North Carolina Medicaid and Health Choice Preferred Drug List (PDL)

#### Effective: 06/01/2021

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 NOT 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

 $More information on the PDL can be found at: {\color{red} \underline{https://medicaid.ncdhhs.gov/providers/programs-services/prescription-drugs/outpatient-pharmacy-services}$ 

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

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® / ODT)	Aricept® Tablet
Exelon® Patch	donepezil 23mg tablet (generic for Aricept®)
memantine tablet / titration pack (generic for Namenda®)	galantamine ER capsule / solution / tablet (generic for Razadyne® / ER)
rivastigmine capsule (generic for Exelon®)	memantine ER capsule / solution (generic for Namenda® 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® Patch)
	Razadyne <sup>®</sup> ER Capsule

#### ANALGESIC

#### OPIOID ANALGESICS

Long Acting Opioids

#### Clinical criteria apply to all drugs in this class

Preferred	Non-Preferred
Butrans® Patch	Arymo <sup>®</sup> ER
fentanyl patch 12mcg / 25mcg / 50mcg / 75mcg / 100mcg (generic for Duragesic®)	Belbuca® (Buccal) Film
morphine sulfate ER tablet (generic for MS Contin®)	buprenorphine patch (generic for Butrans® Patch)
tramadol ER tablet (generic for Ultram ER®, Ryzolt®)	Conzip <sup>®</sup> Capsule
Xtampza® ER Capsule	Duragesic <sup>®</sup> Patch
	fentanyl patch (37.5. / 62.5 / 87.5mcg dosages) (generic for Duragesic®)
	hydrocodone ER capsule (generic for Zohydro® ER)
	hydrocodone ER tablet (generic for Hysingla® ER Tablet) NOT REVIEWED
	hydromorphone ER tablet (generic for Exalgo®)
	Hysingla <sup>®</sup> ER Tablet
	Kadian <sup>®</sup> Capsule
	morphine sulfate ER capsule (generic for Avinza®, Kadian®)
	MorphaBond® ER
	MS Contin <sup>®</sup> Tablet
	Nucynta® ER Tablet
	oxycodone ER tablet (generic for OxyContin <sup>®</sup> )
	OxyContin <sup>®</sup> Tablet
	oxymorphone ER tablet
	tramadol ER capsule (generic for Conzip <sup>®</sup> Capsule)
	Zohydro <sup>®</sup> ER Capsule

## Orally Disintegrating / Oral Spray Schedule II Opioids

## Clinical criteria apply to all drugs in this class

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Preferred	Non-Preferred
Actiq <sup>®</sup> Lozenge	Abstral® SL Tablet
	Dsuvia <sup>™</sup> SL Tablet
	fentanyl citrate buccal tablet (generic for Fentora®)
	fentanyl citrate lozenge (generic for Actiq®)
	Fentora® Buccal Tablet

#### Short Acting Schedule II Opioids

# Clinical criteria apply to all drugs in this class

Preferred	Non-Preferred
Endocet® Tablet (branded generic for Percocet®)	Apadaz <sup>™</sup> Tablet
hydrocodone-acetaminophen solution / tablet (generic for Hycet®, Lorcet®, Lortab®, Norco®, Vicodin®)	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 <sup>®</sup> Tablet)	Dilaudid <sup>®</sup> Liquid / Tablet
morphine solution / tablet (generic for MSIR®)	hydromorphone solution / suppository (generic for Dilaudid <sup>®</sup> )
oxycodone solution / tablet (generic for Roxicodone®)	levorphanol tablet (generic for Levo-Dromoran®)
oxycodone-acetaminophen capsules (generic for Tylox®)	Lorcet® Tablet / HD Tablet / Plus Tablet
oxycodone-acetaminophen tablets (generic for Percocet®)	Lortab <sup>®</sup> Elixir
	meperidine solution / tablet (generic for Demerol®)
	morphine oral syringe
	morphine suppositories (generic for Roxanol®)
	Nalocet <sup>®</sup> Tablet
	Norco® Tablet
	Nucynta <sup>®</sup> Tablet
	Oxaydo <sup>®</sup> Tablet
	oxycodone-aspirin tablet (generic for Endodan®, Percodan®)
	oxycodone concentrated solution (generic for Roxicodone® Intensol)

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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 NOT REVIEWED. Drugs requiring prior authorization, clinical criteria and prior authorization request forms can be found at: <a href="https://www.nctracks.nc.gov/content/public/providers/pharmacy.html">https://www.nctracks.nc.gov/content/public/providers/pharmacy.html</a>

More information on the PDL can be found at: https://medicaid.ncdhhs.gov/	providers/programs-services/prescription-drugs/outpatient-pharmacy-services
	oxycodone-ibuprofen tablet (generic for Combunox®)
	oxycodone oral syringe
	oxymorphone tablet (generic for Opana®)
	oxycodone capsule (generic for OxyIR®)  Percocet® Tablet
	Primlev® Tablet
	Prolate® Tablet
	Roxicodone® Tablet
	RoxyBond® Tablet
Short Acting Schadula III II	/ Opioids / Analgesic Combinations
	oly to all drugs in this class
Preferred	Non-Preferred
codeine-acetaminophen solution / tablet (generic for Tylenol with Codeine®)	Ascomp® Capsule (branded generic for Fiorinal with Codeine®)
tramadol tablet (generic for Ultram®)	butalbital compound with codeine capsule (generic for Fiorinal with Codeine®)
tramadol-acetaminophen tablet (generic for Ultracet®)	butalbital-caffeine-APAP with codeine tablet (generic for Fioricet with Codeine®)
	butorphanol spray (generic for Stadol®) dihydrocodeine-acetaminophen-caffeine tablet (generic for Panlor SS®)
	Fioricet with Codeine® Capsule
	Fiorinal with Codeine® Capsule
	pentazocine-naloxone tablet (generic for Talwin NX®)
	Ultracet® Tablet
	Ultram® Tablet
N	  SAIDS
Preferred	Non-Preferred
celecoxib capsule (generic for Celebrex®)	Arthrotec® Tablet
ibuprofen suspension / tablet (generic for Motrin®)	Celebrex® Capsule
indomethacin capsule (generic for Indocin®)	Daypro® Caplet
ketorolac tablet (generic for Toradol®)	diclofenac potassium tablet (generic for Cataflam®)
meloxicam tablet (generic for Mobic Tablet <sup>®</sup> ) naproxen EC / DR tablet (generic for Naprosyn <sup>®</sup> EC)	diclofenac sodium tablet / ER tablet (generic for Voltaren® / XR) diclofenac sodium-misoprostol tablet (generic for Arthrotec®)
naproxen tablet (generic for Naprosyn® Tablet)	diflunisal tablet (generic for Dolobid <sup>®</sup> )
sulindac tablet (generic for Clinoril®)	Duexis® Tablet - Trial and failure of celecoxib required
	etodolac capsule / tablet / ER tablet(generic for Lodine® / XL)
	Feldene® Capsule
	fenoprofen capsule/ tablet (generic for Nalfon®) flurbiprofen tablet (generic for Ansaid®)
	nuroiproteir tablet (generic for Alisaid )
	Indocin® Suppository / Suspension
	Indocin® Suppository / Suspension indomethacin ER capsule (generic for Indocin SR®)
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	indomethacin ER capsule (generic for Indocin SR®)  ketoprofen capsule (generic for Orudis®)  ketoprofen ER capsule (generic for Oruvail®)  ketoprolac tromethamine nasal spray (generic for Sprix®)  meclofenamate capsule (generic for Meclomen®)  mefenamic acid capsule (generic for Ponstel®)  meloxicam capsule (generic for Vivlodex® Capsule) NOT REVIEWED  Mobic® Tablet  nabumetone tablet (generic for Relafen®)  Nalfon® Capsule / Tablet
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NEURO Preferred	indomethacin ER capsule (generic for Indocin SR®) ketoprofen Capsule (generic for Orudis®) ketoprofen ER capsule (generic for Oruvail®) ketorolac tromethamine nasal spray (generic for Sprix®) meclofenamate capsule (generic for Meclomen®) mefenamic acid capsule (generic for Postel®) meloxicam capsule (generic for Vivlodex® Capsule) NOT REVIEWED  Mobic® Tablet nabumetone tablet (generic for Relafen®) Nalfon® Capsule / Tablet naproxen sodium ER tablet (generic for Naprelan®) naproxen sodium ER tablet (generic for Naprelan®) naproxen sodium tablet (generic for Naprosyn®) naproxen-esomeprazole tablet (generic for Vimovo® Tablet) - Trial and failure of celecoxib required oxaprozin tablet (generic for DayPro®) piroxicam capsule (generic for Feldene®) Qmitz™ ODT Tablet Relafen® DS Tablet Sprix® Nasal Spray Tivorbex® Capsule tolmetin capsule / tablet (generic for Tolectin®) Vimovo® Tablet - Strial and failure of celecoxib required Vivlodex® Capsule Zipsor® Capsule
Preferred duloxetine capsule (generic for Cymbalta®)	indomethacin ER capsule (generic for Indocin SR®) ketoprofen capsule (generic for Oruvail®) ketoprofen ER capsule (generic for Oruvail®) ketoprofen ER capsule (generic for Oruvail®) meclofenamate capsule (generic for Meclomen®) mefenamic acid capsule (generic for Ponstel®) meloxicam capsule (generic for Vivlodex® Capsule) NOT REVIEWED Mobic® Tablet nabumetone tablet (generic for Relafen®) Nalfor® Capsule / Tablet naproxen Sodium ER tablet (generic for Naprelan®) naproxen sodium ER tablet (generic for Naprelan®) naproxen suspension (generic for Naprosyn®) naproxen suspension (generic for Naprosyn®) naproxen-esomeprazole tablet (generic for Vimovo® Tablet) - Trial and failure of celecoxib required oxaprozin tablet (generic for DayPro®) piroxicam capsule (generic for DayPro®) piroxicam capsule (generic for Decini®) Vimovo® Tablet - Trial and failure of celecoxib required Vivlodex® Capsule Zipsor® Capsule Zorvolex® Capsule Zorvolex® Capsule Zorvolex® Capsule
Preferred duloxetine capsule (generic for Cymbalta®) gabapentin capsule / solution / tablet (generic for Neurontin®)	indomethacin ER capsule (generic for Indocin SR®)  ketoprofen capsule (generic for Oruvail®)  ketoprofen ER capsule (generic for Oruvail®)  ketoprofen ER capsule (generic for Oruvail®)  meclofenamate capsule (generic for Meclomen®)  mefenamic acid capsule (generic for Ponstel®)  meloxicam capsule (generic for Vivlodex® Capsule) NOT REVIEWED  Mobic® Tablet  Mabic® Tablet  Naprelan® Tablet  Naprelan® Tablet  naproxen sodium ER tablet (generic for Naprelan®)  naproxen sodium tablet (generic for Naprelan®)  naproxen sodium tablet (generic for Naprelan®)  naproxen suspension (generic for Naprosyn®)  naproxen-someprazole tablet (generic for Vimovo® Tablet) - Trial and failure of celecoxib required  oxaprozin tablet (generic for DayPro®)  piroxicam capsule (generic for Peldene®)  Qmiiz™ ODT Tablet  Relafon™ DS Tablet  Sprix® Nasal Spray  Tivorbex® Capsule  tolmetin capsule / tablet (generic for Tolectin®)  Vimovo® Tablet - Trial and failure of celecoxib required  viviotex® Capsule  Zipsor® Capsule  Zipsor® Capsule  PATHIC PAIN  Non-Preferred  Cymbalta® Capsule  Drizalma™ Sprinkle
Preferred duloxetine capsule (generic for Cymbalta®)	indomethacin ER capsule (generic for Indocin SR®) ketoprofen capsule (generic for Ortudis®) ketoprofen ER capsule (generic for Ortudis®) ketoprofen ER capsule (generic for Ortudis®) melotica tromethamine nasal spray (generic for Sprix®) meclofenamate capsule (generic for Meclomen®) mefenamic acid capsule (generic for Meclomen®) mefenamic acid capsule (generic for Ponste®) meloxicam capsule (generic for Relafen®) Mobic® Tablet Mobic® Tablet Naprelan® Tablet naproxen sodium ER tablet (generic for Naprelan®) naproxen sodium tablet (generic for Naprox®) naproxen sodium tablet (generic for Naprox®) naproxen sodium tablet (generic for Naprox®) naproxen suspension (generic for Naprox®) naproxen-someprazole tablet (generic for Vimovo® Tablet) - Trial and failure of celecoxib required oxaprozin tablet (generic for DayPro®) piroxicam capsule (generic for Feldenc®) Qmiiz™ ODT Tablet Relafen™ DS Tablet Sprix® Nasal Spray Tivorbex® Capsule tolmetin capsule / tablet (generic for Tolectin®) Vimovo® Tablet - Trial and failure of celecoxib required Vivlodex® Capsule Zorvolex® Capsule Zorvolex® Capsule  Zorvolex® Capsule  Drizalma™ Sprinkle duloxetine capsule (generic for Irenka®) NOT REVIEWED
Preferred duloxetine capsule (generic for Cymbalta®) gabapentin capsule / solution / tablet (generic for Neurontin®)	indomethacin ER capsule (generic for Indocin SR®) ketoprofen capsule (generic for Oruvail®) ketoprofen ER capsule (generic for Oruvail®) ketoprofen ER capsule (generic for Oruvail®) ketoprofen ER capsule (generic for Oruvail®) melosite capsule (generic for Meclomen®) melosite capsule (generic for Meclomen®) melosite capsule (generic for Vivlodex® Capsule) NOT REVIEWED  Mobic® Tablet nabumetone tablet (generic for Relafen®) Nalfon® Capsule / Tablet Naprelan® Tablet naproxen sodium ER tablet (generic for Naprelan®) naproxen sodium tablet (generic for Naprosyn®) naproxen sodium tablet (generic for Naprosyn®) naproxen suspension (generic for Naprosyn®) naproxen-esomeprazole tablet (generic for Vimovo® Tablet) - Trial and failure of celecoxib required oxaprozin tablet (generic for DayPro®) priroxicam capsule (generic for Feldene®) Qmiiz™ ODT Tablet Relafen™ DS Tablet Sprix® Nasal Spray Tivorbex® Capsule Unimovo® Tablet - Trial and failure of celecoxib required Vivlodex® Capsule Zipsor® Capsule Zipsor® Capsule Zipsor® Capsule DATHIC PAIN  Non-Preferred Cymbalta® Capsule Univalen® Sprinkle duloxetine capsule (generic for Irenka®) NOT REVIEWED Graliss® Tablet
Preferred duloxetine capsule (generic for Cymbalta®) gabapentin capsule / solution / tablet (generic for Neurontin®)	indomethacin ER capsule (generic for Indocin SR®) ketoprofen capsule (generic for Ortudis®) ketoprofen ER capsule (generic for Ortudis®) ketoprofen ER capsule (generic for Ortudis®) melotica tromethamine nasal spray (generic for Sprix®) meclofenamate capsule (generic for Meclomen®) mefenamic acid capsule (generic for Meclomen®) mefenamic acid capsule (generic for Ponste®) meloxicam capsule (generic for Relafen®) Mobic® Tablet Mobic® Tablet Naprelan® Tablet naproxen sodium ER tablet (generic for Naprelan®) naproxen sodium tablet (generic for Naprox®) naproxen sodium tablet (generic for Naprox®) naproxen sodium tablet (generic for Naprox®) naproxen suspension (generic for Naprox®) naproxen-someprazole tablet (generic for Vimovo® Tablet) - Trial and failure of celecoxib required oxaprozin tablet (generic for DayPro®) piroxicam capsule (generic for Feldenc®) Qmiiz™ ODT Tablet Relafen™ DS Tablet Sprix® Nasal Spray Tivorbex® Capsule tolmetin capsule / tablet (generic for Tolectin®) Vimovo® Tablet - Trial and failure of celecoxib required Vivlodex® Capsule Zorvolex® Capsule Zorvolex® Capsule  Zorvolex® Capsule  Drizalma™ Sprinkle duloxetine capsule (generic for Irenka®) NOT REVIEWED
Preferred duloxetine capsule (generic for Cymbalta®) gabapentin capsule / solution / tablet (generic for Neurontin®)	indomethacin ER capsule (generic for Indocin SR®) ketoprofen capsule (generic for Orudis®) ketoprofen ER capsule (generic for Oruvais®) ketorolac tromethamine nasal spray (generic for Sprix®) meclofenamate capsule (generic for Meclomen®) meclofenamate capsule (generic for Meclomen®) mefenamic acid capsule (generic for Vivlodex® Capsule) NOT REVIEWED  Mobic® Tablet nabumetone tablet (generic for Relafen®) Nalfon® Capsule / Tablet Naprelan® Tablet naproxen sodium ER tablet (generic for Naprelan®) naproxen sodium tablet (generic for Naprelan®) naproxen suspension (generic for Naprelan®) naproxen-esomeprazole tablet (generic for Vimovo® Tablet) - Trial and failure of celecoxib required oxaprozin tablet (generic for DayPro®) piroxicam capsule (generic for Tablet Naprelam® ODT Tablet Relafen® DS Tablet Sprix® Nasal Spray Tivorbex® Capsule tolmetin capsule / tablet (generic for Tolectin®) Vimovo® Tablet - Trial and failure of celecoxib required Viviodex® Capsule Zipsor® Capsule Zipsor® Capsule Drizalna® Sprinkle  Annon-Preferred Cymbalta® Capsule Drizalna® Sprinkle duloxetine capsule (generic for Irenka®) NOT REVIEWED Grailse® Tablet Horizant® Tablet
Preferred duloxetine capsule (generic for Cymbalta®) gabapentin capsule / solution / tablet (generic for Neurontin®)	indomethacin ER capsule (generic for Indocin SR®) ketoprofen ER capsule (generic for Orudis®) ketoprofen ER capsule (generic for Oruvais®) ketoprofen ER capsule (generic for Oruvais®) ketorolac tromethamine nasal spruy (generic for Sprix®) meclofenamate capsule (generic for Meclomen®) melenamic acid capsule (generic for Ponstel®) meloxicatn capsule (generic for Vivlodex® Capsule) NOT REVIEWED  Mobic® Tablet nabumetone tablet (generic for Relafen®) Nalfon® Capsule / Tablet Naprelan® Tablet naproxen sodium tablet (generic for Naprelan®) naproxen sodium tablet (generic for Naprosyn®) naproxen sondium tablet (generic for Naprosyn®) naproxen sondium tablet (generic for Naprosyn®) naproxen-esomeprazole tablet (generic for Vivnovo® Tablet) - Trial and failure of celecoxib required oxaprozin tablet (generic for DayPro®) piroxicam capsule (generic for Feldene®) Omiz™ ODT Tablet Relafen™ DS Tablet Sprix® Nasal Spray Tivorbex® Capsule tolmetin capsule / tablet (generic for Tolectin®) Vivnove® Tablet - Trial and failure of celecoxib required  Vivlodex® Capsule Zorovlex® Capsule  Zorovlex® Capsule  Drizalma™ Sprinkle duloxetine capsule (generic for Irenka®) NOT REVIEWED  Gralise® Tablet lidocaine patch (generic for Irenka®) NOT REVIEWED

North Carolina Medicaid and Health Choice Preferred Drug List (PDL)

