i>liquid calcium-vit d</i>	<i>calcium carbonate/cholecalciferol (vitamin d3)</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>heartburn relief</i>	<i>magnesium carbonate/aluminum hydroxide/alginate acid</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>pharbetol</i>	<i>acetaminophen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug

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02/01/2024	<i>miconazole-7</i>	<i>miconazole nitrate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>phytonadione</i>	<i>phytonadione (vit k1)</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	DEKAS PLUS	<i>multivit with minerals no.53/folic acid/vit k1/ubidecarenone</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>virt-caps</i>	<i>vitamin b complex and vitamin c no.20/folic acid</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	POLY-VI-FLOR	<i>pediatric multivitamin no.219 with sodium fluoride</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>magic bullet</i>	<i>bisacodyl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>diphenhydramine hcl</i>	<i>diphenhydramine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>senna lax</i>	<i>sennosides</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>infants ibuprofen</i>	<i>ibuprofen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>indicaid covid-19 ag home test</i>	<i>covid-19 antigen immunoassay test</i>	ADD UM: SUM1		Medicaid Benefit Drug
02/01/2024	<i>cetirizine hcl</i>	<i>cetirizine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	DIALYVITE SUPREME D	<i>multivitamin-minerals no.25/folic acid/vitamin d3</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>antacid plus gas relief</i>	<i>magnesium hydroxide/aluminum hydroxide/simethicone</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	DIALYVITE	<i>folic acid/vitamin b complex and vitamin c</i>	ADD UM: SUM1		Medicaid Benefit Drug

BRAND-NAME DRUGS are CAPITALIZED. *Generic drugs are lower-case italics.*

UPHP MI HEALTH LINK Updates

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
02/01/2024	<i>children's loratadine</i>	<i>loratadine</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	KALYDECO	<i>ivacaftor</i>	NEW AUTO RULE		Brands
02/01/2024	<i>kemoplat</i>	<i>cisplatin</i>	NEW AUTO RULE		Generics
02/01/2024	<i>vitamin k1</i>	<i>phytonadione (vit k1)</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	DRISDOL	<i>ergocalciferol (vitamin d2)</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>mintox</i>	<i>magnesium hydroxide/aluminum hydroxide/simethicone</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>children's allergy</i>	<i>fexofenadine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	PEDIAVENT	<i>dexbrompheniramine maleate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	SYSTANE	<i>mineral oil/petrolatum,white</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>calcium 600 + vit d</i>	<i>calcium carbonate/cholecalciferol (vitamin d3)</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	POLY-VI-FLOR	<i>pediatric multivitamin no.220 with fluoride</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>iron</i>	<i>ferrous sulfate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>pediatric vitamin d3</i>	<i>cholecalciferol (vitamin d3)</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>children's acetaminophen</i>	<i>acetaminophen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>lubricant eye drop</i>	<i>carboxymethylcellulose sodium</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug

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UPHP MI HEALTH LINK Updates

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
02/01/2024	<i>wee care</i>	<i>iron,carbonyl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>allergy relief</i>	<i>chlorpheniramine maleate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>calcium 600+d plus minerals</i>	<i>calcium carbonate/cholecalciferol (vit d3)/minerals</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	LAGEVRIO (EUA)	<i>molnupiravir</i>	REMOVE UM: QUANTITY	40 / 30 DAYS	
02/01/2024	<i>nicotine lozenge</i>	<i>nicotine polacrilex</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>vitamin d2</i>	<i>ergocalciferol (vitamin d2)</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	AKEEGA	<i>niraparib tosylate/abiraterone acetate</i>	NEW AUTO RULE		Brands
02/01/2024	<i>asperflex lidocaine</i>	<i>lidocaine</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	POLY-VI-FLOR	<i>pediatric multivitamin no.213 with sodium fluoride</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>adapalene</i>	<i>adapalene</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	AUGTYRO	<i>repotrectinib</i>	NEW AUTO RULE		Brands
02/01/2024	<i>naproxen sodium</i>	<i>naproxen sodium</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	PLAN B ONE-STEP	<i>levonorgestrel</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>ed chlorped jr</i>	<i>chlorpheniramine maleate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	SLOW-MAG	<i>magnesium chloride</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug

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UPHP MI HEALTH LINK Updates

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
02/01/2024	<i>mycozyl ac</i>	<i>clotrimazole</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	REFRESH LIQUIGEL	<i>carboxymethylcellulose sodium</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>anti-itch</i>	<i>hydrocortisone</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>guaifenesin-dextromethorphan</i>	<i>guaifenesin/dextromethorphan hbr</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>diethylpropion hcl er</i>	<i>diethylpropion hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>triphrocaps</i>	<i>vitamin b complex and vitamin c no.20/folic acid</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>folic acid</i>	<i>folic acid</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>all day allergy</i>	<i>cetirizine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>pain relief extra strength</i>	<i>acetaminophen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>inteliswab covid-19 home test</i>	<i>covid-19 antigen immunoassay test</i>	ADD UM: SUM1		Medicaid Benefit Drug
02/01/2024	<i>fiber therapy</i>	<i>psyllium husk (with sugar)</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>hydrocortisone acetate</i>	<i>hydrocortisone acetate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>calcium 600-vit d3</i>	<i>calcium carbonate/cholecalciferol (vitamin d3)</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>oyster shell calcium-vit d3</i>	<i>calcium carbonate/cholecalciferol (vitamin d3)</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug

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UPHP MI HEALTH LINK Updates

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
02/01/2024	<i>my way</i>	<i>levonorgestrel</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>antacid</i>	<i>calcium carbonate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>artificial tears</i>	<i>polyvinyl alcohol/povidone</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>fexofenadine hcl</i>	<i>fexofenadine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>allergy</i>	<i>loratadine</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>kourzeq</i>	<i>triamcinolone acetonide</i>	NEW AUTO RULE		Generics
02/01/2024	<i>gavilax</i>	<i>polyethylene glycol 3350</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	QUFLORA	<i>pediatric multivitamin no.63 with sodium fluoride</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>ultra calcium 600-vit d3</i>	<i>calcium carbonate/cholecalciferol (vitamin d3)</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	REFRESH CELLUVISC	<i>carboxymethylcellulose sodium</i>	ADD UM: SUM1		Medicaid Benefit Drug
02/01/2024	KEPIVANCE	<i>palifermin</i>	NEW AUTO RULE		Brands
02/01/2024	<i>siltussin dm</i>	<i>guaifenesin/dextromethorphan hbr</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>mintox plus</i>	<i>magnesium hydroxide/aluminum hydroxide/simethicone</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>allergy</i>	<i>chlorpheniramine maleate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>omeprazole magnesium</i>	<i>omeprazole magnesium</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug

