North Carolina Division of Medical Assistance
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## ALZHEIMER'S AGENTS

| Preferred | Non-Preferred |
|---|---|
| donepezil 5mg, 10mg tablets / ODT (generic for Aricept® / ODT) | Aricept® ODT / Tablets |
| Exelon® Patch | donepezil 23mg tablets (generic for Aricept®) |
| memantine tablet / titration pack (generic for Namenda®) | Exelon® Capsule |
| Namenda® Solution | galantamine ER capsule / solution / tablet (generic for Razadyne® / ER) |
| rivastigmine capsules (generic for Exelon®) | memantine solution (oral) (generic for Namenda® Solution) |
| | Namenda® Titration Pack / XR Capsule / XR Titration Pack |
| | Namenda® Tablet |
| | Namzaric™ Solution (Oral) |
| | rivastigmine (Transdserm) (generic for Exelon® Patch) |
| | Razadyne® ER Capsule / Tablet |

## ANALGESICS

### ~~NARCOTIC~~ OPIOID ANALGESICS

Long Acting

**Clinical criteria apply**

| Preferred | Non-Preferred |
|---|---|
| Butrans® Patch | Avinza® Capsule |
| Embeda® ER Capsule | Duragesic® Patch |
| fentanyl patch 12mcg / 25mcg / 50mcg / 75mcg / 100mcg (generic for Duragesic®) | Exalgo® Tablet |
| ~~Kadian® Capsule~~ | fentanyl patch (37.5. / 62.5 / 87.5mcg dosages) |
| morphine sulfate ER tablet (generic for MS Contin®) | hydromorphone ER tablet (generic for Exalgo®) |
| OxyContin® Tablet | Hysingla® ER Tablet |
| | Kadian® Capsule |
| | morphine sulfate ER capsule (generic for Avinza®, Kadian®) |
| | MorphaBond™ ER |
| | MS Contin® Tablet |
| | Nucynta® ER Tablet |
| | ~~Opana® ER Tablet~~ (Discontinued) |
| | oxycodone ER tablet (generic for OxyContin®) |
| | oxymorphone ER tablet (generic for **old formulation** of Opana® ER) |
| | Xartemis® XR Tablet |
| | Xtampza® ER Capsule |
| | Zohydro® Capsule |
| | Arymo® ER |

Orally Disintegrating / Oral Spray Schedule II ~~Narcotics~~ OPIOID

**Clinical criteria apply**

| Preferred | Non-Preferred |
|---|---|
| | fentanyl citrate lozenge (generic for Actiq®) |
| Actiq® Lozenge | Fentora® Buccal Tablet |
| ~~Fentora® Buccal Tablet~~ | Abstral® SL Tablet |
| | ~~Actiq® Lozenge~~ |
| | Belbuca (Buccal) |
| | Subsys® Spray |

## ANALGESICS

### ~~NARCOTIC~~ OPIOID ANALGESICS (Continued)

Short Acting Schedule II ~~Narcotics~~ OPIOID

**Clinical criteria apply**

| Preferred | Non-Preferred |
|---|---|
| Endocet® Tablet (branded generic for Percocet®) | codeine sulfate solution / tablet |
| hydrocodone-acetaminophen solution / tablet (generic for Hycet®, Lorcet®, Lortab®, Norco®, Vicodin®) | Demerol® Tablet |
| hydrocodone-ibuprofen tablet (generic for Ibudone®, Repraxin®, Vicoprofen®) | Dilaudid® Liquid / Tablet |
| hydromorphone tablet (generic for Dilaudid® Tablet) | Endodan® Tablet (branded generic for Percodan®) |

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| | |
|---|---|
| morphine solution / tablet (generic for MSIR®) | Hycet® Solution |
| ~~oxycodone concentrated solution (generic for Roxicodone® Intensol)~~ | hydromorphone solution / suppository (generic for Dilaudid®) |
| oxycodone solution / tablet (generic for Roxicodone®) | Ibudone® Tablet |
| oxycodone-acetaminophen capsules (generic for Tylox®) | Lazanda® Nasal Spray |
| oxycodone-acetaminophen tablets (generic for Percocet®) | levorphanol tablet (generic for Levo-Dromoran®) |
| Xylon® (branded generic for Repraxin®) | Lorcet® Tablet / HD Tablet / Plus Tablet |
| | Lortab® Tablet |
| | meperidine solution / tablet (generic for Demerol®) |
| | Meperitab® tablet (branded generic for Demerol®) |
| | morphine suppositories (generic for Roxanol®) |
| | Norco® Tablet |
| | Nucynta® Tablet |
| | Opana® Tablet |
| | Oxecta® Tablet |
| | oxycodone/APAP suspension |
| | oxycodone-aspirin tablet (generic for Endodan®, Percodan®) |
| | oxycodone concentrated solution (generic for Roxicodone® Intensol) |
| | oxycodone-ibuprofen tablet (generic for Combunox®) |
| | oxymorphone tablet (generic for Opana®) |
| | oxycodone capsule (generic for OxyIR®) |
| | Percocet® Tablet |
| | Percodan® Tablet |
| | Primlev® Tablet |
| | Reprexain® Tablet |
| | Roxicet® Solution |
| | Roxicodone® Tablet |
| | Vicodin® Tablet / ES Tablet / HP Tablet |
| | Vicoprofen® Tablet |
| | Xodol® Tablet |
| | Zamicet® Solution |

## ANALGESICS

### ~~NARCOTIC~~ OPIOID ANALGESICS (Continued)

### Short Acting Schedule III – IV Analgesic Combinations

| Preferred | Non-Preferred |
|---|---|
| codeine-acetaminophen solution / tablet (generic for Tylenol with Codeine®) | Ascomp® Capsule (branded generic for Fiorinal with Codeine®) |
| tramadol tablet (generic for Ultram®) | butalbital compound with codeine capsule (generic for Fiorinal with Codeine®) |
| tramadol-acetaminophen tablet (generic for Ultracet®) | butalbital-caffeine-APAP with codeine tablet (generic for Fioricet with Codeine®) |
| | butorphanol spray (generic for Stadol®) |
| | Capital® with Codeine Suspension |
| | ~~carisoprodol compound with codeine tablet (generic for Soma® Compound with Codeine)~~ |
| | Conzip® Capsule |
| | dihydrocodeine-acetaminophen-caffeine tablet (generic for Panlor SS®) |
| | dihydrocodeine-aspirin-caffeine capsule (generic for Synalgos-DC®) |
| | Fioricet® with Codeine Capsule |
| | Fiorinal® with Codeine Capsule |
| | pentazocine-naloxone tablet (generic for Talwin NX®) |
| | Synalgos-DC® Capsule |
| | tramadol ER tablet (generic for Ultram ER®, Ryzolt®) |
| | Tylenol® with Codeine Tablet |
| | Ultracet® Tablet |
| | Ultram® Tablet / ER Tablet |

## ANALGESICS

### NSAIDS

| Preferred | Non-Preferred |
|---|---|

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| | |
|---|---|
| ibuprofen suspension / tablet (generic for Motrin®) | Anaprox® Tablet / DS Tablet |
| indomethacin capsule (generic for Indocin®) | Arthrotec® Tablet |
| ketorolac tablet (generic for Toradol®) | DayPro® Caplet |
| meloxicam tablet (generic for Mobic Tablet®) | diclofenac potassium tablet (generic for Cataflam®) |
| naproxen EC tablet (generic for Naprosyn® EC) | diclofenac sodium tablet / ER tablet (generic for Voltaren® / XR) |
| naproxen tablet (generic for Naprosyn® Tablet) | diclofenac sodium-misoprostol tablet (generic for Arthrotec®) |
| sulindac tablet (generic for Clinoril®) | diflunisal tablet (generic for Dolobid®) |
| | EC-Naprosyn® Tablet |
| | etodolac capsule / tablet / ER tablet(generic for Lodine® / XL) |
| | Feldene® Capsule |
| | fenoprofen tablet (generic for Nalfon®) |
| | flurbiprofen tablet (generic for Ansaid®) |
| | Indocin® Suppository / Suspension |
| | indomethacin ER capsule (generic for Indocin SR®) |
| | Inflammacin ® tablets |
| | ketoprofen capsule (generic for Orudis®) |
| | ketoprofen ER capsule (generic for Oruvail®) |
| | meclofenamate capsule (generic for Meclomen®) |
| | mefenamic acid capsule (generic for Ponstel®) |
| | Mobic® Tablet |
| | nabumetone tablet (generic for Relafen®) |
| | Nalfon® Capsule |
| | Naprelan® Tablet |
| | Naprosyn® Tablet |
| | Naprosyn® EC |
| | naproxen CR |
| | naproxen sodium ER tablet (generic for Naprelan®) |
| | naproxen sodium tablet (generic for Anaprox®) |
| | naproxen suspension (generic for Naprosyn® Suspension) |
| | oxaprozin tablet (generic for DayPro®) |
| | piroxicam capsule (generic for Feldene®) |
| | Ponstel® Kapseals |
| | Sprix® Nasal Spray |
| | Tivorbex® capsule |
| | tolmetin capsule / tablet (generic for Tolectin®) |
| | Vivlodex™ |
| | Voltaren® XR Tablet |
| | Zipsor® Capsule |
| | Zorvolex® Capsule |
| | **Exemption for Children Under 12** |
| | meloxicam suspension (generic for Mobic® Oral Suspension) |
| | Mobic® Suspension |
| **Preferred** | **Non-Preferred** |
| **Clinical criteria apply to Brand and Generic** | |
| ~~Celebrex® Capsule~~ | ~~celecoxib capsule (generic for Celebrex®)~~ |
| celecoxib capsule (generic for Celebrex®) | Celebrex® Capsule |
| | Duexis® Tablet |

**ANALGESICS**

NEUROPATHIC PAIN

| **Preferred** | **Non-Preferred** |
|---|---|
| | **Clinical criteria apply to Lidoderm® and lidocaine patch** |
| duloxetine capsule (generic for Cymbalta®) | Cymbalta® Capsule |

| | |
|---|---|
| gabapentin capsule / solution (generic for Neurontin®) | Gralise® Starter Pack / Tablet<br>Horizant®<br>Irenka® Capsule<br>Lyrica® Capsule / Solution<br>Neurontin® Capsule / Solution / Tablet<br>Savella® Tablet / Titration Pack<br>Dermacin RX® PHN PAK<br>lidocaine patch (generic for Lidoderm®)<br>Lidoderm® Patch<br>Qutenza® Kit |

## ANTICONVULSANTS

### CARBAMAZEPINE DERIVATIVES

**Patients with seizure disorder are exempt and may use any carbamazepine product.**

| Preferred | Non-Preferred |
|---|---|
| Aptiom® Tablet | Carbatrol® Capsule |
| carbamazepine chewable (generic for Tegretol®) | carbamazepine suspension / tablet (generic for Tegretol®) |
| carbamazepine ER capsule (generic for Carbatrol®) | carbamazepine XR tablet (generic for Tegretol XR®) |
| ~~Carbatrol® Capsule~~ | Epitol® Tablet |
| Equetro® Capsule | ~~oxcarbazepine suspension (generic for Trileptal®)~~ |
| oxcarbazepine tablet / suspension (generic for Trileptal®) | Trileptal® Tablet / Suspension (oral) |
| Oxtellar® XR Tablet | |
| Tegretol® Suspension / Tablet / XR Tablet | |
| ~~Trileptal® Suspension~~ | |

### FIRST GENERATION

**Patients with seizure disorder are exempt and may use any first generation product.**

| Preferred | Non-Preferred |
|---|---|
| Celontin® Kapseal | Depakote® ER Tablet / Sprinkle Capsule |
| Depakene® Capsule / Solution | felbamate suspension / tablet (generic for Felbatol®) |
| Depakote® Tablet | Felbatol® Suspension / Tablet |
| Dilantin® Capsule / Infatab / Suspension | Valproate Syrup (oral) |
| divalproex capsule/ sprinkle / ER tablet / tablet(generic for Depakote® / ER) | |
| ethosuximide capsule / solution (generic for Zarontin®) | |
| ~~felbamate suspension / tablet (generic for Felbatol®)~~ | |
| Mysoline® Tablet | |
| Peganone® Tablet | |
| phenobarbital | |
| Phenytek® Capsule | |
| phenytoin chewable / capsules / infatab / suspension (generic for Dilantin®) | |
| phenytoin extended capsules (generic for Phenytek®) | |
| Primidone® Tablet | |
| valproic acid capsule / solution (generic for Depakene®) | |
| Zarontin® Capsule / Solution | |

## ANTICONVULSANTS

### SECOND GENERATION

**Patients with seizure disorder are exempt and may use any second generation product.**

| Preferred | Non-Preferred |
|---|---|
| clonazepam tablet (generic for Klonopin®) | Banzel® Suspension / Tablet |
| Diastat® Accudial / Pedi System | Briviact ® Tablet and Solution |
| gabapentin capsule / solution (generic for Neurontin®) | clonazepam ODT (generic for Klonopin® Wafer) |
| Gabitril® Tablet | diazepam rectal / system (generic for Diastat® Accudial / Pedi System) |
| lamotrigine chewable /~~ starter kits ~~/ tablet (generic for Lamictal®) | Fycompa® Tablet / Kit/Suspension |
| levetiracetam tablet / ER tablet / solution (generic for Keppra® / XR) | gabapentin tablet (generic for Neurontin® Tablet) |

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| | |
|---|---|
| Topiragen® Tablet (branded generic for Topamax®) | Gralise® Starter Pack / Tablet |
| topiramate sprinkle capsule / tablet (generic for Topamax®) | Keppra® Tablet / Solution / XR Tablet |
| zonisamide capsule (generic for Zonegran®) | Klonopin® Tablet |
| | Lamictal® Chewable / ODT / Starter Kit / Tablet / XR / XR Starter Kit / Tablet |
| | lamotrigine starter kits (generic for Lamictal®) |
| | lamotrigine ER tablet / ODT (generic for Lamictal® XR / ODT) |
| | Lyrica® Capsule / Solution |
| | Neurontin® Capsule / Solution / Tablet |
| | Onfi® Suspension / Tablet |
| | Potiga® Tablet |
| | Qudexy® XR Capsule |
| | Sabril® Powder Packet / Tablet |
| | Spritam ® Tablet |
| | tiagabine tablet (generic for Gabitril®) |
| | Topamax® Sprinkle Capsule / Tablet |
| | topiramate ER capsule (generic for Qudexy®) |
| | Trokendi® XR Capsule |
| | Vimpat® Solution / Starter Kit / Tablet |
| | Zonegran® Capsule |

