North Carolina Division of Health Benefits North Carolina Medicaid Preferred Drug List (PDL) Effective DATE: Draft for July 13, 2023 Meeting Trial and failure of two Preferred drugs are required unless only one Preferred option is listed or is otherwise indicated. Not all therapeutic drug classes are included on the PDL. All drugs in the classes not included are considered Preferred. In addition to trial and failure criteria, clinical criteria (indicated in RED) may also apply. New to market products typically default to Non-Preferred status until

reviewed by the PDL Panel. These drugs are listed as TO BE REVIEWED. Drugs requiring prior authorization, clinical criteria and prior authorization request forms can be found at:

https://www.nctracks.nc.gov/content/public/providers/pharmacy.html More information on the PDL can be found at: https://medicaid.ncdhhs.gov/providers/programs-services/prescription-drugs/outpatient-pharmacy-services

Yellow shade signifies a new product being added as a new to market Non-Preferred product OR current coverage is being clarified

Orange shade signifies a significant change to the drug, category, or a clinical recommendation

Pink Shade signifies an Off-Cycle PDL move from Preferred to Non-Preferred or vice versa

Green shade signifies a Brand / Generic switch within the same category

Peach shade signifies categories that will be open for discussion even though there are no recommendations in that category

Purple shade signifies a product either no longer covered (rebatable) or no longer available from the manufacturer		
ALZHEIMER'S AGENTS		
Preferred	Non-Preferred	
donepezil 5mg, 10mg tablet / ODT (generic for Aricept <sup>®</sup> / ODT)	Adlarity® Patch	
Exelon <sup>®</sup> Patch	Aduhelm <sup>™</sup> Vial Clinical Criteria Apply	
memantine tablet / titration pack (generic for Namenda®)	Aricept <sup>®</sup> Tablet	
rivastigmine capsule (generic for Exelon®)	donepezil 23mg tablet (generic for Aricept <sup>®</sup> )	
	galantamine ER capsule / solution / tablet (generic for Razadyne <sup>®</sup> / ER)	
	Leqembi™ (lecenemab-irmb) Vial	
	memantine ER capsule / solution (generic for Namenda <sup>®</sup> XR / Solution)	
	Namenda <sup>®</sup> Titration Pack / XR Capsule / XR Titration Pack	
	Namenda <sup>®</sup> Tablet	
	Namzaric® Capsule / Titration Pack	
	rivastigmine (Transdermal) (generic for Exelon <sup>®</sup> Patch)	
Razadyne <sup>®</sup> ER Capsule		
Add new to market product Leqembi™ (lecenemab-irmb) Vial as Non-Preferred		

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OPIOID ANALGESICS	
Long Acting Opioids	
Clinical criteria apply to all drugs in this class	
Preferred	Non-Preferred
Butrans <sup>®</sup> Patch	Belbuca <sup>®</sup> (Buccal) Film
fentanyl patch 12mcg / 25mcg / 50mcg / 75mcg / 100mcg (generic for Duragesic®)	buprenorphine film (generic for Belbuca®)
methadone concentrate / diskets / intensol / tablets / solution	buprenorphine patch (generic for Butrans <sup>®</sup> Patch)
morphine sulfate ER tablet (generic for MS Contin <sup>®</sup> )	Conzip® Capsule
OxyContin <sup>®</sup> Tablet	fentanyl patch (37.5. / 62.5 / 87.5mcg dosages) (generic for Duragesic®)
tramadol ER tablet (generic for Ultram ER <sup>®</sup> , Ryzolt <sup>®</sup> )	hydrocodone ER capsule (generic for Zohydro <sup>®</sup> ER)
Xtampza <sup>®</sup> ER Capsule	hydrocodone ER tablet (generic for Hysingla® ER Tablet)
	hydromorphone ER tablet (generic for Exalgo <sup>®</sup> )
	Hysingla <sup>®</sup> ER Tablet
	Kadian® Capsule
	morphine sulfate ER capsule (generic for Avinza <sup>®</sup> , Kadian <sup>®</sup> )
	MorphaBond* ER
	MS Contin® Tablet
	Nucynta <sup>®</sup> ER Tablet
	oxycodone ER tablet (generic for OxyContin <sup>®</sup> )
	oxymorphone ER tablet
	tramadol ER capsule (generic for Conzip <sup>®</sup> Capsule)
	Zohydro <sup>®</sup> ER Capsule

No recommendations. Class open for comments.

Orally Disintegrating /	/ Oral Spray Schedule II Opioids
Clinical criteria apply to all drugs in this class	
Preferred	Non-Preferred
Actiq <sup>®</sup> Lozenge	Dsuvia <sup>™</sup> SL Tablet
	fentanyl citrate buccal tablet (generic for Fentora®)
	fentanyl citrate lozenge (generic for Actiq <sup>®</sup> )
	Fentora <sup>®</sup> Buccal Tablet

### No recommendations. Class open for comments.

Short Acting Schedule II Opioids		
Clinical criteria apply to all drugs in this class		
Preferred	Non-Preferred	
Endocet <sup>®</sup> Tablet (branded generic for Percocet <sup>®</sup> )	Apadaz <sup>™</sup> Tablet	
hydrocodone-acetaminophen solution / tablet (generic for Hycet <sup>®</sup> , Lorcet <sup>®</sup> , Lortab <sup>®</sup> , Norco <sup>®</sup> , Vicodin <sup>®</sup> )	benzhydrocodone-acetaminophen tablet (generic for Apadaz <sup>™</sup> Tablet)	
hydrocodone-ibuprofen tablet (generic for Ibudone®, Reprexain®, Vicoprofen®)	codeine sulfate tablet	
hydromorphone tablet (generic for Dilaudid® Tablet)	Dilaudid <sup>®</sup> Liquid / Tablet	
morphine solution / tablet (generic for MSIR <sup>®</sup> )	hydromorphone solution / suppository (generic for Dilaudid <sup>®</sup> )	
oxycodone solution / tablet (generic for Roxicodone®)	levorphanol tablet (generic for Levo-Dromoran <sup>®</sup> )	
oxycodone-acetaminophen capsules (generic for Tylox <sup>®</sup> )	Loreet® Tablet / HD Tablet	
oxycodone-acetaminophen tablets (generic for Percocet®)	Lortab <sup>®</sup> Elixir	
	meperidine solution / tablet (generic for Demerol®)	
	morphine oral syringe	

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More information on the PDL can be found at: https://medicaid.ncdhhs.gov/providers/programs-services/prescription-drugs/outpatient-pharmacy-services morphine suppositories (generic for Roxanol®) Nalocet<sup>®</sup> Tablet Nucynta® Tablet oxycodone-acetaminophen solution oxycodone-aspirin tablet (generic for Endodan®, Percodan®) oxycodone concentrated solution (generic for Roxicodone® Intensol) oxycodone oral syringe oxymorphone tablet (generic for Opana®) oxycodone capsule (generic for OxyIR®)

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NEUROPATHIC PAIN		
Preferred	Non-Preferred	
duloxetine capsule (generic for Cymbalta®)	Cymbalta® Capsule	
gabapentin capsule / solution / tablet (generic for Neurontin®)	Drizalma <sup>™</sup> Sprinkle	
lidocaine patch (generic for Lidoderm®) - Clinical criteria apply	duloxetine capsule (generic for Irenka $^{\circledast}$ )	
pregabalin capsule /solution (generic for Lyrica <sup>®</sup> Capsule / Solution)	Gratise* (gabapentin) Tablet	
	Horizant <sup>®</sup> Tablet	
	Lidoderm <sup>®</sup> Patch - Clinical criteria apply	
	Lyrica® Capsule / Solution	
	Lyrica <sup>®</sup> CR Tablet	
	Neurontin <sup>®</sup> Capsule / Solution / Tablet	
	pregabalin ER tablet (generic for Lyrica <sup>®</sup> CR Tablet)	
	Qutenza® Kit	
	Savella® Tablet / Titration Pack	
	ZTLido <sup>™</sup> Patch - Clinical criteria apply	
Add Gralise <sup>®</sup> (gabapentin) Tablet as Non-Preferred		
ANTICONVULSANTS		
CARBAMAZEPINE DERIVATIVES		
	re disorder are exempt from trial and failure criteria and may use any carbamazepine product.	
Preferred	Non-Preferred	
Aptiom <sup>®</sup> Tablet	Carbatrol® Capsule	
carbamazepine chewable tablet (generic for Tegretol <sup>®</sup> )	carbamazepine suspension / tablet (generic for Tegretol <sup>®</sup> )	
carbamazepine ER capsule (generic for Carbatrol <sup>®</sup> )	carbanazepine XR tablet (generic for Tegretol XR®)	
Equetro <sup>®</sup> Capsule	Epitol® Tablet	
oxcarbazepine <del>suspension /</del> tablet (generic for Trileptal <sup>®</sup> )	oxcarbazepine suspension (generic for Trileptal®)	
Oxtellar® XR Tablet	Trileptal <sup>®</sup> Tablet / <del>Suspension</del>	
Tegretol® Suspension / Tablet / XR Tablet		
Trilentel <sup>®</sup> Suspension		

### Brand Over Generic Switch: Move Trileptal® Suspension to Preferred and move oxcarbazepine suspension (generic for Trileptal®) to Non-Preferred

FIR		
FIRST GENERATION		
Patients with a diagnosis of seizure disorder are exempt	from trial and failure criteria and may use any first generation product.	
Preferred	Non-Preferred	
Celontin <sup>®</sup> Kapseal	Depakote® ER Tablet / Sprinkle Capsule	
Dilantin® Capsule / Infatab / Suspension	Depakote <sup>®</sup> Tablet	
divalproex sprinkle capsule / ER tablet / tablet (generic for Depakote® / ER / Sprinkle)	felbamate suspension / tablet (generic for Felbatol <sup>®</sup> )	
ethosuximide capsule / solution (generic for Zarontin $^{ tilde{0}}$ )	Mysoline <sup>®</sup> Tablet	
Felbatol® Suspension / Tablet	Zarontin® Capsule / Solution	
phenobarbital tablet / elixir / solution		
Phenytek <sup>®</sup> Capsule		
phenytoin chewable / extended capsules / infatab / suspension (generic for Dilantin®)		
phenytoin extended capsules (generic for Phenytek®)		
primidone Tablet (generic for Mysoline®)		
valproic acid capsule / solution (generic for Depakene®)		
	OND GENERATION	
Patients with a diagnosis of seizure disorder are exempt fr	rom trial and failure criteria and may use any second generation product.	
Preferred	Non-Preferred	
Banzel <sup>®</sup> Suspension / Tablet	clonazepam ODT (generic for Klonopin <sup>®</sup> Wafer)	
Briviact® Tablet and Solution	Elepsia <sup>™</sup> XR Tablet	
clobazam suspension (generic for Onfi® Suspension)	Keppra® Tablet / Solution / XR Tablet	
clobazam tablet (generic for Onfi® Tablet)	Klonopin <sup>®</sup> Tablet	
clonazepam tablet (generic for Klonopin®)	Lamictal® Chewable / ODT / ODT Starter Kit / Starter Kit / Tablet / XR / XR Starter Kit	
Diacomit® Capsule / Powder Pack	lamotrigine starter kits (generic for Lamictal <sup>®</sup> )	
Diastat <sup>®</sup> Acudial <sup>®</sup> / Pedi System	Lyrica® Capsule / Solution	
diazepam rectal / system (generic for Diastat® Accudial / Pedi System)	Neurontin® Capsule / Solution / Tablet	
Epidiolex <sup>®</sup> Solution - Clinical Criteria Apply	Onfi <sup>®</sup> Suspension / Tablet	
Eprontia <sup>™</sup> Solution	Qudexy® XR Capsule	
Fintepla <sup>®</sup> Solution	rufinamide suspension (generic for Banzel <sup>®</sup> )	
Fycompa® Tablet / Suspension	rufinamide tablet (generic for Banzel $^{\oplus}$ )	
gabapentin capsule / solution (generic for Neurontin $^{\circ}$ )	Spritam <sup>®</sup> Tablet	
gabapentin tablet (generic for Neurontin <sup>®</sup> Tablet)	Subvenite <sup>®</sup> Tab Start Kit	
Gabitril <sup>®</sup> Tablet	Sympazan <sup>®</sup> Film	
lacosamide solution / tablet (generic for Vimpat®)	tiagabine tablet (generic for Gabitril®)	
lamotrigine chewable / tablet (generic for Lamictal®)	Topamax <sup>®</sup> Sprinkle Capsule / Tablet	
lamotrigine ER tablet / ODT / ODT Starter Kit / Starter Kit (generic for Lamictal® XR / ODT)	topiramate ER capsule (generic for Qudexy <sup>®</sup> )	
levetiracetam tablet / ER tablet / solution (generic for Keppra® / XR)	topiramate ER capsule (generic for Trokendi XR <sup>®</sup> ) - Trial and Failure of Trokendi <sup>®</sup> XR Capsule Required for Coverage	
Nayzilam <sup>®</sup> Nasal Spray	Trokendi <sup>®</sup> XR Capsule	
Roweepra <sup>™</sup> Tablet	vigabatrin powder packet / tablet (generic for Sabril <sup>®</sup> Powder Packet / Tablet)	
Sabril® Powder Packet	Vigadrone® Powder Packet	
Sabril <sup>®</sup> Tablet	Vimpat <sup>®</sup> Solution / Starter Kit / Tablet	
Subvenite® Tab Start Kit	Zonisade <sup>™</sup> Oral Suspension	
Subvenite® Tablet	Ztalmy® Oral Suspension	
topiramate sprinkle capsule / tablet (generic for Topamax <sup>®</sup> )		
Valtoco® Nasal Spray		
Xcopri® Tablet / Titration Pack		
zonisamide capsule (generic for Zonegran®)		

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Add new to market product topiramate ER capsule (generic for Trokendi XR®) as Non-Preferred with trial and failure criteria Move Subvenite® Tab Start Kit from Non-Preferred to Preferred

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Add Augmentin* (amozicillin-clavulants) Sospension / SPS 500 / XR Tablet as Non-Preferred <u>Remozil</u> : Keflex* Capuid           Number of the second of		
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ELS * Campler / Finands / Sampansina         anti-approxemation           Develor* 2014/00 Sampansina         Sampansina           Develor 2014/00 Sampansina         Sampansina           Professor 2014         Sampansina           Developed Packet / Sampansina         Sampansina           Professor 2014         Sampansina           Professor		-
Inpredictability         Ensemity         Ensemity           Explored/in         Explored/in         Explored/in           Explored/i	azithromycin powder packet / suspension / tablet (generic for Zithromax®)	clarithromycin ER tablet (generic for Biaxin $\mathrm{XL}^{\oplus}$ )
preferency is a _ Ming surgension (genetic for E18.5 <sup>®</sup> Suggension / Tablet/ Tris Pak / Z-Pak           cryditromycies is _ E16000000000000000000000000000000000000	azithromycin powder packet / suspension / tablet (generic for Zithromax <sup>®</sup> ) clarithromycin suspension / tablet (generic for Biaxin <sup>®</sup> )	clarithromycin ER tablet (generic for Biaxin XL <sup>®</sup> ) e <del>rythromycin e.s. 200 mg suspension (generic for E.E.S.<sup>®</sup> Suspension)-</del>
synthesis a. 400 measures to Respond?	azithromycin powder packet / suspension / tablet (generic for Zithromax <sup>®</sup> ) clarithromycin suspension / tablet (generic for Biaxin <sup>®</sup> ) E.E.S. <sup>®</sup> Granules / Filmtab / Suspension	clarithromycin ER tablet (generic for Biaxin XL <sup>®</sup> ) e <del>rythromycin e.s. 200 mg suspension (generic for E.E.S.<sup>®</sup> Suspension)-</del> eryrthomy <del>cin e.s. 400 mg suspension (Generic for Eryped®)</del>
and unspecies for Egg.*)	azithromycin powder packet / suspension / tablet (generic for Zithromax <sup>®</sup> ) clarithromycin suspension / tablet (generic for Biaxin <sup>®</sup> ) E.E.S. <sup>®</sup> Granules / Filmtab / Suspension Eryped <sup>®</sup> -2004400 Suspension Erythrocin <sup>®</sup> Filmtab	clarithromycin ER tablet (generic for Biaxin XL <sup>®</sup> ) erythromycin e.s. 200 mg suspension (generic for EES. <sup>®</sup> Suspension)- eryrthomycin e.s. 400 mg suspension (Generic for Eryped®) Eryped® 200 400 Suspension Ery-Tab® Tablet
aptimany	azithromycin powder packet / suspension / tablet (generic for Zithromax <sup>®</sup> ) clarithromycin suspension / tablet (generic for Biaxin <sup>®</sup> ) E.E.S. <sup>®</sup> Granules / Filmtab / Suspension Erypea <sup>®</sup> 2004/00 Suspension Erythroin <sup>®</sup> Filmtab erythromycin e.s. 200 mg suspension (generic for E.E.S. <sup>®</sup> Suspension)	clarithromycin ER tablet (generic for Biaxin XL <sup>®</sup> ) erythromycin e.s. 200 mg suspension (generic for EES. <sup>®</sup> Suspension)- eryrthomycin e.s. 400 mg suspension (Generic for Eryped®) Eryped® 200 400 Suspension Ery-Tab® Tablet
crythromycin es. tablet (generic for E.E.5 <sup>6</sup> Filmuk)  Generic Over Brand Switch: Move Eryped® 200/400 Suspension to Non-Preferred and move erythromycin ethylsuccinate (200 mg and 400 mg) to Preferred Nitromidizoles (Gastrointestinal Antibiotics)  Preferred Non-Preferred Non-Prefer	azithromycin powder packet / suspension / tablet (generic for Zithromax <sup>®</sup> ) clarithromycin suspension / tablet (generic for Biaxin <sup>®</sup> ) E.E.S. <sup>®</sup> Granules / Filmtab / Suspension Expect <sup>®</sup> - 200400 Suspension Erythrowin <sup>®</sup> Filmtab erythromycin e.s. 200 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (Generic for Eryped <sup>®</sup> )	clarithromycin ER tablet (generic for Biaxin XL <sup>®</sup> ) erythromycin e.s. 200 mg suspension (generic for EES. <sup>®</sup> Suspension)- eryrthomycin e.s. 400 mg suspension (Generic for Eryped®) Eryped® 200 400 Suspension Ery-Tab® Tablet
Generic Over Brand Switch: Move Eryped* 200/400 Suspension to Non-Preferred and move erythromycin ethylsuccinate (200 mg and 400 mg) to Preferred         Nitromidazoles (Gastrointestinal Antibiotics)         Preferred         Mono-Preferred         Mono-Preferred </td <td>azithromycin powder packet / suspension / tablet (generic for Zithromax<sup>®</sup>) clarithromycin suspension / tablet (generic for Biaxin<sup>®</sup>) E.E.S.<sup>®</sup> Granules / Filmtab / Suspension Eryper<sup>®</sup>-200/400 Suspension Erythromycin <sup>®</sup> Filmtab erythromycin e.s. 200 mg suspension (generic for E.E.S.<sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (Generic for Eryped<sup>®</sup>) erythromycin EC capsule (generic for Erype<sup>®</sup>)</td> <td>clarithromycin ER tablet (generic for Biaxin XL<sup>®</sup>) erythromycin e.s. 200 mg suspension (generic for EES.<sup>®</sup> Suspension)- eryrthomycin e.s. 400 mg suspension (Generic for Eryped®) Eryped® 200 400 Suspension Ery-Tab® Tablet</td>	azithromycin powder packet / suspension / tablet (generic for Zithromax <sup>®</sup> ) clarithromycin suspension / tablet (generic for Biaxin <sup>®</sup> ) E.E.S. <sup>®</sup> Granules / Filmtab / Suspension Eryper <sup>®</sup> -200/400 Suspension Erythromycin <sup>®</sup> Filmtab erythromycin e.s. 200 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (Generic for Eryped <sup>®</sup> ) erythromycin EC capsule (generic for Erype <sup>®</sup> )	clarithromycin ER tablet (generic for Biaxin XL <sup>®</sup> ) erythromycin e.s. 200 mg suspension (generic for EES. <sup>®</sup> Suspension)- eryrthomycin e.s. 400 mg suspension (Generic for Eryped®) Eryped® 200 400 Suspension Ery-Tab® Tablet
Preferred     Non-Preferred       metronidzole tablet (generic for Flagyf <sup>®</sup> )     Aencol <sup>®</sup> DR Tablet       vancomycin capsale (generic for Vancon <sup>®</sup> )     Difticid <sup>®</sup> Supension // Tablet - Trial and failure of only vancomycin is required for treatment of Clostridium difficile       Firvan <sup>™</sup> Solution     Firvan <sup>™</sup> Solution       I     Bagg <sup>®</sup> Capsale / Fablet       I     metronidzore depuble (generic for Flagyf <sup>®</sup> )       I     metronidzore depuble (generic for Alma <sup>®</sup> Tablet)       I     metronidzore depuble (generic for Alma <sup>®</sup> Tablet)       I     netzostande depuble (generic for Alma <sup>®</sup> Tablet)       I     netzostande depuble (generic for Tinduma <sup>®</sup> )       I     Solose <sup>™</sup> Granules       I     Nancomycin cal solution       I     vancomycin cal solution       I     vancomycin cal solution       I     vancomycin cal solution       I     vancomycin cal solution (generic for Firvang <sup>™</sup> )       I     vancomycin cal solution       I     vancomycin cal solution (generic for Firvang <sup>™</sup> )       I     vancomycin cal solution (generic for Firvang <sup>™</sup> )       I     Non-Preferred       I     I       I     Vancon <sup>®</sup> (agnale       I     Vancon <sup>®</sup> (agnale)       I     Vancon <sup>®</sup> (agnale)       I     Vancon <sup>®</sup> (agnale)       I     Vancon <sup>®</sup> (agn	azithromycin powder packet / suspension / tablet (generic for Zithromax <sup>®</sup> ) clarithromycin suspension / tablet (generic for Biaxin <sup>®</sup> ) E.E.S. <sup>®</sup> Granules / Filmtab / Suspension Erythroein <sup>®</sup> Filmtab erythromycin e.s. 400 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (Generic for Eryped <sup>®</sup> ) erythromycin EC capsule (generic for Erye <sup>®</sup> ) erythromycin filmtab	clarithromycin ER tablet (generic for Biaxin XL <sup>®</sup> ) erythromycin e.s. 200 mg suspension (generic for EES. <sup>®</sup> Suspension)– eryrthomycin e.s. 400 mg suspension (Generic for Eryped®) Eryped® 200 400 Suspension Ery-Tab <sup>®</sup> Tablet
Preferred     Non-Preferred       metronidzole tablet (generic for Flagyf <sup>®</sup> )     Aencol <sup>®</sup> DR Tablet       vancomycin capsale (generic for Vancon <sup>®</sup> )     Difticid <sup>®</sup> Supension // Tablet - Trial and failure of only vancomycin is required for treatment of Clostridium difficile       Firvan <sup>™</sup> Solution     Firvan <sup>™</sup> Solution       I     Bagg <sup>®</sup> Capsale / Fablet       I     metronidzore depuble (generic for Flagyf <sup>®</sup> )       I     metronidzore depuble (generic for Alma <sup>®</sup> Tablet)       I     metronidzore depuble (generic for Alma <sup>®</sup> Tablet)       I     netzostande depuble (generic for Alma <sup>®</sup> Tablet)       I     netzostande depuble (generic for Tinduma <sup>®</sup> )       I     Solose <sup>™</sup> Granules       I     Nancomycin cal solution       I     vancomycin cal solution       I     vancomycin cal solution       I     vancomycin cal solution       I     vancomycin cal solution (generic for Firvang <sup>™</sup> )       I     vancomycin cal solution       I     vancomycin cal solution (generic for Firvang <sup>™</sup> )       I     vancomycin cal solution (generic for Firvang <sup>™</sup> )       I     Non-Preferred       I     I       I     Vancon <sup>®</sup> (and solution (generic for Firvang <sup>™</sup> ) as Non-Preferred       I     I       I     I       I     I       I     I	azithromycin powder packet / suspension / tablet (generic for Zithromax <sup>®</sup> ) clarithromycin suspension / tablet (generic for Biaxin <sup>®</sup> ) E.E.S. <sup>®</sup> Granules / Filmtab / Suspension Exptace <sup>®</sup> Filmtab / Suspension Exptace <sup>®</sup> Filmtab erythromycin e.s. 200 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (Generic for E.P.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (Generic for E.P.S. <sup>®</sup> Suspension) erythromycin E C apsule (generic for Eryte <sup>®</sup> ) erythromycin filmtab erythromycin e.s. tablet (generic for E.E.S. <sup>®</sup> Filmtab)	clarithromycin ER tablet (generic for Biaxin XL <sup>®</sup> ) erythromycin e.s. 200 mg suspension (generic for EES. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (Generic for Eryped®) Eryped® 200400 Suspension Eryped® 200400 Suspension EryrTab <sup>®</sup> Tablet Zithromax <sup>®</sup> Powder Packet / Suspension / Tablet / Tri-Pak / Z-Pak
metronidazole tablet (generic for Flagst <sup>®</sup> ) Aencolo <sup>6</sup> DR Tablet Vanconin <sup>6</sup> ) Dificio <sup>6</sup> Suspension / Tablet - Trial and failure of only vanconycin is required for treatment of Clostridium difficile Firvan <sup>73</sup> Solution Firvan <sup>74</sup> Solution Firvan	azithromycin powder packet / suspension / tablet (generic for Zithromax <sup>®</sup> ) clarithromycin suspension / tablet (generic for Biaxin <sup>®</sup> ) E.E.S. <sup>®</sup> Granules / Filmtab / Suspension Exptace <sup>®</sup> Filmtab / Suspension Exptace <sup>®</sup> Filmtab erythromycin e.s. 200 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (Generic for E.P.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (Generic for E.P.S. <sup>®</sup> Suspension) erythromycin E C apsule (generic for Eryte <sup>®</sup> ) erythromycin filmtab erythromycin e.s. tablet (generic for E.E.S. <sup>®</sup> Filmtab)	clarithromycin ER tablet (generic for Biaxin XL <sup>®</sup> ) erythromycin e.s. 200 mg suspension (generic for EES. <sup>®</sup> Suspension) erythomycin e.s. 400 mg suspension (Generic for Eryped®) Eryped® 200400 Suspension Eryped® 200400 Suspension EryrTab <sup>®</sup> Tablet Zithromax <sup>®</sup> Powder Packet / Suspension / Tablet / Tri-Pak / Z-Pak
Dificid <sup>®</sup> Suspension / Tablet - Trial and failure of only vancemycin is required for treatment of Clostridium difficile         Image: Solution         Vancomycin oral solution (generic for Finvang <sup>TM</sup> )         Image: Solution         Vancomycin oral solution (generic for Finvang <sup>TM</sup> )         Image: Solution         Vancomycin oral solution (generic for Finvang <sup>TM</sup> )         Image: Solution         Vancomycin oral solution (generic for Finvang <sup>TM</sup> )         Image: Solution <td>azithromycin powder packet / suspension / tablet (generic for Zithromax<sup>®</sup>) clarithromycin suspension / tablet (generic for Biaxin<sup>®</sup>) E.E.S.<sup>®</sup> Granules / Filmtab / Suspension Eryptor<sup>®</sup> 200/400 Suspension Erythromycin e.s. 200 mg suspension (generic for E.E.S.<sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (Generic for E.Y.e.S.<sup>®</sup> Suspension) erythromycin EC capsule (generic for Eryped<sup>®</sup>) erythromycin EC capsule (generic for E.S.<sup>®</sup> Filmtab) erythromycin e.s. tablet (generic for E.E.S.<sup>®</sup> Filmtab) <u>Generic Over Brand Switch</u>: Move Eryped<sup>®</sup> 200/400 Suspension to Non-Pr</td> <td>clarithromycin ER tablet (generic for Biaxin XL<sup>®</sup>) arythromycin e.s. 200 mg suspension (Generic for ETES,<sup>®</sup> Suspension) erynthromycin e.s. 200 mg suspension (Generic for Eryped®) Eryped® 2004000 Suspension Ery-Tab<sup>®</sup> Tablet Zithromax<sup>®</sup> Powder Packet / Suspension / Tablet / Tri-Pak / Z-Pak eferred and move erythromycin ethylsuccinate (200 mg and 400 mg) to Preferred</td>	azithromycin powder packet / suspension / tablet (generic for Zithromax <sup>®</sup> ) clarithromycin suspension / tablet (generic for Biaxin <sup>®</sup> ) E.E.S. <sup>®</sup> Granules / Filmtab / Suspension Eryptor <sup>®</sup> 200/400 Suspension Erythromycin e.s. 200 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (Generic for E.Y.e.S. <sup>®</sup> Suspension) erythromycin EC capsule (generic for Eryped <sup>®</sup> ) erythromycin EC capsule (generic for E.S. <sup>®</sup> Filmtab) erythromycin e.s. tablet (generic for E.E.S. <sup>®</sup> Filmtab) <u>Generic Over Brand Switch</u> : Move Eryped <sup>®</sup> 200/400 Suspension to Non-Pr	clarithromycin ER tablet (generic for Biaxin XL <sup>®</sup> ) arythromycin e.s. 200 mg suspension (Generic for ETES, <sup>®</sup> Suspension) erynthromycin e.s. 200 mg suspension (Generic for Eryped®) Eryped® 2004000 Suspension Ery-Tab <sup>®</sup> Tablet Zithromax <sup>®</sup> Powder Packet / Suspension / Tablet / Tri-Pak / Z-Pak eferred and move erythromycin ethylsuccinate (200 mg and 400 mg) to Preferred
Firvang <sup>™</sup> Solution         Firvang <sup>™</sup> Solution         Firvang <sup>™</sup> Solution         Internet Solution         Internet Solution         netternitazoe capsule (genetic for Flagh <sup>®</sup> )         Internet Solution         netternitazoe capsule (genetic for Flagh <sup>®</sup> )         Internet Solution         netternitazoe capsule (genetic for Munita <sup>®</sup> )         Internet Solution         Internet Solution (genetic for Firvang <sup>™</sup> )         Internet Solution (genetic for Firvang <sup>™</sup> )         Internet Solution (genetic for Firvang <sup>™</sup> ) as Non-Preferred         Removal:       Flagyl <sup>®</sup> Tablet         Internet Solution (genetic for Firvang <sup>™</sup> ) as Non-Preferred         Removal:       Flagyl <sup>®</sup> Tablet         Internet Solution (genetic for Firvang <sup>™</sup> ) as Non-Preferred         Removal:       Flagyl <sup>®</sup> Tablet	azithromycin powder packet / suspension / tablet (generic for Zithromax <sup>®</sup> ) clarithromycin suspension / tablet (generic for Biaxin <sup>®</sup> ) E.E.S. <sup>®</sup> Granules / Filmtab / Suspension Eryptor <sup>®</sup> 2004000 Suspension Eryptor <sup>®</sup> Filmtab erythromycin e.s. 400 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (Generic for E.E.S. <sup>®</sup> Suspension) erythromycin EC capsule (generic for E.P.g. <sup>®</sup> ) erythromycin e.s. tablet (generic for E.E.S. <sup>®</sup> Filmtab) Erythromycin e.s. tablet (generic for E.E.S. <sup>®</sup> Filmtab) <u>Generic Over Brand Switch</u> : Move Eryped <sup>®</sup> 200/400 Suspension to Non-Pr Nitromidazoles (	clarithromycin ER tablet (generic for Biaxin XL <sup>®</sup> ) erythromycin e.s. 200 mg suspension (generic for EES. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (Generic for Eryted®) Eryped® 200400 Suspension EryTab <sup>®</sup> Tablet Zithromax <sup>®</sup> Powder Packet / Suspension / Tablet / Tri-Pak / Z-Pak efferred and move erythromycin ethylsuccinate (200 mg and 400 mg) to Preferred Gastrointestinal Antibiotics) Non-Preferred
Image:	azithromycin powder packet / suspension / tablet (generic for Zithromax <sup>®</sup> ) clarithromycin suspension / tablet (generic for Biaxin <sup>®</sup> ) E.E.S. <sup>®</sup> Granules / Filmtab / Suspension Exped <sup>®</sup> 200400 Suspension Erythromycin e.s. 200 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (Generic for E.E.S. <sup>®</sup> Suspension) erythromycin EC capsule (generic for Eryped <sup>®</sup> ) erythromycin filmtab erythromycin e.s. tablet (generic for E.E.S. <sup>®</sup> Filmtab) Generic Over Brand Switch: Move Eryped <sup>®</sup> 200/400 Suspension to Non-Pri Nitromidazoles ( Preferred metronidazole tablet (generic for Flagyl <sup>®</sup> )	clarithromycin ER tablet (generic for Biaxin XL <sup>®</sup> ) erythromycin e.s. 200 mg suspension (generic for EES. <sup>®</sup> Suspension) erythromycin e.s. 200 mg suspension (Generic for Eryped®) Eryped® 200.400 Suspension Eryped® 200.400 Suspension Eryped® Zuthromax <sup>®</sup> Powder Packet / Suspension / Tablet / Tri-Pak / Z-Pak Zithromax <sup>®</sup> Powder Packet / Suspension / Tablet / Tri-Pak / Z-Pak eferred and move erythromycin ethylsuccinate (200 mg and 400 mg) to Preferred Gastrointestinal Antibiotics) Non-Preferred Aemcolo <sup>®</sup> DR Tablet
International metronidazole capsule (generic for Flagyl <sup>®</sup> )       International metronidazole capsule (generic for Flagyl <sup>®</sup> )       International metronic for A distance       International metronic for A distance for A distance of A distance       International metronic for A distance	azithromycin powder packet / suspension / tablet (generic for Zithromax <sup>®</sup> ) clarithromycin suspension / tablet (generic for Biaxin <sup>®</sup> ) E.E.S. <sup>®</sup> Granules / Filmtab / Suspension Exped <sup>®</sup> 200400 Suspension Erythromycin e.s. 200 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (Generic for E.E.S. <sup>®</sup> Suspension) erythromycin EC capsule (generic for Eryped <sup>®</sup> ) erythromycin filmtab erythromycin e.s. tablet (generic for E.E.S. <sup>®</sup> Filmtab) Generic Over Brand Switch: Move Eryped <sup>®</sup> 200/400 Suspension to Non-Pri Nitromidazoles ( Preferred metronidazole tablet (generic for Flagyl <sup>®</sup> )	clarithromycin ER tablet (generic for Biaxin XL <sup>®</sup> ) erythromycin e.s. 200 mg suspension (generic for EES. <sup>®</sup> Suspension)- erythromycin e.s. 200 mg suspension (Generic for Eryped®) Eryped® 200.400 Suspension Ery-Tab® Tablet Zithromax® Powder Packet / Suspension / Tablet / Tri-Pak / Z-Pak  eferred and move erythromycin ethylsuccinate (200 mg and 400 mg) to Preferred Gastrointestinal Antibiotics) Gastrointestinal Antibiotics Non-Preferred Aemcolo® DR Tablet Dificid® Suspension / Tablet - Trial and failure of only vancomycin is required for treatment of Clostridium difficile
Image: Instant of the second of the secon	azithromycin powder packet / suspension / tablet (generic for Zithromax <sup>®</sup> ) clarithromycin suspension / tablet (generic for Biaxin <sup>®</sup> ) E.E.S. <sup>®</sup> Granules / Filmtab / Suspension Exped <sup>®</sup> 200400 Suspension Erythromycin e.s. 200 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (Generic for E.E.S. <sup>®</sup> Suspension) erythromycin EC capsule (generic for Eryped <sup>®</sup> ) erythromycin filmtab erythromycin e.s. tablet (generic for E.E.S. <sup>®</sup> Filmtab) Generic Over Brand Switch: Move Eryped <sup>®</sup> 200/400 Suspension to Non-Pri Nitromidazoles ( Preferred metronidazole tablet (generic for Flagyl <sup>®</sup> )	clarithromycin ER tablet (generic for Biaxin XL <sup>®</sup> ) arythromycin e.x. 200 mg suspension (Generic for ELS, <sup>®</sup> Suspension)- erynthromycin e.x. 200 mg suspension (Generic for Eryned®) Eryned® 200400 Suspension Ery-Tab <sup>®</sup> Tablet Zithromax <sup>®</sup> Powder Packet / Suspension / Tablet / Tri-Pak / Z-Pak  efferred and move erythromycin ethylsuccinate (200 mg and 400 mg) to Preferred  astrointestinal Antibiotics) Non-Preferred Aemcolo <sup>®</sup> DR Tablet Dificid <sup>®</sup> Suspension / Tablet - Trial and failure of only vancomycin is required for treatment of Clostridium difficile Firvang <sup>™</sup> Solution
Image: Image	azithromycin powder packet / suspension / tablet (generic for Zithromax <sup>®</sup> ) clarithromycin suspension / tablet (generic for Biaxin <sup>®</sup> ) E.E.S. <sup>®</sup> Granules / Filmtab / Suspension Exped <sup>®</sup> 200400 Suspension Erythromycin e.s. 200 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (Generic for E.E.S. <sup>®</sup> Suspension) erythromycin EC capsule (generic for Eryped <sup>®</sup> ) erythromycin filmtab erythromycin e.s. tablet (generic for E.E.S. <sup>®</sup> Filmtab) Generic Over Brand Switch: Move Eryped <sup>®</sup> 200/400 Suspension to Non-Pri Nitromidazoles ( Preferred metronidazole tablet (generic for Flagyl <sup>®</sup> )	clarithromycin ER tablet (generic for Biaxin XL <sup>®</sup> ) erythromycin e.s. 200 mg suspension (Generic for ETS, "Suspension) erythromycin e.s. 200 mg suspension (Generic for Etyped®) Eryped® 200400 Suspension Eryped® 200400 Suspension Eryped® 200400 Suspension EryTab® Tablet Zithromax® Powder Packet / Suspension / Tablet / Tri-Pak / Z-Pak  efferred and move erythromycin ethylsuccinate (200 mg and 400 mg) to Preferred  efferred and move erythromycin ethylsuccinate (200 mg and 400 mg) to Preferred  astrointestinal Antibiotics)  Non-Preferred Aemcolo® DR Tablet Dificid® Suspension / Tablet - Trial and failure of only vancomycin is required for treatment of Clostridium difficile Firvang <sup>15</sup> Capsule / Fablet
Image: Solose of Granules       Solose of Granules       Imidazole tablet (generic for Tindamax®)       Vancorin® Capsule       Vancorin® Capsule       vancomycin oral solution       vancomycin oral solution       Vifaxan® Tablet - Exemption for a diagnosis of Hepatic Encephalopathy       Add new to market product vancomycin oral solution (generic for Firvanq™) as Non-Preferred       Removal:     Flagyl® Tablet       Quinolones       Quinolones       Cipro® Suspension     Non-Preferred       Baxdela <sup>™</sup> Tablet     Non-Preferred	azithromycin powder packet / suspension / tablet (generic for Zithromax <sup>®</sup> ) clarithromycin suspension / tablet (generic for Biaxin <sup>®</sup> ) E.E.S. <sup>®</sup> Granules / Filmtab / Suspension Exped <sup>®</sup> 200400 Suspension Erythromycin e.s. 200 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (Generic for E.E.S. <sup>®</sup> Suspension) erythromycin EC capsule (generic for Eryped <sup>®</sup> ) erythromycin filmtab erythromycin e.s. tablet (generic for E.E.S. <sup>®</sup> Filmtab) Generic Over Brand Switch: Move Eryped <sup>®</sup> 200/400 Suspension to Non-Pri Nitromidazoles ( Preferred metronidazole tablet (generic for Flagyl <sup>®</sup> )	clarithromycin ER tablet (generic for Biaxin XL <sup>®</sup> ) erythromycin e.s. 200 mg suspension (generic for EES. <sup>®</sup> Suspension) erythromycin e.s. 200 mg suspension (Generic for Eryted®) Eryped® 200400 Suspension EryTab <sup>®</sup> Tablet Zithromax <sup>®</sup> Powder Packet / Suspension / Tablet / Tri-Pak / Z-Pak  eferred and move erythromycin ethylsuccinate (200 mg and 400 mg) to Preferred  eferred and move erythromycin ethylsuccinate (200 mg and 400 mg) to Preferred  asstrointestinal Antibiotics)  Aemcol <sup>®</sup> DR Tablet Dificid <sup>®</sup> Suspension / Tablet - Trial and failure of only vancomycin is required for treatment of Clostridium difficile Firvang <sup>®</sup> Solution Firvan
Image: Solosec <sup>™</sup> Granules       Image: Granules       Image: Granules       Image: Granules       Vancorin® Capsule       V	azithromycin powder packet / suspension / tablet (generic for Zithromax <sup>®</sup> ) clarithromycin suspension / tablet (generic for Biaxin <sup>®</sup> ) E.E.S. <sup>®</sup> Granules / Filmtab / Suspension Exped <sup>®</sup> 200400 Suspension Erythromycin e.s. 200 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (Generic for E.E.S. <sup>®</sup> Suspension) erythromycin EC capsule (generic for Eryped <sup>®</sup> ) erythromycin filmtab erythromycin e.s. tablet (generic for E.E.S. <sup>®</sup> Filmtab) Generic Over Brand Switch: Move Eryped <sup>®</sup> 200/400 Suspension to Non-Pri Nitromidazoles ( Preferred metronidazole tablet (generic for Flagyl <sup>®</sup> )	clarithromycin ER tablet (generic for Biaxin XL <sup>®</sup> ) erythromycin es. 200 mg suspension (generic for EES. <sup>®</sup> Suspension) erythromycin es. 400 mg suspension Eryped® 200400 Suspension / Tablet / Tri-Pak / Z-Pak EryPed® 200400 mg) to Preferred EryPed® 200400 mg) to Preferred EryPed® 200400 mg) to Preferred Eryped® 2005 Suspension / Tablet - Trial and failure of only vancomycin is required for treatment of Clostridium difficile Firvarg <sup>®</sup> Solution ErgyPed® 2005 Suspension / Tablet - Trial and failure of only vancomycin is required for treatment of Clostridium difficile Firvarg <sup>®</sup> Solution ErgyPed® 2005 Suspension / Tablet - Trial and failure of only vancomycin is required for treatment of Clostridium difficile Firvarg <sup>®</sup> Solution ErgyPed® 2005 Suspension / Tablet - Trial and failure of only vancomycin is required for treatment of Clostridium difficile Firvarg <sup>®</sup> Solution ErgyPed® 2005 Suspension / Tablet - Trial and failure of only vancomycin is required for treatment of Clostridium difficile Firvarg <sup>®</sup> Solution ErgyPed® 2005 Suspension / Tablet - Trial and failure of only vancomycin is required for treatment of Clostridium difficile Firvarg <sup>®</sup> Solution ErgyPed® 2005 Suspension / Tablet - Trial and failure of only vancomycin is required for treatment of Clostridium difficile Firvarg <sup>®</sup> Solution ErgyPed® 2005 Suspension / Tablet - Trial and failure of only vancomycin is required for treatment of Clostridium difficile ErgyPed® 2005 Suspension / Tablet - Trial and failure of only vancomycin is required for treatment of Clostridium difficile ErgyPed® 2005 Suspension / Tablet - Trial Suspension / Tablet - Trial Suspension / Tablet - Trial Suspension / Tablet - Tri
Inidazole tablet (generic for Tindamax <sup>®</sup> )         Inidazole tablet (generic for Tindamax <sup>®</sup> )         Vancocin <sup>®</sup> Capsule         Vancomycin oral solution         vancomycin oral solution (generic for Firvanq <sup>™</sup> )         Xifaxan <sup>®</sup> Tablet - Exemplands of Hepatic Encephalopathy         Add new to market product vancomycin oral solution (generic for Firvanq <sup>™</sup> ) as Non-Preferred         Quinolones         Quinolones         Non-Preferred         One-Preferred         Quinolones         Non-Preferred         Suspension	azithromycin powder packet / suspension / tablet (generic for Zithromax <sup>®</sup> ) clarithromycin suspension / tablet (generic for Biaxin <sup>®</sup> ) E.E.S. <sup>®</sup> Granules / Filmtab / Suspension Exped <sup>®</sup> 200400 Suspension Erythromycin e.s. 200 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (Generic for E.E.S. <sup>®</sup> Suspension) erythromycin EC capsule (generic for Eryped <sup>®</sup> ) erythromycin filmtab erythromycin e.s. tablet (generic for E.E.S. <sup>®</sup> Filmtab) Generic Over Brand Switch: Move Eryped <sup>®</sup> 200/400 Suspension to Non-Pri Nitromidazoles ( Preferred metronidazole tablet (generic for Flagyl <sup>®</sup> )	clarithromycin ER tablet (generic for Biaxin XL <sup>®</sup> ) erythomycin e.x. 200 mg suspension (Generic for ETSS. <sup>®</sup> Suspension) erythomycin e.x. 200 mg suspension (Generic for Eryped®) Erycal® 200400 Suspension Ery-Tab® Tablet Zithromax® Powder Packet / Suspension / Tablet / Tri-Pak / Z-Pak  eferred and move erythromycin ethylsuccinate (200 mg and 400 mg) to Preferred  asstrointestinal Antibiotics) Non-Preferred Aemcolo® DR Tablet Dificid® Suspension / Tablet - Trial and failure of only vancomycin is required for treatment of Clostridium difficile Firvanq <sup>TS</sup> Solution Hagyf® Capsule (Generic for Flagyf®) neuronidazole capsule (generic for Flagyf®) nitazoxanide tablet (generic for Aluina® Tablet)
Image: Capacity Capacity     Vancorin <sup>®</sup> Capacity       Image: Vancomycin or al solution     Vancomycin or al solution (generic for Firvang <sup>™</sup> )       Vancomycin or al solution (generic for Firvang <sup>™</sup> )     Vancomycin or al solution (generic for Firvang <sup>™</sup> )       Add new to market product vancomycin or al solution (generic for Firvang <sup>™</sup> ) as Non-Preferred       Removal:     Flagy[® Tablet       Image: Capacity     Vancomycin or al solution (generic for Firvang <sup>™</sup> ) as Non-Preferred       Removal:     Flagy[® Tablet       Image: Capacity     Vancomycin or al solution (generic for Firvang <sup>™</sup> ) as Non-Preferred       Supple: Sup	azithromycin powder packet / suspension / tablet (generic for Zithromax <sup>®</sup> ) clarithromycin suspension / tablet (generic for Biaxin <sup>®</sup> ) E.E.S. <sup>®</sup> Granules / Filmtab / Suspension Exped <sup>®</sup> 200400 Suspension Erythromycin e.s. 200 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (Generic for E.E.S. <sup>®</sup> Suspension) erythromycin EC capsule (generic for Eryped <sup>®</sup> ) erythromycin filmtab erythromycin e.s. tablet (generic for E.E.S. <sup>®</sup> Filmtab) Generic Over Brand Switch: Move Eryped <sup>®</sup> 200/400 Suspension to Non-Pri Nitromidazoles ( Preferred metronidazole tablet (generic for Flagyl <sup>®</sup> )	clarithromycin ER tablet (generic for Biaxin XL <sup>®</sup> ) erythomycin e.s. 200 mg suspension (Generic for ETS, "Suspension) erythomycin e.s. 200 mg suspension (Generic for Etyped®) Eryped® 200400 Suspension EryTab® Tablet Zithromax® Powder Packet / Suspension / Tablet / Tri-Pak / Z-Pak  eferred and move erythromycin ethylsuccinate (200 mg and 400 mg) to Preferred  Gastrointestinal Antibiotics)  factor of the suspension / Tablet Suspension / Tablet - Trial and failure of only vancomycin is required for treatment of Clostridium difficile Firvang <sup>15</sup> Solution Flagyt <sup>16</sup> Capsule / Fablet Regyt <sup>16</sup> Capsule / Suspension / Tablet, Tri-Pak / Z-Pak  entronidazole capsule (generic for Flagyt <sup>16</sup> ) ficatowania tablet (generic for Flag
Image: Supersion     vancomycin or al solution       Image: Supersion     vancomycin or al solution (generic for Firvang <sup>™</sup> )       Image: Supersion     Xifaxan <sup>®</sup> Tablet - Exemption for a diagnosis of Hepatic Encephalopathy       Image: Supersion     Xifaxan <sup>®</sup> Tablet - Exemption for a diagnosis of Hepatic Encephalopathy       Image: Supersion     Xifaxan <sup>®</sup> Tablet - Exemption for a diagnosis of Hepatic Encephalopathy       Image: Supersion     Supersion       Image: Supersion     Supersion	azithromycin powder packet / suspension / tablet (generic for Zithromax <sup>®</sup> ) clarithromycin suspension / tablet (generic for Biaxin <sup>®</sup> ) E.E.S. <sup>®</sup> Granules / Filmtab / Suspension Exped <sup>®</sup> 200400 Suspension Erythromycin e.s. 200 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (Generic for E.E.S. <sup>®</sup> Suspension) erythromycin EC capsule (generic for Eryped <sup>®</sup> ) erythromycin filmtab erythromycin e.s. tablet (generic for E.E.S. <sup>®</sup> Filmtab) Generic Over Brand Switch: Move Eryped <sup>®</sup> 200/400 Suspension to Non-Pri Nitromidazoles ( Preferred metronidazole tablet (generic for Flagyl <sup>®</sup> )	clarithromycin ER tablet (generic for Biaxin XL <sup>®</sup> ) erythomycin e.s. 200 mg suspension (Generic for ETS, <sup>®</sup> Suspension) erythomycin e.s. 200 mg suspension (Generic for ETyped®) Eryped® 200400 Suspension Eryped® 200400 Suspension Eryped® 200400 Suspension EryTab® Tablet Zithromax® Powder Packet / Suspension / Tablet / Tri-Pak / Z-Pak  efferred and move erythromycin ethylsuccinate (200 mg and 400 mg) to Preferred  efferred and move erythromycin ethylsuccinate (200 mg and 400 mg) to Preferred  astrointestinal Antibiotics) Non-Preferred Aemcolo® DR Tablet Dificid® Suspension / Tablet - Trial and failure of only vancomycin is required for treatment of Clostridium difficile Firvan1 <sup>54</sup> Solution Flagyf® Capsule (generic for Flagyf®) neomycin tablet (generic for Flagyf®) neomycin tablet (generic for Flagyf®) neomycin tablet (generic for Humatin®) Solosee <sup>54</sup> Granules
vancomycin oral solution (generic for Firvang <sup>™</sup> )         Xifaxan® Tablet - Exemption for a diagnosis of Hepatic Encephalopathy         Add new to market product vancomycin oral solution (generic for Firvang <sup>™</sup> ) as Non-Preferred         Removal:       Flagyl® Tablet         Quinolones       Quinolones         Preferred       Non-Preferred         Cipro® Suspension       Baxdela <sup>™</sup> Tablet	azithromycin powder packet / suspension / tablet (generic for Zithromax <sup>®</sup> ) clarithromycin suspension / tablet (generic for Biaxin <sup>®</sup> ) E.E.S. <sup>®</sup> Granules / Filmtab / Suspension Exped <sup>®</sup> 200400 Suspension Erythromycin e.s. 200 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (Generic for E.E.S. <sup>®</sup> Suspension) erythromycin EC capsule (generic for Eryped <sup>®</sup> ) erythromycin filmtab erythromycin e.s. tablet (generic for E.E.S. <sup>®</sup> Filmtab) Generic Over Brand Switch: Move Eryped <sup>®</sup> 200/400 Suspension to Non-Pri Nitromidazoles ( Preferred metronidazole tablet (generic for Flagyl <sup>®</sup> )	clarithromycin ER tablet (generic for Biaxin XL <sup>®</sup> ) erythromycin e.s. 200 mg suspension (generic for EES. <sup>®</sup> Suspension) erythromycin e.s. 200 mg suspension (Generic for Eryped®) Eryped® 200400 Suspension Eryped® 200400 Suspension Eryped® 200400 Suspension EryTab <sup>®</sup> Tablet Zithromax <sup>®</sup> Powder Packet / Suspension / Tablet / Tri-Pak / Z-Pak  eferred and move erythromycin ethylsuccinate (200 mg and 400 mg) to Preferred  eferred and move erythromycin ethylsuccinate (200 mg and 400 mg) to Preferred  asstrointestinal Antibiotics)  Non-Preferred Aemcolo® DR Tablet Dificid® Suspension Tablet - Trial and failure of only vancomycin is required for treatment of Clostridium difficile Firvang <sup>®</sup> Solution Firvang <sup>®</sup> Solution Engry <sup>®</sup> Salution Engry <sup>®</sup> Sa
Xifaxan® Tablet - Exemption for a diagnosis of Hepatic Encephalopathy       Add new to market product vancomycin oral solution (generic for Firvanq™) as Non-Preferred       Removal: Flagyl® Tablet       Image: Comparison of the second of th	azithromycin powder packet / suspension / tablet (generic for Zithromax <sup>®</sup> ) clarithromycin suspension / tablet (generic for Biaxin <sup>®</sup> ) E.E.S. <sup>®</sup> Granules / Filmtab / Suspension Exped <sup>®</sup> 200400 Suspension Erythromycin e.s. 200 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (Generic for E.E.S. <sup>®</sup> Suspension) erythromycin EC capsule (generic for Eryped <sup>®</sup> ) erythromycin filmtab erythromycin e.s. tablet (generic for E.E.S. <sup>®</sup> Filmtab) Generic Over Brand Switch: Move Eryped <sup>®</sup> 200/400 Suspension to Non-Pri Nitromidazoles ( Preferred metronidazole tablet (generic for Flagyl <sup>®</sup> )	clarithromycin ER tablet (generic for Biaxin XL <sup>®</sup> ) erythomycin e.x. 200 mg suspension (Generic for ETES, <sup>®</sup> Suspension) erythomycin e.x. 200 mg suspension (Generic for Eryped®) Erycaf 200400 Suspension Ery-Tab <sup>®</sup> Tablet Zithromax <sup>®</sup> Powder Packet / Suspension / Tablet / Tri-Pak / Z-Pak  eferred and move erythromycin ethylsuccinate (200 mg and 400 mg) to Preferred  astrointestinal Antibiotics) Non-Preferred Aemcolo <sup>®</sup> DR Tablet Dificid <sup>®</sup> Suspension / Tablet - Trial and failure of only vancomycin is required for treatment of Clostridium difficile Firvang <sup>®</sup> Solution Hagyff <sup>®</sup> Capsule (generic for Flagyf <sup>®</sup> ) netronidazole capsule (generic for Flagyf <sup>®</sup> ) netronidazole capsule (generic for Humatin <sup>®</sup> ) Solosec <sup>®</sup> Granules Inidazole tablet (generic for Tindamax <sup>®</sup> ) Vancocin <sup>®</sup> Capsule
Add new to market product vancomycin oral solution (generic for Firvanq™) as Non-Preferred         Removal:       Flagyl® Tablet         Quinolones       Quinolones         Cipro® Suspension       Non-Preferred         Cipro® Suspension       Baxdela <sup>™</sup> Tablet	azithromycin powder packet / suspension / tablet (generic for Zithromax <sup>®</sup> ) clarithromycin suspension / tablet (generic for Biaxin <sup>®</sup> ) E.E.S. <sup>®</sup> Granules / Filmtab / Suspension Exped <sup>®</sup> 200400 Suspension Erythromycin e.s. 200 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (Generic for E.E.S. <sup>®</sup> Suspension) erythromycin EC capsule (generic for Eryped <sup>®</sup> ) erythromycin filmtab erythromycin e.s. tablet (generic for E.E.S. <sup>®</sup> Filmtab) Generic Over Brand Switch: Move Eryped <sup>®</sup> 200/400 Suspension to Non-Pri Nitromidazoles ( Preferred metronidazole tablet (generic for Flagyl <sup>®</sup> )	clarithromycin ER tablet (generic for Biaxin XL <sup>®</sup> ) erythomycin e.x. 200 mg suspension (Generic for ETS, "Suspension) erythomycin e.x. 200 mg suspension (Generic for Eryted®) ErycTab® Tablet Zithromax® Powder Packet / Suspension / Tablet / Tri-Pak / Z-Pak  eferred and move erythromycin ethylsuccinate (200 mg and 400 mg) to Preferred  astrointestinal Antibiotics)  Non-Preferred Aemcolo® DR Tablet Dificid® Suspension / Tablet - Trial and failure of only vancomycin is required for treatment of Clostridium difficile Firvang <sup>®</sup> Solution Hagyf® Capsule / Fablet metronidazole capsule (generic for Flagyf <sup>®</sup> ) nemonycin tablet (generic for Hagyf <sup>®</sup> ) nitazoxanide tablet (generic for Hamain <sup>®</sup> ) Non-solution Flagyf® Capsule (generic for Thamax <sup>®</sup> ) Non-solution Flagyf® Capsule (generic for Thamax <sup>®</sup> ) Solution Fla
Preferred         Non-Preferred           Cipro® Suspension         Baxdela <sup>™</sup> Tablet	azithromycin powder packet / suspension / tablet (generic for Zithromax <sup>®</sup> ) clarithromycin suspension / tablet (generic for Biaxin <sup>®</sup> ) E.E.S. <sup>®</sup> Granules / Filmtab / Suspension Exped <sup>®</sup> 200400 Suspension Erythromycin e.s. 200 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (Generic for E.E.S. <sup>®</sup> Suspension) erythromycin EC capsule (generic for Eryped <sup>®</sup> ) erythromycin filmtab erythromycin e.s. tablet (generic for E.E.S. <sup>®</sup> Filmtab) Generic Over Brand Switch: Move Eryped <sup>®</sup> 200/400 Suspension to Non-Pri Nitromidazoles ( Preferred metronidazole tablet (generic for Flagyl <sup>®</sup> )	clarithromycin ER tablet (generic for Biaxin XL <sup>®</sup> ) erythromycin e.s. 200 mg suspension (Generic for ETS, <sup>®</sup> Suspension) erythromycin e.s. 200 mg suspension (Generic for ETyped®) Eryped® 200400 Suspension Eryped® 200400 Suspension Eryped® 200400 Suspension EryTab® Tablet Zithromax® Powder Packet / Suspension / Tablet / Tri-Pak / Z-Pak  efferred and move erythromycin ethylsuccinate (200 mg and 400 mg) to Preferred  efferred and move erythromycin ethylsuccinate (200 mg and 400 mg) to Preferred  astrointestinal Antibiotics) Non-Preferred Aemcolo <sup>®</sup> DR Tablet Dificid® Suspension / Tablet - Trial and failure of only vancomycin is required for treatment of Clostridium difficile Firvan1 <sup>SI</sup> Solution Flagyf® Capsule (generic for Flagyf®) neomycin tablet (generic for Flagyf®) neomycin capsule (generic for Flagyf®) Solosee <sup>SI</sup> Granules Inidizole tablet (generic for Humatin®) Solosee <sup>SI</sup> Granules Inidizole tablet (generic for Humatin®) Solosee <sup>SI</sup> Granules Inidizole tablet (generic for Flagyf®)
Preferred         Non-Preferred           Cipro® Suspension         Baxdela <sup>™</sup> Tablet	azithromycin powder packet / suspension / tablet (generic for Zithromax <sup>®</sup> ) clarithromycin suspension / tablet (generic for Biaxin <sup>®</sup> ) E.E.S. <sup>®</sup> Granules / Filmtab / Suspension Eryptora <sup>®</sup> 2004/400 Suspension erythromycin e.s. 400 mg suspension (Generic for E.E.S. <sup>®</sup> Suspension) erythromycin E.C apsule (generic for E.Y. <sup>®</sup> ) erythromycin E.C apsule (generic for E.Y. <sup>®</sup> ) erythromycin e.s. tablet (generic for E.S. <sup>®</sup> Filmtab) <u>Generic Over Brand Switch</u> : Move Eryped <sup>®</sup> 200/400 Suspension to Non-PI Mitromidazoles ( <u>Preferred</u> metronidazole tablet (generic for Flagyl <sup>®</sup> ) vancomycin capsule (generic for Flagyl <sup>®</sup> ) vancomycin capsule (generic for Vancocin <sup>®</sup> ) <u>Addd</u> new to market product vancomycin or	clarithromycin ER tablet (generic for Biaxin XL <sup>®</sup> ) arythromycin ex. 200 mg suppersion (Generic for EF.S. <sup>®</sup> Suppension) erythomycin ex. 200 mg suppersion (Generic for Eryped®) ErycTab <sup>®</sup> 200400 Suppension ErycTab <sup>®</sup> Tablet Zithromax <sup>®</sup> Powder Packet / Suspension / Tablet / Tri-Pak / Z-Pak  eferred and move erythromycin ethylsuccinate (200 mg and 400 mg) to Preferred  advector of the second structure of the se
Cipro <sup>®</sup> Suspension Baxdela <sup>™</sup> Tablet	azithromycin powder packet / suspension / tablet (generic for Zithromax <sup>®</sup> ) clarithromycin suspension / tablet (generic for Biaxin <sup>®</sup> ) E.E.S. <sup>®</sup> Granules / Filmtab / Suspension Eryptora <sup>®</sup> 2004/400 Suspension erythromycin e.s. 400 mg suspension (Generic for E.E.S. <sup>®</sup> Suspension) erythromycin E.C apsule (generic for E.Y. <sup>®</sup> ) erythromycin E.C apsule (generic for E.Y. <sup>®</sup> ) erythromycin e.s. tablet (generic for E.S. <sup>®</sup> Filmtab) <u>Generic Over Brand Switch</u> : Move Eryped <sup>®</sup> 200/400 Suspension to Non-PI Mitromidazoles ( <u>Preferred</u> metronidazole tablet (generic for Flagyl <sup>®</sup> ) vancomycin capsule (generic for Flagyl <sup>®</sup> ) vancomycin capsule (generic for Vancocin <sup>®</sup> ) <u>Addd</u> new to market product vancomycin or	clarithromycin ER tablet (generic for Biaxin XL <sup>®</sup> ) arythromycin ex. 200 mg suppersion (Generic for EF.S. <sup>®</sup> Suppension) erythomycin ex. 200 mg suppersion (Generic for Eryped®) ErycTab <sup>®</sup> 200400 Suppension ErycTab <sup>®</sup> Tablet Zithromax <sup>®</sup> Powder Packet / Suspension / Tablet / Tri-Pak / Z-Pak  eferred and move erythromycin ethylsuccinate (200 mg and 400 mg) to Preferred  advector of the second structure of the se
	azithromycin powder packet / suspension / tablet (generic for Zithromax <sup>®</sup> ) clarithromycin suspension / tablet (generic for Eixs <sup>®</sup> ) EFS. <sup>®</sup> Granules / Filmtab / Suspension Erypter <sup>®</sup> 2004 OSuspension Erypter <sup>®</sup> 2004 OSuspension erythomycin e.s. 200 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythomycin e.s. 200 mg suspension (generic for E.S. <sup>®</sup> Suspension) erythromycin e.C. capsule (generic for E.E.S. <sup>®</sup> Filmtab) erythromycin e.s. tablet (generic for E.E.S. <sup>®</sup> Filmtab) Generic Over Brand Switch: Move Eryped <sup>®</sup> 200/400 Suspension to Non-Pri Mitromidazoles ( Preferred metronidazole tablet (generic for Flagyf <sup>®</sup> ) vancomycin capsule (generic for Vancocin <sup>®</sup> ) <u>Addd</u> new to market product vancomycin or <u>Remova</u>	clarithromycin ER tablet (generic for Els.X* Suspension) etypthomycin e.x = 400 mg suspension (Generic for ELY.X* Suspension) etypthomycin e.x = 400 mg suspension (Generic for Eryped®) Ery-Tab® Tablet Zithromax® Powder Packet / Suspension / Tablet / Tri-Pak / Z-Pak eferred and move erythromycin ethylsuccinate (200 mg and 400 mg) to Preferred eferred and move erythromycin ethylsuccinate (200 mg and 400 mg) to Preferred astrointestinal Antibiotics) Non-Preferred Aemcolo* DR Tablet Dificid® Suspension / Tablet - Trial and failure of only vancomycin is required for treatment of Clostridium difficile Firvang" Solution Flagyf® Capsule / Fablet metronidazole capsule (generic for Flagyf®) neomycin tablet (generic for Flagyf®) neomycin tablet (generic for Flagyf®) Non-Oreferred Solosec" Granules inidazole tablet (generic for Flagyf®) Nancom% Capsule (generic for Flagyf®) Non-Preferred Flagyf® Tablet Plagyf® Tablet
ciprofloxacin tablet (generic for Cipro <sup>®</sup> ) Cipro <sup>®</sup>	azithromycin powder packet / suspension / tablet (generic for Zithromax <sup>®</sup> ) clarithromycin suspension / tablet (generic for Eixs <sup>®</sup> ) E.E.S. <sup>®</sup> Granules / Filmtab / Suspension Erypter <sup>®</sup> 300/1400 Suspension Erypter <sup>®</sup> 300/1400 Suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (generic for E.E.S. <sup>®</sup> Suspension) erythromycin e.s. tablet (generic for E.E.S. <sup>®</sup> Filmtab) Generic Over Brand Switch: Move Eryped <sup>®</sup> 200/400 Suspension to Non-Pri Mitromidazoles ( Preferred metronidazole tablet (generic for Flagyf <sup>®</sup> ) vancomycin capsule (generic for Flagyf <sup>®</sup> ) vancomycin capsule (generic for Vancocin <sup>®</sup> ) 	clarithromycin ER tablet (generic for Biaxin XL <sup>®</sup> ) exythemycin e.s 200 mg. suspension (Generic for ELS, <sup>®</sup> , <sup>Suspension</sup> ) exythemycin e.s 400 mg. suspension (Generic for ELS, <sup>®</sup> , <sup>Suspension</sup> ) exythemycin e.s 400 mg. suspension (Generic for ELS, <sup>®</sup> , <sup>Suspension</sup> ) Ery-Tab <sup>®</sup> Tablet Zithromax <sup>®</sup> Powder Packet / Suspension / Tablet / Tri-Pak / Z-Pak efferred and move erythromycin ethylsuccinate (200 mg and 400 mg) to Preferred efferred and move erythromycin ethylsuccinate (200 mg and 400 mg) to Preferred Gastrointestinal Antibiotics) Non-Preferred Gastrointestinal Antibiotics Inficid <sup>®</sup> Suspension / Tablet - Trial and failure of only vancomycin is required for treatment of Clostridium difficile Firvang <sup>W</sup> Solution Firvang <sup>W</sup> Solution Firvang <sup>W</sup> Solution Firvang <sup>W</sup> Solution Solose <sup>W</sup> of Tablet Inficid <sup>®</sup> Suspensi for Flagyl <sup>®</sup> ) neomycin tablet (generic for Humatin <sup>®</sup> ) Solose <sup>W</sup> of Taulale Indiazole tablet (generic for Thindamax <sup>®</sup> ) Vancomit <sup>®</sup> Capsule Vancomit <sup>®</sup> Capsule Solution (generic for Firvanq <sup>W</sup> ) as Non-Preferred Strain <sup>W</sup> Tablet - Steepston for a diagnosis of Hepatic Encephalopathy Lincolnes Non-Preferred
	azithromycin powder packet / suspension / tablet (generic for Zithromax <sup>®</sup> ) charithromycin suspension / tablet (generic for Binxin <sup>®</sup> ) E.E.S. <sup>®</sup> Canaules / Filmtab / Suspension Eryptoroxin <sup>®</sup> Filmtab Erythroxin <sup>®</sup> Filmtab erythromycin e.s. 200 mg suspension (Generic for E.S. <sup>®</sup> Suspension) erythromycin e.s. 400 mg suspension (Generic for E.S. <sup>®</sup> Suspension) erythromycin e.s. tablet (generic for Erypel <sup>®</sup> ) erythromycin e.s. tablet (generic for Erypel <sup>®</sup> ) erythromycin e.s. tablet (generic for E.S. <sup>®</sup> Filmtab) Centeric Over Brand Switch: Move Eryped <sup>®</sup> 200/400 Suspension to Non-Pt Mitromidazoles ( Preferred metronidazole tablet (generic for Flagyl <sup>®</sup> ) vancomycin capsule (generic for Flagyl <sup>®</sup> ) vancomycin capsule (generic for Vancocin <sup>®</sup> ) Add new to market product vancomycin or <u>Remova</u> Cipro <sup>®</sup> Suspension	clarithromycin ER tablet (generic for Biaxin XL <sup>®</sup> ) erythomycin e.s 200 mg suspension (Generic for ELS.® "Suspension) erythomycin e.s 400 mg suspension (Generic for ELS.® "Suspension) Ery-Tab® Tablet Zithromax® Powder Packet / Suspension / Tablet / Tri-Pak / Z-Pak Ery-Tab® Tablet Zithromax® Powder Packet / Suspension / Tablet / Tri-Pak / Z-Pak efferred and move erythromycin ethylsuccinate (200 mg and 400 mg) to Preferred Gastrointestinal Antibiotics) Non-Preferred Aemcolo® DR Tablet Dified® Suspension / Tablet - Trial and failure of only vancomycin is required for treatment of Clostridium difficile Firvang <sup>™</sup> Solution Flags® Capsule (generic for Flags) <sup>®</sup> ) natizoxanide tablet (generic for Flags) <sup>®</sup> ) Solosec <sup>™</sup> Granules tinidazole capsule (generic for Humatin <sup>®</sup> ) Solosec <sup>™</sup> Granules tinidazole tablet (generic for Tindamax <sup>®</sup> ) Vancomycin ad solution Sultion Sul