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UPHP MI HEALTH LINK Updates

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
02/01/2024	FUNGOID TINCTURE	<i>miconazole nitrate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>povidone-iodine</i>	<i>povidone-iodine</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	NICORETTE	<i>nicotine polacrilex</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>oyster shell calcium-vitamin d</i>	<i>calcium carbonate/cholecalciferol (vitamin d3)</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>copper chloride</i>	<i>cupric chloride</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>pain reliever</i>	<i>acetaminophen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>speedyswab covid-19 home test</i>	<i>covid-19 antigen immunoassay test</i>	ADD UM: SUM1		Medicaid Benefit Drug
02/01/2024	TAKE ACTION	<i>levonorgestrel</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>oyster shell calcium</i>	<i>calcium carbonate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>ultra strength antacid</i>	<i>calcium carbonate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	GENTEAL TEARS SEVERE	<i>hypromellose</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	MAG-AL	<i>magnesium hydroxide/aluminum hydroxide</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>infants' pain-fever</i>	<i>acetaminophen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>calcium carbonate</i>	<i>calcium carbonate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug

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UPHP MI HEALTH LINK Updates

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
02/01/2024	<i>saline enema</i>	<i>sodium phosphate, monobasic/sodium phosphate, dibasic</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>stool softener</i>	<i>docusate sodium</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>wescaps</i>	<i>vitamin b complex and vitamin c no.20/folic acid</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>aspirin</i>	<i>aspirin</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	HISTEX	<i>triprolidine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>brimonidine tartrate</i>	<i>brimonidine tartrate</i>	NEW AUTO RULE		Generics
02/01/2024	<i>calcium 500-vit d3</i>	<i>calcium carbonate/cholecalciferol (vitamin d3)</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>dual action</i>	<i>famotidine/calcium carbonate/magnesium hydroxide</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>infant pain relief</i>	<i>acetaminophen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>lansoprazole</i>	<i>lansoprazole</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>arthritis pain relief</i>	<i>acetaminophen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>non-aspirin pain relief</i>	<i>acetaminophen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>nicoderm cq</i>	<i>nicotine</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	VANFLYTA	<i>quizartinib dihydrochloride</i>	NEW AUTO RULE		Brands
02/01/2024	CRESEMBA	<i>isavuconazonium sulfate</i>	NEW AUTO RULE		Brands

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UPHP MI HEALTH LINK Updates

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
02/01/2024	<i>nu-mag</i>	<i>magnesium chloride</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>fast relief laxative</i>	<i>bisacodyl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>antacid extra strength</i>	<i>calcium carbonate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>adipex-p</i>	<i>phentermine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	PEDIACLEAR PD	<i>triprolidine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	ACNE MEDICATION	<i>benzoyl peroxide</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	ALAWAY	<i>ketotifen fumarate</i>	ADD UM: SUM1		Medicaid Benefit Drug
02/01/2024	<i>nighttime relief lubricant eye</i>	<i>mineral oil/petrolatum, white</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>8 hour pain relief</i>	<i>acetaminophen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>children's pain reliever</i>	<i>acetaminophen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>adult aspirin regimen</i>	<i>aspirin</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>chlorpheniramine maleate</i>	<i>chlorpheniramine maleate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	ROZLYTREK	<i>entrectinib</i>	NEW AUTO RULE		Brands
02/01/2024	<i>athletic foot cream</i>	<i>clotrimazole</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	CHILDREN'S ALAWAY	<i>ketotifen fumarate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug

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UPHP MI HEALTH LINK Updates

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
02/01/2024	<i>benzoyl peroxide</i>	<i>benzoyl peroxide</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>mgo-400</i>	<i>magnesium oxide</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>geri-kot</i>	<i>sennosides</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>antacid maximum strength</i>	<i>magnesium hydroxide/aluminum hydroxide/simethicone</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>bacitracin</i>	<i>bacitracin</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>ferro-time</i>	<i>ferrous sulfate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>calcium 250-vit d3</i>	<i>calcium carbonate/cholecalciferol (vitamin d3)</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>hydroxocobalamin</i>	<i>hydroxocobalamin</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>hydrocortisone</i>	<i>hydrocortisone</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>advanced antacid-antigas</i>	<i>magnesium hydroxide/aluminum hydroxide/simethicone</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>smooth dissolving antacid</i>	<i>calcium carbonate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>econtra one-step</i>	<i>levonorgestrel</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>infants' acetaminophen</i>	<i>acetaminophen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug

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UPHP MI HEALTH LINK Updates

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
02/01/2024	ENLYTE	<i>iron/folate no.8/ps-dha/ps-epa/fad/nadh/betaine/multivitamin 47</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	POLY-VI-FLOR WITH IRON	<i>pediatric multivitamin no.205/sodium fluoride/iron,carbonyl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>levonorgestrel</i>	<i>levonorgestrel</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>mapap</i>	<i>acetaminophen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	INFUVITE PEDIATRIC	<i>multivitamin infusion, pediatric no.1 with vitamin k</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>hydrocream</i>	<i>hydrocortisone</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>lubricant eye</i>	<i>mineral oil/petrolatum,white</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>lithium citrate</i>	<i>lithium citrate</i>	NEW AUTO RULE		Generics
02/01/2024	<i>on-go covid-19 ag at home test</i>	<i>covid-19 antigen immunoassay test</i>	ADD UM: SUM1		Medicaid Benefit Drug
02/01/2024	<i>magnesium</i>	<i>magnesium oxide</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>thiamine hcl</i>	<i>thiamine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	CONTRAIVE	<i>naltrexone hcl/bupropion hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>phentermine hcl</i>	<i>phentermine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>miconazole 3</i>	<i>miconazole nitrate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>corvita</i>	<i>folic acid/multivitamin,ther and minerals/lycopene/lutein</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug

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UPHP MI HEALTH LINK Updates

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
02/01/2024	<i>silapap</i>	<i>acetaminophen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>miconazole 7</i>	<i>miconazole nitrate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	DIALYVITE 3000	<i>folic acid/vitamin b comp and c/selenium/minerals/zinc</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>tri-vite with fluoride</i>	<i>pediatric multivit with a,c,d3 no.21/sodium fluoride</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>loratadine allergy</i>	<i>loratadine</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>vitamins a,c,d and fluoride</i>	<i>pediatric multivit with a,c,d3 no.21/sodium fluoride</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>stomach relief</i>	<i>bismuth subsalicylate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>dekas essential</i>	<i>vitamin a palmitate/vitamin d3/vitamin e/vit e tpgs/vit k1</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>terbinafine</i>	<i>terbinafine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>siladryl</i>	<i>diphenhydramine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	CHILDREN'S FLONASE ALLERGY RLF	<i>fluticasone propionate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	ENEMEEZ	<i>docusate sodium</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>saxagliptin-metformin er</i>	<i>saxagliptin hcl/metformin hcl</i>	NEW AUTO RULE		Generics
02/01/2024	PAXLOVID (EUA)	<i>nirmatrelvir/ritonavir</i>	NEW AUTO RULE		Brands

