



Missouri Pharmacy Program – Preferred Drug List



Non-Ergot Dopamine Receptor Agonists

Effective 12/26/2007

Revised 07/02/2009

Preferred Agents

- Mirapex®
- Ropinirole
- Requip XL

Non-Preferred Agents

- Neupro®
- Requip®

<u>Approval Criteria</u>	<u>Denial Criteria</u>
Failure to achieve desired therapeutic outcomes with documented trial period for 2 or more preferred agents.	Lack of adequate trial on required preferred agents.
Documented trial period for preferred agents	Therapy will be denied if no approval criteria are met
Documented ADE/ADR to preferred agents.	
Documented compliance on current therapy regimen.	Drug Prior Authorization Hotline: (800) 392-8030