## ANTI-INFECTIVES-SYSTEMIC

### ANTIBIOTICS

#### Cephalosporins and Related

| Preferred | Non-Preferred |
|---|---|
| amoxicillin capsule / chewable / suspension / tablet (generic for Amoxil®, Trimox®) | Augmentin® Suspension / Tablet / XR Tablet |
| amoxicillin-clavulanate chewable / suspension / tablet / XR tablet (generic for Augmentin® /XR) | Cedax® Capsule / Suspension |
| ~~Cedax® Capsule / Suspension~~ | cefaclor capsule / suspension / ER tablet (generic for Ceclor® / CD) |
| cefadroxil capsule / suspension / ~~tablet~~ (generic for Duricef®) | cefadroxil tablet (generic for Duricef®) |
| cefdinir capsule / suspension (generic for Omnicef®) | cefixime suspension |
| cefpodoxime suspension / tablet (generic for Vantin®) | ceftibuten capsule / suspension (generic for Cedax®) |
| cefprozil suspension / tablet (generic for Cefzil®) | Keflex® Capsule |
| Ceftin® Suspension / Tablet | |
| cefuroxime tablet (generic for Ceftin®) | |
| cephalexin capsule / suspension / tablet (generic for Keflex®) | |
| Suprax® Capsule / Chewable / Suspension/ Tablet | |

#### Lincosamides and Oxazolidinones

| Preferred | Non-Preferred |
|---|---|
| Cleocin® Granules | Cleocin® Capsules / Injection |
| clindamycin capsules / solution (generic for Cleocin®) | clindamycin injection (generic for Cleocin® Injection) |
| linezolid Tablet (generic for Zyvox®) | Lincocin® Vial |
| linezolid suspension (generic for Zyvox®) | lincomycin injection (generic for Lincocin Vial®) |
| ~~Zyvox® Suspension~~ | linezolid IV solution / ~~suspension~~ (generic for Zyvox®) |
| | Sivextro® Tablet / Vial |
| | Synercid® Vial |
| | Zyvox® IV Solution |
| | Zyvox® Tablet |
| | Zyvox® Suspension |

## ANTI-INFECTIVES-SYSTEMIC

### ANTIBIOTICS (Continued)

#### Macrolides and Ketolides

| Preferred | Non-Preferred |
|---|---|
| azithromycin powder packet / suspension / tablet (generic for Zithromax®) | Biaxin® Suspension / Tablet |
| clarithromycin suspension / tablet (generic for Biaxin®) | clarithromycin ER tablet (generic for Biaxin XL®) |

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| | |
|---|---|
| E.E.S.® Granules / Filmtab | Ery-Tab® Tablet |
| Eryped® Suspension | Ketek® Tablet |
| Erythrocin® Filmtab | PCE® Tablet |
| erythromycin EC capsule (generic for Ery-C®) | Zithromax® Powder Packet / Suspension / Tablet / Tri-Pak / Z-Pak |
| erythromycin filmtab | Zmax® Suspension |
| erythromycin es 200mg suspension (generic for E.E.S.® Suspension) | |
| erythromycin es tablet (E.E.S® Filmtab) | |

Nitromidazoles

| Preferred | Non-Preferred |
|---|---|
| metronidazole tablet (generic for Flagyl® Tablet) | Alinia® Suspension / Tablet |
| ~~Vancocin® Capsule~~ | Dificid® Tablet |
| vancomycin capsule (generic for Vancocin®) | Flagyl® Capsule / ER Tablet/ Tablet |
| | metronidazole capsule (generic for Flagyl® Capsule) |
| | neomycin tablet (generic for Mycifradin®) |
| | paromomycin capsule (generic for Humatin®) |
| | Tindamax® Tablet |
| | tinidazole tablet (generic for Tindamax®) |
| | ~~vancomycin capsule (generic for Vancocin®)~~ |
| | Vancocin® Capsule |
| | **Exemption for Diagnosis of Hepatic Encephalopathy** |
| | Xifaxan® Tablet |

Quinolones

| Preferred | Non-Preferred |
|---|---|
| Avelox® Tablet | Avelox® ABC Pack |
| Cipro® Suspension | Cipro® Tablet / XR Tablet |
| ciprofloxacin tablets (generic for Cipro®) | ciprofloxacin ER tablet / suspension (generic for Cipro® XR / Suspension) |
| levofloxacin tablet (generic for Levaquin® Tablet) | Levaquin® Solution / Tablet |
| | levofloxacin solution (generic for Levaquin® Solution) |
| | moxifloxacin tablet (generic for Avelox®) |
| | ofloxacin tablet (generic for Floxin®) |

## ANTI-INFECTIVES-SYSTEMIC

ANTIBIOTICS (Continued)

Tetracycline Derivatives

| Preferred | Non-Preferred |
|---|---|
| | **Clinical justification required and failure of doxycycline and minocycline. Solodyn ER® limited to 12 week supply.** |
| doxycycline hyclate capsule / tablet (generic for Vibramycin®, Vibra-Tab®) | Adoxa® Capsule |
| doxycycline monohydrate 50mg, 100mg capsule (generic for Monodox®) | demeclocycline tablet (generic for Declomycin®) |
| minocycline capsule (generic for Minocin®) | Doryx® DR Tablet |
| | Doryx ® MPC Tablet |
| | doxycycline hyclate DR tablet (generic for Doryx DR®) |
| | doxycycline monohydrate 75mg, 150mg capsule (generic for Monodox®, Adoxa®) |
| | doxycycline monohydrate 40mg capsules (generic for Oracea® Capsules) |
| | doxycycline monohydrate tablets (generic for Adoxa®) |
| | minocycline ER tablet (generic for Solodyn® ER) |
| | minocycline tablet (generic for Dynacin®) |
| | Morgidox® Capsule / Kit |
| | Oracea® Capsule |
| | Solodyn® ER Tablet |
| | tetracycline capsule (generic for Sumycin®) |
| | Vibramycin® Capsules |

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| | |
|---|---|
| | **Exemption for doxycycline liquid in patients < 12 years old** |
| | doxycycline suspension (generic for Vibramycin Suspension®) |
| | Vibramycin® Suspension / Syrup |

## Antifungals

| **Preferred** | **Non-Preferred** |
|---|---|
| clotrimazole troche (generic for Mycelex Troche®) | Ancobon® Capsule |
| fluconazole suspension / tablet (generic for Diflucan®) | Cresemba® Capsule |
| griseofulvin suspension (generic for Grifulvin V®) | Diflucan® Suspension / Tablet |
| griseofulvin ultra tablets (generic for Gris-Peg®) | flucytosine capsule (generic for Ancobon®) |
| Grifulvin V® Tablet | griseofulvin micro tablets (generic for Grifulvin V®) |
| nystatin suspension (generic for Nilstat® Suspension) | Gris-Peg® Tablet |
| nystatin tablet (generic for Mycostatin®) | itraconazole capsule (generic for Sporanox®) |
| terbinafine tablet (generic for Lamisil®) | ketoconazole tablet (generic for Nizoral®) |
| | Lamisil® Granules Packet / Tablet |
| | Noxafil® Suspension / Tablet |
| | Onmel® Tablet |
| | Oravig® Buccal Tablet |
| | Sporanox® Capsule / Solution |
| | Vfend® Suspension / Tablet |
| | voriconazole suspension / tablet (generic for Vfend®) |

## ANTIVIRALS

### Hepatitis B Agents

| **Preferred** | **Non-Preferred** |
|---|---|
| Baraclude® Solution / Suspension /~~ Tablet~~ | adefovir tablet (generic for Hepsera® ) |
| entecavir tablet (generic for Baraclude®) | Baraclude® Tablet |
| Epivir® HBV Solution / ~~Tablet~~ | Epivir® HBV Tablet |
| Hepsera® Tablet | ~~entecavir tablet (generic for Baraclude®)~~ |
| lamivudine HBV tablet (generic for Epivir® HBV) | ~~lamivudine HBV tablet (generic for Epivir® HBV)~~ |
| Tyzeka® Tablet | Vemlidy® tablet |
| Viread® Powder / Tablet | |

## ANTI-INFECTIVES-SYSTEMIC

## ANTIVIRALS (Continued)

### Hepatitis C Agents

| **Preferred** | **Non-Preferred** |
|---|---|
| Copegus® Tablet | Pegasys® Vial |
| Moderiba® Dosepack (branded generic for Ribasphere® Ribapak) | Ribasphere® Ribapak |
| Moderiba® Tablet (branded generic for Copegus®) | Ribasphere® Capsule / Tablet (branded generic for Rebatrol) |
| Pegasys® Proclick / Syringe | |
| ribavirin capsule / tablet (generic for Copegus®, Rebetol®) | |
| | **Clinical criteria apply** |
| Harvoni® Tablet | Daklinza® Tablet (for genotype 3) |
| Epclusa® Tablet (for genotype 2 and 3) | **(must request Sovaldi® in addition to Daklinza® with a separate PA)** |
| Technivie® Dose Pack (for genotype 4) | Epclusa® Tablet (for genotype 1,4,5 and 6) |
| Viekira® Pak | Olysio® Capsule |
| Viekira® XR Tablet | Sovaldi® Tablet |
| Zepatier® Tablet | |

### Herpes Treatments

| **Preferred** | **Non-Preferred** |
|---|---|
| acyclovir suspension (generic for Zovirax®) | ~~acyclovir suspension (generic for Zovirax®)~~ |
| acyclovir capsule / tablet (generic for Zovirax®) | Famvir® Tablet |

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| | |
|---|---|
| famciclovir tablet (generic for Famvir®) | Sitavig® Buccal Tablet |
| valacyclovir tablet (generic for Valtrex®) | Valtrex® Caplet |
| ~~Zovirax® Suspension~~ | Zovirax® Capsule / Tablet |
| | Zovirax® Suspension |

## Influenza

| Preferred | Non-Preferred |
|---|---|
| amantadine capsule / solution (generic for Symmetrel®) | amantadine tablet (generic for Symmetrel®) |
| rimantadine tablet (generic for Flumadine®) | Relenza® Diskhaler |
| Tamiflu® Capsule / Suspension | |

## Antibiotics, Inhaled

| Preferred | Non-Preferred |
|---|---|
| Kitabis™ Pak (tobramycin inhalation solution) | Cayston® |
| Bethkis® (tobramycin inhalation solution) | tobramycin solution / pak |
| | Tobi® |

## BEHAVIORAL HEALTH

### ANTIDEPRESSANTS

#### Other

| Preferred | Non-Preferred |
|---|---|
| bupropion tablet / SR tablet / XL tablet (generic for Wellbutrin® / SR / XL) | Aplenzin® Tablet |
| duloxetine capsule (generic for Cymbalta®) | Trintellix® Tablet |
| maprotiline tablet (generic for Ludiomil®) | Cymbalta® Capsule |
| mirtazapine ODT / tablet (generic for Remeron®) | desvenlafaxine ER tablet (generic for Khedezla®) |
| ~~Nardil® Tablet~~ | Effexor® XR Capsules |
| Parnate® Tablet | Emsam® Patch |
| phenelzine tablet (generic for Nardil®) | Fetzima® Capsule / Titration Pak |
| tranylcypromine tablet (generic for Parnate®) | Forfivo® XL Tablet |
| trazodone tablet (generic for Desyrel®) | Khedezla® |
| venlafaxine tablet / ER capsules (generic for Effexor®, Effexor® XR) | Marplan® |
| | Nardil® Tablet |
| | nefazodone tablet (generic for Serzone®) |
| | Oleptro® ER Tablet |
| | Pristiq® ER Tablet |
| | Remeron® Solutab / Tablet |
| | Savella® Tablet / Titration Pack |
| | venlafaxine ER tablets (generic for Effexor® ER) |
| | Viibryd® Starter Pack / Tablet |
| | Wellbutrin® Tablet / SR Tablet / XR Tablet |

## BEHAVIORAL HEALTH

### ANTIDEPRESSANTS (Continued)

#### Selective Serotonin Reuptake Inhibitor (SSRI)

| Preferred | Non-Preferred |
|---|---|
| citalopram solution / tablet (generic for Celexa®) | Brisdelle® Capsule |
| escitalopram tablet (generic for Lexapro® Tablet) | Celexa® Tablet |
| fluoxetine capsule / solution (generic for Prozac®) | escitalopram solution (generic for Lexapro® Solution) |
| fluvoxamine tablet (generic for Luvox®) | fluoxetine DR capsules (generic for Prozac® Weekly) |
| paroxetine tablet (generic for Paxil®) | fluoxetine tablet (generic for Prozac®) **(exemption for children under 12)** |
| sertraline concentrated solution / tablet (generic for Zoloft®) | fluvoxamine ER capsule (generic for Luvox CR®) |
| | Lexapro® Solution / Tablet |
| | paroxetine CR tablet (generic for Paxil CR®) |
| | Paxil® Suspension / Tablet / CR Tablet |
| | Pexeva® Tablet |
| | Prozac® Pulvule / Weekly Capsule |

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| | |
|---|---|
| | Sarafem® Tablet |
| | Zoloft® Solution / Tablet |