BRAND-NAME DRUGS are CAPITALIZED. *Generic drugs are lower-case italics.*

UPHP MI HEALTH LINK Updates

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
02/01/2024	<i>econtra ez</i>	<i>levonorgestrel</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>clinitest covid-19 home test</i>	<i>covid-19 antigen immunoassay test</i>	ADD UM: SUM1		Medicaid Benefit Drug
02/01/2024	FLORIVA	<i>pediatric multivitamin no.85 with sodium fluoride</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>gentle laxative</i>	<i>bisacodyl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>oysco 500-vit d3</i>	<i>calcium carbonate/cholecalciferol (vitamin d3)</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>acid reducer complete</i>	<i>famotidine/calcium carbonate/magnesium hydroxide</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>ketotifen fumarate</i>	<i>ketotifen fumarate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>st. joseph aspirin</i>	<i>aspirin</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>genabio covid-19 rapid at-home</i>	<i>covid-19 antigen immunoassay test</i>	ADD UM: SUM1		Medicaid Benefit Drug
02/01/2024	<i>m-pap</i>	<i>acetaminophen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	ACNE MEDICATION	<i>benzoyl peroxide</i>	ADD UM: SUM1		Medicaid Benefit Drug
02/01/2024	POLY-VI-FLOR WITH IRON	<i>pediatric multivitamin no.214/sodium fluoride/ferric citrate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>children's allergy relief</i>	<i>cetirizine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	AHIST	<i>chlorcyclizine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug

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UPHP MI HEALTH LINK Updates

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
02/01/2024	<i>fiber smooth</i>	<i>psyllium seed (with sugar)</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>binaxnow covd ag card home tst</i>	<i>covid-19 antigen immunoassay test</i>	ADD UM: SUM1		Medicaid Benefit Drug
02/01/2024	FRUZAQLA	<i>fruquintinib</i>	NEW AUTO RULE		Brands
02/01/2024	<i>infant vitamin d</i>	<i>cholecalciferol (vitamin d3)</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>dual action complete</i>	<i>famotidine/calcium carbonate/magnesium hydroxide</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>renal caps</i>	<i>vitamin b complex and vitamin c no.20/folic acid</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>aftera</i>	<i>levonorgestrel</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>hydrocortisone- aloe</i>	<i>hydrocortisone/aloe vera</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>mintox maximum strength</i>	<i>magnesium hydroxide/aluminum hydroxide/simethicone</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	FLONASE ALLERGY RELIEF	<i>fluticasone propionate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>manganese chloride</i>	<i>manganese chloride</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>ibuprofen ib</i>	<i>ibuprofen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>8hr arthritis pain relief</i>	<i>acetaminophen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>monistat care</i>	<i>hydrocortisone</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug

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UPHP MI HEALTH LINK Updates

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
02/01/2024	<i>smooth antacid</i>	<i>calcium carbonate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>pyridoxine hcl</i>	<i>pyridoxine hcl (vitamin b6)</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>antifungal cream</i>	<i>tolnaftate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>konsyl</i>	<i>psyllium husk (with sugar)</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>famotidine</i>	<i>famotidine</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>senna</i>	<i>sennosides</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>children's all day allergy</i>	<i>cetirizine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>cal-gest</i>	<i>calcium carbonate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>ellume covid-19 home test</i>	<i>covid-19 antigen immunoassay test</i>	ADD UM: SUM1		Medicaid Benefit Drug
02/01/2024	<i>phendimetrazine tartrate</i>	<i>phendimetrazine tartrate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>cyanocobalamin injection</i>	<i>cyanocobalamin (vitamin b-12)</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>lice killing</i>	<i>piperonyl butoxide/pyrethrins</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>sodium bicarbonate</i>	<i>sodium bicarbonate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>tioconazole-1</i>	<i>tioconazole</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>ihealth covid-19 ag home test</i>	<i>covid-19 antigen immunoassay test</i>	ADD UM: SUM1		Medicaid Benefit Drug

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UPHP MI HEALTH LINK Updates

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
02/01/2024	RENOVA	<i>tretinoin/emollient base</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>my choice</i>	<i>levonorgestrel</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>vit 3</i>	<i>omega-3/dha/epa/b12/folic acid/pyridoxine hcl/phytosterols</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	BACMIN	<i>multivitamin with minerals no.20/iron/folic acid</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>acetaminophen</i>	<i>acetaminophen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>budesonide</i>	<i>budesonide</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>breyna</i>	<i>budesonide/formoterol fumarate</i>	NEW AUTO RULE		Generics
02/01/2024	DEKAS ESSENTIAL	<i>vit a palmitate/beta-carotene/vit d3/tocophersolan/vitamin k</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	XALKORI	<i>crizotinib</i>	NEW AUTO RULE		Brands
02/01/2024	<i>allergy relief</i>	<i>fluticasone propionate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>pazopanib hcl</i>	<i>pazopanib hcl</i>	NEW AUTO RULE		Generics
02/01/2024	<i>athlete's foot</i>	<i>clotrimazole</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>mediproxen</i>	<i>naproxen sodium</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>hydrocortisone plus</i>	<i>hydrocortisone/aloe vera</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>fiber powder</i>	<i>psyllium husk (with sugar)</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug

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UPHP MI HEALTH LINK Updates

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
02/01/2024	<i>children's ibuprofen</i>	<i>ibuprofen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>enilloring</i>	<i>etonogestrel/ethinyl estradiol</i>	NEW AUTO RULE		Generics
02/01/2024	<i>triamcinolone acetonide</i>	<i>triamcinolone acetonide</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>lucira check-it covid home tst</i>	<i>covid-19 molecular nucleic acid test assay</i>	ADD UM: SUM1		Medicaid Benefit Drug
02/01/2024	<i>antacid-antigas</i>	<i>magnesium hydroxide/aluminum hydroxide/simethicone</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	NEHPLEX RX	<i>vit b complex no.3/folic acid/ascorbic acid/biotin/zinc oxid</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	IWILFIN	<i>eflornithine hcl</i>	NEW AUTO RULE		Brands
02/01/2024	<i>dok</i>	<i>docusate sodium</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	K-PHOS ORIGINAL	<i>potassium phosphate,monobasic</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>hi-cal</i>	<i>calcium carbonate/cholecalciferol (vitamin d3)</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>pink bismuth</i>	<i>bismuth subsalicylate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>lubricant eye drops</i>	<i>carboxymethylcellulose sodium</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>miconazole 1</i>	<i>miconazole nitrate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>lubricant pm</i>	<i>mineral oil/petrolatum,white</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug

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UPHP MI HEALTH LINK Updates

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
02/01/2024	<i>acid gone antacid</i>	<i>magnesium carbonate/aluminum hydroxide/alginate acid</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>opcicon one-step</i>	<i>levonorgestrel</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>covid-19 at-home test (eua)</i>	<i>covid-19 antigen immunoassay test</i>	ADD UM: SUM1		Medicaid Benefit Drug
02/01/2024	PEDIA-LAX ENEMA	<i>sodium phosphate, monobasic/sodium phosphate, dibasic</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>teriparatide</i>	<i>teriparatide</i>	NEW AUTO RULE		Brands
02/01/2024	<i>children's allergy</i>	<i>loratadine</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>polyethylene glycol 3350</i>	<i>polyethylene glycol 3350</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	NASCOBAL	<i>cyanocobalamin (vitamin b-12)</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>triple antibiotic</i>	<i>neomycin sulfate/bacitracin zinc/polymyxin b</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>calcium 600-vit d3-mineral</i>	<i>calcium carbonate/vit d3/magnesium/ox/zinc/copper/manganese/boron</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	GENTEAL TEARS SEVERE	<i>mineral oil/petrolatum, white</i>	ADD UM: SUM1		Medicaid Benefit Drug
02/01/2024	LAMISIL AT	<i>terbinafine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>enema disposable</i>	<i>sodium phosphate, monobasic/sodium phosphate, dibasic</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug

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UPHP MI HEALTH LINK Updates

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
02/01/2024	TUMS ULTRA	<i>calcium carbonate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	TRUQAP	<i>capivasertib</i>	NEW AUTO RULE		Brands
02/01/2024	<i>banophen</i>	<i>diphenhydramine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>bismatrol</i>	<i>bismuth subsalicylate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>acetaminophen 8 hour</i>	<i>acetaminophen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>aspirin regimen</i>	<i>aspirin</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>aller-g-time</i>	<i>diphenhydramine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>loperamide</i>	<i>loperamide hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>athlete's foot</i>	<i>terbinafine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>non-aspirin</i>	<i>acetaminophen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>ferrous sulfate</i>	<i>ferrous sulfate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>stool softener</i>	<i>docusate calcium</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>allergy</i>	<i>cetirizine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>healthylax</i>	<i>polyethylene glycol 3350</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>arthritis pain reliever</i>	<i>acetaminophen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug

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UPHP MI HEALTH LINK Updates

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
02/01/2024	HISTEX PD	<i>triprolidine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>tums ultra strength</i>	<i>calcium carbonate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	LAGEVRIO (EUA)	<i>molnupiravir</i>	NEW AUTO RULE		Brands
02/01/2024	<i>allergy</i>	<i>diphenhydramine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>acetaminophen er</i>	<i>acetaminophen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>eye itch relief</i>	<i>ketotifen fumarate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>mapap arthritis pain</i>	<i>acetaminophen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	QUFLORA	<i>pediatric multivitamin no.84 with sodium fluoride</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>non-aspirin extra strength</i>	<i>acetaminophen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	QSYMIA	<i>phentermine hcl/topiramate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	QUFLORA FE	<i>pediatric multivitamin no. 142/iron,carbonyl/sodium fluoride</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	ALLER-CHLOR	<i>chlorpheniramine maleate</i>	ADD UM: SUM1		Medicaid Benefit Drug
02/01/2024	WEGOVY	<i>semaglutide</i>	TERM AUTO RULE		
02/01/2024	BETADINE	<i>povidone-iodine</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>multi-vitamin w-fluoride-iron</i>	<i>pediatric multivitamin no.45/sodium fluoride/ferrous sulfata</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug

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UPHP MI HEALTH LINK Updates

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
02/01/2024	<i>triprolidine hcl</i>	<i>triprolidine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>all day pain relief</i>	<i>naproxen sodium</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>antacid ultra strength</i>	<i>calcium carbonate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	RENOVA PUMP	<i>tretinoin/emollient base</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>acid reducer</i>	<i>famotidine</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>tussin dm clear</i>	<i>guaifenesin/dextromethorphan hbr</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>new day</i>	<i>levonorgestrel</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>acid reducer</i>	<i>cimetidine</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	QUFLORA	<i>pediatric multivitamin no.83 with sodium fluoride</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>infants' pain relief</i>	<i>acetaminophen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>8hr arthritis pain</i>	<i>acetaminophen</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>children's ferrous sulfate</i>	<i>ferrous sulfate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	XENICAL	<i>orlistat</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>carboxymethylcellulose sodium</i>	<i>carboxymethylcellulose sodium</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>micotrin ac</i>	<i>clotrimazole</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug

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UPHP MI HEALTH LINK Updates

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
02/01/2024	<i>docusate calcium</i>	<i>docusate calcium</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>super calcium 600-vit d3</i>	<i>calcium carbonate/cholecalciferol (vitamin d3)</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	PREVACID 24HR	<i>lansoprazole</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	FOLTRATE	<i>cyanocobalamin/folic acid</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	DIALYVITE ZINC	<i>vitamin b complex no. 11/folic acid/vit c/biotin/zinc oxide</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>antacid-gas relief</i>	<i>magnesium hydroxide/aluminum hydroxide/simethicone</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>aller-ease</i>	<i>fexofenadine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>tension headache</i>	<i>acetaminophen/caffeine</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>antifungal</i>	<i>clotrimazole</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>lice treatment</i>	<i>permethrin</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>allergy relief</i>	<i>cetirizine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>calcium</i>	<i>calcium carbonate</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/01/2024	<i>diphedryl</i>	<i>diphenhydramine hcl</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
02/08/2024	<i>flowflex covid-19 ag home test</i>	<i>covid-19 antigen immunoassay test</i>	NEW AUTO RULE		GENERIC

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UPHP MI HEALTH LINK Updates

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
02/29/2024	<i>butorphanol tartrate</i>	<i>butorphanol tartrate</i>	UM AUTO RULE: SUM1		Subject to Opioid Safety Edits