Effective DATE: Draft for July 13, 2023 Meeting Trial and failure of two Preferred drugs are required unless only one Preferred option is listed or is otherwise indicated. Not all therapeutic drug classes are included on the PDL. All drugs in the classes not included are considered Preferred. In addition to trial and failure criteria, clinical criteria (indicated in RED) may also apply. New to market products typically default to Non-Preferred status until Due to the trial and failure of the DELENER CONSTRUCTION of the DELENER of the DE reviewed by the PDL Panel. These drugs are listed as TO BE REVIEWED. Drugs requiring prior authorization, clinical criteria and prior authorization request forms can be found at: https://www.nctracks.nc.gov/content/public/providers/pharmacy.html
More information on the PDL can be found at: https://medicaid.ncdhhs.gov/providers/programs-services/prescription-drugs/outpatient-pharmacy-services vofloxacin tablet (generic for Levaquin®) ciprofloxacin suspension (generic for Cipro® XR / Suspension) noxifloxacin tablet (generic for Avelox®) levofloxacin solution (generic for Levaquin® Solution) ofloxacin tablet (generic for Floxin®) No recommendations. Class open for comments.

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reviewed by the PDL Panel. These drugs are listed as TO BE REVIEWED. Drugs requiring prior authorization, clinical criteria and prior authorization request forms can be found at: https://www.nctracks.nc.gov/content/public/providers/pharmacy.html More information on the PDL can be found at: https://medicaid.ncdhhs.gov/providers/programs-services/prescription-drugs/outpatient-pharmacy-services

	Tetracycline Derivatives
Preferred	Non-Preferred
oxycycline hyclate capsule / tablet (generic for Vibramycin <sup>®</sup> , Vibra-Tab <sup>®</sup> )	demeclocycline tablet (generic for Declomycin <sup>®</sup> )
oxycycline monohydrate 50mg, 100mg capsule (generic for Monodox®)	Doryx <sup>®</sup> DR / MPC Tablet
inocycline 50mg, 75mg, 100mg capsule (generic for Minocin®)	doxycycline hyclate DR tablet (generic for Doryx <sup>®</sup> DR)
	doxycycline monohydrate 75mg, 150mg capsule (generic for Monodox <sup>®</sup> , Adoxa <sup>®</sup> )
	doxycycline monohydrate 40mg IR-DR capsule (generic for Oracea <sup>®</sup> )
	doxycycline monohydrate 50mg, 75mg, 100mg, 150mg tablet
	doxycycline suspension (generic for Vibramycin Suspension <sup>®</sup> ) - Exemption for patients < 12 years of age
	minocycline ER tablet (generic for Solodyn <sup>®</sup> ER) Clinical justification and failure of doxycycline and minocycline required. Limited to a 12
	week supply.
	minocycline ER capsule (Generic for Ximino™ ER)
	minocycline 50mg, 75mg, 100mg tablet
	Minolira <sup>™</sup> ER Tablet
	Morgidox <sup>®</sup> Capsule / Kit
	Nuzyra <sup>TM</sup> Tablet
	Solodyn <sup>®</sup> ER Tablet - Clinical justification and failure of doxycycline and minocycline required. Limited to a 12 week supply.
	Targadox®
	tetracycline capsule (generic for Sumycin <sup>®</sup> )
	Vibramycin® Capsule / Suspension / Syrup
	Ximino <sup>®</sup> ER Capsule
	Antifungals
Preferred	Non-Preferred
lotrimazole troche (generic for Mycelex <sup>®</sup> Troche)	Ancobon <sup>®</sup> Capsule
luconazole suspension / tablet (generic for Diflucan <sup>®</sup> )	Breadenme® Tablet
riseofulvin suspension (generic for Grifulvin V <sup>®</sup> )	Cresemba <sup>®</sup> Capsule
iseofulvin ultra tablet (generic for Gris-Peg <sup>®</sup> )	Diffuca <sup>®</sup> Suspension / Tablet
vstatin suspension (generic for Nilstat <sup>®</sup> )	fluctosine capsule (generic for Ancobon <sup>®</sup> )
vstatin tablet (generic for Mycostatin <sup>®</sup> )	griseofulvin micro tablets (generic for Grifulvin $V^{\oplus}$ )
rbinafine tablet (generic for Lamisil <sup>®</sup> )	itraconazole capsule / solution (generic for Sporanox <sup>®</sup> )
folialitie tablet (generic foi Lantish )	ketoconazole tablet (generic for Nizoral <sup>®</sup> )
	Noxafil <sup>®</sup> Suspension / Tablet
	Noxafi <sup>®</sup> (posaconazole) DR suspension packet
	Noxani (posaconazole) Dix suspension packet Oravig* (miconazole) Buccal Tablet
	posaconazole tablet (generic for Noxafil <sup>®</sup> )
	Sporanox <sup>®</sup> Capsule / Solution
	Tolsura <sup>™</sup> Capsule
	Vfend <sup>®</sup> Suspension / Tablet
	Vfend <sup>®</sup> Suspension / Tablet Vivjoa® Capsule

### Add new to market product Noxafil® (posaconazole) DR suspension packet as Non-Preferred Oravig<sup>®</sup> (miconazole) Buccal Tablet as Non-Preferred

A	
	virals (Hepatitis B Agents)
Preferred	Non-Preferred
entecavir tablet (generic for Baraclude <sup>®</sup> )	adefovir tablet (generic for Hepsera®)
amivudine HBV tablet (generic for Epivir <sup>®</sup> HBV)	Baraclude® Solution / Tablet
tenofovir tablet (generic for Viread®)	Epivir® HBV Tablet / Solution
Viread <sup>®</sup> Powder / Tablet	Hepsera® Tablet
	Vemlidy <sup>®</sup> tablet
	virals (Hepatitis C Agents)
Preferred	Non-Preferred
Pegasys <sup>®</sup> Syringe	Pegasys <sup>®</sup> Viał
Pegasys <sup>®</sup> Vial	
ribavirin capsule / tablet (generic for Copegus®, Rebetol®)	
Clinical crite	eria apply to all drugs listed below
All genotypes without cirrhosis	Epclusa® Pellet Pack/Tablet
Mavyret <sup>™</sup> Tablet (8 weeks of therapy)	Harvoni® Pellet Pack / Tablet
Mavyret <sup>™</sup> Pellet Pack	ledipasvir-sofosbuvir tablet (generic for Harvoni <sup>®</sup> Tablet)
sofosbuvir-velpatasvir tablet (generic for Epclusa <sup>®</sup> Tablet)	Sovaldi <sup>®</sup> Pellet Pack / Tablet
	Viekira <sup>™</sup> Pak
All genotypes with compensated cirrhosis (Child Pugh-A)	Zepatier® Tablet
Mavyret <sup>™</sup> Tablet (Up to 12 weeks of therapy)	
Mavyret <sup>™</sup> Pellet Pack	
sofosbuvir-velpatasvir tablet (generic for Epclusa <sup>®</sup> Tablet)	
All genotypes previously treated with an HCV regimen containing an NS5A inhibitor or genotype 1a or 3 infection and ha	ave
previously been treated with an HCV regimen containing sofosbuvir without an NS5A inhibitor.	
Vosevi <sup>™</sup>	
All genotypes with decompensated cirrhosis sofosbuvir-velpatasvir tablet (generic for Epclusa® Tablet)	

Add

Move Pegasys® Vial from Non-Preferred to Preferred

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North Carolina Di	vision of Health Benefits	
North Carolina Medicaid Preferred Drug List (PDL)		
Effective DATE: Draft	t for July 13, 2023 Meeting	
	less only one Preferred option is listed or is otherwise indicated. rugs in the classes not included are considered Preferred. In addition to	
trial and failure criteria, clinical criteria (indicated in RED) may also a	oply. New to market products typically default to Non-Preferred status until	
	quiring prior authorization, clinical criteria and prior authorization request forms can be found at: ontent/public/providers/pharmacy.html	
More information on the PDL can be found at: https://medicaid.ncdhhs.go	v/providers/programs-services/prescription-drugs/outpatient-pharmacy-services	
Antivirals	(Herpes Treatments)	
Preferred acyclovir capsule / tablet / suspension (generic for Zovirax <sup>®</sup> )	Non-Preferred Sitavig <sup>®</sup> Buccal Tablet	
famciclovir tablet (generic for Famvir <sup>®</sup> )	Valtex <sup>®</sup> Caplet	
valacyclovir tablet (generic for Valtrex®)	Zovirax <sup>®</sup> Suspension	
Antiv	rals (Influenza)	
Preferred	Non-Preferred	
oseltamivir phosphate capsule / suspension (generic for Tamiflu <sup>®</sup> ) rimantadine tablet (generic for Flumadine <sup>®</sup> )	amantadine tablet (generic for Symmetrel <sup>®</sup> ) Flumadine <sup>®</sup> Tablet	
Tamiflu <sup>®</sup> Capsule/Suspension	Relenza <sup>®</sup> Diskhaler	
	Tamiflu <sup>®</sup> Capsule / Suspension Xofluza <sup>™</sup> Tablet Trial and failure of only one preferred drug required	
<u>Move</u> Tamiflu <sup>®</sup> Capsule / Suspe	nsion from Preferred to Non-Preferred	
Δητί	piotics, Inhaled	
	alvone preferred drug required	
Preferred	Non-Preferred	
Kitabis <sup>®</sup> Pak (tobramycin inhalation solution) Bethkis <sup>®</sup> (tobramycin inhalation solution)	Arikayce® Vial Cayston® Solution	
tobramycin inhalation solution (generic for Tobi <sup>™</sup> )	tobramycin inhalation <del>solution</del> / pak (generic for Tobi <sup>28</sup> / Kitabis <sup>35</sup> )	
	Tobi <sup>TM</sup> Podhaler / Solution	
<u>Move</u> tobramycin inhalation solution (gen	neric for Tobi™) from Non-Preferred to Preferred	
BEHAV	IORAL HEALTH	
	DEPRESSANTS	
Preferred	Other Non-Preferred	
bupropion tablet / SR tablet / XL tablet (generic for Wellbutrin <sup>®</sup> Tablet / SR / XL)	Aplenzin® Tablet	
desvenlafaxine ER tablet (generic for Pristiq®)	Auvelity® (dextromethorphan/bupropion) Tablet	
desvenlafaxine ER tablet (generic for Pristiq <sup>®</sup> ) duloxetine capsule (generic for Cymbalta <sup>®</sup> )	Avvelity® (dextromethorphan/bupropion) Tablet Bupropion XL tablet (generic for Forfivo® XL)	
desvenlafaxine ER tablet (generic for Pristiq <sup>®</sup> ) duloxetine capsule (generic for Cymbalta <sup>®</sup> ) Effexor <sup>®</sup> XR Capsule maprotiline tablet (generic for Ludiomil <sup>®</sup> )	Awelity® (dextromethorphan/bupropion) Tablet Bupropion XL tablet (generic for Forfivo® XL) Cymbalta® Capsule desvenlafaxine ER tablet (generic for Khedezla®)	
desvenlafaxine ER tablet (generic for Pristiq <sup>®</sup> )         duloxetine capsule (generic for Cymbalta <sup>®</sup> )         Effexor <sup>®</sup> XR Capsule         maprotiline tablet (generic for Ludiomil <sup>®</sup> )         mirtazapine ODT / tablet (generic for Remeron <sup>®</sup> )	Awelity <sup>®</sup> (dextromethorphan/bupropion) Tablet Bupropion XL tablet (generic for Forfivo <sup>®</sup> XL) Cymbalta <sup>®</sup> Capsule desvenlafaxine ER tablet (generic for Khedezla <sup>®</sup> ) duloxetine capsule (generic for Irenka®)	
desvenlafaxine ER tablet (generic for Pristiq <sup>®</sup> ) duloxetine capsule (generic for Cymbalta <sup>®</sup> ) Effexor <sup>®</sup> XR Capsule maprotiline tablet (generic for Ludiomil <sup>®</sup> )	Awelity® (dextromethorphan/bupropion) Tablet Bupropion XL tablet (generic for Forfivo® XL) Cymbalta® Capsule desvenlafaxine ER tablet (generic for Khedezla®)	
desvenlafaxine ER tablet (generic for Pristiq <sup>®</sup> ) duloxetine capsule (generic for Cymbalta <sup>®</sup> ) Effexor <sup>®</sup> XR Capsule maprotiline tablet (generic for Ludionil <sup>®</sup> ) mirtazapine ODT / tablet (generic for Remeron <sup>®</sup> ) Nardil <sup>®</sup> Tablet phenelzine tablet (generic for Nardil <sup>®</sup> ) Pristiq <sup>®</sup> ER Tablet	Avelity® (dextromethorphan/bupropion) Tablet Bupropion XL tablet (generic for Forfivo® XL) Cymbalta® Capsule desvenlafaxine ER tablet (generic for Khedezla®) duloxetine capsule (generic for Irenka®) Emsam® Patch Fetzima® Capsule / Titration Pak Forfivo® XL Tablet	
desvenlafaxine ER tablet (generic for Pristiq <sup>®</sup> )         duloxetine capsule (generic for Cymbalta <sup>®</sup> )         Effexor <sup>®</sup> XR Capsule         maprotiline tablet (generic for Ladiomil <sup>®</sup> )         mirtazapine ODT / tablet (generic for Remeron <sup>®</sup> )         Nardit <sup>®</sup> Tablet         phene/zine tablet (generic for Nardit <sup>®</sup> )         Pristiq <sup>®</sup> ER Tablet         tranylcypromine tablet (generic for Parnate <sup>®</sup> )	Avelity® (dextromethorphan/bupropion) Tablet Bupropion XL tablet (generic for Forfivo® XL) Cymbalta® Capsule desvenlafaxine ER tablet (generic for Khedezla®) duloxetine capsule (generic for Irenka®) Emsam® Patch Fetzima® Capsule / Titration Pak	
desvenlafaxine ER tablet (generic for Pristiq <sup>®</sup> ) dulxextine capsule (generic for Cymbalta <sup>®</sup> ) Effexor <sup>®</sup> XR Capsule maprotiline tablet (generic for Ludionti <sup>®</sup> ) mitrazapite ODT / tablet (generic for Remeron <sup>®</sup> ) Nardil <sup>®</sup> Tablet phenelzine tablet (generic for Nardil <sup>®</sup> ) Pristiq <sup>®</sup> ER Tablet tranylcypromine tablet (generic for Parrate <sup>®</sup> ) trazodone tablet (generic for Parrate <sup>®</sup> ) venlafaxine tablet / ER capsules (generic for Effexor <sup>®</sup> , Effexor <sup>®</sup> XR)	Avelity® (dextromethorphan/bupropion) Tablet Bupropion XL tablet (generic for Forfivo® XL.) Cymbalta® Capsule desvenlafixine ER tablet (generic for Khedezla®) desvenlafixine ER tablet (generic for Khedezla®) Emsam® Patch Fetzimm® Capsule / Titration Pak Forfivo® XL Tablet Marpian® Tablet nefazodone tablet (generic for Serzone®) Remeron® Soltab <sup>™</sup> / Tablet	
desvenlafaxine ER tablet (generic for Pristiq <sup>®</sup> ) duloxetine capsule (generic for Cymbalta <sup>®</sup> ) Effexor <sup>®</sup> XR Capsule maprotiline tablet (generic for Ludiomit <sup>®</sup> ) mitrazapine ODT / tablet (generic for Remeron <sup>®</sup> ) Nardit <sup>®</sup> Tablet pheneLzine tablet (generic for Nardit <sup>®</sup> ) Pristiq <sup>®</sup> ER Tablet tranylexpromite tablet (generic for Parnate <sup>®</sup> ) trazodone tablet (generic for Desyrel <sup>®</sup> )	Avelity® (dextromethorphan/bupropion) Tablet         Bupropion XL tablet (generic for Forfivo® XL)         Cymbatla® Capsule         desvenlafaxine ER tablet (generic for Khedezla®)         duloxetine capsule (generic for Irenka®)         Emsam® Patch         Fetzima® Capsule / Titration Pak         Forfivo® XL Tablet         Marplan® Tablet         nefazodone tablet (generic for Serzone®)         Remeron® Soltab <sup>™</sup> / Tablet         Trintellix® Tablet	
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desvenlafaxine ER tablet (generic for Pristiq <sup>®</sup> ) dukozetine capsule (generic for Cymbalta <sup>®</sup> ) Effexor <sup>®</sup> XR Capsule imitrazopine ODT / tablet (generic for Remeron <sup>®</sup> ) Nardil <sup>®</sup> Tablet pheneIzine tablet (generic for Nardil <sup>®</sup> ) Pristiq <sup>®</sup> ER Tablet tranykypromine tablet (generic for Parata <sup>®</sup> ) razodone tablet (generic for Parata <sup>®</sup> ) razodone tablet (generic for Effexor <sup>®</sup> , Effexor <sup>®</sup> XR) Viibyd <sup>®</sup> Tablet <u>Addd</u> new to market product Auvelity <sup>®</sup> (dextt <u>Move</u> Viibryd <sup>®</sup> Tablet <u>Conserved</u> : mapprotiline <u>Selective Serotoni</u> Removal; mapprotiline citalopram solution / tablet (generic for Celexa <sup>®</sup> ) escilalopram tablet (generic for Parace <sup>®</sup> ) Huvoxamic tablet (generic for Parace <sup>®</sup> ) Huvoxamic tablet (generic for Parace <sup>®</sup> ) Fuersent estraline capsule / solution (generic for Parace <sup>®</sup> ) Huvoxamic tablet (generic for Parace <sup>®</sup> ) Huvoxamic tablet (generic for Parace <sup>®</sup> ) Huvoxamic tablet (generic for Parate <sup>®</sup> ) Parate <sup>®</sup> Stapension paroxetine tablet (generic for Parate <sup>®</sup> ) Parate <sup>®</sup> Stapension paroxetine tablet (generic for Parat <sup>®</sup> ) estraline concentrated solution / tablet (generic for Zoloft <sup>®</sup> )	Aveilty* (dextromethorphan bupropion) Tablet         Bupropion XL tablet (generic for Forfivo* XL)         Cymbalue*Capsule         devendafixtine ER tablet (generic for Khederla*)         dukotenic capsule (generic for Irenka®)         Emsum* Patch         Ferrima* Capsule (Turation Pak         Forfivo* XL Tablet         Marplan* Tablet         medizoden tablet (generic for Serzone*)         Remeron* Soltah**/ Tablet         Trintelits* Tablet         meforxobore tablet (generic for Serzone*)         Remeron* Soltah**/ Tablet         Vinbayd* Statter Pack / Fabilet         Comethorphan / bupropion) Tablet as Non-Preferred         Dom Non-Preferred to Preferred         tablet (generic for Luxionnil*)         Imaxient tablet (generic for Laxapro* Solution)         flowstein tablet (generic for Proze*) - Exemption for children < 18 years of age         flowstein tablet (generic for Proze*)	
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### Effective DATE: Draft for July 13, 2023 Meeting

