

North Carolina Division of Medical Assistance
North Carolina Medicaid and Health Choice Preferred Drug List (PDL)

DRAFT

Trial and failure of two preferred drugs are required unless 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.
Drugs requiring prior authorization, clinical criteria and prior authorization request forms can be found at:
www.nctracks.nc.gov/content/public/providers/pharmacy/pa-drugs-criteria-new-format.html
More information on the PDL can be found at: <http://www.ncdhhs.gov/dma/pharmacy/index.htm>

ALZHEIMER'S AGENTS

Preferred

donepezil 5mg, 10mg tablets / ODT (generic for Aricept® / ODT)
Exelon® Patch
memantine tablet / titration pack (generic for Namenda®)
rivastigmine capsules (generic for Exelon®)

Non-Preferred

Aricept® ODT / Tablets
donepezil 23mg tablets (generic for Aricept®)
Exelon® Capsule
galantamine ER capsule / solution / tablet (generic for Razadyne® / ER)
memantine ER (generic for Namenda® XR)
memantine solution (oral) (generic for Namenda® Solution)
Namenda® Titration Pack / XR Capsule / XR Titration Pack
Namenda® Tablet
Namzaric™ Solution (Oral)
rivastigmine (Transderm) (generic for Exelon® Patch)
Razadyne® ER Capsule / Tablet

ANALGESICS

OPIOID ANALGESICS

Long Acting

Clinical criteria apply to all drugs in this class

Preferred

Butrans® Patch
Embeda® ER Capsule
fentanyl patch 12mcg / 25mcg / 50mcg / 75mcg / 100mcg (generic for Duragesic®)
Kadian® Capsule
morphine sulfate ER tablet (generic for MS Contin®)
OxyContin® Tablet

Non-Preferred

Arymo® ER
Avinza® Capsule
Belbuca (Buccal)
buprenorphine patch (generic for Butrans® Patch)
Duragesic® Patch
Exalgo® Tablet
fentanyl patch (37.5 / 62.5 / 87.5mcg dosages)
hydromorphone ER tablet (generic for Exalgo®)
Hysingla® ER Tablet
morphine sulfate ER capsule (generic for Avinza®, Kadian®)
MorphaBond™ ER
MS Contin® Tablet
Nucynta® ER Tablet
oxycodone ER tablet (generic for OxyContin®)
oxymorphone ER tablet
Xartemis® XR Tablet
Xtampza® ER Capsule
Zohydro® Capsule

Orally Disintegrating / Oral Spray Schedule II Opioids

Clinical criteria apply to all drugs in this class

Preferred

Actiq® Lozenge

Non-Preferred

fentanyl citrate lozenge (generic for Actiq®)
Fentora® Buccal Tablet
Abstral® SL Tablet
Subsys® Spray

ANALGESICS

OPIOID ANALGESICS (Continued)

Short Acting Schedule II Opioids

Clinical criteria apply to all drugs in this class

Preferred

Endocet® Tablet (branded generic for Percocet®)
hydrocodone-acetaminophen solution / tablet (generic for Hycet®, Lorcet®, Lortab®, Norco®, Vicodin®)
hydrocodone-ibuprofen tablet (generic for Ibudone®, Reprexain®, Vicoprofen®)
hydromorphone tablet (generic for Dilaudid® Tablet)

Non-Preferred

codeine sulfate solution / tablet
Demerol® Tablet
Dilaudid® Liquid / Tablet
Endodan® Tablet (branded generic for Percodan®)

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

OPIOID ANALGESICS (Continued)

Short Acting Schedule III – IV Analgesic Combinations

Clinical criteria apply to all drugs in this class

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

ANALGESICS

NSAIDS

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Preferred	Non-Preferred
<p>ibuprofen suspension / tablet (generic for Motrin®)</p> <p>indomethacin capsule (generic for Indocin®)</p> <p>ketorolac tablet (generic for Toradol®)</p> <p>meloxicam tablet (generic for Mobic Tablet®)</p> <p>naproxen EC tablet (generic for Naprosyn® EC)</p> <p>naproxen tablet (generic for Naprosyn® Tablet)</p> <p>sulindac tablet (generic for Clinoril®)</p>	<p>Anaprox® Tablet / DS Tablet</p> <p>Arthrotec® Tablet</p> <p>DayPro® Caplet</p> <p>diclofenac potassium tablet (generic for Cataflam®)</p> <p>diclofenac sodium tablet / ER tablet (generic for Voltaren® / XR)</p> <p>diclofenac sodium-misoprostol tablet (generic for Arthrotec®)</p> <p>diflunisal tablet (generic for Dolobid®)</p> <p>EC-Naprosyn® Tablet</p> <p>etodolac capsule / tablet / ER tablet (generic for Lodine® / XL)</p> <p>Feldene® Capsule</p> <p>fenoprofen tablet (generic for Nalfon®)</p> <p>flurbiprofen tablet (generic for Ansaid®)</p> <p>Indocin® Suppository / Suspension</p> <p>indomethacin ER capsule (generic for Indocin SR®)</p> <p>Inflammacin® tablets</p> <p>ketoprofen capsule (generic for Orudis®)</p> <p>ketoprofen ER capsule (generic for Oruvail®)</p> <p>meclofenamate capsule (generic for Meclomen®)</p> <p>mefenamic acid capsule (generic for Ponstel®)</p> <p>Mobic® Tablet</p> <p>nabumetone tablet (generic for Relafen®)</p> <p>Nalfon® Capsule</p> <p>Naprelan® Tablet</p> <p>Naprosyn® Tablet</p> <p>Naprosyn® EC</p> <p>naproxen CR</p> <p>naproxen sodium ER tablet (generic for Naprelan®)</p> <p>naproxen sodium tablet (generic for Anaprox®)</p> <p>naproxen suspension (generic for Naprosyn® Suspension)</p> <p>oxaprozin tablet (generic for DayPro®)</p> <p>piroxicam capsule (generic for Feldene®)</p> <p>Ponstel® Kapseals</p> <p>Sprix® Nasal Spray</p> <p>Tivorbex® capsule</p> <p>tolmetin capsule / tablet (generic for Tolectin®)</p> <p>Vivlodex™</p> <p>Voltaren® XR Tablet</p> <p>Zipsor® Capsule</p> <p>Zorvolex® Capsule</p> <p>meloxicam suspension (generic for Mobic® Oral Suspension) - Exemption for children < 12 years of age</p> <p>Mobic® Suspension</p>
<p style="text-align: center;">Preferred</p> <p>celecoxib capsule (generic for Celebrex®) - Clinical criteria apply</p>	<p style="text-align: center;">Non-Preferred</p> <p>Celebrex® Capsule - Clinical criteria apply</p> <p>Duexis® Tablet</p> <p>Vimovo®</p>

ANALGESICS

NEUROPATHIC PAIN

Preferred	Non-Preferred
<p>duloxetine capsule (generic for Cymbalta®)</p> <p>gabapentin capsule / solution (generic for Neurontin®)</p> <p style="background-color: yellow;">gabapentin tablet (generic for Neurontin® Tablet)</p>	<p>Cymbalta® Capsule</p> <p>Gralise® Starter Pack / Tablet</p> <p>Horizant®</p> <p>Irenka® Capsule</p>

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Lyrica® Capsule / Solution Lyrica® CR Neurontin® Capsule / Solution / Tablet Savella® Tablet / Titration Pack Dermacin RX® PHN PAK lidocaine patch (generic for Lidoderm®) - Clinical criteria apply Lidoderm® Patch - Clinical criteria apply Qutenza® Kit
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ANTICONVULSANTS

CARBAMAZEPINE DERIVATIVES

Patients with a diagnosis of seizure disorder are exempt from trial and failure criteria and may use any carbamazepine product.

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

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

ANTICONVULSANTS

SECOND GENERATION

Patients with a diagnosis of seizure disorder are exempt from trial and failure criteria and may use any second generation product.