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UPHP MI HEALTH LINK Updates

March, 2024

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
03/01/2024	<i>sod sulf-potass sulf-mag sulf</i>	<i>sodium sulfate/potassium sulfate/magnesium sulfate</i>	NEW AUTO RULE		Generics
03/01/2024	AKEEGA	<i>niraparib tosylate/abiraterone acetate</i>	NEW AUTO RULE		Brands
03/01/2024	<i>klayesta</i>	<i>nystatin</i>	NEW AUTO RULE		Generics
03/01/2024	<i>hydromorphone hcl</i>	<i>hydromorphone hcl</i>	UM AUTO RULE: SUM1		Subject to Opioid Safety Edits
03/01/2024	<i>hydrocodone bitartrate er</i>	<i>hydrocodone bitartrate</i>	UM AUTO RULE: SUM1		Subject to Opioid Safety Edits
03/01/2024	<i>lidocan iii</i>	<i>lidocaine</i>	NEW AUTO RULE		Generics
03/01/2024	IXCHIQ	<i>chikungunya vaccine, live/preservative free</i>	NEW AUTO RULE		Brands
03/01/2024	<i>oxycodone hcl</i>	<i>oxycodone hcl</i>	UM AUTO RULE: SUM1		Subject to Opioid Safety Edits
03/01/2024	<i>taysofy</i>	<i>norethindrone acetate-ethinyl estradiol/ferrous fumarate</i>	NEW AUTO RULE		Generics
03/01/2024	<i>hydrocodone-ibuprofen</i>	<i>hydrocodone/ibuprofen</i>	UM AUTO RULE: SUM1		Subject to Opioid Safety Edits
03/01/2024	<i>fentanyl citrate</i>	<i>fentanyl citrate</i>	UM AUTO RULE: SUM1		Subject to Opioid Safety Edits
03/01/2024	<i>endocet</i>	<i>oxycodone hcl/acetaminophen</i>	UM AUTO RULE: SUM1		Subject to Opioid Safety Edits
03/01/2024	<i>morphine sulfate er</i>	<i>morphine sulfate</i>	UM AUTO RULE: SUM1		Subject to Opioid Safety Edits
03/01/2024	<i>tramadol hcl</i>	<i>tramadol hcl</i>	UM AUTO RULE: SUM1		Subject to Opioid Safety Edits

BRAND-NAME DRUGS are CAPITALIZED. *Generic drugs are lower-case italics.*

UPHP MI HEALTH LINK Updates

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
03/01/2024	<i>codeine sulfate</i>	<i>codeine sulfate</i>	UM AUTO RULE: SUM1		Subject to Opioid Safety Edits
03/01/2024	<i>hydrocodone-acetaminophen</i>	<i>hydrocodone bitartrate/acetaminophen</i>	UM AUTO RULE: SUM1		Subject to Opioid Safety Edits
03/01/2024	<i>morphine sulfate cr</i>	<i>morphine sulfate</i>	UM AUTO RULE: SUM1		Subject to Opioid Safety Edits
03/01/2024	<i>morphine sulfate</i>	<i>morphine sulfate</i>	UM AUTO RULE: SUM1		Subject to Opioid Safety Edits
03/01/2024	<i>morphine sulfate</i>	<i>morphine sulfate/pf</i>	UM AUTO RULE: SUM1		Subject to Opioid Safety Edits
03/01/2024	ROXICODONE	<i>oxycodone hcl</i>	UM AUTO RULE: SUM1		Subject to Opioid Safety Edits
03/01/2024	<i>tramadol hcl-acetaminophen</i>	<i>tramadol hcl/acetaminophen</i>	UM AUTO RULE: SUM1		Subject to Opioid Safety Edits
03/01/2024	<i>dermacinrx lidocan</i>	<i>lidocaine</i>	NEW AUTO RULE		Generics
03/01/2024	BOSULIF	<i>bosutinib</i>	NEW AUTO RULE		Brands
03/01/2024	<i>butorphanol tartrate</i>	<i>butorphanol tartrate</i>	UM AUTO RULE: SUM1		Subject to Opioid Safety Edits
03/01/2024	<i>hydromorphone hcl</i>	<i>hydromorphone hcl/pf</i>	UM AUTO RULE: SUM1		Subject to Opioid Safety Edits
03/01/2024	<i>levorphanol tartrate</i>	<i>levorphanol tartrate</i>	UM AUTO RULE: SUM1		Subject to Opioid Safety Edits
03/01/2024	<i>buprenorphine</i>	<i>buprenorphine</i>	UM AUTO RULE: SUM1		Subject to Opioid Safety Edits
03/01/2024	BUTRANS	<i>buprenorphine</i>	UM AUTO RULE: SUM1		Subject to Opioid Safety Edits
03/01/2024	PENBRAYA	<i>meningococ a,c,y,w-135,tt comp/n. mening b,fhbp rec comp/pf</i>	NEW AUTO RULE		Brands

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UPHP MI HEALTH LINK Updates

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
03/01/2024	DURAMORPH	<i>morphine sulfate/pf</i>	UM AUTO RULE: SUM1		Subject to Opioid Safety Edits
03/01/2024	AUGTYRO	<i>repotrectinib</i>	NEW AUTO RULE		Brands
03/01/2024	ZENPEP	<i>lipase/protease/amylase</i>	NEW AUTO RULE		Brands
03/01/2024	BELBUCA	<i>buprenorphine hcl</i>	UM AUTO RULE: SUM1		Subject to Opioid Safety Edits
03/01/2024	KALYDECO	<i>ivacaftor</i>	NEW AUTO RULE		Brands
03/01/2024	<i>vigpoder</i>	<i>vigabatrin</i>	NEW AUTO RULE		Generics
03/01/2024	<i>acetaminophen-codeine</i>	<i>acetaminophen with codeine phosphate</i>	UM AUTO RULE: SUM1		Subject to Opioid Safety Edits
03/01/2024	<i>tramadol hcl er</i>	<i>tramadol hcl</i>	UM AUTO RULE: SUM1		Subject to Opioid Safety Edits
03/01/2024	<i>fentanyl</i>	<i>fentanyl</i>	UM AUTO RULE: SUM1		Subject to Opioid Safety Edits
03/01/2024	<i>bromfenac sodium</i>	<i>bromfenac sodium</i>	NEW AUTO RULE		Generics
03/01/2024	OGSIVEO	<i>nirogacestat hydrobromide</i>	NEW AUTO RULE		Brands
03/01/2024	<i>oxycodone-acetaminophen</i>	<i>oxycodone hcl/acetaminophen</i>	UM AUTO RULE: SUM1		Subject to Opioid Safety Edits
03/01/2024	<i>methadone hcl</i>	<i>methadone hcl</i>	UM AUTO RULE: SUM1		Subject to Opioid Safety Edits
03/05/2024	<i>butorphanol tartrate</i>	<i>butorphanol tartrate</i>	UM AUTO RULE: SUM1		Subject to Opioid Safety Edits