ANTIHYPERKINESIS/ ADHD

| Preferred | Non-Preferred |
|---|---|
| Aptensio® XR | Adderall® Tablet **<GENERIC PRODUCT PER FDA>** |
| Adderall® XR Capsule | amphetamine salt combo XR capsules (generic for Adderall XR) |
| amphetamine salt combo tablets (generic for Adderall®) | Adzenys® XR ODT |
| ~~clonidine ER tablet (generic Kapvay®)~~ | ~~Aptensio® XR~~ |
| Daytrana® Patch | clonidine ER tablet (generic for Kapvay®) |
| ~~Desoxyn® Tablet~~ | Concerta® Tablet |
| ~~dextroamphetamine ER capsule (generic for Dexedrine® Spansules)~~ | Dexedrine® Tablet / Spansules |
| dextroamphetamine tablet (generic for Dexedrine®) | dexmethylphenidate tablet / ER capsules (generic for Focalin® / XR) |
| Focalin® Tablet / XR Capsule | Desoxyn® Tablet |
| guanfacine ER tablet (generic for Intuniv®) | dextroamphetamine solution (generic for ProCentra®) |
| Kapvay® Tablet | dextroamphetamine ER capsule (generic for Dexedrine® Spansules) |
| ~~Metadate® CD Capsule / ER Tablet~~ (Discontinued per manufacturer) | Dyanavel® XR |
| Methylin® Solution | Evekeo® Tablet |
| ~~methylphenidate ER tablets - Actavis (generic for Concerta®)~~ | Intuniv® Tablet |
| ~~methylphenidate ER tablets - Kreamer Urban (NOT EQUIVALENT to Concerta®)~~ | methamphetamine tablet (generic for Desoxyn®) |
| ~~methylphenidate ER tablets - Mallinckrodt (NOT EQUIVALENT to Concerta®)~~ | Methylin® Chewable |
| ~~methylphenidate ER tablets (generic for Metadate® ER, Ritalin® SR)~~ | methylphenidate CD capsules (generic for Metadate® CD) |
| methylphenidate tablets (generic for Methylin®, Ritalin®) | methylphenidate chewable / solution (generic for Methylin®) |
| Quillichew® ER Oral | methylphenidate ER tablets |
| Quillivant® XR Suspension | methylphenidate LA capsules (generic for Ritalin® LA) |
| Ritalin® ~~LA Capsule~~ / Tablet | Ritalin® LA Capsule |
| Strattera® Capsule | ProCentra® Solution |
| Vyvanse® Capsule | ~~Quillichew® ER Oral~~ |
| | Vyvanse® Chewable Tablet |
| | Zenzedi® Tablet |

ATYPICAL ANTIPSYCHOTICS

Injectable Long Acting

**Trial and Failure of only 1 preferred required**

| Preferred | Non-Preferred |
|---|---|
| Abilify Maintena® Syringe / Vial | Aristada® Syringe |
| fluphenazine decanoate vial (generic for Prolixin decanoate®) | |
| Haldol® decanoate Ampule | |
| haloperidol decanoate ampule / vial (generic for Haldol decanoate®) | |
| Invega® Sustenna Prefilled Syringe / Trinza Syringe | |
| Risperdal® Consta Syringe | |
| Zyprexa® Relprevv Vial Kit | |

**BEHAVIORAL HEALTH**

ATYPICAL ANTIPSYCHOTICS

Oral

**Trial and Failure of only 1 preferred required**

| Preferred | Non-Preferred |
|---|---|
| Abilify® Discmelt | Abilify® Tablet |
| aripiprazole Tablet / Solution (generic for Abilify®) | aripiprazole ODT (generic for Abilify®) |
| clozapine ODT (generic for FazaClo®) | Clozaril® Tablet |
| clozapine tablet (generic for Clozaril®) | Fanapt® Titration Pack |
| ~~Fanapt® Tablet~~ | Fanapt® Tablet |
| Invega® Tablet | FazaClo® ODT |
| ~~Latuda® Tablet~~ | Geodon® Capsule |
| olanzapine ODT / tablet (generic for Zyprexa®) | Latuda® Tablet |

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| | |
|---|---|
| quetiapine tablet (generic for Seroquel®) | Nuplazid® Tablet |
| risperidone ODT / solution/tablet (generic for Risperdal®) | olanzapine-fluoxetine (generic for Symbyax®) |
| Saphris® SL Tablet | paliperidone (generic for Invega® Tablet) |
| Seroquel® XR Tablet | Risperdal® Solution / Tablet / M-Tab ODT |
| Symbyax® Capsule | Rexulti® Tablet |
| ziprasidone capsule (generic for Geodon®) | Seroquel® Tablet / XR Sample Kit |
| | Versacloz® Suspension |
| | Vraylar® Capsule |
| | Zyprexa® Tablet / Zydis Tablet |

## CARDIOVASCULAR

### ACE INHIBITORS

| Preferred | Non-Preferred |
|---|---|
| | **Exemption applies to children < 12 years old for Epaned® Solution** |
| benazepril tablet (generic for Lotensin®) | Accupril® Tablet |
| enalapril tablet (generic for Vasotec®) | Altace® Capsule |
| lisinopril tablet (generic for Prinivil® and Zestril®) | captopril tablet (generic for Capoten®) |
| ramipril capsule (generic for Altace®) | Epaned® Solution |
| | fosinopril tablet (generic for Monopril®) |
| | Lotensin® Tablet |
| | Mavik® Tablet |
| | moexipril tablet (generic for Univasc®) |
| | Qbrelis® Solution |
| | perindopril tablet (generic for Aceon®) |
| | Prinivil® Tablet |
| | quinapril tablet (generic for Accupril®) |
| | trandolapril tablet (generic for Mavik®) |
| | Univasc® Tablet |
| | Vasotec® Tablet |
| | Zestril® Tablet |

### ACE INHIBITOR CALCIUM CHANNEL BLOCKER COMBINATIONS

| Preferred | Non-Preferred |
|---|---|
| amlodipine-benazepril capsule (generic for Lotrel®) | Lotrel® Capsule |
| | Tarka® ER Tablet |
| | trandolapril-verapamil ER tablet (generic for Tarka®) |

### ACE INHIBITOR DIURETIC COMBINATIONS

| Preferred | Non-Preferred |
|---|---|
| ~~benazepril-HCTZ tablet (generic for Lotensin® HCT)~~ | Accuretic® Tablet |
| enalapril-HCTZ tablet (generic for Vaseretic®) | benazepril-HCTZ tablet (generic for Lotensin® HCT) |
| lisinopril-HCTZ tablet (generic for Prinzide®, Zestoretic®) | captopril-HCTZ tablet (generic for Capozide®) |
| | fosinopril-HCTZ tablet (generic for Monopril® HCT) |
| | Lotensin® HCT Tablet |
| | moexipril-HCTZ tablet (generic for Uniretic®) |
| | quinapril-HCTZ tablet (generic for Accuretic®, Quinaretic®) |
| | Vaseretic® Tablet |
| | Zestoretic® Tablet |

## CARDIOVASCULAR

### ANGIOTENSIN II RECEPTOR BLOCKERS

**Requires trial and failure of ACE Inhibitor unless contraindicated or adverse event, even when using a preferred product**

| Preferred | Non-Preferred |
|---|---|
| Diovan® Tablet | Atacand® Tablet |
| losartan tablet (generic for Cozaar®) | Avapro® Tablet |
| | Benicar® Tablet |

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| | |
|---|---|
| | candesartan tablet (generic for Atacand®)<br>Cozaar® Tablet<br>Edarbi® Tablet<br>eprosartan tablet (generic for Teveten®)<br>irbesartan tablet (generic for Avapro®)<br>Micardis® Tablet<br>telmisartan tablet (generic for Micardis®)<br>valsartan tablet (generic for Diovan®) |

ANGIOTENSIN II RECEPTOR BLOCKER COMBINATIONS

**Requires trial and failure of ACE Inhibitor unless contraindicated or adverse event, even when using a preferred product**

| **Preferred** | **Non-Preferred** |
|---|---|
| | amlodipine/olmesartan tablet (generic for Azor®) |
| Exforge® Tablet | amlodipine-valsartan tablet (generic for Exforge®) |
| Exforge® HCT Tablet | amlodipine-valsartan-HCTZ tablet (generic for Exforge® HCT) |
| | Azor® Tablet |
| | Prestalia® |
| | telmisartan-amlodipine tablet (generic for Twynsta®) |
| | Tribenzor® Tablet |
| | Twynsta® Tablet |

ANGIOTENSIN II RECEPTOR BLOCKER DIURETIC COMBINATIONS

**Requires trial and failure of ACE Inhibitor unless contraindicated or adverse event, even when using a preferred product**

| **Preferred** | **Non-Preferred** |
|---|---|
| losartan-HCTZ tablet (generic for Hyzaar®) | Atacand® HCT Tablet |
| valsartan-HCTZ tablet (generic for Diovan® HCT) | Avalide® Tablet |
| | Benicar® HCT Tablet |
| | candesartan-HCTZ tablet (generic for Atacand® HCT) |
| | Diovan® HCT Tablet |
| | Edarbyclor® Tablet |
| | Hyzaar® Tablet |
| | irbesartan-HCTZ tablet (generic for Avalide®) |
| | Micardis® HCT Tablet |
| | telmisartan-HCTZ tablet (generic for Micardis® HCT) |
| | Teveten® HCT Tablet |

ANGIOTENSIN II RECEPTOR-NEPRILYSIN BLOCKER COMBINATIONS

| **Preferred** | **Non-Preferred** |
|---|---|
| Entresto® **Clinical Criteria Apply** | |

ANTI-ARRHYTHMICS

| **Preferred** | **Non-Preferred** |
|---|---|
| amiodarone tablet (generic for Cordarone®) | Cordarone® Tablet |
| disopyramide capsule (generic for Norpace®) | dofetilide capsule (generic for Tikosyn®) |
| flecainide tablet (generic for Tambocor®) | Multaq® Tablet |
| mexiletine capsule (generic for Mexitil®) | Norpace® Capsule / CR Capsule |
| propafenone tablet (generic for Rythmol®) | Pacerone® Tablet |
| quinidine sulfate tablet / ER tablet (generic for Quinidex® Extentabs / Tablet) | propafenone SR capsule (generic for Rythmol SR®) |
| Rythmol SR® Capsule | quinidine gluconate tablet (generic for Quinaglute DuraTabs®) |
| | Rythmol® Tablet |
| | Tikosyn® Capsule |

## CARDIOVASCULAR

BETA BLOCKERS

| **Preferred** | **Non-Preferred** |
|---|---|
| atenolol tablet (generic for Tenormin®) | acebutolol capsule (generic for Sectral®) |

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| | |
|---|---|
| carvedilol tablet (generic for Coreg®) | Betapace® AF Tablet / Tablet |
| labetalol tablet (generic for Trandate®) | betaxolol tablet (generic for Kerlone®) |
| metoprolol succinate XL tablet (generic for Toprol XL®) | bisoprolol tablet (generic for Zebeta®) |
| metoprolol tartrate tablet (generic for Lopressor®) | Bystolic® Tablet |
| propranolol solution / tablet / ER capsule (generic for Inderal®) | Coreg® Tablet / CR Capsule |
| Sorine® Tablet | Corgard® Tablet |
| sotalol AF tablet / tablet (generic for Betapace® / AF, Sorine®) | Hemangeol® Solution |
| | Inderal® LA Capsule / XL Capsule |
| | Innopran® XL Capsule |
| | Levatol® Tablet |
| | Lopressor® Tablet |
| | nadolol tablet (generic for Corgard®) |
| | pindolol tablet (generic for Visken®) |
| | Sectral® Capsule |
| | Sotylize® Solution |
| | Tenormin® Tablet |
| | timolol tablet (generic for Blocadren®) |
| | Toprol XL® Tablet |
| | Trandate® Tablet |
| | Zebeta® Tablet |

BETA BLOCKER DIURETIC COMBINATION

| **Preferred** | **Non-Preferred** |
|---|---|
| atenolol-chlorthalidone tablet (generic for Tenoretic®) | Corzide® Tablet |
| bisoprolol-HCTZ tablet (generic for Ziac®) | Dutoprol® Tablet |
| ~~metoprolol-HCTZ tablet (generic for Lopressor® HCT)~~ | Lopressor® HCT Tablet |
| ~~propranolol-HCTZ tablet (generic for Inderide®)~~ | metoprolol-HCTZ tablet (generic for Lopressor® HCT) |
| | propranolol-HCTZ tablet (generic for Inderide®) |
| | nadolol-bendroflumethiazide (generic for Corzide®) |
| | Tenoretic® Tablet |
| | Ziac® Tablet |

BILE ACID SEQUESTRANTS

| **Preferred** | **Non-Preferred** |
|---|---|
| cholestyramine light packet / light powder / packet / powder (generic for Questran® / Light) | colestipol granules (generic for Colestid® Granules) |
| colestipol tablet (generic for Colestid® Tablet) | Colestid® Granules / Tablet |
| | Prevalite® Packet / Powder |
| | Questran® Light Powder / Packet / Powder |
| | Welchol® Packet / Tablet |

**CARDIOVASCULAR**

CHOLESTEROL LOWERING AGENTS

| **Preferred** | Non-Preferred |
|---|---|
| atorvastatin tablet (generic for Lipitor®) | Altoprev® Tablet |
| lovastatin tablet (generic for Mevacor®) | amlodipine-atorvastatin tablet (generic for Caduet®) |
| pravastatin tablet (generic for Pravachol®) | Caduet® Tablet |
| simvastatin tablet (generic for Zocor®) | Crestor® Tablet |
| rosuvastatin tablet (generic for Crestor®) | ezetimibe (generic for Zetia®) |
| | fluvastatin capsule / ER tablet (generic for Lescol® / XL) |
| | Lescol® Capsule / XL Tablet |
| | Lipitor® Tablet |
| | Livalo® Tablet |
| | Pravachol® Tablet |
| | ~~rosuvastatin tablet (generic for Crestor®) (NR)~~ |
| | Vytorin® Tablet |
| | Zetia® Tablet |

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| | |
|---|---|
| | Zocor® Tablet<br><br>**Clinical criteria apply**<br>Juxtapid® Capsule<br>Kynamro® Syringe |

CORONARY VASODILATORS

| Preferred | Non-Preferred |
|---|---|
| isosorbide dinitrate tablet / ER (generic for Isordil Titradose®, IsoDitrate®, et.al.) | Dilatrate® SR Capsule |
| isosorbide mononitrate tablet / ER tablet (generic for Ismo®, Monoket®, Imdur®) | Gonitro® Sublingual Powder |
| Minitran® Patch | Isordil® Tablet / Titradose Tablet |
| nitroglycerin ER capsules / patches / spray / sublingual (generic for Nitro-Dur®, Minitran®, Nitrostat®, Nitrolingual®, Nitromist®) | Nitro-Bid® Ointment |
| Nitrostat® SL Tablet | Nitro-Dur® Patch |
| | Nitrolingual® Spray |
| | Nitromist® Spray |

DIHYDROPYRIDINE CALCIUM CHANNEL BLOCKERS

| Preferred | Non-Preferred |
|---|---|
| Afeditab CR® Tablet (branded generic for Adalat CC®) | Adalat® CC Tablet |
| amlodipine tablet (generic for Norvasc®) | felodipine ER tablet (generic for Plendil®) |
| Nifedical® XL Tablet (branded generic for Procardia XL®) | isradipine capsule (generic for Dynacirc®) |
| nifedipine capsule (generic for Procardia®) | nicardipine capsule (generic for Cardene®) |
| nifedipine ER tablet (generic for Adalat CC® / Procardia XL®) | nimodipine capsule (generic for Nimotop®) |
| | nisoldipine ER tablet (generic for Sular®) |
| | Norvasc® Tablet |
| | Nymalize® Solution |
| | Procardia® Capsule / XL Tablet |
| | Sular® Tablet |