Preferred	Non-Preferred
clonazepam tablet (generic for Klonopin®) Diastat® Accudial / Pedi System gabapentin capsule / solution (generic for Neurontin®) gabapentin tablet (generic for Neurontin® Tablet) Gabitril® Tablet lamotrigine chewable / tablet (generic for Lamictal®) levetiracetam tablet / ER tablet / solution (generic for Keppra® / XR) Sabril® Powder Packet Topiragen® Tablet (branded generic for Topamax®) topiramate sprinkle capsule / tablet (generic for Topamax®) zonisamide capsule (generic for Zonegran®)	Banzel® Suspension / Tablet Briviact® Tablet and Solution clonazepam ODT (generic for Klonopin® Wafer) diazepam rectal / system (generic for Diastat® Accudial / Pedi System) Fycompa® Tablet / Kit/Suspension gabapentin tablet (generic for Neurontin® Tablet) Gralise® Starter Pack / Tablet Keppra® Tablet / Solution / XR Tablet Klonopin® Tablet Lamictal® Chewable / ODT / Starter Kit / Tablet / XR / XR Starter Kit / Tablet lamotrigine starter kits (generic for Lamictal®)

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	lamotrigine ER tablet / ODT (generic for Lamictal® XR / ODT) Lyrica® Capsule / Solution Neurontin® Capsule / Solution / Tablet Onfi® Suspension / Tablet Potiga® Tablet Qudexy® XR Capsule Sabril® Tablet Spritam® Tablet tiagabine tablet (generic for Gabitril®) Topamax® Sprinkle Capsule / Tablet topiramate ER capsule (generic for Qudexy®) Trokendi® XR Capsule vigabatrin powder packet (generic for Sabril® Powder Packet) Vimpat® Solution / Starter Kit / Tablet Zonegran® Capsule
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ANTI-INFECTIVES-SYSTEMIC

ANTIBIOTICS

Cephalosporins and Related

Preferred	Non-Preferred
amoxicillin capsule / chewable / suspension / tablet (generic for Amoxil®, Trimox®) amoxicillin-clavulanate chewable / suspension / tablet / XR-tablet (generic for Augmentin® /XR)	amoxicillin-clavulanate chewable / XR tablet (generic for Augmentin® and XR)
cefadroxil capsule / suspension (generic for Duricef®) cefdinir capsule / suspension (generic for Omnicef®) cefepodoxime suspension / tablet (generic for Vantin®) cefprozil suspension / tablet (generic for Cefzil®) Cefitin® Suspension / Tablet cefuroxime tablet (generic for Cefitin®) cephalixin capsule / suspension / tablet (generic for Keflex®) Suprax® Capsule / Chewable / Suspension/ Tablet	Augmentin® Suspension / Tablet / XR Tablet Cedax® Capsule / Suspension cefaclor capsule / suspension / ER tablet (generic for Ceclor® / CD) cefadroxil tablet (generic for Duricef®) cefixime suspension ceftibuten capsule / suspension (generic for Cedax®) cefpodoxime suspension / tablet (generic for Vantin®) Daxbia™ capsules Keflex® Capsule

Lincosamides and Oxazolidinones

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

ANTI-INFECTIVES-SYSTEMIC

ANTIBIOTICS (Continued)

Macrolides and Ketolides

Preferred	Non-Preferred
azithromycin powder packet / suspension / tablet (generic for Zithromax®) clarithromycin suspension / tablet (generic for Biaxin®) E.E.S.® Granules / Filmtab Eryped® Suspension Erythrocin® Filmtab erythromycin EC capsule (generic for Ery-C®) erythromycin filmtab erythromycin es 200mg suspension (generic for E.E.S.® Suspension) — erythromycin es tablet (E.E.S® Filmtab)	Biaxin® Suspension / Tablet clarithromycin ER tablet (generic for Biaxin XL®) erythromycin es 200mg suspension (generic for E.E.S.® Suspension) Ery-Tab® Tablet Ketek® Tablet PCE® Tablet Zithromax® Powder Packet / Suspension / Tablet / Tri-Pak / Z-Pak Zmax® Suspension

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Nitromidazoles	
Preferred	Non-Preferred
metronidazole tablet (generic for Flagyl® Tablet) vancomycin capsule (generic for Vancocin®)	Alinia® Suspension / Tablet Dificid® Tablet Flagyl® Capsule / ER Tablet/ Tablet metronidazole capsule (generic for Flagyl® Capsule) neomycin tablet (generic for Mycifradin®) paromomycin capsule (generic for Humatin®) Solosec™ Tindamax® Tablet tinidazole tablet (generic for Tindamax®) Vancocin® Capsule Xifaxan® Tablet - Exemption for a diagnosis of Hepatic Encephalopathy
Quinolones	
Preferred	Non-Preferred
Cipro® Suspension ciprofloxacin tablets (generic for Cipro®) levofloxacin tablet (generic for Levaquin® Tablet) moxifloxacin tablet (generic for Avelox®)	Avelox® Tablet / ABC Pack Baxdela™ Tablets Cipro® Tablet / XR Tablet ciprofloxacin ER tablet / suspension (generic for Cipro® XR / Suspension) Levaquin® Solution / Tablet levofloxacin solution (generic for Levaquin® Solution) ofloxacin tablet (generic for Floxin®)
ANTI-INFECTIVES-SYSTEMIC	
ANTIBIOTICS (Continued)	
Tetracycline Derivatives	
Preferred	Non-Preferred
doxycycline hyclate capsule / tablet (generic for Vibramycin®, Vibra-Tab®) doxycycline monohydrate 50mg, 100mg capsule (generic for Monodox®) minocycline capsule (generic for Minocin®)	Adoxa® Capsule demeclocycline tablet (generic for Declomycin®) Doryx® DR Tablet Doryx® MPC Tablet doxycycline hyclate DR tablet (generic for Doryx DR®) doxycycline monohydrate 75mg, 150mg capsule (generic for Monodox®, Adoxa®) doxycycline monohydrate 40mg capsules (generic for Oracea® Capsules) doxycycline monohydrate tablets (generic for Adoxa®) minocycline ER tablet (generic for Solodyn® ER) minocycline tablet (generic for Dynacin®) Morgidox® Capsule / Kit Oracea® Capsule Solodyn® ER Tablet - Clinical justification and failure of doxycycline and minocycline required. Limited to 12 week supply. tetracycline capsule (generic for Sumycin®) Vibramycin® Capsules doxycycline suspension (generic for Vibramycin Suspension®) - Exemption for patients < 12 years of age Vibramycin® Suspension / Syrup Ximino™ Capsules
Antifungals	
Preferred	Non-Preferred
clotrimazole troche (generic for Mycelex Troche®)	Ancobon® Capsule

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

Hepatitis B Agents

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

ANTI-INFECTIVES-SYSTEMIC

ANTIVIRALS (Continued)

Hepatitis C Agents

Preferred	Non-Preferred
Copegus® Tablet Moderiba® Dosepack (branded generic for Ribasphere® Ribapak) Moderiba® Tablet (branded generic for Copegus®) Pegasys® Proclick / Syringe ribavirin capsule / tablet (generic for Copegus®, Rebetol®)	Pegasys® Vial Pegintron® Subcutane Injection Ribasphere® Ribapak Ribasphere® Capsule / Tablet (branded generic for Rebetrol) Rebetol® Solution
<p align="center">Clinical criteria apply to all drugs in this class</p> <p>All genotypes without cirrhosis Mavyret™ (8 weeks of therapy)</p> <p>All genotypes with compensated cirrhosis (Child Pugh-A) Mavyret™ (12 weeks of therapy)</p> <p>All genotypes with decompensated cirrhosis Eplclusa® Tablet in combination with ribavirin</p> <p>All genotypes previously treated with an HCV regimen containing an NS5A inhibitor or genotype 1a or 3 infection and have previously been treated with an HCV regimen containing sofosbuvir without an NS5A inhibitor. Vosevi™</p>	Daklinza® Tablet (for genotype 3) - must request Sovaldi® in addition to Daklinza® with a separate PA Harvoni® Tablet Olysio® Capsule Sovaldi® Tablet Technivie™ Dose Pack (for genotype 4) Viekira™ Pak Viekira™ XR Tablet Zepatier® Tablet

Herpes Treatments

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

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

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

Antibiotics, Inhaled

Trial and failure of only one preferred drug required

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

BEHAVIORAL HEALTH

ANTIDEPRESSANTS

Other

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

BEHAVIORAL HEALTH

ANTIDEPRESSANTS (Continued)

Selective Serotonin Reuptake Inhibitor (SSRI)

Preferred	Non-Preferred
citalopram solution / tablet (generic for Celexa®) escitalopram tablet (generic for Lexapro® Tablet) fluoxetine capsule / solution (generic for Prozac®) fluvoxamine tablet (generic for Luvox®) paroxetine tablet (generic for Paxil®) sertraline concentrated solution / tablet (generic for Zoloft®)	Brisdelle® Capsule Celexa® Tablet escitalopram solution (generic for Lexapro® Solution) fluoxetine DR capsules (generic for Prozac® Weekly) fluoxetine tablet (generic for Prozac®) - Exemption for children < 12 years of age fluvoxamine ER capsule (generic for Luvox CR®) Lexapro® Solution / Tablet paroxetine capsule (generic for Brisdelle® Capsule) paroxetine CR tablet (generic for Paxil CR®) Paxil® Suspension / Tablet / CR Tablet Pexeva® Tablet

North Carolina Division of Medical Assistance
North Carolina Medicaid and Health Choice Preferred Drug List (PDL)