Trial and failure of two Preferred drugs are required unless only one Preferred option is listed or is otherwise indicated. Not all therapeutic drug classes are included on the PDL. All drugs in the classes not included are considered Preferred. In addition to

trial and failure criteria, clinical criteria (indicated in RED) may also apply. New to market products typically default to Non-Preferred status until

reviewed by the PDL Panel. These drugs are listed as TO BE REVIEWED. Drugs requiring prior authorization, clinical criteria and prior authorization request forms can be found at:

https://www.nctracks.nc.gov/content/public/providers/pharmacy.html More information on the PDL can be found at: https://medicaid.ncdhhs.gov/providers/programs-services/prescription-drugs/outpatient-pharmacy-services

ANTIHYPERKINESIS / ADHD Preferred Non-Preferred	
Adderall® Tablet (Generic Product Per FDA)	Adderall <sup>®</sup> Tablet (Generic Product Per FDA)
Adderall <sup>®</sup> XR Capsule	Adhasia' XK Capule
amphetamine salt combo tablet (generic for Adderall <sup>®</sup> )	Advznys <sup>®</sup> XR ODT / <del>ER suspension</del>
amphetamine salt combo XR capsule (generic for Adderall <sup>®</sup> XR)	amphetamine ER supersion (generic for Adzenys <sup>®</sup> )-
Aptensio <sup>®</sup> XR Capsule	amphetamine sult combo XR capsule (generic for Adderall <sup>®</sup> XR)
atomoxetine capsule (generic for Strattera <sup>®</sup> )	amphetamine sulfate tablet (generic for Evekeo <sup>®</sup> Tablet)
clonidine ER tablet (generic for Kapvay®)	Astarys <sup>™</sup> Capsule
Concerta <sup>®</sup> Tablet	Cotemple <sup>14</sup> XR-ODT
Daytrana <sup>®</sup> Patch	Desoxy <sup>®</sup> Tablet
dexmethylphenidate tablet / ER capsules (generic for Focalin <sup>®</sup> / XR)	Decertine® Spansule®
dextroamphetamine tablet (generic for Dexedrine <sup>®</sup> )	dexmethylphenidate tablet / ER expsules (generic for Foculin <sup>®</sup> / XR)
Focalin <sup>®</sup> Tablet / XR Capsule	dextroampletamine ER capsule (generic for Dexedrine Spansule )
guanfacine ER tablet (generic for Intuniv <sup>®</sup> )	dextroamphetamine solution (generic for ProCentra®)
Methylin <sup>®</sup> Solution	Dyanavel <sup>®</sup> XR Suspension - Exemption for children < 12 years of age
methylphenidate ER tablet (generic for Concerta® Tablet)	Dyanavel <sup>®</sup> XR Tablet
methylphenidate solution (generic for Methylin <sup>®</sup> )	Evekeo® Tablet / Evekeo® ODT Tablet
methylphenidate tablet (generic for Methylin <sup>®</sup> , Ritalin <sup>®</sup> )	Focalin® Tablet / XR Capsule
Vyvanse <sup>®</sup> Capsule / Chewable Tablet	Intuniv <sup>®</sup> Tablet
	Jornay PM <sup>™</sup> Capsule
	methamphetamine tablet (generic for Desoxyn <sup>®</sup> )
	methylphenidate CD capsule (generic for Metadate <sup>®</sup> CD)
	methylphenidate chewable / solution (generic for Methylin <sup>®</sup> )
	methylphenidate ER capsule (generic for Aptensio <sup>®</sup> XR)
	methylphenidate ER tablet (generic for Concerta® Tablet)
	methylphenidate ER tablet (45 mg and 63 mg) (Branded Product Per FDA)
	methylphenidate LA capsule (generic for Ritalin <sup>®</sup> LA)
	methylphenidate patch (generic for Daytrana <sup>®</sup> )
	Mydayis <sup>®</sup> ER Capsule
	ProCentra <sup>®</sup> Solution
	Qelbree <sup>™</sup> Capsule
	Quillichew <sup>®</sup> ER Tablet- Exemption for children < 12 years of age
	Quillivant <sup>®</sup> XR Suspension - Exemption for children < 12 years of age
	Relexxii <sup>™</sup> ER Tablet
	Ritalin <sup>®</sup> LA Capsule
	Ritalin® Tablet
	Strattera <sup>®</sup> Capsule
	Xelstrym* (dextroamphetamine) Patch
	Zenzedi <sup>®</sup> Tablet

Add new to market products as Non-Preferred: Xelstrym® (dextroamphetamine) Patch and methylphenidate ER tablet (45 mg and 63 mg) (Branded Product Named as a Generic Per FDA) Generic

Over Brand Switch: Move Focalin® Tablet / XR Capsule to Non-Preferred and move dexmethylphenidate tablet / ER capsules (generic for Focalin® / XR) to Preferred Move methylphenidate solution (generic for Methylin®) from Non-Preferred to Preferred

Off-cycle change: Move the following products from Non-Preferred to Preferred: Adderall® Tablet, amphetamine salt combo XR capsule (generic for Adderall® XR),

methylphenidate ER tablet (generic for Concerta® Tablet)

Removals: Adzenys® ER Suspension, amphetamine ER suspension (generic for Adzenys®)

INJECTABL	E ANTIPSYCHOTICS
Injecta	ble Long Acting
Preferred	Non-Preferred
Abilify Maintena® Syringe / Vial	
Aristada <sup>®</sup> / Initio <sup>™</sup> Syringe	
fluphenazine decanoate vial (generic for Prolixin decanoate®)	
Haldol® decanoate Ampule	
haloperidol decanoate ampule / vial (generic for Haldol decanoate®)	
Invega® Hafyera	
Invega® Sustenna Prefilled Syringe	
Invega® Trinza Syringe	
Perseris <sup>®</sup> Syringe	
Risperdal <sup>®</sup> Consta Syringe	
Zyprexa <sup>®</sup> Relprevv <sup>™</sup> Vial Kit	
	ANTIPSYCHOTICS
	ral / Topical
Trial and failure of or	ly one preferred drug required
Preferred	Non-Preferred
aripiprazole Tablet / Solution (generic for Abilify®)	Abilify® Tablet / Abilify® MyCite® Tablet
clozapine tablet (generic for Clozaril®)	aripiprazole ODT (generic for Abilify <sup>®</sup> Discmelt <sup>®</sup> )
Invega® Tablet	asenapine tablet (generic for Saphris® SL Tablet)
Latuda <sup>®</sup> Tablet	Caplyta <sup>™</sup> Capsule
lurasidone tablet (generic for Latuda®)	clozapine ODT (generic for FazaClo®)
olanzapine ODT / tablet (generic for Zyprexa®)	Clozaril <sup>®</sup> Tablet
quetiapine tablet / ER tablet (generic for Seroquel <sup>®</sup> / XR)	Fanapt® Tablet / Titration Pack
risperidone ODT / solution / tablet (generic for Risperdal <sup>®</sup> )	Geodon <sup>®</sup> Capsule
Saphris <sup>®</sup> SL Tablet	Latuda <sup>®</sup> Tablet

Symbyax <sup>®</sup> Capsule	Lybalvi <sup>™</sup> Tablet
Vraylar <sup>®</sup> Capsule Trial and Failure of 1 Preferred Atypical Antipsychotic required	Nuplazid <sup>®</sup> Capsule
ziprasidone capsule (generic for Geodon <sup>®</sup> )	Nuplazid® Tablet
	olanzapine-fluoxetine capsule (generic for Symbyax®)
	paliperidone ER tablet (generic for Invega®)
	Rexulti <sup>®</sup> Tablet
	Risperdal <sup>®</sup> Solution / Tablet
	Secuado <sup>®</sup> Patch
	Seroquel® Tablet / XR Tablet / XR Sample Kit
	Versacloz <sup>®</sup> Suspension
	Zyprexa® Tablet / Zydis® Tablet
<u>Add</u> new to market product lurasidone tablet (generic for Latuda®) as Preferred Latuda® Tablet from Preferred to Non-Preferred	<u>Move</u>

### Effective DATE: Draft for July 13, 2023 Meeting Trial and failure of two Preferred drugs are required unless only one Preferred option is listed or is otherwise indicated. Not all therapeutic drug classes are included on the PDL. All drugs in the classes not included are considered Preferred. In addition to trial and failure criteria, clinical criteria (indicated in RED) may also apply. New to market products typically default to Non-Preferred status until reviewed by the PDL Panel. These drugs are listed as TO BE REVIEWED. Drugs requiring prior authorization, clinical criteria and prior authorization request forms can be found at: https://www.nctracks.nc.gov/content/public/providers/pragrams-services/prescription-drugs/outpatient-pharmacy-services

More information on the PDL can be found at: <u>https://medicaid.ncdnn</u>	
C	ARDIOVASCULAR
	ACE INHIBITORS
Preferred	Non-Preferred
benazepril tablet (generic for Lotensin®)	Accupril <sup>®</sup> Tablet
enalapril tablet (generic for Vasotec <sup>®</sup> )	Altace® Capsule
lisinopril tablet (generic for Prinivil <sup>®</sup> and Zestril <sup>®</sup> )	captopril tablet (generic for Capoten®)
ramipril capsule (generic for Altace <sup>®</sup> )	enalapril solution (generic for Epaned <sup>®</sup> ) - Exemption for children < 12 years of age
	Epaned <sup>®</sup> Solution - Exemption for children < 12 years of age
	fosinopril tablet (generic for Monopril <sup>®</sup> )
	Lotensin <sup>®</sup> Tablet
	moexipril tablet (generic for Univasc <sup>®</sup> )
	Qbrelis <sup>®</sup> Solution - Exemption for children < 12 years of age
	perindopril tablet (generic for Aceon®)
	quinapril tablet (generic for Accupril®)
	trandolapril tablet (generic for Mavik <sup>®</sup> )
	Vasotec <sup>®</sup> Tablet
	Zestril <sup>®</sup> Tablet
No recommenda	tions. Class open for comments.
ACE INHIBITOR / CALCI	UM CHANNEL BLOCKER COMBINATIONS
Preferred	Non-Preferred
amlodipine-benazepril capsule (generic for Lotrel <sup>®</sup> )	Lotrel <sup>®</sup> Capsule
	trandolapril-verapamil ER tablet (generic for Tarka <sup>®</sup> )
	tions. Class open for comments.
Preferred	Non-Preferred
-	
anglapril HCTZ tablat (ganaria far Vacaratia <sup>®</sup> )	A course i contra
enalapril-HCTZ tablet (generic for Vaseretic <sup>®</sup> ) lisinonril-HCTZ tablet (generic for Prinzide <sup>®</sup> , Zestoretic <sup>®</sup> )	Accuretic <sup>®</sup> Tablet benazenril-HCTZ tablet (generic for Lotensin <sup>®</sup> HCT)
enalapril-HCTZ tablet (generic for Vascretic <sup>®</sup> ) lisinopril-HCTZ tablet (generic for Prinzide <sup>®</sup> , Zestoretic <sup>®</sup> )	benazepril-HCTZ tablet (generic for Lotensin® HCT)
	benazepril-HCTZ tablet (generic for Lotensin <sup>®</sup> HCT) captopril-HCTZ tablet (generic for Capozide <sup>®</sup> )
	benazepril-HCTZ tablet (generic for Lotensin <sup>®</sup> HCT) captopril-HCTZ tablet (generic for Capozide <sup>®</sup> ) fosinopril-HCTZ tablet (generic for Monopril <sup>®</sup> HCT) Lotensin <sup>®</sup> HCT Tablet
	benazepril-HCTZ tablet (generic for Lotensin <sup>®</sup> HCT) captopril-HCTZ tablet (generic for Capozide <sup>®</sup> ) fosinopril-HCTZ tablet (generic for Monopril <sup>®</sup> HCT)
	benazepril-HCTZ tablet (generic for Lotensin <sup>®</sup> HCT) captopril-HCTZ tablet (generic for Capozide <sup>®</sup> ) fosinopril-HCTZ tablet (generic for Monopril <sup>®</sup> HCT) Lotensin <sup>®</sup> HCT Tablet quinapril-HCTZ tablet (generic for Accuretic <sup>®</sup> , Quinaretic <sup>®</sup> )
	benazepril-HCTZ tablet (generic for Lotensin <sup>®</sup> HCT) captopril-HCTZ tablet (generic for Capozide <sup>®</sup> ) fosinopril-HCTZ tablet (generic for Monopril <sup>®</sup> HCT) Lotensin <sup>®</sup> HCT Tablet guinapril-HCTZ tablet (generic for Accuretic <sup>®</sup> , Quinaretic <sup>®</sup> ) Vaseretic <sup>®</sup> Tablet
lisinopril-HCTZ tablet (generic for Prinzide <sup>®</sup> , Zestoretic <sup>®</sup> )	benazepril-HCTZ tablet (generic for Lotensin <sup>®</sup> HCT) captopril-HCTZ tablet (generic for Capozide <sup>®</sup> ) fosinopril-HCTZ tablet (generic for Monopril <sup>®</sup> HCT) Lotensin <sup>®</sup> HCT Tablet guinapril-HCTZ tablet (generic for Accuretic <sup>®</sup> , Quinaretic <sup>®</sup> ) Vaseretic <sup>®</sup> Tablet
lisinopril-HCTZ tablet (generic for Prinzide <sup>®</sup> , Zestoretic <sup>®</sup> )	benazepril-HCTZ tablet (generic for Lotensin® HCT) captopril-HCTZ tablet (generic for Capozide®) fosinopril-HCTZ tablet (generic for Monopril® HCT) Lotensin® HCT Tablet quinapril-HCTZ tablet (generic for Accuretic®, Quinaretic®) Vaseretic® Tablet Zestoretic® Tablet
lisinopril-HCTZ tablet (generic for Prinzide <sup>®</sup> , Zestoretic <sup>®</sup> )	benazepril-HCTZ tablet (generic for Lotensin® HCT) captopril-HCTZ tablet (generic for Capozide®) fosinopril-HCTZ tablet (generic for Monopril® HCT) Lotensin® HCT Tablet quinapril-HCTZ tablet (generic for Accuretic®, Quinaretic®) Vaseretic® Tablet Zestoretic® Tablet SIN II RECEPTOR BLOCKERS
lisinopril-HCTZ tablet (generic for Prinzide <sup>®</sup> , Zestoretic <sup>®</sup> )	benzzepril-HCTZ tablet (generic for Lotensin <sup>®</sup> HCT) captopril-HCTZ tablet (generic for Capozide <sup>®</sup> ) fosinopril-HCTZ tablet (generic for Monopril <sup>®</sup> HCT) Lotensin <sup>®</sup> HCT Tablet quinapril-HCTZ tablet (generic for Accuretic <sup>®</sup> , Quinaretic <sup>®</sup> ) Vaseretic <sup>®</sup> Tablet Zestoretic <sup>®</sup> Tablet SIN II RECEPTOR BLOCKERS Non-Preferred
lisinopril-HCTZ tablet (generic for Prinzide <sup>®</sup> , Zestoretic <sup>®</sup> )  ANGIOTEN  Preferred  irbesartan tablet (generic for Avapro <sup>®</sup> )	benzzepril-HCTZ tablet (generic for Lotensin <sup>®</sup> HCT) captopril-HCTZ tablet (generic for Capozide <sup>®</sup> ) fosinopril-HCTZ tablet (generic for Monopril <sup>®</sup> HCT) Lotensin <sup>®</sup> HCT Tablet guinapril-HCTZ tablet (generic for Accuretic <sup>®</sup> , Quinaretic <sup>®</sup> ) Vaseretic <sup>®</sup> Tablet Zestoretic <sup>®</sup> Tablet SIN II RECEPTOR BLOCKERS Atacand <sup>®</sup> Tablet
lisinopril-HCTZ tablet (generic for Prinzide®, Zestoretic®)  ANGIOTEN  Preferred  irbesartan tablet (generic for Avapro®) losartan tablet (generic for Cozaar®)	benzzepril-HCTZ tablet (generic for Lotensin <sup>®</sup> HCT) captopril-HCTZ tablet (generic for Capozide <sup>®</sup> ) fosinopril-HCTZ tablet (generic for Monopril <sup>®</sup> HCT) Lotensin <sup>®</sup> HCT Tablet guinapril-HCTZ tablet (generic for Accuretic <sup>®</sup> , Quinaretic <sup>®</sup> ) Vaseretic <sup>®</sup> Tablet Zestoretic <sup>®</sup> Tablet SIN II RECEPTOR BLOCKERS Non-Preferred Atacand <sup>®</sup> Tablet Avapro <sup>®</sup> Tablet
lisinopril-HCTZ tablet (generic for Prinzide®, Zestoretic®)  ANGIOTEN  Preferred  irbesartan tablet (generic for Avapro®) losartan tablet (generic for Cozaa®) olmesartan tablet (generic for Benicar® Tablet)	benzzepril-HCTZ tablet (generic for Lotensin <sup>®</sup> HCT) captopril-HCTZ tablet (generic for Capozide <sup>®</sup> ) fosinopril-HCTZ tablet (generic for Monopril <sup>®</sup> HCT) Lotensin <sup>®</sup> HCT Tablet quinapril-HCTZ tablet (generic for Accuretic <sup>®</sup> , Quinaretic <sup>®</sup> ) Vaseretic <sup>®</sup> Tablet Zestoretic <sup>®</sup> Tablet SIN I RECEPTOR BLOCKERS Atacand <sup>®</sup> Tablet Atacand <sup>®</sup> Tablet Benicar <sup>®</sup> Tablet
lisinopril-HCTZ tablet (generic for Prinzide®, Zestoretic®)  ANGIOTEN  Preferred  irbesartan tablet (generic for Avapro®) losartan tablet (generic for Cozaa®) olmesartan tablet (generic for Benicar® Tablet)	benazepril-HCTZ tablet (generic for Lotensin <sup>®</sup> HCT) captopril-HCTZ tablet (generic for Capozide <sup>®</sup> ) fosinopril-HCTZ tablet (generic for Monopril <sup>®</sup> HCT) Lotensin <sup>®</sup> HCT Tablet quinapril-HCTZ tablet (generic for Accuretic <sup>®</sup> , Quinaretic <sup>®</sup> ) Vaseretic <sup>®</sup> Tablet Zestoretic <sup>®</sup> Tablet SIN II RECEPTOR BLOCKERS Atacand <sup>®</sup> Tablet Atacand <sup>®</sup> Tablet Benicar <sup>®</sup> Tablet candesartan tablet (generic for Atacand <sup>®</sup> )
lisinopril-HCTZ tablet (generic for Prinzide®, Zestoretic®)  ANGIOTEN  Preferred  irbesartan tablet (generic for Avapro®) losartan tablet (generic for Cozaa®) olmesartan tablet (generic for Benicar® Tablet)	benzzepril-HCTZ tablet (generic for Capezide <sup>®</sup> ). captopril-HCTZ tablet (generic for Capezide <sup>®</sup> ). fosinopril-HCTZ tablet (generic for Accuretic <sup>®</sup> , Quinaretic <sup>®</sup> ). Vaseretic <sup>®</sup> Tablet Zestoretic <sup>®</sup> Tablet SIN II RECEPTOR BLOCKERS SIN II RECEPTOR BLOCKERS Denicar <sup>®</sup> Tablet Avapro <sup>®</sup> Tablet Benicar <sup>®</sup> Tablet candesarta tablet (generic for Atacand <sup>®</sup> ). Cozaar <sup>®</sup> Tablet
lisinopril-HCTZ tablet (generic for Prinzide®, Zestoretic®)  ANGIOTEN  Preferred  irbesartan tablet (generic for Avapro®) losartan tablet (generic for Cozaa®) olmesartan tablet (generic for Benicar® Tablet)	benzzepril-HCTZ tablet (generic for Capozide <sup>®</sup> ) fosinopril-HCTZ tablet (generic for Capozide <sup>®</sup> ) fosinopril-HCTZ tablet (generic for Acouretic <sup>®</sup> , Quinaretic <sup>®</sup> ) Vaseretic <sup>®</sup> Tablet Zestoretic <sup>®</sup> Tablet SIN II RECEPTOR BLOCKERS Accand <sup>®</sup> Tablet Accand <sup>®</sup> Tablet Accand <sup>®</sup> Tablet Benicar <sup>®</sup> Tablet Benicar <sup>®</sup> Tablet Cozard <sup>®</sup> Tablet Diovan <sup>®</sup> Tablet
lisinopril-HCTZ tablet (generic for Prinzide®, Zestoretic®)  ANGIOTEN  Preferred  irbesartan tablet (generic for Avapro®) losartan tablet (generic for Cozaa®) olmesartan tablet (generic for Benicar® Tablet)	benzzepril-HCTZ tablet (generic for Capozide <sup>®</sup> ) captopril-HCTZ tablet (generic for Capozide <sup>®</sup> ) fosinopril-HCTZ tablet (generic for Monopril <sup>®</sup> HCT) Lotensin <sup>®</sup> HCT Tablet guinapril-HCTZ tablet (generic for Accuretic <sup>®</sup> , Quinaretic <sup>®</sup> ) Vaseretic <sup>®</sup> Tablet Zestoretic <sup>®</sup> Tablet SIN II RECEPTOR BLOCKERS SIN II RECEPTOR BLOCKERS Accand <sup>®</sup> Tablet Atcand <sup>®</sup> Tablet Avapro <sup>®</sup> Tablet Benicar <sup>®</sup> Tablet candesartan tablet (generic for Atcand <sup>®</sup> ) Cozare <sup>®</sup> Tablet Diovan <sup>®</sup> Tablet Edarbi <sup>®</sup> Tablet
lisinopril-HCTZ tablet (generic for Prinzide®, Zestoretic®)  ANGIOTEN  Preferred  irbesartan tablet (generic for Avapro®) losartan tablet (generic for Cozaa®) olmesartan tablet (generic for Benicar® Tablet)	benzzepril-HCTZ tablet (generic for Capozide <sup>®</sup> ) captopril-HCTZ tablet (generic for Capozide <sup>®</sup> ) fosinopril-HCTZ tablet (generic for Accuretic <sup>®</sup> , Quinaretic <sup>®</sup> ) Latensin <sup>®</sup> HCT Tablet quinapril-HCTZ tablet (generic for Accuretic <sup>®</sup> , Quinaretic <sup>®</sup> ) Vaseretic <sup>®</sup> Tablet Zestoretic <sup>®</sup> Tablet SIN II RECEPTOR BLOCKERS SIN II RECEPTOR BLOCKERS Accand <sup>®</sup> Tablet Atacand <sup>®</sup> Tablet Avapro <sup>®</sup> Tablet Benicar <sup>®</sup> Tablet candesartan tablet (generic for Atacand <sup>®</sup> ) Cozaar <sup>®</sup> Tablet Edarbi <sup>®</sup> Tablet Edarbi <sup>®</sup> Tablet Edarbi <sup>®</sup> Tablet
lisinopril-HCTZ tablet (generic for Prinzide®, Zestoretic®)  ANGIOTEN  Preferred  irbesartan tablet (generic for Avapro®) losartan tablet (generic for Cozaa®) olmesartan tablet (generic for Benicar® Tablet)	benzzepril-HCTZ tablet (generic for Lotensin <sup>®</sup> HCT) captopril-HCTZ tablet (generic for Capozide <sup>®</sup> ) fosinopril-HCTZ tablet (generic for Monopril <sup>®</sup> HCT) Lotensin <sup>®</sup> HCT Tablet quinapril-HCTZ tablet (generic for Accuretic <sup>®</sup> , Quinaretic <sup>®</sup> ) Vaseretic <sup>®</sup> Tablet Zestoretic <sup>®</sup> Tablet SINI TRECEPTOR BLOCKERS Accand <sup>®</sup> Tablet Accand <sup>®</sup> Tablet Benicar <sup>®</sup> Tablet candesartan tablet (generic for Atcand <sup>®</sup> ) Cozan <sup>®</sup> Tablet Diovan <sup>®</sup> Tablet Etath <sup>®</sup> Tab
lisinopril-HCTZ tablet (generic for Prinzide®, Zestoretic®)  ANGIOTEN  ANGIOTEN  Preferred  irbesartan tablet (generic for Avapro®) losartan tablet (generic for Cozaar®) olmesartan tablet (generic for Benicar® Tablet) valsartan tablet (generic for Diovan®)	benzzepril-HCTZ tablet (generic for Lotensin <sup>®</sup> HCT) captopril-HCTZ tablet (generic for Capozide <sup>®</sup> ) fosinopril-HCTZ tablet (generic for Monopril <sup>®</sup> HCT) Lotensin <sup>®</sup> HCT Tablet quinapril-HCTZ tablet (generic for Accuretic <sup>®</sup> , Quinaretic <sup>®</sup> ) Vaseretic <sup>®</sup> Tablet Zestoretic <sup>®</sup> Tablet SINI TRECEPTOR BLOCKERS Accand <sup>®</sup> Tablet Accand <sup>®</sup> Tablet Benicar <sup>®</sup> Tablet candesartan tablet (generic for Atcand <sup>®</sup> ) Cozan <sup>®</sup> Tablet Diovan <sup>®</sup> Tablet Etath <sup>®</sup> Tab
lisinopril-HCTZ tablet (generic for Prinzide®, Zestoretic®)  ANGIOTEN  ANGIOTEN  Preferred  irbesartan tablet (generic for Avapro®) losartan tablet (generic for Cozaar®) olmesartan tablet (generic for Benicar® Tablet) valsartan tablet (generic for Diovan®)	benzzepril-HCTZ tablet (generic for Capozide <sup>®</sup> ) captopril-HCTZ tablet (generic for Capozide <sup>®</sup> ) fosinopril-HCTZ tablet (generic for Accuretic <sup>®</sup> , Quinaretic <sup>®</sup> ) Vaseretic <sup>®</sup> Tablet Zestoretic <sup>®</sup> Tablet Zestoretic <sup>®</sup> Tablet <b>INI IRCEPTOR BLOCKERS</b> SINI IRCEPTOR BLOCKERS Accand <sup>®</sup> Tablet Accand <sup>®</sup> Tablet Benicar <sup>®</sup> Tablet Benicar <sup>®</sup> Tablet Cozzar <sup>®</sup> Tablet Diovar <sup>®</sup> Tablet Edarbu <sup>®</sup> Tablet
lisinopril-HCTZ tablet (generic for Prinzide®, Zestoretic®)  ANGIOTEN  ANGIOTEN  Preferred  irbesartan tablet (generic for Avapro®) losartan tablet (generic for Cozaar®) olmesartan tablet (generic for Benicar® Tablet) valsartan tablet (generic for Diovan®)  ANGIOTENSIN II RI	benzzepril-HCTZ tablet (generic for Capozide <sup>®</sup> ) fosinopril-HCTZ tablet (generic for Capozide <sup>®</sup> ) fosinopril-HCTZ tablet (generic for Accuretic <sup>®</sup> , Quinaretic <sup>®</sup> ) Vaseretic <sup>®</sup> Tablet Zestoretic <sup>®</sup> Tablet Zestoretic <sup>®</sup> Tablet Mon-Preferred Atacand <sup>®</sup> Tablet Atacand <sup>®</sup> Tablet Benicar <sup>®</sup> Tablet Benicar <sup>®</sup> Tablet Cozzar <sup>®</sup> Tablet Edarbu <sup>®</sup> Tablet Diovan <sup>®</sup> Tablet Edarbu <sup>®</sup> Tabl
lisinopril-HCTZ tablet (generic for Prinzide®, Zestoretic®)  ANGIOTEN  ANGIOTEN  irbesartan tablet (generic for Avapro®)  losartan tablet (generic for Gozaar®)  olmesartan tablet (generic for Benicar® Tablet) valsartan tablet (generic for Diovan®)  ANGIOTENSIN II RI  ANGIOTENSIN II RI  Preferred	benzzepril-HCTZ tablet (generic for Capozide <sup>®</sup> ) captopril-HCTZ tablet (generic for Capozide <sup>®</sup> ) fosinopril-HCTZ tablet (generic for Accuretic <sup>®</sup> , Quinaretic <sup>®</sup> ) Vaseretic <sup>®</sup> Tablet Zestoretic <sup>®</sup> Tablet Zestoretic <sup>®</sup> Tablet Ministre CEPTOR BLOCKERS SIN II RECEPTOR BLOCKERS Accard <sup>®</sup> Tablet Atacard <sup>®</sup> Tablet Atacard <sup>®</sup> Tablet Avapro <sup>®</sup> Tablet Benicar <sup>®</sup> Tablet candesartan tablet (generic for Atacard <sup>®</sup> ) Cozare <sup>®</sup> Tablet Edarbi
lisinopril-HCTZ tablet (generic for Prinzide®, Zestoretic®)  ANGIOTEN  ANGIOTEN  Preferred  irbesartan tablet (generic for Avapro®) losartan tablet (generic for Cozaa®) olmesartan tablet (generic for Benicar® Tablet) valsartan tablet (generic for Diovan®)  ANGIOTENSIN II RI  Preferred amlodipine-olmesartan tablet (generic for Azor®)	benzzepril-HCTZ tablet (generic for Capozide <sup>®</sup> ) captopril-HCTZ tablet (generic for Capozide <sup>®</sup> ) fosinopril-HCTZ tablet (generic for Accuretic <sup>®</sup> , Quinaretic <sup>®</sup> ) Vaseretic <sup>®</sup> Tablet Zestoretic <sup>®</sup> Tablet SIN II RECEPTOR BLOCKERS INT RECEPTOR BLOCKERS SIN II RECEPTOR BLOCKERS Cozan <sup>®</sup> Tablet Atacand <sup>®</sup> Tablet Benicar <sup>®</sup> Tablet Cozan <sup>®</sup> Tablet Cozan <sup>®</sup> Tablet Dirow <sup>®</sup> Tablet Edath <sup>®</sup> Tablet Edath <sup>®</sup> Tablet Edath <sup>®</sup> Tablet Edath <sup>®</sup> Tablet telmisartan tablet (generic for Micardis <sup>®</sup> Tablet) ECEPTOR BLOCKER COMBINATIONS Cozan <sup>®</sup> Tablet Azor <sup>®</sup> Tablet
lisinopril-HCTZ tablet (generic for Prinzide®, Zestoretic®)  Item Interference  ANGIOTEN  ANGIOTEN  ANGIOTENSIN II RI  Preferred  amlodipine-olmesartan tablet (generic for Azor®)  amlodipine-olmesartan tablet (generic for Azor®)	benzepril-HCTZ tablet (generic for Capozide <sup>®</sup> ) fosinopril-HCTZ tablet (generic for Monopril <sup>®</sup> HCT) Lotensin <sup>®</sup> HCT Tablet quinapril-HCTZ tablet (generic for Accuretic <sup>®</sup> , Quinaretic <sup>®</sup> ) Vaseretic <sup>®</sup> Tablet Zestoretic <sup>®</sup> Tablet SIN II RECEPTOR BLOCKERS SIN II RECEPTOR BLOCKERS SIN II RECEPTOR BLOCKERS Cozan <sup>®</sup> Tablet Atcand <sup>®</sup> Tablet Accand <sup>®</sup> Tablet Cozan <sup>®</sup> Tablet Ediarbi <sup>®</sup> Tablet Ediarbi <sup>®</sup> Tablet Ediarbi <sup>®</sup> Tablet Ediarbi <sup>®</sup> Tablet Ediarbi <sup>®</sup> Tablet telmisarta tablet (generic for Atcand <sup>®</sup> ) Cozan <sup>®</sup> Tablet Ediarbi <sup>®</sup> Tablet Ediarbi <sup>®</sup> Tablet Ediarbi <sup>®</sup> Tablet telmisarta tablet (generic for Teveten <sup>®</sup> ) Micardis <sup>®</sup> Tablet telmisarta tablet (generic for Teveten <sup>®</sup> ) Micardis <sup>®</sup> Tablet telmisarta tablet (generic for Micardis <sup>®</sup> Tablet) telmisarta tablet (generic for Micardis <sup>®</sup> Tablet) Micardis <sup>®</sup> Tablet telmisarta tablet (generic for Micardis <sup>®</sup> Tablet) telmisarta tablet (generic for Micardis <sup>®</sup> Tablet) telmisarta tablet (generic for Micardis <sup>®</sup> Tablet) Micardis <sup>®</sup> Tablet telmisarta tablet (generic for Micardis <sup>®</sup> Tablet) Micardis <sup>®</sup> Tablet Exforge <sup>®</sup> Tablet
lisinopril-HCTZ tablet (generic for Prinzide®, Zestoretic®)  ANGIOTEN  ANGIOTEN  Preferred  irbesartan tablet (generic for Avapro®)  losartan tablet (generic for Cozaar®)  olmesartan tablet (generic for Benicar® Tablet)  valsartan tablet (generic for Diovan®)  ANGIOTENSIN II RI  Preferred  anlodipine-olmesartan tablet (generic for Azor®)  amlodipine-valsartan tablet (generic for Azor®)  amlodipine-valsartan tablet (generic for Azor®)	benzzepril-HCTZ tablet (generic for Capozide <sup>®</sup> ). captopril-HCTZ tablet (generic for Capozide <sup>®</sup> ). fosinopril-HCTZ tablet (generic for Accuretic <sup>®</sup> , Quinaretic <sup>®</sup> ). Vaseretic <sup>®</sup> Tablet Zestoretic <sup>®</sup> Tablet Zestoretic <sup>®</sup> Tablet <b>Non-Preferred</b> Atacand <sup>®</sup> Tablet Benicar <sup>®</sup> Tablet Cozaaf <sup>®</sup> Tablet Cozaaf <sup>®</sup> Tablet Etarbif <sup>®</sup> T

ANGIOTENSIN II RECE	PTOR BLOCKER DIURETIC COMBINATIONS
Preferred	Non-Preferred
irbesartan-HCTZ tablet (generic for Avalide <sup>®</sup> )	Atacand® HCT Tablet
losartan-HCTZ tablet (generic for Hyzaar®)	Avalide <sup>®</sup> Tablet
olmesartan-HCTZ tablet (generic for Benicar <sup>®</sup> HCT Tablet)	Benicar <sup>®</sup> HCT Tablet
valsartan-HCTZ tablet (generic for Diovan <sup>®</sup> HCT)	candesartan-HCTZ tablet (generic for Atacand® HCT)
	Diovan <sup>®</sup> HCT Tablet
	Edarbyclor <sup>®</sup> Tablet
	Hyzaar <sup>®</sup> Tablet
	Micardis® HCT Tablet
	telmisartan-HCTZ tablet (generic for Micardis <sup>®</sup> HCT)
	FOR / NEPRILYSIN BLOCKER COMBINATIONS
Preferred	Non-Preferred
Entresto <sup>®</sup> - Clinical Criteria Apply	
	ANTI-ARRHYTHMICS
Preferred	Non-Preferred
amiodarone tablet (generic for Cordarone <sup>®</sup> )	Multaq <sup>®</sup> Tablet
disopyramide capsule (generic for Norpace <sup>®</sup> )	Norpace <sup>®</sup> Capsule / CR Capsule
dofetilide capsule (generic for Tikosyn <sup>®</sup> )	Pacerone® Tablet
flecainide tablet (generic for Tambocor®)	quinidine gluconate ER tablet (generic for Quinaglute DuraTabs <sup>®</sup> )
mexiletine capsule (generic for Mexitil <sup>®</sup> )	Rythmol SR <sup>®</sup> Capsule
propafenone tablet (generic for Rythmol®)	Tikosyn <sup>®</sup> Capsule
propafenone SR capsule (generic for Rythmol SR <sup>®</sup> )	
quinidine sulfate tablet (generic for Quinidex® Tablet)	
	BETA BLOCKERS
Preferred	Non-Preferred
atenolol tablet (generic for Tenormin®)	acebutolol capsule (generic for Sectral <sup>®</sup> )
carvedilol tablet (generic for Coreg®)	Betapace® Tablet / AF Tablet
labetalol tablet (generic for Trandate <sup>®</sup> )	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 <sup>®</sup> Tablet
propranolol solution / tablet / ER capsule (generic for Inderal <sup>®</sup> )	carvedilol ER capsule (generic for Coreg <sup>®</sup> CR Capsule)
Sorine <sup>®</sup> Tablet	Coreg® Tablet / CR Capsule
sotalol tablet / AF tablet (generic for Betapace <sup>®</sup> / AF, Sorine®)	Corgard <sup>®</sup> Tablet
	Hemangeol <sup>®</sup> Solution - Exemption for diagnosis of infantile hemangioma
	Inderal® LA Capsule / XL Capsule
	Innopran <sup>®</sup> XL Capsule
	Kapspargo <sup>™</sup> Sprinkle - Exemption for children < 12 years of age
	Lopressor <sup>®</sup> Tablet
	nadolol tablet (generic for Corgard <sup>®</sup> )
	nebivolol tablet (generic for Bystolic <sup>®</sup> )
	pindolol tablet (generic for Visken®)
	Sotylize <sup>®</sup> Solution
	Tenormin <sup>®</sup> Tablet
	timolol tablet (generic for Blocadren®)
	Toprol XL <sup>®</sup> Tablet
	CKER DIURETIC COMBINATIONS
Preferred	Non-Preferred
-	
atenolol-chlorthalidone tablet (generic for Tenoretic®)	metoprolol-HCTZ tablet (generic for Lopressor <sup>®</sup> HCT)
-	metoprolol-HCTZ tablet (generic for Lopresson <sup>®</sup> HCT) nadolol-bendroflumethiazide tablet (generic for Corzide®)
atenolol-chlorthalidone tablet (generic for Tenoretic®)	
atenolol-chlorthalidone tablet (generic for Tenoretic®)	nadolol-bendroflumethiazide tablet (generic for Corzide®)
atenolol-chlorthalidone tablet (generic for Tenoretic®)	nadolol-bendroflumethiazide tablet (generic for Corzide®) propranolol-HCTZ tablet (generic for Inderide <sup>®</sup> )
atenolol-chlorthalidone tablet (generic for Tenoretic®)	nadolol-bendroflumethiazide tablet (generic for Corzide®) propranolol-HCTZ tablet (generic for Inderide <sup>®</sup> ) Tenoretic <sup>®</sup> Tablet
atenolol-chlorthalidone tablet (generic for Tenoretic <sup>®</sup> ) bisoprolol-HCTZ tablet (generic for Ziac <sup>®</sup> )	nadolol-bendroflumethiazide tablet (generic for Corzide®) propranolol-HCTZ tablet (generic for Inderide <sup>®</sup> ) Tenoretic <sup>®</sup> Tablet
atenolol-chlorthalidone tablet (generic for Tenoretic <sup>®</sup> ) bisoprolol-HCTZ tablet (generic for Ziac <sup>®</sup> )	nadolol bendroflumethiazide tablet (generic for Corzide®)         propranolol-HCTZ tablet (generic for Inderide <sup>®</sup> )         Tenoretic <sup>®</sup> Tablet         Ziac <sup>®</sup> Tablet

BILE AG	ID SEQUESTRANTS Non-Preferred
cholestyramine packet / powder / light packet / light powder (generic for Questran <sup>®</sup> / Questran <sup>®</sup> Light)	
	colesevelam packet / tablet (generic for Welchol®) Colestid® Granules / Tablet
colestipol tablet (generic for Colestid® Tablet)	
	colestipol granules (generic for Colestid <sup>®</sup> Granules) Prevalite <sup>®</sup> Packet / Powder
	Prevante Packet / Powder Questran <sup>®</sup> Light Powder / Packet / Powder
	Questran Light Powder / Packet / Powder Welchol <sup>®</sup> Packet / Tablet
	Weichol Packet / Lablet
CHOI ESTEI	OL LOWERING AGENTS
	Non-Preferred
Preferred atorvastatin tablet (generic for Lipitor <sup>®</sup> )	Altoprev <sup>®</sup> Tablet
ezetimibe (generic for Zetia <sup>®</sup> )	amlodipine-atorvastatin tablet (generic for Caduet <sup>®</sup> )
lovastatin tablet (generic for Mevacor®)	Atorvaliq® (atorvastatin) Suspension
pravastatin tablet (generic for Pravachol®)	Caduet® Tablet
rosuvastatin tablet (generic for Crestor®)	Crestor <sup>®</sup> Tablet
simvastatin tablet (generic for Zocor <sup>®</sup> )	Ezallor <sup>™</sup> Capsule
	ezetimibe-simvastatin (generic for Vytorin®)
	fluvastatin capsule / ER tablet (generic for Lescol® / XL)
	Juxtapid <sup>®</sup> Capsule - Clinical criteria apply
	Lescol <sup>®</sup> XL Tablet
	Lipitor <sup>®</sup> Tablet
	Livalo® Tablet
	Nexletol® Tablet
	Nexlizet <sup>®</sup> Tablet
	Vytorin® Tablet
	Zetia <sup>®</sup> Tablet
	Zocor® Tablet
	Zypitamag <sup>™</sup> Tablet
Add new to market product Atorval	q <sup>®</sup> (atorvastatin) Suspension as Non-Preferred
CORON	RY VASODILATORS
Preferred	Non-Preferred
isosorbide dinitrate tablet (generic for Isordil <sup>®</sup> Titradose <sup>®</sup> , IsoDitrate <sup>®</sup> , et.al.)	Gonitro <sup>®</sup> Sublingual Powder
isosorbide mononitrate tablet / ER tablet (generic for Ismo <sup>®</sup> , Monoket <sup>®</sup> , Imdur <sup>®</sup> )	Isordil <sup>®</sup> Tablet / Titradose <sup>®</sup> Tablet
Minitran <sup>®</sup> Patch	Nitro-Bid <sup>®</sup> Ointment
nitroglycerin ER eapsule / patch / spray / sublingual (generic for Nitro-Dur®, Minitran®, Nitrostat®, Nitrolingual®, Nitromist®)	Nitro-Dur <sup>®</sup> Patch
Nitrostat <sup>®</sup> SL Tablet	Nitrolingual <sup>®</sup> Spray
	Verquvo <sup>™</sup> Tablet
<u>Removal</u> : ni	troglycerin ER capsule
DIHYDROPYRIDINE	CALCIUM CHANNEL BLOCKERS
Preferred	Non-Preferred
amlodipine tablet (generic for Norvasc <sup>®</sup> )	Adalat <sup>®</sup> CC Tablet
nifedipine capsule (generic for Procardia <sup>®</sup> )	felodipine ER tablet (generic for Plendil <sup>®</sup> )
nifedipine Et tablet (generic for Adalat CC <sup>®</sup> / Procardia XL <sup>®</sup> )	isradipine tax under (generic for Dynacirc <sup>®</sup> )
	Katerzia <sup>™</sup> Suspension - Exemption for children < 12 years of age
	katerza Suspension - Exemption for confuren < 12 years of age
	nicardipine capsule (generic for Conjupt <sup>-</sup> )
	nicardipine capsule (generic for Cardene ) nimodipine capsule (generic for Nimotop <sup>®</sup> )
	nimodipine capsule (generic for Nimotop <sup>-</sup> )
	nisoldipine ER tablet (generic for Sular <sup>**</sup> ) Norliqva <sup>®</sup> Solution
	Norvasc <sup>®</sup> Tablet
	Nymalize <sup>®</sup> Solution
	Procardia® Capsule / XL Tablet Sular® Tablet
Remova	: Adalat® CC Tablet
	RENIN INHIBITOR
Dec C 1	
Preferred	Non-Preferred
Tekturna® Tablet	Non-Preferred aliskiren tablet (generic for Tekturna® Tablet)