DIRECT RENIN INHIBITOR
**Requires trial and failure of ACE Inhibitor unless contraindicated or adverse event, even when using a preferred product**

| Preferred | Non-Preferred |
|---|---|
| Tekturna® HCT Tablet | |
| Tekturna® Tablet | |

ENDOTHELIN RECEPTOR ANTAGONISTS

| Preferred | Non-Preferred |
|---|---|
| Letairis® Tablet | Opsumit® Tablet |
| Tracleer® Tablet | |

## CARDIOVASCULAR

INHALED PROSTACYCLIN ANALOGS

| Preferred | Non-Preferred |
|---|---|
| Tyvaso® Refill Kit / Solution / Starter Kit | |
| Ventavis® Solution | |

NIACIN DERIVATIVES

| Preferred | Non-Preferred |
|---|---|
| ~~Niaspan® ER Tablet~~ | Niacor® Tablet |
| niacin ER tablet (generic for Niaspan®) | ~~niacin ER tablet (generic for Niaspan®)~~ |
| | Niaspan® ER Tablet |

NITRATE COMBINATION

| Preferred | Non-Preferred |
|---|---|
| Bidil® Tablet | |

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## NON-DIHYDROPYRIDINE CALCIUM CHANNEL BLOCKERS

| Preferred | Non-Preferred |
|---|---|
| Calan® Tablet | Calan SR® Caplet |
| Cartia XT® Capsule (branded generic for Cardizem CD®) | Cardizem CD® Capsule |
| Dilt XR® Capsule (branded generic for Dilacor XR®) | Cardizem® LA Tablet |
| diltiazem ER 24 hour capsule (generic for Dilacor XR®, Tiazac®) | Cardizem® Tablet |
| ~~diltiazem LA tablet (generic for Cardizem LA®)~~ | diltiazem LA tablet (generic for Cardizem LA®) |
| diltiazem tablet / CD capsules / ER 12 hour capsule (generic for Cardizem® / CD / SR) | Matzim® LA Tablet (generic for Cardizem LA®) |
| Taztia XT® Capsule (branded generic for Tiazac®) | Tiazac® Capsule |
| verapamil tablet / ER tablet (generic for Calan® / SR) | verapamil 360 mg capsule |
| ~~Verelan® PM Capsule~~ | verapamil ER capsules (generic for Verelan®) |
| | verapamil PM capsule (generic for Verelan PM®) |
| | Verelan® Capsule |
| | Verelan® PM Capsule |

## ORAL PULMONARY HYPERTENSION

| Preferred | Non-Preferred |
|---|---|
| Adcirca® Tablet | Adempas® Tablet |
| sildenafil (generic for Revatio®) tablet | Orenitram® ER Tablet |
| | Revatio® Suspension / Tablet |
| | Uptravi® Tablet |

## PLATELET INHIBITORS

| Preferred | Non-Preferred |
|---|---|
| Aggrenox® Capsule | aspirin/dipyridamole ER capsule (generic for Aggrenox®) |
| Brilinta® Tablet | Durlaza® Capsule |
| clopidogrel tablet (generic for Plavix®) | Persantine® Tablet |
| dipyridamole tablet (generic for Persantine®) | Plavix® Tablet |
| Effient® Tablet | ticlopidine tablet (generic for Ticlid®) |
| | Yosprala® Tablet |
| | Zontivity® Tablet |

## ANTIANGINAL & ANTI-ISCHEMIC

| Preferred | Non-Preferred |
|---|---|
| Ranexa® Tablet | Corlanor® Tablet |

# CARDIOVASCULAR

## SYMPATHOLYTICS AND COMBINATIONS

| Preferred | Non-Preferred |
|---|---|
| Catapres®-TTS Patch | Catapres® Tablet |
| clonidine tablets (generic for Catapres®) | clonidine patches (generic for Catapres®-TTS) |
| guanfacine tablet (generic for Tenex®) | Clorpres® Tablet (branded generic for Combipres®) |
| methyldopa tablet (generic for Aldomet®) | methyldopa-HCTZ tablet (generic for Aldoril®) |
| | methyldopate injection (generic for Aldomet® Injection) |
| | reserpine tablet (generic for Serpalan®) |
| | Tenex® Tablet |

## TRIGLYCERIDE LOWERING AGENTS

| Preferred | Non-Preferred |
|---|---|
| | **Exemption for use of Lovaza® or generic in patients with triglycerides ≥500mg/dl** |
| fenofibrate tablet (Tricor®) | |
| fenofibric acid capsule / tablet (Trilipix®) | |
| gemfibrozil tablet (generic for Lopid®) | Antara® Capsule |
| ~~Tricor® Tablet~~ | fenofibrate capsule / tablet (generic for Antara®, Lofibra®, ~~Tricor®~~) |

| | |
|---|---|
| ~~Trilipix® Capsule~~ | fenofibrate tablet (generic for Fenoglide®) |
| | fenofibric acid capsule / tablet (generic for Fibricor®, ~~Trilipix®~~) |
| | Fenoglide® Tablet |
| | Fibricor® Tablet |
| | Lipofen® Capsule |
| | Lofibra® Capsule / Tablet |
| | Lopid® Tablet |
| | Lovaza® Capsule |
| | omega-3 acid ethyl esters capsule (generic for Lovaza®) |
| | Tricor® Tablet |
| | Triglide® Tablet |
| | Trilipix® Capsule |
| | Vascepa® Capsule |

## CENTRAL NERVOUS SYSTEM

### ANTIMIGRAINE AGENTS

**Quantity limits apply to triptans**

| Preferred | Non-Preferred |
|---|---|
| rizatriptan ODT (generic for Maxalt MLT®) | Alsuma® Auto-Injection |
| rizatriptan tablet (generic for Maxalt®) | almotriptan tablet (generic for Axert®) |
| sumatriptan ~~cartridge~~ / injection / nasal spray / refill / syringe / tablet / vial (generic for Imitrex®) | Amerge® Tablet |
| | Axert® Tablet |
| | Cambia® Powder Packet |
| | frovatriptan tablet (generic for Frova®) |
| | Frova® Tablet |
| | Imitrex® Cartridges / Nasal Spray / Pen / Tablet / Vial |
| | Maxalt® Tablet / MLT Tablet |
| | Migranow® Kit |
| | naratriptan tablet (generic for Amerge®) |
| | Onzetra Xsail Nasal Powder® |
| | Relpax® Tablet |
| | sumatriptan kit (generic for Imitrex®) |
| | Sumavel DosePro® Syringe |
| | Treximet® Tablet |
| | Zecuity® Transdermal |
| | Zembrace® SymTouch® |
| | zolmitriptan ODT / tablet (generic for Zomig®) |
| | Zomig® Nasal Spray / Tablet / ZMT Tablet |

### ANTINARCOLEPSY

**Clinical criteria apply**

| Preferred | Non-Preferred |
|---|---|
| Nuvigil® Tablet | armodafinil tablet (generic for Nuvigil®) |
| Provigil® Tablet | modafinil tablet (generic for Provigil®) |
| | ~~Nuvigil® Tablet~~ |

## CENTRAL NERVOUS SYSTEM

### ANTIPARKINSON AND RESTLESS LEG SYNDROME AGENTS

| Preferred | Non-Preferred |
|---|---|
| benztropine tablet (generic for Cogentin®) | Azilect® Tablet |
| bromocriptine tablet (generic for Parlodel®) | carbidopa tablet (generic for Lodosyn®) |
| carbidopa-levodopa ODT (generic for Parcopa®) | carbidopa-levodopa-entacapone tablet (generic for Stalevo®) |
| carbidopa-levodopa tablet / ER tablet (generic for Sinemet® / CR) | Comtan® Tablet |
| pramipexole tablet (generic for Mirapex®) | Duopa® Suspension |
| ropinirole tablet (generic for Requip®) | entacapone tablet (generic for Comtan®) |

| | |
|---|---|
| selegiline capsule / tablet (generic for Emsam®) | Horizant® |
| trihexyphenidyl elixir / tablet (generic for Artane®) | Lodosyn® Tablet |
| | Mirapex® Tablet / ER Tablet |
| | Neupro® Patch |
| | Parlodel® Capsule / Tablet |
| | pramipexole ER tablet (generic for Mirapex ER®) |
| | rasagiline (generic for Azilect®) |
| | Requip® Tablet / XL Tablet |
| | ropinirole ER tablet (generic for Requip XL®) |
| | Rytary® ER Capsule |
| | Sinemet® Tablet / CR Tablet |
| | Stalevo® Tablet |
| | Tasmar® Tablet |
| | tolcapone tablet (generic for Tasmar®) |
| | Xadago® (NR) |
| | Zelapar® ODT |

MULTIPLE SCLEROSIS

| Preferred | Non-Preferred |
|---|---|
| Avonex® Pack / Pen / Syringe | Ampyra® Tablet |
| Betaseron® Kit / Vial | Aubagio® Tablet |
| Copaxone® Syringe | Extavia® Kit / Vial |
| Gilenya® Capsule | Glatopa® Syringe |
| Rebif® Ribidose / Titration Pack / Syringe | Lemtrada® Vial |
| Tecfidera® Capsule / Starter Pack | Plegridy® Pen / Pen Starter Pack / Syringe / Syringe Starter Pack |
| | Zinbryta® Injection |
| | Ocrevus® |

SEDATIVE HYPNOTICS

**Quantity limits apply**

| Preferred | Non-Preferred |
|---|---|
| ~~estazolam tablet (generic for Prosom®)~~ | Ambien® Tablet / CR Tablet |
| flurazepam capsule (generic for Dalmane®) | Belsomra® Tablet |
| temazepam 15mg, 30mg capsule (generic for Restoril®) | Edluar® SL Tablet |
| ~~triazolam tablet (generic for Halcion®)~~ | estazolam tablet (generic for Prosom®) |
| zolpidem tablet (generic for Ambien®) | eszopiclone tablet (generic for Lunesta®) |
| | Halcion® Tablet |
| | Hetlioz® Capsule |
| | Intermezzo® SL Tablet |
| | Lunesta® Tablet |
| | Restoril® Capsule |
| | Rozerem® Tablet |
| | Silenor® Tablet |
| | Sonata® Capsule |
| | temazepam 7.5, 22.5 mg capsule (generic for Restoril®) |
| | triazolam tablet (generic for Halcion®) |
| | zaleplon capsule (generic for Sonata®) |
| | zolpidem ER tablet (generic for Ambien® CR) |
| | zolpidem SL tablet (generic for Intermezzo®) |
| | zolpimist oral spray |

## CENTRAL NERVOUS SYSTEM

SMOKING CESSATION

| Preferred | Non-Preferred |
|---|---|
| **Quantity limits of a 6 months supply per 12 months apply to Chantix** | |
| Buproban® Tablet (branded generic for Zyban®) | Nicoderm® CQ Patch |

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| | |
|---|---|
| bupropion SR tablet (generic for Zyban®) | Nicotrol® Inhaler / NS Spray |
| Chantix® Tablet / Starting Box / Continuation Month Box | Nicorette® Gum / Lozenge (Buccal) |
| Nicorelief® Gum | Zyban® SR Tablet |
| ~~Nicorette® Gum / Lozenge~~ | |
| nicotine gum / lozenge / patch | |

## ENDOCRINOLOGY

### GROWTH HORMONE

**Clinical criteria apply**

| Preferred | Non-Preferred |
|---|---|
| Genotropin® Cartridge / Miniquick | ~~Genotropin® Cartridge / Miniquick~~ |
| Norditropin® Flexpro / Nordiflex | Humatrope® Cartridge / Vial |
| ~~Nutropin® AQ Pen / Nuspin~~ | Nutropin® AQ Pen / Nuspin |
| Serostim® Vial | Omnitrope® Cartridge / Vial |
| | Saizen® Click-Easy Cartridge / Vial |
| | TevTropin® Vial |
| | Zomacton® Vial |
| | Zorbtive® Vial |

### HYPOGLYCEMICS - INJECTABLE

#### Rapid Acting Insulin

| Preferred | Non-Preferred |
|---|---|
| | Humalog® Kwikpen |
| ~~Humalog® Kwikpen~~ | Afrezza® Inhalation Powder |
| Humalog® Vial | Apidra® Solostar / Vial |
| Novolog® Cartridge / Flexpen / Vial | Humalog® Cartridge |

#### Short Acting Insulin

| Preferred | Non-Preferred |
|---|---|
| Humulin® R Vial | Humulin R-U500 Kwikpen® |
| | Novolin® R Vial / Relion Vial |

#### Intermediate Acting Insulin

| Preferred | Non-Preferred |
|---|---|
| Humulin® N ~~Pen~~ / Vial | Humulin® N Pen |
| | Novolin® N Vial / Relion Vial |

#### Long Acting Insulin

| Preferred | Non-Preferred |
|---|---|
| **Trial and Failure of only 1 Preferred required** | |
| Lantus® Solostar / Vial | Basaglar Kwikpen® |
| Levemir® FlexTouch / FlexPen / Vial | Tresiba® Flextouch |
| | Toujeo® Solostar |

#### Premixed Rapid Combination Insulin

| Preferred | Non-Preferred |
|---|---|
| Humalog® Mix 50/50 Kwikpen | |
| Humalog® Mix 75/25 Kwikpen | |
| Humalog® Mix 75/25 Vial | |
| Novolog® Mix 70/30 Flexpen / Vial | |

#### Premixed 70/30 Combination Insulin

| Preferred | Non-Preferred |
|---|---|
| Humulin® 70/30 ~~Pen~~ / Vial | Humulin® 70/30 Pen |
| | Novolin® 70/30 Vial / Relion Vial |

