

**An Important Message from
The Texas Health and Human Services Commission (HHSC)**

**Change in PDL Status for the Antiemetic-Antivertigo Agents,
Drug Class, Effective Jan. 15, 2025**

Background:

Texas Medicaid is aware of the distribution delays for brand name Transderm-Scopolamine Patches in the Antiemetic-Antivertigo Agents drug class.

Key Details:

In response to the distribution delays for patch products with the preferred brand name Transderm-Scopolamine, VDP removed the non-preferred status from the generic scopolamine patch products on the preferred drug list (PDL) effective Jan. 15, 2025.

Providers can prescribe the generic scopolamine patches without requiring a PDL prior authorization, allowing clients to continue accessing necessary medication.

The following table lists the generic scopolamine products with their National Drug Codes (NDCs). This change will appear in the daily formulary file for MCOs as of Jan. 16, 2025.

NDC	Drug Name
00378647044	SCOPOLAMINE 1 MG/3 DAY PATCH
00378647097	SCOPOLAMINE 1 MG/3 DAY PATCH
00378647099	SCOPOLAMINE 1 MG/3 DAY PATCH
00591225804	SCOPOLAMINE 1 MG/3 DAY PATCH
00591225823	SCOPOLAMINE 1 MG/3 DAY PATCH
00591225879	SCOPOLAMINE 1 MG/3 DAY PATCH
45802058046	SCOPOLAMINE 1 MG/3 DAY PATCH
45802058062	SCOPOLAMINE 1 MG/3 DAY PATCH
45802058084	SCOPOLAMINE 1 MG/3 DAY PATCH
50742050504	SCOPOLAMINE 1 MG/3 DAY PATCH
50742050510	SCOPOLAMINE 1 MG/3 DAY PATCH
50742050524	SCOPOLAMINE 1 MG/3 DAY PATCH

Action:

MCOs must make this change **by Jan. 22, 2025**.

Questions?

Please contact UnitedHealthcare Customer Service at 888-887-9003, 8 a.m.–6 p.m. CT, Monday–Friday.