DRAFT

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www.nctracks.nc.gov/content/public/providers/pharmacy/pa-drugs-criteria-new-format.html
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Prozac® Pulvule / Weekly Capsule
Sarafem® Tablet
Zoloft® Solution / Tablet

ANTIHYPERKINESIS / ADHD

Preferred

Aptensio® XR
Adderall® XR Capsule
amphetamine salt combo tablets (generic for Adderall®)
atomoxetine capsule (generic for Strattera® Capsule)
~~Concerta® Tablet~~
Daytrana® Patch
dextroamphetamine tablet (generic for Dexedrine®)
Focalin® Tablet / XR Capsule
guanfacine ER tablet (generic for Intuniv®)
Kapvay® Tablet
Methylin® Solution
methylphenidate tablets (generic for Methylin®, Ritalin®)
Quillichew® ER Oral
Quillivant® XR Suspension
~~Ritalin® Tablet~~
Vyvanse® Capsule / Chewable Tablet

Non-Preferred

Adderall® Tablet (**GENERIC PRODUCT PER FDA**)
Adzenys™ XR ODT / ER suspension
amphetamine salt combo XR capsules (generic for Adderall XR)
clonidine ER tablet (generic for Kapvay®)
Concerta® Tablet
Cotempla™ XR ODT
Dexedrine® Tablet / Spansules
dexmethylphenidate tablet / ER capsules (generic for Focalin® / XR)
Desoxyn® Tablet
dextroamphetamine solution (generic for ProCentra®)
dextroamphetamine ER capsule (generic for Dexedrine® Spansules)
Dyanavel® XR
Evekeo® Tablet
Intuniv® Tablet
methamphetamine tablet (generic for Desoxyn®)
Methylin® Chewable
methylphenidate CD capsules (generic for Metadate® CD)
methylphenidate chewable / solution (generic for Methylin®)
methylphenidate ER tablets
methylphenidate LA capsules (generic for Ritalin® LA)
Mydayis® ER Capsule
ProCentra® Solution
Ritalin® LA Capsule
Ritalin® Tablet
Strattera® Capsule
Zenedi® Tablet

ATYPICAL ANTIPSYCHOTICS

Injectable Long Acting

Trial and failure of only one preferred drug required

Preferred

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

Non-Preferred

Aristada® Syringe

BEHAVIORAL HEALTH

ATYPICAL ANTIPSYCHOTICS

Oral

Trial and failure of only one preferred drug required

Preferred

Abilify® Discmelt
aripiprazole Tablet / Solution (generic for Abilify®)
clozapine tablet (generic for Clozaril®)
FazaClo® ODT
Latuda® Tablet

Non-Preferred

Abilify® Tablet
aripiprazole ODT (generic for Abilify®)
clozapine ODT (generic for FazaClo®)
Clozaril® Tablet
Fanapt® Titration Pack

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

ACE INHIBITORS

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

ACE INHIBITOR CALCIUM CHANNEL BLOCKER COMBINATIONS

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

ACE INHIBITOR DIURETIC COMBINATIONS

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

CARDIOVASCULAR

ANGIOTENSIN II RECEPTOR BLOCKERS

Preferred	Non-Preferred
Diovan® Tablet	Atacand® Tablet

North Carolina Division of Medical Assistance
North Carolina Medicaid and Health Choice Preferred Drug List (PDL)

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losartan tablet (generic for Cozaar®) valsartan tablet (generic for Diovan®)	Avapro® Tablet Benicar® Tablet candesartan tablet (generic for Atacand®) Cozaar® Tablet Diovan® Tablet Edarbi® Tablet eprosartan tablet (generic for Teveten®) irbesartan tablet (generic for Avapro®) Micardis® Tablet telmisartan tablet (generic for Micardis®) valsartan tablet (generic for Diovan®)
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ANGIOTENSIN II RECEPTOR BLOCKER COMBINATIONS

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

ANGIOTENSIN II RECEPTOR BLOCKER DIURETIC COMBINATIONS

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

ANGIOTENSIN II RECEPTOR-NEPRILYSIN BLOCKER COMBINATIONS

Preferred	Non-Preferred
Entresto® Clinical Criteria Apply	

ANTI-ARRHYTHMICS

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

CARDIOVASCULAR

BETA BLOCKERS

North Carolina Division of Medical Assistance
North Carolina Medicaid and Health Choice Preferred Drug List (PDL)

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

BETA BLOCKER DIURETIC COMBINATION

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

BILE ACID SEQUESTRANTS

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

CARDIOVASCULAR

CHOLESTEROL LOWERING AGENTS

Preferred	Non-Preferred
atorvastatin tablet (generic for Lipitor®) ezetimibe (generic for Zetia®) lovastatin tablet (generic for Mevacor®) pravastatin tablet (generic for Pravachol®) simvastatin tablet (generic for Zocor®) rosuvastatin tablet (generic for Crestor®) Zetia® Tablet (used as an adjunctive to statin therapy)	Altoprev® Tablet amlodipine-atorvastatin tablet (generic for Caduet®) Caduet® Tablet Crestor® Tablet ezetimibe (generic for Zetia®)– ezetimibe-simvastatin (generic for Vytorin®) fluvastatin capsule / ER tablet (generic for Lescol® / XL) Lescol® Capsule / XL Tablet Lipitor® Tablet Livalo® Tablet

North Carolina Division of Medical Assistance
North Carolina Medicaid and Health Choice Preferred Drug List (PDL)

DRAFT

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	Pravachol® Tablet Vytorin® Tablet Zetia® Tablet (used as an adjunctive to statin therapy) Zocor® Tablet Zypitamag™ Juxtapid® Capsule - Clinical criteria apply Kynamro® Syringe - Clinical criteria apply
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CORONARY VASODILATORS

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

DIHYDROPYRIDINE CALCIUM CHANNEL BLOCKERS

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

DIRECT RENIN INHIBITOR

Preferred	Non-Preferred
Tekturna® HCT Tablet Tekturna® Tablet	

ENDOTHELIN RECEPTOR ANTAGONISTS

Covered for diagnosis of Pulmonary Arterial Hypertension only

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

CARDIOVASCULAR

INHALED PROSTACYCLIN ANALOGS

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

NIACIN DERIVATIVES

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

North Carolina Division of Medical Assistance
North Carolina Medicaid and Health Choice Preferred Drug List (PDL)

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	Niaspan® ER Tablet
NITRATE COMBINATION	
Preferred	Non-Preferred
Bidil® Tablet	
NON-DIHYDROPYRIDINE CALCIUM CHANNEL BLOCKERS	
Preferred	Non-Preferred
Calan® Tablet Cartia XT® Capsule (branded generic for Cardizem CD®) Dilt XR® Capsule (branded generic for Dilacor XR®) diltiazem ER 24 hour capsule (generic for Dilacor XR®, Tiazac®) diltiazem tablet / CD capsules / ER 12 hour capsule (generic for Cardizem® / CD / SR) Taztia XT® Capsule (branded generic for Tiazac®) verapamil tablet / ER tablet (generic for Calan® / SR)	Calan SR® Caplet Cardizem CD® Capsule Cardizem® LA Tablet Cardizem® Tablet diltiazem LA tablet (generic for Cardizem LA®) Matzim® LA Tablet (generic for Cardizem LA®) Tiazac® Capsule verapamil 360 mg capsule verapamil ER capsules (generic for Verelan®) verapamil PM capsule (generic for Verelan PM®) Verelan® Capsule Verelan® PM Capsule
ORAL PULMONARY HYPERTENSION	
Covered for diagnosis of Pulmonary Arterial Hypertension (all) and Chronic Thromboembolic Pulmonary Hypertension- Adempas®	
Trial and failure of only one preferred drug required	
Preferred	Non-Preferred
Adecira® Tablet sildenafil (generic for Revatio®) tablet	Adcirca® Tablet Adempas® Tablet Orenitram® ER Tablet Revatio® Suspension / Tablet Uptravi® Tablet
PLATELET INHIBITORS	
Preferred	Non-Preferred
Aggrenox® Capsule Brilinta® Tablet clopidogrel tablet (generic for Plavix®) dipyridamole tablet (generic for Persantine®) prasugrel tablelet (generic for Effient® Tablet)	aspirin/dipyridamole ER capsule (generic for Aggrenox®) Durlaza® Capsule Effient® Tablet Persantine® Tablet Plavix® Tablet ticlopidine tablet (generic for Ticlid®) Yosprala® Tablet Zontivity® Tablet
ANTIANGINAL & ANTI-ISCHEMIC	
Preferred	Non-Preferred
Ranexa® Tablet	
CARDIOVASCULAR	
SYMPATHOLYTICS AND COMBINATIONS	
Preferred	Non-Preferred
Catapres®-TTS Patch clonidine tablets (generic for Catapres®) guanfacine tablet (generic for Tenex®) methyldopa tablet (generic for Aldomet®)	Catapres® Tablet clonidine patches (generic for Catapres®-TTS) Clorpres® Tablet (branded generic for Combipres®) methyldopa-HCTZ tablet (generic for Aldoril®) methyldopate injection (generic for Aldomet® Injection) reserpine tablet (generic for Serpalan®) Tenex® Tablet