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## ENDOCRINOLOGY

### HYPOGLYCEMICS - INJECTABLE (continued)

#### Amylin Analogs

**Requires trial and failure or insufficient response to metformin containing products unless contraindication or adverse event even when using a preferred product**

| Preferred | Non-Preferred |
|---|---|
| Symlin® Pen Injector | |

#### GLP-1 Receptor Agonists **and Combinations**

**Requires trial and failure or insufficient response to metformin containing products unless contraindication or adverse event even when using a preferred product**

| Preferred | Non-Preferred |
|---|---|
| | **Continuation of therapy requires documentation that clinical goals have been met** |
| Byetta® Pen | Adlyxin® Injection |
| Bydureon® Pen / Vial | Soliqua® Injection |
| Tanzeum® Pen Injector | Trulicity® Pen |
| | Victoza® Pen |
| | Xultophy® Injection |

### HYPOGLYCEMICS - ORAL

#### 2nd Generation Sulfonylureas

| Preferred | Non-Preferred |
|---|---|
| Amaryl® Tablet | |
| Diabeta® Tablet | |
| glimepiride tablet (generic for Amaryl®) | |
| glipizide tablet / ER tablet (generic for Glucotrol® / XL) | |
| Glucotrol® Tablet / XL Tablet | |
| glyburide micronized tablet (generic for Micronase®, Glynase®) | |
| glyburide tablet (generic for Diabeta®) | |
| Glynase® Tablet | |

#### Alpha-Glucosidase Inhibitors

| Preferred | Non-Preferred |
|---|---|
| acarbose tablet (generic for Precose®) | miglitol tablet (generic for Glyset®) |
| Glyset® Tablet | Precose® Tablet |

#### Biguanides and Combinations

| Preferred | Non-Preferred |
|---|---|
| glipizide-metformin tablet (generic for Metaglip®) | Fortamet® Tablet |
| glyburide-metformin tablet (generic for Glucovance®) | Glucophage® Tablet / ER Tablet |
| metformin tablet / ER tablet (generic for Glucophage® / ER) | Glucovance® Tablet |
| | Glumetza® Tablet |
| | metformin ER tablet (generic for Fortamet®) |
| | metformin ER tablet (generic for Glumetza®) |
| | Riomet® Solution |

#### DPP-IV Inhibitors and Combinations

**Requires trial and failure or insufficient response to metformin containing products unless contraindication or adverse event even when using a preferred product**

| Preferred | Non-Preferred |
|---|---|
| Janumet® Tablet | alogliptin tablet (generic for Nesina®) |
| Janumet® XR Tablet | alogliptin-metformin tablet (generic for Kazano®) |
| Januvia® Tablet | alogliptin-pioglitazone tablet (generic for Orseni®) |
| Jentadueto® Tablet | Glyxambi® Tablet |
| Tradjenta® Tablet | Jentadueto® XR Tablet |

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| | |
|---|---|
| | Kazano® Tablet |
| | Kombiglyze® XR Tablet |
| | Nesina® Tablet |
| | Onglyza® Tablet |
| | Oseni® Tablet |

## ENDOCRINOLOGY

### HYPOGLYCEMICS - ORAL (continued)

#### Meglitinides

| Preferred | Non-Preferred |
|---|---|
| nateglinide tablet (generic for Starlix®) | Prandin® Tablet |
| repaglinide tablet (generic for Prandin®) | Starlix® Tablet |

#### Meglitinides Combinations

| Preferred | Non-Preferred |
|---|---|
| Prandimet® Tablet | repaglinide-metformin tablet (generic for Prandimet®) |

#### Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitor and Combinations

**Requires trial and failure or insufficient response to metformin containing products unless contraindication or adverse event even when using a preferred product**

| Preferred | Non-Preferred |
|---|---|
| Farxiga® Tablet | ~~Farxiga® Tablet~~ |
| ~~Invokamet® Tablet~~ | Invokamet® Tablet |
| ~~Invokana® Tablet~~ | Invokamet® XR tablet |
| Jardiance® Tablet | Invokana® Tablet |
| | ~~Jardiance® Tablet~~ |
| | Synjardy® Tablet |
| | Xigduo® XR Tablet |
| | Synjardy® XR Tablet |

#### Thiazolidinediones and Combinations

| Preferred | Non-Preferred |
|---|---|
| pioglitazone tablet (generic for Actos®) | ActoPlus Met® Tablet / XR Tablet |
| | Actos® Tablet |
| | Avandamet® Tablet |
| | Avandaryl® Tablet |
| | Avandia® Tablet |
| | Duetact® Tablet |
| | pioglitazone-glimepiride tablet (generic for Duetact®) |
| | pioglitazone-metformin tablet (generic for ActoPlus Met®) |

## GASTROINTESTINAL

### ANTIEMETIC-ANTIVERTIGO AGENTS

| Preferred | Non-Preferred |
|---|---|
| dimenhydrinate vial (generic for Dramamine®) | Akynzeo® Capsule |
| meclizine tablet (generic for Antivert®) | Anzemet® Tablet / Vial |
| metoclopramide ~~ODT~~ / solution / tablet (generic for Reglan®) | Cesamet® Capsule |
| ondansetron ODT / solution / tablet(generic for Zofran®) | dronabinol capsule (generic for Marinol®) |
| prochlorperazine tablet (generic for Compazine®) | granisetron tablets (generic for Kytril®) |
| promethazine syrup / tablet (generic for Phenergan®) | Marinol® Capsule |
| Transderm-Scop® Patch | metoclopramide ODT (generic for Metozolv®) |
| | metoclopramide ODT (generic for Reglan®) |
| | Metozolv® ODT |
| | Sancuso® patch |
| | Sustol® Injection |
| | trimethobenzamide capsule (generic for Tigan®) |

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| | |
|---|---|
| | Varubi® Tablet<br>Zofran® Solution / ODT / Tablet<br>Zuplenz® Soluble Film |
| **Clinical criteria apply** | **Clinical criteria apply** |
| Emend® Capsule /~~ Trifold Pack~~ | aprepitant capsule/pack (generic for Emend®)<br>Emend® Powder Packet<br>Emend®Trifold Pack |
| | **Exemption for Diagnosis of Pregnancy** |
| | Diclegis® Tablet |

BILE ACID SALTS

| **Preferred** | **Non-Preferred** |
|---|---|
| ~~ursodiol capsule (generic for Actigall®)~~ | Actigall® Capsule |
| ursodiol tablet (generic for Urso®) | Chenodal® Tablet |
| | Cholbam® Capsule |
| | Ocaliva® Tablet |
| | Urso® Tablet / Forte Tablet |
| | ursodiol capsule (generic for Actigall®) |
| | ~~ursodiol tablet~~ / forte tablet (generic for Urso® / Urso® Forte) |

**GASTROINTESTINAL**

H. PYLORI COMBINATIONS

| **Preferred** | **Non-Preferred** |
|---|---|
| ~~lansoprazole-amoxicillin-clarithromycin pack (generic for Prevpac®)~~ | lansoprazole-amoxicillin-clarithromycin pack (generic for Prevpac®) |
| Pylera® Capsule | Omeclamox-Pak® Combo Pack |
| | Prevpac® Patient Pack |

HISTAMINE-2 RECEPTOR ANTAGONISTS

| **Preferred** | **Non-Preferred** |
|---|---|
| famotidine tablet / suspension (generic for Pepcid®) | cimetidine solution / tablet (generic for Tagamet®) |
| ranitidine capsule / syrup / tablet (generic for Zantac®) | nizatidine capsule / solution (generic for Axid®) |
| | Pepcid® Tablet / Suspension |
| | Zantac® Tablet |

PANCREATIC ENZYMES

| **Preferred** | **Non-Preferred** |
|---|---|
| Creon® Capsule | Pancreaze® Capsule |
| pancrelipase capsule (generic for Pancrease®) | Pertzye® Capsule |
| Zenpep® Capsule | Ultresa® Capsule |
| | Viokase® Tablet |

PROGESTINS USED FOR CACHEXIA

| **Preferred** | **Non-Preferred** |
|---|---|
| megestrol suspension / tablet (generic for Megace®) | Megace® Suspension / ES Suspension |
| | megestrol ES suspension (generic for Megace® ES) |

PROTON PUMP INHIBITORS

| **Preferred** | **Non-Preferred** |
|---|---|
| Nexium® RX / ~~OTC Capsule~~ / Packet | Aciphex® Sprinkle Capsules / Tablets |
| omeprazole RX capsule (generic for Prilosec® RX) | Dexilant® Capsule |
| pantoprazole tablet (generic for Protonix®) | esomeprazole capsule (generic for Nexium® RX / OTC) |
| Protonix® Suspension | lansoprazole capsule (generic for Prevacid® RX / OTC) |
| | omeprazole OTC capsule / tablet (generic for Prilosec® OTC) |
| | omeprazole sodium bicarbonate capsule (generic for Zegerid® RX / OTC) |
| | Prevacid® RX / OTC Capsule / Solutab |

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| | |
|---|---|
| | Prilosec® RX Capsule / Suspension |
| | Protonix® Tablet |
| | rabeprazole tablet (generic for Aciphex®) |
| | Zegerid® RX / ~~OTC Capsule~~ / Packet |

SELECTIVE CONSTIPATION AGENTS

| Preferred | Non-Preferred |
|---|---|
| | alosetron tablet (generic for Lotronex® Tablet) |
| Amitiza® Capsule | Lotronex® Tablet |
| Linzess® Capsule | ~~Movantik® Tablet~~ |
| Movantik® Tablet | Relistor® Syringe / Vial |
| | Relistor® oral Tablet |
| | Trulance® |
| | **Exemption for Irritable Bowel Syndrome with Diarrhea (IBS-D)** |
| | Viberzi® Tablet |

## GASTROINTESTINAL

ULCERATIVE COLITIS

Oral

| Preferred | Non-Preferred |
|---|---|
| Apriso® Capsule | Asacol® HD Tablet |
| balsalazide capsule (generic for Colazal®) | Azulfidine® Entab / Tablet |
| sulfasalazine DR tablet (generic for Azulfidine® Entab) | Colazal® Capsule |
| sulfasalazine IR tablet (generic for Azulfidine®) | Delzicol® Capsule |
| Sulfazine® (branded generic for Azulfidine®) | Dipentum® Capsule |
| | Giazo® Tablet |
| | Lialda® Tablet |
| | mesalamine tablet (generic for Asacol® HD) |
| | Pentasa® Capsule |
| | Uceris® TabletA |

Rectal

| Preferred | Non-Preferred |
|---|---|
| | **Failure of only 1 preferred to obtain non-preferred medication** |
| Canasa® Suppository | mesalamine kit (generic for Rowasa® Kit) |
| mesalamine enema (generic for Rowasa® Enema) | Rowasa® Kit |
| | SFRowasa® Enema |
| | Uceris® Rectal Foam |

BENIGN PROSTATIC HYPERPLASIA TREATMENTS

| Preferred | Non-Preferred |
|---|---|
| alfuzosin ER tablet (generic for Uroxatral®) | Avodart® Softgel |
| doxazosin tablet (generic for Cardura®) | Cardura® Tablet / XL Tablet |
| doxazosin tablet (generic for Cardura®) | dutasteride/ tamsulosin capsule (generic Jalyn capsule®) |
| dutasteride capsule (generic Avodart®) | ~~dutasteride capsule (generic Avodart®)~~ |
| finasteride tablet (generic for Proscar®) | Flomax® Capsule |
| tamsulosin capsule (generic for Flomax®) | Jalyn® Capsule |
| terazosin capsule (generic for Hytrin®) | Proscar® Tablet |
| | Rapaflo® Capsule |
| | Uroxatral® Tablet |
| | **Clinical Criteria Apply** |
| | Cialis® Tablet |

ELECTROLYTE DEPLETERS

| Preferred | Non-Preferred |
|---|---|

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| | |
|---|---|
| calcium acetate capsule (generic for PhosLo®) | ~~**Exemption for use of Renvela Powder Pack in patients < 12 years old.**~~ |
| calcium acetate tablet (generic for Eliphos®) | Auryxia® Tablet |
| Eliphos® Tablet | Fosrenol® Chewable |
| Renagel® Tablet | Fosrenol® Powder Pack |
| Renvela® Powder Pack | Magnebind® 400 RX Tablet |
| | PhosLo® Gelcap / Solution |
| | Phoslyra® Solution |
| | Renvela® Tablet /~~ Powder Pack~~ |
| | sevelamer tablet / powder pack (NR) (generic for Renvela®) |
| | Velphoro® Chewable |

## GENITOURINARY/RENAL

### URINARY ANTISPASMODICS

| Preferred | Non-Preferred |
|---|---|
| | darifenacin er tablet (generic for Enablex®) |
| oxybutynin syrup / tablet (generic for Ditropan®) | Detrol® Tablet / LA Capsule |
| Toviaz® Tablet | Ditropan® XL Tablet |
| Vesicare® Tablet | Enablex® Tablet |
| | flavoxate tablet (generic for Urispas®) |
| | Gelnique® Gel / Gel Sachets |
| | Myrbetriq® Tablet |
| | oxybutynin ER tablet (generic for Ditropan XL®) |
| | Oxytrol® Patch |
| | tolterodine tablet / ER capsule(generic for Detrol® / LA) |
| | trospium tablet / ER capsule (generic for Sanctura® / XR) |

## GOUT

### ANTIHYPERURICEMICS

| Preferred | Non-Preferred |
|---|---|
| allopurinol tablet (generic for Zyloprim®) | ~~colchicine capsule (generic for Mitigare®)~~ |
| ~~colchicine tablet (generic for Colcrys®)~~ | colchicine tablet (generic for Colcrys®) |
| colchicine capsule (generic for Mitigare®) | Colcrys® Tablet |
| probenecid tablet(generic for Benemid®) | Mitigare® Capsule |
| probenecid-colchicine tablet (generic for Col-Benemid®) | Uloric® Tablet |
| | Zyloprim® Tablet |
| | Zurampic® Tablet |

## HEMATOLOGIC

### ANTICOAGULANTS

#### Injectable

| Preferred | Non-Preferred |
|---|---|
| Fragmin® Syringe / Vial | Arixtra® Syringe |
| Lovenox® Syringe / Vial | enoxaparin syringe / vial (generic for Lovenox®) |
| | fondaparinux syringe (generic for Arixtra®) |

#### Oral

| Preferred | Non-Preferred |
|---|---|
| Coumadin® Tablet | |
| Eliquis® Tablet | |
| Jantoven® (branded generic for Coumadin®) | |
| Pradaxa® Capsule | |
| Savaysa® Tablet | |
| warfarin tablet (generic for Coumadin®) | |
| Xarelto® Starter Pack / Tablet | |