North Carolina Division of Health Benefits North Carolina Medicaid Preferred Drug List (PDL) Effective DATE: Draft for July 13, 2023 Meeting Trial and failure of two Preferred drugs are required unless only one Preferred option is listed or is otherwise indicated. Not all therapeutic drug classes are included on the PDL. All drugs in the classes not included are considered Preferred. In addition to trial and failure criteria, clinical criteria (indicated in RED) may also apply. New to market products typically default to Non-Preferred status until reviewed by the PDL Panel. These drugs are listed as TO BE REVIEWED. Drugs requiring prior authorization, clinical criteria and prior authorization request forms can be found at: https://www.nctracks.nc.gov/content/public/providers/pharmacy.html More information on the PDL can be found at: https://medicaid.ncdhhs.gov/providers/programs-services/prescription-drugs/outpatient-pharmacy-services ENDOTHELIN RECEPTOR ANTAGONISTS Covered for di nary Arterial Hype only Preferred Non-Preferred ambrisentan tablet (generic for Letairis® Tablet) bosentan tablet (generic for Tracleer® Tablet) Tracleer® Tablet Letairis® Tablet Opsumit<sup>®</sup> Tablet Tracleer® Suspension INHALED PROSTACYCLIN ANALOGS Non-Preferred Preferred Tyvaso® Refill Kit / Solution / Starter Kit Tyvaso® DPI entavis<sup>®</sup> Solution NIACIN DERIVATIVES Preferred Non-Preferred liaspan<sup>⊕</sup> ER Tablet iacin ER tablet (generic for Niaspan®) Removal: Niaspan® ER Tablet NITRATE COMBINATION Preferred Non-Preferred Bidil<sup>®</sup> Tablet osorbide dinit/hydralazine tablet (generic for Bidil®) NON-DIHYDROPYRIDINE CALCIUM CHANNEL BLOCKERS Preferred Non-Preferred Cartia XT<sup>®</sup> Capsule (branded generic for Cardizem CD<sup>®</sup>) Calan SR<sup>®</sup> Caplet Dilt XR<sup>®</sup> Capsule (branded generic for Dilacor XR<sup>®</sup>) Cardizem CD<sup>®</sup> Capsule Cardizem<sup>®</sup> Tablet / LA Tablet liltiazem ER 24 hour capsule (generic for Dilacor XR®, Tia liltiazem tablet / CD capsule / ER 12 hour capsule (generic for Cardizem® / CD / SR) diltiazem LA tablet (generic for Cardizem LA®) Faztia XT<sup>®</sup> Capsule (branded generic for Tiazac<sup>®</sup>) Matzim<sup>®</sup> LA Tablet (generic for Cardizem LA<sup>®</sup>) fiadylt<sup>®</sup> ER Capsule Tiazac<sup>®</sup> Capsule erapamil tablet / ER tablet (generic for Calan® / SR) erapamil 360 mg capsule verapamil ER capsule / PM capsule (generic for Verelan® / Verelan® PM) Verelan® Capsule / Verelan® PM Capsule ORAL PULMONARY HYPERTENSION Covered for diagnosis of Pulmonary Arterial Hypertension (all) and Chronic Thromboembolic Pulmonary Hypertension- Adempas<sup>®</sup> only Preferred Non-Preferred Alyq<sup>®</sup> Tablet (branded generic for tadalafil) Adcirca® Tablet sildenafil (generic for Revatio®) Tablet Adempas® Tablet adalafil tablet (generic for Adcirca® Tablet) Orenitram® ER Tablet m® (trepostinil) Titration Kit Revatio<sup>®</sup> Suspension / Tablet Exemption for children < 12 years of age for Suspension ONLY sildenafil suspension (generic for Revatio<sup>®</sup> Suspension) Exemption for children < 12 years of age adliq<sup>®</sup> (tadalafil) Suspension Uptravi<sup>®</sup> Tablet Add new to market products as Non-Preferred: Tadliq® (tadalafil) Suspension and Orenitram® (trepostinil) Titration Kit PLATELET INHIBITORS Preferred Non-Preferred Brilinta® Tablet aspirin/dipyridamole ER capsule (generic for Aggrenox®) spirin-omeprazole DR tablet clopidogrel tablet (generic for Plavix®) Effient® Tablet dipyridamole tablet (generic for Persantine®) rasugrel tablet (generic for Effient® Tablet) Plavix<sup>®</sup> Tablet Zontivitv® Table Add aspirin-omeprazole DR tablet as Non-Preferred Removal: Zontivity® Tablet ANTIANGINAL & ANTI-ISCHEMIC Preferred Non-Preferred anolazine ER tablet (generic for Ranexa® Tablet) Aspruzyo™ Sprinkle Ranexa<sup>®</sup> Tablet SYMPATHOLYTICS AND COMBINATIONS Non-Preferred Preferred Catapres<sup>®</sup> TTS Patch Catapres<sup>®</sup>-Tablet lonidine ER tablet (generic for Nexiclon™ XR) clonidine tablet (generic for Catapres®) clonidine patch (generic for Catapres® TTS) methyldopa-HCTZ tablet (generic for Aldoril®) uanfacine tablet (generic for Tenex®) methyldopa injection (generic for Aldomet® Injection) ethyldopa tablet (generic for Aldomet® Add new to market product clonidine ER tablet (generic for Nexiclon™ XR) as Non-Preferred Removal: Catapres® Tablet

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More information on the PDL can be found at: https://medicaid.ncdhhs.gov/providers/programs-services/prescription-drugs/outpatient-pharmacy-services

	TRIGLYCERIDE LOWERING AGENTS
Preferred	Non-Preferred
fenofibrate tablet (generic for Tricor®)	Antara® Capsule
gemfibrozil tablet (generic for Lopid®)	fenofibrate capsule / tablet (generic for Antara <sup>®</sup> , Lofibra <sup>®</sup> )
omega-3 acid ethyl esters capsule (generic for Lovaza®)	fenofibrate tablet (generic for Fenoglide <sup>®</sup> , Triglide <sup>®</sup> )
Vascepa <sup>®</sup> Capsule	fenofibric acid tablet (generic for Fibricor®)
	fenofibric acid capsule (generic for Trilipix <sup>®</sup> )
	Fenoglide <sup>®</sup> Tablet
	icosapent ethyl capsule (generic for Vascepa® Capsule)
	Lipofen <sup>®</sup> Capsule
	Lopid® Tablet
	Lovaza <sup>®</sup> Capsule—Exemption for patients with triglycerides ≥ 500mg/dl
	o <del>mega-3 acid ethyl esters capsule (generic for Lovaza<sup>®</sup>) – Exemption for patients with triglycerides ≥ 500mg/dl</del>
	Tricor® Tablet
	$\operatorname{Trilipix}^{\otimes}\operatorname{Capsule}$
	Vascepa <sup>®</sup> -Capsule

### Move omega-3 acid ethyl esters capsule (generic for Lovaza®) and Vascepa® Capsule from Non-Preferred to Preferred

	ASCULAR, OTHER
Preferred	Non-Preferred
Camzyos® Capsule	
	NERVOUS SYSTEM
	GRAINE AGENTS
	its apply to all triptans
Preferred	Non-Preferred
rizatriptan ODT (generic for Maxalt MLT®)	almotriptan tablet (generic for Axert <sup>®</sup> )
rizatriptan tablet (generic for Maxalt <sup>®</sup> )	Amerge <sup>®</sup> Tablet
sumatriptan nasal spray / tablet / vial (generic for Imitrex <sup>®</sup> )	diclofenac potassium powder packet (generic for Cambia*) - Trial and failure of 2 preferred NSAIDs, in addition to trial and failure of 2 preferred triptans in the Antimigraine Agents class required for coverage
	eletriptan (generic for Relpax® Tablet)
	Elyxyb™ Solution - Trial and failure of 2 preferred NSAIDs, in addition to trial and failure of 2 preferred triptans in the Antimigraine Agents
	class required for coverage
	Frova <sup>®</sup> Tablet
	frovatriptan tablet (generic for Frova®)
	Imitrex <sup>®</sup> Cartridge / Nasal Spray / Pen / Tablet / <del>Vinl</del>
	Maxalt® Tablet / MLT Tablet
	naratriptan tablet (generic for Amerge <sup>®</sup> )
	Onzetra <sup>™</sup> Xsail <sup>™</sup> Nasal Powder
	Relpax <sup>®</sup> Tablet
	Reyvow <sup>™</sup> Tablet
	sumatriptan injection kit / refill / syringe (generic for Imitrex <sup>®</sup> )
	sumatriptan/naproxen (generic for Treximet® Tablet)
	Tosymra Nasal Spray
	Treximet <sup>®</sup> Tablet
	Zembrace <sup>®</sup> SymTouch <sup>®</sup>
	zolmitriptan nasal spray / ODT / tablet (generic for Zomig <sup>®</sup> )
	Zomig <sup>®</sup> Nasal Spray / Tablet / ZMT <sup>®</sup> Tablet
	et (generic for Cambia®) as Non-Preferred with trial and failure criteria <u>II</u> : Imitrex® Vial
	GRAINE AGENTS
	odulators PREVENTATIVE
	pply to all drugs in this class
Preferred	Non-Preferred
Aimovig <sup>™</sup> Injection	Ajovy <sup>112</sup> Injection-
Ajovy <sup>™</sup> Injection	Nurree <sup>TM</sup> -ODT-
Emgality <sup>®</sup> Injection	Qulipta <sup>™</sup> Tablet
Nurtec <sup>™</sup> ODT	Vyepti <sup>™</sup> Vial
Move Ajovy™ Injection and Nurte	c™ ODT from Non-Preferred to Preferred
ANTIMI	GRAINE AGENTS
CGRP Blockers/Mod	ulators ACUTE TREATMENT
Clinical criteria a	pply to all drugs in this class
Preferred	Non-Preferred
Nurtec <sup>™</sup> ODT	Nurtee ODT
Ubrelvy <sup>™</sup> Tablet	
	m Non-Preferred to Preferred
ANTI	NARCOLEPSY
	oply to all drugs in this class
Preferred	Non-Preferred
I letelled	Non-Freieneu

armodafinil tablet (generic for Nuvigil®)

Nuvigil<sup>®</sup> Tablet

Provigil <sup>®</sup> Tablet	modafinil tablet (generic for Provigi <sup>®</sup> )
	Sunosi <sup>™</sup> Tablet
	Wakix <sup>®</sup> Tablet

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	SON AND RESTLESS LEG SYNDROME AGENTS
Preferred	Non-Preferred
antadine capsule / solution (generic for Symmetrel <sup>®</sup> )	Apokyn <sup>®</sup> Injection
ztropine tablet (generic for Cogentin®)	apomorphine (subcutaneous) (generic for Apokyn <sup>®</sup> )
mocriptine capsule (generic for Parlodel <sup>®</sup> )	Azilect <sup>®</sup> Tablet
mocriptine tablet (generic for Parlodel <sup>®</sup> )	carbidopa tablet (generic for Lodosyn <sup>®</sup> )
bidopa-levodopa ODT (generic for Parcopa®)	carbidopa-levodopa-entacapone tablet (generic for Stalevo <sup>®</sup> )
bidopa-levodopa tablet / ER tablet (generic for Sinemet <sup>®</sup> / CR)	Comtan <sup>®</sup> Tablet
mipexole tablet (generic for Mirapex <sup>®</sup> )	Dhivy Tablet <sup>TM</sup>
inirole tablet (generic for Requip <sup>®</sup> )	Duopa <sup>®</sup> Suspension
egiline capsule / tablet (generic for Emsam <sup>®</sup> )	entacapone tablet (generic for Comtan <sup><math>\emptyset</math></sup> )
expheridyl elixir / tablet (generic for Artane <sup>®</sup> )	Gocovri <sup>®</sup> Capsule - Clinical criteria apply
exypheniayi elixir / tablet (generic for Artane )	
	Horizant <sup>®</sup> Tablet
	Inbrija <sup>M</sup> Inhalation
	Kynmobi <sup>™</sup> SL Film
	Kynmobi <sup>™</sup> (apomorphine) Titration Kit
	Lodosyn <sup>®</sup> Tablet
	Mirapex® ER Tablet
	Neupro <sup>®</sup> Patch
	Nourianz <sup>™</sup> Tablet
	Ongentys <sup>®</sup> Capsule
	11/
	Osmolex ER <sup>77</sup> Tablet - Clinical criteria apply
	Parlodel® Capsule / Tablet
	pramipexole ER tablet (generic for Mirapex ER <sup>®</sup> )
	rasagiline tablet (generic for Azilect <sup>®</sup> )
	ropinirole ER tablet (generic for Requip XL <sup>®</sup> )
	Rytary <sup>®</sup> ER Capsule
	Sinemet <sup>®</sup> Tablet
	Stalevo <sup>®</sup> Tablet
	Tasmar <sup>®</sup> Tablet
	tolcapone tablet (generic for Tasmar®)
	Xadago <sup>®</sup> Tablet
	Zelapar® ODT
	as Preferred and <u>add</u> Kynmobi™ (apomorphine) Titration Kit as Non-Preferred
Declaryd	MULTIPLE SCLEROSIS Injectable New Desformed
Preferred	Non-Preferred
vonex® Pack / Pen / Syringe	Briumvi™ (ublituximab-xiiy) Vial
taseron <sup>®</sup> Kit / Vial	Extavia® Kit / Vial
paxone <sup>®</sup> Syringe	glatiramer syringe (generic for Copaxone <sup>®</sup> Syringe)
simpta <sup>®</sup> Injection	
	Glatopa <sup>®</sup> Syringe
	Kesimpta <sup>®</sup> Injection
	Kesimpta <sup>®</sup> Injection
	Kesimpta <sup>®</sup> Injection Lemtrada <sup>®</sup> Vial
	Kesimpta <sup>®</sup> Injection Lemtrada <sup>®</sup> Vial Ocrevus <sup>®</sup> Vial - Diagnosis of Primary Progressive MS (PPMS) bypasses requirement for 2 preferred agents
<sup>®</sup> Rebidose <sup>®</sup> / Titration Pack / Syringe	Kesimpta <sup>®</sup> Injection           Lemtrada <sup>®</sup> Vial           Ocrevus <sup>®</sup> Vial - Diagnosis of Primary Progressive MS (PPMS) bypasses requirement for 2 preferred agents           Plegridy <sup>®</sup> Pen / Pen Starter Pack / Syringe / Syringe Starter Pack           Tysabri <sup>®</sup> Vial
if <sup>®</sup> Rebidose <sup>®</sup> / Titration Pack / Syringe <u>Add</u> new to market produ	Kesimpta <sup>®</sup> Injection-         Lemtrada <sup>®</sup> Vial         Ocrevus <sup>®</sup> Vial -         Degridy <sup>®</sup> Pen / Pen Starter Pack / Syringe / Syringe Starter Pack         Tysabri <sup>®</sup> Vial
if <sup>®</sup> Rebidose <sup>®</sup> / Titration Pack / Syringe <u>Add</u> new to market produ	Kesimpta <sup>®</sup> Injection           Lemtrada <sup>®</sup> Vial           Ocrevus <sup>®</sup> Vial - Diagnosis of Primary Progressive MS (PPMS) bypasses requirement for 2 preferred agents           Plegridy <sup>®</sup> Pen / Pen Starter Pack / Syringe / Syringe Starter Pack           Tysabri <sup>®</sup> Vial
if <sup>®</sup> Rebidose <sup>®</sup> / Titration Pack / Syringe <u>Add</u> new to market produ	Kesimpta <sup>®</sup> Injection-         Lemtrada <sup>®</sup> Vial         Ocrevus <sup>®</sup> Vial - Diagnosis of Primary Progressive MS (PPMS) bypasses requirement for 2 preferred agents         Plegridy <sup>®</sup> Pen / Pen Starter Pack / Syringe / Syringe Starter Pack         Tysabr <sup>®</sup> Vial         Juct Briumvi™ (ublituximab-xiiy) Vial as Non-Preferred         a <sup>®</sup> Injection from Non-Preferred to Preferred         MULTIPLE SCLEROSIS
if <sup>®</sup> Rebidose <sup>®</sup> / Titration Pack / Syringe <u>Add</u> new to market produ	Kessimpta® Injection         Lemitrada® Vial         Ocrevus® Vial - Diagnosis of Primary Progressive MS (PPMS) bypasses requirement for 2 preferred agents         Plegrid9" Pen / Pen Starter Pack / Syringe / Syringe Starter Pack         Tysabri® Vial         Jucct Briumvi™ (ublituximab-xiiy) Vial as Non-Preferred         a® Injection from Non-Preferred to Preferred
oif <sup>®</sup> Rebidose <sup>®</sup> / Titration Pack / Syringe <u>Add</u> new to market produ	Kesimpta <sup>®</sup> -Injection-         Lemitrada <sup>®</sup> Vial         Ocrevus <sup>®</sup> Vial - Diagnosis of Primary Progressive MS (PPMS) bypasses requirement for 2 preferred agents         Plegridy <sup>®</sup> Pen / Pen Starter Pack / Syringe / Syringe Starter Pack         Tysabri <sup>®</sup> Vial         luct Briumvi <sup>™</sup> (ublituximab-xiiy) Vial as Non-Preferred         a <sup>®</sup> Injection from Non-Preferred to Preferred         MULTIPLE SCLEROSIS         Oral         Non-Preferred
Add new to market produ <u>Add</u> new to market produ <u>Move</u> Kesimpta	Kesimpta <sup>®</sup> -Injection-         Lemtrada <sup>®</sup> Vial         Ocrevus <sup>®</sup> Vial - Diagnosis of Primary Progressive MS (PPMS) bypasses requirement for 2 preferred agents         Plegridy <sup>®</sup> Pen / Pen Starter Pack / Syringe / Syringe Starter Pack         Tysabr <sup>®</sup> Vial         Juct Briumvi™ (ublituximab-xiiy) Vial as Non-Preferred         a <sup>®</sup> Injection from Non-Preferred to Preferred         MULTIPLE SCLEROSIS         Oral
Add new to market produ <u>Add</u> new to market produ <u>Move</u> Kesimpta Preferred fampridine ER tablet (generic for Ampyra <sup>®</sup> )	Kesimpta <sup>®</sup> -Injection-         Lemitrada <sup>®</sup> Vial         Ocrevus <sup>®</sup> Vial - Diagnosis of Primary Progressive MS (PPMS) bypasses requirement for 2 preferred agents         Plegridy <sup>®</sup> Pen / Pen Starter Pack / Syringe / Syringe Starter Pack         Tysabri <sup>®</sup> Vial         luct Briumvi <sup>™</sup> (ublituximab-xiiy) Vial as Non-Preferred         a <sup>®</sup> Injection from Non-Preferred to Preferred         MULTIPLE SCLEROSIS         Oral         Non-Preferred
Add       new to market produ         Move_Kesimpta         Preferred         fampridine ER tablet (generic for Ampyra <sup>®</sup> )         sethyl fumarate DR capsule / starter pack (generic for Tecfidera <sup>®</sup> Capsule / Starter Pack)	Kessimpta® Injection:         Lemitrada® Vial         Ocrevis® Vial - Diagnosis of Primary Progressive MS (PPMS) bypasses requirement for 2 preferred agents         Plegrid9" Pen / Pen Starter Pack / Syringe / Syringe Starter Pack         Tysabri® Vial         Juct Briumvi™ (ublituximab-xiiy) Vial as Non-Preferred         a® Injection from Non-Preferred to Preferred         MULTIPLE SCLEROSIS         Oral         Ampyra® Tablet         Aubagio® Tablet
Add       new to market produ <u>Add</u> new to market produ <u>Move</u> Kesimpta         Preferred       fampridine ER tablet (generic for Ampyra®)         tethyl fumarate DR capsule / starter pack (generic for Tecfidera® Capsule / Starter Pack)       golimod capsule (generic for Gilenya®)	Kesimpta <sup>®</sup> Injection-         Lemitrada <sup>®</sup> Vial         Ocrevis <sup>®</sup> Vial - Diagnosis of Primary Progressive MS (PPMS) bypasses requirement for 2 preferred agents         Plegridy <sup>®</sup> Pen / Pen Starter Pack / Syringe / Syringe Starter Pack         Tysabri <sup>®</sup> Vial         Luct Briumvi <sup>™</sup> (ublituximab-xiiy) Vial as Non-Preferred         a <sup>®</sup> Injection from Non-Preferred to Preferred         MULTIPLE SCLEROSIS         Oral         MultriPLE SCLEROSIS         Ampyra <sup>®</sup> Tablet         Aubagio <sup>®</sup> Tablet         Bafiertam <sup>™</sup> Capsule
Add new to market produ         Add new to market produ         Move Kesimpta         Preferred         fampridine ER tablet (generic for Ampyra®)         exbly finanate DR capsule / starter pack (generic for Tecfidera® Capsule / Starter Pack)         golimod capsule (generic for Gilenya®)         enhyl femarate         enhyl femarate         golimod capsule (generic for Gilenya®)         enhyl femarate	Kesimpta <sup>®</sup> Injection-         Lemitada <sup>®</sup> Vial         Ocrevus <sup>®</sup> Vial - Diagnosis of Primary Progressive MS (PPMS) bypasses requirement for 2 preferred agents         Plegridy <sup>®</sup> Pen / Pen Starter Pack / Syringe / Syringe Starter Pack         Tysabr <sup>®</sup> Vial         Juct Briumvi <sup>™</sup> (ublituximab-xiiy) Vial as Non-Preferred         a <sup>®</sup> Injection from Non-Preferred to Preferred         MULTIPLE SCLEROSIS         Oral         Non-Preferred         Ampyra <sup>®</sup> Tablet         Aubagio <sup>®</sup> Tablet         Bafiertan <sup>™</sup> Capsule         Gilenya <sup>®</sup> Capsule
Add new to market produ         Add new to market produ         Move Kesimpta         Preferred         fampridine ER tablet (generic for Ampyra®)         exbly finanate DR capsule / starter pack (generic for Tecfidera® Capsule / Starter Pack)         golimod capsule (generic for Gilenya®)         enhyl femarate         enhyl femarate         golimod capsule (generic for Gilenya®)         enhyl femarate	Kesimpta <sup>®</sup> Injection-         Lemtrada <sup>®</sup> Vial         Ocrevus <sup>®</sup> Vial - Diagnosis of Primary Progressive MS (PPMS) bypasses requirement for 2 preferred agents         Plegridy <sup>®</sup> Pen / Pen Starter Pack / Syringe Starter Pack         Tysabri <sup>®</sup> Vial         ULCt Briumwi <sup>TM</sup> (ublituximab-xiiy) Vial as Non-Preferred         g <sup>®</sup> Injection from Non-Preferred to Preferred         Oral         MULTIPLE SCLEROSIS         Oral         Ampyra <sup>®</sup> Tablet         Aubagio <sup>®</sup> Tablet         Bafiertam <sup>™</sup> Capsule         Glienya <sup>®</sup> Capsule         Mavenclad <sup>®</sup> Tablet
Add new to market produ         Add new to market produ         Move Kesimpta         Preferred         fampridine ER tablet (generic for Ampyra®)         webly fumarate DR capsule / starter pack (generic for Tecfidera® Capsule / Starter Pack)         golimod capsule (generic for Gilenya®)         endy % Capsule	kesimpta <sup>®</sup> trijection:         Lemtrada <sup>®</sup> Vial         Ocrevus <sup>®</sup> Vial - Diagnosis of Primary Progressive MS (PPMS) bypasses requirement for 2 preferred agents         Plegridy <sup>®</sup> Pen / Pen Starter Pack / Syringe / Syringe Starter Pack         Tysabri <sup>®</sup> Vial         luct Briumvi <sup>™</sup> (ublituximab-xiiy) Vial as Non-Preferred         a <sup>®</sup> Injection from Non-Preferred to Preferred         MULTIPLE SCLEROSIS         Oral         Ampyra <sup>®</sup> Tablet         Aubagis <sup>®</sup> Tablet         Bafiertam <sup>™</sup> Capsule         Gilenya <sup>®</sup> Capsule         Mavenciad <sup>®</sup> Tablet         Mayzen <sup>®</sup> Starter Pack / Tablet
Add new to market produ         Add new to market produ         Move Kesimpta         Preferred         fampridine ER tablet (generic for Ampyra®)         exbly finanate DR capsule / starter pack (generic for Tecfidera® Capsule / Starter Pack)         golimod capsule (generic for Gilenya®)         enhyl femarate         enhyl femarate         golimod capsule (generic for Gilenya®)         enhyl femarate	Kesimpta <sup>®</sup> Injection:         Lemitrada <sup>®</sup> Vial         Ocrevis <sup>®</sup> Vial - Diagnosis of Primary Progressive MS (PPMS) bypasses requirement for 2 preferred agents         Plegrids <sup>®</sup> Pen / Pen Starter Pack / Syringe / Syringe Starter Pack         Tysabri <sup>®</sup> Vial         Putter Briumvi <sup>™</sup> (ublituximab-xiiy) Vial as Non-Preferred         a <sup>®</sup> Injection from Non-Preferred to Preferred         MULTIPLE SCLEROSIS         MULTIPLE SCLEROSIS         Oral         Ampyra <sup>®</sup> Tablet         Aubagio <sup>®</sup> Tablet         Bafiertan <sup>™</sup> Capsule         Gienga <sup>®</sup> Capsule         Mavenda <sup>®</sup> Tablet         Mavenda <sup>®</sup> Starter Pack / Tablet
Add new to market produ         Add new to market produ         Move Kesimpta         Preferred         fampridine ER tablet (generic for Ampyra®)         webly fumarate DR capsule / starter pack (generic for Tecfidera® Capsule / Starter Pack)         golimod capsule (generic for Gilenya®)         endy % Capsule	Kesimpta <sup>®</sup> Injection-         Lemtrada <sup>®</sup> Vial         Ocrevis <sup>®</sup> Vial - Diagnosis of Primary Progressive MS (PPMS) bypasses requirement for 2 preferred agents         Plegridy <sup>®</sup> Pen / Pen Starter Pack / Syringe / Syringe Starter Pack         Tysabr <sup>®</sup> Vial         Cutch Britinnevi <sup>TM</sup> (ublituximab-xiiy) Vial as Non-Preferred         a <sup>®</sup> Injection from Non-Preferred to Preferred         MULTIPLE SCLEROSIS         MULTIPLE SCLEROSIS         Oral         Mupra <sup>®</sup> Tablet         Aubagio <sup>®</sup> Tablet         Bafiertam <sup>™</sup> Capsule         Gilenya <sup>®</sup> Capsule         Mavencla <sup>®</sup> Tablet         Mayencla <sup>®</sup> Tablet         Marencla <sup>®</sup> Tablet
Add new to market produ         Add new to market produ         Move Kesimpta         Preferred         fampridine ER tablet (generic for Ampyra®)         webly fumarate DR capsule / starter pack (generic for Tecfidera® Capsule / Starter Pack)         golimod capsule (generic for Gilenya®)         endy % Capsule	Kesimpta <sup>®</sup> . Injection:         Lemitada <sup>®</sup> Vial         Ocrevus <sup>®</sup> Vial - Diagnosis of Primary Progressive MS (PPMS) bypasses requirement for 2 preferred agents         Plegridy <sup>®</sup> Pen / Pen Starter Pack / Syringe / Syringe Starter Pack         Tysabr <sup>®</sup> Vial         Cutch Briumvi <sup>™</sup> (ublituximab-xiiy) Vial as Non-Preferred         a <sup>®</sup> Injection from Non-Preferred to Preferred         MULTIPLE SCLEROSIS         Oral         Oral         Ampyra <sup>®</sup> Tablet         Ampyra <sup>®</sup> Tablet         Gilenya <sup>®</sup> Capsule         Gilenya <sup>®</sup> Capsule         Mavenclad <sup>®</sup> Tablet         Mayent <sup>®</sup> Starter Pack / Tablet         Ponvory <sup>™</sup> Starter Pack / Tablet         Tascenso ODT <sup>™</sup>
Add new to market produ         Add new to market produ         Move Kesimpta         Preferred         fampridine ER tablet (generic for Ampyra®)         webly fumarate DR capsule / starter pack (generic for Tecfidera® Capsule / Starter Pack)         golimod capsule (generic for Gilenya®)         endy % Capsule	Kesimpta <sup>®</sup> Injection-         Lemtrada <sup>®</sup> Vial         Ocrevis <sup>®</sup> Vial - Diagnosis of Primary Progressive MS (PPMS) bypasses requirement for 2 preferred agents         Plegridy <sup>®</sup> Pen / Pen Starter Pack / Syringe / Syringe Starter Pack         Tysabr <sup>®</sup> Vial         Cutch Britinnevi <sup>TM</sup> (ublituximab-xiiy) Vial as Non-Preferred         a <sup>®</sup> Injection from Non-Preferred to Preferred         MULTIPLE SCLEROSIS         MULTIPLE SCLEROSIS         Oral         Mupra <sup>®</sup> Tablet         Aubagio <sup>®</sup> Tablet         Bafiertam <sup>™</sup> Capsule         Gilenya <sup>®</sup> Capsule         Mavencla <sup>®</sup> Tablet         Mayencla <sup>®</sup> Tablet         Marencla <sup>®</sup> Tablet
Add new to market produ         Add new to market produ         Move Kesimpta         Preferred         fampridine ER tablet (generic for Ampyra®)         exbly finanate DR capsule / starter pack (generic for Tecfidera® Capsule / Starter Pack)         golimod capsule (generic for Gilenya®)         enhyl femarate         enhyl femarate         golimod capsule (generic for Gilenya®)         enhyl femarate	Kesimpta <sup>®</sup> . Injection:         Lemitada <sup>®</sup> Vial         Ocrevus <sup>®</sup> Vial - Diagnosis of Primary Progressive MS (PPMS) bypasses requirement for 2 preferred agents         Plegridy <sup>®</sup> Pen / Pen Starter Pack / Syringe / Syringe Starter Pack         Tysabr <sup>®</sup> Vial         Cutch Briumvi <sup>™</sup> (ublituximab-xiiy) Vial as Non-Preferred         a <sup>®</sup> Injection from Non-Preferred to Preferred         MULTIPLE SCLEROSIS         Oral         Oral         Ampyra <sup>®</sup> Tablet         Ampyra <sup>®</sup> Tablet         Gilenya <sup>®</sup> Capsule         Gilenya <sup>®</sup> Capsule         Mavenclad <sup>®</sup> Tablet         Mayent <sup>®</sup> Starter Pack / Tablet         Ponvory <sup>™</sup> Starter Pack / Tablet         Tascenso ODT <sup>™</sup>
Add new to market produ         Add new to market produ         Move Kesimpta         Preferred         ampridine ER tablet (generic for Ampyra®)         ethyl fumarate DR capsule / starter pack (generic for Tecfidera® Capsule / Starter Pack)         olimod capsule (generic for Gilenya®)         mye® Capsule         funomide tablet (generic for Aubagio®)         Add new to market products as Preferred: fingolimot	kesimpta <sup>®</sup> tnjector-         Lemtrada <sup>®</sup> Vial         Ocrevus <sup>®</sup> Vial - Diagnosis of Primary Progressive MS (PPMS) bypasses requirement for 2 preferred agents         Plegridy <sup>®</sup> Pen / Pen Starter Pack / Syringe Starter Pack         Tysabr <sup>®</sup> Vial         uct Briumvi <sup>™</sup> (ublituximab-xiiy) Vial as Non-Preferred         a <sup>®</sup> Injection from Non-Preferred to Preferred         MULTIPLE SCLEROSIS         Oral         Non-Preferred         Ampyra <sup>®</sup> Tablet         Aubagio <sup>®</sup> Tablet         Mavenclad <sup>®</sup> Tablet         Mayzem <sup>®</sup> Starter Pack / Tablet         Mayzem <sup>®</sup> Starter Pack / Tablet         Porvory <sup>™</sup> Starter Pack / Tablet         Tascenso ODT <sup>™</sup> Tecfdora <sup>®</sup> Capsule         Zeposie <sup>®</sup> Starter Pack / Capsule         Zeposie <sup>®</sup> Starter Pack / Capsule         Cachesule (generic for Gilenya <sup>®</sup> ) and teriflunomide tablet (generic for Aubagio <sup>®</sup> )
Add new to market produ <u>Add</u> new to market produ <u>Move</u> Kesimpta <u>Preferred</u> fampridine ER tablet (generic for Ampyra <sup>®</sup> ) newhyl fumarate DR capsule / starter pack (generic for Tecfidera <sup>®</sup> Capsule / Starter Pack) golimod capsule (generic for Gilenya <sup>®</sup> ) enya <sup>®</sup> Capsule flunomide tablet (generic for Aubagio <sup>®</sup> ) <u>Add</u> new to market products as Preferred: fingolimot <u>Move</u> Gilenya <sup>®</sup>	kesimpta <sup>®</sup> Injection:         Lemitada <sup>®</sup> Vial         Ocrevus <sup>®</sup> Vial - Diagnosis of Primary Progressive MS (PPMS) bypasses requirement for 2 preferred agents         Plegridy <sup>®</sup> Pen / Pen Starter Pack / Syringe / Syringe Starter Pack         Tysabr <sup>®</sup> Vial         Autor Briumvi <sup>™</sup> (ublituximab-xiiy) Vial as Non-Preferred         a <sup>®</sup> Injection from Non-Preferred to Preferred         MULTIPLE SCLEROSIS         Oral         MULTIPLE SCLEROSIS         Oral         Non-Preferred         Baffertan <sup>®</sup> Capsule         Gileny <sup>®</sup> Capsule         Mavenclad <sup>®</sup> Tablet         Mayzent <sup>®</sup> Starter Pack / Tablet         Mayzent <sup>®</sup> Starter Pack / Tablet         Starter Pack / Tablet         Starter Pack / Tablet         Starter Pack / Tablet         Tecfidera <sup>®</sup> Capsule         Tecfidera <sup>®</sup> Capsule         Vumerity <sup>™</sup> Capsule         Zeposia <sup>®</sup> Starter Pack / Capsule
Add new to market produ         Add new to market produ         Move Kesimpta         Preferred         Ifampridine ER tablet (generic for Ampya®)         methyl fumarate DR capsule / starter pack (generic for Tecfidera® Capsule / Starter Pack)         golimod capsule (generic for Gilenya®)         tenya® Capsule         iflumomide tablet (generic for Aubagio®)         tenya® Capsule         iflumomide tablet (generic for Aubagio®)         Add         Add new to market products as Preferred: fingolimot Move Gilenya         Move Gilenya         AMYOTRC	Kesimpta <sup>®</sup> Injection:         Lemitada <sup>®</sup> Vial         Ocrevus <sup>®</sup> Vial - Diagnosis of Primary Progressive MS (PPMS) bypasses requirement for 2 preferred agents         Plegrids <sup>®</sup> Pen / Pen Starter Pack / Syringe Starter Pack         Tysabri <sup>®</sup> Vial         duct Briumvi <sup>™</sup> (ublituximab-xiiy) Vial as Non-Preferred         a <sup>®</sup> Injection from Non-Preferred to Preferred         MULTIPLE SCLEROSIS         Oral         MULTIPLE SCLEROSIS         Oral         Ampyra <sup>®</sup> Tablet         Aubagio <sup>®</sup> Tablet         Bafiertam <sup>™</sup> Capsule         Gilenya <sup>®</sup> Capsule         Maycent <sup>®</sup> Starter Pack / Tablet         Navenclad <sup>®</sup> Tablet         Maycent <sup>®</sup> Starter Pack / Tablet         Ponvory <sup>™</sup> Starter Pack / Tablet         Ponvory <sup>™</sup> Starter Pack / Tablet         Ponvory <sup>™</sup> Starter Pack / Tablet         Vumerity <sup>™</sup> Capsule         Zeposia <sup>®</sup> Starter Pack / Capsule         Ord capsule (generic for Gilenya <sup>®</sup> ) and teriflunomide tablet (generic for Aubagio <sup>®</sup> )         * Capsule from Preferred to Non-Preferred         OPHIC LATERAL SCLEROSIS (ALS) AGENTS
Add       new to market prode         Move       Kesimpta         Preferred       Image: Capsule / Starter Pack)         golimod capsule (generic for Ampyra <sup>®</sup> )       Image: Capsule / Starter Pack)         golimod capsule (generic for Aubagio <sup>®</sup> )       Image: Capsule / Starter Pack)         golimod tablet (generic for Aubagio <sup>®</sup> )       Image: Capsule / Starter Pack)         Gold       New to market products as Preferred: fingolimor         Add       new to market products as Preferred: fingolimor         Move       Gilenya         AMYOTRC       Preferred	Kesimpta <sup>®</sup> Injection:         Lemitada <sup>®</sup> Vial         Ocrevis <sup>®</sup> Vial - Diagnosis of Primary Progressive MS (PPMS) bypasses requirement for 2 preferred agents         Pleprids <sup>®</sup> Pen / Pen Starter Pack / Syringe / Syringe Starter Pack         Tysabr <sup>®</sup> Vial         Autor Briumvi <sup>™</sup> (ublituximab-xiiy) Vial as Non-Preferred         a <sup>®</sup> Injection from Non-Preferred to Preferred         MULTIPLE SCLEROSIS         Oral         MULTIPLE SCLEROSIS         Oral         Ampyrs <sup>®</sup> Tablet         Aubagio <sup>®</sup> Tablet         Mavencla <sup>®</sup> Tablet         Mayzens <sup>®</sup> Starter Pack / Tablet         Mayzens <sup>®</sup> Starter Pack / Tablet         Ponvory <sup>™</sup> Starter Pack / Tablet         Yumerity <sup>™</sup> Capsule         Tecfidera <sup>®</sup> Capsule         Quetors <sup>™</sup> Starter Pack / Tablet         Yumerity <sup>™</sup> Capsule         Tecfidera <sup>®</sup> Starter Pack         Yumerity <sup>™</sup> Capsule         Ord         Ord Capsule (generic for Gilenya <sup>®</sup> ) and teriflunomide tablet (generic for Aubagio <sup>®</sup> )         * Capsule from Preferred to Non-Preferred         OPHIC LATERAL SCLEROSIS (ALS) AGENTS
Add new to market produ         Add new to market produ         Move Kesimpta         Preferred         Ifampridine ER tablet (generic for Ampya®)         methyl fumarate DR capsule / starter pack (generic for Tecfidera® Capsule / Starter Pack)         golimod capsule (generic for Gilenya®)         tenya® Capsule         iflumomide tablet (generic for Aubagio®)         tenya® Capsule         iflumomide tablet (generic for Aubagio®)         Add         Add new to market products as Preferred: fingolimot Move Gilenya         Move Gilenya         AMYOTRC	Keiningta <sup>®</sup> Rijection:         Lentrada <sup>®</sup> Vial         Ocreva <sup>®</sup> Vial - Diagnosis of Primary Progressive MS (PPMS) bypasses requirement for 2 preferred agents         Plepidy <sup>®</sup> Pen / Pen Starter Pack / Syringe / Syringe Starter Pack         Tysabri <sup>®</sup> Vial         Jutet Britumvi <sup>™</sup> (ublituximab-xiiy) Vial as Non-Preferred         a <sup>®</sup> Injection       from Non-Preferred to Preferred         MULTIPLE SCLEROSIS         Oral       Non-Preferred         MULTIPLE SCLEROSIS         Oral         Muencha <sup>®</sup> Tablet         Aubagio <sup>®</sup> Tablet         Aubagio <sup>®</sup> Tablet         Baffertam <sup>™</sup> Capsule         Gikenya <sup>®</sup> Capsule         Mavencha <sup>®</sup> Starter Pack / Tablet         Pouvory <sup>™</sup> Starter Pack / Tablet         Vumerity <sup>™</sup> Capsule         Tecfider <sup>®</sup> Capsule / Starter Pack         Vumerity <sup>™</sup> Capsule         Zeposia <sup>®</sup> Starter Pack / Capsule         Od capsule (generic for Gilenya <sup>®</sup> ) and teriflunomide tablet (generic for Aubagio <sup>®</sup> )         "Capsule from Preferred to Non-Preferred         OPHIC LATERAL SCLEROSIS (ALS) AGENTS         OPHIC LATERAL
bif <sup>®</sup> Rebidose <sup>®</sup> / Titration Pack / Syringe         Add new to market prode         Move_Kesimpta         Preferred         Ifampridine ER tablet (generic for Ampyra <sup>®</sup> )         nettyl fumarate DR capsule / starter pack (generic for Tecfidera <sup>®</sup> Capsule / Starter Pack)         golimod capsule (generic for Gilenya <sup>®</sup> )         etwya <sup>®</sup> - Capsule / Starter Pack)         golimod tablet (generic for Aubagio <sup>®</sup> )         iftumomide tablet (generic for Aubagio <sup>®</sup> )         Add new to market products as Preferred: fingolimor         Move_ Gilenya         Add new to market products as Preferred: fingolimor         Move Gilenya	Keinipta <sup>®</sup> Hijection-         Lentrada <sup>®</sup> Vial         Ocreva® <sup>®</sup> Vial - Diagnosis of Primary Progressive MS (PPMS) hypasses requirement for 2 preferred agents         Plegrido <sup>®</sup> Pn / Pen Starter Pack / Syringe / Syringe Starter Pack         Tysabri <sup>®</sup> Vial         Jutet Briumvi <sup>™</sup> (ublituximab-xiiy) Vial as Non-Preferred         a <sup>®</sup> Injection         from Non-Preferred to Preferred         a <sup>®</sup> Injection         MULTIPLE SCLEROSIS         Oral         Oral         MULTIPLE         Ampyra <sup>®</sup> Tablet         Aubagio <sup>®</sup> Tablet         Bafertam <sup>®</sup> Capsule         Gilenya <sup>®</sup> Capsule         Mayren <sup>®</sup> Starter Pack / Tablet         Tascenso DD <sup>™</sup> Tecfder <sup>®</sup> Capsule / Starter Pack / Capsule         Zeposia <sup>®</sup> Starter Pack / Capsule         Zeposia <sup>®</sup> Starter Pack / Capsule         Oc capsule (generic for Gilenya <sup>®</sup> ) and teriflunomide tablet (generic for Aubagio <sup>®</sup> )         Non-Preferred         DPHIC LATERCSIS (ALS) AGENTS         Mayren <sup>®</sup> (filuzole) Oral Film         Esservat <sup>®</sup> (filuzole) Suspension
Add       new to market prode         Move       Kesimpta         Preferred         Ifampridine ER tablet (generic for Ampyra <sup>®</sup> )         nethyl fumarate DR capsule / starter pack (generic for Tecfidera <sup>®</sup> Capsule / Starter Pack)         golimod capsule (generic for Gilenya <sup>®</sup> )         erryg <sup>®</sup> -Capsule         iffumoridie tablet (generic for Aubagio <sup>®</sup> )         Add         new to market products as Preferred: fingolimoc         Move         Gilenya         Add         New to market products as Preferred: fingolimoc         Move         Gilenya         AMYOTRC         Preferred	Keiningta <sup>®</sup> Rijection:         Lentrada <sup>®</sup> Vial         Ocreva <sup>®</sup> Vial - Diagnosis of Primary Progressive MS (PPMS) bypasses requirement for 2 preferred agents         Plepidy <sup>®</sup> Pen / Pen Starter Pack / Syringe / Syringe Starter Pack         Tysabri <sup>®</sup> Vial         Jutet Britumvi <sup>™</sup> (ublituximab-xiiy) Vial as Non-Preferred         a <sup>®</sup> Injection       from Non-Preferred to Preferred         MULTIPLE SCLEROSIS         Oral       Non-Preferred         MULTIPLE SCLEROSIS         Oral         Muencha <sup>®</sup> Tablet         Aubagio <sup>®</sup> Tablet         Aubagio <sup>®</sup> Tablet         Baffertam <sup>™</sup> Capsule         Gikenya <sup>®</sup> Capsule         Mavencha <sup>®</sup> Starter Pack / Tablet         Pouvory <sup>™</sup> Starter Pack / Tablet         Vumerity <sup>™</sup> Capsule         Tecfider <sup>®</sup> Capsule / Starter Pack         Vumerity <sup>™</sup> Capsule         Zeposia <sup>®</sup> Starter Pack / Capsule         Od capsule (generic for Gilenya <sup>®</sup> ) and teriflunomide tablet (generic for Aubagio <sup>®</sup> )         "Capsule from Preferred to Non-Preferred         OPHIC LATERAL SCLEROSIS (ALS) AGENTS         OPHIC LATERAL