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UPHP MI HEALTH LINK Updates

April, 2024

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
04/01/2024	XOLAIR	<i>omalizumab</i>	NEW AUTO RULE		Brands
04/01/2024	PAXLOVID (EUA)	<i>nirmatrelvir/ritonavir</i>	REMOVE FROM FORMULARY	Brands	Non-Formulary
04/01/2024	<i>dabigatran etexilate</i>	<i>dabigatran etexilate mesylate</i>	NEW AUTO RULE		Generics
04/01/2024	<i>nitroglycerin</i>	<i>nitroglycerin</i>	NEW AUTO RULE		Generics
04/01/2024	<i>mifepristone</i>	<i>mifepristone</i>	NEW AUTO RULE		Generics
04/01/2024	UDENYCA ONBODY	<i>pegfilgrastim-cbqv</i>	NEW AUTO RULE		Brands
04/03/2024	MINTOX	<i>magnesium hydroxide/aluminum hydroxide/simethicone</i>	DRUG ATTR CHANGE OVERRIDE	Medicaid Benefit Drug	Medicaid Benefit Drug
04/03/2024	ARTIFICIAL TEARS	<i>polyvinyl alcohol/povidone</i>	DRUG ATTR CHANGE OVERRIDE	Medicaid Benefit Drug	Medicaid Benefit Drug
04/03/2024	ANTIFUNGAL CREAM	<i>tolnaftate</i>	DRUG ATTR CHANGE OVERRIDE	Medicaid Benefit Drug	Medicaid Benefit Drug
04/03/2024	STOOL SOFTENER	<i>docusate calcium</i>	DRUG ATTR CHANGE OVERRIDE	Medicaid Benefit Drug	Medicaid Benefit Drug
04/03/2024	BANOPHEN	<i>diphenhydramine hcl</i>	DRUG ATTR CHANGE OVERRIDE	Medicaid Benefit Drug	Medicaid Benefit Drug
04/03/2024	WEGOVY	<i>semaglutide</i>	UM AUTO RULE: SUM1		Medicaid Benefit Drug
04/03/2024	SENNALAXATIVE	<i>sennosides</i>	DRUG ATTR CHANGE OVERRIDE	Medicaid Benefit Drug	Medicaid Benefit Drug
04/03/2024	TAKE ACTION	<i>levonorgestrel</i>	DRUG ATTR CHANGE OVERRIDE	Medicaid Benefit Drug	Medicaid Benefit Drug

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UPHP MI HEALTH LINK Updates

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
04/03/2024	STOOL SOFTENER	<i>docusate sodium</i>	DRUG ATTR CHANGE OVERRIDE	Medicaid Benefit Drug	Medicaid Benefit Drug
04/03/2024	TRIPLE ANTIBIOTIC	<i>neomycin sulfate/bacitracin zinc/polymyxin b</i>	DRUG ATTR CHANGE OVERRIDE	Medicaid Benefit Drug	Medicaid Benefit Drug
04/03/2024	MINTOX MAXIMUM STRENGTH	<i>magnesium hydroxide/aluminum hydroxide/simethicone</i>	DRUG ATTR CHANGE OVERRIDE	Medicaid Benefit Drug	Medicaid Benefit Drug
04/03/2024	MAG-AL PLUS	<i>magnesium hydroxide/aluminum hydroxide/simethicone</i>	DRUG ATTR CHANGE OVERRIDE	Medicaid Benefit Drug	Medicaid Benefit Drug
04/03/2024	SILADRYL	<i>diphenhydramine hcl</i>	DRUG ATTR CHANGE OVERRIDE	Medicaid Benefit Drug	Medicaid Benefit Drug
04/03/2024	SENNALAX	<i>sennosides</i>	DRUG ATTR CHANGE OVERRIDE	Medicaid Benefit Drug	Medicaid Benefit Drug
04/03/2024	ANTACID	<i>calcium carbonate</i>	DRUG ATTR CHANGE OVERRIDE	Medicaid Benefit Drug	Medicaid Benefit Drug
04/03/2024	ATHLETE'S FOOT	<i>terbinafine hcl</i>	DRUG ATTR CHANGE OVERRIDE	Medicaid Benefit Drug	Medicaid Benefit Drug
04/03/2024	CHILDREN'S MAPAP	<i>acetaminophen</i>	DRUG ATTR CHANGE OVERRIDE	Medicaid Benefit Drug	Medicaid Benefit Drug
04/03/2024	LUBRICANT EYE DROP	<i>carboxymethylcellulose sodium</i>	DRUG ATTR CHANGE OVERRIDE	Medicaid Benefit Drug	Medicaid Benefit Drug
04/03/2024	3-DAY VAGINAL CREAM	<i>clotrimazole</i>	DRUG ATTR CHANGE OVERRIDE	Medicaid Benefit Drug	Medicaid Benefit Drug
04/03/2024	ENEMA	<i>sodium phosphate, monobasic/sodium phosphate, dibasic</i>	DRUG ATTR CHANGE OVERRIDE	Medicaid Benefit Drug	Medicaid Benefit Drug
04/03/2024	ANTI-DIARRHEAL	<i>loperamide hcl</i>	DRUG ATTR CHANGE OVERRIDE	Medicaid Benefit Drug	Medicaid Benefit Drug
04/03/2024	PHARBETOL	<i>acetaminophen</i>	DRUG ATTR CHANGE OVERRIDE	Medicaid Benefit Drug	Medicaid Benefit Drug

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UPHP MI HEALTH LINK Updates

May, 2024

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
05/01/2024	XOLAIR	<i>omalizumab</i>	NEW AUTO RULE		Brands
05/01/2024	<i>omnipod 5 g6-g7 pods (gen 5)</i>	<i>insulin pump cartridge, subcut automated dosing, bt, g6/g7</i>	NEW AUTO RULE		Brands
05/01/2024	<i>vancomycin hcl-d5w</i>	<i>vancomycin in 5 % dextrose in water</i>	NEW AUTO RULE		Generics
05/01/2024	EFUDEX	<i>fluorouracil</i>	NEW AUTO RULE		Brands
05/01/2024	<i>omnipod 5 g6-g7 intro kt(gen5)</i>	<i>insulin pump cart, automated dosing, bt, g6/g7 with controller</i>	NEW AUTO RULE		Brands
05/01/2024	<i>omnipod 5 dexg7g6 pods (gen 5)</i>	<i>insulin pump cartridge, subcut automated dosing, bt, g6/g7</i>	NEW AUTO RULE		Brands
05/01/2024	JENTADUETO	<i>linagliptin/metformin hcl</i>	NEW AUTO RULE		Brands
05/25/2024	<i>banophen</i>	<i>diphenhydramine hcl</i>	DRUG ATTR CHANGE OVERRIDE	Medicaid Benefit Drug	Medicaid Benefit Drug
05/25/2024	LYTGOBI	<i>futibatinib</i>	DRUG ATTR CHANGE OVERRIDE	Self - Administered Oncology PA	Self - Administered Oncology PA