### HEMATOPOIETIC AGENTS

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**Clinical criteria apply**

| Preferred | Non-Preferred |
|---|---|
| Aranesp® Syringe / Vial | Epogen® Vial |
| Procrit® Vial | Mircera® Syringe |

THROMBOPOIESIS STIMULATING AGENTS

| Preferred | Non-Preferred |
|---|---|
| ~~Neumega® Vial~~ not available | |
| Nplate® Vial | |
| Promacta® Tablet | |

## OPHTHALMIC

ALLERGIC CONJUNCTIVITIS AGENTS

| Preferred | Non-Preferred |
|---|---|
| cromolyn sodium drops (generic for Crolom®) | Alocril® Drops |
| olopatadine drops (AG generic for Patanol®) | Alomide® Drops |
| ~~Pataday® Drops~~ | Alrex® Drops |
| ~~Pazeo® Drops~~ | azelastine drops (generic for Optivar®) |
| | Bepreve® Drops |
| | Elestat® Drops |
| | Emadine® Drops |
| | epinastine drops (generic for Elestat®) |
| | Lastacaft® Drops |
| | olopatadine drops (generic for Pataday®) (NR) |
| | Optivar® Drops |
| | Patanol® Drops |
| | Pataday® Drops |
| | Pazeo® Drops |

ANTIBIOTICS

| Preferred | Non-Preferred |
|---|---|
| Azasite® Drops | bacitracin ointment (generic for AK-Tracin®) |
| AK-Poly-Bac® Ointment (branded generic for Polysporin®) | Besivance® Suspension |
| bacitracin-polymyxin ointment (generic for Polysporin®) | Bleph-10® Drops |
| ciprofloxacin solution drops (generic for Ciloxan®) | Ciloxan® Drops / Ointment |
| erythromycin ointment (generic for Ilotycin®) | Garamycin® Drops |
| Gentak® Ointment (branded generic gor Garamycin®) | gatifloxacin drops (generic for Zymaxid®) |
| gentamicin drops / ointment (generic for Garamycin®) | Ilotycin® Ointment |
| Moxeza® Drops | levofloxacin drops (generic for Quixin®) |
| neomycin-bacitracin-polymyxin ointment (generic for Neosporin® Ophthalmic Ointment) | Natacyn® Drops |
| Neo-Polycin® (branded generic for Neosporin® Ophthalmic Ointment) | Neosporin® Drops |
| neomycin-polymyxin-gramicidin drops (generic for Neosporin® Ophthalmic Drops) | Ocuflox® Drops |
| ofloxacin drops (generic for Ocuflox®) | Polytrim® Drops |
| Polycin® Ointment (branded generic for Polysporin®) | sulfacetamide ointment (generic for Cetamide®) |
| polymyxin-trimethoprim drops (generic for Polytrim®) | Tobrex® Ointment/ Drops |
| sulfacetamide drops (generic for Bleph-10®) | Zymaxid® Drops |
| tobramycin drops (generic for Tobrex®) | |
| Vigamox® Drops | |

ANTIBIOTICS-STEROID COMBINATIONS

| Preferred | Non-Preferred |
|---|---|
| neomycin-polymyxin-dexamethasone drops / ointment (generic for Maxitrol®) | Blephamide® Drops / S.O.P. Ointment |
| Tobradex® Drops / Ointment | Maxitrol® Drops / Ointment |
| | Neo-Polycin® HC (branded generic for Cortisporin®) |
| | neomycin-bacitracin-polymyxin-HC ointment (generic for Cortisporin®) |
| | neomycin-polymyxin-HC drops / ointment (generic for Ocutricin®) |

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| | |
|---|---|
| | Pred-G® S.O.P. Ointment / Suspension |
| | sulfacetamide-prednisolone drops (generic for Vasocidin®) |
| | Tobradex® ST Drops |
| | tobramycin-dexamethasone suspension (generic for Tobradex® Suspension) |
| | Zylet® Drops |

## OPHTHALMIC

### ANTI INFLAMMATORY

| Preferred | Non-Preferred |
|---|---|
| dexamethasone drops (generic for Decadron®) | Acular® Drops / LS Solution |
| diclofenac drops (generic for Voltaren®) | Acuvail® Solution |
| Durezol® Drops | bromfenac drops (generic for Xibrom®) |
| Flarex® Drops | FML® Liquifilm Drops |
| fluorometholone drops (generic for FML®) | Ilevro® Drops |
| flurbiprofen drops (generic for Ocufen®) | Iluvien® Implant |
| FML® Forte Drops / S.O.P. Ointment | Lotemax® Gel / Ointment |
| ketorolac solution (generic for Acular® / LS) | Nevanac® Droptainer |
| Lotemax® Drops | Ocufen® Drops |
| Maxidex® Drops | Omnipred® Drops |
| Pred Mild® Drops | Ozurdex® Implant |
| prednisolone acetate drops (generic for Pred Forte®) | Pred Forte® Drops |
| prednisolone sodium phosphate drops (generic for Inflamase Forte®) | Prolensa® Drops |
| | Retisert® Implant |
| | Triesence® Vial |
| | Vexol® Drops |

### ANTI INFLAMMATORY/IMMUNOMODULATOR

| Preferred | Non-Preferred |
|---|---|
| Restasis® | Xiidra® |
| Restasis® (multidose) | |

### Alpha 2 Adrenergic Agents

| Preferred | Non-Preferred |
|---|---|
| Alphagan® P Drops | apraclonidine drops (generic for Iopidine®) |
| brimonidine drops (generic for Alphagan®) | brimonidine P drops (generic for Alphagan® P) |
| | Iopidine® Drops |

### Beta Blocker Agents

| Preferred | Non-Preferred |
|---|---|
| carteolol drops (generic for Ocupress®) | betaxolol drops (generic for Betoptic®) |
| Combigan® Drops | Betagan® Drops |
| Istalol® Drops | Betimol® Drops |
| levobunolol drops (generic for Betagan®) | Betoptic® S Drops |
| timolol drops / GFS gel-solution / gel-solution (generic for Timoptic® / Timoptic XE®) | metipranolol drops (generic for OptiPranolol®) |
| | Timoptic® Drops / Ocudose Drops / XE Solution |

### Carbonic Anhydrase Inhibitors

| Preferred | Non-Preferred |
|---|---|
| Azopt® Drops | Cosopt® Drops / PF Drops |
| dorzolamide drops (generic for Trusopt®) | Trusopt® Drops |
| dorzolamide-timolol drops (generic for Cosopt®) | |
| Simbrinza® Drops | |

### Prostaglandin Agonists

| Preferred | Non-Preferred |
|---|---|

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| | |
|---|---|
| latanoprost drops (generic for Xalatan®) | bimatoprost (generic for Lumigan® Drops) |
| Travatan® Z Drops | Lumigan® Drops |
| | travoprost drops (generic for Travatan®) |
| | Xalatan® Drops |
| | Zioptan® Drops |

## OSTEOPOROSIS

### BONE RESORPTION SUPPRESSION AND RELATED AGENTS

| Preferred | Non-Preferred |
|---|---|
| alendronate tablet (generic for Fosamax®) | Actonel® Tablet |
| Evista® Tablet | alendronate solution (generic for Fosamax® Solution) |
| Fortical® Nasal Spray | Atelvia® Tablet |
| ~~raloxifene tablet (generic for Evista®)~~ | Binosto® Effervescent Tablet |
| | Boniva® Tablet |
| | calcitonin salmon nasal spray (generic for Miacalcin®) |
| | etidronate tablet (generic for Didronel®) |
| | ~~Evista® Tablet~~ |
| | Forteo® Pen Injection |
| | Fosamax® Tablet / Plus D Tablet |
| | ibandronate tablet (generic for Boniva®) |
| | Miacalcin® Nasal Spray |
| | Prolia® Syringe |
| | raloxifene tablet (generic for Evista®) |
| | risedronate tablet (generic for Actonel®) |
| | Tymlos™ (NR) |

## OTIC

### ANTIBIOTICS

| Preferred | Non-Preferred |
|---|---|
| Ciprodex® Suspension | Cipro® HC Suspension |
| neomycin-polymyxin-hydrocortisone solution / suspension (generic for Cortisporin®) | ciprofloxacin solution (generic for Cetraxal®) |
| | Coly-Mycin® S Drops |
| | Cortisporin-TC® Suspension |
| | ofloxacin drops (generic for Floxin®) |
| | Otiprio® Suspension |
| | Otovel® Drops |

### ANTI-INFECTIVES AND ANESTHETICS

| Preferred | Non-Preferred |
|---|---|
| acetic acid solution (generic for Vosol®) | Acetasol HC® Drops (branded generic for Vosol® HC) |
| acetic acid-aluminum drops (generic for Domeboro®) | acetic acid-hydrocortisone solution (generic for Vosol® HC) |
| antipyrine-benzocaine drops (generic for Auralgan®) | Otic Care® Solution |
| Auroguard® Solution (branded generic for Auralgan®) | Oto-End 10® Drops |
| | Otozin® Ear Drops |
| | Pinnacaine® Otic Drops |

## RESPIRATORY

### BETA-ADRENERGIC HANDHELD, LONG ACTING

| Preferred | Non-Preferred |
|---|---|
| ~~Foradil® Aerolizer Capsule~~ **<No longer made after January, 2016>** | Arcapta® Neohaler |
| Serevent® Diskus | Striverdi® Respimat Inhalation Spray |

### BETA-ADRENERGIC HANDHELD, SHORT ACTING

| Preferred | Non-Preferred |
|---|---|
| | Proair Respiclick® |
| Proair® HFA Inhaler | Ventolin® HFA Inhaler |

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| | |
|---|---|
| Proventil® HFA Inhaler | Xopenex® HFA Inhaler |

BETA-ADRENERGIC NEBULIZERS

| Preferred | Non-Preferred |
|---|---|
| | **Exemption for use of Accuneb/generic Accuneb in patients < 2 years old** |
| albuterol 0.63mg/3ml solution (generic for Accuneb®) | Brovana® Solution |
| albuterol 1.25mg/3ml solution (generic for Accuneb®) | levalbuterol solution / concetrate solution (generic for Xopenex® / Concetrate ) |
| albuterol sulfate 2.5mg/0.5ml solution | Perforomist® Solution |
| albuterol sulfate 2.5mg/3ml solution | Xopenex® Solution / Concetrate Solution |
| albuterol sulfate 5mg/ml solution | |

## RESPIRATORY

BETA-ADRENERGIC - ORAL

| Preferred | Non-Preferred |
|---|---|
| albuterol tablets (generic for Proventil® Repetabs) | albuterol ER tablets (generic for VoSpire® ER) |
| albuterol syrup (generic for Ventolin® Syrup) | metaproterenol tablet (generic for Alupent® Tablet) |
| metaproterenol syrup (generic for Alupent® Syrup) | VoSpire® ER Tablet |
| terbutaline tablet (generic for Brethine®) | |

COPD AGENTS

| Preferred | Non-Preferred |
|---|---|
| | **Failure of only Spiriva® required to obtain non-preferred medication** |
| Atrovent® HFA Inhaler | Anoro® Elipta Inhaler |
| ~~Combivent® Respimat Inhalation Spray~~ | Bevespi ® Aerosphere |
| ipratropium nebulizer solution (generic for Atrovent® Nebulizer Solution) | Combivent® Respimat Inhalation Spray |
| ipratropium-albuterol solution (generic for Duoneb®) | Daliresp® Tablet |
| Spiriva® Handihaler | Incruse® Elipta Inhaler |
| Stiolto® Respimat Inhalation Spray | Seebri® Neohaler |
| | Spiriva® Respimat Inhalation Spray 2.5mcg |
| | ~~Stiolto® Respimat Inhalation Spray~~ |
| | Tudorza® Pressair Inhaler |
| | Utibron® Neohaler |
| | Spiriva Respimat Inhalation Spray 1.25mcg |
| | ****Exemption from trial and failure of preferreds for Spiriva® Respimat 1.25mcg when used for Asthma, but must be used concurrently with an inhaled corticosteroid or inhaled corticosteroid/beta agonist combination**** |

CORTICOSTEROIDS
**Clinical criteria apply**

| Preferred | Non-Preferred |
|---|---|
| Pulmicort® Respules 0.25mg, 0.5mg, 1mg | Aerospan® Inhaler |
| QVAR® Inhaler | Alvesco® Inhaler |
| | Arnuity Elipta® Inhaler |
| | Asmanex® HFA Inhaler |
| | Asmanex® Twisthaler |
| | budesonide suspension (generic for Pulmicort® Respules) |
| | Flovent® Diskus / HFA Inhaler |
| | Pulmicort® Flexhaler |

CORTICOSTEROID COMBINATION
**Clinical criteria apply**

| Preferred | Non-Preferred |
|---|---|
| Advair® Diskus / ~~HFA Inhaler~~ | Advair® HFA Inhaler |
| Dulera® Inhaler | Breo Elipta® |
| Symbicort® Inhaler | AirDuo® (NR) |
| | fluticasone/salmeterol (generic for AirDuo®) (NR) |

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## INTRANASAL RHINITIS AGENTS

| Preferred | Non-Preferred<br>**Exemption for steroids applies to patients < 4 years old** |
|---|---|
| azelastine spray (generic for Astepro®) | Astepro® Nasal Spray |
| ~~Astepro® Nasal Spray~~ | Astelin® Nasal Spray |
| azelastine spray (generic for Astelin®) | Atrovent® Spray |
| fluticasone spray (generic for Flonase®) | ~~azelastine spray (generic for Astepro®)~~ |
| ipratropium spray (generic for Atrovent® Nasal) | Beconase® AQ spray |
| ~~Nasonex® Nasal Spray~~ | budesonide nasal spray (generic for Rhinocort® Aqua) |
| Patanase® Nasal Spray | Dymista® Nasal Spray |
| | Flonase® Nasal Spray (RX ONLY) |
| | flunisolide spray (generic for Nasalide®) |
| | mometasone nasal spray (generic for Nasonex®) |
| | Nasonex® Nasal Spray |
| | olopatadine nasal spray(generic for Patanase®) |
| | Omnaris® Nasal Spray |
| | QNasl® Nasal Spray / Children's Spray |
| | Rhinocort® Aqua Nasal Spray |
| | Ticanase nasal spray |
| | triamcinolone nasal spray (generic for Nasacort® AQ) |
| | Veramyst® Nasal Spray |
| | Zetonna® Nasal Spray |