North Carolina Division of Medical Assistance
North Carolina Medicaid and Health Choice Preferred Drug List (PDL)

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TRIGLYCERIDE LOWERING AGENTS

Preferred	Non-Preferred
fenofibrate tablet (Tricor®) fenofibric acid-capsule / tablet (Trilipix®) gemfibrozil tablet (generic for Lipid®)	Antara® Capsule fenofibrate capsule / tablet (generic for Antara®, Lofibra®) fenofibrate tablet (generic for Fenoglide®) fenofibric acid capsule / tablet (generic for Fibricor®) fenofibric acid capsule / tablet (Trilipix®) Fenoglide® Tablet Fibricor® Tablet Lipofen® Capsule Lofibra® Capsule / Tablet Lopid® Tablet Lovaza® Capsule - Exemption for patients with triglycerides ≥ 500mg/dl omega-3 acid ethyl esters capsule (generic for Lovaza®) - Exemption for patients with triglycerides ≥ 500mg/dl Tricor® Tablet Triglide® Tablet Trilipix® Capsule Vascepa® Capsule

CENTRAL NERVOUS SYSTEM

ANTIMIGRAINE AGENTS

Quantity limits apply to all triptans

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

ANTINARCOLEPSY

Clinical criteria apply to all drugs in this class

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

North Carolina Division of Medical Assistance
North Carolina Medicaid and Health Choice Preferred Drug List (PDL)

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CENTRAL NERVOUS SYSTEM

ANTIPARKINSON AND RESTLESS LEG SYNDROME AGENTS

Preferred	Non-Preferred
benzotropine tablet (generic for Cogentin®) bromocriptine tablet (generic for Parlodel®) carbidopa-levodopa ODT (generic for Parcopa®) carbidopa-levodopa tablet / ER tablet (generic for Sinemet® / CR) pramipexole tablet (generic for Mirapex®) ropinirole tablet (generic for Requip®) selegiline capsule / tablet (generic for Emsam®) trihexyphenidyl elixir / tablet (generic for Artane®) amantadine capsule / solution (generic for Symmetrel®)	Azilect® Tablet carbidopa tablet (generic for Lodosyn®) carbidopa-levodopa-entacapone tablet (generic for Stalevo®) Comtan® Tablet Duopa® Suspension entacapone tablet (generic for Comtan®) Gocovri™ Capsule - Clinical criteria apply Horizant® Tablet Lodosyn® Tablet Mirapex® Tablet / ER Tablet Neupro® Patch Parlodel® Capsule / Tablet pramipexole ER tablet (generic for Mirapex ER®) rasagiline tablet (generic for Azilect®) Requip® Tablet / XL Tablet ropinirole ER tablet (generic for Requip XL®) Rytary® ER Capsule Sinemet® Tablet / CR Tablet Stalevo® Tablet Tasmart® Tablet tolcapone tablet (generic for Tasmart®) Xadago® Tablet Zelapar® ODT

MULTIPLE SCLEROSIS

Preferred	Non-Preferred
Avonex® Pack / Pen / Syringe Betaseron® Kit / Vial Copaxone® Syringe Gilenya® Capsule Rebif® Ribidose / Titration Pack / Syringe Tecfidera® Capsule / Starter Pack	Ampyra® Tablet Aubagio® Tablet Extavia® Kit / Vial glatiramer syringe (generic for Copaxone® Syringe) Glatopa® Syringe Lemtrada® Vial Plegridy® Pen / Pen Starter Pack / Syringe / Syringe Starter Pack Ocrevus®

SEDATIVE HYPNOTICS

Quantity limits apply to all sedative hypnotics

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

North Carolina Division of Medical Assistance
North Carolina Medicaid and Health Choice Preferred Drug List (PDL)

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zaleplon capsule (generic for Sonata®)
zolpidem ER tablet (generic for Ambien® CR)
zolpidem SL tablet (generic for Intermezzo®)
zolpimist oral spray

CENTRAL NERVOUS SYSTEM

SMOKING CESSATION

Preferred

Buproban® Tablet (branded generic for Zyban®)
bupropion SR tablet (generic for Zyban®)
Chantix® Tablet / Starting Box / Continuation Month Box - **Quantity limited to 6 months per 12 months**
Nicorelief® Gum
nicotine gum / lozenge / patch

Non-Preferred

Nicoderm® CQ Patch
Nicotrol® Inhaler / NS Spray
Nicorette® Gum / Lozenge (Buccal)
Zyban® SR Tablet

ENDOCRINOLOGY

GROWTH HORMONE

Clinical criteria apply to all drugs in this class

Preferred

Genotropin® Cartridge / Miniquick
Norditropin® Flexpro / Nordiflex
Serostim® Vial

Non-Preferred

Humatrope® Cartridge / Vial
Nutropin® AQ Pen / Nuspin
Omnitrope® Cartridge / Vial
Saizen® Click-Easy Cartridge / Vial
TevTropin® Vial
Zomacton® Vial
Zorbtive® Vial

HYPOGLYCEMICS - INJECTABLE

Rapid Acting Insulin

Preferred

Humalog® Vial
Humalog® Kwikpen
Novolog® Cartridge / Flexpen / Vial

Non-Preferred

Admelog® Solostar / Injection
Afrezza® Inhalation Powder
Apidra® Solostar / Vial
Fiasp® Flextouch / Vial
Humalog® Cartridge
~~Humalog® Kwikpen~~

Short Acting Insulin

Preferred

Humulin® R Vial

Non-Preferred

Humulin R-U500 Kwikpen®
Novolin® R Vial / Relion Vial

Intermediate Acting Insulin

Preferred

Humulin® N Vial

Non-Preferred

Humulin® N Pen
Novolin® N Vial / Relion Vial

Long Acting Insulin

Preferred

Trial and failure of only one preferred drug required

Lantus® Solostar / Vial
Levemir® FlexTouch / FlexPen / Vial

Non-Preferred

Basaglar Kwikpen®
Tresiba® Flextouch
Toujeo® Solostar

Premixed Rapid Combination Insulin

Preferred

Non-Preferred

North Carolina Division of Medical Assistance
North Carolina Medicaid and Health Choice Preferred Drug List (PDL)

DRAFT

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Humalog® Mix 50/50 Kwikpen Humalog® Mix 75/25 Kwikpen Humalog® Mix 75/25 Vial Novolog® Mix 70/30 Flexpen / Vial	
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Premixed 70/30 Combination Insulin

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

ENDOCRINOLOGY

HYPOGLYCEMICS - INJECTABLE (continued)

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 unless contraindicated or documented adverse event when using either a preferred or a non-preferred GLP-1 Receptor Agonist and Combination

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

HYPOGLYCEMICS - ORAL

2nd Generation Sulfonylureas

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

Alpha-Glucosidase Inhibitors

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

Biguanides and Combinations

Preferred	Non-Preferred
glipizide-metformin tablet (generic for Metaglip®) glyburide-metformin tablet (generic for Glucovance®) metformin tablet / ER tablet (generic for Glucophage® / ER)	Fortamet® Tablet Glucophage® Tablet / ER Tablet Glucovance® Tablet Glumetza® Tablet ** requires documentation as to why the beneficiary cannot use preferred long acting metformin product metformin ER tablet (generic for Fortamet®)

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metformin ER tablet (generic for Glumetza®)
Riomet® Solution

DPP-IV Inhibitors and Combinations

Requires trial and failure or insufficient response to metformin containing products unless contraindicated or documented adverse event when using either a preferred or a non-preferred DPP-IV Inhibitor and Combination

Preferred

Glyxambi® Tablet

Janumet® Tablet

Janumet® XR Tablet

Januvia® Tablet

Jentadueto® Tablet

Tradjenta® Tablet

Non-Preferred

alogliptin tablet (generic for Nesina®)

alogliptin-metformin tablet (generic for Kazano®)

alogliptin-pioglitazone tablet (generic for Orseni®)

~~Glyxambi® Tablet~~

Jentadueto® XR Tablet

Kazano® Tablet

Kombiglyze® XR Tablet

Nesina® Tablet

Onglyza® Tablet

Oseni® Tablet

Qtern® Tablet

Steglujan™ Tablet

ENDOCRINOLOGY

HYPOGLYCEMICS - ORAL (continued)

Meglitinides

Preferred

nateglinide tablet (generic for Starlix®)

repaglinide tablet (generic for Prandin®)