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UPHP MI HEALTH LINK Updates

June, 2024

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
06/01/2024	<i>unifine safecontrol pen needle</i>	<i>pen needle, diabetic</i>	NEW AUTO RULE		Brands
06/01/2024	<i>techlite plus pen needle</i>	<i>pen needle, diabetic</i>	NEW AUTO RULE		Brands
06/01/2024	<i>emzahh</i>	<i>norethindrone</i>	NEW AUTO RULE		Generics
06/01/2024	<i>advocate pen needle</i>	<i>pen needle, diabetic</i>	NEW AUTO RULE		Brands
06/01/2024	OGSIVEO	<i>nirogacestat hydrobromide</i>	NEW AUTO RULE		Brands
06/01/2024	<i>doxycycline ir-dr</i>	<i>doxycycline monohydrate</i>	NEW AUTO RULE		Generics

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UPHP MI HEALTH LINK Updates

July, 2024

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
07/01/2024	MOUNJARO	<i>tirzepatide</i>	NEW AUTO RULE		Brands
07/01/2024	XCOPRI	<i>cenobamate</i>	NEW AUTO RULE		Brands
07/01/2024	AUSTEDO XR	<i>deutetrabenazine</i>	NEW AUTO RULE		Brands
07/01/2024	HADLIMA PUSHTOUCH	<i>adalimumab-bwwd</i>	NEW AUTO RULE		Brands
07/01/2024	CYLTEZO(CF)	<i>adalimumab-adbm</i>	NEW AUTO RULE		Brands
07/01/2024	EXTENCILLINE	<i>penicillin g benzathine</i>	NEW AUTO RULE		Brands
07/01/2024	LILETTA	<i>levonorgestrel</i>	NEW AUTO RULE		Brands
07/01/2024	OJEMDA	<i>tovorafenib</i>	NEW AUTO RULE		Brands
07/01/2024	<i>yargesa</i>	<i>miglustat</i>	NEW AUTO RULE		Generics
07/01/2024	CYLTEZO(CF) PEN PSORIASIS-UV	<i>adalimumab-adbm</i>	NEW AUTO RULE		Brands
07/01/2024	HADLIMA(CF) PUSHTOUCH	<i>adalimumab-bwwd</i>	NEW AUTO RULE		Brands
07/01/2024	AUSTEDO	<i>deutetrabenazine</i>	NEW AUTO RULE		Brands
07/01/2024	CYLTEZO(CF) PEN CROHN'S- UC-HS	<i>adalimumab-adbm</i>	NEW AUTO RULE		Brands
07/01/2024	AUSTEDO XR TITRATION KT(WK1-4)	<i>deutetrabenazine</i>	NEW AUTO RULE		Brands
07/01/2024	CYLTEZO(CF) PEN	<i>adalimumab-adbm</i>	NEW AUTO RULE		Brands
07/01/2024	HADLIMA(CF)	<i>adalimumab-bwwd</i>	NEW AUTO RULE		Brands
07/01/2024	HADLIMA	<i>adalimumab-bwwd</i>	NEW AUTO RULE		Brands

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UPHP MI HEALTH LINK Updates

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
07/01/2024	SKYLA	<i>levonorgestrel</i>	NEW AUTO RULE		Brands
07/01/2024	KESIMPTA PEN	<i>ofatumumab</i>	NEW AUTO RULE		Brands
07/01/2024	<i>eribulin mesylate</i>	<i>eribulin mesylate</i>	NEW AUTO RULE		Generics
07/01/2024	HUMATIN	<i>paromomycin sulfate</i>	NEW AUTO RULE		Brands
07/01/2024	FASENRA	<i>benralizumab</i>	NEW AUTO RULE		Brands
07/01/2024	LIBERVANT	<i>diazepam</i>	NEW AUTO RULE		Brands
07/01/2024	LUMRYZ	<i>sodium oxybate</i>	NEW AUTO RULE		Brands

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UPHP MI HEALTH LINK Updates

August, 2024

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
08/01/2024	AUSTEDO XR	<i>deutetrabenazine</i>	NEW AUTO RULE		Brands
08/01/2024	MRESVIA	<i>respiratory syncytial virus vaccine, pref protein, mrna/pf</i>	NEW AUTO RULE		Brands
08/01/2024	<i>tridacaine ii</i>	<i>lidocaine</i>	ADD UM: AUTHORIZATION		Lidocaine Topical PA - Lidocaine Patch
08/01/2024	<i>torpenz</i>	<i>everolimus</i>	NEW AUTO RULE		Generics
08/01/2024	MYHIBBIN	<i>mycophenolate mofetil</i>	NEW AUTO RULE		Brands
08/01/2024	<i>tridacaine ii</i>	<i>lidocaine</i>	NEW AUTO RULE		Generics

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UPHP MI HEALTH LINK Updates

September, 2024

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
09/01/2024	<i>l-glutamine</i>	<i>glutamine</i>	NEW AUTO RULE		Generics
09/01/2024	ACTHAR SELFJECT	<i>corticotropin</i>	NEW AUTO RULE		Brands
09/01/2024	AUSTEDO XR	<i>deutetrabenazine</i>	NEW AUTO RULE		Brands
09/01/2024	<i>kionex</i>	<i>sodium polystyrene sulfonate/sorbitol solution</i>	NEW AUTO RULE		Generics
09/01/2024	ENTRESTO SPRINKLE	<i>sacubitril/valsartan</i>	NEW AUTO RULE		Brands
09/01/2024	<i>ivabradine hcl</i>	<i>ivabradine hcl</i>	NEW AUTO RULE		Generics
09/01/2024	SCEMBLIX	<i>asciminib hydrochloride</i>	NEW AUTO RULE		Brands
09/28/2024	<i>calcium antacid</i>	<i>calcium carbonate</i>	DRUG ATTR CHANGE OVERRIDE	Medicaid Benefit Drug	Medicaid Benefit Drug
09/28/2024	<i>insulin syringe</i>	<i>syringe with needle,insulin,0.5 ml</i>	DRUG ATTR CHANGE OVERRIDE	Brands	Brands
09/28/2024	<i>insulin syringe</i>	<i>syringe with needle,disposable,insulin 1 ml</i>	DRUG ATTR CHANGE OVERRIDE	Brands	Brands