# Effective: 06/01/2021

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 NOT 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
	Neurontin® Capsule / Solution / Tablet
	pregabalin ER tablet (generic for Lyrica® CR Tablet) NOT REVIEWED
	Qutenza <sup>®</sup> Kit
	Savella® Tablet / Titration Pack
	ZTLido Teach - Clinical criteria apply
ANIDIO	NIVITY CANTEC
	DNVULSANTS PINE DERIVATIVES
	n trial and failure criteria and may use any carbamazepine product.
Preferred	Non-Preferred
Aptiom® Tablet	Carbatrol® Capsule
carbamazepine chewable tablet (generic for Tegretol®)	carbamazepine suspension / tablet (generic for Tegretol®)
carbamazepine ER capsule (generic for Carbatrol®)	carbamazepine XR tablet (generic for Tegretol XR®)
Equetro® Capsule	Epitol® Tablet
oxcarbazepine tablet / suspension (generic for Trileptal®)	Trileptal® Tablet / Suspension (oral)
Oxtellar® XR Tablet	
Tegretol® Suspension / Tablet / XR Tablet	
ETPST (	EENERATION
	n trial and failure criteria and may use any first generation product.
Preferred	Non-Preferred
Celontin® Kapseal	Depakote® ER Tablet / Sprinkle Capsule
Dilantin® Capsule / Infatab / Suspension	Depakote Tablet
divalproex sprinkle capsule / ER tablet / tablet (generic for Depakote® / ER / Sprinkle)	felbamate suspension / tablet (generic for Felbatol®)
ethosuximide capsule / solution (generic for Zarontin®)	Felbatol® Suspension / Tablet
phenobarbital tablet / elixir / solution	Mysoline® Tablet
Phenytek® Capsule	Peganone® Tablet
phenytoin chewable / extended capsules / infatab / suspension (generic for Dilantin®)	Zarontin® Capsule / Solution
phenytoin extended capsules (generic for Phenytek®)	
primidone Tablet (generic for Mysoline®)	
valproic acid capsule / solution (generic for Depakene <sup>®</sup> )	
SECOND	GENERATION
	trial and failure criteria and may use any second generation product.
Preferred	Non-Preferred
clonazepam tablet (generic for Klonopin <sup>®</sup> )	Banzel® Suspension / Tablet
Diastat® Acudial® / Pedi System	Briviact® Tablet and Solution
gabapentin capsule / solution (generic for Neurontin®)	clobazam suspension / tablet (generic for Onfi® Suspension / Tablet)
gabapentin tablet (generic for Neurontin® Tablet)	clonazepam ODT (generic for Klonopin® Wafer)
Gabitril® Tablet	diazepam rectal / system (generic for Diastat® Accudial / Pedi System)
lamotrigine chewable / tablet (generic for Lamictal®)	Diacomit® Capsule / Powder Pack
levetiracetam tablet / ER tablet / solution (generic for Keppra® / XR)	Epidiolex® Solution - Clinical Criteria Apply
Roweepra Tablet	Fintepla® Solution
Colodia December Declar	
Sabril® Powder Packet  toniramate sprinkle capsule / tablet (generic for Tonamax®)	Fycompa® Tablet / Sulption / XP Tablet
topiramate sprinkle capsule / tablet (generic for Topamax®)	Keppra® Tablet / Solution / XR Tablet
topiramate sprinkle capsule / tablet (generic for Topamax®)	Keppra® Tablet / Solution / XR Tablet Klonopin® Tablet
topiramate sprinkle capsule / tablet (generic for Topamax®)	Keppra® Tablet / Solution / XR Tablet Klonopin® Tablet Lamictal® Chewable / ODT / ODT Starter Kit / Starter Kit / Tablet / XR / XR Starter Kit
topiramate sprinkle capsule / tablet (generic for Topamax®)	Keppra® Tablet / Solution / XR Tablet Klonopin® Tablet Lamictal® Chewable / ODT / ODT Starter Kit / Starter Kit / Tablet / XR / XR Starter Kit lamotrigine starter kits (generic for Lamictal®) lamotrigine ER tablet / ODT / ODT Starter Kit / Starter Kit (generic for Lamictal® XR / ODT) Lyrica® Capsule / Solution
topiramate sprinkle capsule / tablet (generic for Topamax®)	Keppra® Tablet / Solution / XR Tablet Klonopin® Tablet Lamictal® Chewable / ODT / ODT Starter Kit / Starter Kit / Tablet / XR / XR Starter Kit lamotrigine starter kits (generic for Lamictal®) lamotrigine ER tablet / ODT / ODT Starter Kit / Starter Kit (generic for Lamictal® XR / ODT) Lyrica® Capsule / Solution Nayzilam® Nasal Spray
topiramate sprinkle capsule / tablet (generic for Topamax®)	Keppra® Tablet / Solution / XR Tablet Klonopin® Tablet Lamictal® Chewable / ODT / ODT Starter Kit / Starter Kit / Tablet / XR / XR Starter Kit lamotrigine starter kits (generic for Lamictal®) lamotrigine ER tablet / ODT / ODT Starter Kit / Starter Kit (generic for Lamictal® XR / ODT)  Lyrica® Capsule / Solution Nayzilam® Nasal Spray Neurontin® Capsule / Solution / Tablet
topiramate sprinkle capsule / tablet (generic for Topamax®)	Keppra® Tablet / Solution / XR Tablet Klonopin® Tablet Lamictal® Chewable / ODT / ODT Starter Kit / Starter Kit / Tablet / XR / XR Starter Kit lamotrigine starter kits (generic for Lamictal®) lamotrigine ER tablet / ODT / ODT Starter Kit / Starter Kit (generic for Lamictal® XR / ODT) Lyrica® Capsule / Solution Nayzilam® Nasal Spray Neurontin® Capsule / Solution / Tablet Onfi® Suspension / Tablet
topiramate sprinkle capsule / tablet (generic for Topamax®)	Keppra® Tablet / Solution / XR Tablet  Klonopin® Tablet  Lamictal® Chewable / ODT / ODT Starter Kit / Starter Kit / Tablet / XR / XR Starter Kit  lamotrigine starter kits (generic for Lamictal®)  lamotrigine ER tablet / ODT / ODT Starter Kit / Starter Kit (generic for Lamictal® XR / ODT)  Lyrica® Capsule / Solution  Nayzilam® Nasal Spray  Neurontin® Capsule / Solution / Tablet  Onti® Suspension / Tablet  Qudexy® XR Capsule
topiramate sprinkle capsule / tablet (generic for Topamax®)	Keppra® Tablet / Solution / XR Tablet Klonopin® Tablet Lamictal® Chewable / ODT / ODT Starter Kit / Starter Kit / Tablet / XR / XR Starter Kit lamotrigine starter kits (generic for Lamictal®) lamotrigine ER tablet / ODT / ODT Starter Kit / Starter Kit (generic for Lamictal® XR / ODT) Lyrica® Capsule / Solution Nayzilam® Nasal Spray Neurontin® Capsule / Solution / Tablet Onfi® Suspension / Tablet
topiramate sprinkle capsule / tablet (generic for Topamax®)	Keppra® Tablet / Solution / XR Tablet Klonopin® Tablet Lamictal® Chewable / ODT / ODT Starter Kit / Starter Kit / Tablet / XR / XR Starter Kit lamotrigine starter kits (generic for Lamictal®) lamotrigine ER tablet / ODT / ODT Starter Kit / Starter Kit (generic for Lamictal® XR / ODT) Lyrica® Capsule / Solution Nayzilam® Nasal Spray Neurontin® Capsule / Solution / Tablet Onfi® Suspension / Tablet Qudexy® XR Capsule rufinamide suspension (generic for Banzel® Suspension) NOT REVIEWED
topiramate sprinkle capsule / tablet (generic for Topamax®)	Keppra® Tablet / Solution / XR Tablet Klonopin® Tablet Lamictal® Chewable / ODT / ODT Starter Kit / Starter Kit / Tablet / XR / XR Starter Kit lamotrigine starter kits (generic for Lamictal®) lamotrigine ER tablet / ODT / ODT Starter Kit / Starter Kit (generic for Lamictal® XR / ODT) Lyrica® Capsule / Solution Nayzilam® Nasal Spray Neurontin® Capsule / Solution / Tablet Onti® Suspension / Tablet Qudexy® XR Capsule rufinamide suspension (generic for Banzel® Suspension) NOT REVIEWED Sabril® Tablet
topiramate sprinkle capsule / tablet (generic for Topamax®)	Keppra® Tablet / Solution / XR Tablet Klonopin® Tablet Lamictal® Chewable / ODT / ODT Starter Kit / Starter Kit / Tablet / XR / XR Starter Kit lamotrigine starter kits (generic for Lamictal®) lamotrigine ER tablet / ODT / ODT Starter Kit / Starter Kit (generic for Lamictal® XR / ODT) Lyrica® Capsule / Solution Nayzilam® Nasal Spray Neurontin® Capsule / Solution / Tablet Onfi® Suspension / Tablet Qudexy® XR Capsule Qudexy® XR Capsule Sabrii® Tablet Spritam® Tablet
topiramate sprinkle capsule / tablet (generic for Topamax®)	Keppra® Tablet / Solution / XR Tablet  Klonopin® Tablet  Lamictal® Chewable / ODT / ODT Starter Kit / Starter Kit / Tablet / XR / XR Starter Kit  lamotrigine starter kits (generic for Lamictal®)  lamotrigine ER tablet / ODT / ODT Starter Kit / Starter Kit (generic for Lamictal® XR / ODT)  Lyrica® Capsule / Solution  Nayzilam® Nasal Spray  Neurontin® Capsule / Solution / Tablet  Onfi® Suspension / Tablet  Qudexy® XR Capsule  rufinamide suspension (generic for Banzel® Suspension) NOT REVIEWED  Sabril® Tablet  Sympazan® Film  tiagabine tablet (generic for Gabitril®)  Topamax® Sprinkle Capsule / Tablet
topiramate sprinkle capsule / tablet (generic for Topamax®)	Keppra® Tablet / Solution / XR Tablet  Klonopin® Tablet  Lamictal® Chewable / ODT / ODT Starter Kit / Starter Kit / Tablet / XR / XR Starter Kit  lamotrigine starter kits (generic for Lamictal®)  lamotrigine ER tablet / ODT / ODT Starter Kit / Starter Kit (generic for Lamictal® XR / ODT)  Lyrica® Capsule / Solution  Nayzilam® Nasal Spray  Neurontin® Capsule / Solution / Tablet  Onfi® Suspension / Tablet  Qudexy® XR Capsule  rufinamide suspension (generic for Banzel® Suspension) NOT REVIEWED  Sabril® Tablet  Sympazan® Film  tiagabine tablet (generic for Gabitril®)  Topamax® Sprinkle Capsule / Tablet  topiramate ER capsule (generic for Qudexy®)
topiramate sprinkle capsule / tablet (generic for Topamax®)	Keppra® Tablet / Solution / XR Tablet Klonopin® Tablet Lamictal® Chewable / ODT / ODT Starter Kit / Starter Kit / Tablet / XR / XR Starter Kit lamotrigine starter kits (generic for Lamictal®) lamotrigine ER tablet / ODT / ODT Starter Kit / Starter Kit (generic for Lamictal® XR / ODT) Lyrica® Capsule / Solution Nayzilam® Nasal Spray Neurontin® Capsule / Solution / Tablet Onfa® Suspension / Tablet Qudexy® XR Capsule rufinamide suspension (generic for Banzel® Suspension) NOT REVIEWED Sabril® Tablet Spritam® Tablet Sympazan® Film tiagabine tablet (generic for Gabitril®) Topamax® Sprinkle Capsule / Tablet topiramate ER capsule (generic for Qudexy®) Trokendi® XR Capsule
topiramate sprinkle capsule / tablet (generic for Topamax®)	Keppra® Tablet / Solution / XR Tablet Klonopin® Tablet Lamictal® Chewable / ODT / ODT Starter Kit / Starter Kit / Tablet / XR / XR Starter Kit lamotrigine starter kits (generic for Lamictal®) lamotrigine ER tablet / ODT / ODT Starter Kit / Starter Kit (generic for Lamictal® XR / ODT) Lyrica® Capsule / Solution Nayzilam® Nasal Spray Neurontin® Capsule / Solution / Tablet Onfa® Suspension / Tablet Qudexy® XR Capsule Qudexy® XR Capsule Tufinamide suspension (generic for Banzel® Suspension) NOT REVIEWED Sabril® Tablet Spritam® Tablet Sympazan® Film tiagabine tablet (generic for Gabitril®) Topamax® Sprinkle Capsule / Tablet topiramate ER capsule (generic for Qudexy®) Trokendi® XR Capsule Valtoco® Nasal Spray
topiramate sprinkle capsule / tablet (generic for Topamax®)	Keppra® Tablet / Solution / XR Tablet  Klonopin® Tablet  Lamictal® Chewable / ODT / ODT Starter Kit / Starter Kit / Tablet / XR / XR Starter Kit  lamotrigine starter kits (generic for Lamictal®)  Lyrica® Capsule / Solution  Nayzilam® Nasal Spray  Neurontin® Capsule / Solution / Tablet  Onf® Suspension / Tablet  Qudexy® XR Capsule  rufinamide suspension (generic for Banzel® Suspension) NOT REVIEWED  Sabril® Tablet  Spritam® Tablet  Sympazan® Film  tiagabine tablet (generic for Gabitri®)  Topamax® Sprinkle Capsule / Tablet  topiramate ER capsule (generic for Qudexy®)  Trokend® XR Capsule  Valtoco® Nasal Spray
topiramate sprinkle capsule / tablet (generic for Topamax®)	Keppra® Tablet / Solution / XR Tablet Klonopin® Tablet Lamictal® Chewable / ODT / ODT Starter Kit / Starter Kit / Tablet / XR / XR Starter Kit lamotrigine starter kits (generic for Lamictal®) lamotrigine ER tablet / ODT / ODT Starter Kit / Starter Kit (generic for Lamictal® XR / ODT) Lyrica® Capsule / Solution Nayzilam® Nasal Spray Neurontin® Capsule / Solution / Tablet Ont® Suspension / Tablet Qudexy® XR Capsule rufinamide suspension (generic for Banzel® Suspension) NOT REVIEWED Sabril® Tablet Spritam® Tablet Sympazan® Film tiagabine tablet (generic for Gabitril®) Topamax® Sprinkle Capsule / Tablet topiramate ER capsule (generic for Qudexy®) Trokend® XR Capsule Valtoco® Nasal Spray vigabatrin powder packet / tablet (generic for Sabril® Powder Packet / Tablet) Vigadrone® Powder Packet
topiramate sprinkle capsule / tablet (generic for Topamax®)	Keppra® Tablet / Solution / XR Tablet  Klonopin® Tablet  Lamictal® Chewable / ODT / ODT Starter Kit / Starter Kit / Tablet / XR / XR Starter Kit  lamotrigine starter kits (generic for Lamictal®)  lamotrigine ER tablet / ODT / ODT Starter Kit / Starter Kit (generic for Lamictal® XR / ODT)  Lyrica® Capsule / Solution  Nayzilam® Nasal Spray  Neurontin® Capsule / Solution / Tablet  Onfo Suspension / Tablet  Qudexy® XR Capsule  rufinamide suspension (generic for Banzel® Suspension) NOT REVIEWED  Sabril® Tablet  Sympazan® Falbet  Sympazan® Film  tiagabine tablet (generic for Gabitril®)  Topamax® Sprinkle Capsule / Tablet  topiramate ER capsule (generic for Qudexy®)  Trokend® XR Capsule  vigabatrin powder packet / tablet (generic for Sabril® Powder Packet / Tablet)  Vigadrone® Powder Packet  Vinpat® Solution / Starter Kit / Tablet
topiramate sprinkle capsule / tablet (generic for Topamax®)	Keppra® Tablet / Solution / XR Tablet Klonopin® Tablet Lamictal® Chewable / ODT / ODT Starter Kit / Starter Kit / Tablet / XR / XR Starter Kit lamotrigine starter kits (generic for Lamictal®) lamotrigine ER tablet / ODT / ODT Starter Kit / Starter Kit (generic for Lamictal® XR / ODT) Lyrica® Capsule / Solution Nayzilam® Nasal Spray Neurontin® Capsule / Solution / Tablet Ont® Suspension / Tablet Qudexy® XR Capsule rufinamide suspension (generic for Banzel® Suspension) NOT REVIEWED Sabril® Tablet Spritam® Tablet Sympazan® Film tiagabine tablet (generic for Gabitril®) Topamax® Sprinkle Capsule / Tablet topiramate ER capsule (generic for Qudexy®) Trokend® XR Capsule Valtoco® Nasal Spray vigabatrin powder packet / tablet (generic for Sabril® Powder Packet / Tablet) Vigadrone® Powder Packet
topiramate sprinkle capsule / tablet (generic for Topamax®) zonisamide capsule (generic for Zonegran®)	Keppra® Tablet / Solution / XR Tablet  Klonopin® Tablet  Lamictal® Chewable / ODT / ODT Starter Kit / Starter Kit / Tablet / XR / XR Starter Kit  lamotrigine starter kits (generic for Lamictal®)  lamotrigine ER tablet / ODT / ODT Starter Kit / Starter Kit (generic for Lamictal® XR / ODT)  Lyrica® Capsule / Solution  Nayzilam® Nasal Spray  Neurontin® Capsule / Solution / Tablet  Onfo Suspension / Tablet  Qudexy® XR Capsule  rufinamide suspension (generic for Banzel® Suspension) NOT REVIEWED  Sabril® Tablet  Sympazan® Falbet  Sympazan® Film  tiagabine tablet (generic for Gabitril®)  Topamax® Sprinkle Capsule / Tablet  topiramate ER capsule (generic for Qudexy®)  Trokend® XR Capsule  vigabatrin powder packet / tablet (generic for Sabril® Powder Packet / Tablet)  Vigadrone® Powder Packet  Vinpat® Solution / Starter Kit / Tablet
topiramate sprinkle capsule / tablet (generic for Topamax®) zonisamide capsule (generic for Zonegran®)  Zonisamide capsule (generic for Zonegran®)  ANTI-INFECT	Keppra® Tablet / Solution / XR Tablet Klonopin® Tablet Lamictal® Chewable / ODT / ODT Starter Kit / Starter Kit / Tablet / XR / XR Starter Kit lamotrigine starter kits (generic for Lamictal®) lamotrigine ER tablet / ODT / ODT Starter Kit / Starter Kit (generic for Lamictal® XR / ODT) Lyrica® Capsule / Solution Nayzilam® Nasal Spray Neurontin® Capsule / Solution / Tablet Onfi® Suspension / Tablet Qudexy® XR Capsule Tufinamide suspension (generic for Banzel® Suspension) NOT REVIEWED Sabril® Tablet Spritam® Tablet Sympazan® Film tiagabine tablet (generic for Gabitril®) Topamax® Sprinkle Capsule / Tablet topiramate ER capsule (generic for Qudexy®) Trokendi® XR Capsule Valtoco® Nasal Spray vigabatrin powder packet / tablet (generic for Sabril® Powder Packet / Tablet) Vigadrone® Powder Packet Vinpad® Solution / Starter Kit / Tablet Xcopri® Tablet / Titration Pack
topiramate sprinkle capsule / tablet (generic for Topamax®) zonisamide capsule (generic for Zonegran®)  Zonisamide capsule (generic for Zonegran®)  ANTI-INFECT	Keppra® Tablet / Solution / XR Tablet Klonopin® Tablet Lamictal® Chewable / ODT / ODT Starter Kit / Starter Kit / Tablet / XR / XR Starter Kit lamotrigine starter kits (generic for Lamictal®) Lamotrigine ER tablet / ODT / ODT Starter Kit / Starter Kit (generic for Lamictal® XR / ODT) Lyrica® Capsule / Solution Nayzilam® Nasal Spray Neurontin® Capsule / Solution / Tablet Onf® Suspension / Tablet Qudexy® XR Capsule Tufinamide suspension (generic for Banzel® Suspension) NOT REVIEWED Sabril® Tablet Spritam® Tablet Sympazan® Film tiagabine tablet (generic for Gabitri®) Topamax® Sprinkle Capsule / Tablet topiramate ER capsule (generic for Qudexy®) Trokendi® XR Capsule Valtoco® Nasal Spray vigabatrin powder packet / tablet (generic for Sabril® Powder Packet / Tablet) Vipadrone® Powder Packet Vimpat® Solution / Starter Kit / Tablet Xcopri® Tablet / Titration Pack
topiramate sprinkle capsule / tablet (generic for Topamax®)  zonisamide capsule (generic for Zonegran®)  zonisamide capsule (generic for Zonegran®)  ANTI-INFECT	Keppra® Tablet / Solution / XR Tablet Klonopin® Tablet Lamictal® Chewable / ODT / ODT Starter Kit / Starter Kit / Tablet / XR / XR Starter Kit lamotrigine starter kits (generic for Lamictal®) lamotrigine ER tablet / ODT / ODT Starter Kit / Starter Kit (generic for Lamictal® XR / ODT) Lyrica® Capsule / Solution Nayzilam® Nasal Spray Neurontin® Capsule / Solution / Tablet Ont® Suspension / Tablet Qudexy® XR Capsule rufinamide suspension (generic for Banzel® Suspension) NOT REVIEWED Sabril® Tablet Spritam® Tablet Sympazan® Film tiagabine tablet (generic for Gabitril®) Topamax® Sprinkle Capsule / Tablet topiramate ER capsule (generic for Qudexy®) Trokend® XR Capsule Valtoco® Nasal Spray vigabatrin powder packet / tablet (generic for Sabril® Powder Packet / Tablet) Vigadrone® Powder Packet Vinpat® Solution / Starter Kit / Tablet Xcopri® Tablet / Titration Pack  ITVES - SYSTEMIC TIBIOTICS alosporins and Related
topiramate sprinkle capsule / tablet (generic for Topamax®)  zonisamide capsule (generic for Zonegran®)  ANTI-INFECT  ANTI-INFECT  Penicillins, Ceph  Preferred  amoxicillin capsule / chewable / suspension / tablet (generic for Amoxit®, Trimox®)	Keppra® Tablet / Solution / XR Tablet Klonopin® Tablet Lamictal® Chewable / ODT / ODT Starter Kit / Starter Kit / Tablet / XR / XR Starter Kit lamotrigine starter kits (generic for Lamictal®) lamotrigine ER tablet / ODT / ODT Starter Kit / Starter Kit (generic for Lamictal® XR / ODT) Lyrica® Capsule / Solution Nayzilam® Nasal Spray Neurontin® Capsule / Solution / Tablet Onta® Suspension / Tablet Qudexy® XR Capsule rufinamide suspension (generic for Banzel® Suspension) NOT REVIEWED Sabril® Tablet Syriparan® Tablet Syriparan® Tablet Sympazan® Film tiagabine tablet (generic for Gabitril®) Topamax® Sprinkle Capsule / Tablet topiramate ER capsule (generic for Qudexy®) Trokendr® XR Capsule Valtoco® Nasal Spray vigabatrin powder packet / tablet (generic for Sabril® Powder Packet / Tablet) Vigadrone® Powder Packet Vimpat® Solution / Starter Kit / Tablet Xcoppr® Tablet / Titration Pack  INVES - SYSTEMIC TIBIOTICS alosporins and Related  Non-Preferred amoxicillin-clavulanate chewable tablet (generic for Augmentin®)
topiramate sprinkle capsule / tablet (generic for Topamax®)  zonisamide capsule (generic for Zonegran®)  ANTI-INFECT  ANTI	Keppra® Tablet / Solution / XR Tablet Klonopin® Tablet Lamictal® Chewable / ODT / ODT Starter Kit / Starter Kit / Tablet / XR / XR Starter Kit lamotrigine starter kits (generic for Lamictal®) lamotrigine ER tablet / ODT / ODT Starter Kit / Starter Kit (generic for Lamictal® XR / ODT) Lyrica® Capsule / Solution Nayzilam® Nasal Spray Neurontin® Capsule / Solution / Tablet Onfa® Suspension / Tablet Qudexy® XR Capsule rufinamide suspension (generic for Banzel® Suspension) NOT REVIEWED Sabril® Tablet Spritam® Tablet Syrupazan® Film tiagabine tablet (generic for Gabitril®) Topamax® Sprinkle Capsule / Tablet topiramate ER capsule (generic for Qudexy®) Trokendi® XR Capsule Valtoco® Nasal Spray vigabatrin powder packet / tablet (generic for Sabril® Powder Packet / Tablet) Xcopri® Tablet / Titration Pack  ITVES - SYSTEMIC TIBIOTICS alosporins and Related  Non-Preferred amoxicillin-clavulanate chewable tablet (generic for Augmentin®) Augmentin® Suspension / XR Tablet
topiramate sprinkle capsule / tablet (generic for Topamax®)  zonisamide capsule (generic for Zonegran®)  ANTI-INFECT  ANTI-INFECT  Penicillins, Ceph  Preferred  amoxicillin capsule / chewable / suspension / tablet (generic for Amoxit®, Trimox®)	Keppra® Tablet / Solution / XR Tablet Klonopin® Tablet Lamictal® Chewable / ODT / ODT Starter Kit / Starter Kit / Tablet / XR / XR Starter Kit lamotrigine starter kits (generic for Lamictal®) lamotrigine ER tablet / ODT / ODT Starter Kit / Starter Kit (generic for Lamictal® XR / ODT) Lyrica® Capsule / Solution Nayzilam® Nasal Spray Neurontin® Capsule / Solution / Tablet Onti® Suspension / Tablet Qudexy® XR Capsule rufinamide suspension (generic for Banzel® Suspension) NOT REVIEWED Sabril® Tablet Syriparan® Tablet Syriparan® Tablet Sympazan® Film tiagabine tablet (generic for Gabitril®) Topamax® Sprinkle Capsule / Tablet topiramate ER capsule (generic for Qudexy®) Trokendi® XR Capsule Valtoco® Nasal Spray vigabatrin powder packet / tablet (generic for Sabril® Powder Packet / Tablet) Vigadrone® Powder Packet Vimpal® Solution / Starter Kit / Tablet Xcoppr® Tablet / Titration Pack  INVES - SYSTEMIC TIBIOTICS alosporins and Related  Non-Preferred amoxicillin-clavulanate chewable tablet (generic for Augmentin®)

## Effective: 06/01/2021

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 NOT REVIEWED. Drugs requiring prior authorization, clinical criteria and prior authorization request forms can be found at: <a href="https://www.nctracks.nc.gov/content/public/providers/pharmacy.html">https://www.nctracks.nc.gov/content/public/providers/pharmacy.html</a>