Add as Non-Preferred: Exservan™ (riluzole) Oral Film, Tiglutik® (riluzole) Suspension, Radicava® (edaravone) Injection / ORS® Suspension, Relvyrio™ (sodium phenylbutyrate / taurursodiol) Suspension

### Effective DATE: Draft for July 13, 2023 Meeting Trial and failure of two Preferred drugs are required unless only one Preferred option is listed or is otherwise indicated. Not all therapeutic drug classes are included on the PDL. All drugs in the classes not included are considered Preferred. In addition to

trial and failure criteria, clinical criteria (indicated in RED) may also apply. New to market products typically default to Non-Preferred status until

reviewed by the PDL Panel. These drugs are listed as TO BE REVIEWED. Drugs requiring prior authorization, clinical criteria and prior authorization request forms can be found at: https://www.nctracks.nc.gov/content/public/providers/pharmacy.html More information on the PDL can be found at: https://medicaid.ncdhhs.gov/providers/programs-services/prescription-drugs/outpatient-pharmacy-services

	SEDATIVE HYPNOTICS
	Quantity limits apply to all sedative hypnotics
Preferred	Non-Preferred
azepam capsule (generic for Dalmane)	Ambien® Tablet / CR Tablet
ppiclone tablet (generic for Lunesta®)	Belsonra® Tablet
elteon tablet (generic for Rozerem <sup>®</sup> Tablet)	Dayvigo <sup>™</sup> Tablet
azepam 15mg, 30mg capsule (generic for Restoril <sup>®</sup> )	Doral <sup>®</sup> Tablet
plon capsule (generic for Sonata <sup>®</sup> )	doxepin tablet (generic for Silenor <sup>®</sup> )
idem tablet (generic for Ambien <sup>®</sup> )	Edluar <sup>®</sup> SL Tablet
	estazolam tablet (generic for Prosom <sup>®</sup> )
	eszopicione tablet (generic for Lunesta <sup>®</sup> )
	Halcion® Tablet
	Hetlioz <sup>®</sup> Capsule Clinical criteria apply
	Hetlioz <sup>®</sup> LQ Suspension Clinical criteria apply
	Lunesta <sup>®</sup> Tablet
	quazepam tablet (generic for Doral®)
	Quviviq <sup>M</sup> Tablet
	ramelteon tablet (generic for Rozerem <sup>®</sup> -Tablet)-
	Restoril <sup>®</sup> Capsule
	Rozerem® Tablet
	Silenor <sup>®</sup> Tablet
	tasimelteon capsule (generic for Hetlioz*) - Trial and Failure of Hetlioz® Capsule Required for Coverage
	temazepam 7.5, 22.5 mg capsule (generic for Restoril <sup>®</sup> )
	triazolam tablet (generic for Halcion®)
	zalepion capsule (generic for Sonata*)
	zolpidem ER tablet (generic for Ambien <sup>®</sup> CR)
	zolpidem SL tablet (generic for Intermezzo <sup>®</sup> )

Add new to market product tasimelteon capsule (generic for Hetlioz®) as Non-Preferred with trial and failure criteria

Add Doral® Tablet and quazepam tablet (generic for Doral®) as Non-Preferred

Move the following products from Non-Preferred to Preferred: eszopiclone tablet (generic for Lunesta®), ramelteon tablet (generic for Rozerem® Tablet), zaleplon capsule (generic for Sonata®)

Removal: flurazepam capsule (generic for Dalmane®)

North Carolina Division of Health Benefits North Carolina Medicaid Preferred Drug List (PDL) Effective DATE: Draft for July 13, 2023 Meeting Trial and failure of two Preferred drugs are required unless only one Preferred option is listed or is otherwise indicated. Not all therapeutic drug classes are included on the PDL. All drugs in the classes not included are considered Preferred. In addition to trial and failure criteria, clinical criteria (indicated in RED) may also apply. New to market products typically default to Non-Preferred status until reviewed by the PDL Panel. These drugs are listed as TO BE REVIEWED. Drugs requiring prior authorization, clinical criteria and prior authorization request forms can be found at: https://www.nctracks.nc.gov/content/public/providers/pharmacy.html More information on the PDL can be found at: https://medicaid.ncdhhs.gov/providers/programs-services/prescription-drugs/outpatient-pharmacy-services SMOKING CESSATION Preferred Non-Preferred Nicotrol<sup>®</sup> Inhaler / NS Nasal Spray bupropion SR tablet (generic for Zyban® Tablet) Chantix® Tablet / Starting Box / Continuation Month Box - Quantity limited to 6 months per 12 month icotine gum / lozenge (buccal) / patch renicline starting month box (generic for Chantix<sup>®</sup> Starting Month Box) - Quantity limited to 6 months per 12 month arenicline tablet (generic for Chantix<sup>®</sup> Tablet) Quantity limited to 6 months per 12 months. Only rebate eligible versions are covered ENDOCRINOLOGY GROWTH HORMONE Clinical criteria apply to all drugs in this class Preferred Non-Preferred Genotropin<sup>®</sup> Cartridge / MiniQuick<sup>®</sup> Humatrope® Cartridge / Vial Norditropin<sup>®</sup> Flexpro<sup>®</sup> Nutropin® AQ NuSpin® Omnitrope® Cartridge / Vial Saizen<sup>®</sup> Click-Easy<sup>®</sup> Cartridge / Vial Skytrofa® Cartridge Zomacton® Vial Zorbtive® Vial Move Serostim® Vial from Preferred to Non-Preferred Removal: Humatrope® Vial HYPOGLYCEMICS - INJECTABLE Rapid Acting Insulin Trial and failure of only one preferred drug required Preferred Non-Preferred Admelog<sup>®</sup> SoloStar<sup>®</sup> / Vial umalog<sup>®</sup> U-100 Cartridge Humalog® U-100 Junior KwikPen® Afrezza® Inhalation Powder Humalog® U-100 KwikPen® / Vial Apidra<sup>®</sup> SoloStar<sup>®</sup> / Vial Fiasp<sup>®</sup> FlexTouch<sup>®</sup> / Penfill<sup>®</sup> / Vial usulin aspart U-100 FlexPen<sup>®</sup> / vial (generic for Novolog<sup>®</sup>) nsulin lispro U-100 Junior KwikPen® (generic for Humalog® Junior Humalog<sup>®</sup> U-100 Cartridge insulin lispro U-100 KwikPen® / vial (generic for Humalog®) Humalog<sup>®</sup> U-200 KwikPen lovolog® U-100 Cartridge / FlexPen® / Vial Humalog<sup>®</sup> (insulin lispro) Tempo Pen sulin aspart U-100 cartridge / FlexPen<sup>®</sup>/vial (generic for Novolog<sup>®</sup>) Lyumjev<sup>™</sup> U-100 KwikPen<sup>®</sup> / Vial Lyumjev<sup>™</sup> U-200 KwikPen<sup>®</sup> Add new to market product as Non-Preferred: Humalog<sup>®</sup> (insulin lispro) Tempo Pen™ and Lyumjev<sup>®</sup> (insulin lispro-aabc) Tempo Pen™ Move Humalog® U-100 Cartridge and insulin aspart U-100 FlexPen® / vial (generic for Novolog®) from Non-Preferred to Preferred Short Acting Insulin Trial and failure of only one preferred drug required Preferred Non-Preferred Humulin<sup>®</sup> R Vial Myxredlin<sup>™</sup> Injection Humulin® R U-500 KwikPen® / U500 Vial Novolin® R Vial / ReliOn® R Vial Novolin R FlexPen<sup>6</sup> Intermediate Acting Insulin Preferred Non-Preferred Humulin<sup>®</sup> N Vial Humulin<sup>®</sup> N KwikPen<sup>®</sup> ovolin<sup>®</sup> N FlexPen<sup>®</sup> / ReliOn<sup>®</sup> N FlexPen<sup>®</sup> Novolin® N Vial / ReliOn® N Vial Add Novolin® N FlexPen® / ReliOn® N FlexPen® as Non-Preferred Long Acting Insulin Trial and fai lure of only one preferred drug required Preferred Non-Preferred sulin glargine vial/SoloStar® (authorized biologic for Lantus Basaglar<sup>®</sup> KwikPen<sup>®</sup> Lantus<sup>®</sup> SoloStar<sup>®</sup> / Vial Basaglar® (insulin glargine) Tempo Pen™ insulin degludec pen/vial (generic for Tresiba®) evemir<sup>®</sup> FlexPen<sup>®</sup> evemir<sup>®</sup> FlexTouch<sup>®</sup> / Vial insulin glargine-yfgn pen / vial (generic for Semglee<sup>™</sup> yfgn) Lantus<sup>®</sup>-SoloStar<sup>®</sup> / Vial Rezvoglar™ (insulin glargine-aglr) Kwikpen\* Semglee<sup>™</sup> Pen / Vial Semglee<sup>™</sup> yfgn Pen / Vial Toujeo<sup>®</sup> SoloStar<sup>®</sup> / Max SoloStar<sup>®</sup> Tresiba® FlexTouch® / Vial <u>Add</u> new to market products as Non-Preferred: Basaglar® (insulin glargine) Tempo Pen™ and Rezvoglar™ (insulin glargine-aglr) Kwikpen® Add Levemir<sup>®</sup> FlexPen<sup>®</sup> as Preferred Off-cycle change: Move Lantus<sup>®</sup> SoloStar<sup>®</sup> / Vial from Non-Preferred to Preferred Removal: Semglee™ Pen / Vial

North Carolina Division of Health Benefits North Carolina Medicaid Preferred Drug List (PDL) Effective DATE: Draft for July 13, 2023 Meeting Trial and failure of two Preferred drugs are required unless only one Preferred option is listed or is otherwise indicated. Not all therapeutic drug classes are included on the PDL. All drugs in the classes not included are considered Preferred. In addition to trial and failure criteria, clinical criteria (indicated in RED) may also apply. New to market products typically default to Non-Preferred status until reviewed by the PDL Panel. These drugs are listed as TO BE REVIEWED. Drugs requiring prior authorization, clinical criteria and prior authorization request forms can be found at: https://www.nctracks.nc.gov/content/public/providers/pharmacy.html More information on the PDL can be found at: https://medicaid.ncdhhs.gov/providers/programs-services/prescription-drugs/outpatient-pharmacy-services Premixed Rapid Combination Insulin Preferred Non-Preferred insulin lispro protamine 75/25 KwikPen® (generic for Humalog® 75/25 Mix) Humalog® 50/50 Mix KwikPen® / Vial Novolog® Mix 70/30 Vial Humalog® 75/25 Mix KwikPen® / Vial nsulin aspart protamine-aspart 70/30 U-100 FlexPen® / vial (generic for Novolog® Mix 70/30) lovolog® Mix 70/30 FlexPen® Premixed 70/30 Combination Insulin Preferred Non-Preferred Humulin<sup>®</sup> 70/30 KwikPen<sup>®</sup> / Vial Novolin® 70/30 FlexPen® / Vial / ReliOn® 70/30 Vial Amylin Analogs Requires trial and failure or insufficient response to metformin containing product unless contraindicated or documented adverse event when using either a preferred or non-preferred Amylin Analog Preferred Non-Preferred Symlin® Pen Injector

	GLP-1 Receptor Agonists and Combinations
Requires trial and failure or insufficient response to metformin containing products (except for	or diabetic beneficiaries with ASCVD, heart failure, or CKD) unless contraindicated or documented adverse event when using either a preferred or a non-
	preferred GLP-1 Receptor Agonist and Combination
Preferred	Non-Preferred
-	Continuation of therapy requires documentation that clinical goals have been met
Bydureon <sup>®</sup> Pen	Adlyxin <sup>®</sup> Injection
Byetta <sup>®</sup> Pen	Bydureon <sup>®</sup> BCise <sup>™</sup>
Trulicity <sup>®</sup> Pen	Rybelsus <sup>®</sup> Tablet
Victoza® Pen	Soliqua <sup>®</sup> Injection
Ozempic <sup>®</sup> Injection	Xultophy® Injection
	Mounjaro <sup>w</sup> Pen
	HYPOGLYCEMICS - ORAL
	2nd Generation Sulfonylureas
Preferred	Non-Preferred
Amaryl <sup>®</sup> Tablet	
glimepiride tablet (generic for Amaryl <sup>®</sup> )	
glipizide tablet / ER tablet (generic for Glucotrol <sup>®</sup> / XL)	
Glucotrol <sup>®</sup> XL Tablet	
glyburide micronized tablet (generic for Micronase <sup>®</sup> , Glynase <sup>®</sup> )	
glyburide tablet (generic for Diabeta®)	
Glynase <sup>®</sup> Tablet	
	Alpha-Glucosidase Inhibitors
Preferred	Non-Preferred
acarbose tablet (generic for Precose <sup>®</sup> )	miglitol tablet (generic for Glyset <sup>®</sup> )
	Precose <sup>®</sup> Tablet
	Biguanides and Combinations
Preferred	Non-Preferred
glipizide-metformin tablet (generic for Metaglip®)	Fortamet® Tablet
glyburide-metformin tablet (generic for Glucovance®)	Glumetza® Tablet ** requires documentation as to why the beneficiary cannot use preferred long acting metformin product
metformin tablet / ER tablet (generic for Glucophage <sup>®</sup> / ER)	metformin solution (generic for Riomet <sup>®</sup> Solution) Exemption for children < 12 years of age
	metformin ER tablet (generic for Fortamet®)
	metformin ER tablet (generic for Glumetza <sup>®</sup> )
	Riomet® Solution / ER Suspension
	DPP-IV Inhibitors and Combinations
Requires trial and failure or insufficient response to metformin containing produ	ucts unless contraindicated or documented adverse event when using either a preferred or a non-preferred DPP-IV Inhibitor or Combination
Preferred	Non-Preferred
Janumet <sup>®</sup> Tablet	alogliptin tablet (generic for Nesina <sup>®</sup> )
Janumet Tablet	alogliptin-metformin tablet (generic for Kazano <sup>®</sup> )
Januvia <sup>®</sup> Tablet	alogliptin-pioglitazone tablet (generic for Oseni $^{\circ}$ )
Jentadueto® Tablet	Glyxambi® Tablet
Jentadueto <sup>®</sup> XR Tablet	Jentadueto <sup>®</sup> -XR Tablet-
Onglyza <sup>®</sup> Tablet	Kazano <sup>®</sup> Tablet
Tradjenta <sup>®</sup> Tablet	Kazano Taolet Kombiglyze <sup>®</sup> XR Tablet
	Nesina <sup>®</sup> Tablet
	Osen® Tablet
	Qtern <sup>®</sup> Tablet
	Qtern Tablet Steglujan <sup>®</sup> Tablet
	Stegnjan Tablet Trijardy <sup>®</sup> XR Tablet
<u>Move</u> Jer	ntadueto® XR Tablet from Non-Preferred to Preferred
	Meglitinides
Preferred	Non-Preferred
nateglinide tablet (generic for Starlix <sup>®</sup> )	repaglinide-metformin tablet (generic for Prandimet®)
repaglinide tablet (generic for Prandin <sup>®</sup> )	

or and Combinations rise with ASCVD, heart failure, or CKD) unless contraindicated or documented adverse event when using urt failure, no trial and failure of metformin-containing products is required. Non-Preferred Tablet Tablet Non-Preferred Non-Preferred XR-Tablet tablet (generic for Duetac <sup>®</sup> ) tablet (generic for ActoPlus Met <sup>®</sup> ) Tablet
art failure, no trial and failure of metformin-containing products is required.          Non-Preferred         Tablet         ons         Non-Preferred         XR Tablet         : tablet (generic for Duetact <sup>®</sup> )         tablet (generic for ActoPlus Met <sup>®</sup> )
Tablet Tablet  Non-Preferred  XR-Tablet  tablet (generic for Duetact <sup>®</sup> ) tablet (generic for ActoPlus Met <sup>®</sup> )
ons Non-Preferred XR-Tablet : tablet (generic for Duetact <sup>®</sup> ) tablet (generic for ActoPlus Met <sup>®</sup> )
Non-Preferred XR-Tablet 2 tablet (generic for Duetact <sup>®</sup> ) tablet (generic for ActoPlus Met <sup>®</sup> )
Non-Preferred XR-Tablet 2 tablet (generic for Duetact <sup>®</sup> ) tablet (generic for ActoPlus Met <sup>®</sup> )
Non-Preferred XR-Tablet 2 tablet (generic for Duetact <sup>®</sup> ) tablet (generic for ActoPlus Met <sup>®</sup> )
Non-Preferred XR-Tablet 2 tablet (generic for Duetact <sup>®</sup> ) tablet (generic for ActoPlus Met <sup>®</sup> )
Non-Preferred XR-Tablet 2 tablet (generic for Duetact <sup>®</sup> ) tablet (generic for ActoPlus Met <sup>®</sup> )
Non-Preferred XR-Tablet 2 tablet (generic for Duetact <sup>®</sup> ) tablet (generic for ActoPlus Met <sup>®</sup> )
XR Tablet         : tablet (generic for Duetact <sup>®</sup> )         tablet (generic for ActoPlus Met <sup>®</sup> )
e tablet (generic for Duetact <sup>®</sup> ) tablet (generic for ActoPlus Met <sup>®</sup> )
tablet (generic for ActoPlus Met <sup>®</sup> )
tablet (generic for ActoPlus Met <sup>®</sup> )
tablet (generic for ActoPlus Met <sup>®</sup> )
ENTS
Non-Preferred
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ble Tablet
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ablet (generic for Diclegis <sup>®</sup> Tablet) eric for Marinol <sup>®</sup> )
ical criteria apply
/ Trifold Pack - Clinical criteria apply
ic for Emend <sup>®</sup> )
neric for Kytril <sup>®</sup> )
ric for Kytril <sup>®</sup> )
generic for Aloxi <sup>®</sup> )
(generic for Compazine®)
tal (generic for Phenergan <sup>®</sup> )
nris for Toursdorn Saco®)
eric for Transderm-Scop®)
ion
ion ule (generic for Tigan <sup>®</sup> )
ion ule (generic for Tigan <sup>®</sup> ) <b>nt) Vial as Non-Preferred</b>
ion ule (generic for Tigan <sup>®</sup> )
ion ule (generic for Tigan <sup>®</sup> ) <b>1t) Vial as Non-Preferred</b>
rec

BILE ACID SALTS		
	nly one preferred drug required	
Preferred	Non-Preferred	
ursodiol capsule (generic for Actigall®)	Bylvay <sup>100</sup> Capsule / Pellet - Exemption for diagnosis of PFIC	
ursodiol tablet (generic for Urso <sup>®</sup> )	Chenodal® Tablet	
	Cholbam® Capsule	
	Livmaril® Oral Solution	
	Ocaliva <sup>®</sup> Tablet	
	Reltone Capsule	
	Urso® Tablet / Urso® Forte Tablet	
	RI COMBINATIONS	
Preferred	Non-Preferred	
Pylera® Capsule	bismuth / metronidazole / tetracycline capsule (generic for Pylera®)	
	lansoprazole-amoxicillin-clarithromycin pack (generic for Prevpac <sup>®</sup> )	
	Omeclamox-Pak® Combo Pack	
	Talicia® Capsule	
Add_new to market product bismuth / metronidazole	/ tetracycline capsule (generic for Pylera®) as Non-Preferred	
LIICTAMINE O D	ECEPTOR ANTAGONISTS	
Preferred	Non-Preferred	
famotidine tablet / suspension (generic for Pepcid <sup>®</sup> ) ranitidine syrup/tablet (generic for Zantac <sup>®</sup> )	cimetidine solution / tablet (generic for Tagamet <sup>®</sup> )	
ranitidine syrup/tablet (generic for Zantac <sup>®</sup> )	nizatidine capsule / <del>solution</del> (generic for Axid <sup>®</sup> )	
	Pepcid <sup>®</sup> Tablet	
Removal: nizatidine solution (generic for Axid®)		
D 1100		
	EATIC ENZYMES	
Preferred	Non-Preferred	
Creon <sup>®</sup> Capsule	Pancreaze Capsule	
Zenpep <sup>®</sup> Capsule	Pertzye® Capsule	
<u>Removal</u> : F	Viekase® Tablet Pancreaze® Capsule	
PROGESTINS	USED FOR CACHEXIA	
Preferred	Non-Preferred	
megestrol suspension / tablet (generic for Megace <sup>®</sup> )	megestrol ES suspension (generic for Megace <sup>®</sup> ES)	
megon of suspension / molet (Beneric for Meguee )	Ingentor is supportion (generic to medice is)	
PROTON	PUMP INHIBITORS	
Preferred	Non-Preferred	
Dexilant <sup>®</sup> Capsule	Exemption for children < 12 years of age	
esomeprazole magnesium capsule (generic for Nexium <sup>®</sup> Rx )	Aciphex <sup>®</sup> Tablet	
esomeprazole magnesium tablet OTC (generic for Nexium® OTC )	Dexilant <sup>®</sup> -Capsule-	
lansoprazole capsule (generic for Prevacid <sup>®</sup> Rx)	dexlansoprazole capsules (generic for Dexilant <sup>®</sup> )	
Nexium <sup>®</sup> Rx Packet	esomeprazole magnesium capsule OTC (generic for Nexium® OTC )	
omeprazole Rx capsule (generic for Prilosec <sup>®</sup> Rx)	esomeprazole magnesium packet (generic for Nexium <sup>®</sup> Rx Packet)	
pantoprazole tablet (generic for Protonix <sup>®</sup> )	Konvomep™ (omeprazole / sodium bicarbonate) Suspension	
Protonix <sup>®</sup> Suspension	lansoprazole capsule (generic for Prevacid <sup>®</sup> OTC)	
······	Lansoprazole ODT (generic for Prevacid® SoluTab <sup><math>M</math></sup> )	
	Nexium <sup>®</sup> Rx Capsule	
	omeprazole / sodium bicarbonate capsule (generic for Zegerid <sup>®</sup> Rx / OTC)	
	omeprazole / sodium bicarbonate capsule (generic for Zegerid Kx / OTC)	
	omeprazole / somuli otcarbonate packet omeprazole ODT (OTC)	
	omeprazole ODT (OTC) omeprazole OTC capsule / tablet (generic for Prilosec <sup>®</sup> OTC)	
	pantoprazole suspension (generic for Protonix <sup>®</sup> )	
	Prevacid <sup>®</sup> Rx / OTC Capsule / Solutab	
	Prilosec® Rx Suspension	
	Protonix <sup>®</sup> Tablet	
	rabeprazole tablet (generic for Aciphex®)	
	Zegerid <sup>®</sup> Rx / Capsule / Packet	
<u>Add</u> new to market product Konvomep <sup>™</sup> (omeprazole / sodium bicarbonate) Suspension as Non-Preferred <u>Move</u> Dexilant <sup>®</sup> Capsule from Non-Preferred to Preferred		
Add Aciphex <sup>®</sup> Tablet and omeprazole / sodium bicarbonate packet as Non-Preferred		

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SELECTI	VE CONSTIPATION AGENTS	
Preferred	Non-Preferred	
Amitiza <sup>®</sup> Capsule	alosetron tablet (generic for Lotronex <sup>®</sup> Tablet)	
Linzess <sup>®</sup> Capsule	Ibsrela <sup>®</sup> Tablet (Oral)	
Movantik <sup>®</sup> Tablet	Loronex <sup>®</sup> Tablet	
	lubiprostone capsule (generic for Amitiza® Capsule)	
	Motegrity <sup>™</sup> Tablet	
	Movantik <sup>®</sup> Tablet	
	Relistor <sup>®</sup> Syringe / Vial / Oral Tablet Clinical Criteria Apply	
	Symproic <sup>®</sup> Tablet	
	Trulance®	
	Viberzi <sup>®</sup> Tablet - Exemption for Irritable Bowel Syndrome with Diarrhea (IBS-D)	
<u>Move</u> Movantik <sup>®</sup> Ta	blet from Preferred to Non-Preferred	
U	ILCERATIVE COLITIS	
	Oral	
Preferred	Non-Preferred	
Apriso <sup>®</sup> Capsule	Asacol <sup>®</sup> HD Tablet	
balsalazide capsule (generic for Colazal <sup>®</sup> )	Azulfidine <sup>®</sup> Entab / Tablet	
Lialda <sup>®</sup> Tablet	budesonide ER tablet (generic for Uceris <sup>®</sup> )	
sulfasalazine DR tablet (generic for Azulfidine <sup>®</sup> Entab)	Colazal <sup>®</sup> Capsule	
sulfasalazine IX tablet (generic for Azulfidine <sup>®</sup> )	Delzicol <sup>®</sup> Capsule	
sunasuazine in table (generie toi Azumenie )	Dipentum <sup>®</sup> Capsule	
	mesalamine DR capsule (generic for Delzicol <sup>®</sup> Capsule)	
	mesalamine ER capsule (generic for Apriso <sup>®</sup> Capsule)	
	mesalamine ER capsule (generic for Pentasa <sup>®</sup> Capsule)	
	mesalamine ER capsule (generic for Penasa Capsule) mesalamine tablet (generic for Asacol <sup>®</sup> HD / Lialda <sup>®</sup> Tablet )	
	Pentasa <sup>®</sup> Capsule	
	Uceris® Tablet	
	ILCERATIVE COLITIS	
0	Rectal	
Trial and faile		
	re of only one preferred drug required	
Preferred	Non-Preferred	
Canasa <sup>®</sup> Suppository	Canasa® Suppository	
mesalamine enema (generic for Rowasa <sup>®</sup> Enema)	mesalamine kit (generic for Rowasa <sup>®</sup> Kit)	
mesalamine suppository (generic for Canasa <sup>®</sup> Suppository)	mesalamine suppository (generic for Canasa <sup>®</sup> Suppository)	
	Rowasa <sup>®</sup> Kit	
	SF Rowasa <sup>®</sup> Enema	
	Uceris <sup>®</sup> Rectal Foam	
Generic Over Brand Switch: Move Canasa® Suppository to Non-Preferred and move mesalamine suppository (generic for Canasa® Suppository) to Preferred		
ELECTROLYT	E DEPLETERS (KIDNEY DISEASE)	
Preferred	Non-Preferred	
calcium acetate capsule (generic for PhosLo®)	Auryxia® Tablet	
calcium acetate tablet (generic for Eliphos®)	Fosrenol <sup>®</sup> Chewable	
Renvela® Powder Pack	Fosrenol <sup>®</sup> Powder Pack	
Renvela® Tablet	MagneBind <sup>®</sup> 400 Rx Tablet	
sevelamer carbonate powder pack (generic for Renvela <sup>®</sup> Powder Pack)	Phoslyra <sup>®</sup> Solution	
	Renagel <sup>®</sup> Tablet	
	Remota® Powder Pack	
	sevelamer hydrochloride tablet (generic for Renagel®)	
	sevelamer carbonate powder pack (generic for Renvela <sup>®</sup> Powder Pack)	
	sevelamer carbonate tablet (generic for Renvela <sup>®</sup> )	
	Velphoro <sup>®</sup> Chewable	
	lanthanum carbonate chewable tablet (oral) (generic for Fosrenol <sup>®</sup> Chewable)	
	minimum caroondie chewable tablet (oral) (generie tor rostenor Chewable)	

Brand Over Generic Switch: Move Renvela® Powder Pack to Preferred and move sevelamer carbonate powder pack (generic for Renvela® Powder Pack) to Non-Preferred

GENITOURINARY/RENAL		
BENIGN PROSTATIC HYPERPLASIA TREATMENTS		
Preferred	Non-Preferred	
alfuzosin ER tablet (generic for Uroxatral <sup>®</sup> )	Avodart <sup>®</sup> Softgel	
doxazosin tablet (generic for Cardura®)	Cardura <sup>®</sup> Tablet / XL Tablet	
dutasteride capsule (generic Avodart <sup>®</sup> )	Cialis® Tablet (2.5mg and 5mg strengths only) Clinical criteria apply	
finasteride tablet (generic for Proscar®)	dutasteride / tamsulosin capsule (generic Jalyn capsule <sup>®</sup> )	
tamsulosin capsule (generic for Flomax®)	Entadñ™ (finasteride / tadalafil) Capsule	
terazosin capsule (generic for Hytrin®)	Flomax <sup>®</sup> Capsule	
	Jalyn <sup>®</sup> Capsule	
	Proscar® Tablet	
	Rapaflo <sup>®</sup> Capsule	
silodosin capsule (generic for Rapaflo <sup>®</sup> )		
	tadalafil tablet (generic for Cialis <sup>®</sup> ) (2.5mg and 5mg strengths only) Clinical criteria apply	

Add new to market product Entadfi™ (finasteride / tadalafil) Cansule as Non-Preferred

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Dustanuad	URINARY ANTISPASMODICS Non-Preferred	
Preferred oxybutynin syrup / tablet (generic for Ditropan®)	Non-Preferred darifenacin ER tablet (generic for Enablex <sup>®</sup> )	
oxybutynin Syrup / tablet (generic for Ditropan )	Detroi® (tolerooling Table / LA Capsule	
solifenacin tablet (generic for Vesicare <sup>®</sup> Tablet)	Ditropan <sup>6</sup> (oxylour) XL Tablet	
Toviaz <sup>®</sup> (fesoterodine) Tablet	fesoterodine ER tablet (generic for Toviaz*)	
	flavoxate tablet (generic for Urispas®)	
	Gelnique <sup>®</sup> Gel-/ Gel Sachets	
	Gemtesa <sup>®</sup> Tablet - Exemption in patients with a diagnosis of dementia or mild cognitive impairment	
	Myrbetriq <sup>®</sup> (mirabegron) Granules / ER Tablet - Exemption in patients with a diagnosis of dementia or mild cognitive impairment	
	oxybutymi table (2,5 mg)	
	Oxytrol <sup>®</sup> (oxybutynin) Patch tolterodine tablet / ER capsule (generic for Detrol <sup>®</sup> / LA)	
	trospium tablet / ER capsule (generic for Detroi / LA)	
	Usplant land / LK capate (genetic to Sakula / AK) Vesicat <sup>®</sup> (solitonici) LS Suspension	
	Vesture (softwaren) zosepennin Vesture (softwaren) zabet	
Add ne	w to market product oxybutynin tablet (2.5 mg) as Non-Preferred <u>Removal</u> : Gelnique <sup>®</sup> Gel	
	GOUT	
Preferred	Non-Preferred	
allopurinol tablet (generic for Zyloprim <sup>®</sup> )	allopurinol tablet (200 mg)	
colchicine tablet (generic for Colcrys®)	colchicine capsule (generic for Mitigare®)	
probenecid tablet(generic for Benemid <sup>®</sup> )	Colcrys <sup>®</sup> Tablet	
probenecid-colchicine tablet (generic for Col-Benemid®)	febuxostat tablet (generic for Uloric <sup>®</sup> Tablet)	
	Gloperba® Solution	
	Krystexxa® Injection	
	Mitigare <sup>®</sup> (branded colchicine 0.6mg) Capsules	
	Ulorie® Tablet	
	Zyloprim® Tablet	
Add ne	w to market product allopurinol tablet (200 mg) as Non-Preferred	
	HEMATOLOGIC	
	ANTICOAGULANTS	
	Injectable	
Preferred	Non-Preferred	
enoxaparin syringe / vial (generic for Lovenox <sup>®</sup> )	Arixtra <sup>®</sup> Syringe	
Fragmin <sup>®</sup> Syringe / Vial	fondaparinux syringe (generic for Arixtra <sup>®</sup> )	
	Lovenox <sup>®</sup> Syringe / Vial	
	Oral	
Preferred	Non-Preferred	
Eliquis® Tablet and Starter Dose Pack	dabigatran capsule (generic for Praduxa <sup>®</sup> Capsule)	
Jantoven® (branded generic for Coumadin®)	Pradaxa* (dabigatran) Pellet Pack Savaya@ Tablet	
Pradaxa® Capsule		
warfarin tablet (generic for Coumadin®) Xarelto® Starter Pack / Tablet	Xarelto <sup>®</sup> Suspension	
	o market product Pradaxa® (dabigatran) Pellet Pack as Non-Preferred	
	COLONY STIMULATING FACTORS	
Preferred	Non-Preferred	
Neupogen® Vial / Syringe	Fulphila™ Syringe Fylnetra* (pegfilgrastim-pbbk) Syringe	
N <del>ivestym<sup>™</sup>-Syringe</del> Nyvepria <sup>™</sup> Syringe	Granix <sup>®</sup> Injection Syringe/Vial	
Nyvepna Synnge Udenyca™ Syringe	Crains injection synge van Leukine hijschon	
	Neukań nyciona Neukań Syring / Kit	
	Nivestm <sup>®</sup> Syringe	
	Nivestym <sup>17</sup> Vial	
	Release® Syringe (Subcutaneous)	
	Releuko <sup>®</sup> Vial (Injection)	
	Rolvedon** (eflapegrastim-xnst) Syringe	
	Stimufend* (pegfilgrastim-fpgk) Syringe	
	Zarxio <sup>®</sup> Injection	
	Ziextenzo® Syringe	
<u>Add</u> new to market products as Non-Preferred: Fylnetra® (pegfilgrastim-pbbk) Syringe and Stimufend® (pegfilgrastim-fpgk) Syringe <u>Add</u> Rolvedon™ (eflapegrastim-xnst) Syringe as Non-Preferred Nivestym™ Syringe from Preferred to Non-Preferred		
	HEMATOPOIETIC AGENTS	
	Clinical criteria apply to all drugs in this class	
Preferred	Non-Preferred	
Aranesp <sup>®</sup> Syringe / Vial	Epogen <sup>e</sup> -Viel	
Epogen <sup>®</sup> Vial	Mircera® Syringe	
Procrit <sup>®</sup> -Vial	Procrit <sup>®</sup> Vial	

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Reblozyl<sup>®</sup> Vial

Retac	rit	Vial

Retacrit Viai	RebioZji Viai	
	Retacrit <sup>®</sup> Vial	
<u>Mov</u> e Epogen <sup>®</sup> Vial and Retacri	t <sup>®</sup> Vial from Non-Preferred to Preferred	
Move Procrit <sup>®</sup> Vial from Preferred to Non-Preferred		
	I	
THDAMDODOLES	IS STIMULATING AGENTS	
Preferred	Non-Preferred	
Nplate <sup>®</sup> Vial	Tavalisse <sup>™</sup> Tablet	
Promacta® Suspension / Tablet		
OP	HTHALMIC	
	NJUNCTIVITIS AGENTS	
Preferred	Non-Preferred	
cromolyn sodium drops (generic for Crolom <sup>®</sup> )	Alocril <sup>®</sup> Drops	
olopatadine drops (generic for Pataday <sup>®</sup> )	Alomide® Drops	
olopatadine drops (generic for Patanol $^{\otimes}$ )	Alrex®Drops	
	azelastine drops (generic for Optivar <sup>®</sup> )	
	bepotastine drops (gneric for Bepreve® Drops)	
	Bepreve <sup>®</sup> Drops	
	epinastine drops (generic for Elestat <sup>®</sup> )	
	Lastacaft <sup>®</sup> Drops	
	olopatadine drops (generie for Patanol <sup>®</sup> )	
	Zerviate <sup>™</sup> Drops	
Nova alanatadina drans (ganaris fa	Patanol <sup>®</sup> ) from Non-Preferred to Preferred	
<u>Removal</u> :	Lastacaft® Drops	
	VTIBIOTICS	
Preferred	Non-Preferred	
AK-Poly-Bac® Ointment (branded generic for Polysporin®)	Azasite® Drops	
bacitracin-polymyxin ointment (generic for Polysporin <sup>®</sup> )	bacitracin ointment (generic for AK-Tracin <sup>®</sup> )	
ciprofloxacin solution drops (generic for Ciloxan®)	Besivance <sup>®</sup> Suspension	
erythromycin ointment (generic for Ilotycin <sup>®</sup> )	Ciloxan® Drops / Ointment	
Gentak <sup>®</sup> Ointment (branded generic for Garamycin <sup>®</sup> )	gatifloxacin drops (generic for Zymaxid <sup>®</sup> )	
gentamicin drops (generic for Garamycin®)	levofloxacin drops (generic for Quixin <sup>®</sup> )	
moxifloxacin ophthalmic solution (generic for Vigamox <sup>®</sup> Drops)	moxifloxacin ophthalmic solution (generic for Moxeza®)	
ofloxacin drops (generic for Ocuflox®)	Natacyn <sup>®</sup> Drops	
Polycin <sup>®</sup> Ointment (branded generic for Polysporin <sup>®</sup> )	neomycin/bacitracin/polymyxin oint (ophthalmic) (generic/AG for Neosporin <sup>®</sup> Opth Oint)	
polymyxin-trimethoprim drops (generic for Polytrim <sup>®</sup> )	neomycin-bacitracin-polymyxin ointment (generic for Neosporin® Ophthalmic Ointment)	
sulfacetamide drops (generic for Bleph-10 <sup>®</sup> )	neomycin-polymyxin-gramicidin drops (generic for Neosporin <sup>®</sup> Ophthalmic Drops)	
tobramycin drops (generic for Tobrex <sup>®</sup> )	Neo-Polycin <sup>®</sup> Ointment (branded generic for Neosporin <sup>®</sup> Ophthalmic Ointment)	
	Ocuflox® Drops	
	Polytrim® Drops	
	sulfacetamide ointment (generic for Cetamide®)	
	Tobrex <sup>®</sup> Ointment/ Drops	
	Vigamox <sup>®</sup> Drops	
	Zymaxid <sup>®</sup> Drops	
ANTIBIOTICS-S	TEROID COMBINATIONS	
Preferred	Non-Preferred	
neomycin-polymyxin-dexamethasone drops / ointment (generic for Maxitrol <sup>®</sup> )	Blephamide <sup>®</sup> S.O.P. Ointment	
Tobradex <sup>®</sup> Drops / Ointment	Maxitrol® Drops / Ointment	
	Neo-Polycin <sup>®</sup> HC (branded generic for Cortisporin®)	
	neomycin-bacitracin-polymyxin-HC ointment (generic for Cortisporin®)	
	neomycin-polymyxin-HC drops / ointment (generic for Ocutricin <sup>®</sup> )	
	Pred-G <sup>®</sup> S.O.P. Ointment/Suspension	
	sulfacetamide-prednisolone drops (generic for Vasocidin <sup>®</sup> )	
	Tobradex <sup>®</sup> ST Drops	
	tobramycin-dexamethasone suspension (generic for Tobradex <sup>®</sup> Suspension)	
	Zylet <sup>®</sup> Drops	
Removals: Blephamide <sup>®</sup> S.O.P. Ointment, Pred-G <sup>®</sup> S.O.P. Ointment / Suspension		
<u>nemovais</u> , biepnamide 5.0.7. Onthent, Fleu-G <sup>-</sup> 5.0.7. Onthent / Suspension		