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UPHP MI HEALTH LINK Updates

October, 2024

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
10/01/2024	VORANIGO	<i>vorasidenib citrate</i>	ADD UM: AUTHORIZATION		Self - Administered Oncology PA
10/01/2024	<i>lentocilin s</i>	<i>penicillin g benzathine</i>	NEW AUTO RULE		Generics
10/01/2024	DRIZALMA SPRINKLE	<i>duloxetine hcl</i>	NEW AUTO RULE		Brands
10/01/2024	RETEVMO	<i>selpercatinib</i>	NEW AUTO RULE		Brands
10/01/2024	DULERA	<i>mometasone furoate/formoterol fumarate</i>	UM AUTO RULE: QUANTITY		39 / 30 DAYS
10/01/2024	<i>tridacaine ii</i>	<i>lidocaine</i>	NEW AUTO RULE		Generics
10/01/2024	ACTHAR SELFJECT	<i>corticotropin</i>	NEW AUTO RULE		Brands
10/01/2024	ERVEBO (NATIONAL STOCKPILE)	<i>ebola (zaire) recombinant vaccine, live, vero cell/pf</i>	NEW AUTO RULE		Brands
10/01/2024	<i>budesonide-formoterol fumarate</i>	<i>budesonide/formoterol fumarate</i>	UM AUTO RULE: QUANTITY		30.9 / 30 DAYS
10/01/2024	OTEZLA	<i>apremilast</i>	NEW AUTO RULE		Brands
10/01/2024	VORANIGO	<i>vorasidenib citrate</i>	NEW AUTO RULE		Brands
10/01/2024	<i>micafungin-0.9% nacl</i>	<i>micafungin sodium in 0.9 % sodium chloride</i>	NEW AUTO RULE		Generics
10/01/2024	ENTRESTO SPRINKLE	<i>sacubitril/valsartan</i>	NEW AUTO RULE		Brands
10/01/2024	<i>l-glutamine</i>	<i>glutamine</i>	NEW AUTO RULE		Generics
10/01/2024	<i>ivabradine hcl</i>	<i>ivabradine hcl</i>	NEW AUTO RULE		Generics
10/01/2024	<i>torpenz</i>	<i>everolimus</i>	NEW AUTO RULE		Generics

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UPHP MI HEALTH LINK Updates

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
10/01/2024	LAZCLUZE	<i>lazertinib mesylate</i>	NEW AUTO RULE		Brands
10/01/2024	VIGAFYDE	<i>vigabatrin</i>	NEW AUTO RULE		Brands
10/01/2024	<i>breynd</i>	<i>budesonide/formoterol fumarate</i>	UM AUTO RULE: QUANTITY		30.9 / 30 DAYS
10/06/2024	<i>omnipod 5 dexg7g6 intro(gen 5)</i>	<i>insulin pump cart,automated dosing,bt,g6/g7 with controller</i>	DRUG ATTR CHANGE OVERRIDE	Brands	Brands
10/06/2024	<i>omnipod 5 dexg7g6 pods (gen 5)</i>	<i>insulin pump cartridge,subcut automated dosing,bt,g6/g7</i>	DRUG ATTR CHANGE OVERRIDE	Brands	Brands

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UPHP MI HEALTH LINK Updates

November, 2024

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
11/01/2024	<i>dasatinib</i>	<i>dasatinib</i>	NEW AUTO RULE		Generics
11/01/2024	<i>tazarotene</i>	<i>tazarotene</i>	NEW AUTO RULE		Generics
11/01/2024	TREMFYA PEN	<i>guselkumab</i>	NEW AUTO RULE		Brands
11/01/2024	TREMFYA	<i>guselkumab</i>	NEW AUTO RULE		Brands
11/01/2024	AUSTEDO XR TITRATION KT(WK1-4)	<i>deutetrabenazine</i>	NEW AUTO RULE		Brands
11/01/2024	VAXCHORA VACCINE	<i>cholera vaccine, live</i>	NEW AUTO RULE		Brands
11/01/2024	MRESVIA	<i>respiratory syncytial virus vaccine, pref protein, mrna/pf</i>	UM AUTO RULE: SUM1		\$0 Copayment
11/02/2024	<i>lactulose</i>	<i>lactulose</i>	DRUG ATTR CHANGE OVERRIDE	Generics	Generics
11/09/2024	<i>nicorette</i>	<i>nicotine polacrilex</i>	DRUG ATTR CHANGE OVERRIDE	Medicaid Benefit Drug	Medicaid Benefit Drug
11/23/2024	<i>ultiguard safepack-pen needle</i>	<i>pen needle, diabetic, remover and disposal unit</i>	DRUG ATTR CHANGE OVERRIDE	Brands	Brands
11/30/2024	<i>insulin syringe</i>	<i>syringe with needle,insulin,0.5 ml</i>	DRUG ATTR CHANGE OVERRIDE	Brands	Brands

BRAND-NAME DRUGS are CAPITALIZED. *Generic drugs are lower-case italics.*

UPHP MI HEALTH LINK Updates

December, 2024

Effective Date	Brand Name	Generic Name	Type of Change	Previous Value	New Value
12/01/2024	<i>octreotide acetate er</i>	<i>octreotide acetate, microspheres</i>	NEW AUTO RULE		Generics
12/01/2024	<i>omnipod 5 (g6/libre 2 plus)</i>	<i>insulin pump cartridge, subcut automated dosing, bt, g6/l2</i>	NEW AUTO RULE		Brands
12/01/2024	TREMFYA	<i>guselkumab</i>	NEW AUTO RULE		Brands
12/01/2024	RINVOQ LQ	<i>upadacitinib</i>	NEW AUTO RULE		Brands
12/01/2024	LUMRYZ STARTER PACK	<i>sodium oxybate</i>	NEW AUTO RULE		Brands
12/01/2024	<i>omnipod 5 intro (g6/libre2 plus)</i>	<i>insulin pump cart, automated dosing, bt, g6/l2 with controller</i>	NEW AUTO RULE		Brands
12/14/2024	<i>unifine pentips plus</i>	<i>pen needle, diabetic</i>	DRUG ATTR CHANGE OVERRIDE	Brands	Brands

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