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

Bicillin C-R injection	cefpodoxime suspension / tablet (generic for Vantin®)
cefadroxil capsule / suspension (generic for Duricef <sup>®</sup> )	Keflex® Capsule
cefdinir capsule / suspension (generic for Omnicef®)	Suprax® Capsule / Chewable / Suspension
cefixime capsule / suspension (generic for Suprax® Capsule / Suspension)	
cefprozil suspension / tablet (generic for Cefzil®)	
cefuroxime tablet (generic for Ceftin <sup>®</sup> )	
cephalexin capsule / suspension / tablet (generic for Keflex®)	
dicloxacillin capsule	
nafcillin injection / vial	
oxacillin injection / vial	
penicillin G injection / vial	
penicillin V suspension / tablet	
piperacillin - tazobactam injection / vial	
Pfizerpen <sup>®</sup> injection / vial	
Unasyn <sup>®</sup> injection / vial	
Zosyn <sup>®</sup> injection / vial	
Lincosamide	s and Oxazolidinones
Preferred	Non-Preferred
Cleocin® Granules	Cleocin® Capsules / Injection
clindamycin capsules / solution (generic for Cleocin®)	clindamycin injection (generic for Cleocin® Injection)
linezolid suspension (oral) / tablet (generic for Zyvox®)	Lincocin <sup>®</sup> Vial
, , , , , , , , , , , , , , , , , , ,	lincomycin injection (generic for Lincocin Vial®)
	linezolid IV solution (generic for Zyvox®)
	Sivextro® Tablet / Vial
	Synercid® Vial
	Zyvox® Tablet / IV Solution / Suspension
Macroli	les and Ketolides
Preferred	Non-Preferred
azithromycin powder packet / suspension / tablet (generic for Zithromax®)	clarithromycin ER tablet (generic for Biaxin XL®)
clarithromycin suspension / tablet (generic for Biaxin")  E.E.S. Granules / Filmtab	erythromycin e.s. 200mg suspension (generic for E.E.S. Suspension)  Ery-Tab Tablet
E.E.S. Granules / Filman  Eryped® Suspension	
	Zithromax® Powder Packet / Suspension / Tablet / Tri-Pak / Z-Pak
Erythrocin® Filmtab	
erythromycin EC capsule (generic for Eryc®)	
erythromycin filmtab	
erythromycin e.s. tablet (generic for E.E.S <sup>®</sup> Filmtab)	
XF.	11.1
	romidazoles
Preferred	Non-Preferred
metronidazole tablet (generic for Flagyl®)	Difficid® Suspension / Tablet - Trial and failure of only vancomycin is required for treatment of Clostridium difficile
vancomycin cansule (generic for Vancocin®)	
vancomycin capsule (generic for Vancocin <sup>®</sup> )	Firvanq <sup>™</sup> Solution
rancompeni capone (generic tor vancociii )	Flagyl® Capsule / Tablet
такотуст сароно (делено ня учисост )	Flagyl® Capsule / Tablet metronidazole capsule (generic for Flagyl®)
rancompen capone (generic tor vancociii )	Flagyl® Capsule / Tablet metronidazole capsule (generic for Flagyl®) neomycin tablet (generic for Mycifradin®)
тиколијон хироно (делето ня таколи <i>)</i>	Flagyl® Capsule / Tablet metronidazole capsule (generic for Flagyl®)
Tuncomyen capone (generic tot vancom)	Flagyl® Capsule / Tablet metronidazole capsule (generic for Flagyl®) neomycin tablet (generic for Mycifradin®) nitazoxanide tablet (generic for Alinia® Tablet) NOT REVIEWED paromomycin capsule (generic for Humatin®)
Tuncompens rapone (generic 108 Yankolin )	Flagyl® Capsule / Tablet  metronidazole capsule (generic for Flagyl®)  neomycin tablet (generic for Mycifradin®)  nitazoxanide tablet (generic for Alinia® Tablet) NOT REVIEWED  paromomycin capsule (generic for Humatin®)  Solosec® Granules
Tunkomyeni vapoure (generic 101 Yankoviii )	Flagyl® Capsule / Tablet metronidazole capsule (generic for Flagyl®) neomycin tablet (generic for Mycifradin®) mitazoxanide tablet (generic for Alinia® Tablet) NOT REVIEWED paromomycin capsule (generic for Humatin®) Solosec™ Granules tinidazole tablet (generic for Tindamax®)
Tuncompen supone (generic 108 Validonii )	Flagyl® Capsule / Tablet metronidazole capsule (generic for Flagyl®) neomycin tablet (generic for Mycifradin®) nitazoxanide tablet (generic for Alinia® Tablet) NOT REVIEWED paromonycin capsule (generic for Humatin®) Solosec™ Granules tinidazole tablet (generic for Tindamax®) Vancocin® Capsule
Tuncompen supone (generic tot valuosili )	Flagyl® Capsule / Tablet metronidazole capsule (generic for Flagyl®) neomycin tablet (generic for Mycifradin®) mitazoxanide tablet (generic for Alinia® Tablet) NOT REVIEWED paromomycin capsule (generic for Humatin®) Solosec™ Granules tinidazole tablet (generic for Tindamax®)
	Flagyl® Capsule / Tablet metronidazole capsule (generic for Flagyl®) neomycin tablet (generic for Mycifradin®) nitazoxanide tablet (generic for Alinia® Tablet) NOT REVIEWED parromonycin capsule (generic for Humatin®) Solosec™ Granules tinidazole tablet (generic for Tindamax®) Vancocin® Capsule Xifaxan® Tablet - Exemption for a diagnosis of Hepatic Encephalopathy
	Flagyl® Capsule / Tablet metronidazole capsule (generic for Flagyl®) neomycin tablet (generic for Mycifradin®) nitazoxanide tablet (generic for Alinia® Tablet) NOT REVIEWED parromonycin capsule (generic for Humatin®) Solosec™ Granules tinidazole tablet (generic for Tindamax®) Vancocin® Capsule Xifaxan® Tablet - Exemption for a diagnosis of Hepatic Encephalopathy uinolones
	Flagyl® Capsule / Tablet metronidazole capsule (generic for Flagyl®) neomycin tablet (generic for Mycifradin®) nitazoxanide tablet (generic for Alinia® Tablet) NOT REVIEWED parromonycin capsule (generic for Humatin®) Solosec™ Granules tinidazole tablet (generic for Tindamax®) Vancocin® Capsule Xifaxan® Tablet - Exemption for a diagnosis of Hepatic Encephalopathy
	Flagyl® Capsule / Tablet metronidazole capsule (generic for Flagyl®) neomycin tablet (generic for Mycifradin®) nitazoxanide tablet (generic for Alinia® Tablet) NOT REVIEWED paromonycin capsule (generic for Humatin®) Solosec™ Granules tinidazole tablet (generic for Tindamax®) Vancocin® Capsule Xifaxan® Tablet - Exemption for a diagnosis of Hepatic Encephalopathy uinolones
Preferred	Flagyl® Capsule / Tablet  metronidazole capsule (generic for Flagyl®)  neomycin tablet (generic for Mycifradin®)  nitazoxanide tablet (generic for Alinia® Tablet) NOT REVIEWED  paromomycin capsule (generic for Humatin®)  Solosec™ Granules  tinidazole tablet (generic for Tindamax®)  Vancocin® Capsule  Xifaxan® Tablet - Exemption for a diagnosis of Hepatic Encephalopathy  uinolones  Non-Preferred
Preferred Cipro® Suspension	Flagyl® Capsule / Tablet  metronidazole capsule (generic for Flagyl®) neomycin tablet (generic for Mycifradin®) nitazoxanide tablet (generic for Alinia® Tablet) NOT REVIEWED paromomycin capsule (generic for Humatin®) Solosec™ Granules tinidazole tablet (generic for Tindamax®) Vancocin® Capsule Xifaxan® Tablet - Exemption for a diagnosis of Hepatic Encephalopathy  uinolones  Non-Preferred Baxdela™ Tablet
Preferred  Cipro® Suspension ciprofloxacin tablet (generic for Cipro®)	Flagyl® Capsule / Tablet  metronidazole capsule (generic for Flagyl®) neomycin tablet (generic for Mycifradin®) nitazoxanide tablet (generic for Alinia® Tablet) NOT REVIEWED paromomycin capsule (generic for Humatin®) Solosec™ Granules tinidazole tablet (generic for Tindamax®) Vancocin® Capsule Xifaxan® Tablet - Exemption for a diagnosis of Hepatic Encephalopathy  uninolones  Non-Preferred  Baxdela™ Tablet Cipro® Tablet
Preferred  Cipro® Suspension ciprofloxacin tablet (generic for Cipro®) levofloxacin tablet (generic for Levaquin®)	Flagyl® Capsule / Tablet metronidazole capsule (generic for Flagyl®) neomycin tablet (generic for Mycifradin®) nitazoxanide tablet (generic for Alinia® Tablet) NOT REVIEWED paromomycin capsule (generic for Humatin®) Solosec® Granules tinidazole tablet (generic for Tindamax®) Vancocin® Capsule Xifaxan® Tablet - Exemption for a diagnosis of Hepatic Encephalopathy uinolones  Non-Preferred  Baxdela™ Tablet Cipro® Tablet ciprofloxacin ER tablet / suspension (generic for Cipro® XR / Suspension)
Preferred  Cipro® Suspension ciprofloxacin tablet (generic for Cipro®) levofloxacin tablet (generic for Levaquin®)	Flagyl® Capsule / Tablet metronidazole capsule (generic for Flagyl®) neomycin tablet (generic for Mycifradin®) nitazoxanide tablet (generic for Alinia® Tablet) NOT REVIEWED paromomycin capsule (generic for Humatin®) Solosee™ Granules tinidazole tablet (generic for Tindamax®) Vancocin® Capsule Xifaxan® Tablet - Exemption for a diagnosis of Hepatic Encephalopathy utinolones  Non-Preferred  Baxdela™ Tablet Cipro® Tablet ciprofloxacin ER tablet / suspension (generic for Cipro® XR / Suspension) levofloxacin solution (generic for Levaquin® Solution)
Preferred  Cipro® Suspension ciprofloxacin tablet (generic for Cipro®) levofloxacin tablet (generic for Levaquin®) moxifloxacin tablet (generic for Avelox®)	Flagyl® Capsule / Tablet metronidazole capsule (generic for Flagyl®) neomycin tablet (generic for Mycifradin®) nitazoxanide tablet (generic for Alinia® Tablet) NOT REVIEWED paromomycin capsule (generic for Humatin®) Solosee™ Granules tinidazole tablet (generic for Tindamax®) Vancocin® Capsule Xifaxan® Tablet - Exemption for a diagnosis of Hepatic Encephalopathy utinolones  Non-Preferred  Baxdela™ Tablet Cipro® Tablet ciprofloxacin ER tablet / suspension (generic for Cipro® XR / Suspension) levofloxacin solution (generic for Levaquin® Solution)
Preferred  Cipro® Suspension ciprofloxacin tablet (generic for Cipro®) levofloxacin tablet (generic for Levaquin®) moxifloxacin tablet (generic for Avelox®)	Flagyl® Capsule / Tablet metronidazole capsule (generic for Flagyl®) neomycin tablet (generic for Mycifradin®) nitazoxanide tablet (generic for Alinia® Tablet) NOT REVIEWED paromomycin capsule (generic for Humatin®) Solosec™ Granules tinidazole tablet (generic for Tindamax®) Vancocin® Capsule Xifaxan® Tablet - Exemption for a diagnosis of Hepatic Encephalopathy  tuinolones  Non-Preferred  Baxdela™ Tablet Cipro® Tablet ciprofloxacin Et tablet / suspension (generic for Cipro® XR / Suspension) levofloxacin solution (generic for Levaquin® Solution) ofloxacin tablet (generic for Floxin®)
Preferred  Cipro® Suspension ciprofloxacin tablet (generic for Cipro®) levofloxacin tablet (generic for Levaquin®) moxifloxacin tablet (generic for Avelox®)  Tetracy	Flagyl® Capsule / Tablet metronidazole capsule (generic for Flagyl®) neomycin tablet (generic for Mycifradin®) mitazoxanide tablet (generic for Alinia® Tablet) NOT REVIEWED paromomycin capsule (generic for Humatin®) Solosec™ Granules tinidazole tablet (generic for Tindamax®) Vancocin® Capsule Xifaxan® Tablet - Exemption for a diagnosis of Hepatic Encephalopathy  uinolones  Non-Preferred  Baxdela™ Tablet Cipro® Tablet ciprofloxacin ER tablet / suspension (generic for Cipro® XR / Suspension) levofloxacin solution (generic for Levaquin® Solution) ofloxacin tablet (generic for Floxin®)  Eline Derivatives
Preferred  Cipro® Suspension ciprofloxacin tablet (generic for Cipro®) levofloxacin tablet (generic for Levaquin®) moxifloxacin tablet (generic for Avelox®)  Tetracy Preferred  doxycycline hyclate capsule / tablet (generic for Vibramycin®, Vibra-Tab®)	Flagyl® Capsule / Tablet metronidazole capsule (generic for Flagyl®) neomycin tablet (generic for Mycifradin®) nitazoxanide tablet (generic for Alinia® Tablet) NOT REVIEWED paromomycin capsule (generic for Humatin®) Solosec™ Granules tinidazole tablet (generic for Tindamax®) Vancocin® Capsule Xifaxan® Tablet - Exemption for a diagnosis of Hepatic Encephalopathy  Liunolones  Non-Preferred  Baxdela™ Tablet Cipro® Tablet ciprofloxacin ER tablet / suspension (generic for Cipro® XR / Suspension) levofloxacin solution (generic for Levaquin® Solution) ofloxacin tablet (generic for Floxin®)  Line Derivatives  Non-Preferred
Preferred  Cipro® Suspension ciprofloxacin tablet (generic for Cipro®) levofloxacin tablet (generic for Levaquin®) moxifloxacin tablet (generic for Avelox®)  Tetracy Preferred  doxycycline hyclate capsule / tablet (generic for Vibramycin®, Vibra-Tab®) doxycycline monohydrate 50mg, 100mg capsule (generic for Monodox®)	Flagyl® Capsule / Tablet metronidazole capsule (generic for Flagyl®) neomycin tablet (generic for Mycifradin®) mitazoxanide tablet (generic for Altinia® Tablet) NOT REVIEWED paromonycin capsule (generic for Humatin®) Solosse® Granules tinidazole tablet (generic for Tindamax®) Vancocin® Capsule Xifaxan® Tablet - Exemption for a diagnosis of Hepatic Encephalopathy  uinolones  Non-Preferred  Baxdela™ Tablet Cipro® Tablet ciprofloxacin ER tablet / suspension (generic for Cipro® XR / Suspension) levofloxacin solution (generic for Levaquin® Solution) ofloxacin tablet (generic for Floxin®)  Eline Derivatives  Non-Preferred  demeclocycline tablet (generic for Declomycin®) Doryx® DR / MPC Tablet
Preferred  Cipro® Suspension ciprofloxacin tablet (generic for Cipro®) levofloxacin tablet (generic for Levaquin®) moxifloxacin tablet (generic for Avelox®)  Tetracy Preferred  doxycycline hyclate capsule / tablet (generic for Vibramycin®, Vibra-Tab®)	Flagyl® Capsule / Tablet metronidazole capsule (generic for Flagyl®) neomycin tablet (generic for Mycifradin®) nitazoxanide tablet (generic for Alinia® Tablet) NOT REVIEWED paromomycin capsule (generic for Humatin®) Solosee® Granules tinidazole tablet (generic for Tindamax®) Vancocin® Capsule Xifaxan® Tablet - Exemption for a diagnosis of Hepatic Encephalopathy utinolones  Non-Preferred  Baxdela® Tablet Cipro® Tablet ciprofloxacin ER tablet / suspension (generic for Cipro® XR / Suspension) levofloxacin solution (generic for Levaquin® Solution) ofloxacin tablet (generic for Floxin®)  Line Derivatives  Non-Preferred  demeclocycline tablet (generic for Declomycin®) Doryx® DR / MPC Tablet doxycycline hyclate DR tablet (generic for Doryx® DR)
Preferred  Cipro® Suspension ciprofloxacin tablet (generic for Cipro®) levofloxacin tablet (generic for Levaquin®) moxifloxacin tablet (generic for Avelox®)  Tetracy Preferred  doxycycline hyclate capsule / tablet (generic for Vibramycin®, Vibra-Tab®) doxycycline monohydrate 50mg, 100mg capsule (generic for Monodox®)	Flagyl® Capsule / Tablet metronidazole capsule (generic for Flagyl®) neomycin tablet (generic for Mycifradin®) nitazoxanide tablet (generic for Alinia® Tablet) NOT REVIEWED paromomycin capsule (generic for Humatin®) Solosec™ Granules tinidazole tablet (generic for Tindamax®) Vancocin® Capsule Xifaxan® Tablet - Exemption for a diagnosis of Hepatic Encephalopathy  uinolones  Non-Preferred  Baxdela™ Tablet Cipro® Tablet ciprofloxacin ER tablet / suspension (generic for Cipro® XR / Suspension) levofloxacin solution (generic for Levaquin® Solution) ofloxacin tablet (generic for Floxin®)  Sine Derivatives  Non-Preferred  demeclocycline tablet (generic for Declomycin®) Doryx® DR / MPC Tablet doxycycline hyclate DR tablet (generic for Doryx® DR) doxycycline monohydrate 75mg, 150mg capsule (generic for Monodox®, Adoxa®)
Preferred  Cipro® Suspension ciprofloxacin tablet (generic for Cipro®) levofloxacin tablet (generic for Levaquin®) moxifloxacin tablet (generic for Avelox®)  Tetracy Preferred  doxycycline hyclate capsule / tablet (generic for Vibramycin®, Vibra-Tab®) doxycycline monohydrate 50mg, 100mg capsule (generic for Monodox®)	Flagyl® Capsule / Tablet metronidazole capsule (generic for Flagyl®) neomycin tablet (generic for Mycifradin®) nitazoxanide tablet (generic for Alinia® Tablet) NOT REVIEWED paromomycin capsule (generic for Humatin®) Solosec™ Granules tinidazole tablet (generic for Tindamax®) Vancocin® Capsule Xifaxan® Tablet - Exemption for a diagnosis of Hepatic Encephalopathy  uinolones  Non-Preferred  Baxdela™ Tablet Cipro® Tablet ciprofloxacin ER tablet / suspension (generic for Cipro® XR / Suspension) levofloxacin solution (generic for Levaquin® Solution) ofloxacin tablet (generic for Floxin®)  Line Derivatives  Non-Preferred  demeclocycline tablet (generic for Declomycin®) Doryx® DR / MPC Tablet doxycycline hyclate DR tablet (generic for Doryx® DR) doxycycline monohydrate 40mg IR-DR capsule (generic for Monodox®, Adoxa®) doxycycline monohydrate 40mg IR-DR capsule (generic for Oracea®)
Preferred  Cipro® Suspension ciprofloxacin tablet (generic for Cipro®) levofloxacin tablet (generic for Levaquin®) moxifloxacin tablet (generic for Avelox®)  Tetracy Preferred  doxycycline hyclate capsule / tablet (generic for Vibramycin®, Vibra-Tab®) doxycycline monohydrate 50mg, 100mg capsule (generic for Monodox®)	Flagyl® Capsule / Tablet metronidazole capsule (generic for Flagyl®) neomycin tablet (generic for Mycifradin®) nitazoxanide tablet (generic for Alinia® Tablet) NOT REVIEWED paromomycin capsule (generic for Humatin®) Solosec™ Granules tinidazole tablet (generic for Tindamax®) Vancocin® Capsule Xifaxan® Tablet - Exemption for a diagnosis of Hepatic Encephalopathy  Liunolones  Non-Preferred  Baxdela™ Tablet Cipro® Tablet ciprofloxacin ER tablet / suspension (generic for Cipro® XR / Suspension) levofloxacin solution (generic for Levaquin® Solution) ofloxacin tablet (generic for Floxin®)  Line Derivatives  Non-Preferred  demeclocycline tablet (generic for Declomycin®) Doryx® DR / MPC Tablet doxycycline monohydrate 75mg, 150mg capsule (generic for Monodox®, Adoxa®) doxycycline monohydrate 40mg IR-DR capsule (generic for Oracaa®) doxycycline monohydrate 40mg IR-DR capsule (generic for Oracaa®) doxycycline monohydrate 50mg, 75mg, 100mg, 150mg tablet
Preferred  Cipro® Suspension ciprofloxacin tablet (generic for Cipro®) levofloxacin tablet (generic for Levaquin®) moxifloxacin tablet (generic for Avelox®)  Tetracy Preferred  doxycycline hyclate capsule / tablet (generic for Vibramycin®, Vibra-Tab®) doxycycline monohydrate 50mg, 100mg capsule (generic for Monodox®)	Flagyl® Capsule / Tablet metronidazole capsule (generic for Flagyl®) neomycin tablet (generic for Mycifradin®) mitazoxanide tablet (generic for Alinia® Tablet) NOT REVIEWED paromomycin capsule (generic for Humatin®) Solosec™ Granules tinidazole tablet (generic for Tindamax®) Vancocin® Capsule Xifaxan® Tablet - Exemption for a diagnosis of Hepatic Encephalopathy  uinolones  Non-Preferred  Baxdela™ Tablet Cipro® Tablet ciprofloxacin ER tablet / suspension (generic for Cipro® XR / Suspension) levofloxacin solution (generic for Levaquin® Solution) ofloxacin tablet (generic for Floxin®)  Line Derivatives  Non-Preferred  demeclocycline tablet (generic for Declomycin®) Doryx® DR / MPC Tablet doxycycline hyclate DR tablet (generic for Doryx® DR) doxycycline monohydrate 40mg IR-DR capsule (generic for Monodox®, Adoxa®) doxycycline monohydrate 40mg IR-DR capsule (generic for Oraca®)
Preferred  Cipro® Suspension ciprofloxacin tablet (generic for Cipro®) levofloxacin tablet (generic for Levaquin®) moxifloxacin tablet (generic for Avelox®)  Tetracy Preferred  doxycycline hyclate capsule / tablet (generic for Vibramycin®, Vibra-Tab®) doxycycline monohydrate 50mg, 100mg capsule (generic for Monodox®)	Flagyl® Capsule / Tablet metronidazole capsule (generic for Flagyl®) neomycin tablet (generic for Mycifradin®) nitazoxanide tablet (generic for Alinia® Tablet) NOT REVIEWED paromomycin capsule (generic for Humatin®) Solosec® Granules tinidazole tablet (generic for Tindamax®) Vancocin® Capsule Xifaxan® Tablet - Exemption for a diagnosis of Hepatic Encephalopathy  uinolones  Non-Preferred  Baxdela™ Tablet Cipro® Tablet ciprofloxacin ER tablet / suspension (generic for Cipro® XR / Suspension) levofloxacin solution (generic for Levaquin® Solution) ofloxacin tablet (generic for Floxin®)  Line Derivatives  Non-Preferred  demeclocycline tablet (generic for Declomycin®) Doryx® DR / MPC Tablet doxycycline monohydrate 75mg, 150mg capsule (generic for Monodox®, Adoxa®) doxycycline monohydrate 40mg IR-DR capsule (generic for Oracea®) doxycycline monohydrate 40mg IR-DR capsule (generic for Oracea®) doxycycline monohydrate 40mg IR-DR capsule (generic for Oracea®) doxycycline monohydrate 50mg, 75mg, 100mg, 150mg tablet doxycycline suspension (generic for Vibramycin Suspension®) - Exemption for patients < 12 years of age
Preferred  Cipro® Suspension ciprofloxacin tablet (generic for Cipro®) levofloxacin tablet (generic for Levaquin®) moxifloxacin tablet (generic for Avelox®)  Tetracy Preferred  doxycycline hyclate capsule / tablet (generic for Vibramycin®, Vibra-Tab®) doxycycline monohydrate 50mg, 100mg capsule (generic for Monodox®)	Flagyl® Capsule / Tablet metronidazole capsule (generic for Flagyl®) neomycin tablet (generic for Mycifradin®) mitazoxanide tablet (generic for Alinia® Tablet) NOT REVIEWED paromomycin capsule (generic for Humatin®) Solosee® Granules tinidazole tablet (generic for Tindamax®) Vancocin® Capsule Xifaxan® Tablet - Exemption for a diagnosis of Hepatic Encephalopathy  uinolones  Non-Preferred  Baxdela® Tablet Cipro® Tablet cipro® Tablet cipro® Tablet ciproRoxacin ER tablet / suspension (generic for Cipro® XR / Suspension) levofloxacin solution (generic for Levaquin® Solution) ofloxacin tablet (generic for Floxin®)  Siline Derivatives  Non-Preferred  demeclocycline tablet (generic for Declomycin®) Doryx® DR / MPC Tablet doxycycline monohydrate 75mg, 150mg capsule (generic for Oraca®) doxycycline monohydrate 55mg, 150mg, 150mg, 150mg tablet doxycycline suspension (generic for Vibramycin Suspension®) - Exemption for patients < 12 years of age minocycline ER tablet (generic for Vibramycin Suspension®) - Exemption for patients < 12 years of age minocycline ER tablet (generic for Vibramycin Suspension®) - Exemption for patients < 12 years of age minocycline ER tablet (generic for Vibramycin Suspension®) - Exemption for patients < 12 years of age minocycline ER tablet (generic for Vibramycin Suspension®) - Exemption for patients < 12 years of age minocycline ER tablet (generic for Vibramycin Suspension®) - Exemption for patients < 12 years of age minocycline ER tablet (generic for Vibramycin Suspension®) - Exemption for patients < 12 years of age
Preferred  Cipro® Suspension ciprofloxacin tablet (generic for Cipro®) levofloxacin tablet (generic for Levaquin®) moxifloxacin tablet (generic for Avelox®)  Tetracy Preferred  doxycycline hyclate capsule / tablet (generic for Vibramycin®, Vibra-Tab®) doxycycline monohydrate 50mg, 100mg capsule (generic for Monodox®)	Flagyl® Capsule / Tablet metronidazole capsule (generic for Flagyl®) neomycin tablet (generic for Mycifradin®) nitazoxanide tablet (generic for Alinia® Tablet) NOT REVIEWED paromomycin capsule (generic for Humatin®) Solosec™ Granules tinidazole tablet (generic for Tindamax®) Vancocin® Capsule Xifaxan® Tablet - Exemption for a diagnosis of Hepatic Encephalopathy  "Uninolones  Non-Preferred  Baxdela™ Tablet Cipro® Tablet ciprofloxacin ER tablet / suspension (generic for Cipro® XR / Suspension) levofloxacin solution (generic for Levaquin® Solution) ofloxacin tablet (generic for Floxin®)  Eline Derivatives  Non-Preferred  demeclocycline tablet (generic for Declomycin®) Doryx® DR / MPC Tablet doxycycline hyclate DR tablet (generic for Doryx® DR) doxycycline monohydrate 75mg, 150mg capsule (generic for Monodox®, Adoxa®) doxycycline monohydrate 50mg, 75mg, 100mg, 150mg tablet doxycycline suspension (generic for Vibramycin Suspension®) - Exemption for patients < 12 years of age minocycline ER tablet (generic for Solodyn® ER) Clinical justification and failure of doxycycline and minocycline required. Limited to 12 week supply.
Preferred  Cipro® Suspension ciprofloxacin tablet (generic for Cipro®) levofloxacin tablet (generic for Levaquin®) moxifloxacin tablet (generic for Avelox®)  Tetracy Preferred  doxycycline hyclate capsule / tablet (generic for Vibramycin®, Vibra-Tab®) doxycycline monohydrate 50mg, 100mg capsule (generic for Monodox®)	Flagyl® Capsule / Tablet metronidazole capsule (generic for Flagyl®) neomycin tablet (generic for Mycifiradin®) mitazoxanide tablet (generic for Mycifiradin®) mitazoxanide tablet (generic for Alinia® Tablet) NOT REVIEWED paromomycin capsule (generic for Humatin®) Solosec™ Granules tinidazole tablet (generic for Tindamax®) Vancocin® Capsule Xifaxan® Tablet - Exemption for a diagnosis of Hepatic Encephalopathy  uinolones  Non-Preferred  Baxdela™ Tablet Cipro® Tablet ciprofloxacin ER tablet / suspension (generic for Cipro® XR / Suspension) levofloxacin solution (generic for Levaquin® Solution) offloxacin tablet (generic for Floxin®)  Line Derivatives  Non-Preferred  demeclocycline tablet (generic for Declomycin®) Doryx® DR / MPC Tablet doxycycline hyclate DR tablet (generic for Doryx® DR) doxycycline monohydrate 40mg IR-DR capsule (generic for Monodox®, Adoxa®) doxycycline monohydrate 50mg, 75mg, 100mg, 150mg tablet doxycycline suspension (generic for Solodyn® ER) Clinical justification and failure of doxycycline and minocycline required. Limited to 12 week supply. minocycline 50mg, 75mg, 100mg tablet
Preferred  Cipro® Suspension ciprofloxacin tablet (generic for Cipro®) levofloxacin tablet (generic for Levaquin®) moxifloxacin tablet (generic for Avelox®)  Tetracy Preferred  doxycycline hyclate capsule / tablet (generic for Vibramycin®, Vibra-Tab®) doxycycline monohydrate 50mg, 100mg capsule (generic for Monodox®)	Flagyl® Capsule / Tablet metronidazole capsule (generic for Flagyl®) neomycin tablet (generic for Mycifradin®) mitazoxanide tablet (generic for Mycifradin®) mitazoxanide tablet (generic for Alinia® Tablet) NOT REVIEWED paromomycin capsule (generic for Humatin®) Solosec™ Granules tinidazole tablet (generic for Tindamax®) Vancocin® Capsule Xifaxan® Tablet - Exemption for a diagnosis of Hepatic Encephalopathy  uinolones  Non-Preferred  Baxdela™ Tablet Cipro® Tablet ciprofloxacin ER tablet / suspension (generic for Cipro® XR / Suspension) levofloxacin solution (generic for Levaquin® Solution) ofloxacin tablet (generic for Floxin®)  Cline Derivatives  Non-Preferred  demeclocycline tablet (generic for Declomycin®) Doryx® DR / MPC Tablet doxycycline hyclate DR tablet (generic for Doryx® DR) doxycycline monohydrate 75mg, 150mg capsule (generic for Monodox®, Adoxa®) doxycycline monohydrate 50mg, 75mg, 100mg, 150mg tablet doxycycline suspension (generic for Solodyn® ER) Clinical justification and failure of doxycycline and minocycline required. Lim to 12 week sumply. minocycline ER tablet (generic for Solodyn® ER) Clinical justification and failure of doxycycline and minocycline required. Lim to 12 week sumply. minocycline Song, 75mg, 100mg tablet

## Effective: 06/01/2021

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 NOT REVIEWED. Drugs requiring prior authorization, clinical criteria and prior authorization request forms can be found at: 