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ANII-		
Preferred	NFLAMMATORY Non-Preferred	
dexamethasone drops (generic for Decadron <sup>®</sup> )	Acular® Drops / LS Solution	
diclofenac drops (generic for Voltaren <sup>®</sup> )	Acuvail® Solution	
difluprednate drops (generic for Durezol <sup>®</sup> )	bromfenac drops (generic for Xibrom <sup>®</sup> )	
<del>Durezol® Drops</del>	Bromsite <sup>M</sup> Solution	
Flarex <sup>®</sup> Drops	Dextenza <sup>®</sup> Insert	
fluorometholone drops (generic for FML <sup>®</sup> )	Dexycu <sup>™</sup> Vial	
flurbiprofen drops (generic for Ocufen®)	difluprednate drops (generic for Durezol®)	
Hevro <sup>®</sup> Drops	Durezol <sup>®</sup> Drops	
ketorolac solution (generic for Acular <sup>®</sup> / LS)	FML <sup>®</sup> Forte Drops / S.O.P. Ointment	
Lotemax® Drops	FML® Liquifilm® Drops	
Nevanac <sup>®</sup> Droptainer Pred Mild <sup>®</sup> Drops	Hevro® Drops Iluvien® Implant	
prednisolone acetate drops (generic for Pred Forte <sup>®</sup> )		
preumsoione acetate drops (generic tor Fred Force )	Lotemax <sup>®</sup> Gel / SM Gel / Ointment	
	loteprednol drops / gel (generic for Lotemax <sup>®</sup> )	
	Maxidex <sup>®</sup> Drops	
	Nevanae® Droptainer	
	Ozurdex <sup>®</sup> Implant	
	Pred Forte® Drops	
	prednisolone sodium phosphate drops (generic for Inflamase Forte <sup>®</sup> )	
	Prolensa®Drops	
	Retisert® Implant	
	Triesence <sup>®</sup> Vial Xipere <sup>TM</sup> (Intraocular)	
	TM	
	Yutiq <sup>***</sup> Implant	
ANTI-INFLAMMA	] ORY/IMMUNOMODULATOR	
Preferred	Non-Preferred	
Eysuvis <sup>™</sup> Drops	Cequa <sup>™</sup> Drops	
Restasis <sup>®</sup> Drops / Restasis <sup>®</sup> Multidose <sup>™</sup> Drops	cyclosporine emulsion (generic for Restasis <sup>®</sup> )	
Xiidra <sup>®</sup> Drops	Tyrvaya <sup>®</sup> Nasal Spray	
Verkazia* (cyclosporine) Eye Emulsion Add new-to-market product Verkazia* (cyclosporine) Eye Emulsion as Non-Preferred		
Add new-to-market product Verkazia	Verkazia* (cyclosporine) Eye Emulsion	
	Verkazia* (cyclosporine) Eye Emulsion	
	Verkazia* (cyclosporine) Eye Emulsion	
ALPHA 2 A	Verkazia* (cyclosporine) Eye Emulsion	
ALPHA 2 A Preferred	Verkazia* (cyclosporine) Eye Emulsion         Ø (cyclosporine) Eye Emulsion as Non-Preferred         DRENERGIC AGENTS         graclonidine drops (generic for Iopidine®)         brimonidine P drops (generic for Alphagan® P)	
ALPHA 2 A Preferred Alphagan <sup>®</sup> P Drops brimonidine drops (generic for Alphagan <sup>®</sup> )	Verkazia* (cyclosporine) Eye Emulsion	
ALPHA 2 A Preferred brimonidine drops (generic for Alphagan <sup>®</sup> ) No recommendatio	Verkazia* (cyclosporine) Eye Emulsion P (cyclosporine) Eye Emulsion as Non-Preferred DEENERGIC AGENTS DEENERGIC AGENTS apraclonidine drops (generic for lopidine*) brimonidine P drops (generic for Alphagan* P) lopidine* Drops ns. Class open for comments.	
ALPHA 2 A Preferred Alphagan® P Drops brimonidine drops (generic for Alphagan®) No recommendatio BETA BLOCKER	Verkazia* (cyclosporine) Eye Emulsion P (cyclosporine) Eye Emulsion as Non-Preferred DEENERGIC AGENTS DEENERGIC AGENTS apraclonidine drops (generic for lopidine*) brimonidine P drops (generic for Alphagan* P) lopidine* Drops ns. Class open for comments. AGENTS / COMBINATIONS	
ALPHA 2 A Preferred Alphagan® P Drops brimonidine drops (generic for Alphagan®) No recommendatio BETA BLOCKER Preferred	Verkazia* (cyclosporine) Eye Emulsion	
ALPHA 2 A Preferred Alphagan <sup>®</sup> P Drops brimonidine drops (generic for Alphagan <sup>®</sup> ) No recommendatio BETA BLOCKER Preferred Combigan <sup>®</sup> Drops	Verkazia* (cyclosporine) Eye Emulsion         * (cyclosporine) Eye Emulsion as Non-Preferred         DDENERGIC AGENTS         apraclonidine drops (generic for lopidine®)         brimonidine P drops (generic for Alphagan® P)         lopidine® Drops         ns. Class open for comments.         AGENTS / COMBINATIONS         Agencis for Betoptic®)         betaxolol drops (generic for Betoptic®)	
ALPHA 2 A Preferred Alphagan® P Drops brimonidine drops (generic for Alphagan®) No recommendatio BETA BLOCKER Preferred	Verkazia* (cyclosporine) Eye Emulsion         P (cyclosporine) Eye Emulsion as Non-Preferred         DRENERGIC AGENTS         DRENERGIC AGENTS         apraclonidine drops (generic for lopidine*)         brimonidine P drops (generic for lopidine*P)         lopidine* Drops         ns. Class open for comments.         AGENTS / COMBINATIONS         betaxolol drops (generic for Betoptic*)         betaxolol drops (generic for Betoptic*)         Betimol* Drops	
ALPHA 2 A Preferred Alphagan® P Drops brimonidine drops (generic for Alphagan®) No recommendatio BETA BLOCKER Preferred Combigan® Drops	Verkazia* (cyclosporine) Eye Emulsion         P (cyclosporine) Eye Emulsion as Non-Preferred         DENERGIC AGENTS         DEENERGIC AGENTS         apraclonidine drops (generic for lopidine*)         brimonidine P drops (generic for Alphagan* P)         lopidine* Orops         ns. Class open for comments.         AGENTS / COMBINATIONS         betaxolol drops (generic for Betoptic*)         Betimol* Drops         Betoptic* S Drops	
ALPHA 2 A Preferred Alphagan <sup>®</sup> P Drops brimonidine drops (generic for Alphagan <sup>®</sup> ) No recommendatio BETA BLOCKER Preferred Combigan <sup>®</sup> Drops	Verkazia* (cyclosporine) Eye Emulsion         P (cyclosporine) Eye Emulsion as Non-Preferred         DRENERGIC AGENTS         DRENERGIC AGENTS         apraclonidine drops (generic for lopidine*)         brimonidine P drops (generic for lopidine*P)         lopidine* Drops         ns. Class open for comments.         AGENTS / COMBINATIONS         betaxolol drops (generic for Betoptic*)         betaxolol drops (generic for Betoptic*)         Betimol* Drops	
ALPHA 2 A Preferred Alphagan <sup>®</sup> P Drops brimonidine drops (generic for Alphagan <sup>®</sup> ) No recommendatio BETA BLOCKER Preferred Combigan <sup>®</sup> Drops	Verkazia* (cyclosporine) Eye Emulsion         P (cyclosporine) Eye Emulsion as Non-Preferred         DEENERGIC AGENTS         DEENERGIC AGENTS         apraclonidine drops (generic for lopidine*)         brimonidine P drops (generic for Alphagan* P)         lopidine* Drops         http://distribution.com/distribution/com/distributicon/com/distributicon/com/distributicon/com/distributico	
ALPHA 2 A Preferred Alphagan <sup>®</sup> P Drops brimonidine drops (generic for Alphagan <sup>®</sup> ) No recommendatio BETA BLOCKER Preferred Combigan <sup>®</sup> Drops	Verkazia* (cyclosporine) Eye Emulsion         P (cyclosporine) Eye Emulsion as Non-Preferred         DDEENERGIC AGENTS         DERNERGIC AGENTS         apraclonidine drops (generic for lopidine*)         brimonidine P arops (generic for Alphagan* P)         topidine* Drops         AGENTS / COMBINATIONS         AGENTS / COMBINATIONS         betaxold drops (generic for Betoptic*)         Betamio* Drops         Betamio* Drops         betaxold drops (generic for Generic (AG) for Combigan®))	
ALPHA 2 A Preferred Alphagan® P Drops brimonidine drops (generic for Alphagan®) No recommendatio BETA BLOCKER Preferred Combigan® Drops	Verkazia* (cyclosporine) Eye Emulsion         P (cyclosporine) Eye Emulsion as Non-Preferred         DDENERGIC AGENTS         DENENERGIC AGENTS         apraclonidine drops (generic for lopidine®)         brimonidine P drops (generic for Alphagan® P)         lopidine® Drops         total approximation of the state of the sta	
ALPHA 2 A Preferred Alphagan® P Drops brimonidine drops (generic for Alphagan®) No recommendatio BETA BLOCKER Preferred Combigan® Drops	Verkazia* (cyclosporine) Eye Emulsion         P (cyclosporine) Eye Emulsion as Non-Preferred         DRENERGIC AGENTS         DRENERGIC AGENTS         apraclonidine drops (generic for lopidine*)         brimonidine drops (generic for lopidine*)         brimonidine drops (generic for lopidine*)         brimonidine P drops (generic for Alphagan* P)         lopidine* Drops         ns. Class open for comments.         AGENTS / COMBINATIONS         betaxolol drops (generic for Betoptic*)         Betimol* Drops         Betoptic* S Drops         brimonidine tartrate/timolol drops (Generic (AG) for Combigan®))         brimonidine tartrate/timolol drops (generic for Combigan®))         carateold drops (generic for Ocupres*)         Istalol* Drops	
ALPHA 2 A Preferred Alphagan® P Drops brimonidine drops (generic for Alphagan®) No recommendatio BETA BLOCKER Preferred Combigan® Drops	Verkazia* (cyclosporine) Eye Emulsion         * (cyclosporine) Eye Emulsion as Non-Preferred         DRENERGIC AGENTS         DRENERGIC AGENTS         apraclonidine drops (generic for lopidine*)         brimonidine P drops (generic for Alphagan* P)         lopidine* Drops         ass. Class open for comments.         AGENTS / COMBINATIONS         AGENTS / COMBINATIONS         betaxolol drops (generic for Betoptic*)         Betoptic* S Drops         brimonidine tartrate/timolol drops (Generic (AG) for Combigan®))         brimonidine tartrate/timolol drops (generic for Combigan®))         brimonidine tartrate/timolol drops (peneric for Combigan®)         brimonidine tartrate/timolol drops (peneric for Combigan®)         brimonidine tartrate/timolol drops (peneric for Setapa*)         timolol drops (generic for Batapa*)         timolol drops (generic for Batapa*)         timolol drop (generic for Timoptic* Ocudose* Drops)	
ALPHA 2 A Preferred Alphagan® P Drops brimonidine drops (generic for Alphagan®) No recommendatio BETA BLOCKER Preferred Combigan® Drops	Verkazia* (cyclosporine) Eye Emulsion         P         (cyclosporine) Eye Emulsion as Non-Preferred         DRENERGIC AGENTS         DRENERGIC AGENTS         apraclonidine drops (generic for lopidine*)         brimonidine P drops (generic for Alphagan* P)         topidine* Drops         AGENTS / COMBINATIONS         AGENTS / COMBINATIONS         Betimol* Drops         Betoptie* Drops         brimonidine tartrate/timolol drops (Generic (AG) for Combigan®))         brimonidine tartrate/timolol drops (generic for Combigan®))         carteol drops (generic for Betagan*)         brimonidine tartrate/timolol drops (generic for Combigan®))         carteol drops (generic for Betagan*)         brimonidine tartrate/timolol drops (generic for Combigan®))         carteol drops (generic for Betagan*)         brimonidine tartrate/timolol drops (phthalmic) (generic for Combigan®))         carteol drops (generic for Coupres*)         Istalo* Drops         levobunol drops (generic for Betagan*)         timolol drops (generic for Betagan*)	

North Carolina Division of Health Benefits		
North Carolina Medicaid Preferred Drug List (PDL)		
Effective DATE: Draft for July 13, 2023 Meeting		
	less only one Preferred option is listed or is otherwise indicated.	
	rugs in the classes not included are considered Preferred. In addition to	
	pply. New to market products typically default to Non-Preferred status until	
	quiring prior authorization, clinical criteria and prior authorization request forms can be found at:	
	ontent/public/providers/pharmacy.html v/providers/programs-services/prescription-drugs/outpatient-pharmacy-services	
More information on the PDL can be round at. mtps://medicaid.ncomis.go	wproviders/programs-services/prescription-drugs/outpatient-pharmacy-services	
CARBONIC ANHYDRAS	E INHIBITORS / COMBINATIONS	
Preferred	Non-Preferred	
dorzolamide drops (generic for Trusopt <sup>®</sup> )	Azopt <sup>®</sup> Drops	
dorzolamide-timolol drops (generic for Cosopt®)	brinzolamide drops (generic for Azopt <sup>®</sup> Drops)	
Simbrinza <sup>®</sup> Drops	Cosopt® Drops / PF Drops	
	dorzolamide-timolol PF drops (generic for Cosopt® PF)	
	Trusopt® Drops	
No recommendations. Class open for comments.		
PROSTAG	ANDIN AGONISTS	
Preferred	Non-Preferred	
latanoprost drops (generic for Xalatan <sup>®</sup> )	bimatoprost drops (generic for Lumigan <sup>®</sup> Drops)	
Travatan <sup>®</sup> Z Drops	Durysta* (bimatoprost) Implant (intracameral)	
	Lumigan <sup>®</sup> Drops	
	tafluprost drops (generic for Zioptan®)	
	travoprost drops (generic for Travatan <sup>®</sup> Z)	
	Vyzulta® Drops	
	Xalatan <sup>®</sup> Drops	
	Xelpros <sup>®</sup> Drops	
	Zioptan <sup>®</sup> Drops	
Add new to market product tafluprost drops (generic for Zioptan	<sup>®</sup> ) and Durysta <sup>®</sup> (bimatoprost) Implant (intracameral) as Non-Preferred	
RHO KINASE MOI	DIFIERS / COMBINATIONS	
Preferred	Non-Preferred	
Rhopressa <sup>®</sup> Drops		
Rocklatan <sup>®</sup> Drops		
No recommendations. Class open for comments.		
OST	EOPOROSIS	
BONE RESORPTION SUPP	RESSION AND RELATED AGENTS	
Preferred	Non-Preferred	
alendronate tablet (generic for Fosamax®)	Actonel® Tablet	
raloxifene tablet (generic for Evista <sup>®</sup> )	alendronate solution (generic for Fosamax <sup>®</sup> Solution)	
	Atelvia <sup>®</sup> Tablet	
	Boniva® Tablet	
	calcitonin salmon nasal spray (generic for Miacalcin <sup>®</sup> )	
	Evenity <sup>™</sup> Syringe	
	Evista® Tablet	
	Fortes® Pen Injection	
	Fosamax <sup>®</sup> Tablet / Plus D Tablet ibandronate tablet (generic for Boniva <sup>®</sup> )	
	ibandronate tablet (generic for Boniva ) Prolia <sup>®</sup> Syringe	
	risedronate tablet (generic for Actonel <sup>®</sup> )	
	teriparatide injection (generic for Forteo <sup>®</sup> Injection)	
	Tymlos <sup>®</sup> Injection	
No recommendations. Class open for comments.		

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ORALLY INHALED ANTICHOLINERGICS / COPD AGENTS		
Preferred	Non-Preferred	
Anoro <sup>®</sup> Ellipta <sup>®</sup> Inhaler	Bevespi <sup>®</sup> Aerosphere <sup>®</sup>	
Atrovent <sup>®</sup> HFA Inhaler	Daliresp <sup>®</sup> Tablet	
Bevespi <sup>®</sup> -Aerosphere <sup>®</sup>	Duaklir <sup>®</sup> Pressair <sup>®</sup>	
Combivent® Respimat® Inhalation Spray	Incruse <sup>®</sup> Ellipta <sup>®</sup> Inhaler	
Incruse <sup>®</sup> Ellipta <sup>®</sup> Inhaler	Lonhala® Magnair®	
ipratropium nebulizer solution (generic for Atrovent <sup>®</sup> Nebulizer Solution) ipratropium-albuterol solution (generic for Duoneb <sup>®</sup> )	Seebri <sup>®</sup> Neohaler <sup>®</sup> Tudorza <sup>®</sup> Pressair <sup>®</sup> Inhaler	
roflumilast tablet (generic for Daliresp*)	Yupelri <sup>TM</sup> Solution	
Spiriva <sup>®</sup> Handihaler <sup>®</sup>		
Spiriva® Respimat® Inhalation Spray		
Stiolto® Respirat® Inhalation Spray		
Add new to market product roflumilast tablet (generic for Daliresp®) as Preferred <u>Move</u> Bevespi® Aerosphere® from Preferred to Non-Preferred <u>Move</u> Incruse® Ellipta® Inhaler from Non-Preferred to Preferred <u>Removal</u> : Seebri® Neohaler®		
INHALE	D CORTICOSTEROIDS	
Preferred	Non-Preferred	
budesonide suspension 0.25mg, 0.5mg, 1mg (generic for Pulmicort® Resputes)	Alvesco <sup>®</sup> Inhaler	
Flovent <sup>®</sup> Diskus	ArmonAir <sup>™</sup> Dighale <sup>™</sup>	
Flovent <sup>®</sup> HFA Inhaler	Arnuity® Ellipta® Inhaler	
	Asmanex <sup>®</sup> HFA Inhaler Asmanex <sup>®</sup> Twisthaler <sup>®</sup>	
	fluticasone propionate HFA (generic for Flovent <sup>®</sup> HFA)	
	Pulmicor <sup>®</sup> Flexhaler	
	Pulmicort <sup>®</sup> Respules 0.25mg, 0.5mg, 1mg	
	QVAR <sup>®</sup> RediHaler	
	ICOSTEROID COMBINATIONS	
Preferred	Non-Preferred	
Advair® Diskus®	AirDuo <sup>®</sup> Digihaler <sup>™</sup> / RespiClick <sup>®</sup>	
Advair® HFA Inhaler	Breo® Ellipta®	
Dulera® Inhaler	Breztri <sup>TM</sup> Aerosphere <sup>TM</sup>	
Symbicort <sup>®</sup> Inhaler	budesonide/formoterol inhalation (generic for Symbicort <sup>®</sup> ) fluticasone/salmeterol HFA inhaler (generic for Advair* HFA)	
	fluticasone/salmeterol inhalation (generic for Advair <sup>®</sup> Diskus <sup>®</sup> )	
	fluticasone/salmeterol inhalation (generic for AirDuo <sup>®</sup> )	
	fluticasone-vilanterol inhalation (generic for Breo <sup>®</sup> Ellipta <sup>®</sup> )	
	Trelegy <sup>®</sup> Ellipta <sup>®</sup>	
	Wixela Inhub	
Add new to market product fluticasone/salmete	erol HFA inhaler (generic for Advair® HFA) as Non-Preferred	
INTRANA	SAL RHINITIS AGENTS	
Preferred	Non-Preferred	
azelastine spray (generic for Astelin®)	Exemption for steroids applies to children < 4 years of age	
Dymista <sup>®</sup> Nasal Spray	azelastine nasal spray (generic for Astepro <sup>®</sup> )	
fluticasone spray (generic for Flonase®)	azelastine-fluticasone nasal spray (generic for Dymista <sup>®</sup> )	
ipratropium spray (generic for Atrovent® Nasal)	Beconase <sup>®</sup> AQ Nasal Spray	
olopatadine nasal spray(generic for Patanase <sup>®</sup> )	Dymista <sup>®</sup> -Nasal Spray	
	flunisolide nasal spray (generic for Nasalide <sup>®</sup> ) mometasone nasal spray (generic for Nasonex <sup>®</sup> )	
	Omnaris <sup>®</sup> Nasal Spray	
	Patanase <sup>®</sup> Nasal Spray	
	QNasl <sup>®</sup> Nasal Spray / Children's Spray	
	Ryaltris® Nasal Spray	
	Sinuva <sup>™</sup> Implant	
	Xhance <sup>TM</sup> Nasal Spray	
	Zetonna <sup>®</sup> Nasal Spray	
<u>Move</u> Dymista® Nasal Sp	ray from Non-Preferred to Preferred	
LEUKO	TRIENE MODIFIERS	
Preferred	Non-Preferred	
montelukast chewable / tablet (generic for Singulair®)	Accolate <sup>®</sup> Tablet	
	montelukast granules (generic for Singulair <sup>®</sup> )	
	Singulair® Chewable / Granules / Tablet	
	zafirlukast tablet (generic for Accolate <sup>®</sup> )	
	zileuton tablet (generic for Zyflo®)	
Zyflo <sup>®</sup> Filmtab No recommendations. Class open for comments.		

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trial and failure criteria, clinical criteria (indicated in RED) may also apply. New to market products typically default to Non-Preferred status until

reviewed by the PDL Panel. These drugs are listed as TO BE REVIEWED. Drugs requiring prior authorization, clinical criteria and prior authorization request forms can be found at:

https://www.nctracks.nc.gov/content/public/providers/pharmacy.html More information on the PDL can be found at: https://medicaid.ncdhhs.gov/providers/programs-services/prescription-drugs/outpatient-pharmacy-services

LOW SEDATING ANTIHISTAMINES		
Preferred	Non-Preferred	
cetirizine OTC syrup 1mg/1ml (generic for Zyrtec® OTC Syrup)	cetirizine chewable tablet OTC (generic for Zyrtec® OTC Tablets)	
cetirizine Rx syrup (generic for Zyrtec <sup>®</sup> Syrup)	cetirizine OTC syrup 5mg/5ml (generic for Zyrtec® OTC Syrup)	
cetirizine tablets OTC (generic for Zyrtec <sup>®</sup> OTC Tablets)	cetirizine OTC softgel	
levocetirizine OTC tablet (generic for Xyzal® OTC Tablet)	Clarinex® Tablet - Exemption for children < 2 years of age	
levocetirizine Rx tablet (generic for Xyzal <sup>®</sup> Rx Tablet)	desloratadine ODT / Tablet (generic for Clarinex®)	
loratadine tablet OTC (generic for Claritin® OTC)	fexofenadine OTC suspension / OTC tablet (generic for Allegra® OTC)	
levocetirizine Rx solution (generic for Xyzal <sup>®</sup> RX Solution)		
loratadine OTC chewable ODT / solution / solution / solution / solution / solution / solution @ OTC)		

### Add cetirizine OTC softgel as Non-Preferred Removal: loratadine soft gel (generic for Claritin® OTC)

LOW SEDATING ANTIHISTAMINE COMBINATIONS		
Quantity limit of 102 days supply per 12 months apply to all drugs in this class		
Preferred Non-Preferred		
loratadine-D OTC tablet (generic for Claritin-D <sup>®</sup> OTC)	cetirizine-D OTC tablet (generic for Zyrtec-D <sup>®</sup> OTC)	
	Clarinex-D <sup>®</sup> Tablet	
	fexofenadine-D 12 Hour OTC Tablet (generic for Allegra-D <sup>®</sup> 12 Hour OTC)	
	fexofenadine-pseudoephedrine ER 24 hour tablet (generic for Allegra-D <sup>®</sup> 24 hour)	
	Semprex-D <sup>®</sup> -Capsule	
<u>Removal</u> : Semprex-D <sup>®</sup> Capsule		
FIRST GENERATION ANTIHISTAMINES		
Preferred Non-Preferred		
carbinoxamine solution	carbinoxamine tablet	
cyproheptadine syrup / tablet	clemastine tablet	
hydroxyzine capsule / solution / tablet	Karbinal™ ER (carbinoxamine) Suspension - Trial and failure of immediate release carbinoxamine solution and cetirizine syrup required for	

### \*New drug category addition\*

Add as Preferred: carbinoxamine solution, cyproheptadine syrup / tablet, hydroxyzine capsule / solution / tablet

Add as Non-Preferred: carbinoxamine tablet, clemastine tablet, Karbinal™ ER (carbinoxamine) Suspension with trial and failure criteria, RyClora™ (dexchlorpheniramine) Solution, RyVent™ (carbinoxamine) Tablet, Vistaril® (hydroxyzine pamoate) Capsule

RvClora™ (dexchlorph RyVent™ (carbinoxamine) Tablet Vistaril<sup>®</sup> (hydroxyzine pam

TOPICALS	
ACNE AGENTS	
Preferred	Non-Preferred
adapalene / benzoyl peroxide (Generic for Epiduo® Forte)	Acanya <sup>®</sup> Gel Pump
adapalene / benzoyl peroxide (generic for Epiduo <sup>®</sup> Gel)	Aczone® Gel
adapalene cream / gel / <del>solution (</del> generic for Differin <sup>®</sup> )	adapalene gel pump (generic for Differin <sup>®</sup> )
a <del>dapalene gel pump (generic for Differin<sup>®</sup>)</del>	adapalene / benzoyl peroxide (generic for Epiduo <sup>®</sup> Gel)
clindamycin phosphate pledgets / solution (generic for Cleocin-T®)	Altreno <sup>®</sup> Lotion (Topical)
clindamycin-benzoyl peroxide gel (generic for Duac®)	Amzeeg <sup>™</sup> Foam
Epiduo <sup>®</sup> Gel	Arazlo <sup>™</sup> Lotion
erythromycin gel (generic for Emcin®, Erycette®, EryDerm®, EryGel®, EryMax®)	Arralin <sup>®</sup> Gel
erythromycin solution (generic for Emcin®, EryDerm <sup>®</sup> , EryMax <sup>®</sup> , A/T/S <sup>®</sup> , T-Stat <sup>®</sup> )	Avar® Cleanser / <del>Cleansing Pads</del>
erythromycin-benzoyl peroxide gel (generic for Benzamycin®)	Avar® LS Cleanser / LS Cleansing Pads / LS Foam
Finacea® Gel	Avar-E* LS (sodium sulfacetamide/sulfur) Cream
Retin-A® Cream / Gel	Avar-E <sup>®</sup> Emollient Cream / Green Emollient Cream
Retin-A <sup>®</sup> Micro Gel / <del>Micro Pump Gel</del>	Avita <sup>®</sup> Cream / Gel
	azelaic acid gel (generic for Finacea®)
	Benzamycin <sup>®</sup> Gel
	BP® 10-1 Wash / Cleansing Wash
	Cleocin <sup>®</sup> T Lotion
	Clindacin <sup>®</sup> ETZ Pledget / Kit / P Pledgets / PAC Kit
	Clindacin <sup>®</sup> P (clindamycin) Foam
	Clindagel <sup>®</sup> Gel
	clindamycin / tretinoin (generic for Veltin <sup>®</sup> )
	clindamycin phosphate foam (generic for Evoclin <sup>®</sup> )
	clindamycin phosphate gel / lotion (generic for Cleocin-T®, Clindagel®)
	clindamycin-benzoyl peroxide gel (generic for Neuac <sup>®</sup> )
	clindamycin-benzoyl peroxide gel / pump (generic for Benzaclin <sup>®</sup> )
	clindamycin-benzoyl peroxide with pump (generic for Acanya®)
	dapsone gel (generic for Aczone <sup>®</sup> Gel)
	Ery <sup>®</sup> Pads
	Erygel <sup>®</sup> Gel
	erythromyein pledgets (generic for Emein®, Erycette®, EryDerm®, EryGel®, EryMax®)
	erythromycin gel (generic for Emcin <sup>®</sup> , Erycette <sup>®</sup> , EryDerm <sup>®</sup> , EryGel <sup>®</sup> , EryMax <sup>®</sup> )
	Evoclin <sup>®</sup> Foam
	Fabior <sup>®</sup> Foam
	Finacea® Foam / <del>Gel</del>
	Klaron® Lotion
	Neuac <sup>®</sup> Gel / Kit
	Onexton <sup>®</sup> Gel / Gel Pump

### **Effective DATE: Draft for July 13, 2023 Meeting**

Trial and failure of two Preferred drugs are required unless only one Preferred option is listed or is otherwise indicated. Not all therapeutic drug classes are included on the PDL. All drugs in the classes not included are considered Preferred. In addition to trial and failure criteria, clinical criteria (indicated in RED) may also apply. New to market products typically default to Non-Preferred status until reviewed by the PDL Panel. These drugs are listed as TO BE REVIEWED. Drugs requiring prior authorization, clinical criteria and prior authorization request forms can be found at: https://www.nctracks.nc.gov/content/public/providers/pharmacy.html More information on the PDL can be found at: https://medicaid.ncdhhs.gov/providers/programs-services/prescription-drugs/outpatient-pharmacy-services

Ovace® Plus Cleansing Cream / Foam / Gel / Lotion / Shampoo / Wash
Promiseb <sup>*</sup> Topical Cream
Retin-A <sup>®</sup> Micro Pump Gel
Rosula® Cloths / Wash
sodium sulfacetamide cleanser / cream (generic for Avar® / LS)
sodium sulfacetamide lotion (generic for Klaron®)
sodium sulfacetamide shampoo, wash (generic for Ovace®/Plus)
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 Sumaxin <sup>®</sup> )
SSS <sup>⊕</sup> 10-5 Cream / Foam
sulfacetamide-sulfur 9-4% cleanser (generic for Zencia™)
sulfacetamide-sulfur cream (generic for Avar <sup>®</sup> E, SSS <sup>®</sup> 10-5)
Sumadan <sup>®</sup> Kit / <del>Wash</del> / XLT Kit
Sumaxin® Cleansing Pads / CP Kit / TS Topical Suspension / Wash
tazarotene cream (generic for Tazorac <sup>®</sup> )
tazarotene foam (generic for Fabior®)
tazarotene gel (generic for Tazorac* gel)
Tazorae <sup>®</sup> -Cream-/ Gel
tretinoin cream / gel (generic for Retin- $A^{\otimes}$ )
tretinoin microsphere gel / microsphere gel pump (generic for Retin-A <sup>®</sup> Micro)
Tretin-X <sup>™</sup> Combo Pack / Cream
Winlevi <sup>®</sup> Cream
Ziana® Gel
Zma Clear <sup>su</sup> (sulfacetamide sodium/sulfur) Cleanser

Add new-to-market product Zma Clear™ (sulfacetamide sodium/sulfur) Cleanser as Non-Preferred

Add Avar-E® LS (sodium sulfacetamide/sulfur) Cream and Clindacin® (clindamycin) Foam as Non-Preferred

Move from Non-Preferred to Preferred: erythromycin gel, adapalene / benzoyl peroxide (generic for Epiduo® Gel), Finacea® Gel

Move from Preferred to Non-Preferred: adapalene gel pump (generic for Differin®), Retin-A® Micro Pump Gel

Removals: adapalene solution (generic for Differin<sup>®</sup>), Epiduo<sup>®</sup> Gel, Avar<sup>®</sup> Cleansing Pads, Avar<sup>®</sup> LS Cleansing Pads / LS Foam, erythromycin pledgets, Sumadan<sup>®</sup> Wash, Tazorac<sup>®</sup> Cream / Gel

ANDROGENIC AGENTS	
Preferred	Non-Preferred
Androgel <sup>®</sup> Pump	Androderm <sup>®</sup> Patch
testosterone gel pump (generic for Androgel® Pump, Fortesta®)	Androgel <sup>®</sup> Packet
	Fortesta <sup>®</sup> Gel Pump
	Natesto <sup>®</sup> Nasal Gel
	Testim <sup>®</sup> Gel
	testosterone gel / packet (generic for Testim <sup>®</sup> , Vogelxo <sup>®</sup> )
	testosterone packet (generic for Androgel® packet)
	testosterone gel pump (generie for Androgel® Pump, Fortesta®)
	Vogelxo <sup>®</sup> Gel / Packet / Pump

### Off-cycle change: Move testosterone gel pump (generic for Androgel® Pump, Fortesta®) from Non-Preferred to Preferred

	NSAIDS
Preferred	Non-Preferred
diclofenac topical gel (generic for Voltaren® Gel)	diclofenac epolamine patch (generic for Flector <sup>®</sup> Patch)
	diclofenac solution pump (generic for Pennsaid <sup>®</sup> Pump)
	diclofenac solution (generic for Pennsaid <sup>®</sup> )
	Flector® Patch
	Licart <sup>TM</sup> Patch
	Pennsaid® Solution Packet / Pump
ANTIBIOTICS	
Preferred	Non-Preferred
gentamicin cream / ointment (generic for Garamycin®)	Centany® AT Ointment Kit / Ointment
mupirocin ointment (generic for Bactroban® Ointment)	mupirocin cream (generic for Bactroban <sup>®</sup> Cream)
	Xepi <sup>™</sup> Cream

No recommendations. Class open for comments.	
ANTIBIOTICS - VAGINAL	
Preferred	Non-Preferred
Cleocin <sup>®</sup> Vaginal Ovules	Cleocin® Vaginal Cream
Clindesse® Vaginal Cream	clindamycin vaginal cream (generic for Cleocin® Vaginal Cream)
metronidazole vaginal gel (generic for Metrogel <sup>®</sup> Vaginal Gel)	Metrogel <sup>®</sup> Vaginal Gel
Nuvessa® Vaginal Gel	Vandazole® Vaginal Gel
	Xaciato <sup>®</sup> Vaginal Gel
ANTIFUNGALS	
Preferred	Non-Preferred

ciclopirox cream (generic for Loprox® Cream)	Bensal HP* Ointment
ciclopirox solution (generic for Penlac® Solution)	Ciclodan® Cream / Cream Kit / Kit / Solution
clotrimazole Rx cream (generic for Lotrimin® Rx)	ciclopirox gel / shampoo / suspension (generic for Loprox®)
clotrimazole-betamethasone cream (generic for Lotrisone® cream)	ciclopirox treatment kit (generic for Ciclodan $^{\otimes}$ Kit)
ketoconazole cream / shampoo (generic for Nizoral®)	clotrimazole Rx solution (generic for Lotrimin <sup>®</sup> Rx)
Nyamyc <sup>®</sup> Powder (branded generic for Nystop <sup>®</sup> )	clotrimazole-betamethasone lotion (generic for Lotrisone <sup>®</sup> lotion)
nystatin cream / ointment / powder (generic for Mycostatin®, Nystop®)	econazole cream (generic for Spectazole®)
Nystop <sup>®</sup> Powder	Ertaczo <sup>®</sup> Cream
	Exelderm <sup>®</sup> Cream / Solution
	Extina <sup>®</sup> Foam
	Jublia <sup>®</sup> Topical Solution
	Kerydin <sup>®</sup> Topical Solution
	ketoconazole foam (generic for Extina <sup>®</sup> Foam)
	Ketodan <sup>®</sup> Foam/Foam Kit
	Loprox <sup>®</sup> Shampoo / Suspension / Cream / Kit
	luliconazole cream (generic for Luzu <sup>®</sup> Cream)
	Luzu <sup>®</sup> Cream
	Mentax <sup>®</sup> Cream
	miconazole / zinc oxide / petrolatum ointment (generic for Vusion <sup>®</sup> ) - Clinical criteria apply
	naftifine cream / gel (generic for Naftin <sup>®</sup> Cream / Gel)
	Nafin <sup>®</sup> Gel
	nystatin-triamcinolone cream / ointment (generic for Mycolog II®)
	oxiconazole cream (generic for Oxistat <sup>®</sup> )
	Oxistat <sup>®</sup> Cream / Lotion
	salicylic acid ointment (generic for Bensal HP*)
	sulconazole nitrate cream (generic for Exelderm <sup>®</sup> )
	sulconazole nitrate solution (generic for Exelderm®)
	tavaborole topical solution (generic for Kerydin <sup>®</sup> Topical Solution)
	Vusion <sup>®</sup> Ointment - Clinical criteria apply
Add salicylic acid ointment (generic for Bensal HP®) as Non-Preferred	
Removal: Oxistat® Cream	