Non-Preferred

Prandin® Tablet

Starlix® Tablet

repaglinide-metformin tablet (generic for Prandimet®)

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

Requires trial and failure or insufficient response to metformin containing products unless contraindicated or documented adverse event when using either a preferred or a non-preferred SGLT2 Inhibitor and Combination

Preferred

Farxiga® Tablet

Jardiance® Tablet

Non-Preferred

Invokamet® Tablet / XR Tablet

Invokana® Tablet

Invokana® Tablet

Segluromet™ Tablet

Steglatro™ Tablet

Synjardy® Tablet / XR Tablet

Xigduo® XR Tablet

Thiazolidinediones and Combinations

Preferred

pioglitazone tablet (generic for Actos®)

Non-Preferred

ActoPlus Met® Tablet / XR Tablet

Actos® Tablet

Avandamet® Tablet

Avandaryl® Tablet

Avandia® Tablet

Duetact® Tablet

pioglitazone-glimepiride tablet (generic for Duetact®)

pioglitazone-metformin tablet (generic for ActoPlus Met®)

GASTROINTESTINAL

ANTIEMETIC-ANTIVERTIGO AGENTS

Preferred

Diclegis® Tablet

dimenhydrinate vial (generic for Dramamine®)

Non-Preferred

Akynzeo® Capsule

Anzemet® Tablet / Vial

North Carolina Division of Medical Assistance
North Carolina Medicaid and Health Choice Preferred Drug List (PDL)

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meclizine tablet (generic for Antivert®)	Bonjesta® Tablet
metoclopramide / solution / tablet (generic for Reglan®)	Cesamet® Capsule
ondansetron ODT / solution / tablet (generic for Zofran®)	Cinvanti™ Injectable Emulsion
prochlorperazine tablet (generic for Compazine®)	dronabinol capsule (generic for Marinol®)
promethazine syrup / tablet (generic for Phenergan®)	granisetron tablets (generic for Kytril®)
promethazine 25mg rectal	Marinol® Capsule
Transderm-Scop® Patch	metoclopramide ODT (generic for Metozolv®)
	metoclopramide ODT (generic for Reglan®)
	Metozolv® ODT
	palonosetron
	promethazine 50 mg rectal
	prochlorperazine rectal
	Reglan®
	Sancuso® patch
	scopolamine patch (generic for Transderm-Scop® Patch)
	Sustol® Injection
	Syndros® Solution
	trimethobenzamide capsule (generic for Tigan®)
	Varubi® Tablet
	Zofran® Solution / ODT / Tablet
	Zuplenz® Soluble Film
	aprepitant capsule/pack (generic for Emend®) - Clinical criteria apply
	Emend® Powder Packet - Clinical criteria apply
Emend® Capsule - Clinical criteria apply	Emend® Trifold Pack - Clinical criteria apply
	Dielegis® Tablet - Exemption for diagnosis of pregnancy

BILE ACID SALTS

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

GASTROINTESTINAL

H. PYLORI COMBINATIONS

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

HISTAMINE-2 RECEPTOR ANTAGONISTS

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

PANCREATIC ENZYMES

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

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PROGESTINS USED FOR CACHEXIA

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

PROTON PUMP INHIBITORS

Preferred	Non-Preferred
esomeprazole capsule (generic for Nexium® RX) Nexium® RX Packet omeprazole RX capsule (generic for Prilosec® RX) pantoprazole tablet (generic for Protonix®) Protonix® Suspension	Exemption for children < 12 years of age Aciphex® Sprinkle Capsules / Tablets Dexilant® Capsule lansoprazole capsule (generic for Prevacid® RX / OTC) Nexium® RX / Capsule omeprazole OTC capsule / tablet (generic for Prilosec® OTC) omeprazole sodium bicarbonate capsule (generic for Zegerid® RX / OTC) Prevacid® RX / OTC Capsule / Solutab Prilosec® RX Capsule / Suspension Protonix® Tablet rabeprazole tablet (generic for Aciphex®) Zegerid® RX / Capsule / Packet

SELECTIVE CONSTIPATION AGENTS

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

GASTROINTESTINAL

ULCERATIVE COLITIS

Oral

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

Rectal

Trial and failure of only one preferred drug required

Preferred	Non-Preferred
Canasa® Suppository mesalamine enema (generic for Rowasa® Enema)	mesalamine kit (generic for Rowasa® Kit) Rowasa® Kit SFRowasa® Enema Uceris® Rectal Foam

BENIGN PROSTATIC HYPERPLASIA TREATMENTS

Preferred	Non-Preferred
alfuzosin ER tablet (generic for Uroxatral®)	Avodart® Softgel

North Carolina Division of Medical Assistance
North Carolina Medicaid and Health Choice Preferred Drug List (PDL)

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doxazosin tablet (generic for Cardura®) dutasteride capsule (generic Avodart®) finasteride tablet (generic for Proscar®) tamsulosin capsule (generic for Flomax®) terazosin capsule (generic for Hytrin®)	Cardura® Tablet / XL Tablet dutasteride/ tamsulosin capsule (generic Jalyn capsule®) Flomax® Capsule Jalyn® Capsule Proscar® Tablet Rapaflo® Capsule Uroxatral® Tablet Cialis® Tablet - Clinical criteria apply
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ELECTROLYTE DEPLETERS

Preferred	Non-Preferred
calcium acetate capsule (generic for PhosLo®) calcium acetate tablet (generic for Eliphos®) Eliphos® Tablet Renagel® Tablet Renvela® Powder Pack	Auryxia® Tablet Eliphos® Tablet Fosrenol® Chewable Fosrenol® Powder Pack Magnebind® 400 RX Tablet PhosLo® Gelcap / Solution Phoslyra® Solution Renvela® Tablet sevelamer tablet / powder pack (generic for Renvela®) Velphoro® Chewable

GENITOURINARY/RENAL

URINARY ANTISPASMODICS

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

GOUT

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

HEMATOLOGIC

ANTICOAGULANTS

Injectable

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

North Carolina Division of Medical Assistance
North Carolina Medicaid and Health Choice Preferred Drug List (PDL)

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Lovenox® vial	fondaparinux syringe (generic for Arixtra®) Lovenox® Syringe
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Oral

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

COLONY STIMULATING FACTORS

Granix® Injection	
Leukine® Injection	
Neulasta® Syringe/Kit	
Neupogen® Vial/Syringe	
Zarxio® Injection	

HEMATOPOIETIC AGENTS

Clinical criteria apply to all drugs in this class

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

THROMBOPOIESIS STIMULATING AGENTS

Preferred	Non-Preferred
Nplate® Vial	
Promacta® Tablet	

OPHTHALMIC

ALLERGIC CONJUNCTIVITIS AGENTS

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

ANTIBIOTICS

Preferred	Non-Preferred
Azasite® Drops	bacitracin ointment (generic for AK-Tracin®)
AK-Poly-Bac® Ointment (branded generic for Polysporin®)	Besivance® Suspension
bacitracin-polymyxin ointment (generic for Polysporin®)	Bleph-10® Drops
ciprofloxacin solution drops (generic for Ciloxan®)	Ciloxan® Drops / Ointment
erythromycin ointment (generic for Ilotycin®)	Garamycin® Drops

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<p>Gentak® Ointment (branded generic for Garamycin®) gentamicin drops / ointment (generic for Garamycin®) Moxeza® Drops neomycin-bacitracin-polymyxin ointment (generic for Neosporin® Ophthalmic Ointment) Neo-Polycin® (branded generic for Neosporin® Ophthalmic Ointment) neomycin-polymyxin-gramicidin drops (generic for Neosporin® Ophthalmic Drops) ofloxacin drops (generic for Ocuflox®) Polycin® Ointment (branded generic for Polysporin®) polymyxin-trimethoprim drops (generic for Polytrim®) sulfacetamide drops (generic for Bleph-10®) tobramycin drops (generic for Tobrex®) Vigamox® Drops</p>	<p>gatifloxacin drops (generic for Zymaxid®) Ilotycin® Ointment levofloxacin drops (generic for Quixin®) moxifloxacin ophthalmic solution (generic for Vigamox® Drops) Natacyn® Drops Neosporin® Drops neomycin-bacitracin-polymyxin ointment (generic for Neosporin® Ophthalmic Ointment) neomycin-polymyxin-gramicidin drops (generic for Neosporin® Ophthalmic Drops) Ocuflox® Drops Polytrim® Drops sulfacetamide ointment (generic for Cetamide®) Tobrex® Ointment/ Drops Zymaxid® Drops</p>
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ANTIBIOTICS-STEROID COMBINATIONS