More information on the PDL can be found at: <a href="https://medicaid.ncdhhs.gov">https://medicaid.ncdhhs.gov</a>	<u>/providers/programs-services/prescription-drugs/outpatient-pharmacy-services</u>
	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® Capsule / Suspension / Syrup
	Ximino ™ ER Capsule
	Ammio Ex capone
A	ntifungals
Preferred	Non-Preferred
clotrimazole troche (generic for Mycelex® Troche)	Ancobon® Capsule
fluconazole suspension / tablet (generic for Diflucan®)	Cresemba® Capsule
griseofulvin suspension (generic for Grifulvin V®)	Diflucan® Suspension / Tablet
griseofulvin ultra tablet (generic for Gris-Peg®)	flucytosine capsule (generic for Ancobon®)
nystatin suspension (generic for Nilstat <sup>®</sup> )	griseofulvin micro tablets (generic for Grifulvin V®)
nystatin tablet (generic for Mycostatin®)	itraconazole capsule / solution (generic for Sporanox®)
terbinafine tablet (generic for Lamisil®)	ketoconazole tablet (generic for Nizoral®)
	Noxafil® Suspension / Tablet
	Oravig <sup>®</sup> Buccal Tablet
	posaconazole suspension / tablet (generic for Noxafil®)
	Sporanox® Capsule / Solution
	Tolsura <sup>™</sup> Capsule
	Vfend® Suspension / Tablet voriconazole suspension / tablet (generic for Vfend®)
	vorteonazore suspension / tablet (generic for viend )
Antivirals (	Hepatitis B Agents)
Preferred	Non-Preferred
entecavir tablet (generic for Baraclude®)	adefovir tablet (generic for Hepsera®)
lamivudine HBV tablet (generic for Epivir® HBV)	Baraclude® Solution / Tablet
tenofovir tablet (generic for Viread <sup>®</sup> )	Epivir® HBV Tablet / Solution
Viread® Powder / Tablet	Hepsera® Tablet
	Vemlidy® tablet
Antivirals (	Hepatitis C Agents)
Preferred	Non-Preferred
Pegasys <sup>®</sup> Syringe	Pegasys <sup>®</sup> Vial
ribavirin capsule / tablet (generic for Copegus®, Rebetol®)	Pegintron <sup>®</sup> Kit
	Ribasphere® Capsule / Tablet / RibaPak™
CHL. 1 P. 1	
Clinical criteria ap	ply to all drugs listed below
All genotypes without cirrhosis	
	Epclusa® Tablet  Harvoni® Pellet Pack / Tablet
All genotypes without cirrhosis	Epclusa® Tablet
All genotypes without cirrhosis  Mavyret <sup>™</sup> Tablet (8 weeks of therapy)	Epclusa® Tablet Harvoni® Pellet Pack / Tablet
All genotypes without cirrhosis  Mavyret <sup>™</sup> Tablet (8 weeks of therapy)	Epclusa® Tablet Harvoni® Pellet Pack / Tablet ledipasvir-sofosbuvir tablet (generic for Harvoni® Tablet)
All genotypes without cirrhosis  Mavyret™ Tablet (8 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)	Epclusa® Tablet  Harvoni® Pellet Pack / Tablet  ledipasvir-sofosbuvir tablet (generic for Harvoni® Tablet)  Sovaldi® Pellet Pack / Tablet
All genotypes without cirrhosis  Mavyret™ Tablet (8 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  All genotypes with compensated cirrhosis (Child Pugh-A)  Mavyret™ Tablet (Up to 12 weeks of therapy)	Epclusa® Tablet  Harvoni® Pellet Pack / Tablet  ledipasvir-sofosbuvir tablet (generic for Harvoni® Tablet)  Sovaldi® Pellet Pack / Tablet  Viekira™ Pak
All genotypes without cirrhosis  Mavyret™ Tablet (8 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  All genotypes with compensated cirrhosis (Child Pugh-A)	Epclusa® Tablet  Harvoni® Pellet Pack / Tablet  ledipasvir-sofosbuvir tablet (generic for Harvoni® Tablet)  Sovaldi® Pellet Pack / Tablet
All genotypes without cirrhosis  Mavyret™ Tablet (8 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  All genotypes with compensated cirrhosis (Child Pugh-A)  Mavyret™ Tablet (Up to 12 weeks of therapy)	Epclusa® Tablet  Harvoni® Pellet Pack / Tablet  ledipasvir-sofosbuvir tablet (generic for Harvoni® Tablet)  Sovaldi® Pellet Pack / Tablet  Viekira™ Pak
All genotypes without cirrhosis  Mavyret™ Tablet (8 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  All genotypes with compensated cirrhosis (Child Pugh-A)  Mavyret™ Tablet (Up to 12 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  All genotypes previously treated with an HCV regimen containing an NS5A inhibitor or genotype 1a or 3 inhibitor.	Epclusa® Tablet  Harvoni® Pellet Pack / Tablet  ledipasvir-sofosbuvir tablet (generic for Harvoni® Tablet)  Sovaldi® Pellet Pack / Tablet  Viekira™ Pak
All genotypes without cirrhosis  Mavyret™ Tablet (8 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  All genotypes with compensated cirrhosis (Child Pugh-A)  Mavyret™ Tablet (Up to 12 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  All genotypes previously treated with an HCV regimen containing an NS5A inhibitor or genotype 1a or 3 inhibitor.	Epclusa® Tablet  Harvoni® Pellet Pack / Tablet  ledipasvir-sofosbuvir tablet (generic for Harvoni® Tablet)  Sovaldi® Pellet Pack / Tablet  Viekira™ Pak
All genotypes without cirrhosis  Mavyret™ Tablet (8 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  All genotypes with compensated cirrhosis (Child Pugh-A)  Mavyret™ Tablet (Up to 12 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  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.	Epclusa® Tablet  Harvoni® Pellet Pack / Tablet  ledipasvir-sofosbuvir tablet (generic for Harvoni® Tablet)  Sovaldi® Pellet Pack / Tablet  Viekira™ Pak
All genotypes without cirrhosis  Mavyret™ Tablet (8 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  All genotypes with compensated cirrhosis (Child Pugh-A)  Mavyret™ Tablet (Up to 12 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  All genotypes previously treated with an HCV regimen containing an NSSA inhibitor or genotype 1a or 3 infection and have previously been treated with an HCV regimen containing sofosbuvir without an NSSA inhibitor.  Vosevi™	Epclusa® Tablet  Harvoni® Pellet Pack / Tablet  ledipasvir-sofosbuvir tablet (generic for Harvoni® Tablet)  Sovaldi® Pellet Pack / Tablet  Viekira™ Pak
All genotypes without cirrhosis  Mavyret™ Tablet (8 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  Mall genotypes with compensated cirrhosis (Child Pugh-A)  Mavyret™ Tablet (Up to 12 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  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™  All genotypes with decompensated cirrhosis  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)	Epclusa® Tablet  Harvoni® Pellet Pack / Tablet  ledipasvir-sofosbuvir tablet (generic for Harvoni® Tablet)  Sovaldi® Pellet Pack / Tablet  Viekira™ Pak  Zepatier® Tablet
All genotypes without cirrhosis  Mavyret™ Tablet (8 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  Mall genotypes with compensated cirrhosis (Child Pugh-A)  Mavyret™ Tablet (Up to 12 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  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™  All genotypes with decompensated cirrhosis  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)	Epclusa® Tablet  Harvoni® Pellet Pack / Tablet  ledipasvir-sofosbuvir tablet (generic for Harvoni® Tablet)  Sovaldi® Pellet Pack / Tablet  Viekira™ Pak
All genotypes without cirrhosis  Mavyret™ Tablet (8 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  Mall genotypes with compensated cirrhosis (Child Pugh-A)  Mavyret™ Tablet (Up to 12 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  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™  All genotypes with decompensated cirrhosis  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)	Epclusa® Tablet  Harvoni® Pellet Pack / Tablet  ledipasvir-sofosbuvir tablet (generic for Harvoni® Tablet)  Sovaldi® Pellet Pack / Tablet  Viekira™ Pak  Zepatier® Tablet
All genotypes without cirrhosis  Mavyret™ Tablet (8 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  All genotypes with compensated cirrhosis (Child Pugh-A)  Mavyret™ Tablet (Up to 12 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  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™  All genotypes with decompensated cirrhosis  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  Antivirals ( Preferred  acyclovir capsule / tablet / suspension (generic for Zovirax®)	Epclusa® Tablet Harvoni® Pellet Pack / Tablet ledipasvir-sofosbuvir tablet (generic for Harvoni® Tablet) Sovaldi® Pellet Pack / Tablet Viekira™ Pak  Zepatier® Tablet  Herpes Treatments)  Non-Preferred Sitavig® Buccal Tablet
All genotypes without cirrhosis  Mavyret™ Tablet (8 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  All genotypes with compensated cirrhosis (Child Pugh-A)  Mavyret™ Tablet (Up to 12 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  All genotypes previously treated with an HCV regimen containing an NSSA inhibitor or genotype 1a or 3 infection and have previously been treated with an HCV regimen containing sofosbuvir without an NSSA inhibitor.  Vosevi™  All genotypes with decompensated cirrhosis  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  Antivirals ( Preferred  acyclovir capsule / tablet / suspension (generic for Zovirax®)  famciclovir tablet (generic for Famvir®)	Epclusa® Tablet Harvoni® Pellet Pack / Tablet ledipasvir-sofosbuvir tablet (generic for Harvoni® Tablet) Sovaldi® Pellet Pack / Tablet Viekira™ Pak  Zepatier® Tablet  Herpes Treatments)  Non-Preferred Sitavig® Buccal Tablet Valtrex® Caplet
All genotypes without cirrhosis  Mavyret™ Tablet (8 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  All genotypes with compensated cirrhosis (Child Pugh-A)  Mavyret™ Tablet (Up to 12 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  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™  All genotypes with decompensated cirrhosis  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  Antivirals ( Preferred  acyclovir capsule / tablet / suspension (generic for Zovirax®)	Epclusa® Tablet Harvoni® Pellet Pack / Tablet ledipasvir-sofosbuvir tablet (generic for Harvoni® Tablet) Sovaldi® Pellet Pack / Tablet Viekira™ Pak  Zepatier® Tablet  Herpes Treatments)  Non-Preferred Sitavig® Buccal Tablet
All genotypes without cirrhosis  Mavyret™ Tablet (8 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  Mall genotypes with compensated cirrhosis (Child Pugh-A)  Mavyret™ Tablet (Up to 12 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  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™  All genotypes with decompensated cirrhosis  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  Antivirals (  Preferred  acyclovir capsule / tablet / suspension (generic for Zovirax®)  famciclovir tablet (generic for Famvir®)  valacyclovir tablet (generic for Valtrex®)	Epclusa® Tablet  Harvoni® Pellet Pack / Tablet  ledipasvir-sofosbuvir tablet (generic for Harvoni® Tablet)  Sovaldi® Pellet Pack / Tablet  Viekira™ Pak  Zepatier® Tablet  Herpes Treatments)  Non-Preferred  Sitavig® Buccal Tablet  Valtrex® Caplet  Zovirax® Suspension
All genotypes without cirrhosis  Mavyret™ Tablet (8 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  Mavyret™ Tablet (Up to 12 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  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™  All genotypes with decompensated cirrhosis  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  All genotypes with decompensated cirrhosis  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  Antivirals (  Preferred  acyclovir capsule / tablet / suspension (generic for Zovirax®)  famciclovir tablet (generic for Famvir®)  valacyclovir tablet (generic for Valtrex®)  Antivirals (   Antivirals (   Antivirals (   Antivirals (   Antivirals (   Antivirals (   Antivirals (    Antivirals (    Antivirals (     Antivirals (      Antivirals (	Epclusa® Tablet  Harvoni® Pellet Pack / Tablet  ledipasvir-sofosbuvir tablet (generic for Harvoni® Tablet)  Sovaldi® Pellet Pack / Tablet  Viekira™ Pak  Zepatier® Tablet  Herpes Treatments)  Non-Preferred  Sitavig® Buccal Tablet  Vollrex® Caplet  Zovirax® Suspension  als (Influenza)
All genotypes without cirrhosis  Mavyret™ Tablet (8 weeks of therapy) sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  Mavyret™ Tablet (Up to 12 weeks of therapy) sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  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™  All genotypes with decompensated cirrhosis sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  Antivirals (  Preferred  acyclovir capsule / tablet / suspension (generic for Zovirax®) famciclovir tablet (generic for Famvir®) valacyclovir tablet (generic for Valtrex®)  Antiviralse (  Preferred	Epclusa® Tablet  Harvoni® Pellet Pack / Tablet  ledipasvir-sofosbuvir tablet (generic for Harvoni® Tablet)  Sovaldi® Pellet Pack / Tablet  Viekira™ Pak  Zepatier® Tablet  Herpes Treatments)  Non-Preferred  Sitavig® Buccal Tablet  Valtrex® Caplet Zovirax® Suspension  als (Influenza)  Non-Preferred
All genotypes without cirrhosis  Mavyret™ Tablet (8 weeks of therapy) sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  All genotypes with compensated cirrhosis (Child Pugh-A) Mavyret™ Tablet (Up to 12 weeks of therapy) sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  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™  All genotypes with decompensated cirrhosis  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  Antivirals ( Preferred  acyclovir capsule / tablet / suspension (generic for Zovirax®) famciclovir tablet (generic for Famvir®) valacyclovir tablet (generic for Valtrex®)  Antivir  Preferred  sosltamivir phosphate capsule / suspension (generic for Tamiflu®)	Epclusa® Tablet Harvoni® Pellet Pack / Tablet ledipasvir-sofosbuvir tablet (generic for Harvoni® Tablet) Sovaldi® Pellet Pack / Tablet Viekira™ Pak  Zepatier® Tablet  Herpes Treatments)  Non-Preferred Sitavig® Buccal Tablet Valtrex® Caplet Zovirax® Suspension als (Influenza)  Non-Preferred amantadine tablet (generic for Symmetrel®)
All genotypes without cirrhosis  Mavyret™ Tablet (8 weeks of therapy) sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  Mavyret™ Tablet (Up to 12 weeks of therapy) sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  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™  All genotypes with decompensated cirrhosis sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  Antivirals (  Preferred  acyclovir capsule / tablet / suspension (generic for Zovirax®) famciclovir tablet (generic for Famvir®) valacyclovir tablet (generic for Valtrex®)  Antiviralse (  Preferred	Epclusa® Tablet Harvoni® Pellet Pack / Tablet ledipasvir-sofosbuvir tablet (generic for Harvoni® Tablet) Sovaldi® Pellet Pack / Tablet Viekira™ Pak  Zepatier® Tablet  Herpes Treatments)  Non-Preferred Sitavig® Buccal Tablet Valtrex® Caplet Zovirax® Suspension  als (Influenza)  Non-Preferred  amantadine tablet (generic for Symmetrel®) Flumadine® Tablet NOT REVIEWED
All genotypes without cirrhosis  Mavyret™ Tablet (8 weeks of therapy) sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  All genotypes with compensated cirrhosis (Child Pugh-A) Mavyret™ Tablet (Up to 12 weeks of therapy) sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  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™  All genotypes with decompensated cirrhosis  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  Antivirals ( Preferred  acyclovir capsule / tablet / suspension (generic for Zovirax®) famciclovir tablet (generic for Famvir®) valacyclovir tablet (generic for Valtrex®)  Antivir  Preferred  sosltamivir phosphate capsule / suspension (generic for Tamiflu®)	Epclusa® Tablet Harvoni® Pellet Pack / Tablet ledipasvir-sofosbuvir tablet (generic for Harvoni® Tablet) Sovaldi® Pellet Pack / Tablet Viekira™ Pak  Zepatier® Tablet  Herpes Treatments)  Non-Preferred Sitavig® Buccal Tablet Valtrex® Caplet Zovirax® Suspension  als (Influenza)  Non-Preferred amantadine tablet (generic for Symmetrel®) Flumadine® Tablet NOT REVIEWED Relenza® Diskhaler
All genotypes without cirrhosis  Mavyret™ Tablet (8 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  All genotypes with compensated cirrhosis (Child Pugh-A)  Mavyret™ Tablet (Up to 12 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  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™  All genotypes with decompensated cirrhosis  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  Antivirals ( Preferred  acyclovir capsule / tablet / suspension (generic for Zovirax®)  famciclovir tablet (generic for Famvir®)  valacyclovir tablet (generic for Valtrex®)  Antivirals ( Preferred  soeltamivir phosphate capsule / suspension (generic for Tamiflu®)	Epclusa® Tablet Harvoni® Pellet Pack / Tablet ledipasvir-sofosbuvir tablet (generic for Harvoni® Tablet) Sovaldi® Pellet Pack / Tablet Viekira™ Pak  Zepatier® Tablet  Herpes Treatments)  Non-Preferred Sitavig® Buccal Tablet  Zovirax® Suspension  In (Influenza)  Non-Preferred  amantadine tablet (generic for Symmetrel®) Flurnadine® Tablet NOT REVIEWED  Relenza® Diskhaler  Tamiflu® Capsule / Suspension
All genotypes without cirrhosis  Mavyret™ Tablet (8 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  All genotypes with compensated cirrhosis (Child Pugh-A)  Mavyret™ Tablet (Up to 12 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  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™  All genotypes with decompensated cirrhosis  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  Antivirals ( Preferred  acyclovir capsule / tablet / suspension (generic for Zovirax®)  famciclovir tablet (generic for Famvir®)  valacyclovir tablet (generic for Valtrex®)  Antivirals ( Preferred  soeltamivir phosphate capsule / suspension (generic for Tamiflu®)	Epclusa® Tablet Harvoni® Pellet Pack / Tablet ledipasvir-sofosbuvir tablet (generic for Harvoni® Tablet) Sovaldi® Pellet Pack / Tablet Viekira™ Pak  Zepatier® Tablet  Herpes Treatments)  Non-Preferred Sitavig® Buccal Tablet Valtrex® Caplet Zovirax® Suspension  als (Influenza)  Non-Preferred amantadine tablet (generic for Symmetrel®) Flumadine® Tablet NOT REVIEWED Relenza® Diskhaler
All genotypes with out cirrhosis  Mavyret™ Tablet (8 weeks of therapy) sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  All genotypes with compensated cirrhosis (Child Pugh-A) Mavyret™ Tablet (Up to 12 weeks of therapy) sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  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™  All genotypes with decompensated cirrhosis sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  Antivirals ( Preferred acyclovir capsule / tablet / suspension (generic for Zovirax®) famciclovir tablet (generic for Famwir®) valacyclovir tablet (generic for Valtrex®)  Antivirals (Preferred oseltamivir phosphate capsule / suspension (generic for Tamiflu®) rimantadine tablet (generic for Flumadine®)	Epclusa® Tablet Harvoni® Pellet Pack / Tablet ledipasvir-sofosbuvir tablet (generic for Harvoni® Tablet) Sovaldi® Pellet Pack / Tablet Viekira™ Pak  Zepatier® Tablet  Herpes Tablet  Non-Preferred Sitavig® Buccal Tablet  Valtrex® Caplet Zovirax® Suspension  Non-Preferred  amantadine tablet (generic for Symmetrel®) Flumadine® Tablet NOT REVIEWED Relenza® Diskhaler Tamiflu® Tablet NOT REVIEWED Relenza® Tablet Trial and failure of only one preferred drug required
All genotypes without cirrhosis  Mavyret Tablet (8 weeks of therapy) sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  All genotypes with compensated cirrhosis (Child Pugh-A) Mavyret Tablet (Up to 12 weeks of therapy) sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  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   All genotypes with decompensated cirrhosis  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  Antivirals ( Preferred  acyclovir capsule / tablet / suspension (generic for Zovirax®) famciclovir tablet (generic for Famvir®) valacyclovir tablet (generic for Valtrex®)  Antivir Preferred  oseltamivir phosphate capsule / suspension (generic for Tamiflu®) rimantadine tablet (generic for Flumadine®)  Antib	Epclusa® Tablet Harvoni® Pellet Pack / Tablet ledipasvir-sofosbuvir tablet (generic for Harvoni® Tablet)  Svaldia® Pellet Pack / Tablet  Viekira® Pak  Zepatier® Tablet  Zepatier® Tablet  Non-Preferred Sitavig® Buccal Tablet  Valvires® Caplet  Zoviras® Suspension  Als (Influenza)  Non-Preferred  amantadine tablet (generic for Symmetrel®)  Flumadine® Tablet NOT REVIEWED  Relenza® Diskhaler  Tamiflue™ Tablet / Suspension  Zofuza Tablet / Suspension  Non-Preferred  Als (Influenza)  Non-Preferred  Als (Influe
All genotypes without cirrhosis  Mavyret Tablet (8 weeks of therapy) sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  All genotypes with compensated cirrhosis (Child Pugh-A) Mavyret Tablet (Up to 12 weeks of therapy) sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  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   All genotypes with decompensated cirrhosis sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  Antivirals ( Preferred acyclovir capsule / tablet / suspension (generic for Zovirax®) famciclovir tablet (generic for Famvir®) valacyclovir tablet (generic for Valtrex®)  Antivirals (preferred oseltamivir phosphate capsule / suspension (generic for Tamiflu®) rimantadine tablet (generic for Flumadine®)  Antibitation Antibitat	Epclusa® Tablet Harvoni® Pellet Pack / Tablet ledipasvir-sofosbuvir tablet (generic for Harvoni® Tablet)  Sovaldia® Pellet Pack / Tablet  Vickira® Pak  Zepatier® Tablet  Herpes Treatments)  Non-Preferred  Sitavig® Buccal Tablet  Zovirax® Suspension  Is (Influenza)  Non-Preferred  Islamantadine tablet (generic for Symmetrel®)  Flumadine® Tablet NOT REVIEWED  Relenza® Diskhaler  Tamiflu® Capsule / Suspension  Xofluza® Tablet / Suspension  Xofluza® Tablet / Suspension  Non-Preferred  anantadine tablet (generic for Symmetrel®)  Flumadine® Tablet NOT REVIEWED  Relenza® Diskhaler  Tamiflu® Capsule / Suspension  Xofluza® Tablet Trial and failure of only one preferred drug required  Notics, Inhaled  by one preferred drug required
All genotypes without cirrhosis  Mavyret Tablet (8 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  All genotypes with compensated cirrhosis (Child Pugh-A)  Mavyret Tablet (Up to 12 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  All genotypes previously treated with an HCV regimen containing an NSSA inhibitor or genotype 1a or 3 infection and have previously been treated with an HCV regimen containing sofosbuvir without an NSSA inhibitor.  Vosevi Mall genotypes with decompensated cirrhosis  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  Antivirals (  Preferred  acyclovir capsule / tablet / suspension (generic for Zovirax®)  famciclovir tablet (generic for Famvir®)  valacyclovir tablet (generic for Valtrex®)  Antivirals (seltamivir phosphate capsule / suspension (generic for Tamiflu®)  rimantadine tablet (generic for Flumadine®)  Antivirals (appeared tablet (generic for Flumadine®)  Antivirals (appeared tablet (generic for Flumadine®)	Epclusa® Tablet Harvoni® Pellet Pack / Tablet ledipasvir-sofosbuvir tablet (generic for Harvoni® Tablet) Sovaldi® Pellet Pack / Tablet Vickira™ Pak  Zepatier® Tablet  Herpes Treatments)  Non-Preferred Sitavig® Buccal Tablet Valtrex® Captet Zovirax® Suspension  als (Influenza)  Non-Preferred amantadine tablet (generic for Symmetrel®) Flumadine® Tablet (generic for Symmetrel®) Flumadine® Tablet (generic for Symmetrel®) Flumadine® Tablet (Jeneric for Symmetrel®) Tamiflu® Capsule / Suspension Xofluza™ Tablet Trial and failure of only one preferred drug required  Non-Preferred Von-Preferred Von-Preferred Von-Preferred Von-Preferred Von-Preferred
All genotypes without cirrhosis  Mavyret ™ Tablet (8 weeks of therapy) sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  All genotypes with compensated cirrhosis (Child Pugh-A)  Mavyret™ Tablet (Up to 12 weeks of therapy) sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  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™  All genotypes with decompensated cirrhosis sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  Antivirals ( Preferred acyclovir capsule / tablet / suspension (generic for Zovirax®) famciclovir tablet (generic for Famvir®) valacyclovir tablet (generic for Valtrex®)  Antivir phosphate capsule / suspension (generic for Tamiflu®) rimantadine tablet (generic for Flumadine®)  Antibi  Trial and failure of on Preferred  Kitabis™ Pak (tobramycin inhalation solution)	Epclusa® Tablet Harvoni® Pellet Pack / Tablet ledipasvir-sofosbuvir tablet (generic for Harvoni® Tablet) Sovaldi® Pellet Pack / Tablet Vickira™ Pak  Zepatier® Tablet  Herpes Treatments)  Non-Preferred Sitavig® Buccal Tablet Valtrex® Caplet Zovirax® Suspension  als (Influenza)  Non-Preferred amantadine tablet (generic for Symmetrel®) Flumadine® Tablet Nor Reviewed amantadine Tablet (generic for Symmetrel®) Flumadine® Tablet Nor Reviewed Tamiflu® Capsule / Suspension  Xofluza™ Tablet Trial and failure of only one preferred drug required  ivone preferred drug required  Non-Preferred Arikayee® Vial
All genotypes without cirrhosis  Mavyret™ Tablet (8 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  All genotypes with compensated cirrhosis (Child Pugh-A)  Mavyret™ Tablet (Up to 12 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  All genotypes previously treated with an HCV regimen containing an NSSA inhibitor or genotype 1a or 3 infection and have previously been treated with an HCV regimen containing sofosbuvir without an NSSA inhibitor.  Vosevi™  All genotypes with decompensated cirrhosis  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  Antivirals ( Preferred  acyclovir capsule / tablet / suspension (generic for Zovirax®)  famciclovir tablet (generic for Famvir®)  valacyclovir tablet (generic for Valtrex®)  Antivirals ( Preferred  seltamivir phosphate capsule / suspension (generic for Tamiflu®)  rimantadine tablet (generic for Flumadine®)  Antivirals ( Antivirals ( Antivirals (  Preferred	Epclusa® Tablet Harvoni® Pellet Pack / Tablet ledipasvir-sofosbuvir tablet (generic for Harvoni® Tablet) Sovaldi® Pellet Pack / Tablet Vickira® Pak  Zepatier® Tablet  Zepatier® Tablet  Herpes Treatments)  Non-Preferred Sitavi® Buccal Tablet Valtres Caplet Zaviras Caplet  Valtres Caplet  Non-Preferred  amantadine tablet (generic for Symmetrel®)  Flumadine® Tablet Non-Preferred  amantadine tablet (generic for Symmetrel®)  Relenza® Diskhaler Tamifu® Capsule / Suspension  Xofluza® Tablet Trial and failure of only one preferred drug required  Non-Preferred  Arikayec® Vial Cayston® Solution
All genotypes with compensated cirrhosis (Child Pugh-A)  Mayyret Tablet (8 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  All genotypes with compensated cirrhosis (Child Pugh-A)  Mayyret Tablet (Up to 12 weeks of therapy)  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  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®  All genotypes with decompensated cirrhosis  sofobuvir-velpatasvir tablet (generic for Epclusa® Tablet)  Antivirals (  Preferred  acyclovir capsule / tablet / suspension (generic for Zovirax®)  famiciclovir tablet (generic for Valtrex®)  Antivir Preferred  soseltamivir phosphate capsule / suspension (generic for Tamiflu®)  rimantadine tablet (generic for Flumadine®)  Antivir Trial and failure of on Preferred  Kitabis™ Pak (tobramycin inhalation solution)	Epclusa® Tablet Harvoni® Pellet Pack / Tablet ledipavir-sofosbuvir tablet (generic for Harvoni® Tablet)  Sovaldi™ Pellet Pack / Tablet  Vickira™ Pak  Zepatier® Tablet  Herpes Treatments)  Non-Preferred  Sitavig® Buccal Tablet  Valtrex® Caplet  Zovirax® Suspension  als (Influenza)  Non-Preferred  amantadine tablet (generic for Symmetrel®)  Flumadine® Tablet (generic for Symmetrel®)  Flumadine® Tablet NOT REVIEWED  Reclenza® Diskhaler  Tamifu® Capsule / Suspension  Xofluza™ Tablet Frial and failure of only one preferred drug required  ivone preferred drug required  Non-Preferred  Arikayec® Vial

North Carolina Medicaid and Health Choice Preferred Drug List (PDL)

## Effective: 06/01/2021

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 NOT 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