# RESPIRATORY

## LEUKOTRIENE MODIFIERS

| Preferred | Non-Preferred |
|---|---|
| | Accolate® Tablet |
| ~~Accolate® Tablet~~ | Singulair® Chewable / Granules / Tablet |
| montelukast chewable / granules / tablet (generic for Singulair®) | Zyflo® CR Tablet / Filmtab |
| zafirlukast tablet (generic for Accolate®) | zileuton |

## LOW SEDATING ANTIHISTAMINES

| Preferred | Non-Preferred<br>**Exemption for use of Clarinex syrup in patients < 2 years old** |
|---|---|
| | ~~Allegra® Allergy OTC Tablet~~ |
| | ~~Allegra® Allergy Suspension OTC~~ |
| ~~cetirizine OTC syrup 1mg/1ml (generic for Zyrtec OTC® Syrup)~~ | ~~cetirizine OTC chewable (generic for Zyrtec® OTC)~~ |
| cetirizine tablets OTC (generic for Zyrtec® OTC Tablets) | cetirizine OTC syrup 1mg/1ml (generic for Zyrtec OTC® Syrup) |
| cetirizine RX syrup (generic for Zyrtec® Syrup) | cetirizine OTC syrup 5mg/5ml (generic for Zyrtec® OTC Syrup) |
| Claritin Solution OTC | Clarinex® Syrup / Tablet |
| loratadine ~~OTC ODT / solution~~ / tablet (generic for Claritin® OTC) | Claritin® Tablet ~~OTC~~ |
| | desloratadine ODT / Tablet (generic for Clarinex®) |
| | fexofenadine 60mg, 180 mg tablet (generic for Allegra®) |
| | fexofenadine OTC suspension / tablet (generic for Allegra® OTC) |
| | levocetirizine solution / tablet (generic for Xyzal®) |
| | loratadine OTC ODT / solution (generic for Claritin® OTC) |
| | Xyzal® Solution / Tablet |
| | ~~Zyrtec®~~ |

## LOW SEDATING ANTIHISTAMINE COMBINATION

**Quantity limits of 102 days supply per 12 months apply / PA required for class**

| Preferred | Non-Preferred |
|---|---|
| loratadine-D OTC tablet (generic for Claritin-D® OTC) | Allegra-D® 12 Hour OTC Tablet |
| | ~~Allegra-D® 24 Hour OTC Tablet~~ |
| | cetirizine-D OTC tablet (generic for Zyrtec-D® OTC) |
| | Clarinex-D® Tablet |

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| | |
|---|---|
| | ~~Claritin-D® 12 Hour OTC Tablet~~ |
| | ~~Claritin-D® 24 Hour OTC Tablet~~ |
| | ~~fexofenadine-D 12 Hour OTC Tablet (generic for Allegra-D® 12 Hour OTC)~~ |
| | Semprex-D® Capsule |
| | ~~Zyrtec-D OTC Tablet~~ |

## TOPICALS

### ACNE AGENTS

| Preferred | Non-Preferred |
|---|---|
| Azelex® Cream | Acne Clearing System |
| Benzaclin® Gel / Gel Pump | Acanya® Gel Pump |
| clindamycin phosphate ~~gel / lotion~~ / pledgets / solution (generic for Cleocin-T®) | Aczone® Gel |
| Differin® Cream / ~~Gel~~ / Gel Pump / Lotion | adapalene cream / gel / gel pump (generic for Differin®) |
| Retin-A® Cream / Gel | Atralin® Gel |
| | Avar® Cleanser / Cleansing Pads / LS Cleanser / LS Cleansing Pads |
| | Avar-E® Emollient Cream / Green Emollient Cream / LS Cream |
| | Avita® Cream / Gel |
| | Benzamycin® Gel / Pak Gel |
| | Benzefoam Ultra |
| | Benzepro® Creamy Wash / Emollient Foam / Foam / Foaming Cloths |
| | benzoyl peroxide cleanser / wash / foam / gel / kit / towlette (generic for Benzac®, et. al) |
| | BP® 10-1 Wash / Cleansing Wash |
| | Cleocin® T Gel / Lotion / Pledgets / Solution |
| | Clindacin® ETZ Pledget / Kit / P Pledgets / PAC Kit |
| | clindamycin phosphate gel / lotion (generic for Cleocin-T®) |
| | clindamycin phosphate foam (generic for Evoclin®) |
| | clindamycin-benzoyl peroxide gel (generic for Benzaclin®, Duac®, Neuac®) |
| | clindamycin/benzoyl peroxide with pump (generic for Benzaclin®) (NR) |
| | clindamycin/tretinoin (generic for Veltin®) |
| | Duac® Gel |
| | Epiduo® Gel / Gel Pump/ Forte |
| | Ery® Pads |
| | Erygel® Gel |
| | erythromycin gel / pledgets / solution (generic for Emcin®, Erycette®, EryDerm®, EryGel®, EryMax®, A/T/S®, T-Stat®) |
| | erythromycin-benzoyl peroxide gel (generic for Benzamycin®) |
| | Evoclin® Foam |
| | Fabior® Foam |
| | Inova® (4/1, 8/2) |
| | Klaron® Lotion |
| | Neuac® Gel / Kit |
| | Onexton® Gel / Gel Pump |
| | Ovace® Plus Cleansing Gel / Plus Cream / Plus Lotion / Plus Shampoo / Wash |
| | Promiseb® Complete |
| | Retin-A® / Micro Gel / Micro Pump Gel |
| | Rosula® Cloths / Wash |
| | Seb-Prev® Wash |
| | sodium sulfacetamide shampoo, wash (generic for Ovace® / Plus) |
| | sodium sulfacetamide cleanser / cream (generic for Avar® / LS) |
| | sodium sulfacetamide lotion (generic for Klaron®) |
| | sodium sulfacetamide sulfur cleanser / cloth (generic for Rosula®) |
| | sodium sulfacetamide sulfur kit / wash (generic for Sumadan®) |
| | sodium sulfacetamide sulfur lotion / suspension (generic for Novacet®, Plexion®, Zetacet®) |
| | sodium sulfacetamide sulfur pad / suspension / wash (generic for Suamxin®) |
| | SSS® 10-5 Cream / Foam |
| | sulfacetamide sulfur cream (generic for Avar® E, SSS® 10-5) |
| | Sulfacleanse® Suspension |

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| | |
|---|---|
| | Sumadan® Kit / Wash / XLT Kit |
| | Sumaxin® Cleansing Pads / CP Kit / TS Topical Suspension / Wash |
| | tazarotene cream |
| | Tazorac® Cream / Gel |
| | tretinoin microsphere gel / gel pump (generic for Retin-A® Micro) |
| | tretinoin cream / gel (generic for Retin-A®) |
| | Veltin® Gel |
| | Virti-Sulf® Emollient Cream |
| | Ziana® Gel |

## TOPICALS

### ANDROGENIC AGENTS

| Preferred | Non-Preferred |
|---|---|
| Androgel® Packet / Pump | Androderm® Patch |
| | Axiron® Actuation Solution |
| | Fortesta® Gel Pump |
| | Natesto® Nasal |
| | Testim® Gel |
| | testosterone gel (generic for Testim, Vogelxo®) |
| | testosterone gel packet / pump (generic for Androgel, Vogelxo®) |
| | testosterone gel pump (generic for Fortesta®) |
| | Vogelxo® Gel / Gel Packet / Gel Pump |

### NSAIDS

| Preferred | Non-Preferred |
|---|---|
| Voltaren Gel® | diclofenac solution (generic for Pennsaid®) |
| | diclofenac topical gel (generic for Voltaren ® Gel) |
| | Flector® Patch |
| | Pennsaid® Pump / Solution |
| | Pennsaid® Packet (NR) |
| | Klofensaid ® II |
| | Vopac® MDS |
| | Xrylix® |

### ~~ANESTHETICS~~ (See Neuropathic Pain and Topical NSAIDS)

| ~~Preferred~~ | ~~Non-Preferred~~ |
|---|---|
| | ~~Clinical criteria apply to Lidoderm® and lidocaine patch~~ |
| | ~~diclofenac solution (generic for Pennsaid®)~~ |
| | ~~diclofenac topical gel (generic for Voltaren ® Gel)~~ |
| | ~~Dermacin RX® PHN PAK~~ |
| | ~~Flector® Patch~~ |
| | ~~lidocaine patch (generic for Lidoderm®)~~ |
| | ~~Lidoderm® Patch~~ |
| | ~~Pennsaid® Pump / Solution~~ |
| | ~~Qutenza® Kit~~ |

### ANTIBIOTIC

| Preferred | Non-Preferred |
|---|---|
| Bactroban® Cream | Altabax® Ointment |
| gentamicin cream / ointment (generic for Garamycin®) | Bactroban® Ointment / Nasal Ointment |
| mupirocin ointment (generic for Bactroban® Ointment) | Centany® AT Ointment Kit / Ointment |
| | mupirocin cream (generic for Bactroban® Cream) |

### ANTIBIOTIC - VAGINAL

| Preferred | Non-Preferred |
|---|---|
| Cleocin® Vaginal Ovules | Cleocin® Vaginal Cream |

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| | |
|---|---|
| Clindese® Vaginal Cream | ~~Clindese® Vaginal Cream~~ |
| clindamycin vaginal cream (generic for Cleocin® Vaginal Cream) | Nuvessa® Vaginal Gel |
| metronidazole vaginal gel (generic for Metrogel® Vaginal Gel) | Metrogel® Vaginal Gel |
| Vandazole® Vaginal Gel | |

## TOPICALS

### ANTIFUNGAL

| Preferred | Non-Preferred<br>**Clinical criteria apply to Vusion®** |
|---|---|
| ciclopirox cream (generic for Loprox® Cream) | Bensal HP® |
| ciclopirox solution (generic for Penlac® Solution) | Ciclodan® Cream / Cream Kit / Kit / Solution |
| clotrimazole RX cream / ~~solution~~ (generic for Lotrimin® RX) | ciclopirox gel / shampoo / suspension (generic for Loprox®) |
| clotrimazole-betamethasone cream (generic for Lotrisone® cream) | ciclopirox treatment kit (generic for Ciclodan® Kit) |
| ketoconazole cream / shampoo (generic for Nizoral®) | clotrimazole-betamethasone lotion (generic for Lotrisone® lotion) |
| Nyamyc® Powder (branded generic for Nystop®) | clotrimazole RX solution (generic for Lotrimin® RX) |
| nystatin cream / ointment / powder (generic for Mycostatin®, Nystop®) | CNL® 8 Nail Kit |
| Nystop® Powder | Dermacin® RX Therazole PAK |
| | econazole cream (generic for Spectazole®) |
| | Ertaczo® Cream |
| | Exelderm® Cream / Solution |
| | Extina® Foam |
| | Jublia® Topical Solution |
| | Kerydin® Topical Solution |
| | ketoconazole foam (generic for Extina® Foam) |
| | Loprox® suspension/cream/kit |
| | Loprox® Shampoo |
| | Lotrisone® Cream |
| | Luzu® Cream |
| | Mentax® Cream |
| | naftifine cream / gel (generic for Naftin® Cream / Gel) |
| | Naftin® Cream / Gel |
| | Nizoral® Shampoo |
| | nystatin-triamcinolone cream / ointment (generic for Mycolog II®) |
| | oxiconazole cream (generic for Oxistat®) |
| | Oxistat® Cream / Lotion |
| | Pediaderm AF® Kit |
| | Penlac® Solution |
| | Vusion® Ointment |
| | Xolegel® Gel |

### ANTIPARASITICS

| Preferred | Non-Preferred<br>**Failure of only one preferred required to obtain a non-preferred Medication** |
|---|---|
| Eurax® Cream | Elimite® Cream |
| Natroba® Topical Suspension | Eurax® Lotion |
| permethrin cream (generic for Elimite®) | lindane lotion / shampoo |
| Sklice® Lotion | malathion lotion (generic for Ovide®) |
| | Ovide® Lotion |
| | spinosad topical suspension (generic for Natroba®) |
| | Ulesfia® |

### ANTIVIRAL

| Preferred | Non-Preferred |
|---|---|
| | acyclovir ointment/ AG (generic for Zovirax® Ointment) |
| Zovirax® Cream | Denavir® Cream |
| | Xerese® Cream |

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| | |
|---|---|
| | Zovirax® Ointment |

## IMMUNOMODULATORS

### Atopic Dermatitis

**Clinical criteria apply**

| Preferred | Non-Preferred |
|---|---|
| Elidel® Cream | Protopic® Ointment |
| | tacrolimus ointment (generic Protopic®) |
| | Dupixent® |
| | Eucrisa 2%® Ointment |

### Imidazoquinolinamines

| Preferred | Non-Preferred |
|---|---|
| ~~Aldara® Cream~~ | Aldara® Cream |
| imiquimod cream packet (generic for Aldara®) | ~~imiquimod cream packet (generic for Aldara®)~~ |
| | Zyclara® Cream / Cream Pump |

## TOPICALS

### PSORIASIS

| Preferred | Non-Preferred |
|---|---|
| calcipotriene cream / ointment / solution (generic for Dovonex®) | calcipotriene-betamethasone ointment (generic for Talconex®) |
| | Calcitrene® Ointment (branded generic for Dovonex®) |
| | calcitriol ointment (generic for Vectical®) |
| | Dovonex® Cream |
| | Enstilar® Foam |
| | Sorilux® Foam |
| | Taclonex® Ointment / Suspension |
| | Vectical® Ointment |

### ROSACEA AGENTS

| Preferred | Non-Preferred |
|---|---|
| MetroGel® | Finacea® Gel |
| MetroCream® | ~~MetroCream®~~ |
| MetroLotion® | metronidazole gel (generic for MetroGel®) |
| ~~metronidazole cream (generic for MetroCream®)~~ | Mirvaso® Gel |
| ~~metronidazole lotion (generic for MetroLotion®)~~ | metronidazole cream (generic for MetroCream®) |
| | metronidazole lotion (generic for MetroLotion®) |
| | Noritate® Cream |
| | Rosadan® Cream / Gel / Kit |
| | Soolantra® Cream |
| | Rhofade® |