Preferred	Non-Preferred
<p>neomycin-polymyxin-dexamethasone drops / ointment (generic for Maxitrol®) Tobradex® Drops / Ointment</p>	<p>Blephamide® Drops / S.O.P. Ointment Maxitrol® Drops / Ointment Neo-Polycin® HC (branded generic for Cortisporin®) neomycin-bacitracin-polymyxin-HC ointment (generic for Cortisporin®) neomycin-polymyxin-HC drops / ointment (generic for Ocutricin®) Pred-G® S.O.P. Ointment / Suspension sulfacetamide-prednisolone drops (generic for Vasocidin®) Tobradex® ST Drops tobramycin-dexamethasone suspension (generic for Tobradex® Suspension) Zylet® Drops</p>

OPHTHALMIC

ANTI INFLAMMATORY

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

ANTI INFLAMMATORY/IMMUNOMODULATOR

Preferred	Non-Preferred
<p>Restasis® Restasis® (multidose)</p>	<p>Xiidra®</p>

Alpha 2 Adrenergic Agents

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

Beta Blocker Agents

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

Carbonic Anhydrase Inhibitors

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

Prostaglandin Agonists

Preferred	Non-Preferred
latanoprost drops (generic for Xalatan®) Travatan® Z Drops	bimatoprost (generic for Lumigan® Drops) Lumigan® Drops travoprost drops (generic for Travatan®) Vyzulta™ Drops Xalatan® Drops Zioptan® Drops

OSTEOPOROSIS

BONE RESORPTION SUPPRESSION AND RELATED AGENTS

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

OTIC

ANTIBIOTICS

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

ANTI-INFECTIVES AND ANESTHETICS

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

ANTI-INFLAMMATORY

Preferred	Non-Preferred
Dermotic®	fluocinoline 0.01% Oil

RESPIRATORY

BETA-ADRENERGIC HANDHELD, LONG ACTING

Preferred	Non-Preferred
Serevent® Diskus	Arcapta® Neohaler Striverdi® Respimat Inhalation Spray

BETA-ADRENERGIC HANDHELD, SHORT ACTING

Preferred	Non-Preferred
Proair® HFA Inhaler Proventil® HFA Inhaler	Proair Respiclick® Ventolin® HFA Inhaler Xopenex® HFA Inhaler

BETA-ADRENERGIC NEBULIZERS

Preferred	Non-Preferred
albuterol 0.63mg/3ml solution (generic for Accuneb®) albuterol 1.25mg/3ml solution (generic for Accuneb®) albuterol sulfate 2.5mg/0.5ml solution albuterol sulfate 2.5mg/3ml solution albuterol sulfate 5mg/ml solution	Brovana® Solution levalbuterol solution / concentrate solution (generic for Xopenex® / Concentrate) Perforomist® Solution Xopenex® Solution / Concentrate Solution

RESPIRATORY

BETA-ADRENERGIC - ORAL

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

ORALLY INHALED ANTICHOLINERGICS

Trial and failure of either Spiriva® or Stiolto® only required to obtain a non-preferred drug in this class

Preferred	Non-Preferred
Atrovent® HFA Inhaler Bevespi® Aerosphere	Anoro® Elipta Inhaler Bevespi® Aerosphere

North Carolina Division of Medical Assistance
North Carolina Medicaid and Health Choice Preferred Drug List (PDL)

DRAFT

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Combivent® Respimat Inhalation Spray	Combivent® Respimat Inhalation Spray
ipratropium nebulizer solution (generic for Atrovent® Nebulizer Solution)	Daliresp® Tablet
ipratropium-albuterol solution (generic for Duoneb®)	Incruse® Elipta Inhaler
Spiriva® Handihaler	Lonhala™ Magnair™
Stiolto® Respimat Inhalation Spray	Seebri® Neohaler
	Spiriva® Respimat Inhalation Spray 2.5mcg
	Tudorza® Pressair Inhaler
	Utibron® Neohaler
	<u>Spiriva Respimat Inhalation Spray 1.25mcg **Exemption from trial and failure of preferred drugs for Spiriva® Respimat 1.25mcg when used for Asthma, but must be used concurrently with an inhaled corticosteroid or inhaled corticosteroid/beta agonist combination**</u>

CORTICOSTEROIDS

Clinical criteria apply to all drugs in this class

Preferred	Non-Preferred
Flovent® HFA Inhaler	Aerospan® Inhaler
Pulmicort® Respules 0.25mg, 0.5mg, 1mg	Alvesco® Inhaler
QVAR® Inhaler (discontinued)	ArmonAir™ RespiClick®
	Arnuity Ellipta® Inhaler
	Asmanex® HFA Inhaler
	Asmanex® Twisthaler
	budesonide suspension (generic for Pulmicort® Respules)
	Flovent® Diskus
	Pulmicort® Flexhaler
	QVAR® RediHaler™

CORTICOSTEROID COMBINATION

Clinical criteria apply to all drugs in this class

Preferred	Non-Preferred
Advair® Diskus	Advair® HFA Inhaler
Dulera® Inhaler	Breo Ellipta®
Symbicort® Inhaler	AirDuo®
	fluticasone/salmeterol (generic for AirDuo®)
	Trelegy Ellipta

INTRANASAL RHINITIS AGENTS

Preferred	Non-Preferred
Astepro® Nasal Spray	Exemption for steroids applies to children < 4 years of age
azelastine spray (generic for Astelin®)	azelastine spray (generic for Astepro®)
fluticasone spray (generic for Flonase®)	Astelin® Nasal Spray
ipratropium spray (generic for Atrovent® Nasal)	Atrovent® Spray
olopatadine nasal spray(generic for Patanase®)	Beconase® AQ spray
Patanase® Nasal Spray	budesonide nasal spray (generic for Rhinocort® Aqua)
	Dymista® Nasal Spray
	Flonase® Nasal Spray (RX ONLY)
	flunisolide spray (generic for Nasalide®)
	mometasone nasal spray (generic for Nasonex®)
	Nasonex® Nasal Spray
	olopatadine nasal spray(generic for Patanase®)
	Omnanis® Nasal Spray
	Patanase® Nasal Spray
	QNasI® Nasal Spray / Children's Spray
	Rhinocort® Aqua Nasal Spray
	Ticanase nasal spray
	triamcinolone nasal spray (generic for Nasacort® AQ)
	Veramyst® Nasal Spray

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Xhance™ Nasal Spray
Zetonna® Nasal Spray

RESPIRATORY

LEUKOTRIENE MODIFIERS

Trial and failure of only one preferred drug required

Preferred

montelukast chewable / granules / tablet (generic for Singulair®)
zafirlukast tablet (generic for Accolate®)

Non-Preferred

Accolate® Tablet
montelukast granules (generic for Singulair®)
Singulair® Chewable / Granules / Tablet
zileuton
zafirlukast tablet (generic for Accolate®)
Zyflo® CR Tablet / Filmtab

LOW SEDATING ANTIHISTAMINES

Preferred

cetirizine tablets OTC (generic for Zyrtec® OTC Tablets)
cetirizine OTC syrup 1mg/1ml (generic for Zyrtec OTC® Syrup)
cetirizine RX syrup (generic for Zyrtec® Syrup)
levocetirizine tablet (generic for Xyzal®)
loratadine tablet OTC (generic for Claritin® OTC)

Non-Preferred

cetirizine chewable tablets OTC (generic for Zyrtec® OTC Tablets)
cetirizine OTC syrup 1mg/1ml (generic for Zyrtec OTC® Syrup)
cetirizine OTC syrup 5mg/5ml (generic for Zyrtec® OTC Syrup)
Clarinet® Syrup / Tablet - **Exemption for children < 2 years of age**
Claritin® Tablet
desloratadine ODT / Tablet (generic for Clarinet®)
fexofenadine 60mg, 180 mg tablet (generic for Allegra®)
fexofenadine OTC suspension / tablet (generic for Allegra® OTC)
levocetirizine solution / tablet (generic for Xyzal®)
loratadine OTC ODT / solution / soft gel (generic for Claritin® OTC)
Xyzal® Solution / Tablet

LOW SEDATING ANTIHISTAMINE COMBINATION

Quantity limit of 102 days supply per 12 months apply to all drugs in this class

Preferred

loratadine-D OTC tablet (generic for Claritin-D® OTC)

Non-Preferred

cetirizine-D OTC tablet (generic for Zyrtec-D® OTC)
Clarinet-D® Tablet
fexofenadine-D 12 Hour OTC Tablet (generic for Allegra-D® 12 Hour OTC)
Semprex-D® Capsule

TOPICALS

ACNE AGENTS

Preferred

Azelex® Cream
clindamycin-benzoyl peroxide gel (generic for Benzaclin®)
clindamycin phosphate pledgets / solution (generic for Cleocin-T®)
clindamycin-benzoyl peroxide gel (generic for Duac®)
clindamycin/benzoyl peroxide with pump (generic for Benzaclin®)
Differin® Cream / Gel / Gel Pump / Lotion
Epiduo® Gel
erythromycin solution (generic for Emcin®, Erycette®, EryDerm®, EryGel®, EryMax®, A/T/S®, T-Stat®)
Retin-A® Cream / Gel