	BEHAVIORAL HEALTH
	ANTIDEPRESSANTS
	Other
Preferred	Non-Preferred
bupropion tablet / SR tablet / XL tablet (generic for Wellbutrin® Tablet / SR / XL)	Aplenzin <sup>®</sup> Tablet
desvenlafaxine ER tablet (generic for Pristiq®)	Trintellix® Tablet
duloxetine capsule (generic for Cymbalta®)	Cymbalta® Capsule
naprotiline tablet (generic for Ludiomil®)	desvenlafaxine ER tablet (generic for Khedezla <sup>®</sup> )
nirtazapine ODT / tablet (generic for Remeron®)	duloxetine capsule (generic for Irenka®) NOT REVIEWED
henelzine tablet (generic for Nardil®)	Effexor® XR Capsule
ranylcypromine tablet (generic for Parnate®)	Emsam® Patch
razodone tablet (generic for Desyrel <sup>®</sup> )	Fetzima® Capsule / Titration Pak
enlafaxine tablet / ER capsules (generic for Effexor®, Effexor® XR)	Forfivo® XL Tablet
	Khedezla <sup>®</sup> Tablet
	Marplan® Tablet
	Nardii <sup>®</sup> Tablet
	nefazodone tablet (generic for Serzone®)
	Pristiq <sup>®</sup> ER Tablet
	Remeron <sup>®</sup> Soltab <sup>™</sup> / Tablet
	venlafaxine ER tablet
	Viibryd® Starter Pack / Tablet
	Wellbutrin® SR / XL Tablet
	Selective Serotonin Reuptake Inhibitor (SSRI)
Preferred	Non-Preferred
italopram solution / tablet (generic for Celexa®)	Brisdelle® Capsule
escitalopram tablet (generic for Lexapro®)	Celexa® Tablet
luoxetine capsule / solution (generic for Prozac®)	escitalopram solution (generic for Lexapro® Solution)
Pluvoxamine tablet (generic for Luvox®)	fluoxetine tablet (generic for Prozac®) - Exemption for children < 12 years of age
paroxetine tablet (generic for Paxil®)	fluoxetine DR capsules (generic for Prozac® Weekly)
ertraline concentrated solution / tablet (generic for Zoloft®)	fluvoxamine ER capsule (generic for Luvox CR®)
	Lexapro® Tablet
	paroxetine capsule (generic for Brisdelle® Capsule)
	paroxetine CR tablet (generic for Paxil CR®)
	Paxil® Suspension / Tablet / CR Tablet
	Pexeva® Tablet
	Prozac® Pulvule
	Sarafem® Tablet
	Zoloft® Solution / Tablet
	ANTIHYPERKINESIS / ADHD
Preferred	Non-Preferred
Aptensio® XR Capsule	Adderall® Tablet (Generic Product Per FDA)
Adderall® XR Capsule	Adhansia <sup>™</sup> XR Capsule
umphetamine salt combo tablet (generic for Adderall®)	Adzenys <sup>®</sup> XR ODT / ER suspension
atomoxetine capsule (generic for Strattera®)	amphetamine ER suspension (generic for Adzenys®)
clonidine ER tablet (generic for Kapvay®)	amphetamine salt combo XR capsule (generic for Adderall® XR)
Concerta® Tablet	Cotempla XR-ODT
Daytrana® Patch	Desoxyn® Tablet
lextroamphetamine tablet (generic for Dexedrine®)	Dexedrine® Spansule®
Dyanavel® XR Suspension	dexmethylphenidate tablet / ER capsules (generic for Focalin® / XR)
Focalin® Tablet / XR Capsule	dextroamphetamine solution (generic for ProCentra®)
quanfacine ER tablet (generic for Intuniv®)	dextroamphetamine Solution (generic for Dexedrine Spansule )
Methylin® Solution	Evekeo® Tablet / Evekeo® ODT Tablet
nethylphenidate tablet (generic for Methylin <sup>®</sup> , Ritalin <sup>®</sup> )	Intuniv® Tablet
Quillichew® ER Tablet	Jornay PM <sup>™</sup> Capsule
Quillivant® XR Suspension	methamphetamine tablet (generic for Desoxyn®)
/yvanse® Capsule / Chewable Tablet	methylphenidate CD capsule (generic for Metadate® CD)
. j Euponio / Chemicole Anticol	methylphenidate CD capsule (generic for Methylin®)
	methylphenidate ER capsule (generic for Aptensio <sup>®</sup> XR)
	methylphenidate ER tablet (generic for Concerta® Tablet)
	methylphenidate LA capsule (generic for Ciniceta Tautet)
	Mydayis® ER Capsule
	ProCentra® Solution
	Qelbree Capsule NOT REVIEWED
	Relexxii <sup>™</sup> ER Tablet
	Ritalin® LA Capsule
	Ritalin® Tablet  Strattera® Capsule
	Zenzedi® Tablet

## Effective: 06/01/2021

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 NOT 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

	providers/programs-services/prescription-drugs/outpatient-pharmacy-services
	ANTIPSYCHOTICS
Injectab	e 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® Sustenna Prefilled Syringe / Invega® Trinza Syringe	
Perseris® Syringe	
Risperdal <sup>®</sup> Consta Syringe	
Zyprexa <sup>®</sup> Relprevv <sup>™</sup> Vial Kit	
	NTIPSYCHOTICS
	/ Topical
	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® Discmelt®)
FazaClo® ODT	asenapine tablet (generic for Saphris® SL Tablet) NOT REVIEWED
Latuda® Tablet	Caplyta Capsule
olanzapine ODT / tablet (generic for Zyprexa®)	clozapine ODT (generic for FazaClo®)
paliperidone ER tablet (generic for Invega <sup>®</sup> )	Clozaril® Tablet
quetiapine tablet / ER tablet (generic for Seroquel <sup>®</sup> / XR)	Fanapt® Tablet / Titration Pack
risperidone ODT / solution / tablet (generic for Risperdal®)	Geodon® Capsule
Saphris® SL Tablet	Invega® Tablet
Symbyax® Capsule	Nuplazid <sup>®</sup> Tablet
ziprasidone capsule (generic for Geodon®)	olanzapine-fluoxetine capsule (generic for Symbyax®)
	Rexulti® Tablet
	Risperdal® Solution / Tablet
	Secuado <sup>®</sup> Patch
	Seroquel® Tablet / XR Tablet / XR Sample Kit
	Versacloz <sup>®</sup> Suspension
	Vraylar® Capsule
	Zyprexa® Tablet / Zydis® Tablet
	OVASCULAR
	NHIBITORS
Preferred	Non-Preferred
benazepril tablet (generic for Lotensin <sup>®</sup> )	Accupril <sup>®</sup> Tablet
benazepril tablet (generic for Lotensin®) enalapril tablet (generic for Vasotec®)	Accupril <sup>®</sup> Tablet Altace <sup>®</sup> Capsule
benazepril tablet (generic for Lotensin <sup>®</sup> ) enalapril tablet (generic for Vasotec <sup>®</sup> ) lisinopril tablet (generic for Prinivil <sup>®</sup> and Zestril <sup>®</sup> )	Accupril® Tablet Altace® Capsule captopril tablet (generic for Capoten®)
benazepril tablet (generic for Lotensin®) enalapril tablet (generic for Vasotec®)	Accupril® Tablet Altace® Capsule captopril tablet (generic for Capoten®) Epaned® Solution - Exemption for children < 12 years of age
benazepril tablet (generic for Lotensin <sup>®</sup> ) enalapril tablet (generic for Vasotec <sup>®</sup> ) lisinopril tablet (generic for Prinivil <sup>®</sup> and Zestril <sup>®</sup> )	Accupril® Tablet Altace® Capsule captopril tablet (generic for Capoten®) Epaned® Solution - Exemption for children < 12 years of age fosinopril tablet (generic for Monopril®)
benazepril tablet (generic for Lotensin <sup>®</sup> ) enalapril tablet (generic for Vasotec <sup>®</sup> ) lisinopril tablet (generic for Prinivil <sup>®</sup> and Zestril <sup>®</sup> )	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
benazepril tablet (generic for Lotensin <sup>®</sup> ) enalapril tablet (generic for Vasotec <sup>®</sup> ) lisinopril tablet (generic for Prinivil <sup>®</sup> and Zestril <sup>®</sup> )	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 moexipril tablet (generic for Univasc®)
benazepril tablet (generic for Lotensin <sup>®</sup> ) enalapril tablet (generic for Vasotec <sup>®</sup> ) lisinopril tablet (generic for Prinivil <sup>®</sup> and Zestril <sup>®</sup> )	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 moexipril tablet (generic for Univasc®)  Qbrelis® Solution - Exemption for children < 12 years of age
benazepril tablet (generic for Lotensin <sup>®</sup> ) enalapril tablet (generic for Vasotec <sup>®</sup> ) lisinopril tablet (generic for Prinivil <sup>®</sup> and Zestril <sup>®</sup> )	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 moexipril tablet (generic for Univase®)  Qbrelis® Solution - Exemption for children < 12 years of age perindopril tablet (generic for Accon®)
benazepril tablet (generic for Lotensin <sup>®</sup> ) enalapril tablet (generic for Vasotec <sup>®</sup> ) lisinopril tablet (generic for Prinivil <sup>®</sup> and Zestril <sup>®</sup> )	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 moexipril tablet (generic for Univase®) Qbrelis® Solution - Exemption for children < 12 years of age perindopril tablet (generic for Accon®) Prinivil® Tablet
benazepril tablet (generic for Lotensin <sup>®</sup> ) enalapril tablet (generic for Vasotec <sup>®</sup> ) lisinopril tablet (generic for Prinivil <sup>®</sup> and Zestril <sup>®</sup> )	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 moexipril tablet (generic for Univasc®) Qbrelis® Solution - Exemption for children < 12 years of age perindopril tablet (generic for Univasc®) Prinivil® Tablet quinapril tablet (generic for Accupril®)
benazepril tablet (generic for Lotensin <sup>®</sup> ) enalapril tablet (generic for Vasotec <sup>®</sup> ) lisinopril tablet (generic for Prinivil <sup>®</sup> and Zestril <sup>®</sup> )	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 moexipril tablet (generic for Univasc®)  Qbrelis® Solution - Exemption for children < 12 years of age perindopril tablet (generic for Accon®)  Prinivil® Tablet quinapril tablet (generic for Accupril®) trandolapril tablet (generic for Accupril®) trandolapril tablet (generic for Mounie®)
benazepril tablet (generic for Lotensin <sup>®</sup> ) enalapril tablet (generic for Vasotec <sup>®</sup> ) lisinopril tablet (generic for Prinivil <sup>®</sup> and Zestril <sup>®</sup> )	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 moexipril tablet (generic for Univasc®)  Qbrelis® Solution - Exemption for children < 12 years of age perindopril tablet (generic for Accon®)  Prinivil® Tablet quinapril tablet (generic for Accupril®) trandolapril tablet (generic for Accupril®) trandolapril tablet (generic for Mavik®)  Vasotec® Tablet
benazepril tablet (generic for Lotensin <sup>®</sup> ) enalapril tablet (generic for Vasotec <sup>®</sup> ) lisinopril tablet (generic for Prinivil <sup>®</sup> and Zestril <sup>®</sup> )	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 moexipril tablet (generic for Univasc®)  Qbrelis® Solution - Exemption for children < 12 years of age perindopril tablet (generic for Accon®)  Prinivil® Tablet quinapril tablet (generic for Accupril®) trandolapril tablet (generic for Accupril®) trandolapril tablet (generic for Monopril®)
benazepril tablet (generic for Lotensin®) enalapril tablet (generic for Vasotec®) lisinopril tablet (generic for Prinivil® and Zestril®) ramipril capsule (generic for Altace®)	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 moexipril tablet (generic for Univasc®)  Qbrelis® Solution - Exemption for children < 12 years of age perindopril tablet (generic for Accon®)  Prinivil® Tablet quinapril tablet (generic for Accupril®) trandolapril tablet (generic for Accupril®) trandolapril tablet (generic for Mavik®)  Vasotec® Tablet
benazepril tablet (generic for Lotensin®) enalapril tablet (generic for Vasotec®) lisinopril tablet (generic for Prinivil® and Zestril®) ramipril capsule (generic for Altace®)  ACE INHIBITOR / CALCIUM CI	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 moexipril tablet (generic for Univase®) Qbrelis® Solution - Exemption for children < 12 years of age perindopril tablet (generic for Accon®) Prinivil® Tablet quinapril tablet (generic for Accon®) Prinivil® Tablet quinapril tablet (generic for Accupril®) trandolapril tablet (generic for Mavik®) Vasotec® Tablet Zestril® Tablet
benazepril tablet (generic for Lotensin®) enalapril tablet (generic for Vasotec®) lisinopril tablet (generic for Prinivil® and Zestril®) ramipril capsule (generic for Altace®)  ACE INHIBITOR / CALCIUM CI	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 moexipril tablet (generic for Univasc®) Qbrelis® Solution - Exemption for children < 12 years of age perindopril tablet (generic for Accon®) Prinivil® Tablet quinapril tablet (generic for Accon®) Prinivil® Tablet quinapril tablet (generic for Accupril®) trandolapril tablet (generic for Mavik®) Vasotec® Tablet  Zestril® Tablet  ANNEL BLOCKER COMBINATIONS  Non-Preferred
benazepril tablet (generic for Lotensin®) enalapril tablet (generic for Vasotec®) lisinopril tablet (generic for Prinivil® and Zestril®) ramipril capsule (generic for Altace®)  ACE INHIBITOR / CALCIUM CI	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 moexipril tablet (generic for Univasc®) Qbrelis® Solution - Exemption for children < 12 years of age perindopril tablet (generic for Accon®) Prinivil® Tablet quinarril tablet (generic for Accon®) Prinivil® Tablet quinarril tablet (generic for Mavik®) Vasotec® Tablet Zestril® Tablet ANNEL BLOCKER COMBINATIONS  Non-Preferred Lotrel® Capsule
benazepril tablet (generic for Lotensin®) enalapril tablet (generic for Vasotec®) lisinopril tablet (generic for Prinivil® and Zestril®) ramipril capsule (generic for Altace®)  ACE INHIBITOR / CALCIUM CI	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 moexipril tablet (generic for Univasc®) Obrelis® Solution - Exemption for children < 12 years of age perindopril tablet (generic for Univasc®) Obrelis® Solution - Exemption for children < 12 years of age perindopril tablet (generic for Accon®) Prinivil® Tablet uninapril tablet (generic for Accupril®) trandolapril tablet (generic for Mavik®) Vasotec® Tablet  ANNEL BLOCKER COMBINATIONS  Non-Preferred  Lottel® Capsule Tarka® ER Tablet
benazepril tablet (generic for Lotensin®) enalapril tablet (generic for Vasotec®) lisinopril tablet (generic for Prinivil® and Zestril®) ramipril capsule (generic for Altace®)  ACE INHIBITOR / CALCIUM CI	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 moexipril tablet (generic for Univasc®) Qbrelis® Solution - Exemption for children < 12 years of age perindopril tablet (generic for Accon®) Prinivil® Tablet quinarril tablet (generic for Accon®) Prinivil® Tablet quinarril tablet (generic for Mavik®) Vasotec® Tablet Zestril® Tablet ANNEL BLOCKER COMBINATIONS  Non-Preferred Lotrel® Capsule
benazepril tablet (generic for Lotensin®) enalapril tablet (generic for Vasotec®) lisinopril tablet (generic for Prinivil® and Zestril®) ramipril capsule (generic for Altace®)  ACE INHIBITOR / CALCIUM CI  Preferred amlodipine-benazepril capsule (generic for Lotrel®)	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 moexipril tablet (generic for Univasc®) Obrelis® Solution - Exemption for children < 12 years of age perindopril tablet (generic for Univasc®) Obrelis® Solution - Exemption for children < 12 years of age perindopril tablet (generic for Accon®) Prinivil® Tablet uninapril tablet (generic for Accupril®) trandolapril tablet (generic for Mavik®) Vasotec® Tablet  ANNEL BLOCKER COMBINATIONS  Non-Preferred  Lottel® Capsule Tarka® ER Tablet
benazepril tablet (generic for Lotensin®) enalapril tablet (generic for Vasotec®) lisinopril tablet (generic for Prinivil® and Zestril®) ramipril capsule (generic for Altace®)  ACE INHIBITOR / CALCIUM CI  Preferred amlodipine-benazepril capsule (generic for Lotrel®)	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 moexipril tablet (generic for Univasc®) Qbrelis® Solution - Exemption for children <12 years of age perindopril tablet (generic for Accon®) Prinivil® Tablet quinapril tablet (generic for Accon®) Prinivil® Tablet quinapril tablet (generic for Accupril®) trandolapril tablet (generic for Mavik®)  Vasotec® Tablet  ANNEL BLOCKER COMBINATIONS  Non-Preferred  Lotrel® Capsule  Tarka® ER Tablet trandolapril-verapamil ER tablet (generic for Tarka®)
benazepril tablet (generic for Lotensin®) enalapril tablet (generic for Vasotec®) lisinopril tablet (generic for Prinivil® and Zestril®) ramipril capsule (generic for Altace®)  ACE INHIBITOR / CALCIUM CI  Preferred amlodipine-benazepril capsule (generic for Lotrel®)  ACE INHIBITOR / D  ACE INHIBITOR / D	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 moexipril tablet (generic for Univasc®) Qbrelis® Solution - Exemption for children < 12 years of age perindopril tablet (generic for Accon®) Prinivil® Tablet quinapril tablet (generic for Accon®) Prinivil® Tablet quinapril tablet (generic for Accupril®) trandolapril tablet (generic for Mavik®) Vasotec® Tablet  ANNEL BLOCKER COMBINATIONS  Non-Preferred Lotrel® Capsule Tarka® ER Tablet trandolapril-verapamil ER tablet (generic for Tarka®) UKETIC COMBINATIONS
benazepril tablet (generic for Lotensin®) enalapril tablet (generic for Vasotec®) lisinopril tablet (generic for Prinivil® and Zestril®) ramipril capsule (generic for Altace®)  ACE INHIBITOR / CALCIUM CI  Preferred  ACE INHIBITOR / D  Preferred	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 moexipril tablet (generic for Univasc®) Qbrelis® Solution - Exemption for children < 12 years of age perindopril tablet (generic for Accon®) Prinivil® Tablet quinapril tablet (generic for Accon®) Prinivil® Tablet quinapril tablet (generic for Accupril®) trandolapril tablet (generic for Mavik®) Vasotec® Tablet Zestril® Tablet ANNEL BLOCKER COMBINATIONS  Non-Preferred  Lotrel® Capsule Tarka® ER Tablet trandolapril-verapamil ER tablet (generic for Tarka®)  URETIC COMBINATIONS  Non-Preferred
benazepril tablet (generic for Lotensin®) enalapril tablet (generic for Vasotec®) lisinopril tablet (generic for Prinivil® and Zestril®) ramipril capsule (generic for Altace®)  ACE INHIBITOR / CALCIUM CI  Preferred amlodipine-benazepril capsule (generic for Lotrel®)  ACE INHIBITOR / D  Preferred enalapril-HCTZ tablet (generic for Vasoretic®)	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 moexipril tablet (generic for Univasc®) Qbrelis® Solution - Exemption for children < 12 years of age perindopril tablet (generic for Univasc®) Qbrelis® Solution - Exemption for children < 12 years of age perindopril tablet (generic for Accon®) Prinivil® Tablet quinapril tablet (generic for Accupril®) trandolapril tablet (generic for Mavik®) Vasotec® Tablet  ANNEL BLOCKER COMBINATIONS  Non-Preferred Lotrel® Capsule Tarka® ER Tablet trandolapril-verapamil ER tablet (generic for Tarka®)  URETIC COMBINATIONS  Non-Preferred Accuretic® Tablet
benazepril tablet (generic for Lotensin®) enalapril tablet (generic for Vasotec®) lisinopril tablet (generic for Prinivil® and Zestril®) ramipril capsule (generic for Altace®)  ACE INHIBITOR / CALCIUM CI  Preferred amlodipine-benazepril capsule (generic for Lotrel®)  ACE INHIBITOR / D  Preferred enalapril-HCTZ tablet (generic for Vasoretic®)	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 moexipril tablet (generic for Univasc®) Obrelis® Solution - Exemption for children < 12 years of age perindopril tablet (generic for Univasc®) Obrelis® Solution - Exemption for children < 12 years of age perindopril tablet (generic for Accon®) Prinivil® Tablet quinapril tablet (generic for Accupril®) tranololapril tablet (generic for Accupril®) Vasotec® Tablet  ANNEL BLOCKER COMBINATIONS  Non-Preferred Lotrel® Capsule Tarka® ER Tablet trandolapril-verapamil ER tablet (generic for Tarka®)  URETIC COMBINATIONS  Non-Preferred Accuretic® Tablet benazepril-HCTZ tablet (generic for Lotensin® HCT)
benazepril tablet (generic for Lotensin®) enalapril tablet (generic for Vasotec®) lisinopril tablet (generic for Prinivil® and Zestril®) ramipril capsule (generic for Altace®)  ACE INHIBITOR / CALCIUM CI  Preferred amlodipine-benazepril capsule (generic for Lotrel®)  ACE INHIBITOR / D  Preferred enalapril-HCTZ tablet (generic for Vasoretic®)	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 moexipril tablet (generic for Univasc®) Qbrelis® Solution - Exemption for children < 12 years of age perindopril tablet (generic for Univasc®) Qbrelis® Solution - Exemption for children < 12 years of age perindopril tablet (generic for Accon®) Prinivi® Tablet quinapril tablet (generic for Accupril®) trandolapril tablet (generic for Accupril®) trandolapril tablet (generic for Mavik®)  Vasotec® Tablet  ANNEL BLOCKER COMBINATIONS  Non-Preferred  Lotrel® Capsule Tarka® ER Tablet trandolapril-verapamil ER tablet (generic for Tarka®)  URETIC COMBINATIONS  Non-Preferred  Accuretic® Tablet benazepril-HCTZ tablet (generic for Capozide®)
benazepril tablet (generic for Lotensin®) enalapril tablet (generic for Vasotec®) lisinopril tablet (generic for Prinivil® and Zestril®) ramipril capsule (generic for Altace®)  ACE INHIBITOR / CALCIUM CI  Preferred amlodipine-benazepril capsule (generic for Lotrel®)  ACE INHIBITOR / D  Preferred enalapril-HCTZ tablet (generic for Vasoretic®)	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 moexipril tablet (generic for Univase®) Qbrelis® Solution - Exemption for children <12 years of age perindopril tablet (generic for Accon®) Prinivil® Tablet quinapril tablet (generic for Accon®) Prinivil® Tablet quinapril tablet (generic for Accupril®) trandolapril tablet (generic for Mavik®) Vasotec® Tablet  ANNEL BLOCKER COMBINATIONS  Non-Preferred  Lotrel® Capsule Tarka® ER Tablet trandolapril-verapamil ER tablet (generic for Tarka®)  URETIC COMBINATIONS  Non-Preferred  Accuretic® Tablet  Loterl® Capsule (generic for Tarka®)  Non-Preferred  Loterl® Capsule (generic for Tarka®)  URETIC COMBINATIONS  Non-Preferred  Accuretic® Tablet (generic for Capozide®) fosinopril-HCTZ tablet (generic for Capozide®) fosinopril-HCTZ tablet (generic for Monopri® HCT)
benazepril tablet (generic for Lotensin®) enalapril tablet (generic for Vasotec®) lisinopril tablet (generic for Prinivil® and Zestril®) ramipril capsule (generic for Altace®)  ACE INHIBITOR / CALCIUM CI  Preferred amlodipine-benazepril capsule (generic for Lotrel®)  ACE INHIBITOR / D  Preferred enalapril-HCTZ tablet (generic for Vasoretic®)	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 moexipril tablet (generic for Univace®) Qbrelis® Solution - Exemption for children <12 years of age perindopril tablet (generic for Accon®) Prinivil® Tablet quinapril tablet (generic for Accon®) Prinivil® Tablet quinapril tablet (generic for Accupril®) trandolapril tablet (generic for Mavik®) Vasotec® Tablet Zestril® Tablet  ANNEL BLOCKER COMBINATIONS  Non-Preferred  Lotrel® Capsule Tarka® ER Tablet trandolapril-verapamil ER tablet (generic for Tarka®)  URETIC COMBINATIONS  Non-Preferred  Accuretic® Tablet  Son-Preferred Accuretic® Tablet Accuretic® Tablet (generic for Lotensin® HCT) captopril-HCTZ tablet (generic for Capozide®) fosinopril-HCTZ tablet (generic for Monopril® HCT) Lotensin® HCT Tablet
benazepril tablet (generic for Lotensin®) enalapril tablet (generic for Vasotec®) lisinopril tablet (generic for Prinivil® and Zestril®) ramipril capsule (generic for Altace®)  ACE INHIBITOR / CALCIUM CI  Preferred amlodipine-benazepril capsule (generic for Lotrel®)  ACE INHIBITOR / D  Preferred enalapril-HCTZ tablet (generic for Vasoretic®)	Accurrit® Tablet Altace® Capsule captopril tablet (generic for Capoten®) Epaned® Solution - Exemption for children < 12 years of age fosinoprit tablet (generic for Monopri®) Lotensin® Tablet moexipril tablet (generic for Univasc®) Qbrelis® Solution - Exemption for children < 12 years of age perindopril tablet (generic for Univasc®) Qbrelis® Solution - Exemption for children < 12 years of age perindopril tablet (generic for Accon®) Prinivil® Tablet quinapril tablet (generic for Accupri®) trandolapril tablet (generic for Mavik®) Vasotec® Tablet  ANNEL BLOCKER COMBINATIONS  Non-Preferred  Lotrel® Capsule Tarka® ER Tablet trandolapril-verapamil ER tablet (generic for Tarka®)  URETIC COMBINATIONS  Non-Preferred  Accuretic® Tablet benazepril-HCTZ tablet (generic for Lotensin® HCT) captopril-HCTZ tablet (generic for Monopri® HCT) Lotensin® HCT Tablet quinapril-HCTZ tablet (generic for Monopri® HCT) Lotensin® HCT Tablet quinapril-HCTZ tablet (generic for Accuretic®, Quinaretic®)
benazepril tablet (generic for Vasotec®) lisinopril tablet (generic for Prinivil® and Zestril®) ramipril capsule (generic for Altace®)  ACE INHIBITOR / CALCIUM CI  Preferred amlodipine-benazepril capsule (generic for Vasotectic®)  ACE INHIBITOR / D  Preferred isinopril-HCTZ tablet (generic for Vasotectic®)  Isinopril-HCTZ tablet (generic for Prinzide®, Zestoretic®)	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 moexipril tablet (generic for Univase") Qbrelis Solution - Exemption for children < 12 years of age perindopril tablet (generic for Tablet moexipril tablet (generic for Accon")  Prinivil Solution - Exemption for children < 12 years of age perindopril tablet (generic for Accon")  Prinivil Tablet quinapril tablet (generic for Accupril") trandolapril tablet (generic for Accupril") trandolapril tablet (generic for Mavik")  Vasotec Tablet Zestril Tablet  ANNEL BLOCKER COMBINATIONS  Non-Preferred  Lotret Capsule Tarka ER Tablet trandolapril-verapamil ER tablet (generic for Tarka")  URETIC COMBINATIONS  Non-Preferred  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 quinapril-HCTZ tablet (generic for Accuretic", Quinaretic ") Vascretic Tablet  Vascretic Tablet  Vascretic Tablet  Vascretic Tablet  Zestoretic Tablet
benazepril tablet (generic for Lotensin®) enalapril tablet (generic for Vasotec®) lisinopril tablet (generic for Prinivii® and Zestril®) ramipril capsule (generic for Altace®)  ACE INHIBITOR / CALCIUM CI  Preferred amlodipine-benazepril capsule (generic for Lotrel®)  ACE INHIBITOR / D  Preferred enalapril-HCTZ tablet (generic for Vaseretic®) lisinopril-HCTZ tablet (generic for Prinzide®, Zestoretic®)  ANGIOTENSIN II	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 moexipril tablet (generic for Univase") Qbrelis Solution - Exemption for children < 12 years of age perindopril tablet (generic for Univase") Qbrelis Solution - Exemption for children < 12 years of age perindopril tablet (generic for Accon") Prinivil Solution - Exemption for children < 12 years of age perindopril tablet (generic for Accon") Prinivil Tablet quinapril tablet (generic for Accupril") trandolapril tablet (generic for Accupril") Trandolapril tablet (generic for Mavik") Vasotee Tablet  Zestri Tablet  ANNEL BLOCKER COMBINATIONS  Non-Preferred  Lotret Capsule Tarka ER Tablet trandolapril-verapamil ER tablet (generic for Tarka")  URETIC COMBINATIONS  Non-Preferred  Accuretic Tablet benazopril-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") Vascretic Tablet EECEPTOR BLOCKERS
benazepril tablet (generic for Vasotec®) lisinopril tablet (generic for Prinivil® and Zestril®) ramipril capsule (generic for Altace®)  ACE INHIBITOR / CALCIUM CI  Preferred amlodipine-benazepril capsule (generic for Vasotectic®)  ACE INHIBITOR / D  Preferred isinopril-HCTZ tablet (generic for Vasotectic®)  Isinopril-HCTZ tablet (generic for Prinzide®, Zestoretic®)	Accupril® Tablet Altace® Capsule captopril tablet (generic for Capoten®) Espaned® Solution - Exemption for children < 12 years of age fosinopril tablet (generic for Monopril®) Lotensin® Tablet moexipril tablet (generic for Univase®) Opterlis® Solution - Exemption for children < 12 years of age perindopril tablet (generic for Lotensin® Tablet moexipril tablet (generic for Accon®) Prinivil® Tablet quinapril tablet (generic for Accon®) Prinivil® Tablet quinapril tablet (generic for Accupril®) trandolapril tablet (generic for Mavik®) Vasotec® Tablet  ANNEL BLOCKER COMBINATIONS  Non-Preferred  Lotrel® Capsule Tarka® ER Tablet trandolapril-verapamil ER tablet (generic for Tarka®)  URETIC COMBINATIONS  Non-Preferred  Accuretic® Tablet benazepril-HCTZ tablet (generic for Lotensin® HCT) captopril-HCTZ tablet (generic for Lotensin® HCT) captopril-HCTZ tablet (generic for Accuretic®, Quinaretic®) Vaseretic® Tablet Zestoretic® Tablet ESCEPTOR BLOCKERS  Non-Preferred  ECEEPTOR BLOCKERS  Non-Preferred
benazepril tablet (generic for Lotensin®) enalapril tablet (generic for Vasotec®) lisinopril tablet (generic for Prinivii® and Zestril®) ramipril capsule (generic for Altace®)  ACE INHIBITOR / CALCIUM CI  Preferred amlodipine-benazepril capsule (generic for Lotrel®)  ACE INHIBITOR / D  Preferred enalapril-HCTZ tablet (generic for Vaseretic®) lisinopril-HCTZ tablet (generic for Prinzide®, Zestoretic®)  ANGIOTENSIN II	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 moexipril tablet (generic for Univase") Qbrelis Solution - Exemption for children < 12 years of age perindopril tablet (generic for Univase") Qbrelis Solution - Exemption for children < 12 years of age perindopril tablet (generic for Accon") Prinivil Solution - Exemption for children < 12 years of age perindopril tablet (generic for Accon") Prinivil Tablet quinapril tablet (generic for Accupril") trandolapril tablet (generic for Accupril") Trandolapril tablet (generic for Mavik") Vasotee Tablet  Zestri Tablet  ANNEL BLOCKER COMBINATIONS  Non-Preferred  Lotret Capsule Tarka ER Tablet trandolapril-verapamil ER tablet (generic for Tarka")  URETIC COMBINATIONS  Non-Preferred  Accuretic Tablet benazopril-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") Vascretic Tablet EECEPTOR BLOCKERS
benazepril tablet (generic for Lotensin®) enalapril tablet (generic for Vasotec®) lisinopril tablet (generic for Prinivil® and Zestril®) ramipril capsule (generic for Altace®)  ACE INHIBITOR / CALCIUM CI  Preferred amlodipine-benazepril capsule (generic for Lotrel®)  ACE INHIBITOR / CALCIUM CI  Preferred isblet (generic for Vaseretic®)  ACE INHIBITOR / D  ACE INHIBITOR / D  Preferred enalapril-HCTZ tablet (generic for Prinzide®, Zestoretic®)  ANGIOTENSIN II  Preferred irbesartan tablet (generic for Avapro®) losartan tablet (generic for Cozaar®)	Accupril® Tablet Altace® Capsule captopril tablet (generic for Capoten®) Espaned® Solution - Exemption for children <12 years of age fosinopril tablet (generic for Monopril®) Lotensin® Tablet moexipril tablet (generic for Univasc®) Morelis® Solution - Exemption for children <12 years of age perindopril tablet (generic for Univasc®) Morelis® Solution - Exemption for children <12 years of age perindopril tablet (generic for Accon®) Prinivil® Tablet quinapril tablet (generic for Accon®) Prinivil® Tablet quinapril tablet (generic for Accon®)  Nanotec® Tablet  ANNEL BLOCKER COMBINATIONS  Non-Preferred  Lotrel® Capsule Tarka® ER Tablet  URETIC COMBINATIONS  Non-Preferred  Accuretic® Tablet (generic for Tarka®)  URETIC COMBINATIONS  Non-Preferred  Accuretic® Tablet (generic for Lotensin® HCT) captopril-HCTZ tablet (generic for Capozade®) fosinopril-HCTZ tablet (generic for Monopril® HCT) Lotensin® HCT Tablet quinapril-HCTZ tablet (generic for Accuretic®, Quinaretic®) Vascretic® Tablet  ECEPTOR BLOCKERS  Non-Preferred  Atacana® Tablet Avapro® Tablet
benazepril tablet (generic for Lotensin®) enalapril tablet (generic for Vasotec®) lisinopril tablet (generic for Prinivil® and Zestri®) ramipril capsule (generic for Altace®)  ACE INHIBITOR / CALCIUM CI Preferred amlodipine-benazepril capsule (generic for Lotrel®)  ACE INHIBITOR / CALCIUM CI Preferred into a company of the company of	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 moexipril tablet (generic for Univace®) Obrelis® Solution - Exemption for children < 12 years of age perindopril tablet (generic for Univace®) Obrelis® Solution - Exemption for children < 12 years of age perindopril tablet (generic for Account®) Prinivil® Tablet quinapril tablet (generic for Accupril®) trandolapril tablet (generic for Accupril®) Trandolapril tablet (generic for Mavik®)  Vasotec® Tablet  ANNEL BLOCKER COMBINATIONS  Non-Preferred  Lotrel® Capsule Tarka® ER Tablet trandolapril-verapamil ER tablet (generic for Tarka®)  URETIC COMBINATIONS  Non-Preferred  Accuretic® Tablet (generic for Lotensin® HCT) captopril-HCTZ tablet (generic for Lotensin® HCT) captopril-HCTZ tablet (generic for Accuretic®, Quinaretic®) Vasceretic® Tablet  Lotensin® HCT Tablet quinapril-HCTZ tablet (generic for Accuretic®, Quinaretic®) Vasceretic® Tablet Zestoretic® Tablet
benazepril tablet (generic for Vasotee®) isinopril tablet (generic for Vasotee®) isinopril tablet (generic for Prinivil® and Zestri®) ramipril capsule (generic for Altace®)  ACE INHIBITOR / CALCIUM CI  Preferred amlodipine-benazepril capsule (generic for Lotrel®)  ACE INHIBITOR / D  Preferred isinopril-HCTZ tablet (generic for Vaseretic®) isinopril-HCTZ tablet (generic for Prinzide®, Zestoretic®)  ANGIOTENSIN II  Preferred irbesartan tablet (generic for Avapro®) losartan tablet (generic for Cozara®)	Accupril® Tablet Altace® Capsule captopril tablet (generic for Capoten®) Espaned® Solution - Exemption for children <12 years of age fosinopril tablet (generic for Monopril®) Lotensin® Tablet moexipril tablet (generic for Univasc®) Qbreils® Solution - Exemption for children <12 years of age perindopril tablet (generic for Accon®) Prinivil® Tablet quinapril tablet (generic for Accon®) Prinivil® Tablet quinapril tablet (generic for Accon®) Prinivil® Tablet quinapril tablet (generic for Accon®) Vasotec® Tablet  ANNEL BLOCKER COMBINATIONS  Non-Preferred Lotrel® Capsule Tarka® ER Tablet  URETIC COMBINATIONS  Non-Preferred Accuretic® Tablet (generic for Lotensin® HCT) captopril-HCTZ tablet (generic for Monopril® HCT) Lotensin® HCT Tablet quinapril-HCTZ tablet (generic for Accuretic®, Quinaretic®) Vascrete® Tablet  EECEPTOR BLOCKERS  Non-Preferred  Atacana® Tablet  Non-Preferred