More information on the PDL can be found at: https://medicaid.ncdnns.gov/providers/programs-services/prescription-drugs/outpatient-pharmacy-services	
ANTIPARASITICS	
Trial and failure of o Preferred	nly one preferred drug required Non-Preferred
Preferred Natroba® Topical Suspension	INOn-Preferred Crotan Lotion
permethrin cream (generic for Elimite <sup>®</sup> )	Eurax <sup>®</sup> Cream / Lotion
Frankrike Control of Sector (Sector (S	ivermectin lotion (generic for Sklice <sup>®</sup> Lotion)
	lindane shampoo
	malathion lotion (generic for Ovide <sup>®</sup> )
	Ovide <sup>®</sup> Lotion
	Sklice <sup>®</sup> Lotion
	spinosad topical suspension (generic for Natroba®)
No recommendations. Class open for comments.	
	I NTIVIRAL
Preferred	Non-Preferred
acyclovir ointment (generic for Zovirax® Ointment)	acyclovir cream (generic for Zovirax <sup>®</sup> Cream)
Zovirax <sup>®</sup> Cream	Denavir <sup>®</sup> Cream
	penciclovir cream (generic for Denavir <sup>®</sup> Cream)
	Xerese <sup>®</sup> Cream
	Zovirax® Ointment
Add new to market product penciclovir cre	am (generic for Denavir® Cream) as Non-Preferred
IMMUN	OMODULATORS
	pic Dermatitis
	pply to all drugs in this class
Preferred	Non-Preferred
Dupixent <sup>®</sup> Syringe	Adby <sup>™</sup> (Subcutaneous)
Dupixent <sup>®</sup> Pen	Dupixent® Syringe
Elidel® Cream	<del>Dupixen@ Pen</del>
Eucrisa® 2% Ointment	Opzelura <sup>™</sup> Cream
tacrolimus ointment (generic Protopic®)	pimecrolimus cream (generic for Elidel <sup>®</sup> Cream)
<u>Move</u> Dupixent® Syringe and Dupix	tent® Pen from Non-Preferred to Preferred
Imida	zoquinolinamines
Preferred	Non-Preferred
imiquimod cream packet (generic for Aldara <sup>®</sup> )	Condylox <sup>®</sup> Gel
imiquimod cream packet (generic for Aldara®)	Condylox <sup>®</sup> Gel Hyftor <sup>aw</sup> Gel imiquimod cream (generic for Zyclara <sup>®</sup> ) (topical)
imiquimod cream packet (generic for Aldara®)	Condylox® Gel Hyftor™ Gel imiquimod cream (generic for Zyclara®) (topical) imiquimod cream punp (generic for Zyclara®) (topical)
imiquimod cream packet (generic for Aldara®)	Condylox <sup>®</sup> Gel Hyftor <sup>aw</sup> Gel imiquimod cream (generic for Zyclara <sup>®</sup> ) (topical) imiquimod cream pump (generic for Zyclara <sup>®</sup> ) (topical) podofilox solution (generic for Condylox <sup>®</sup> Solution)
imiquimod cream packet (generic for Aldara®)	Condylox® Gel Hyttor™ Gel imiquimod cream (generic for Zyclara®) (topical) imiquimod cream pump (generic for Zyclara®) (topical) podofilox solution (generic for Condylox® Solution) Veregen® Ointment
iniquimod cream packet (generic for Aldara <sup>®</sup> ) iniquimod cream pump (generic for Aldara®)	Condylox <sup>®</sup> Gel Hyftor™ Gel imiquimod cream (generic for Zyclara <sup>®</sup> ) (topical) imiquimod cream pump (generic for Zyclara <sup>®</sup> ) (topical) podofilox solution (generic for Condylox <sup>®</sup> Solution) Veregen <sup>®</sup> Ointment Zyclara <sup>®</sup> Cream and Cream Pump
iniquimod cream packet (generic for Aldara®) iniquimod cream pump (generic for Aldara®)	Condylox® Gel Hyftor™ Gel imiquimod cream (generic for Zyclara®) (topical) imiquimod cream pump (generic for Zyclara®) (topical) podofilox solution (generic for Condylox® Solution) Veregen® Ointment
iniquimod cream packet (generic for Aldara <sup>®</sup> ) imiquimod eream pump (generic for Aldara®) 	Condylox <sup>®</sup> Gel Hyftor™ Gel imiquimod cream (generic for Zyclara <sup>®</sup> ) (topical) imiquimod cream pump (generic for Zyclara <sup>®</sup> ) (topical) podofilox solution (generic for Condylox <sup>®</sup> Solution) Veregen <sup>®</sup> Ointment Zyclara <sup>®</sup> Cream and Cream Pump
imiquimod cream packet (generic for Aldara <sup>®</sup> ) imiquimod cream pump (generic for Aldara®)	Condylox® Gel Hyftor™ Gel imiquimod cream (generic for Zyclara®) (topical) imiquimod cream pump (generic for Zyclara®) (topical) podofilox solution (generic for Condylox® Solution) Veregen® Ointment Zyclara® Cream and Cream Pump cam pump (generic for Aldara®)
iniquimod cream packet (generic for Aldara®) iniquimod eream pump (generic for Aldara®)	Condylox® Gel Hyfor™ Gel imiquimod cream (generic for Zyclara®) (topical) imiquimod cream pump (generic for Zyclara®) (topical) podoflox solution (generic for Condylox® Solution) Veregen® Ointment Zyclara® Cream and Cream Pump cam pump (generic for Aldara®) SORIASIS Non-Preferred calcipotriene ointment / wolwiow-(generic for Dovonex®)
iniquimod cream packet (generic for Aldara®) iniquimod eream pump (generic for Aldara®)	Condylox® Gel Hytor™ Gel iniquimod cream (generic for Zyclara®) (topical) imiquimod cream pump (generic for Zyclara®) (topical) podofilos solution (generic for Condylox® Solution) Veregen® Ointment Zyclara® Cream and Cream Pump cam pump (generic for Aldara®) SORIASIS SORIASIS Non-Preferred calcipotriene ointment / solution-(generic for Dovonex®) calcipotriene foam (generic for Sorilux® Foam)
iniquimod cream packet (generic for Aldara®) iniquimod eream pump (generic for Aldara®)	Condylox® Gel Hytor™ Gel iniquimod cream (generic for Zyclara®) (topical) iniquimod cream pump (generic for Zyclara®) (topical) podofilos solution (generic for Condylox® Solution) Veregen® Ointment Zyclara® Cream and Cream Pump eam pump (generic for Aldara®) SORIASIS SORIASIS SORIASIS Cakipotriene ointment / sekution-(generic for Dovonex®) cakipotriene foam (generic for Sorilux® Foam) cakipotriene-betamethasone suspension / ointment (generic for Talconex®)
iniquimod cream packet (generic for Aldara®) iniquimod eream pump (generic for Aldara®)	Condylox® Gel Hyftor™ Gel imiquimod cream (generic for Zyclara®) (topical) imiquimod cream pump (generic for Zyclara®) (topical) podofilox solution (generic for Condylox® Solution) Veregen® Öintment Zyclara® Cream and Cream Pump Campung (generic for Aldara®) SORIASIS Non-Preferred calciptoriene contment / solution. (generic for Dovonex®) calciptoriene-betamethasone suspension / ointment (generic for Talconex®) calciptoriene-betamethasone suspension / ointment (generic for Talconex®)
iniquimod cream packet (generic for Aldara®) iniquimod eream pump (generic for Aldara®)	Condylox® Gel Hytor™ Gel imiquimod cream (generic for Zyclara®) (topical) imiquimod cream pump (generic for Zyclara®) (topical) podofilox solution (generic for Condylox® Solution) Veregen® Ointment Zyclara® Cream and Cream Pump com pump (generic for Aldara®) SORIASIS SORIASIS Contrement / solution (generic for Dovonex®) calcipotriene ointment / solution (generic for Dovonex®) calcipotriene-betamethasone suspension / ointment (generic for Talconex®) calcipotriene-betamethasone suspension / ointment (generic for Talconex®)
iniquimod cream packet (generic for Aldara®) iniquimod eream pump (generic for Aldara®)	Condylox® Gel Hytor™ Gel iniquimod cream (generic for Zyclara®) (topical) iniquimod cream pump (generic for Zyclara®) (topical) podofilox solution (generic for Condylox® Solution) Veregen® Ointment Zyclara® Cream and Cream Pump Source and Cream Pump Control (generic for Aldara®) Source and Cream Pump Control (generic for Control (generic for Dovonex®) calcipotriene ointment / wolwion (generic for Dovonex®) calcipotriene foam (generic for Sorilux® Foam) calcipotriene foam (generic for Sorilux® Foam) calcipotriene topic (generic for Vectical®) Duobrii® Lotion Enstitat® Foam
iniquimod cream packet (generic for Aldara®) iniquimod eream pump (generic for Aldara®)	Condylox® Gel Hytor™ Gel iniquimod cream (generic for Zyclara®) (topical) imiquimod cream pump (generic for Zyclara®) (topical) podofilos solution (generic for Condylox® Solution) Veregen® Ointment Zyclara® Cream and Cream Pump Composition (generic for Aldara®) SORIASIS SORIASIS SORIASIS Calcipotriene ointment / solution.(generic for Dovonex®) calcipotriene ointment / solution.(generic for Talconex®) calcipotriene-betamethasone suspension / ointment (generic for Sorilux® Foam) calcipotriene-betamethasone suspension / ointment (generic for Talconex®) calcipotriene-betamethasone suspension / ointment (generic for Sorilux® Foam) Sorilux® Foam
iniquimod cream packet (generic for Aldara®) iniquimod eream pump (generic for Aldara®)	Condylox® Gel Hytor™ Gel iniquimod cream (generic for Zyclara®) (topical) iniquimod cream pump (generic for Zyclara®) (topical) podofilos solution (generic for Condylox® Solution) Veregen® Ointment Zyclara® Cream and Cream Pump eam pump (generic for Aldara®) SORIASIS SORIASIS SORIASIS Calcipotriene ointment / selution-(generic for Dovonex®) calcipotriene ointment / selution-(generic for Dovonex®) calcipotriene ointment / selution-(generic for Talconex®) calcipotriene betamethasone suspension / ointment (generic for Talconex®) calcipotriene ointment (generic for Vectical®) Duobri™ Lotion Enstitam® Foam Taclonex® Ointment / Suspension
iniquimod cream packet (generic for Aldara®) iniquimod eream pump (generic for Aldara®)	Condylox® Gel Hytor® Gel imiquimod cream (generic for Zyclara®) (topical) imiquimod cream pump (generic for Zyclara®) (topical) podofilox solution (generic for Condylox® Solution) Veregen® Ointment Zyclara® Cream and Cream Pump cam pump (generic for Aldara®) SORIASIS SORIASIS SORIASIS Calcipotriene ointment / solution (generic for Dovonex®) calcipotriene ointment / solution (generic for Tolconex®) calcipotriene ointment / solution / ointment (generic for Talconex®) calcipotriene for Sorilux® Foam) calcipotriene for Sorilux® Foam) calcipotriene for for Vectical®) Duobrii <sup>15</sup> Lotion Enstitad® Foam Sorilux® Foam Sorilux® Foam
iniquimod cream packet (generic for Aldara®) iniquimod eream pump (generic for Aldara®) Removal: imiquimod cru calcipotriene cream (generic for Dovonex®) calcipotriene solution (generic for Dovonex®) calcipotriene solution (generic for Dovonex®)	Condylox® Gel Hytor™ Gel iniquimod cream (generic for Zyclara®) (topical) iniquimod cream pump (generic for Zyclara®) (topical) podofilos solution (generic for Condylox® Solution) Veregen® Ointment Zyclara® Cream and Cream Pump eam pump (generic for Aldara®) SORIASIS SORIASIS SORIASIS Calcipotriene ointment / selution-(generic for Dovonex®) calcipotriene ointment / selution-(generic for Dovonex®) calcipotriene ointment / selution-(generic for Talconex®) calcipotriene betamethasone suspension / ointment (generic for Talconex®) calcipotriene ointment (generic for Vectical®) Duobri™ Lotion Enstitam® Foam Taclonex® Ointment / Suspension
iniquimod cream packet (generic for Aldara®) iniquimod eream pump (generic for Aldara®) Removal: imiquimod creation (generic for Dovonex®) calcipotriene cream (generic for Dovonex®) calcipotriene solution (generic for Dovonex®) calcipotriene solution (generic for Dovonex®)	Condylox® Gel Hyfor™ Gel imiquimod cream (generic for Zyclara®) (topical) podofilox solution (generic for Zyclara®) (topical) podofilox solution (generic for Condylox® Solution) Veregen® Ointment Zyclara® Cream and Cream Pump Cam pump (generic for Aldara®) SORIASIS S
iniquimod cream packet (generic for Aldara®) iniquimod eream pump (generic for Aldara®) Removal: imiquimod creation (generic for Dovonex®) calcipotriene cream (generic for Dovonex®) calcipotriene solution (generic for Dovonex®) calcipotriene solution (generic for Dovonex®)	Condylox® Gel Hyfor** Gel iniquimod cream (generic for Zyclara®) (topical) podofilox solution (generic for Zyclara®) (topical) podofilox solution (generic for Condylox® Solution) Veregen® Ointment Zyclara® Cream and Cream Pump Cam pump (generic for Aldara®) SORIASIS
iniquimod cream packet (generic for Aldara®) imiquimod cream pump (generic for Aldara®) Removal: imiquimod cream Removal: imiquimod cream calcipotriene cream (generic for Dovonex®) calcipotriene solution (generic for Dovonex®)	Condylox® Gel Hyfor** Gel imiquimod cream (generic for Zyclara®) (topical) podofilox solution (generic for Condylox® Solution) Veregen® Ointment Zyclara® Cream and Cream Pump Comparison of Condylox® Solution SORIASIS S
iniquimod cream packet (generic for Aldara®) iniquimod eream pump (generic for Aldara®) Removal: imiquimod cream Removal: imiquimod cream Preferred calcipotriene cream (generic for Dovonex®) calcipotriene solution (generic for Dovonex®) calcipotriene solution (generic for Dovonex®) Move calcipotriene solution (generic for Move calcipotriene solution (generic for	Condylox® Gel Hytor™ Gel iniquimod cream (generic for Zyclara®) (topical) podofilox solution (generic for Condylox® Solution) Veregen® Ointment Zyclara® Cream and Cream Pump Comparison (generic for Aldara®) SORIASIS SORIASIS SORIASIS Comparison (generic for Dovonex®) cakipotriene ointment / solutione (generic for Dovonex®) cakipotriene ointment / solutione (generic for Dovonex®) cakipotriene ointment / solutione (generic for Talconex®) cakipotriene ointment (generic for Sorilux® Foam) cakipotriene ointment / solutione (generic for Talconex®) cakipotriene ointment (generic for Vectical®) Duobrii™ Lotion Enstitue® Foam Sorilux® Foam Sorilux® Foam Sorilux® Foam Zaroye® Cream Zorye® Cream Zorye® Tream
iniquimod cream packet (generic for Aldara®) iniquimod eream pump (generic for Aldara®) Removal: imiquimod cream Removal: imiquimod cream removal: imiquimod cream Preferred calcipotriene cream (generic for Dovonex®) calcipotriene solution (generic for Bovonex®) calcipotriene solution (generic for Bovonex®)	Condylox® Gel Hytor** Gel imiquinod cream (generic for Zyclara®) (topical) iniquinod cream pump (generic for Zyclara®) (topical) podofilox solution (generic for Condylox® Solution) Veregen® Ointment Zyclara® Cream and Cream Pump Cam pump (generic for Aldara®) SORIASIS SORIASIS SORIASIS SORIASIS Calcipotiene foatm (generic for Dovonex®) calcipotiene foatm (generic for Sorilux® Foam) calcipotiene-betamethasone supension / ointment (generic for Talconex®) calcipotiene-betamethasone supension / ointment (generic for Talconex®) calcipotiene foatm Sorilux® Foam Sorilux® Foam Sorilux® Foam Sorilux® Foam Sorilux® Foam Cor Dovonex®) from Non-Preferred to Preferred CEA AGENTS Non-Preferred zelaic acid gel (generic for Finacea®) brimonidine gel pump (generic for Mirvaco*) Epoolay® Cream Pump
iniquimod cream packet (generic for Aldara®) iniquimod eream pump (generic for Aldara®) Removal: imiquimod cream Removal: imiquimod cream Preferred calcipotriene cream (generic for Dovonex®) calcipotriene solution (generic for Dovonex®) calcipotriene solution (generic for Dovonex®) Move calcipotriene solution (generic for Move calcipotriene solution (generic for ROS/ Preferred Finaces® Gel metronidazole cream (generic for MetroCream®)	Condylox® Gel Hyfor** Gel iniquinod cream generic for Zyclara®) (topical) iniquinod cream pump (generic for Condylox® Solution) Veregen® Oninnent Zyclara® Cream and Cream Pump Computing (generic for Aldara®) SORIASIS SORIASIS SORIASIS Content / websitement / solution (generic for Dovones®) calcipotriene ointment / websitement (generic for Talconex®) calcipotriene-betmethasone suspension / ointment (generic for Vectical®) Duobril <sup>®</sup> Lotion Enstitad® Foam Soriux® Foam Taclonex® (Dintment / Suspension Vtama® Cream Zorvye® Cream CEA AGENTS Non-Preferred azelaic acid gel (generic for Finacea®) brinonidine gel pump (generic for Mirvaso®) Epsolog® -Cream Fump Finacea® Foam / Gel
iniquimod cream packet (generic for Aldara®) iniquimod eream pump (generic for Aldara®) Removal: imiquimod cream Removal: imiquimod cream removal: imiquimod cream Preferred calcipotriene cream (generic for Dovonex®) calcipotriene solution (generic for Bovonex®) calcipotriene solution (generic for Bovonex®)	Condylox® Gel Hyfor" Gel iniquinod cream (generic for Zyclara®) (topical) iniquinod cream pump (generic for Zyclara®) (topical) podofilox solution (generic for Condylox® Solution) Yeregen® Oninnent Zyclara® Cream and Cream Pump earn pump (generic for Aldara®) SORIASIS
iniquimod cream packet (generic for Aldara®) iniquimod eream pump (generic for Aldara®) Removal: imiquimod cream Removal: imiquimod cream Preferred calcipotriene cream (generic for Dovones®) calcipotriene solution (generic for Bovones®) calcipotriene solution (generic for Bovones®)	Condylox <sup>®</sup> Gel Hyfor <sup>®</sup> Gel imiquinod cream (generic for Zyclara <sup>®</sup> ) (topical) imiquinod cream pump (generic for Zyclara <sup>®</sup> ) (topical) podofilox solution (generic for Condylox <sup>®</sup> Solution) Veregea <sup>®</sup> Ointment Zyclara <sup>®</sup> Cream and Cream Pump <b>eam pump (generic for Aldara<sup>®</sup>)</b> SORIASIS SORIASIS SORIASIS SORIASIS Calcipotriene form (generic for Aldara <sup>®</sup> ) calcipotriene form (generic for Sorilux <sup>®</sup> Foam) calcipotriene foam (generic for Sorilux <sup>®</sup> Foam) calcipotriene foam (generic for Sorilux <sup>®</sup> Foam) calcipotriene foam (generic for Vertical <sup>®</sup> ) Duobrii <sup>®</sup> Lotion Ensitlar <sup>®</sup> Foam Sorilux <sup>®</sup> Foam Sorilux <sup>®</sup> Foam Sorilux <sup>®</sup> Foam Taclonex <sup>®</sup> ) from Non-Preferred to Preferred Cream Zorvye <sup>®</sup> Cream Cream Alder Sorilux <sup>®</sup> Solution For Dovonex <sup>®</sup> ) from Non-Preferred to Preferred Cream Alder Solution Ensitlar <sup>®</sup> Foam Sorilux <sup>®</sup> Foam Cream Alder Solution Ensitlar <sup>®</sup> Foam Sorilux <sup>®</sup> Foam Cream Alder Solution For Dovonex <sup>®</sup> ) from Non-Preferred to Preferred Cream Alder Solution Ensitlar <sup>®</sup> Foam Solution For Dovonex <sup>®</sup> ) from Non-Preferred to Preferred Cream Alder Solution Ensitlar <sup>®</sup> Foam Solution Ensitlar <sup>®</sup> Foam Solution For Dovonex <sup>®</sup> ) from Non-Preferred to Preferred Cream Alder Solution Ensitlar <sup>®</sup> Foam Solution For Dovonex <sup>®</sup> ) from Non-Preferred to Preferred Cream Alder Solution Ensitlar <sup>®</sup> Foam Solution For Dovonex <sup>®</sup> ) from Non-Preferred to Preferred Cream Alder Solution For Dovonex <sup>®</sup> for Finacea <sup>®</sup> ) For Preferred For Preferred
iniquimod cream packet (generic for Aldara®) iniquimod eream pump (generic for Aldara®) Removal: imiquimod cream Removal: imiquimod cream Preferred calcipotriene cream (generic for Dovones®) calcipotriene solution (generic for Bovones®) calcipotriene solution (generic for Bovones®)	Condylox <sup>®</sup> Gel Hyfor <sup>®</sup> Gel imiquinod cream (generic for Zyclara <sup>®</sup> ) (topical) imiquinod cream pump (generic for Zyclara <sup>®</sup> ) (topical) podofilox solution (generic for Condylox <sup>®</sup> Solution) Veregen <sup>®</sup> Ointment Zyclara <sup>®</sup> Cream and Cream Pump <b>eam pump (generic for Aldara<sup>®</sup>)</b> <b>eakipotriene ointment / solutioner (and the solutioner of the soluti</b>
iniquimod cream packet (generic for Aldara®) iniquimod eream pump (generic for Aldara®) Removal: imiquimod cream Removal: imiquimod cream removal: imiquimod cream Preferred calcipotriene cream (generic for Dovonex®) calcipotriene solution (generic for Bovonex®) calcipotriene solution (generic for Bovonex®)	Condylox <sup>®</sup> Gel Hyfor <sup>®</sup> Gel Hyfor <sup>®</sup> Gel imiquinod cream jump (generic for Zyclara <sup>®</sup> ) (topical) iniquinod cream pump (generic for Zyclara <sup>®</sup> ) (topical) Podoffiko solution (generic for Condylox <sup>®</sup> Solution) Veregea <sup>®</sup> Ointment Zyclara <sup>®</sup> Cream and Cream Pump Eam pump (generic for Aldara <sup>®</sup> ) SORIASIS SORIASIS SORIASIS SORIASIS Calcipotriene ontiment / substance (generic for Dovonex <sup>®</sup> ) calcipotriene ontiment / substance (generic for Dovonex <sup>®</sup> ) calcipotriene ontiment / substance (generic for Dovonex <sup>®</sup> ) calcipotriene ontiment / substance (generic for Talconex <sup>®</sup> ) calcipotriene ontiment (generic for Vertical <sup>®</sup> ) Duobri <sup>®</sup> Lotion Enstita <sup>®</sup> Foam Sorilux <sup>®</sup> Foam Sorilux <sup>®</sup> Foam Cream Zorye <sup>®</sup> Cream CCEA AGENTS CCEA AGENTS Non-Preferred azeliai caid gel (generic for Finacea <sup>®</sup> ) brimonidine gel pump (generic for Mirvaso <sup>*</sup> ) Epsolag <sup>®</sup> Cream for Non-Preferred zeliai caid gel (generic for Finacea <sup>®</sup> ) brimonidine gel pump (generic for Mirvaso <sup>*</sup> ) Epsolag <sup>®</sup> Cream for Non-Preferred zeliai caid gel (generic for Finacea <sup>®</sup> ) brimonidine gel pump (generic for Mirvaso <sup>*</sup> ) Epsolag <sup>®</sup> Cream for Non-Preferred Zorye <sup>®</sup> Cream for No
iniquimod cream packet (generic for Aldara®) iniquimod eream pump (generic for Aldara®) Removal: imiquimod cream Removal: imiquimod cream Preferred calcipotriene cream (generic for Dovones®) calcipotriene solution (generic for Bovones®) calcipotriene solution (generic for Bovones®)	Condylox <sup>®</sup> Gel Hyfor <sup>®</sup> Gel imiquinod cream (generic for Zyclara <sup>®</sup> ) (topical) imiquinod cream pump (generic for Zyclara <sup>®</sup> ) (topical) podofilox solution (generic for Condylox <sup>®</sup> Solution) Yeregen <sup>®</sup> Ointment Zyclara <sup>®</sup> Cream and Cream Pump <b>eam pump (generic for Aldara<sup>®</sup>)</b> <b>eatom pump (generic for Aldara<sup>®</sup>)</b> <b>eatom pump (generic for Aldara<sup>®</sup>)</b> <b>calcipotriene ointment / solutions/ generic for Dovonex<sup>®</sup>)</b> <b>calcipotriene form (generic for Sorilux<sup>®</sup> Foam)</b> <b>calcipotriene foam (generic for Sorilux<sup>®</sup> Foam)</b> <b>calcipotriene foam (generic for Vectical<sup>®</sup>)</b> Duobril <sup>®</sup> Lotion Enstital <sup>®</sup> Foam Soritus <sup>®</sup> Foam Soritus <sup>®</sup> Foam <b>Cocam</b> Zorvye <sup>®</sup> Cream <b>CDOvonex<sup>®</sup>) from Non-Preferred to Preferred</b> <b>CDEA AGENTS</b> <b>Non-Preferred</b> <b>aclaig of (generic for Finacea<sup>®</sup>)</b> Hyfording (generic for Finacea <sup>®</sup> ) Hyfording (Generic for Mirvaso <sup>®</sup> ). Epoint <sup>®</sup> - Cream Hype Finacea <sup>®</sup> Foam / Get Hyfording (Generic for Mirvaso <sup>®</sup> ). Epoint <sup>®</sup> - Cream for Mirvaso <sup>®</sup> ) Hyfording (Generic for Mirvaso <sup>®</sup> ). Epoint <sup>®</sup> - Cream for Mirvaso <sup>®</sup> ). Epoint <sup></sup>

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Trial and failure of two Preferred drugs are required unless only one Preferred option is listed or is otherwise indicated. Not all therapeutic drug classes are included on the PDL. All drugs in the classes not included are considered Preferred. In addition to trial and failure criteria, clinical criteria (indicated in RED) may also apply. New to market products typically default to Non-Preferred status until reviewed by the PDL Panel. These drugs are listed as TO BE REVIEWED. Drugs requiring prior authorization, clinical criteria and prior authorization request forms can be found at: https://www.nctracks.nc.gov/content/public/providers/pharmacy.html
More information on the PDL can be found at: https://medicaid.ncdhhs.gov/providers/programs-services/prescription-drugs/outpatient-pharmacy-services

Add new to market product brimonidine gel pump (generic for Mirvaso®) as Non-Preferred

Move Finacea® Gel and Rosadan® Cream / Gel from Non-Preferred to Preferred Removal: Epsolay® Cream Pump

	STEROIDS		
L	ow Potency		
Preferred	Non-Preferred		
DermaSmoothe® FS Scalp and Body Oil	alclometasone dipropionate cream / ointment (generic for Aclovate®)		
desonide cream / ointment (generic for DesOwen <sup>®</sup> )	Aqua Glycolic <sup>®</sup> HC Kit		
hydrocortisone cream / lotion / ointment (generic for Hytone <sup>®</sup> )	desonide eream / ointment (generic for DesOwen <sup>®</sup> ) - Exemption for children < 12 years of age		
	desonide lotion (generic for DesOwen <sup>®</sup> Lotion)		
	fluocinolone body / scalp oil (generic for DermaSmoothe <sup>®</sup> FS Scalp / Body Oil)		
Texacort <sup>®</sup> Solution <u>Move</u> desonide cream / ointment (generic for DesOwen <sup>®</sup> ) from Non-Preferred to Preferred			
Me	edium Potency		
Preferred	Non-Preferred		
fluticasone cream / ointment (generic for Cutivate®)	Beser <sup>™</sup> Lotion / Kit		
mometasone cream / ointment / solution (generic for Elocon <sup>®</sup> )	clocortolone cream / pump (generic for Cloderm <sup>®</sup> )		
noneclassic creati / on their / solution (generic for Elocon )	Cloderm <sup>®</sup> Cream / Pump		
	Cutivate® Cream / Jump		
	fluocinolone cream / ointment / solution (generic for Synalar®)		
	flurandrenolide cream/lotion (generic for Cordran® SP cream and Cordran® lotion)		
	flurandrenolide ointment (generic for Cordran <sup>®</sup> ointment)		
	fluticasone lotion (generic for Cutivate <sup>®</sup> Lotion)		
	hydrocortisone butyrate cream / lipid cream / lotion / ointment / solution (generic for Locoid®)		
	hydrocortisone valerate cream / ointment (generic for Westcort <sup>®</sup> )		
	Locoid <sup>®</sup> Lipocream / Lotion		
	Luxiq <sup>®</sup> Foam		
	Pandel® Cream		
	prednicarbate cream / ointment (generic for Dermatop <sup>®</sup> )		
	Synalar® Cream / Ointment / Kit / Solution / TS Kit		
No recommendation	No recommendations. Class open for comments.		
	ligh Potency		
Preferred	Non-Preferred		
betamethasone valerate cream / ointment (generic for Valisone <sup>®</sup> )	amcinonide cream / lotion (generic for Cyclocort <sup>®</sup> )		
fluocinonide ointment (generic for Lidex <sup>®</sup> Ointment)	betamethasone dipropionate augmented cream / gel / lotion / ointment (generic for Diprolene®)		
fluocinonide solution (generic for Lidex <sup>®</sup> Solution)	betamethasone dipropionate cream / lotion / ointment (generic for Diprosone <sup>®</sup> )		
triamcinolone acetonide cream / lotion / ointment (generic for Kenalog <sup>®</sup> )	betamethasone valerate foam (generic for Valisone®)		
unanchokole actionale cream / fotor / omment (grache for Kennog )	betamethasone valerate lotion (generic for Valisone <sup>®</sup> )		
	desoximetasone cream / gel / ointment / spray (generic for Topicort®)		
	difforasone cream / ointment (generic for Florone®)		
	Diprolene <sup>®</sup> Ointment		
	fluocinonide cream / emollient cream / gel (generic for Lidex <sup>®</sup> / Lidex <sup>®</sup> E)		
	fluocinonide ointment (generic for Lidex <sup>®</sup> Ointment)		
	fluocinonide solution (generic for Lidex <sup>®</sup> Solution)		
	halcinonide cream (generic for Halog <sup>®</sup> )		
	Halog® Cream / Ointment / Solution		
	Kenalog <sup>®</sup> Spray		
	Sanaderm <sup>®</sup> Rx Solution		
	Topicon <sup>®</sup> Cream / Gel / Ointment / Spray / LP		
	triamcinolone spray (generic for Kenalog <sup>®</sup> Spray)		
	Trianex® Ointment		
	Vanos <sup>®</sup> Cream		
<u>Move</u> fluocinonide ointment and solution (generic for Lidex <sup>®</sup> ) from Non-Preferred to Preferred <u>Removal</u> : Trianex <sup>®</sup> Ointment			

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reviewed by the PDL Panel. These drugs are listed as TO BE REVIEWED. Drugs requiring prior authorization, clinical criteria and prior authorization request forms can be found at: https://www.nctracks.nc.gov/content/public/providers/pharmacy.html
More information on the PDL can be found at: https://medicaid.ncdhhs.gov/providers/programs-services/prescription-drugs/outpatient-pharmacy-services

	Very High Potency
Preferred	Non-Preferred
betasol cream / emollient cream / gel / ointment (generic for Temovate®)	ApexiCon® E (diflorasone) Cream
betasol solution (generic for Cormax <sup>®</sup> )	Bryhali <sup>®</sup> Lotion
lobetasol propionate cream / ointment (generic for Ultravate®)	clobetasol foam / emollient foam / emulsion foam (generic for $Olux^{\oplus}$ / $Olux-E^{\oplus}$ )
obetasol shampoo (generic for Clobex®)	clobetasol lotion (generic for Clobex <sup>®</sup> )
	clobetasol propionate spray (generic for Clobex <sup>®</sup> spray)
	Clodan <sup>®</sup> Kit / Shampoo
	halobetasol propionate foam (generic for Lexette $^{\oplus}$ Foam)
	Impeklo <sup>™</sup> Lotion
	Lexette <sup>®</sup> Foam
	Olux <sup>®</sup> Foam / E-Foam
	Temovate <sup>®</sup> Cream / Ointment
	Tovet <sup>™</sup> Foam / Foam Kit
	Ultravate <sup>®</sup> Lotion
<u>Add</u> Apex	ciCon® E (diflorasone) Cream as Non-Preferred
	MISCELLANEOUS
	ANTIPSORIATICS, ORAL
Preferred	Non-Preferred
itretin (generic for Soriatane <sup>®</sup> )	methoxsalen rapid (generic for Oxsoralen-Ultra®)
	EPINEPHRINE, SELF INJECTED
	Quantity limits apply to all drugs in this class
Preferred	Non-Preferred
pi-Pen® Auto Injector	Auvi-Q <sup>®</sup> (epinephrine) Auto Injector
vi-Pen® JR Auto Injector	
pi-Pen® JR Auto Injector	epinephrine auto injector (generic for Adrenaclick <sup>®</sup> )
inephrine auto injector (generic for Epi-Pen® Auto Injector)	epinephrine auto injector (generic for Adrenaclick <sup>®</sup> ) Symjepi <sup>™</sup> Injection
inephrine auto injector (generic for Epi-Pen® Auto Injector)	epinephrine auto injector (generic for Adrenaclick <sup>®</sup> ) Symjepi <sup>™</sup> Injection <del>epinephrine auto injector (generic for Epi-Pen® Auto Injector)</del>
vinephrine auto injector (generic for Epi-Pen® Auto Injector) Binephrine JR (generic for Epi-Pen® JR Auto Injector)	epinephrine auto injector (generic for Adrenaclick <sup>®</sup> ) Symjepi <sup>™</sup> Injection epinephrine auto injector (generic for Epi-Pen⊗ Auto Injector) epinephrine JR (generic for Epi-Pen⊗ JR Auto Injector)
inephrine auto injector (generic for Epi-Pen® Auto Injector) inephrine JR (generic for Epi-Pen® JR Auto Injector) Add Auvi-Q	epinephrine auto injector (generic for Adrenaclick <sup>®</sup> ) Symjepi <sup>™</sup> Injection <del>epinephrine auto injector (generic for Epi-Pen® Auto Injector)</del>
inephrine auto injector (generic for Epi-Pen® Auto Injector) inephrine JR (generic for Epi-Pen® JR Auto Injector) Add Auvi-Q	epinephrine auto injector (generic for Adrenaclick <sup>®</sup> ) Symjepi <sup>™</sup> Injection epinephrine auto injector (generic for Epi-Pen® Auto Injector) epinephrine JR (generic for Epi-Pen® JR Auto Injector) 2 <sup>®</sup> (epinephrine) Auto Injector as Non-Preferred
inephrine auto injector (generic for Epi-Pen® Auto Injector) inephrine JR (generic for Epi-Pen® JR Auto Injector) Add Auvi-Q	epinephrine auto injector (generic for Adrenaclick <sup>®</sup> ) Symjepi <sup>™</sup> Injecton epinephrine auto injector (generic for Epi-Pen® Auto Injector) epinephrine IR (generic for Epi-Pen® IR Auto-Injector) Q <sup>®</sup> (epinephrine) Auto Injector as Non-Preferred jector) and epinephrine JR (generic for Epi-Pen <sup>®</sup> JR Auto Injector) from Non-Preferred to Preferred
inephrine auto Injector (generic for Epi-Pen® Auto Injector) inephrine JR (generic for Epi-Pen® JR Auto Injector) <u>Add</u> Auvi-Q <u>Move</u> epinephrine auto injector (generic for Epi-Pen® Auto Inj Preferred	epinephrine auto injector (generic for Adrenaclick®) Symjepi <sup>™</sup> Injection epinephrine auto injector (generic for Epi-Pen® Auto Injector) epinephrine JR (generic for Epi-Pen® JR Auto Injector) Q® (epinephrine) Auto Injector as Non-Preferred jector) and epinephrine JR (generic for Epi-Pen® JR Auto Injector) from Non-Preferred to Preferred ESTROGEN AGENTS, COMBINATIONS Non-Preferred
inephrine auto injector (generic for Epi-Pen® Auto Injector) inephrine JR (generic for Epi-Pen® JR Auto Injector) <u>Add</u> Auvi-Q <u>Move</u> epinephrine auto injector (generic for Epi-Pen® Auto Inj	epinephrine auto injector (generic for Adrenaclick®) Symjepi <sup>™</sup> Injecton epinephrine auto injector (generic for Epi-Pen® Auto Injector) epinephrine JR (generic for Epi-Pen® JR Auto Injector) Q <sup>®</sup> (epinephrine) Auto Injector as Non-Preferred jector) and epinephrine JR (generic for Epi-Pen® JR Auto Injector) from Non-Preferred to Preferred ESTROGEN AGENTS, COMBINATIONS
inephrine auto injector (generic for Epi-Pen® Auto Injector) inephrine JR (generic for Epi-Pen® JR Auto Injector) <u>Add</u> Auvi-Q <u>Move</u> epinephrine auto injector (generic for Epi-Pen® Auto Inj ctivella <sup>®</sup> Tablet mabelz <sup>w</sup> Tablet	epinephrine auto injector (generic for Adrenaclick®) Symjepi <sup>™</sup> Injection epinephrine auto injector (generic for Epi-Pen® Auto Injector) epinephrine JR (generic for Epi-Pen® JR Auto Injector) Q® (epinephrine) Auto Injector as Non-Preferred jector) and epinephrine JR (generic for Epi-Pen® JR Auto Injector) from Non-Preferred to Preferred ESTROGEN AGENTS, COMBINATIONS Non-Preferred Bijuva® Capsule
inephrine auto injector (generic for Epi-Pen® Auto Injector) inephrine JR (generic for Epi-Pen® JR Auto Injector) <u>Add</u> Auvi-Q <u>Move</u> epinephrine auto injector (generic for Epi-Pen® Auto Inj <u>Preferred</u> ctivella <sup>®</sup> Tablet mabelz <sup>m</sup> Tablet tradiol/norethindrone tablet (generic for Activella <sup>®</sup> )	epinephrine auto injector (generic for Adrenaclick®) Symjepi <sup>™</sup> Injection epinephrine auto injector (generic for Epi-Pen® Auto Injector) epinephrine JR (generic for Epi-Pen® JR Auto Injector) Q® (epinephrine) Auto Injector as Non-Preferred jector) and epinephrine JR (generic for Epi-Pen® JR Auto Injector) from Non-Preferred to Preferred ESTROGEN AGENTS, COMBINATIONS Non-Preferred Bijuva® Capsule
inephrine auto injector (generic for Epi-Pen® Auto Injector) inephrine JR (generic for Epi-Pen® JR Auto Injector) <u>Add</u> Auvi-Q <u>Move</u> epinephrine auto injector (generic for Epi-Pen® Auto Inj <u>Preferred</u> ctivella® Tablet mabelz <sup>w</sup> Tablet tradio/norethindrone tablet (generic for Activella®) avolv <sup>™</sup> Tablet	epinephrine auto injector (generic for Adrenaclick®) Symjepi <sup>™</sup> Injection epinephrine auto injector (generic for Epi-Pen® Auto Injector) epinephrine JR (generic for Epi-Pen® JR Auto Injector) Q® (epinephrine) Auto Injector as Non-Preferred jector) and epinephrine JR (generic for Epi-Pen® JR Auto Injector) from Non-Preferred to Preferred ESTROGEN AGENTS, COMBINATIONS Non-Preferred Bijuva® Capsule
inephrine auto Injector (generic for Epi-Pen® Auto Injector) inephrine JR (generic for Epi-Pen® JR Auto Injector) <u>Add</u> Auvi-Q <u>Move</u> epinephrine auto injector (generic for Epi-Pen® Auto Inj <u>Preferred</u> ctivella® Tablet mabelz <sup>w</sup> Tablet tradiol/norehindrone tablet (generic for Activella®) avvolv <sup>™</sup> Tablet ntell® (branded generic for FemHRT®)	epinephrine auto injector (generic for Adrenaclick®) Symjepi <sup>™</sup> Injection epinephrine auto injector (generic for Epi-Pen® Auto Injector) epinephrine JR (generic for Epi-Pen® JR Auto Injector) Q® (epinephrine) Auto Injector as Non-Preferred jector) and epinephrine JR (generic for Epi-Pen® JR Auto Injector) from Non-Preferred to Preferred ESTROGEN AGENTS, COMBINATIONS Non-Preferred Bijuva® Capsule
inephrine auto injector (generic for Epi-Pen® Auto Injector) inephrine JR (generic for Epi-Pen® JR Auto Injector) <u>Add</u> Auvi-Q <u>Move</u> epinephrine auto injector (generic for Epi-Pen® Auto Inj ctivella® Tablet mabelz <sup>w</sup> Tablet tradiol/norethindrone tablet (generic for Activella®) avolv <sup>38</sup> Tablet metel® (tranded generic for FemHRT®) innvey® / Lo (branded generic for Activella®)	epinephrine auto injector (generic for Adrenaclick®) Symjepi <sup>™</sup> Injection epinephrine auto injector (generic for Epi-Pen® Auto Injector) epinephrine JR (generic for Epi-Pen® JR Auto Injector) Q® (epinephrine) Auto Injector as Non-Preferred jector) and epinephrine JR (generic for Epi-Pen® JR Auto Injector) from Non-Preferred to Preferred ESTROGEN AGENTS, COMBINATIONS Non-Preferred Bijuva® Capsule
inephrine auto injector (generic for Epi-Pen® Auto Injector) inephrine JR (generic for Epi-Pen® JR Auto Injector) <u>Add</u> Auvi-Q <u>Move</u> epinephrine auto injector (generic for Epi-Pen® Auto Inj ctivella® Tablet mabelz <sup>m</sup> Tablet tradiofuorethindrone tablet (generic for Activella®) avolv <sup>TM</sup> Tablet tradiofuorethindrone tablet (generic for Activella®) metel <sup>®</sup> (branded generic for FemHRT®) invey <sup>®</sup> /L o (branded generic for Activella <sup>®</sup> ) rethindrone-ethinyl estradiol (generic for FemHRT <sup>®</sup> )	epinephrine auto injector (generic for Adrenaclick®) Symjepi <sup>™</sup> Injection epinephrine auto injector (generic for Epi-Pen® Auto Injector) epinephrine JR (generic for Epi-Pen® JR Auto Injector) Q® (epinephrine) Auto Injector as Non-Preferred jector) and epinephrine JR (generic for Epi-Pen® JR Auto Injector) from Non-Preferred to Preferred ESTROGEN AGENTS, COMBINATIONS Non-Preferred Bijuva® Capsule
inephrine auto injector (generic for Epi-Pen® Auto Injector) inephrine JR (generic for Epi-Pen® JR Auto Injector) <u>Add</u> Auvi-Q <u>Move</u> epinephrine auto injector (generic for Epi-Pen® Auto Inj ctivella® Tablet mabelz <sup>w</sup> Tablet tradio/norethindrone tablet (generic for Activella®) avolv <sup>™</sup> Tablet uela® (branded generic for FemHRT®) invey <sup>®</sup> / Lo (branded generic for Activella®) rethindrone-ethinyl estradiol (generic for FemHRT®) emphase® Tablet	epinephrine auto injector (generic for Adrenaclick®) Symjepi <sup>™</sup> Injection epinephrine auto injector (generic for Epi-Pen® Auto Injector) epinephrine JR (generic for Epi-Pen® JR Auto Injector) Q® (epinephrine) Auto Injector as Non-Preferred jector) and epinephrine JR (generic for Epi-Pen® JR Auto Injector) from Non-Preferred to Preferred ESTROGEN AGENTS, COMBINATIONS Non-Preferred Bijuva® Capsule
inephrine auto injector (generic for Epi-Pen® Auto Injector) inephrine JR (generic for Epi-Pen® JR Auto Injector) <u>Add</u> Auvi-Q <u>Move</u> epinephrine auto injector (generic for Epi-Pen® Auto Inj ctivella® Tablet mabelz <sup>w</sup> Tablet tradiol/norethindrone tablet (generic for Activella®) avolv <sup>38</sup> Tablet metel® (tranded generic for FemHRT®) innvey® / Lo (branded generic for Activella®)	epinephrine auto injector (generic for Adrenaclick®) Symjepi <sup>™</sup> Injection epinephrine auto injector (generic for Epi-Pen® Auto Injector) epinephrine JR (generic for Epi-Pen® JR Auto Injector) Q® (epinephrine) Auto Injector as Non-Preferred jector) and epinephrine JR (generic for Epi-Pen® JR Auto Injector) from Non-Preferred to Preferred ESTROGEN AGENTS, COMBINATIONS Non-Preferred Bijuva® Capsule
inephrine auto injector (generic for Epi-Pen® Auto Injector) inephrine JR (generic for Epi-Pen® JR Auto Injector) <u>Add</u> Auvi-Q <u>Move</u> epinephrine auto injector (generic for Epi-Pen® Auto Inj civella® Tablet mabelz <sup>w</sup> Tablet tradio/norethindrone tablet (generic for Activella®) avolv <sup>™</sup> Tablet uela® (branded generic for FemHRT®) invey® / Lo (branded generic for Activella®) rethindrone-ethinyl estradiol (generic for FemHRT®) emphase® Tablet	epinephrine auto injector (generic for Adrenaclick®) Symjepi <sup>™</sup> Injection epinephrine auto injector (generic for Epi-Pen® Auto Injector) epinephrine JR (generic for Epi-Pen® JR Auto Injector) Q® (epinephrine JR (generic for Epi-Pen® JR Auto Injector) from Non-Preferred to Preferred jector) and epinephrine JR (generic for Epi-Pen® JR Auto Injector) from Non-Preferred to Preferred ESTROGEN AGENTS, COMBINATIONS ESTROGEN AGENTS, COMBINATIONS Prefest® Tablet
inephrine auto injector (generic for Epi-Pen® Auto Injector)  inephrine JR (generic for Epi-Pen® JR Auto Injector) <u>Add</u> Auvi-Q <u>Move</u> epinephrine auto injector (generic for Epi-Pen® Auto Inj <u>tradiologue epinephrine auto injector (generic for Epi-Pen® Auto Inj</u> <u>tradiologue epinephrine auto injector (generic for Epi-Pen® Auto Inj</u> <u>tradiologue epinephrine auto injector (generic for Epi-Pen® Auto Inj</u> <u>tradiologue epinephrine auto injector (generic for Epi-Pen® Auto Inj</u> <u>tradiologue epinephrine auto injector (generic for Epi-Pen® Auto Inj</u> <u>tradiologue epinephrine auto injector (generic for Epi-Pen® Auto Inj</u> <u>tradiologue epinephrine auto injector (generic for FenHRT®)</u> imvey® / Lo (branded generic for Activella®)  rethindron-ethinyl estradiol (generic for FemHRT®)  emphase® Tablet	epinephrine auto injector (generic for Adrenaclick®) Symjepi <sup>™</sup> Injection epinephrine auto injector (generic for Epi-Pen® Auto Injector) epinephrine JR (generic for Epi-Pen® JR Auto Injector) Q® (epinephrine) Auto Injector as Non-Preferred jector) and epinephrine JR (generic for Epi-Pen® JR Auto Injector) from Non-Preferred to Preferred ESTROGEN AGENTS, COMBINATIONS Non-Preferred Bijuva® Capsule
inephrine auto injector (generic for Epi-Pen® Auto Injector)  inephrine JR (generic for Epi-Pen® JR Auto Injector) <u>Add</u> Auvi-Q <u>Move</u> epinephrine auto injector (generic for Epi-Pen® Auto Inj <u>tradiologue epinephrine auto injector (generic for Epi-Pen® Auto Inj</u> <u>tradiologue epinephrine auto injector (generic for Epi-Pen® Auto Inj</u> <u>tradiologue epinephrine auto injector (generic for Epi-Pen® Auto Inj</u> <u>tradiologue epinephrine auto injector (generic for Epi-Pen® Auto Inj</u> <u>tradiologue epinephrine auto injector (generic for Epi-Pen® Auto Inj</u> <u>tradiologue epinephrine auto injector (generic for Epi-Pen® Auto Inj</u> <u>tradiologue epinephrine auto injector (generic for FenHRT®)</u> imvey® / Lo (branded generic for Activella®)  rethindron-ethinyl estradiol (generic for FemHRT®)  emphase® Tablet	epinephrine auto injector (generic for Adrenaclick®) Symjepi <sup>™</sup> Injection epinephrine auto injector (generic for Epi-Pen® Auto Injector) epinephrine JR (generic for Epi-Pen® JR Auto Injector) Q® (epinephrine JR (generic for Epi-Pen® JR Auto Injector) from Non-Preferred to Preferred jector) and epinephrine JR (generic for Epi-Pen® JR Auto Injector) from Non-Preferred to Preferred ESTROGEN AGENTS, COMBINATIONS ESTROGEN AGENTS, COMBINATIONS Prefest® Tablet
inephrine auto injector (generic for Epi-Pen® Auto Injector) inephrine JR (generic for Epi-Pen® JR Auto Injector) <u>Add</u> Auvi-Q <u>Move</u> epinephrine auto injector (generic for Epi-Pen® Auto Inj ctivella® Tablet mabelz™ Tablet tradio/norethindrone tablet (generic for Activella®) avolv™ Tablet tel® (branded generic for Activella®) invey® / Lo (branded generic for FemHRT®) rethindrone-ethinyl estradiol (generic for FemHRT®) rethindrone-ethinyl estradiol (generic for FemHRT®) emphase® Tablet empro® Tablet	epinephrine auto injector (generic for Adrenaclick®) Symjepi <sup>™</sup> Injection epinephrine auto injector (generic for Epi-Pen® Auto-Injector) epinephrine JR (generic for Epi-Pen® JR Auto-Injector) Q® (epinephrine JR (generic for Epi-Pen® JR Auto Injector) from Non-Preferred to Preferred gector) and epinephrine JR (generic for Epi-Pen® JR Auto Injector) from Non-Preferred to Preferred ESTROGEN AGENTS, COMBINATIONS Non-Preferred Bijuva® Capsule Prefest® Tablet
inephrine auto injector (generic for Epi-Pen® Auto Injector) inephrine JR (generic for Epi-Pen® JR Auto Injector) <u>Add</u> Auvi-Q <u>Move</u> epinephrine auto injector (generic for Epi-Pen® Auto Inj Preferred ctivella® Tablet mabelz** Tablet tradio/norethindrone tablet (generic for Activella®) avolv <sup>18</sup> Tablet mels® (pranded generic for Activella®) imvey® /Lo (branded generic for Activella®) rethindrone-ethinyl estradiol (generic for FemHRT®) rethindrone-ethinyl estradiol (generic for FemHRT®) mephas@ Tablet empra® Tablet empra® Tablet mephas@ Tablet mephas@ Tablet empra® Tablet	epinephrine auto injector (generic for Adrenaclick®) Symjepi <sup>™</sup> Injection epinephrine auto injector (generic for Epi-Pen® Auto-Injector) epinephrine JR (generic for Epi-Pen® JR Auto-Injector) Q® (epinephrine JR (generic for Epi-Pen® JR Auto Injector) from Non-Preferred to Preferred jector) and epinephrine JR (generic for Epi-Pen® JR Auto Injector) from Non-Preferred to Preferred ESTROGEN AGENTS, COMBINATIONS Non-Preferred Bijuva® Capsule Prefest® Tablet Prefest® Tablet PROGESTATIONAL AGENTS
inephrine auto Injector (generic for Epi-Pen® Auto Injector)  inephrine JR (generic for Epi-Pen® JR Auto Injector) <u>Add</u> Auvi-Q <u>Move</u> epinephrine auto injector (generic for Epi-Pen® Auto Inj  ctivella® Tablet  radiol/norethindrone tablet (generic for Activella®) avolv <sup>10</sup> Tablet ntell® (tranded generic for Activella®) avolv <sup>10</sup> Tablet ntell® (tranded generic for Activella®) arethindrone-ethinyl estradiol (generic for FemHRT®) emphase® Tablet  Preferred  Preferred  Preferred  Preferred  Preferred  Preferred	epinephrine auto injector (generic for Adrenaclick®) Symjepi <sup>™</sup> Injection epinephrine auto injector (generic for Epi-Pen® Auto-Injector) epinephrine JR (generic for Epi-Pen® JR Auto-Injector) Q® (epinephrine JR (generic for Epi-Pen® JR Auto Injector) from Non-Preferred to Preferred gector) and epinephrine JR (generic for Epi-Pen® JR Auto Injector) from Non-Preferred to Preferred ESTROGEN AGENTS, COMBINATIONS Non-Preferred Bijuva® Capsule Prefest® Tablet
inephrine auto injector (generic for Epi-Pen® Auto Injector) inephrine JR (generic for Epi-Pen® JR Auto Injector) <u>Add</u> Auvi-Q <u>Move</u> epinephrine auto injector (generic for Epi-Pen® Auto Inj Preferred ctivella® Tablet mabelz** Tablet tradio/norethindrone tablet (generic for Activella®) avolv <sup>18</sup> Tablet mels® (pranded generic for Activella®) imvey® /Lo (branded generic for Activella®) rethindrone-ethinyl estradiol (generic for FemHRT®) rethindrone-ethinyl estradiol (generic for FemHRT®) mephas@ Tablet empra® Tablet empra® Tablet mephas@ Tablet mephas@ Tablet mephas@ Tablet empra® Tablet	epinephrine auto injector (generic for Adrenaclick <sup>®</sup> ) Symjepi <sup>15</sup> Injection epinephrine auto injector (generic for Epi-Pen® Auto-Injector) epinephrine IR (generic for Epi-Pen® JR Auto-Injector) Q <sup>®</sup> (epinephrine JR (generic for Epi-Pen® JR Auto Injector) from Non-Preferred to Preferred ESTROGEN AGENTS, COMBINATIONS ESTROGEN AGENTS, COMBINATIONS Prefest® Tablet Prefest® Tablet PROGESTATIONAL AGENTS Non-Preferred