Non-Preferred

Acne Clearing System
Acanya® Gel Pump
Aczone® Gel
adapalene cream / gel / gel pump (generic for Differin®)
adapalene/benzoyl peroxide (generic for Epiduo® Gel)
Atralin® Gel
Avar® Cleanser / Cleansing Pads / LS Cleanser / LS Cleansing Pads
Avar-E® Emollient Cream / Green Emollient Cream / LS Cream
Avita® Cream / Gel
Benzaclin® Gel
Benzamycin® Gel / Pak Gel
Benzefoam Ultra
Benzepro® Creamy Wash / Emollient Foam / Foam / Foaming Cloths
benzoyl peroxide cleanser / wash / foam / gel / kit / towlette (generic for Benzac®, et. al)
BP® 10-1 Wash / Cleansing Wash
Cleocin® T Gel / Lotion / Pledgets / Solution

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Clindacin® ETZ Pledget / Kit / P Pledgets / PAC Kit
clindamycin phosphate gel / lotion (generic for Cleocin-T®)
clindamycin phosphate foam (generic for Evoclin®)
clindamycin-benzoyl peroxide gel (generic for Duac®, Neucac®)
~~clindamycin-benzoyl peroxide with pump (generic for Benzacel®)~~
clindamycin/tretinoin (generic for Veltin®)
dapson gel (generic for Aczone® Gel)
Duac® Gel
Epiduo® Forte
Ery® Pads
Erygel® Gel
erythromycin gel / pledgets / ~~solution~~ (generic for Emcin®, Erycette®, EryDerm®, EryGel®, EryMax®, A/T/S®, T-Stat®)
erythromycin-benzoyl peroxide gel (generic for Benzamycin®)
Evoclin® Foam
Fabiator® Foam
Inova® (4/1, 8/2)
Klaron® Lotion
Neucac® Gel / Kit
Onexton® Gel / Gel Pump
Ovace® Plus Cleansing Gel / Plus Cream / Plus Lotion / Plus Shampoo / Wash
Promiseb® Complete / Topical Cream
Retin-A® / Micro Gel / Micro Pump Gel
Rosula® Cloths / Wash
Seb-Prev® Wash
sodium sulfacetamide shampoo, wash (generic for Ovace® / Plus)
sodium sulfacetamide cleanser / cream (generic for Avar® / LS)
sodium sulfacetamide lotion (generic for Klaron®)
sodium sulfacetamide sulfur cleanser / cloth (generic for Rosula®)
sodium sulfacetamide sulfur kit / wash (generic for Sumadan®)
sodium sulfacetamide sulfur lotion / suspension (generic for Novacet®, Plexion®, Zetacet®)
sodium sulfacetamide sulfur pad / suspension / wash (generic for Suamxin®)
SSS® 10-5 Cream / Foam
sulfacetamide sulfur cream (generic for Avar® E, SSS® 10-5)
Sulfacleanse® Suspension
Sumadan® Kit / Wash / XLT Kit
Sumaxin® Cleansing Pads / CP Kit / TS Topical Suspension / Wash
tazarotene cream
Tazorac® Cream / Gel
tretinoin microsphere gel / gel pump (generic for Retin-A® Micro)
tretinoin cream / gel (generic for Retin-A®)
Veltin® Gel
Virti-Sulf® Emollient Cream
Ziana® Gel

TOPICALS

ANDROGENIC AGENTS

Preferred

Androgel® Packet / Pump

Non-Preferred

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

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	testosterone gel pump (generic for Fortesta®) Vogelxo® Gel / Gel Packet / Gel Pump
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NSAIDS

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

ANTIBIOTIC

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

ANTIBIOTIC - VAGINAL

Preferred	Non-Preferred
Cleocin® Vaginal Ovules Clindese® Vaginal Cream clindamycin vaginal cream (generic for Cleocin® Vaginal Cream) metronidazole vaginal gel (generic for Metrogel® Vaginal Gel) Vandazole® Vaginal Gel	Cleocin® Vaginal Cream clindamycin vaginal cream (generic for Cleocin® Vaginal Cream) Nuversa® Vaginal Gel Metrogel® Vaginal Gel

TOPICALS

ANTIFUNGAL

Preferred	Non-Preferred
ciclopirox cream (generic for Loprox® Cream) ciclopirox solution (generic for Penlac® Solution) clotrimazole RX cream (generic for Lotrimin® RX) clotrimazole-betamethasone cream (generic for Lotrisone® cream) ketoconazole cream / shampoo (generic for Nizoral®) Nyamyc® Powder (branded generic for Nystop®) nystatin cream / ointment / powder (generic for Mycostatin®, Nystop®) Nystop® Powder	Bensal HP® Ciclodan® Cream / Cream Kit / Kit / Solution ciclopirox gel / shampoo / suspension (generic for Loprox®) ciclopirox treatment kit (generic for Ciclodan® Kit) clotrimazole-betamethasone lotion (generic for Lotrisone® lotion) clotrimazole RX solution (generic for Lotrimin® RX) CNL® 8 Nail Kit Dermacin® RX Therazole PAK econazole cream (generic for Spectazole®) Ertaczo® Cream Exelderm® Cream / Solution Extina® Foam Jublia® Topical Solution Kerydin® Topical Solution ketoconazole foam (generic for Extina® Foam) Loprox® suspension/cream/kit Loprox® Shampoo Lotrisone® Cream Luzu® Cream Mentax® Cream naftifine cream / gel (generic for Naftin® Cream / Gel) Naftin® Cream / Gel Nizoral® Shampoo nystatin-triamcinolone cream / ointment (generic for Mycolog II®)

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	oxiconazole cream (generic for Oxistat®) Oxistat® Cream / Lotion Pediderm AF® Kit Penlac® Solution Vusion® Ointment - Clinical criteria apply Xolegel® Gel
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ANTIPARASITICS

Trial and failure of only one preferred drug required

Preferred	Non-Preferred
Eurax® Cream Natroba® Topical Suspension permethrin cream (generic for Elimite®) Sklice® Lotion	Elimate® Cream Eurax® Lotion Eurax® Cream lindane lotion / shampoo malathion lotion (generic for Ovide®) Ovide® Lotion spinosad topical suspension (generic for Natroba®) Ulesfia®

ANTIVIRAL

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

IMMUNOMODULATORS

Atopic Dermatitis

Clinical criteria apply to all drugs in this class

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

Imidazoquinolinamines

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

TOPICALS

PSORIASIS

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

ROSACEA AGENTS

Preferred	Non-Preferred
MetroGel® MetroCream® MetroLotion®	Finacea® Gel metronidazole gel (generic for MetroGel®) Mirvaso® Gel metronidazole cream (generic for MetroCream®)

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	metronidazole lotion (generic for MetroLotion®) Noritate® Cream Rosadan® Cream / Gel / Kit Soolantra® Cream Rhofade®
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STEROIDS

Low Potency

Preferred	Non-Preferred
alclometasone dipropionate cream / ointment (generic for Acloivate®)	alclometasone dipropionate cream / ointment (generic for Acloivate®)
DermaSmoothe® FS Scalp and Body Oil	Aqua Glycolic® HC Kit
fluocinolone body / scalp oil (generic for Derma-Smoothe® FS Scalp / Body Oil)	Capex® Shampoo
hydrocortisone cream / gel/ lotion / ointment (generic for Hytone®)	DermaSmoothe® FS Scalp and Body Oil
hydrocortisone in absorbase	Dermasorb™ HC Lotion
	Desonate® Gel
	desonide cream / ointment (generic for DesOwen®) - Exemption for children < 12 years of age
	desonide lotion (generic for DesOwen® Lotion)
	DesOwen® Lotion
	fluocinolone body / scalp oil (generic for Derma-Smoothe® FS Scalp / Body Oil)
	Micort-HC Cream
	Pediaderm® HC Kit / TA Kit
	Texacort® Solution

Medium Potency

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

TOPICALS

STEROIDS (Continued)

High Potency

Preferred	Non-Preferred
betamethasone valerate cream / lotion / ointment (generic for Valisone®)	amcinonide cream / lotion / ointment (generic for Cyclocort®)
fluocinonide solution (generic for Lidex® / Lidex®)	betamethasone dipropionate augmented cream / gel / lotion / ointment (generic for Diprolene®)
triamcinolone acetonide cream / lotion / ointment (generic for Kenalog®)	betamethasone dipropionate cream / lotion / ointment (generic for Diprosone®)
	betamethasone valerate foam (generic for Valisone®)
	betamethasone valerate lotion (generic for Valisone®)
	desoximetasone cream / gel / ointment (generic for Topicort®)
	diflorasone cream / ointment (generic for Florone®)