## Effective: 06/01/2021

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 NOT 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
	Cozaar® Tablet
	Diovan® Tablet
	Edarbi® Tablet eprosartan tablet (generic for Teveten®)
	Micardis® Tablet
	telmisartan tablet (generic for Micardis®Tablet)
ANGIOTENGRI II REGERA	OR BY OCUER CONTRACTORS
	OR BLOCKER COMBINATIONS
Preferred	Non-Preferred  Azor® Tablet
amlodipine-olmesartan tablet (generic for Azor®) amlodipine-valsartan tablet (generic for Exforge®)	Azor Tablet  Exforge® Tablet
amlodipine-valsartan-HCTZ tablet (generic for Exforge ® HCT)	Exforge® HCT Tablet
olmesartan-amlodipine-HCTZ tablet (generic for Tribenzor® Tablet)	telmisartan-amlodipine tablet (generic for Twynsta®)
	Tribenzor® Tablet
	LOCKER DIURETIC COMBINATIONS
Preferred	Non-Preferred
irbesartan-HCTZ tablet (generic for Avalide®) losartan-HCTZ tablet (generic for Hyzaar®)	Atacand® HCT Tablet Avalide® Tablet
olmesartan-HCTZ tablet (generic for Benicar® HCT Tablet)	Benicar® HCT Tablet
valsartan-HCTZ tablet (generic for Diovan® HCT)	candesartan-HCTZ tablet (generic for Atacand® HCT)
· · · · · · · · · · · · · · · · · · ·	Diovan® HCT Tablet
	Edarbyclor® Tablet
	Hyzaar® Tablet
	Micardis® HCT Tablet
	telmisartan-HCTZ tablet (generic for Micardis® HCT)
ANGIOTENSIN II RECEPTOR / NI	L PRILYSIN BLOCKER COMBINATIONS
Preferred	Non-Preferred
Entresto® - Clinical Criteria Apply	
ANTI-AF	RHYTHMICS
Preferred	Non-Preferred
amiodarone tablet (generic for Cordarone®)	Multaq® Tablet
disopyramide capsule (generic for Norpace <sup>®</sup> )	Norpace® Capsule / CR Capsule
dofetilide capsule (generic for Tikosyn®)	Pacerone® Tablet
flecainide tablet (generic for Tambocor®)	quinidine gluconate ER tablet (generic for Quinaglute DuraTabs®)
mexiletine capsule (generic for Mexitil®) propafenone tablet (generic for Rythmol®)	Rythmol SR <sup>®</sup> Capsule Tikosyn <sup>®</sup> Capsule
propatenone and (generic for Rythmol SR®)	Though Capsule
quinidine sulfate tablet (generic for Quinidex® Tablet)	
quinidine sulfate tablet (generic for Quinidex® Tablet)  BETA	BLOCKERS
quinidine sulfate tablet (generic for Quinidex® Tablet)  BETA  Preferred	BLOCKERS Non-Preferred
quinidine sulfate tablet (generic for Quinidex® Tablet)  BETA  Preferred  atenolol tablet (generic for Tenormin®)	Non-Preferred  acebutolol capsule (generic for Sectral®)
quinidine sulfate tablet (generic for Quinidex® Tablet)  BETA  Preferred  atenolol tablet (generic for Tenormin®)  carvedilol tablet (generic for Coreg®)	Non-Preferred acebutolol capsule (generic for Sectral®) Betapace® Tablet / AF Tablet
quinidine sulfate tablet (generic for Quinidex® Tablet)  BETA  Preferred  atenolol tablet (generic for Tenormin®)  carvedilol tablet (generic for Coreg®)  labetalol tablet (generic for Trandate®)	Non-Preferred  acebutolol capsule (generic for Sectral®)  Betapace® Tablet / AF Tablet  betaxolol tablet (generic for Kerlone®)
quinidine sulfate tablet (generic for Quinidex® Tablet)  BETA  Preferred  atenolol tablet (generic for Tenormin®)  carvedilol tablet (generic for Coreg®)  labetalol tablet (generic for Trandate®)  metoprolol succinate XL tablet (generic for Toprol XL®)	Non-Preferred  acebutolol capsule (generic for Sectral®)  Betapacc® Tablet / AF Tablet  betaxolol tablet (generic for Kerlone®)  bisoprolol tablet (generic for Zebeta®)
quinidine sulfate tablet (generic for Quinidex® Tablet)  BETA  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®)	Non-Preferred  acebutolol capsule (generic for Sectral®)  Betapacc® Tablet / AF Tablet  betaxolol tablet (generic for Kerlone®)  bisoprolol tablet (generic for Zebeta®)  Bystolic® Tablet
quinidine sulfate tablet (generic for Quinidex® Tablet)  BETA  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 succinate XL tablet (generic for Indexsor®) propranolol solution / tablet / ER capsule (generic for Indexal®)	Non-Preferred  acebutolol capsule (generic for Sectral®)  Betapacc® Tablet / AF Tablet  betaxolol tablet (generic for Kerlone®)  bisoprolol tablet (generic for Zebeta®)  Bystolic® Tablet  carvedilol ER capsule (generic for Coreg® CR Capsule)
quinidine sulfate tablet (generic for Quinidex® Tablet)  BETA  Preferred  atenolol tablet (generic for Tenormin®) carvedilol tablet (generic for Topromandes) metoprolol succinate XL tablet (generic for Toprol XL®) metoprolol succinate XL tablet (generic for Toprol XL®) metoprolol succinate XL tablet (generic for Inderal®) Sorine® Tablet  Sorine® Tablet	Non-Preferred  acebutolol capsule (generic for Sectral®)  Betapacc® Tablet / AF Tablet  betaxolol tablet (generic for Kerlone®)  bisoprolol tablet (generic for Zebeta®)  Bystolic® Tablet
quinidine sulfate tablet (generic for Quinidex® Tablet)  BETA  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 succinate XL tablet (generic for Indexsor®) propranolol solution / tablet / ER capsule (generic for Indexal®)	Non-Preferred  acebutolol capsule (generic for Sectral®)  Betapacc® Tablet / AF Tablet  betaxolol tablet (generic for Kerlone®)  bisoprolol tablet (generic for Zebeta®)  Bystolic® Tablet  carvedilol ER capsule (generic for Coreg® CR Capsule)  Coreg® Tablet / CR Capsule
quinidine sulfate tablet (generic for Quinidex® Tablet)  BETA  Preferred  atenolol tablet (generic for Tenormin®) carvedilol tablet (generic for Topromandes) metoprolol succinate XL tablet (generic for Toprol XL®) metoprolol succinate XL tablet (generic for Toprol XL®) metoprolol succinate XL tablet (generic for Inderal®) Sorine® Tablet  Sorine® Tablet	Non-Preferred acebutolol capsule (generic for Sectral®) Betapace® Tablet / AF Tablet betaxolol tablet (generic for Kerlone®) bisoprolol tablet (generic for Zebeta®) Bystolic® Tablet carvedilol ER capsule (generic for Coreg® CR Capsule) Coreg® Tablet / CR Capsule Corgard® Tablet
quinidine sulfate tablet (generic for Quinidex® Tablet)  BETA  Preferred  atenolol tablet (generic for Tenormin®) carvedilol tablet (generic for Topromandes) metoprolol succinate XL tablet (generic for Toprol XL®) metoprolol succinate XL tablet (generic for Toprol XL®) metoprolol succinate XL tablet (generic for Inderal®) Sorine® Tablet  Sorine® Tablet	Non-Preferred  acebutolol capsule (generic for Sectral®)  Betapacc® Tablet / AF Tablet  betaxolol tablet (generic for Kerlone®)  bisoprolol tablet (generic for Zebeta®)  Bystolic® Tablet  carvedilol ER capsule (generic for Coreg® CR Capsule)  Coreg® Tablet / CR Capsule  Corgard® Tablet  Hemangeol® Solution - Exemption for diagnosis of infantile hemangioma  Inderal® LA Capsule / XL Capsule
quinidine sulfate tablet (generic for Quinidex® Tablet)  BETA  Preferred  atenolol tablet (generic for Tenormin®) carvedilol tablet (generic for Topromandes) metoprolol succinate XL tablet (generic for Toprol XL®) metoprolol succinate XL tablet (generic for Toprol XL®) metoprolol succinate XL tablet (generic for Inderal®) Sorine® Tablet  Sorine® Tablet	Non-Preferred  acebutolol capsule (generic for Sectral®)  Betapace® Tablet / AF Tablet  betaxolol tablet (generic for Kerlone®)  bisoprolol tablet (generic for Zebeta®)  Bystolic® Tablet  carvedilol ER capsule (generic for Coreg® CR Capsule)  Coreg® Tablet / CR Capsule  Corgard® Tablet  Hemangeol® Solution - Exemption for diagnosts of infantile hemangioma  Inderal® LA Capsule / XL Capsule  Kapspargo™ Sprinkle - Exemption for children < 12 years of age
quinidine sulfate tablet (generic for Quinidex® Tablet)  BETA  Preferred  atenolol tablet (generic for Tenormin®) carvedilol tablet (generic for Topromandes) metoprolol succinate XL tablet (generic for Toprol XL®) metoprolol succinate XL tablet (generic for Toprol XL®) metoprolol succinate XL tablet (generic for Inderal®) Sorine® Tablet  Sorine® Tablet	Non-Preferred  acebutolol capsule (generic for Sectral®)  Betapace® Tablet / AF Tablet  betaxolol tablet (generic for Kerlone®)  bisoprolol tablet (generic for Zebeta®)  Bystolic® Tablet  carvedilol ER capsule (generic for Coreg® CR Capsule)  Coreg® Tablet / CR Capsule  Corgard® Tablet  Hemangeol® Solution - Exemption for diagnosis of infantile hemangioma  Inderal® LA Capsule / XL Capsule  Innopran® XL Capsule  Kapspargo™ Sprinkle - Exemption for children < 12 years of age  Lopressor® Tablet
quinidine sulfate tablet (generic for Quinidex® Tablet)  BETA  Preferred  atenolol tablet (generic for Tenormin®) carvedilol tablet (generic for Topromandes) metoprolol succinate XL tablet (generic for Toprol XL®) metoprolol succinate XL tablet (generic for Toprol XL®) metoprolol succinate XL tablet (generic for Inderal®) Sorine® Tablet  Sorine® Tablet	Non-Preferred acebutolol capsule (generic for Sectral®) Betapace® Tablet / AF Tablet betaxolol tablet (generic for Kerlone®) bisoprolol tablet (generic for Zebeta®) Bystolic® Tablet Coreg® Tablet (Generic for Coreg® CR Capsule) Coreg® Tablet / CR Capsule Corgard® Tablet Hemangeol® Solution - Exemption for diagnosis of infantile hemangioma Inderat® LA Capsule / XL Capsule Kapsargo® Sprinkle - Exemption for children < 12 years of age Lopressor® Tablet nadolol tablet (generic for Corgard®)
quinidine sulfate tablet (generic for Quinidex® Tablet)  BETA  Preferred  atenolol tablet (generic for Tenormin®) carvedilol tablet (generic for Topromandes) metoprolol succinate XL tablet (generic for Toprol XL®) metoprolol succinate XL tablet (generic for Toprol XL®) metoprolol succinate XL tablet (generic for Inderal®) Sorine® Tablet  Sorine® Tablet	Non-Preferred acebutolol capsule (generic for Sectral®) Betapace® Tablet / AF Tablet betaxolol tablet (generic for Kerlone®) bisoprolol tablet (generic for Zebeta®) Bystolic® Tablet Coreg® Tablet / CR Capsule (generic for Coreg® CR Capsule) Coreg® Tablet / CR Capsule Corgard® Tablet Hemangeol® Solution - Exemption for diagnosis of infantile hemangioma Indera® LA Capsule / XL Capsule Innopran® XL Capsule Lopressor® Tablet Lopressor® Tablet nadolol tablet (generic for Corgard®) pindolol tablet (generic for Corgard®)
quinidine sulfate tablet (generic for Quinidex® Tablet)  BETA  Preferred  atenolol tablet (generic for Tenormin®) carvedilol tablet (generic for Topromandes) metoprolol succinate XL tablet (generic for Toprol XL®) metoprolol succinate XL tablet (generic for Toprol XL®) metoprolol succinate XL tablet (generic for Inderal®) Sorine® Tablet  Sorine® Tablet	Non-Preferred acebutolot capsule (generic for Sectral®) Betapace® Tablet / AF Tablet betaxolot tablet (generic for Kerlone®) bisoprolot tablet (generic for Zebeta®) Bystolic® Tablet Coreg® Tablet (generic for Coreg® CR Capsule) Coreg® Tablet / CR Capsule (generic for Coreg® CR Capsule) Corgard® Tablet Hemangeol® Solution - Exemption for diagnosis of infantile hemangioma Inderal® LA Capsule / XL Capsule Innopral® XL Capsule Kapspargo™ Sprinkle - Exemption for children < 12 years of age Lopressor® Tablet nadolot tablet (generic for Corgard®) pindolot tablet (generic for Visken®) Sorylize® Solution
quinidine sulfate tablet (generic for Quinidex® Tablet)  BETA  Preferred  atenolol tablet (generic for Tenormin®) carvedilol tablet (generic for Topromandes) metoprolol succinate XL tablet (generic for Toprol XL®) metoprolol succinate XL tablet (generic for Toprol XL®) metoprolol succinate XL tablet (generic for Inderal®) Sorine® Tablet  Sorine® Tablet	Non-Preferred  acebutolot capsule (generic for Sectral®)  Betapacc® Tablet / AF Tablet  betaxolot tablet (generic for Kerlone®) bisoprolot tablet (generic for Zebeta®)  Bystolic® Tablet  Carreditol ER capsule (generic for Coreg® CR Capsule)  Coreg® Tablet / CR Capsule  Corgard® Tablet  Hemangeol® Solution - Exemption for diagnosis of infantile hemangioma  Inderal® LA Capsule / XL Capsule  Innopran® XL Capsule  Kapsargo™ Sprinkle - Exemption for children < 12 years of age  Lopressor® Tablet  Jopensor® Tablet  Lopressor® Tablet  Jopensor® Tablet
quinidine sulfate tablet (generic for Quinidex® Tablet)  BETA  Preferred  atenolol tablet (generic for Tenormin®) carvedilol tablet (generic for Topromandes) metoprolol succinate XL tablet (generic for Toprol XL®) metoprolol succinate XL tablet (generic for Toprol XL®) metoprolol succinate XL tablet (generic for Inderal®) Sorine® Tablet  Sorine® Tablet	Non-Preferred acebutolot capsule (generic for Sectral®) Betapace® Tablet / AF Tablet betaxolot tablet (generic for Kerlone®) bisoprolot tablet (generic for Zebeta®) Bystolic® Tablet Coreg® Tablet (generic for Coreg® CR Capsule) Coreg® Tablet / CR Capsule (generic for Coreg® CR Capsule) Corgard® Tablet Hemangeol® Solution - Exemption for diagnosis of infantile hemangioma Inderal® LA Capsule / XL Capsule Innopral® XL Capsule Kapspargo™ Sprinkle - Exemption for children < 12 years of age Lopressor® Tablet nadolot tablet (generic for Corgard®) pindolot tablet (generic for Visken®) Sorylize® Solution
quinidine sulfate tablet (generic for Quinidex® Tablet)  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 surtrate tablet (generic for Lopressor®) propranolol solution / tablet / ER capsule (generic for Inderal®) Sorine® Tablet sotalol tablet / AF tablet (generic for Betapace® / AF, Sorine®)	Non-Preferred acebutolol capsule (generic for Sectral®) Betapace® Tablet / AF Tablet betaxolol tablet (generic for Kerlone®) bisoprolol tablet (generic for Zebeta®) Bystolic® Tablet carvedilol ER capsule (generic for Coreg® CR Capsule) Coreg® Tablet / CR Capsule Corgard® Tablet Hemangeol® Solution - Exemption for diagnosis of infantile hemangioma Inderal® LA Capsule / XL Capsule Innopral® XL Capsule Kapspargo™ Sprinkle - Exemption for children < 12 years of age Lopressor® Tablet nadolol tablet (generic for Corgard®) pindolol tablet (generic for Visken®) Sotylize® Solution Tenormin® Tablet timolol tablet (generic for Blocadren®) Toprol XL® Tablet
quinidine sulfate tablet (generic for Quinidex® Tablet)  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 tarrate tablet (generic for Lopressor®) propranolol solution / tablet / ER capsule (generic for Inderal®) Sorine® Tablet sotalol tablet / AF tablet (generic for Betapace® / AF, Sorine®)  BETA BLOCKER DI	Non-Preferred acebutolol capsule (generic for Sectral®) Betapace® Tablet / AF Tablet betaxolol tablet (generic for Kerlone®) bisoprolol tablet (generic for Zebeta®) Bystolic® Tablet carvedilol ER capsule (generic for Coreg® CR Capsule) Coreg® Tablet / CR Capsule Corgard® Tablet Hemangeol® Solution - Exemption for diagnosis of infantile hemangioma Inderal® LA Capsule / XL Capsule Innopral® XL Capsule Kapspargo™ Sprinkle - Exemption for children < 12 years of age Lopressor® Tablet nadolol tablet (generic for Corgard®) pindolol tablet (generic for Visken®) Sotylize® Solution Tenormin® Tablet timolol tablet (generic for Blocadren®) Toprol XL® Tablet URETIC COMBINATIONS
quinidine sulfate tablet (generic for Quinidex® Tablet)  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 tarrate tablet (generic for Lopressor®) propranolol solution / tablet / ER capsule (generic for Inderal®) Sorine® Tablet sotalol tablet / AF tablet (generic for Betapace® / AF, Sorine®)  BETA BLOCKER DI Preferred	Non-Preferred acebutolol capsule (generic for Sectral®) Betapace® Tablet / AF Tablet betaxolol tablet (generic for Kerlone®) bisoprolol tablet (generic for Zebeta®) Bystolic® Tablet carvedilol ER capsule (generic for Coreg® CR Capsule) Coreg® Tablet / CR Capsule Corgard® Tablet Hemangeol® Solution - Exemption for diagnosis of infantile hemangioma Inderal® LA Capsule / XL Capsule Innopral® XL Capsule Kapspargo™ Sprinkle - Exemption for children < 12 years of age Lopressor® Tablet nadolol tablet (generic for Corgard®) pindolol tablet (generic for Visken®) Sotylize® Solution Tenormin® Tablet timolol tablet (generic for Blocadren®) Toprol XL® Tablet URETIC COMBINATIONS Non-Preferred
quinidine sulfate tablet (generic for Quinidex® Tablet)  BETA  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 succinate XL tablet (generic for Inderal®)  Sorine® Tablet  sotalol tablet / AF tablet (generic for Betapace® / AF, Sorine®)  BETA BLOCKER DI  Preferred  atenolol-chlorthalidone tablet (generic for Tenoretic®)	Non-Preferred acebutolol capsule (generic for Sectral®) Betapace® Tablet / AF Tablet betaxolol tablet (generic for Kerlone®) bisoprolol tablet (generic for Zebeta®) Bystolic® Tablet carvedilol ER capsule (generic for Coreg® CR Capsule) Coreg® Tablet / CR Capsule Corgard® Tablet Hemangeol® Solution - Exemption for diagnosis of infantile hemangioma Inderal® LA Capsule / XL Capsule Innopran® XL Capsule Kapspargo™ Sprinkle - Exemption for children < 12 years of age Lopressor® Tablet nadolol tablet (generic for Corgard®) pindolot tablet (generic for Corgard®) Solviize® Solution Tenormin® Tablet timolol tablet (generic for Blocadren®) Toprol XL® Tablet URETIC COMBINATIONS Non-Preferred metoprolot-HCTZ tablet (generic for Lopressor® HCT)
quinidine sulfate tablet (generic for Quinidex® Tablet)  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 succinate XL tablet (generic for Inderal®) Sorine® Tablet Sorine® Tablet Sotalol tablet / AF tablet (generic for Betapace® / AF, Sorine®)  BETA BLOCKER DI Preferred	Non-Preferred acebutolol capsule (generic for Sectral®) Betapace® Tablet / AF Tablet betaxolol tablet (generic for Kerlone®) bisoprolol tablet (generic for Zebeta®) Bystolic® Tablet carvedilol ER capsule (generic for Coreg® CR Capsule) Coreg® Tablet / CR Capsule Corgard® Tablet Hemangeol® Solution - Exemption for diagnosis of infantile hemangioma Inderal® LA Capsule / XL Capsule Innopran® XL Capsule / XL Capsule Kapspargo™ Sprinkle - Exemption for children < 12 years of age Lopressor® Tablet nadolol tablet (generic for Corgard®) pindolol tablet (generic for Corgard®) Solylize® Solution Tenormin® Tablet timolol tablet (generic for Blocadren®) Toprol XL® Tablet  URETIC COMBINATIONS  Non-Preferred metoprolol-HCTZ tablet (generic for Corgard® HCT) nadolol-bendroflumethiazide tablet (generic for Corzaide®)