	TS, ORAL / TRANSDERMAL
Preferred Climara® Pro Patch	Non-Preferred Climara <sup>®</sup> Patch
CombiPatch <sup>®</sup>	Divigel <sup>®</sup> Gel Packet
estradiol patch (generic for Climara <sup>®</sup> , Menostar <sup>®</sup> , Vivelle-Dot <sup>®</sup> )	Dott <sup>™</sup> Patch
estradiol tablet (generic for Estrace <sup>®</sup> )	Duavee® Tablet
Evamist <sup>®</sup> Spray	Elestrin <sup>®</sup> Gel
Menest <sup>®</sup> Tablet	Estrace <sup>®</sup> Tablet
Premarin® Tablet	estradiol gel packet (generic for Divigel®)
	Lyllana <sup>™</sup> Patch
	Menostar <sup>®</sup> Patch Minivelle <sup>®</sup> Patch
	Vivelle-Dot <sup>®</sup> Patch
Add new to market product estradiol g	el packet (generic for Divigel®) as Non-Preferred
ESTROGEN AGEN	S, VAGINAL PREPARATIONS
Preferred	Non-Preferred
Estring <sup>®</sup> Vaginal Ring	Estrace <sup>®</sup> Cream
Premarin <sup>®</sup> Vaginal Cream	estradiol vaginal cream / tablet (generic for Estrace®)
Vagifem® Vaginal Tablet	Femring® Vaginal Ring
	Imvexxy® Vaginal Inserts Yuvafem® Vaginal Tablet
No recommendatio	ns. Class open for comments.
GLUCOCORT	ICOID STEROIDS, ORAL
Preferred	Non-Preferred
budesonide EC capsule (generic for Entocort <sup>®</sup> EC)	Alkindi <sup>®</sup> Sprinkle Capsule
dexamethasone elixir / tablet (generic for Decadron®)	Cortef <sup>®</sup> Tablet
dexamethasone solution (generic for Concedix®)	cortisone tablet (generic for Patisone®)
hydrocortisone tablet (generic for Cortef <sup>®</sup> )	dexamethasone tablet dosepack
methylprednisolone 4mg dosepack / tablet (generic for Medrol <sup>®</sup> ) prednisolone sodium phosphate solution (generic for PediaPred <sup>®</sup> , OraPred <sup>®</sup> , Veripred <sup>®</sup> )	dexamethasone Intensol <sup>®</sup> Drops Emflaza <sup>®</sup> Suspension / Tablet Clinical criteria apply
prednisolone solution (generic for Prelone <sup>®</sup> , Millipred <sup>®</sup> )	Hemady <sup>TM</sup> Tablet
prednisone dose pack (generic for Sterapred <sup>®</sup> )	Medrol® Dose Pack / Tablet
prednisone solution / tablet (generic for Deltasone <sup>®</sup> )	methylprednisolone 8mg / 16mg / 32mg / tablet (generic for Medrol®)
	Millipred <sup>®</sup> Dose Pack / Tablet
	Ortikos <sup>™</sup> Capsule
	prednisolone ODT (generic for Orapred <sup>®</sup> ODT)
	Prednisone Intensol® Concentrated Solution
	Rayos® Tablet
	Taperdex <sup>®</sup> Tablet Tarpeyo <sup>™</sup> Capsule - Exemption for diagnosis of IgA nephropathy
	DULATORS, SYSTEMIC
	pply to all drugs in this class nly one Preferred drug required
Preferred	Non-Preferred
Cosentyx <sup>®</sup> Pen / Syringe	Actemra® ACTPen <sup>TM</sup> / Syringe / Vial
Enbrel <sup>®</sup> Kit / Mini Cartridge / Sureclick <sup>®</sup> Syringe / Syringe / Vial	Amjevita <sup>114</sup> (adalimumab-atto) Syringe / Autoinjector
Humira® Crohn's Starter Pack / Ped. Crohn's Starter Pack / Pen / Psoriasis Starter Pack / Syringe	Arcalyst <sup>®</sup> SQ Syringe
infliximab injection (generic for Remicade <sup>®</sup> )	Avsola <sup>®</sup> Injection
	Cibinqo <sup>™</sup> Tablet (Oral)
	Cimzia® Starter Kit / Syringe Kit / Vial Kit
	Engineer Interation
	Enspryng <sup>™</sup> Injection
	Entyvio <sup>®</sup> Vial
	Entyvio <sup>®</sup> Vial Ilaris <sup>®</sup> Injection
	Entyvio <sup>®</sup> Vial Naris <sup>®</sup> Injection Numya <sup>®</sup> Injection
	Entyvio <sup>®</sup> Vial Ilaris <sup>®</sup> Injection
	Entyvio <sup>®</sup> Vial Ilaris <sup>®</sup> Injection Ilunya <sup>®</sup> Injection Inflectra <sup>™</sup> Vial
	Entyvio <sup>®</sup> Vial Ilaris <sup>®</sup> Injection Ilumya <sup>®</sup> Injection Inflectra <sup>™</sup> Vial infliximab injection (generic for Remiende <sup>®</sup> ) Kevzara <sup>®</sup> Injection Kineref <sup>®</sup> Syringe - Exemption for diagnosis of Neonatal Onset Multi-System Inflammatory Disease
	Entyvio <sup>®</sup> Vial Ilaris <sup>®</sup> Injection Ilumya <sup>®</sup> Injection Inflectra <sup>™</sup> Vial Inflectra <sup>™</sup> Vial Kevzara <sup>®</sup> Injection ( <u>seneric for Remicude<sup>®</sup>)</u> Kevzara <sup>®</sup> Injection Kinere <sup>®</sup> Syringe - Exemption for diagnosis of Neonatal Onset Multi-System Inflammatory Disease Olumiant <sup>®</sup> Tablet
	Entyvio® Vial Ilaris® Injection Ilumya® Injection Inflectra™ Vial infleximab injection (generic for Remicede®) Kevzara® Injection Kevzara® Injection Kimere® Syringe - Exemption for diagnosis of Neonatal Onset Multi-System Inflammatory Disease Olumian® Tablet Orencia® Clickje® / Syringe / Vial
	Entyvio <sup>®</sup> Vial Ilaris <sup>®</sup> Injection Ilarys <sup>®</sup> Injection Ilarys <sup>®</sup> Injection Infletra <sup>™</sup> Vial Infletra <sup>™</sup> Vial Infletra <sup>™</sup> Vial Infletra <sup>™</sup> Vial Kizeret <sup>®</sup> Syringe - Exemption for diagnosis of Neonatal Onset Multi-System Inflammatory Disease Otumint <sup>®</sup> Tablet Oterale <sup>®</sup> Starter Pack / Tablet Oterale <sup>®</sup> Starter Pack / Tablet
	Entyvio® Vial IIars® Injection IIars® Injection IIars® Injection Inflexta™ Vial Inflexta™ Vial Kevzara® Injection Kineret® Syringe - Exemption for diagnosis of Neonatal Onset Multi-System Inflammatory Disease Olumian® Tablet Orenca® Clickjet® / Syringe / Vial Orenca® Clickjet® / Springe / Vial Remicade® Injection
	Entyvio <sup>®</sup> Vial Ilaris <sup>®</sup> Injection Ilumya <sup>®</sup> Injection Inflextra <sup>™</sup> Vial Inflextra <sup>™</sup> Vial Inflextra <sup>®</sup> Syringe - Exemption for diagnosis of Neonatal Onset Multi-System Inflammatory Disease Olumiant <sup>®</sup> Tablet Orencia <sup>®</sup> Clickje <sup>®</sup> / Syringe / Vial Orencia <sup>®</sup> Clickje <sup>®</sup> / Syringe / Vial Otezla <sup>®</sup> Starter Pack / Tablet Remicade <sup>®</sup> Injection Remicede <sup>®</sup> Injection
	Entyvio <sup>®</sup> Vial Iaris <sup>®</sup> Injection Ilamya <sup>®</sup> Injection Ilamya <sup>®</sup> Injection Inflectras <sup>™</sup> Vial Inflectras <sup>™</sup> Vial Inflectras <sup>™</sup> Vial Kevzara <sup>®</sup> Injection Kineret <sup>®</sup> Syringe - Exemption for diagnosis of Neonatal Onset Multi-System Inflammatory Disease Olumiant <sup>®</sup> Tablet Orencia <sup>®</sup> Clickje <sup>®</sup> / Syringe / Vial Orezla <sup>®</sup> Starter Pack / Tablet Remiceda <sup>®</sup> Injection Remides <sup>™</sup> Injection Remides <sup>™</sup> Injection
	Entyvio <sup>®</sup> Vial Ilaris <sup>®</sup> Injection Ilunya <sup>®</sup> Injection Infletra <sup>™</sup> Vial infliximab injection (generic for Remieade <sup>®</sup> ) Kevzra <sup>®</sup> Injection Kineret <sup>®</sup> Syringe - Exemption for diagnosis of Neonatal Onset Multi-System Inflammatory Disease Otumiant <sup>®</sup> Tablet Orencia <sup>®</sup> Clickjet <sup>®</sup> / Syringe / Vial Orencia <sup>®</sup> Clickjet <sup>®</sup> / Syringe / Vial Orencia <sup>®</sup> Starter Pack / Tablet Remicade <sup>®</sup> Injection Remicesia <sup>®</sup> Injection Renflexis <sup>®</sup> Injection Rinvoq <sup>™</sup> ER Tablet Siliq <sup>®</sup> Injection
	Entyvio <sup>®</sup> Vial Iaris <sup>®</sup> Injection Ilamya <sup>®</sup> Injection Ilamya <sup>®</sup> Injection Inflextra <sup>™</sup> Vial Inflextra <sup>™</sup> Vial Inflextra <sup>™</sup> Vial Kevzar <sup>®</sup> Injection Kineret <sup>®</sup> Syringe - Exemption for diagnosis of Neonatal Onset Multi-System Inflammatory Disease Olumiant <sup>®</sup> Tablet Orencia <sup>®</sup> Clickje <sup>®</sup> / Syringe / Vial Orezla <sup>®</sup> Starter Pack / Tablet Remiceda <sup>®</sup> Injection Remidest <sup>®</sup> Injection Remidest <sup>®</sup> Injection
	Entyvio <sup>®</sup> Vial Ilaris <sup>®</sup> Injection Ilarys <sup>®</sup> Injection Ilarys <sup>®</sup> Injection Infletra <sup>™</sup> Vial Infletra <sup>™</sup> Vial Infletra <sup>™</sup> Vial Infletra <sup>™</sup> Vial Kizere <sup>®</sup> Syringe - Exemption for diagnosis of Neonatal Onset Multi-System Inflammatory Disease Otumint <sup>®</sup> Tablet Oterala <sup>®</sup> Starter Pack / Tablet Remicade <sup>®</sup> Injection Renflexis <sup>™</sup> Injection Renflexis <sup>™</sup> Injection Rinveq <sup>®</sup> ER Tablet Sikliq <sup>®</sup> Injection Sikliq <sup>®</sup> Injection Simponi <sup>®</sup> Aria Vial / Pen Injector / Syringe
	Entyvio <sup>®</sup> Vial         Ilaris <sup>®</sup> Injection         Ilaruny <sup>®</sup> Injection         Inflextra <sup>™</sup> Vial         inflextra <sup>®</sup> Vial         inflextra <sup>®</sup> Syringe - Exemption for diagnosis of Neonatal Onset Multi-System Inflammatory Disease         Olumian <sup>®</sup> Tablet         Orenci <sup>®</sup> Clickje <sup>®</sup> / Syringe / Vial         Otezla <sup>®</sup> Starter Pack / Tablet         Remiceda <sup>®</sup> Injection         Remiceda <sup>®</sup> Injection         Rinkroq <sup>™</sup> ER Tablet         Silu <sup>®</sup> Injection         Silu <sup>®</sup> Injection         Silu <sup>®</sup> Clickje <sup>®</sup> / Syringe         Silu <sup>®</sup> Vial / Pen Injector / Syringe         Skyriza <sup>®</sup> On-Body         Skyriza <sup>®</sup> Pui / Syringe
	Entyvio <sup>®</sup> Vial Ilaris <sup>®</sup> Injection Ilarys <sup>®</sup> Injection Ilarys <sup>®</sup> Injection Infletra <sup>™</sup> Vial Infletra <sup>™</sup> Vial Infletra <sup>™</sup> Vial Infletra <sup>™</sup> Vial Kinere <sup>®</sup> Syringe - Exemption for diagnosis of Neonatal Onset Multi-System Inflammatory Disease Otumiant <sup>®</sup> Tablet Oterala <sup>®</sup> Starter Pack / Tablet Remicade <sup>®</sup> Injection Renflexis <sup>™</sup> Injection Renflexis <sup>™</sup> Injection Simponi <sup>®</sup> Aria Vial / Pen Injector / Syringe Skyrin <sup>®</sup> On-Body Skyrin <sup>®</sup> Vial Styrin <sup>®</sup> Pen / Syringe
	Entyvio <sup>®</sup> Vial         Ilaris <sup>®</sup> Injection         Ilunya <sup>®</sup> Injection         Infletra <sup>™</sup> Vial         Infletra <sup>™</sup> Vial         Infletra <sup>™</sup> Vial         Kizerde <sup>®</sup> Syringe - Exemption for diagnosis of Neonatal Onset Multi-System Inflammatory Disease         Olunina <sup>®</sup> Tablet         Orencia <sup>®</sup> Clickje <sup>®</sup> / Syringe / Vial         Orezla <sup>®</sup> Starter Pack / Tablet         Remicade <sup>®</sup> Injection         Riniveq <sup>™</sup> IR Tablet         Siliq <sup>®</sup> Injection         Siliq <sup>®</sup> Injection <t< td=""></t<>
	Entyvio <sup>®</sup> Vial Ilaris <sup>®</sup> Injection Ilarys <sup>®</sup> Injection Ilarys <sup>®</sup> Injection Inflectra <sup>™</sup> Vial Inflectra <sup>™</sup> Vial Inflectra <sup>™</sup> Vial Inflectra <sup>™</sup> Vial Kinere <sup>®</sup> Syringe - <b>Exemption for diagnosis of Neonatal Onset Multi-System Inflammatory Disease</b> Otumiant <sup>®</sup> Tablet Oterala <sup>®</sup> Starter Pack / Tablet Remiceds <sup>®</sup> Injection Renflectsi <sup>™</sup> Injection Renflectsi <sup>™</sup> Injection Siltsg <sup>®</sup> Pari Svring Pen / Syringe Skyrin <sup>®</sup> On-Body Skyrin <sup>®</sup> Pen / Syringe Sotyktu <sup>®</sup> Tablet

	Tremfya® Injection
	Uplizna <sup>®</sup> Vial
	Xeljanz <sup>®</sup> Tablet / Solution / XR Tablet
Add new to market product Amjevita™ (adalimumab-atto) Syringe / Autoinjector as Non-Preferred <u>Move</u> infliximab injection (generic for Remicade®) from Non-Preferred to Preferred	
	IMMUNOSUPPRESSANTS
Preferred	Non-Preferred
Astagraf <sup>®</sup> XL Capsule	
Azasan <sup>®</sup> Tablet	
azathioprine tablet (generic for Imuran <sup>®</sup> )	
Cellcept <sup>®</sup> Capsule / Suspension / Tablet	
cyclosporine capsule (generic for Sandimmune®)	
cyclosporine modified capsule / solution (generic for Gengraf®, Neoral®)	
Envarsus <sup>®</sup> XR Tablet	
everolimus tablet (generic for Zortress® Tablet)	
Gengraf® Capsule / Solution	
Imuran <sup>®</sup> Tablet	
mycophenolate capsule / suspension / tablet (generic for Cellcept®)	
mycophenolic acid tablet (generic for Myfortic®)	
Myfortic <sup>®</sup> Tablet	
Neoral® Capsule / Solution	
Prograf <sup>®</sup> Capsule / Granule Packet	
Rapamune <sup>®</sup> Solution / Tablet	
Rezurock <sup>™</sup> Tablet	
Sandimmune® Capsule / Solution	
sirolimus tablet / solution (generic for Rapamune® Solution / Tablet)	
tacrolimus capsule (generic for Hecoria®, Prograf®)	
Tavneos® capsule (oral)	
Zortress <sup>®</sup> Tablet	

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trial and failure criteria, clinical criteria (indicated in RED) may also apply. New to market products typically default to Non-Preferred status until

reviewed by the PDL Panel. These drugs are listed as TO BE REVIEWED. Drugs requiring prior authorization, clinical criteria and prior authorization request forms can be found at:

https://www.nctracks.nc.gov/content/public/providers/pharmacy.html More information on the PDL can be found at: https://medicaid.ncdhhs.gov/providers/programs-services/prescription-drugs/outpatient-pharmacy-services

MOVEMENT DISORDERS		
Clinical criteria apply to all drugs in this class		
Preferred	Non-Preferred	
Austedo <sup>®</sup> Tablet	Austedo* XR (deutetrabenazine) Tablet	
Ingrezza <sup>®</sup> Capsule	Xenazine <sup>®</sup> Tablet	
Ingrezza® Initiation Pack		
tetrabenazine tablet		
Add new to market product Austedo® XR (deutetrabenazine) Tablet as Non-Preferred		
HEREDITARY ANGIOEDEMA (HAE) PROPHYLAXIS AGENTS		
Preferred	Non-Preferred	
Haegarda® (C1 Esterase Inhibitor Subcutaneous [Human]) Vial	Cinryze* (C1 Esterase Inhibitor [Human]) Vial	
Orladevo® (berotralstat) Capsule	Takhzvro® (lanadelumab-flyo) Vial / Svringe	

\*New drug category addition\*

Add the following products as Preferred: Haegarda® (C1 Esterase Inhibitor Subcutaneous [Human]) Vial, Orladeyo® (berotralstat) Capsule Add the following products as Non-Preferred: Cinryze<sup>®</sup> (C1 Esterase Inhibitor [Human]) Vial, Takhzyro<sup>®</sup> (lanadelumab-flyo) Vial / Syringe

HEREDITARY ANGIOEDEMA (HAE) TREATMENT AGENTS		
Preferred	Non-Preferred	
Berinert® (C1 Esterase Inhibitor [Human]) Vial	Firazyr <sup>®</sup> (icatibant) Injection	
icatibant injection (generic for Firazyr* Injection)	Ruconest* (C1 esterase inhibitor [recombinant]) Vial	
Kalbitor <sup>®</sup> (ecallantide) Vial		

\*New drug category addition\*

Add the following products as Preferred: Berinert® (C1 Esterase Inhibitor [Human]) Vial, icatibant injection (generic for Firazyr® Injection), Kalbitor® (ecallantide) Vial Add the following products as Non-Preferred: Firazyr® (icatibant) Injection, Ruconest® (C1 esterase inhibitor [recombinant]) Vial

1		
	OPIOID ANTAGONISTS	
Preferred	Non-Preferred	
Kloxxado <sup>™</sup> Nasal Spray		
naloxone ampule / syringe / vial (generic for Narcan <sup>®</sup> )		
naloxone spray (nasal) (Generic (AG) for Narcan <sup>®</sup> Nasal Spray))		
naltrexone (oral)		
Narcan <sup>®</sup> Nasal Spray		
Vivitrol <sup>®</sup> Injection		
Zimhi <sup>™</sup> (injection)		
<u>Removal</u> : naloxone ampule (generic for Narcan®)		
OPIOID DEPENDENCE		
Trial and faith	Clinical criteria apply to all drugs in this class Im or buprenorphine-naloxone SL tablet (generic Suboxone®) required for coverage of non-preferred options	
1 rial and failure of Suboxone® SL fil	nn or ouprenorphine-naioxone 52 taoiet (generic Suboxone® ) required for coverage of non-preferred options	
	order and have initiated treatment with a transmucosal buprenorphine-containing product followed by a dose adjustment period for a minimum of seven days.	
Preferred	Non-Preferred	
buprenorphine-naloxone sl tablet (generic for Suboxone <sup>®</sup> )	buprenorphine sI tablet (generic for Subutex <sup>®</sup> )	
Suboxone® SL Film	buprenorphine-naloxone sl film (generic for Suboxone <sup>®</sup> )	
Sublocade™	Lucemyra® Tablet (oral) - Exemption for diagnosis of opioid withdrawal symptoms	
	Zubsolv <sup>®</sup> Tablet SL	
	SKELETAL MUSCLE RELAXANTS	
Preferred	Non-Preferred	
baclofen tablet (generic for Lioresal $^{\otimes}$ )	Non-Preferred Amrix <sup>®</sup> ER Capsule	
baclofen tablet (generic for Lioresal <sup>®</sup> ) cyclobenzaprine tablet (generic for Flexeril <sup>®</sup> )	Non-Preferred Amitx® ER Capsule baclofen oral solution	
baclofen tablet (generic for Lioresal <sup>®</sup> ) cyclobenzaprine tablet (generic for Flexeril <sup>®</sup> ) methocarbamol tablet (generic for Robaxin <sup>®</sup> )	Non-Preferred           Amrix <sup>®</sup> ER Capsule           baclofen oral solution           baclofen suspension (generic for Flequury <sup>™</sup> )	
baclofen tablet (generic for Lioresal <sup>®</sup> ) cyclobenzaprine tablet (generic for Flexeril <sup>®</sup> )	Non-Preferred           Amix® ER Capsule           baclofen oral solution           baclofen suspension (generic for Fleqsuvy <sup>™</sup> )           chlorzoxazone tablet (generic for Parafon Forte <sup>®</sup> )	
baclofen tablet (generic for Lioresal <sup>®</sup> ) cyclobenzaprine tablet (generic for Flexeril <sup>®</sup> ) methocarbamol tablet (generic for Robaxin <sup>®</sup> )	Non-Preferred           Amrix <sup>®</sup> ER Capsule           baclofen oral solution           baclofen suspension (generic for Flequuyy <sup>™</sup> )           chlorzonzoroz tablet (generic for Parafon Forte <sup>®</sup> )           cyclobenzaprine ER capsule (generic for Amrix <sup>®</sup> ER Capsule)	
baclofen tablet (generic for Lioresal <sup>®</sup> ) cyclobenzaprine tablet (generic for Flexeril <sup>®</sup> ) methocarbamol tablet (generic for Robaxin <sup>®</sup> )	Non-Preferred           Amrix <sup>®</sup> ER Capsule           baclofen oral solution           baclofen suspension (generic for Flequuyy <sup>™</sup> )           chlorzoxazone tablet (generic for Parafon Forte <sup>®</sup> )           cyclobenzaprine ER capsule (generic for Amrix <sup>®</sup> ER Capsule)           Dantrium <sup>®</sup> Capsule / Vial	
baclofen tablet (generic for Lioresal <sup>®</sup> ) cyclobenzaprine tablet (generic for Flexeril <sup>®</sup> ) methocarbamol tablet (generic for Robaxin <sup>®</sup> )	Non-Preferred           Amrix® ER Capsule           baclofen oral solution           baclofen suspension (generic for Flequvy) <sup>®</sup> )           chlorzoazone table( generic for Parafon Forte <sup>®</sup> )           cycloberzzprine ER capsule (generic for Amrix® ER Capsule)           Dantrium® Capsule / Vial           dantrolene sodium capsule (generic for Dantrium <sup>®</sup> )	
baclofen tablet (generic for Lioresal <sup>®</sup> ) cyclobenzaprine tablet (generic for Flexeril <sup>®</sup> ) methocarbamol tablet (generic for Robaxin <sup>®</sup> )	Non-Preferred           Amrix® ER Capsule           baclofen oral solution           baclofen suspension (generic for Fleqsury®)           chlorzoazone tablet (generic for Parafon Forte®)           cyclobenzaprine ER capsule (generic for Amrix® ER Capsule)           Dantrium® Capsule / Vial           dantrolene sodium capsule (generic for Dantrium®)           Fexmid® Tablet	
baclofen tablet (generic for Lioresal <sup>®</sup> ) cyclobenzaprine tablet (generic for Flexeril <sup>®</sup> ) methocarbamol tablet (generic for Robaxin <sup>®</sup> )	Non-Preferred           Amrix <sup>®</sup> ER Capsule           baclofen oral solution           baclofen suspension (generic for Flequavy <sup>®</sup> )           chlorzoxazone tablet (generic for Parafon Forte <sup>®</sup> )           cyclobenzaprine ER capsule (generic for Amrix <sup>®</sup> ER Capsule)           Dantrium <sup>®</sup> Capsule / Vial           dantrolene sodium capsule (generic for Dantrium <sup>®</sup> )           Fexnud <sup>®</sup> Tablet           Flequary <sup>®</sup> Suspension	
baclofen tablet (generic for Lioresal <sup>®</sup> ) cyclobenzaprine tablet (generic for Flexeril <sup>®</sup> ) methocarbamol tablet (generic for Robaxin <sup>®</sup> )	Non-Preferred           Amrix <sup>®</sup> ER Capsule           baclofen oral solution           baclofen suspension (generic for Flequuyy <sup>m</sup> )           chlorzozazone tablet (generic for Parafon Forte <sup>®</sup> )           cyclobenzaprine ER capsule (generic for Amrix <sup>®</sup> ER Capsule)           Dantrium <sup>®</sup> Capsule / Vial           dantrolene sodium capsule (generic for Dantrium <sup>®</sup> )           Fexmid <sup>®</sup> Tablet           Elequavy <sup>®</sup> Suspension           Lorzone <sup>®</sup> Tablet	
baclofen tablet (generic for Lioresal <sup>®</sup> ) cyclobenzaprine tablet (generic for Flexeril <sup>®</sup> ) methocarbamol tablet (generic for Robaxin <sup>®</sup> )	Non-Preferred           Amrix <sup>®</sup> ER Capsule           baclofen oral solution           baclofen suspension (generic for Flequary <sup>™</sup> )           chlorzoxzone tablet (generic for Parafon Forte <sup>®</sup> )           cyclobenzaprine ER capsule (generic for Amrix <sup>®</sup> ER Capsule)           Dantrium <sup>®</sup> Capsule / Vial           dantrolene sodium capsule (generic for Dantrium <sup>®</sup> )           Fexmid <sup>®</sup> Tablet           Flequary <sup>™</sup> Suspension           Lorzone <sup>®</sup> Tablet           Lyvispah <sup>®</sup> Granule Packet (10 mg)	
baclofen tablet (generic for Lioresal <sup>®</sup> ) cyclobenzaprine tablet (generic for Flexeril <sup>®</sup> ) methocarbamol tablet (generic for Robaxin <sup>®</sup> )	Non-Preferred           Amrix® ER Capsule           baclofen oral solution           baclofen suspension (generic for Plequvy")           chlorzoazone tablet (generic for Parafon Forte®)           cycloherzaprine ER capsule (generic for Amrix® ER Capsule)           Dantrium® Capsule / Vial           dantrolene sodium capsule (generic for Dantrium®)           Fexmid® Tablet           Fleqsury™ Suspension           Lozzon® Tablet           Lyvispah® Granule Packet (10 mg)           metaxalone tablet (generic for Skelaxin®)	
baclofen tablet (generic for Lioresal <sup>®</sup> ) cyclobenzaprine tablet (generic for Flexeril <sup>®</sup> ) methocarbamol tablet (generic for Robaxin <sup>®</sup> )	Non-Preferred           Amrix <sup>®</sup> ER Capsule           baclofen oral solution           baclofen suspension (generic for Flequavy <sup>™</sup> )           chlorzowazone tablet (generic for Parafon Forte <sup>®</sup> )           cyclobenzaprine ER capsule (generic for Amrix <sup>®</sup> ER Capsule)           Dantrium <sup>®</sup> Capsule / Vial           dantrolene sodium capsule (generic for Dantrium <sup>®</sup> )           Fexnud <sup>®</sup> Tablet           Flequary <sup>™</sup> Suspension           Lorzone <sup>®</sup> Tablet           Lyvispal <sup>®</sup> Granule Packet (10 mg)           metazalone tablet (generic for Skelaxin <sup>®</sup> )           Norgesic <sup>®</sup> (orphenadrine/aspirin/caffeine) Tablet	
baclofen tablet (generic for Lioresal <sup>®</sup> ) cyclobenzaprine tablet (generic for Flexeril <sup>®</sup> ) methocarbamol tablet (generic for Robaxin <sup>®</sup> )	Non-Preferred           Amrix <sup>®</sup> ER Capsule           baclofen oral solution           baclofen suspension (generic for Flequvy) <sup>™</sup> )           chlorzozzoro tablet (generic for Parafon Forte <sup>®</sup> )           cyclobenzaprine ER capsule (generic for Amrix <sup>®</sup> ER Capsule)           Dattrium <sup>®</sup> Capsule / Vial           dantrolene sodium capsule (generic for Dantrium <sup>®</sup> )           Fexmid <sup>®</sup> Tablet           Requivy <sup>™</sup> Suspension           Lorzone <sup>®</sup> Tablet           Lyvisph <sup>®</sup> Granule Packet (10 mg)           metaxalone tablet (generic for Skelaxin <sup>®</sup> )           Norgesic <sup>™</sup> Forte Tablet	
baclofen tablet (generic for Lioresal <sup>®</sup> ) cyclobenzaprine tablet (generic for Flexeril <sup>®</sup> ) methocarbamol tablet (generic for Robaxin <sup>®</sup> )	Non-Preferred           Amrix <sup>®</sup> ER Capsule           baclofen oral solution           baclofen suspension (generic for Flequavy <sup>™</sup> )           chlorzowazone tablet (generic for Parafon Forte <sup>®</sup> )           cyclobenzaprine ER capsule (generic for Amrix <sup>®</sup> ER Capsule)           Dantrium <sup>®</sup> Capsule / Vial           dantrolene sodium capsule (generic for Dantrium <sup>®</sup> )           Fexnud <sup>®</sup> Tablet           Flequary <sup>™</sup> Suspension           Lorzone <sup>®</sup> Tablet           Lyvispal <sup>®</sup> Granule Packet (10 mg)           metazalone tablet (generic for Skelaxin <sup>®</sup> )           Norgesic <sup>®</sup> (orphenadrine/aspirin/caffeine) Tablet	
baclofen tablet (generic for Lioresal <sup>®</sup> ) cyclobenzaprine tablet (generic for Flexeril <sup>®</sup> ) methocarbamol tablet (generic for Robaxin <sup>®</sup> )	Non-Preferred           Amrix <sup>®</sup> ER Capsule           baclofen oral solution           baclofen suspension (generic for Flequary <sup>™</sup> )           chlorzoxzone tablet (generic for Parafon Forte <sup>®</sup> )           cyclobenzaprine ER capsule (generic for Amrix <sup>®</sup> ER Capsule)           Dantrium <sup>®</sup> Capsule / Vial           dantrolene sodium capsule (generic for Dantrium <sup>®</sup> )           Fexmid <sup>®</sup> Tablet           Flequary <sup>™</sup> Suspension           Lorzone <sup>®</sup> Tablet           Lyvispah <sup>®</sup> Granule Packet (10 mg)           metaxalone tablet (generic for Skelaxi <sup>®</sup> )           Norgesic <sup>®</sup> Torphenadrine/aspirin/caffeine) Tablet           Norgesic <sup>®</sup> iorphenadrine/aspirin/caffeine) Tablet           orphenadrine-aspirin-caffeine tablet           orphenadrine-aspirin-caffeine tablet           orphenadrine-citrate tablet / vial (generic for Norflex <sup>®</sup> )	
baclofen tablet (generic for Lioresal <sup>®</sup> ) cyclobenzaprine tablet (generic for Flexeril <sup>®</sup> ) methocarbamol tablet (generic for Robaxin <sup>®</sup> )	Non-Preferred           Amrix <sup>®</sup> ER Capsule           baclofen oral solution           baclofen suspension (generic for Flequvy) <sup>m</sup> )           chlorzozzoro tablet (generic for Parafon Forte <sup>®</sup> )           cyclobenzaprine ER capsule (generic for Amrix <sup>®</sup> ER Capsule)           Dantrium <sup>®</sup> Capsule / Vial           dantrolene sodium capsule (generic for Dantrium <sup>®</sup> )           Fexnid <sup>®</sup> Tablet           Flequvy <sup>®</sup> Suspension           Lorzone <sup>®</sup> Tablet           Lyvispah <sup>®</sup> Granule Packet (10 mg)           metazalone tablet (generic for Skelaxin <sup>®</sup> )           Norgessic <sup>®</sup> Forte Tablet           Norgessic <sup>®</sup> Forte Tablet           orphenadrine-sapirin-caffeine tablet	
baclofen tablet (generic for Lioresal <sup>®</sup> ) cyclobenzaprine tablet (generic for Flexeril <sup>®</sup> ) methocarbamol tablet (generic for Robaxin <sup>®</sup> )	Non-Preferred           Amrix <sup>®</sup> ER Capsule           baclofen oral solution           baclofen suspension (generic for Flequavy <sup>™</sup> )           chlorzoxzoro tablet (generic for Parafon Forte <sup>®</sup> )           cyclobenzaprine ER capsule (generic for Amrix <sup>®</sup> ER Capsule)           Dantrium <sup>®</sup> Capsule / Vial           dantrolene sodium capsule (generic for Amrix <sup>®</sup> ER Capsule)           Dantrium <sup>®</sup> Capsule / Vial           dantrolene sodium capsule (generic for Dantrium <sup>®</sup> )           Fexnud <sup>®</sup> Tablet           Fleqsury <sup>™</sup> Suspension           Lorzone <sup>®</sup> Tablet           Lyvispal <sup>®</sup> Granule Packt (10 mg)           metaxalone tablet (generic for Skelaxin <sup>®</sup> )           Norgesic <sup>®</sup> (orphenadrine/aspirin/caffeine) Tablet           Norgesic <sup>®</sup> Forte Tablet           orphenadrine-aspirin-caffeine tablet           orphenadrine Forte (or Norflex <sup>®</sup> )           Orphengesic <sup>®</sup> Forte (or Norflex <sup>®</sup> )           Orphengesic <sup>®</sup> Forte (orphenadrine/aspirin/caffeine) Tablet           Robaxin <sup>®</sup> Vial	
baclofen tablet (generic for Lioresal <sup>®</sup> ) cyclobenzaprine tablet (generic for Flexeril <sup>®</sup> ) methocarbamol tablet (generic for Robaxin <sup>®</sup> )	Non-Preferred           Amrix <sup>®</sup> ER Capsule           baclofen oral solution           baclofen suspension (generic for Flequary <sup>™</sup> )           chlorzoxazone tablet (generic for Parafon Forte <sup>®</sup> )           cyclobenzaprine ER capsule (generic for Amrix <sup>®</sup> ER Capsule)           Dantrium <sup>®</sup> Capsule / Vial           dantrolene sodium capsule (generic for Dantrium <sup>®</sup> )           Fexmid <sup>®</sup> Tablet           Flequary <sup>™</sup> Suspension           Lozzone <sup>®</sup> Tablet           Lyvispah <sup>®</sup> Granule Packet (10 mg)           metaxalone tablet (generic for Skelaxin <sup>®</sup> )           Norgesic <sup>®</sup> Forte Tablet           orphenadrine-aspirin-caffeine 1 Tablet           orphenadrine cirtat tablet / vial (generic for Norflex <sup>®</sup> )           Orphengesice <sup>®</sup> Forte (orphenadrine/aspirin/caffeine) Tablet	

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https://www.nctracks.nc.gov/content/public/providers/pharmacy.html More information on the PDL can be found at: https://medicaid.ncdhhs.gov/providers/programs-services/prescription-drugs/outpatient-pharmacy-services

Zanaflex® Capsule / Tablet

### Add new to market product baclofen suspension (generic for Fleqsuvy™) as Non-Preferred

Add Norgesic™ (orphenadrine/aspirin/caffeine) Tablet, orphenadrine-aspirin-caffeine tablet, and Orphengesic® Forte (orphenadrine/aspirin/caffeine) Tablet as Non-Preferred

DISPOSABLE INSULIN DELIVERY DEVICES		
Preferred	Non-Preferred	
Omnipod DASH <sup>®</sup>		
Omnipod DASH® Kit		
Omnipod 5®		
Omnipod 5® Kit		

### Effective DATE: Draft for July 13, 2023 Meeting Trial and failure of two Preferred drugs are required unless only one Preferred option is listed or is otherwise indicated. Not all therapeutic drug classes are included on the PDL. All drugs in the classes not included are considered Preferred. In addition to trial and failure criteria, clinical criteria (indicated in RED) may also apply. New to market products typically default to Non-Preferred status until reviewed by the PDL Panel. These drugs are listed as TO BE REVIEWED. Drugs requiring prior authorization, clinical criteria and prior authorization request forms can be found at: https://www.nctracks.nc.gov/content/public/providers/pragrams-services/prescription-drugs/outpatient-pharmacy-services

DIABETIC CONTINUOUS GLUCOSE MONITOR SUPPLIES		
Clinical criteria apply to all items in this class		
Continuous Glucose Monit	or Transmitters / Receivers / Readers	
Preferred	Non-Preferred	
Dexcom G6 <sup>®</sup> Transmitter / Receiver	Freestyle Libre <sup>™</sup> 14 day Reader	
Dexcom G7 <sup>®</sup> Transmitter / Receiver		
Freestyle Libre <sup>™</sup> 2 Reader		
Add new-to-market product Dexcom G7 <sup>®</sup> Transmitter / Receiver as Preferred		
Continuous G	lucose Monitor Sensors	
Preferred	Non-Preferred	
Freestyle Libre <sup>™</sup> 2 Sensor	Freestyle Libre <sup>TM</sup> 14 day Sensor	
Freestyle Libre <sup>™</sup> 3 Sensor		
Dexcom G6 <sup>®</sup> Sensor 3 Pack		
Dexcom G7 <sup>®</sup> Sensor		
Add new-to-market product Dexcom G7 <sup>®</sup> Sensor as Preferred		
DIABETIC SUPPLIES		
N.C. Medicaid only covers, at point of sale, the designated preferred products listed below for blood 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 to the pharmacy point-of-sale system with a prescription. Diabetic supplies, including other brands, can also be submitted under Durable Medical Equipment using the NDC and HCPCS code. Beneficiaries are allowed 1 covered meter every 2 years (730 days). For questions or assistance regarding diabetic supplies for Medicaid Direct members, please call the NC Tracks call center at 1-800-688-6696. <b>*All blood glucose meters are billed using the NC Medicaid Free BIN Meter program. BIN 610524, PCN 1016, Group 40026479, ID 066499643.</b> *		
Meters	Lancing Devices	
ACCU-CHEK <sup>®</sup> Guide Retail care kit * (see above for billing)	ACCU-CHEK <sup>®</sup> Softclix lancing device kit (Blue)	

ACCU-CHEK <sup>®</sup> Guide Retail care kit * (see above for billing)	ACCU-CHEK <sup>®</sup> Softclix lancing device kit (Blue)	
ACCU-CHEK <sup>®</sup> Guide Me Retail care kit * (see above for billing)	ACCU-CHEK® Softclix lancing device kit (Black)	
Test Strips	ACCU-CHEK <sup>®</sup> Multiclix lancing device kit	
ACCU-CHEK® AVIVA PLUS 50 ct test strips	ACCU-CHEK® Fastclix lancing device kit	
ACCU-CHEK® SMARTVIEW 50 ct test strips	Control Solutions	
ACCU-CHEK® Guide 50 ct test strips	ACCU-CHEK® Aviva glucose control solution (2 levels)	
ACCU-CHEK® Guide 100 ct test strips	ACCU-CHEK® Compact Plus clear glucose control solution (2 levels)	
Lancets	ACCU-CHEK® SmartView glucose control solution (1 level)	
ACCU-CHEK® Multiclix 102 ct Lancets	ACCU-CHEK® Guide 2-Level control solution (2-levels)	
ACCU-CHEK® Softclix 100 ct Lancets		
ACCU-CHEK® Fastclix 102 ct Lancets		
Removals: ACCU-CHEK <sup>®</sup> Multiclix 102 ct Lancets, ACCU-CHEK <sup>®</sup> Softclix lancing device kit (Blue), ACCU-CHEK <sup>®</sup> Multiclix lancing device kit, ACCU-CHEK <sup>®</sup> Compact Plus clear glucose control solution (2 levels)		