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	<p>Diprolene® Lotion / Ointment / AF Cream fluocinonide cream / emollient cream / gel (generic for Lidex® / Lidex® E) fluocinonide ointment (generic for Lidex® Ointment) fluocinonide-solution (generic for Lidex® / Lidex®) Halog® Cream / Ointment Kenalog® Spray Sernivo® Spray Dermasorb™ TA Cream Dermacin Silapak® Dermacin RX Silazone® Sanaderm®RX Solution Silazone®II Topicort® Cream / Gel / Ointment / Spray / LP triamcinolone spray (generic for Kenalog® Spray) Trianex® Ointment Vanos® Cream Vanos® Cream Ellzia®</p>
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Very High Potency

Preferred	Non-Preferred
<p>clobetasol cream / emollient cream / gel / ointment (generic for Temovate®) clobetasol solution (generic for Cormax®) Clobex® Shampoo halobetasol propionate cream / ointment (generic for Ultravate®)</p>	<p>Apexicon E® Cream clobetasol foam / emulsion foam (generic for Olux® / Olux-E®) clobetasol lotion / shampoo (generic for Clobex®) clobetasol spray (generic for Clobex® spray) Clobex® Lotion / Spray Clodan® Kit / Shampoo Olux® Foam / E-Foam Temovate® Cream / Emollient Cream / Ointment Ultravate® Cream / Ointment / X Cream Combo Pack / X Ointment Combo Pack Ultravate® Lotion</p>

MISCELLANEOUS

ANTIPSORIATICS, ORAL

Preferred	Non-Preferred
<p>Acitretin (generic for Soriatane®)</p>	<p>8-MOP® Methoxsalen Rapid (generic for OxSORALEN-Ultra®) OxSORALEN-Ultra® Soriatane® Soriatane®</p>

EPINEPHRINE, SELF INJECTED

Preferred	Non-Preferred
<p>epinephrine auto injector / JR (generic for Epi-Pen® Auto Injector / JR Auto Injector)</p>	<p>Adrenaclick® Auto Injector epinephrine auto injector (generic for Adrenaclick®) Epi-Pen® Auto Injector / JR Auto Injector</p>

ESTROGEN AGENTS, COMBINATIONS

Preferred	Non-Preferred
<p>Activella® Tablet estradiol/norethindrone tablet (generic for Activella®) FemHRT® Tablet Jinteli® (branded generic for FemHRT®) Mimvey® / Lo (branded generic for Activella®) norethindrone-ethinyl estradiol (generic for FemHRT®) Prefest® Tablet</p>	<p>FemHRT® Tablet Lopreeza® Tablet Prefest® Tablet</p>

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Premphase® Tablet	
Prempro® Tablet	

PROGESTATIONAL AGENTS

Preferred	Non-Preferred
Makena® (hydroxyprogesterone caproate injection)	Makena® Auto-Injector
Compounded 17 P	

MISCELLANEOUS

ESTROGEN AGENTS, ORAL/TRANSDERMAL

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

ESTROGEN AGENTS, VAGINAL PREPARATIONS

Preferred	Non-Preferred
Estring® Vaginal Ring	Estrace® Cream
Premarin® Vaginal Cream	estradiol vaginal tablet / cream
Vagifem® Vaginal Tablet	Femring® Vaginal Ring
	Yuvafem®

GLUCOCORTICOID STEROIDS, ORAL

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

IMMUNOMODULATORS, SYSTEMIC

Clinical criteria apply to all drugs in this class

Trial and failure of only one preferred drug required

Preferred	Non-Preferred
Enbrel® Kit / Sureclick Syringe / Syringe	Actemra® Syringe / Vial
Enbrel® Mini Cartridge	Arcalyst® SQ Syringe
Cosentyx® Pen / Syringe	Cimzia® Starter Kit / Syringe Kit / Vial Kit

North Carolina Division of Medical Assistance
North Carolina Medicaid and Health Choice Preferred Drug List (PDL)

DRAFT

Trial and failure of two preferred drugs are required unless 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.
Drugs requiring prior authorization, clinical criteria and prior authorization request forms can be found at:
www.nctracks.nc.gov/content/public/providers/pharmacy/pa-drugs-criteria-new-format.html
More information on the PDL can be found at: <http://www.ncdhhs.gov/dma/pharmacy/index.htm>

Humira® Crohn's Starter Pack / Pediatric Crohn's Starter Pack / Pen / Psoriasis Starter Pack / Syringe	Cosentyx® Pen / Syringe Enbrel® Mini Cartridge Entyvio® Vial Ilaris® Injection Inflectra™ Vial Kevzara® Orencia® SQ Syringe / Clickjet Orencia® Vial Otezla® Starter Pack / Tablet Remicade® Injection Renflexis™ Injection Simponi® Aria Vial / Pen Injector / Syringe Stelara® Syringe Taltz® Auto-injector/syringe Tremfya® Xeljanz® Tablet/ Xeljanz®XR Siliq® Kineret® Syringe - Exemption for diagnosis of Neonatal Onset: Multi-System Inflammatory Disease
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MISCELLANEOUS

IMMUNOSUPPRESSANTS

Preferred	Non-Preferred
Astagraf® XL Capsule Azasan® Tablet azathioprine tablet (generic for Imuran®) Cellcept® Capsule / Suspension / Tablet cyclosporine capsule / solution (generic for Sandimmune®) cyclosporine modified capsule / solution (generic for Gengraf®, Neoral®) Envarsus® XR Tablet Gengraf® Capsule / Solution Hecoria® Capsule Imuran® Tablet mycophenolate capsule / suspension / tablet (generic for Cellcept®) mycophenolic acid tablet (generic for Myfortic®) Myfortic® Tablet Neoral® Capsule / Solution Prograf® Capsule Rapamune® Solution / Tablet Sandimmune® Capsule / Solution sirolimus tablet (generic for Rapamune®) tacrolimus capsule (generic for Hecoria®, Prograf®) Zortress® Tablet	

Movement Disorders

Clinical criteria apply to all drugs in this class

Preferred	Non-Preferred
Xenazine® Tablet	Austedo™ Tablet Ingrezza® Capsule (Try and failure of preferred not required. Only clinical criteria apply) tetrabenazine tablet

OPIOID ANTAGONIST

Preferred	Non-Preferred
naloxone ampule / syringe / vial (generic for Narcan®) naltrexone (oral) Narcan® Nasal Spray	

North Carolina Division of Medical Assistance
North Carolina Medicaid and Health Choice Preferred Drug List (PDL)

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www.nctracks.nc.gov/content/public/providers/pharmacy/pa-drugs-criteria-new-format.html
More information on the PDL can be found at: <http://www.ncdhhs.gov/dma/pharmacy/index.htm>

Vivitrol®	
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OPIOID DEPENDENCE

Clinical criteria apply to all drugs in this class

Trial and failure of Suboxone® SL film required for coverage of non-preferred options

For coverage of Sublocade- must have diagnosis of moderate to severe opioid use disorder 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
Suboxone® SL Film Sublocade™	Bunavail® Film buprenorphine sl tablet (generic for Subutex®) buprenorphine-naloxone sl tablet (generic for Suboxone®) Zubsolv® Tablet SL

SKELETAL MUSCLE RELAXANTS

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

DIABETIC SUPPLIES

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

Meters	Lancing Devices
ACCU-CHEK® Aviva Plus care kit ACCU-CHEK® Compact Plus care kit ACCU-CHEK® Nano SmartView care kit ACCU-CHEK® Guide Retail care kit	ACCU-CHEK® Softclix lancing device kit (Blue) ACCU-CHEK® Softclix lancing device kit (Black) ACCU-CHEK® Multiclix lancing device kit
Test Strips ACCU-CHEK® AVIVA 50 ct test strips ACCU-CHEK® AVIVA PLUS 50 ct test strips ACCU-CHEK® SMARTVIEW 50 ct test strips ACCU-CHEK® COMPACT Plus 51 ct test strips ACCU-CHEK® Guide 50 ct test strips	ACCU-CHEK® Fastclix lancing device kit
Lancets ACCU-CHEK® Multiclix 102 ct Lancets ACCU-CHEK® Softclix 100 ct Lancets ACCU-CHEK® Fastclix 102 ct Lancets	Control Solutions ACCU-CHEK® Aviva glucose control solution (2 levels) ACCU-CHEK® Compact blue glucose control solution (2 levels) ACCU-CHEK® Compact Plus clear glucose control solution (2 levels) ACCU-CHEK® SmartView glucose control solution (1 level) ACCU-CHEK® Guide 2-Level control solution (2-levels)