quinidine sulfate tablet (generic for Quinidex® Tablet)  BETA  Preferred  atenolol tablet (generic for Tenormin®) carvedilol tablet (generic for Tenormin®) labetalol tablet (generic for Trandate®) metoprolol succinate XL tablet (generic for Toprol XL®) metoprolol surcinate XL tablet (generic for Toprol XL®) metoprolol solution / tablet / ER capsule (generic for Inderal®) Sorine® Tablet sotalol tablet / AF tablet (generic for Betapace® / AF, Sorine®)  BETA BLOCKER DI Preferred atenolol-chlorthalidone tablet (generic for Tenoretic®)	Non-Preferred acebutolol capsule (generic for Sectral®) Betapace® Tablet / AF Tablet betaxolol tablet (generic for Kerlone®) bisoprolol tablet (generic for Zebeta®) Bystolic® Tablet carvedilol ER capsule (generic for Coreg® CR Capsule) Coreg® Tablet / CR Capsule Corgard® Tablet Hemangeol® Solution - Exemption for diagnosis of infantile hemangioma Inderal® LA Capsule / XL Capsule Innopran® XL Capsule Kapspargo Sprinkle - Exemption for children < 12 years of age Lopressor® Tablet nadolol tablet (generic for Corgard®) pindolol tablet (generic for Corgard®) pindolol tablet (generic for Blocadren®) Tenormin® Tablet timolol tablet (generic for Blocadren®) Toprol XL® Tablet URETIC COMBINATIONS Non-Preferred metoprolol-HCTZ tablet (generic for Lopressor® HCT) nadolol-bendroflumethiazide tablet (generic for Inderide®) propranolol-HCTZ tablet (generic for Inderide®)
quinidine sulfate tablet (generic for Quinidex® Tablet)  BETA  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 succinate XL tablet (generic for Inderal®)  Sorine® Tablet  sotalol tablet / AF tablet (generic for Betapace® / AF, Sorine®)  BETA BLOCKER DI  Preferred  atenolol-chlorthalidone tablet (generic for Tenoretic®)	Non-Preferred acebutolol capsule (generic for Sectral®) Betapace® Tablet / AF Tablet betaxolol tablet (generic for Kerlone®) bisoprolol tablet (generic for Zebeta®) Bystolic® Tablet Coreg® Tablet / CR Capsule Corgard® Tablet / CR Capsule Corgard® Tablet / CR Capsule Corgard® Tablet Hemangeol® Solution - Exemption for diagnosis of infantile hemangioma Inderat® LA Capsule / XL Capsule Innopran® XL Capsule Lopressor® Tablet - Exemption for children < 12 years of age Lopressor® Tablet nadolol tablet (generic for Corgard®) pindolol tablet (generic for Corgard®) pindolol tablet (generic for Visken®) Sotylize® Solution Tenormin® Tablet timolol tablet (generic for Blocadren®) Toprol XL® Tablet URETIC COMBINATIONS  Non-Preferred  metoprolol-HCTZ tablet (generic for Inderide®) propranolol-HCTZ tablet (generic for Inderide®) Tenoretic® Tablet (generic for Inderide®) Tenoretic® Tablet
quinidine sulfate tablet (generic for Quinidex® Tablet)  BETA  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 succinate XL tablet (generic for Inderal®)  Sorine® Tablet  sotalol tablet / AF tablet (generic for Betapace® / AF, Sorine®)  BETA BLOCKER DI  Preferred  atenolol-chlorthalidone tablet (generic for Tenoretic®)	Non-Preferred acebutolol capsule (generic for Sectral®) Betapace® Tablet / AF Tablet betaxolol tablet (generic for Kerlone®) bisoprolol tablet (generic for Zebeta®) Bystolic® Tablet carvedilol ER capsule (generic for Coreg® CR Capsule) Coreg® Tablet / CR Capsule Corgard® Tablet Hemangeol® Solution - Exemption for diagnosis of infantile hemangioma Inderal® LA Capsule / XL Capsule Innopran® XL Capsule Kapspargo Sprinkle - Exemption for children < 12 years of age Lopressor® Tablet nadolol tablet (generic for Corgard®) pindolol tablet (generic for Corgard®) pindolol tablet (generic for Blocadren®) Tenormin® Tablet timolol tablet (generic for Blocadren®) Toprol XL® Tablet URETIC COMBINATIONS Non-Preferred metoprolol-HCTZ tablet (generic for Lopressor® HCT) nadolol-bendroflumethiazide tablet (generic for Inderide®) propranolol-HCTZ tablet (generic for Inderide®)
quinidine sulfate tablet (generic for Quinidex® Tablet)  BETA  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 sulction / tablet / ER capsule (generic for Inderal®)  Sorine® Tablet  sotalol tablet / AF tablet (generic for Betapace® / AF, Sorine®)  BETA BLOCKER DI  Preferred  atenolol-chlorthalidone tablet (generic for Tenoretic®)  bisoprolol-HCTZ tablet (generic for Ziac®)	Non-Preferred acebutolol capsule (generic for Sectral®) Betapace® Tablet / AF Tablet betaxolol tablet (generic for Kerlone®) bisoprolol tablet (generic for Zebeta®) Bystolic® Tablet Coreg® Tablet / CR Capsule Corgard® Tablet / CR Capsule Corgard® Tablet / CR Capsule Corgard® Tablet Hemangeol® Solution - Exemption for diagnosis of infantile hemangioma Inderat® LA Capsule / XL Capsule Innopran® XL Capsule Lopressor® Tablet - Exemption for children < 12 years of age Lopressor® Tablet nadolol tablet (generic for Corgard®) pindolol tablet (generic for Corgard®) pindolol tablet (generic for Visken®) Sotylize® Solution Tenormin® Tablet timolol tablet (generic for Blocadren®) Toprol XL® Tablet URETIC COMBINATIONS  Non-Preferred  metoprolol-HCTZ tablet (generic for Inderide®) propranolol-HCTZ tablet (generic for Inderide®) Tenoretic® Tablet (generic for Inderide®) Tenoretic® Tablet
quinidine sulfate tablet (generic for Quinidex® Tablet)  BETA  Preferred  atenolol tablet (generic for Tenormin®) carvedilol tablet (generic for Tenormin®) labetalol tablet (generic for Trandate®) metoprolol succinate XL tablet (generic for Toprol XL®) metoprolol surrate tablet (generic for Toprossor®) propranolol solution / tablet / ER capsule (generic for Inderal®) Sorine® Tablet sotalol tablet / AF tablet (generic for Betapace® / AF, Sorine®)  BETA BLOCKER DI  Preferred  atenolol-chlorthalidone tablet (generic for Tenoretic®) bisoprolol-HCTZ tablet (generic for Ziac®)  BILE ACID  Preferred	Non-Preferred acebutolol capsule (generic for Sectral®) Betapace® Tablet / AF Tablet betaxolol tablet (generic for Kerlone®) bisoprolol tablet (generic for Zebeta®) Bystolic® Tablet carvedilol ER capsule (generic for Coreg® CR Capsule) Coreg® Tablet / CR Capsule Corgard® Tablet Hemangeol® Solution - Exemption for diagnosis of infantile hemangioma Inderal® LA Capsule / XL Capsule Innopran® XL Capsule / Surgentile - Exemption for children < 12 years of age Lopressor® Tablet nadolol tablet (generic for Corgard®) pindolot tablet (generic for Corgard®) pindolot tablet (generic for Solution Tenormin® Tablet timolot tablet (generic for Blocadren®) Toprol XL® Tablet  URETIC COMBINATIONS  Non-Preferred metoprolot-HCTZ tablet (generic for Inderide®) Tenoretic® Tablet
quinidine sulfate tablet (generic for Quinidex® Tablet)  BETA  Preferred  atenolol tablet (generic for Tenormin®)  carwedilol tablet (generic for Tenormin®)  labetalol tablet (generic for Trandate®)  metoprolol succinate XL tablet (generic for Toprol XL®)  metoprolol succinate XL tablet (generic for Lopressor®)  propranolol solution / tablet / ER capsule (generic for Inderal®)  Sorine® Tablet  sotalol tablet / AF tablet (generic for Betapace® / AF, Sorine®)  BETA BLOCKER DI  Preferred  atenolol-chlorthalidone tablet (generic for Tenoretic®)  bisoprolol-HCTZ tablet (generic for Ziac®)  BILE ACID  Preferred  cholestyramine packet / powder / light packet / light powder (generic for Questran® / Questran® Light)	Non-Preferred acebutolol capsule (generic for Sectral®) Betapace® Tablet / AE Tablet betaxolol tablet (generic for Kerlone®) bisoprolol tablet (generic for Zebeta®) Bystolic® Tablet carvedilol ER capsule (generic for Coreg® CR Capsule) Coreg® Tablet / CR Capsule Corga® Tablet / CR Capsule Corga® Tablet Hemangeol® Solution - Exemption for diagnosis of infantile hemangioma Inderal® LA Capsule / XL Capsule Innopran® XL Capsule Kapspargo® Sprinkle - Exemption for children < 12 years of age Lopresso® Tablet nadolol tablet (generic for Corgard®) pindolol tablet (generic for Corgard®) Sotylize® Solution Tenormin® Tablet timolol tablet (generic for Blocadren®) Toprol XL® Tablet URETIC COMBINATIONS Non-Preferred metoprolol-HCTZ tablet (generic for Lopressor® HCT) nadolol-bendroflumethiazide tablet (generic for Corzide®) propranolol-HCTZ tablet (generic for Inderide®) Tenoretic® Tablet SEQUESTRANTS Non-Preferred colesevelam packet / tablet (generic for Welchol®)
quinidine sulfate tablet (generic for Quinidex® Tablet)  BETA  Preferred  atenolol tablet (generic for Tenormin®) carvedilol tablet (generic for Tenormin®) labetalol tablet (generic for Trandate®) metoprolol succinate XL tablet (generic for Toprol XL®) metoprolol succinate XL tablet (generic for Toprol XL®) metoprolol succinate ablet (generic for Lopressor®) propranolol solution / tablet / ER capsule (generic for Inderal®) Sorine® Tablet sotalol tablet / AF tablet (generic for Betapace® / AF, Sorine®)  BETA BLOCKER DI  Preferred  atenolol-chlorthalidone tablet (generic for Tenoretic®) bisoprolol-HCTZ tablet (generic for Ziac®)  BILE ACID  Preferred	Non-Preferred acebutolol capsule (generic for Sectral®) Betapace® Tablet / AF Tablet betaxolol tablet (generic for Kerlon®) bisoprolol tablet (generic for Kerlon®) bisoprolol tablet (generic for Zebeta®) Bystolic® Tablet carvedilol ER capsule (generic for Coreg® CR Capsule) Coreg® Tablet / CR Capsule Corgan® Tablet Hemangeof® Solution - Exemption for diagnosis of infantile hemangioma Inderal® LA Capsule / XL Capsule Innopran® XL Capsule Kapspargo Sprinkle - Exemption for children < 12 years of age Lopressor® Tablet adolol tablet (generic for Corgan®) pindolol tablet (generic for Corgan®) pindolol tablet (generic for Visken®) Sotylize® Solution Tenormin® Tablet timolol tablet (generic for Blocadren®) Toprol XL® Tablet URETIC COMBINATIONS  Non-Preferred metoprolol-HCTZ tablet (generic for Inderide®) Tenoretic® Tablet Ziac® Tablet Ziac® Tablet Ziac® Tablet SEQUESTRANTS  Non-Preferred

## Effective: 06/01/2021

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 NOT REVIEWED. Drugs requiring prior authorization, clinical criteria and prior authorization request forms can be found at: <a href="https://www.nctracks.nc.gov/content/public/providers/pharmacy.html">https://www.nctracks.nc.gov/content/public/providers/pharmacy.html</a>

 $More information on the PDL can be found \ \overline{at:} \ \underline{\textbf{https://medicaid.ncdhhs.gov/providers/programs-services/prescription-drugs/outpatient-pharmacy-services}$ 

	providers/programs-services/prescription-drugs/outpatient-pnarmacy-services
	Prevalite® Packet / Powder
	Questran <sup>®</sup> Light Powder / Packet / Powder  Welchol <sup>®</sup> Packet / Tablet
CHOLESTERO	LOWERING AGENTS
Preferred	Non-Preferred
atorvastatin tablet (generic for Lipitor®)	Altoprev® Tablet
ezetimibe (generic for Zetia®)	amlodipine-atorvastatin tablet (generic for Caduet®)
lovastatin tablet (generic for Mevacor®) pravastatin tablet (generic for Pravachol®)	Caduer® Tablet Crestor® Tablet
rosuvastatin tablet (generic for Crestor®)	Ezallor Capsule
sinvastatin tablet (generic for Zocor®)	ezetimibe-simvastatin (generic for Vytorin®)
	fluvastatin capsule / ER tablet (generic for Lescol® / XL)
	Juxtapid® Capsule - Clinical criteria apply
	Lescol® XL Tablet
	Lipitor® Tablet Livalo® Tablet
	Nexletof® Tablet
	Nexlizet® Tablet
	Pravachol® Tablet
	Vytorin® Tablet
	Zetia®Tablet
	Zocor® Tablet
	Zypitamag <sup>™</sup> Tablet
CORONAR	Y VASODILATORS
Preferred	Non-Preferred
isosorbide dinitrate tablet (generic for Isordil® Titradose®, IsoDitrate®, et.al.)	Dilatrate <sup>®</sup> SR Capsule
isosorbide mononitrate tablet / ER tablet (generic for Ismo®, Monoket®, Imdur®)	Gonitro® Sublingual Powder
Minitran® Patch	Isordil® Tablet / Titradose® Tablet
nitroglycerin ER capsule / patch / spray / sublingual (generic for Nitro-Dur®, Minitran®, Nitrostat®, Nitrolingual®, Nitronist®)	Nitro-Bid® Ointment
Nitrostat <sup>®</sup> SL Tablet	Nitro-Dur® Patch
	Nitrolingual <sup>®</sup> Spray
	Nitromist® Spray
	Verquvo™ Tablet NOT REVIEWED
DIHADBUDANE U	ALCIUM CHANNEL BLOCKERS
Preferred	Non-Preferred
amlodipine tablet (generic for Norvase®)	Adalat® CC Tablet
nifedipine capsule (generic for Procardia®)	felodipine ER tablet (generic for Plendil®)
nifedipine ER tablet (generic for Adalat CC <sup>®</sup> / Procardia XL <sup>®</sup> )	isradipine capsule (generic for Dynacire®)
	Katerzia <sup>™</sup> Suspension Exemption for children < 12 years of age
	nicardipine capsule (generic for Cardene®)
	nimodipine capsule (generic for Nimotop®) nisoldipine ER tablet (generic for Sular®)
	Norvasc® Tablet
	Nymalize <sup>®</sup> Solution
	Nymalize® Solution Procardia® Capsule / XL Tablet
	Procardia® Capsule / XL Tablet Sular® Tablet
	Procardia® Capsule / XL Tablet Sular® Tablet ENIN INHIBITOR
Preferred	Procardia® Capsule / XL Tablet Sular® Tablet ENIN INHIBITOR Non-Preferred
Preferred  Tekturna® Tablet	Procardia® Capsule / XL Tablet Sular® Tablet ENIN INHIBITOR
Preferred	Procardia® Capsule / XL Tablet Sular® Tablet ENIN INHIBITOR Non-Preferred
Preferred  Tekturna® Tablet  Tekturna® HCT Tablet	Procardia® Capsule / XL Tablet Sular® Tablet ENIN INHIBITOR Non-Preferred
Preferred  Tekturna® Tablet  Tekturna® HCT Tablet  ENDOTHELIN RE	Procardia® Capsule / XL Tablet Sular® Tablet  ENIN INHIBITOR  Non-Preferred aliskiren tablet (generic for Tekturna® Tablet)
Preferred  Tekturna® Tablet  Tekturna® HCT Tablet  ENDOTHELIN RE	Procardia® Capsule / XL Tablet Sular® Tablet  ENIN INHIBITOR  Non-Preferred aliskiren tablet (generic for Tekturna® Tablet)  CCEPTOR ANTAGONISTS
Preferred  Tekturna® Tablet  Tekturna® HCT Tablet  ENDOTHELIN RE  Covered for diagnosis of Pt  Preferred  Letairis® Tablet	Procardia® Capsule / XL Tablet  Sular® Tablet  ENIN INHIBITOR  Non-Preferred  aliskiren tablet (generic for Tekturna® Tablet)  CEPTOR ANTAGONISTS  almonary Arterial Hypertension only  Non-Preferred  ambrisentan tablet (generic for Letairis® Tablet)
Preferred  Tekturna® Tablet  Tekturna® HCT Tablet  ENDOTHELIN RE  Covered for diagnosis of Pt  Preferred	Procardia® Capsule / XL Tablet  Sular® Tablet  ENIN INHIBITOR  Non-Preferred  aliskiren tablet (generic for Tekturna® Tablet)  CEPTOR ANTAGONISTS  Ilmonary Arterial Hypertension only  Non-Preferred  ambrisentan tablet (generic for Letairis® Tablet)  bosentan tablet (generic for Tracleer® Tablet)
Preferred  Tekturna® Tablet  Tekturna® HCT Tablet  ENDOTHELIN RE  Covered for diagnosis of Pt  Preferred  Letairis® Tablet	Procardia® Capsule / XL Tablet  Sular® Tablet  ENIN INHIBITOR  Non-Preferred  aliskiren tablet (generic for Tekturna® Tablet)  CCEPTOR ANTAGONISTS  almonary Arterial Hypertension only  Non-Preferred  ambrisentan tablet (generic for Letairis® Tablet)  bosentan tablet (generic for Tracleer® Tablet)  Opsumit® Tablet
Preferred  Tekturna® Tablet  Tekturna® HCT Tablet  ENDOTHELIN RE  Covered for diagnosis of Pt  Preferred  Letairis® Tablet	Procardia® Capsule / XL Tablet  Sular® Tablet  ENIN INHIBITOR  Non-Preferred  aliskiren tablet (generic for Tekturna® Tablet)  CEPTOR ANTAGONISTS  Ilmonary Arterial Hypertension only  Non-Preferred  ambrisentan tablet (generic for Letairis® Tablet)  bosentan tablet (generic for Tracleer® Tablet)
Preferred  Tekturna® Tablet  Tekturna® HCT Tablet  ENDOTHELIN RE  Covered for diagnosis of Pt  Preferred  Letairis® Tablet  Tracleer® Tablet	Procardia® Capsule / XL Tablet  Sular® Tablet  ENIN INHIBITOR  Non-Preferred  aliskiren tablet (generic for Tekturna® Tablet)  CCEPTOR ANTAGONISTS  Immonary Arterial Hypertension only  Non-Preferred  ambrisentan tablet (generic for Tekturis® Tablet)  Dosenntan tablet (generic for Tracleer® Tablet)  Opsumi® Tablet  Tracleer® Suspension
Preferred  Tekturna® Tablet  Tekturna® HCT Tablet  ENDOTHELIN RE  Covered for diagnosis of Pt  Preferred  Letairis® Tablet  Tracleer® Tablet  INHALED PROS	Procardia® Capsule / XL Tablet  Sular® Tablet  ENIN INHIBITOR  Non-Preferred  aliskiren tablet (generic for Tekturna® Tablet)  CCEPTOR ANTAGONISTS  Immonary Arterial Hypertension only  Non-Preferred  ambrisentan tablet (generic for Tectairis® Tablet)  Dosenntan tablet (generic for Tracleer® Tablet)  Opsumi® Tablet  Tracleer® Suspension
Preferred  Tekturna® Tablet  Tekturna® HCT Tablet  ENDOTHELIN RE  Covered for diagnosis of Pt  Preferred  Letairis® Tablet  Tracleer® Tablet	Procardia® Capsule / XL Tablet  Sular® Tablet  ENIN INHIBITOR  Non-Preferred  aliskiren tablet (generic for Tekturna® Tablet)  CCEPTOR ANTAGONISTS  Immonary Arterial Hypertension only  Non-Preferred  ambrisentan tablet (generic for Letairis® Tablet)  Dosenntan tablet (generic for Tracleer® Tablet)  Opsumi® Tablet  Tracleer® Suspension
Preferred  Tekturna® Tablet  Tekturna® HCT Tablet  ENDOTHELIN RE  Covered for diagnosis of Pt  Preferred  Letairis® Tablet  Tracleer® Tablet  INHALED PROS	Procardia® Capsule / XL Tablet  Sular® Tablet  ENIN INHIBITOR  Non-Preferred  aliskiren tablet (generic for Tekturna® Tablet)  CCEPTOR ANTAGONISTS  Immonary Arterial Hypertension only  Non-Preferred  ambrisentan tablet (generic for Tectairis® Tablet)  Dosenntan tablet (generic for Tracleer® Tablet)  Opsumi® Tablet  Tracleer® Suspension
Preferred  Tekturna® Tablet  Tekturna® HCT Tablet  ENDOTHELIN RE  Covered for diagnosis of Pt  Preferred  Letairis® Tablet  Tracleer® Tablet  INHALED PROS  Preferred  Tyvaso® Refill Kit / Solution / Starter Kit  Ventavis® Solution	Procardia® Capsule / XL Tablet  Sular® Tablet  ENIN INHIBITOR  Non-Preferred  aliskiren tablet (generic for Tekturna® Tablet)  CCEPTOR ANTAGONISTS  almonary Arterial Hypertension only  Non-Preferred  ambrisentan tablet (generic for Letairis® Tablet)  bosentan tablet (generic for Tracleer® Tablet)  Opsumit® Tablet  Tracleer® Suspension  STACYCLIN ANALOGS  Non-Preferred
Preferred  Tekturna® Tablet  Tekturna® HCT Tablet  ENDOTHELIN RE Covered for diagnosis of Pt  Preferred  Letairis® Tablet  Tracleer® Tablet  INHALED PROS  Preferred  Tyvaso® Refill Kit / Solution / Starter Kit  Ventavis® Solution  NIACIN	Procardia® Capsule / XL Tablet  Sular® Tablet  ENIN INHIBITOR  Non-Preferred  aliskiren tablet (generic for Tekturna® Tablet)  CCEPTOR ANTAGONISTS  Ilmonary Arterial Hypertension only  Non-Preferred  ambrisentan tablet (generic for Letairis® Tablet)  bosentan tablet (generic for Tracleer® Tablet)  Opsumit® Tablet  Tracleer® Suspension  STACYCLIN ANALOGS  Non-Preferred  DERIVATIVES
Preferred  Tekturna® Tablet  Tekturna® HCT Tablet  ENDOTHELIN RE  Covered for diagnosis of Pt  Preferred  Letairis® Tablet  Tracleer® Tablet  INHALED PROS  Preferred  Tyvaso® Refill Kit / Solution / Starter Kit  Ventavis® Solution	Procardia® Capsule / XL Tablet  Sular® Tablet  ENIN INHIBITOR  Non-Preferred  aliskiren tablet (generic for Tekturna® Tablet)  CCEPTOR ANTAGONISTS  almonary Arterial Hypertension only  Non-Preferred  ambrisentan tablet (generic for Letairis® Tablet)  bosentan tablet (generic for Tracleer® Tablet)  Opsumit® Tablet  Tracleer® Suspension  STACYCLIN ANALOGS  Non-Preferred

## Effective: 06/01/2021

Trial and failure of two Preferred drugs are required unless only one Preferred option is listed or is otherwise indicated.