### STEROIDS

#### Low Potency

| Preferred | Non-Preferred |
|---|---|
| alclometasone dipropionate cream / ointment (generic for Aclovate®) | Aqua Glycolic® HC Kit |
| DermaSmoothe® FS Scalp and Body Oil | Capex® Shampoo |
| ~~desonide cream / ointment (generic for DesOwen®)~~ | Desonate® Gel |
| hydrocortisone cream / gel/ lotion / ointment (generic for Hytone®) | desonide cream / ointment (generic for DesOwen®) |
| hydrocortisone in absorbase | desonide lotion (generic for DesOwen® Lotion) |
| | DesOwen® Lotion |
| | fluocinolone body / scalp oil (generic for Derma-Smoothe® FS Scalp / Body Oil) |
| | Micort-HC Cream |
| | Pediaderm® HC Kit / TA Kit |
| | Texacort® Solution |

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## Medium Potency

| Preferred | Non-Preferred |
|---|---|
| fluticasone cream / ointment (generic for Cutivate®) | clocortolone cream / pump (generic for Cloderm®) |
| mometasone cream / ointment / solution (generic for Elocon®) | Cloderm® Cream / Pump |
| | Cordran® Tape |
| | Cutivate® Cream / Lotion |
| | Dermatop® Cream / Emollient Cream / Ointment |
| | Elocon® Cream / Lotion / Ointment |
| | fluocinolone cream / ointment / solution (generic for Synalar®) |
| | flurandrenolide cream/lotion (generic for Cordran® SP cream and Cordran® lotion) |
| | flurandrenolide ointment (generic for Cordran® ointment) |
| | fluticasone lotion (generic for Cutivate® Lotion) |
| | hydrocortisone butyrate cream / lipid cream / ointment / solution (generic for Locoid®) |
| | hydrocortisone valerate cream / ointment (generic for Westcort®) |
| | Locoid® Lotion |
| | Luxiq® Foam |
| | Pandel® Cream |
| | predincarbate cream / ointment (generic for Dermatop®) |
| | Synalar® Cream / Ointment / Kit / Solution / TS Kit |

# TOPICALS

## STEROIDS (Continued)

## High Potency

| Preferred | Non-Preferred |
|---|---|
| betamethasone valerate cream / lotion / ointment (generic for Valisone®) | amcinonide cream / lotion / ointment (generic for Cyclocort®) |
| fluocinonide ~~cream / emollient cream / gel~~ / solution (generic for Lidex® / Lidex® E) | betamethasone dipropionate augmented cream / gel / lotion / ointment (generic for Diprolene®) |
| triamcinolone acetonide cream / lotion / ointment (generic for Kenalog®) | betamethasone dipropionate cream / lotion / ointment (generic for Diprosone®) |
| | betamethasone valerate foam (generic for Valisone®) |
| | desoximetasone cream / gel / ointment (generic for Topicort®) |
| | diflorasone cream / ointment (generic for Florone®) |
| | Diprolene® Lotion / Ointment / AF Cream |
| | fluocinonide cream / emollient cream / gel (generic for Lidex® / Lidex® E) |
| | fluocinonide ointment (generic for Lidex® Ointment) |
| | Halog® Cream / Ointment |
| | Kenalog® Spray |
| | Sernivo® Spray |
| | Dermacin Silapak® |
| | Dermacin RX Silazone® |
| | Sanaderm®RX Solution |
| | Silazone®II |
| | Topicort® Cream / Gel / Ointment / Spray / LP |
| | triamcinolone spray (generic for Kenalog® Spray) |
| | Trianex® Ointment |
| | Vanos® Cream |
| | Vanos® Cream |
| | Ellzia® |

## Very High Potency

| Preferred | Non-Preferred |
|---|---|
| clobetasol cream / emollient cream / gel / ointment (generic for Temovate®) | Apexicon E® Cream |
| clobetasol solution (generic for Cormax®) | clobetasol foam / emulsion foam (generic for Olux® / Olux-E®) |
| halobetasol propionate cream / ointment (generic for Ultravate®) | clobetasol lotion / shampoo (generic for Clobex®) |
| | clobetasol spray (generic for Clobex® spray) |
| | Clobex® Lotion / Shampoo / Spray |
| | Clodan® Kit / Shampoo |

| | |
|---|---|
| | Olux® Foam / E-Foam |
| | Temovate® Cream / Emollient Cream / Ointment |
| | Ultravate® Cream / Ointment / X Cream Combo Pack / X Ointment Combo Pack |
| | Ultravate® Lotion |

## MISCELLANEOUS

### ANTIPSORIATICS, ORAL

| Preferred | Non-Preferred |
|---|---|
| Acitretin (generic for Soriatane®) | ~~Acitretin (generic for Soriatane®)~~ |
| ~~Methoxsalen Rapid (generic for Oxsoralen-Ultra®)~~ | 8-MOP® |
| ~~Soriatane®~~ | Methoxsalen Rapid (generic for Oxsoralen-Ultra®) |
| | Oxsoralen-Ultra® |
| | Soriatane® |

### EPINEPHRINE, SELF INJECTED

| Preferred | Non-Preferred |
|---|---|
| | Adrenaclick® Auto Injector |
| ~~Adrenaclick® Auto Injector~~ | Auvi-Q® Auto Injector |
| ~~epinephrine auto injector (generic for Adrenaclick®)~~ | epinephrine auto injector (generic for Adrenaclick®) |
| epinephrine auto injector/JR (generic for Epi-Pen® Auto Injector / JR Auto Injector) 01/01/2017 | Epi-Pen® Auto Injector / JR Auto Injector |

### ESTROGEN AGENTS, COMBINATIONS

| Preferred | Non-Preferred |
|---|---|
| Activella® Tablet | Lopreeza® Tablet |
| estradiol/norethindrone tablet (generic for Activella®) | |
| FemHRT® Tablet | |
| Jinteli® (branded generic for FemHRT®) | |
| Mimvey® / Lo (branded generic for Activella®) | |
| norethindrone-ethinyl estradiol (generic for FemHRT®) | |
| Prefest® Tablet | |
| Premphase® Tablet | |
| Prempro® Tablet | |

## MISCELLANEOUS

### ESTROGEN AGENTS, ORAL/TRANSDERMAL

| Preferred | Non-Preferred |
|---|---|
| Cenestin® Tablet | Alora® Patch |
| Climara® Patch / Pro Patch | Divigel® Gel Packet |
| CombiPatch® | Duavee® Tablet |
| Enjuvia® Tablet | Elestrin® Gel |
| Estrace® Tablet | estradiol patch (generic for Vivelle-Dot®) |
| estradiol patch (generic for Climara®, Menostar®) | Menostar® Patch |
| estradiol tablet (generic for Estrace®) | Mini-Velle® Patch |
| estropipate tablet (generic for Ogen®) | |
| Evamist® Spray | |
| Menest® Tablet | |
| Premarin® Tablet | |
| Vivelle-Dot® Patch | |

### ESTROGEN AGENTS, VAGINAL PREPARATIONS

| Preferred | Non-Preferred |
|---|---|
| Estring® Vaginal Ring | Estrace® Cream |
| Premarin® Vaginal Cream | Femring® Vaginal Ring |
| Vagifem® Vaginal Tablet | Yuvafem® |
| | Intrarosa® (NR) |

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## GLUCOCORTICOID STEROIDS, ORAL

| Preferred | Non-Preferred |
|---|---|
| budesonide EC capsule (generic for Entocort® EC) | Cortef® Tablet |
| dexamethasone elixir / tablet (generic for Decadron®) | cortisone tablet (generic for Patisone®) |
| dexamethasone solution (generic for Concedix®) | Dexamethasone Intensol® Drops |
| hydrocortisone tablet (generic for Cortef®) | Dexpak® Tablet |
| methylprednisolone 4mg dosepack / tablet (generic for Medrol®) | Emflaza® |
| Orapred® ODT | Entocort® EC Capsule |
| prednisolone sodium phosphate solution (generic for PediaPred®, OraPred®, Veripred®) | Medrol® Dose Pack / Tablet |
| prednisolone solution (generic for Prelone®, Millipred®) | methylprednisolone 8mg / 16mg / 32mg / tablet (generic for Medrol®) |
| prednisone dose pack (generic for Sterapred®) | Millipred® Dose Pack / Tablet / Solution |
| prednisone solution / tablet (generic for Deltasone®) | PediaPred® Solution |
| | prednisolone ODT (generic for Orapred® ODT) |
| | Prednisone Intensol® Concentrated Solution |
| | Rayos® Tablet |
| | Veripred® Solution |

## IMMUNOMODULATORS, SYSTEMIC

**Clinical criteria apply**

**Trial and failure of only one preferred agent required**

| Preferred | Non-Preferred |
|---|---|
| Enbrel® Kit / Sureclick Syringe / Syringe | Actemra® Syringe / Vial |
| Humira® Crohn's Starter Pack / Pediatric Crohn's Starter Pack / Pen / Psoriasis Starter Pack / Syringe | Arcalyst® SQ Syringe |
| | Cimzia® Starter Kit / Syringe Kit / Vial Kit |
| | Cosentyx® Pen / Syringe |
| | Entyvio® Vial |
| | Ilaris® Injection |
| | Inflectra™ Vial |
| | Kevzara® (NR) |
| | Orencia® SQ Syringe / Clickjet |
| | Orencia® Vial |
| | Otezla® Starter Pack / Tablet |
| | Remicade® Injection |
| | Simponi® Aria Vial / Pen Injector / Syringe |
| | Stelara® Syringe |
| | Taltz® Auto-injector/syringe |
| | Xeljanz® Tablet/ Xeljanz®XR |
| | Siliq® |
| | **Exemption for Diagnosis of Neonatal Onset: Multi-System Inflammatory Disease** |
| | Kineret® Syringe |

## MISCELLANEOUS

## IMMUNOSUPPRESSANTS

| Preferred | Non-Preferred |
|---|---|
| Astagraf® XL Capsule | |
| Azasan® Tablet | |
| azathioprine tablet (generic for Imuran®) | |
| Cellcept® Capsule / Suspension / Tablet | |
| cyclosporine capsule / solution (generic for Sandimmune®) | |
| cyclosporine modified capsule / solution (generic for Gengraf®, Neoral®) | |
| Envarsus® XR Tablet | |
| Gengraf® Capsule / Solution | |
| Hecoria® Capsule | |
| Imuran® Tablet | |

| | |
|---|---|
| mycophenolate capsule / suspension / tablet (generic for Cellcept®) | |
| mycophenolic acid tablet (generic for Myfortic®) | |
| Myfortic® Tablet | |
| Neoral® Capsule / Solution | |
| Prograf® Capsule | |
| Rapamune® Solution / Tablet | |
| Sandimmune® Capsule / Solution | |
| sirolimus tablet (generic for Rapamune®) | |
| tacrolimus capsule (generic for Hecoria®, Prograf®) | |
| Zortress® Tablet | |

## OPIOID ANTAGONIST

| Preferred | Non-Preferred |
|---|---|
| naloxone ampule / syringe / vial (generic for Narcan®) | Evzio® Auto-Injector |
| naltrexone (oral) | |
| Narcan® Nasal Spray | |
| Vivitrol® | |

## OPIOID DEPENDENCE

**Clinical criteria apply**

| Preferred | Non-Preferred |
|---|---|
| Suboxone® SL Film | Bunavail® Film |
| | buprenorphine sl tablet (generic for Subutex®) |
| | buprenorphine-naloxone sl tablet (generic for Suboxone®) |
| | Zubsolv® Tablet SL |

## SKELETAL MUSCLE RELAXANTS

| Preferred | Non-Preferred |
|---|---|
| baclofen tablet (generic for Lioresal®) | Amrix® ER Capsule |
| chlorzoxazone tablet (generic for Parafon Forte®) | ~~carisoprodol tablet / compound tablet (generic for Soma® / Compound)~~ |
| cyclobenzaprine tablet (generic for Flexeril®) | Dantrium® Capsule / Vial |
| methocarbamol tablet (generic for Robaxin®) | dantrolene sodium capsule (generic for Dantrium®) |
| tizanidine tablet (generic for Zanaflex® Tablet) | Fexmid® Tablet |
| | Lorzone® Tablet |
| | metaxalone tablet (generic for Skelaxin®) |
| | orphenadrine citrate ampule / tablet / vial (generic for Norflex®) |
| | Parafon® Forte Caplet |
| | Robaxin® Tablet / Vial |
| | Skelaxin® Tablet |
| | ~~Soma® Tablet~~ |
| | tizanidine capsules (generic for Zanaflex® Capsule) |
| | Zanaflex® Capsule / Tablet |

## DIABETIC SUPPLIES

Roche Diagnostics Corporation is N.C. Medicaid's designated preferred manufacturer for glucose meters, diabetic test strips, control solutions, lancets, and lancing devices for Medicaid-primary recipients and Health Choice-primary recipients (dually eligible and third-party recipients are not affected). These products are covered under the Outpatient Pharmacy Program and can be submitted under the pharmacy point-of-sale system with a prescription. Diabetic supplies can also be submitted under Durable Medical Equipment using the NDC and HCPCS code. For questions or assistance regarding diabetic supplies, please call the Division of Medical Assistance at 919-855-4310 (DME), 919-855-4300 (Pharmacy) or Roche Diagnostics Corporation at 1-877-906-8969.

| Meters | Lancing Devices |
|---|---|
| ACCU-CHEK® Aviva Plus care kit | ACCU-CHEK® Softclix lancing device kit (Blue) |
| ACCU-CHEK® Compact Plus care kit | ACCU-CHEK® Softclix lancing device kit (Black) |
| ACCU-CHEK® Nano SmartView care kit | ACCU-CHEK® Multiclix lancing device kit |
| ACCU-CHEK® Guide Retail care kit | |
| **Test Strips** | ACCU-CHEK® Fastclix lancing device kit |

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ACCU-CHEK® AVIVA 50 ct test strips
ACCU-CHEK® AVIVA PLUS 50 ct test strips
ACCU-CHEK® SMARTVIEW 50 ct test strips
ACCU-CHEK® COMPACT Plus 51 ct test strips
ACCU-CHEK® Guide 50 ct test strips

**Lancets**

ACCU-CHEK® Multiclix 102 ct Lancets
ACCU-CHEK® Softclix 100 ct Lancets
ACCU-CHEK® Fastclix 102 ct Lancets

**Control Solutions**

ACCU-CHEK® Aviva glucose control solution (2 levels)
ACCU-CHEK® Compact blue glucose control solution (2 levels)
ACCU-CHEK® Compact Plus clear glucose control solution (2 levels)
ACCU-CHEK® SmartView glucose control solution (1 level)
ACCU-CHEK® Guide 2-Level control solution (2-levels)