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reviewed by the PDL Panel. These drugs are listed as NOT 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: <a href="https://medicaid.ncdhhs.gov/providers/programs-services/prescription-drugs/outpatient-pharmacy-services">https://medicaid.ncdhhs.gov/providers/programs-services/prescription-drugs/outpatient-pharmacy-services</a>

NITRATE COMBINATION		
Preferred Non-Preferred		
Bidil® Tablet		
	CALCIUM CHANNEL BLOCKERS	
Preferred	Non-Preferred	
Cartia XT® Capsule (branded generic for Cardizem CD®)  Dilt XR® Capsule (branded generic for Dilacor XR®)	Calan SR® Caplet  Cardizem CD® Capsule	
diltiazem ER 24 hour capsule (generic for Dilacor XR®, Tiazac®)	Cardizem © Tablet / LA Tablet	
diltiazem tablet / CD capsule / ER 12 hour capsule (generic for Cardizem® / CD / SR)	diltiazem LA tablet (generic for Cardizem LA®)	
Taztia XT <sup>®</sup> Capsule (branded generic for Tiazac <sup>®</sup> )	Matzim® LA Tablet (generic for Cardizem LA®)	
Tiadylt® ER Capsule	Tiazac® Capsule	
verapamil tablet / ER tablet (generic for Calan® / SR)	verapamil 360 mg capsule verapamil ER capsule / PM capsule (generic for Verelan® / Verelan® PM)	
	Verelan® Capsule / Fwi Capsule  Verelan® PM Capsule	
	- Andrew Company	
ORAL PULMONARY HYPERTENSION		
Covered for diagnosis of Pulmonary Arterial Hypertension (all)	and Chronic Thromboembolic Pulmonary Hypertension- Adempas <sup>®</sup> only	
Preferred	Non-Preferred	
sildenafil (generic for Revatio®) Tablet	Adcirca® Tablet	
tadalafil tablet (generic for Adcirca® Tablet)	Adempas® Tablet  Alyq® Tablet	
	Orenitram® ER Tablet	
	Revatio® 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	
	Uptravi® Tablet	
DI ATEL	ET INHIBITORS	
Preferred	Non-Preferred	
Aggrenox® Capsule	aspirin/dipyridamole ER capsule (generic for Aggrenox®)	
Brilinta® Tablet	Effient® Tablet	
clopidogrel tablet (generic for Plavix <sup>®</sup> )	Plavix® Tablet	
dipyridamole tablet (generic for Persantine®)	Yosprala Tablet	
prasugrel tablet (generic for Effient® Tablet)	Zontivity <sup>®</sup> Tablet	
ANTIANGINA	L & ANTI-ISCHEMIC	
Preferred	Non-Preferred	
ranolazine ER tablet (generic for Ranexa® Tablet)	Ranexa® Tablet	
ava a lavava varra		
	CS AND COMBINATIONS	
Preferred  Catapres® TTS Patch	Non-Preferred Catapres® Tablet	
clonidine tablets (generic for Catapres®)	clonidine patch (generic for Catapres®-TTS)	
guanfacine tablet (generic for Tenex®)	methyldopa-HCTZ tablet (generic for Aldoril®)	
methyldopa tablet (generic for Aldomet <sup>®</sup> )	methyldopa injection (generic for Aldomet <sup>®</sup> Injection)	
TDICI VCEDIN	LOWERING AGENTS	
Preferred	Non-Preferred	
fenofibrate tablet (generic for Tricor®)	Antara® Capsule	
gemfibrozil tablet (generic for Lopid®)	fenofibrate capsule / tablet (generic for Antara®, Lofibra®)	
	fenofibrate tablet (generic for Fenoglide®, Triglide®)	
	fenofibric acid tablet (generic for Fibricor®)	
	fenofibric acid capsule (generic for Trilipix®)  Fenoglide® Tablet	
	Fibricor® Tablet	
	icosapent ethyl capsule (generic for Vascepa® Capsule) NOT REVIEWED	
	Lipofen® Capsule	
	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	
	Trilipix® Capsule	
	Vascepa® Capsule	
CENTED A C.	 NERVOUS SYSTEM	
	RAINE AGENTS	
	ts 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®)	Amerge® Tablet	
sumatriptan nasal spray / tablet / vial (generic for Imitrex®)	Cambia® Powder Packet 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)	
	frovatriptan tablet (generic for Frova®)	
	Frova® Tablet	
	Imitrex® Cartridge / Nasal Spray / Pen / Tablet / Vial	

North Carolina Medicaid and Health Choice Preferred Drug List (PDL)

## Effective: 06/01/2021

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 NOT 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://med	licaid.ncdhhs.gov/providers/programs-services/prescription-drugs/outpatient-pharmacy-services
	Maxalt® Tablet / MLT Tablet
	naratriptan tablet (generic for Amerge®)
	Onzetra <sup>™</sup> Xsail Nasal Powder
	Relpax® Tablet
	Reyvow <sup>™</sup> Tablet
	sumatriptan injection kit / refill / syringe (generic for Imitrex®)
	sumatriptan/naproxen (generic for Treximet® Tablet)
	Tosymra 'Masal Spray
	Treximet® Tablet
	Zembrace® SymTouch®
	zolmitriptan nasal spray / ODT / tablet (generic for Zomig®) NASAL SPRAY NOT REVIEWED  Zomig® Nasal Spray / Tablet / ZMT® Tablet
	Zoning is assar Spray / Tablet / Zavi Tablet
	ANTIMIGRAINE AGENTS
	CGRP Blockers/Modulators
	Clinical criteria apply to all drugs in this class
Preferred	Non-Preferred
Aimovig TM	Ajovy <sup>™</sup>
	Nurtec To ODT Tablet Trial and failure of Preferred agents in this category not required for treatment of acute migraine. Clinical
Emgality <sup>®</sup>	criteria apply.
	Ubrelvy <sup>™</sup> Tablet Trial and failure of Preferred agents in this category not required for treatment of acute migraine. Clinical
	criteria apply.
	Vyepti <sup>™</sup> Vial
	ANTI-NARCOLEPSY
Preferred	Clinical criteria apply to all drugs in this class  Non-Preferred
Nuvigil <sup>®</sup> Tablet Provigil <sup>®</sup> Tablet	armodafinil tablet (generic for Nuvigil®) modafinil tablet (generic for Provigil®)
Provigii Tablet	Sunosi <sup>TM</sup> Tablet
	Wakix Tablet
	Wakix Tablet
ANTIPARI	KINSON AND RESTLESS LEG SYNDROME AGENTS
Preferred	Non-Preferred
amantadine capsule / solution (generic for Symmetrel®)	Apokyn® Injection NOT REVIEWED
benztropine tablet (generic for Cogentin®)	Azilect® Tablet
bromocriptine tablet (generic for Parlodel®)	carbidopa tablet (generic for Lodosyn®)
carbidopa-levodopa ODT (generic for Parcopa®)	carbidopa-levodopa-entacapone tablet (generic for Stalevo®)
carbidopa-levodopa tablet / ER tablet (generic for Sinemet® / CR)	Comtan® Tablet
pramipexole tablet (generic for Mirapex®)	Duopa® Suspension
ropinirole tablet (generic for Requip®)	entacapone tablet (generic for Comtan <sup>®</sup> )
selegiline capsule / tablet (generic for Emsam®)	Gocovri <sup>®</sup> Capsule - Clinical criteria apply
trihexyphenidyl elixir / tablet (generic for Artane®)	Horizant® Tablet
	Inbrija™ Inhalation
	Kynmobi <sup>™</sup> SL Film
	Lodosyn <sup>®</sup> Tablet
	Mirapex® ER Tablet
	Neupro® Patch
	Nourianz <sup>™</sup> Tablet
	Ongentys® Capsule
	Osmolex ER <sup>™</sup> Tablet - Clinical criteria apply
	Parlodel® Capsule / Tablet
	pramipexole ER tablet (generic for Mirapex ER®)
	rasagiline tablet (generic for Azilect <sup>®</sup> )
	ropinirole ER tablet (generic for Requip XL®)
	Rytary® ER Capsule
	Sinemet® Tablet / CR Tablet Stalevo® Tablet
	Tasmar® Tablet
	tolcapone tablet (generic for Tasmar®)
	Xadago® Tablet
	Zelapar® ODT
	MULTIPLE SCLEROSIS
	Injectable
Preferred	Non-Preferred
Avonex® Pack / Pen / Syringe	Extavia® Kit / Vial
Avonex® Pack / Pen / Syringe Betaseron® Kit / Vial	
	Extavia® Kit / Vial
Betaseron® Kit / Vial	Extavia <sup>®</sup> Kit / Vial glatiramer syringe (generic for Copaxone <sup>®</sup> Syringe)
Betaseron® Kit / Vial Copaxone® Syringe	Extavia® Kit / Vial glatiramer syringe (generic for Copaxone® Syringe) Glatopa® Syringe
Betaseron® Kit / Vial Copaxone® Syringe	Extavia® Kit / Vial glatiramer syringe (generic for Copaxone® Syringe) Glatopa® Syringe Kesimpta® Injection
Betaseron® Kit / Vial Copaxone® Syringe	Extavia® Kit / Vial glatiramer syringe (generic for Copaxone® Syringe) Glatopa® Syringe Kesimpta® Injection Lemtrada® Vial

North Carolina Medicaid and Health Choice Preferred Drug List (PDL)

# Effective: 06/01/2021

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 NOT 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: <a href="https://medicaid.ncdhhs.gov/providers/programs-services/prescription-drugs/outpatient-pharmacy-services">https://medicaid.ncdhhs.gov/providers/programs-services/prescription-drugs/outpatient-pharmacy-services</a>

MULTIPLE SCLEROSIS		
L	Oral	
Preferred	Non-Preferred	
dalfampridine ER tablet (generic for Ampyra®)	Ampyra® Tablet	
Gilenya® Capsule	Aubagio® Tablet	
Tecfidera® Capsule / Starter Pack	Bafiertam <sup>™</sup> Capsule dimethyl fumarate DR capsule (generic for Tecfidera <sup>®</sup> Capsule)	
	Mavenclad® Tablet	
	Mayzent® Starter Pack / Tablet	
	Ponvory Starter Pack / Tablet NOT REVIEWED	
	Vumerity ™ Capsule	
	Zeposia® Starter Pack / Capsule	
SED	ATIVE HYPNOTICS	
Quantity limit	ts apply to all sedative hypnotics	
Preferred	Non-Preferred	
flurazepam capsule (generic for Dalmane <sup>®</sup> )	Ambien <sup>®</sup> Tablet / CR Tablet	
temazepam 15mg, 30mg capsule (generic for Restoril®)	Belsomra® Tablet	
zolpidem tablet (generic for Ambien®)	Dayvigo <sup>™</sup> Tablet	
	doxepin tablet (generic for Silenor®)	
	Edluar® SL Tablet	
	estazolam tablet (generic for Prosom®)	
	eszopiclone tablet (generic for Lunesta®)	
	Halcion® Tablet	
	Hetlioz® Capsule	
	Hetlioz® LQ Suspension NOT REVIEWED	
	Intermezzo® SL Tablet	
	Lunesta® Tablet	
	ramelteon tablet (generic for Rozerem® Tablet)	
	Restorii® Capsule  Rozerem® Tablet	
	Silenor® Tablet	
	temazepam 7.5, 22.5 mg capsule (generic for Restorit®)	
	triazolam tablet (generic for Halcion®)	
	zaleplon capsule (generic for Sonata®)	
ı	zolpidem ER tablet (generic for Ambien CR)	
	zolpidem ER tablet (generic for Ambien® CR) zolpidem SL tablet (generic for Intermezzo®)	
	zolpidem ER tablet (generic for Ambien® CR) zolpidem SL tablet (generic for Intermezzo®)	
SMO		
SM( Preferred	zolpidem SL tablet (generic for Intermezzo <sup>®</sup> )	
	zolpidem SL tablet (generic for Intermezzo <sup>®</sup> ) OKING CESSATION	
Preferred  bupropion SR tablet (generic for Zyban® Tablet)  Chantix® Tablet / Starting Box / Continuation Month Box - Quantity limited to 6 months per 12 months	zolpidem SL tablet (generic for Intermezzo®)  OKING CESSATION  Non-Preferred	
Preferred bupropion SR tablet (generic for Zyban® Tablet)	zolpidem SL tablet (generic for Intermezzo®)  OKING CESSATION  Non-Preferred	
Preferred  bupropion SR tablet (generic for Zyban® Tablet)  Chantix® Tablet / Starting Box / Continuation Month Box - Quantity limited to 6 months per 12 months  nicotine gum / lozenge (buccal) / patch	zolpidem SL tablet (generic for Intermezzo®)  OKING CESSATION  Non-Preferred  Nicotrol® Inhaler / NS Nasal Spray	
Preferred  bupropion SR tablet (generic for Zyban® Tablet)  Chantix® Tablet / Starting Box / Continuation Month Box - Quantity limited to 6 months per 12 months nicotine gum / lozenge (buccal) / patch	zolpidem SL tablet (generic for Intermezzo®)  OKING CESSATION  Non-Preferred  Nicotrol® Inhaler / NS Nasal Spray  NDOCRINOLOGY	
Preferred bupropion SR tablet (generic for Zyban® Tablet) Chantix® Tablet / Starting Box / Continuation Month Box - Quantity limited to 6 months per 12 months nicotine gum / lozenge (buccal) / patch  EN GR	zolpidem SL tablet (generic for Intermezzo®)  OKING CESSATION  Non-Preferred  Nicotrol® Inhaler / NS Nasal Spray  NDOCRINOLOGY COWTH HORMONE	
Preferred bupropion SR tablet (generic for Zyban® Tablet) Chantix® Tablet / Starting Box / Continuation Month Box - Quantity limited to 6 months per 12 months nicotine gum / lozenge (buccal) / patch  EN GR Clinical criter	zolpidem SL tablet (generic for Intermezzo®)  OKING CESSATION  Non-Preferred  Nicotrol® Inhaler / NS Nasal Spray  NDOCRINOLOGY COWTH HORMONE ria apply to all drugs in this class	
Preferred bupropion SR tablet (generic for Zyban® Tablet) Chantix® Tablet / Starting Box / Continuation Month Box - Quantity limited to 6 months per 12 months nicotine gum / lozenge (buccal) / patch  EN  GR  Clinical criter  Preferred	zolpidem SL tablet (generic for Intermezzo®)  OKING CESSATION  Non-Preferred  Nicotrol® Inhaler / NS Nasal Spray  NDOCRINOLOGY COWTH HORMONE ria apply to all drugs in this class  Non-Preferred	
Preferred bupropion SR tablet (generic for Zyban® Tablet) Chantix® Tablet / Starting Box / Continuation Month Box - Quantity limited to 6 months per 12 months nicotine gum / lozenge (buccal) / patch  EN  GR  Clinical criter  Preferred  Genotropin® Cartridge / MiniQuick®	zolpidem SL tablet (generic for Intermezzo®)  OKING CESSATION  Non-Preferred  Nicotrol® Inhaler / NS Nasal Spray  NDOCRINOLOGY COWTH HORMONE ria apply to all drugs in this class  Non-Preferred  Humatrope® Cartridge / Vial	
Preferred  bupropion SR tablet (generic for Zyban® Tablet)  Chantix® Tablet / Starting Box / Continuation Month Box - Quantity limited to 6 months per 12 months nicotine gum / lozenge (buccal) / patch  EN  GR  Clinical criter  Preferred  Genotropin® Cartridge / MiniQuick®  Norditropin® Flexpro®	zolpidem SL tablet (generic for Intermezzo®)  OKING CESSATION  Non-Preferred  Nicotrol® Inhaler / NS Nasal Spray  NDOCRINOLOGY COWTH HORMONE ria apply to all drugs in this class  Non-Preferred  Humatrope® Cartridge / Vial Nutropin® AQ NuSpin®	
Preferred bupropion SR tablet (generic for Zyban® Tablet) Chantix® Tablet / Starting Box / Continuation Month Box - Quantity limited to 6 months per 12 months nicotine gum / lozenge (buccal) / patch  EN  GR  Clinical criter  Preferred  Genotropin® Cartridge / MiniQuick®	zolpidem SL tablet (generic for Intermezzo®)  OKING CESSATION  Non-Preferred  Nicotrol® Inhaler / NS Nasal Spray  NDOCRINOLOGY  OWTH HORMONE ria apply to all drugs in this class  Non-Preferred  Humatrope® Cartridge / Vial  Nutropin® AQ NuSpin®  Omnitrope® Cartridge / Vial	
Preferred  bupropion SR tablet (generic for Zyban® Tablet)  Chantix® Tablet / Starting Box / Continuation Month Box - Quantity limited to 6 months per 12 months nicotine gum / lozenge (buccal) / patch  EN  GR  Clinical criter  Preferred  Genotropin® Cartridge / MiniQuick®  Norditropin® Flexpro®	zolpidem SL tablet (generic for Intermezzo®)  OKING CESSATION  Non-Preferred  Nicotrol® Inhaler / NS Nasal Spray  NDOCRINOLOGY  OWTH HORMONE ria apply to all drugs in this class  Non-Preferred  Humatrope® Cartridge / Vial  Nutropin® AQ NuSpin®  Omnitrope® Cartridge / Vial  Saizen® Click-Easy® Cartridge / Vial	
Preferred  bupropion SR tablet (generic for Zyban® Tablet)  Chantix® Tablet / Starting Box / Continuation Month Box - Quantity limited to 6 months per 12 months nicotine gum / lozenge (buccal) / patch  EN  GR  Clinical criter  Preferred  Genotropin® Cartridge / MiniQuick®  Norditropin® Flexpro®	zolpidem SL tablet (generic for Intermezzo®)  OKING CESSATION  Non-Preferred  Nicotrol® Inhaler / NS Nasal Spray  NDOCRINOLOGY  COWTH HORMONE  ria apply to all drugs in this class  Non-Preferred  Humatrope® Cartridge / Vial  Nutropin® AQ NuSpin®  Omnitope® Cartridge / Vial  Saizen® Click-Easy® Cartridge / Vial  Zomacton® Vial	
Preferred  bupropion SR tablet (generic for Zyban® Tablet)  Chantis® Tablet / Starting Box / Continuation Month Box - Quantity limited to 6 months per 12 months nicotine gum / lozenge (buccal) / patch  EN  GR  Clinical criter  Preferred  Genotropin® Cartridge / MiniQuick®  Norditropin® Flexpro®	zolpidem SL tablet (generic for Intermezzo®)  OKING CESSATION  Non-Preferred  Nicotrol® Inhaler / NS Nasal Spray  NDOCRINOLOGY  OWTH HORMONE ria apply to all drugs in this class  Non-Preferred  Humatrope® Cartridge / Vial  Nutropin® AQ NuSpin®  Omnitrope® Cartridge / Vial  Saizen® Click-Easy® Cartridge / Vial	
Preferred bupropion SR tablet (generic for Zyban® Tablet) Chantix® Tablet / Starting Box / Continuation Month Box - Quantity limited to 6 months per 12 months nicotine gum / lozenge (buccal) / patch  EN GR Clinical criter Preferred Genotropin® Cartridge / MiniQuick® Norditropin® Flexpro® Serostim® Vial	zolpidem SL tablet (generic for Intermezzo®)  OKING CESSATION  Non-Preferred  Nicotrol® Inhaler / NS Nasal Spray  NDOCRINOLOGY COWTH HORMONE CHARLES IN THE CONTROLOGY COWTH HORMONE Humatrope® Cartridge / Vial Nutropin® AQ NuSpin®  Omnitrope® Cartridge / Vial Saizen® Click-Easy® Cartridge / Vial Zomacton® Vial Zorbtive® Vial	
Preferred bupropion SR tablet (generic for Zyban® Tablet) Chantix® Tablet / Starting Box / Continuation Month Box - Quantity limited to 6 months per 12 months nicotine gum / lozenge (buccal) / patch  EN  GR  Clinical criter  Preferred  Genotropin® Cartridge / MiniQuick® Norditropin® Flexpro® Serostim® Vial  HYPOGL	zolpidem SL tablet (generic for Intermezzo®)  OKING CESSATION  Non-Preferred  Nicotrol® Inhaler / NS Nasal Spray  NDOCRINOLOGY  COWTH HORMONE  ria apply to all drugs in this class  Non-Preferred  Humatrope® Cartridge / Vial  Nutropin® AQ NuSpin®  Omnitrope® Cartridge / Vial  Saizen® Click-Easy® Cartridge / Vial  Zomacton® Vial  Zorbtive® Vial  YCEMICS - INJECTABLE	
Preferred bupropion SR tablet (generic for Zyban® Tablet) Chantix® Tablet / Starting Box / Continuation Month Box - Quantity limited to 6 months per 12 months nicotine gum / lozenge (buccal) / patch  EN GR Clinical criter  Preferred  Genotropin® Cartridge / MiniQuick® Norditropin® Flexpro® Serostim® Vial  HYPOGL R	zolpidem SL tablet (generic for Intermezzo®)  OKING CESSATION  Non-Preferred  Nicotrol® Inhaler / NS Nasal Spray  NDOCRINOLOGY  COWTH HORMONE ria apply to all drugs in this class  Non-Preferred  Humatrope® Cartridge / Vial  Nutropin® AQ NuSpin®  Omnitrope® Cartridge / Vial  Saizen® Click-Easy® Cartridge / Vial  Zomacton® Vial  Zorbtive® Vial  YCEMICS - INJECTABLE tapid Acting Insulin	
Preferred bupropion SR tablet (generic for Zyban® Tablet) Chantix® Tablet / Starting Box / Continuation Month Box - Quantity limited to 6 months per 12 months nicotine gum / lozenge (buccal) / patch  EN GR Clinical criter Preferred  Genotropin® Cartridge / MiniQuick® Norditropin® Flexpro® Serostim® Vial  HYPOGL R Trial and failure	zolpidem SL tablet (generic for Intermezzo®)  OKING CESSATION  Non-Preferred  Nicotrol® Inhaler / NS Nasal Spray  NDOCRINOLOGY OWTH HORMONE ria apply to all drugs in this class  Non-Preferred  Humatrope® Cartridge / Vial  Nutropin® AQ NuSpin®  Omnitrope® Cartridge / Vial  Saizen® Click-Easy® Cartridge / Vial  Zomacton® Vial  Zorbtive® Vial  AYCEMICS - INJECTABLE tapid Acting Insulin  of only one preferred drug required	
Preferred bupropion SR tablet (generic for Zyban® Tablet) Chantix® Tablet / Starting Box / Continuation Month Box - Quantity limited to 6 months per 12 months nicotine gum / lozenge (buccal) / patch  BN GR Clinical criter Preferred  Genotropin® Cartridge / MiniQuick® Norditropin® Flexpro® Serostim® Vial  HYPOGL R Trial and failure Preferred	zolpidem SL tablet (generic for Intermezzo®)  OKING CESSATION  Non-Preferred  Nicotrol® Inhaler / NS Nasal Spray  NDOCRINOLOGY  COWTH HORMONE ria apply to all drugs in this class  Non-Preferred  Humatrope® Cartridge / Vial  Nutropin® AQ NuSpin®  Omnitrope® Cartridge / Vial  Saizen® Click-Easy® Cartridge / Vial  Zomacton® Vial  Zorbtive® Vial  YCEMICS - INJECTABLE tapid Acting Insulin	
Preferred bupropion SR tablet (generic for Zyban® Tablet) Chantix® Tablet / Starting Box / Continuation Month Box - Quantity limited to 6 months per 12 months nicotine gum / lozenge (buccal) / patch  EN GR Clinical criter Preferred  Genotropin® Cartridge / MiniQuick® Norditropin® Flexpro® Serostim® Vial  HYPOGL R Trial and failure Preferred  Humalog® U-100 Junior KwikPen®	zolpidem SL tablet (generic for Intermezzo®)  OKING CESSATION  Non-Preferred  Nicotrol® Inhaler / NS Nasal Spray  NDOCRINOLOGY  OWTH HORMONE  ria apply to all drugs in this class  Non-Preferred  Humatrope® Cartridge / Vial  Nutropin® AQ NuSpin®  Omnitrope® Cartridge / Vial  Saizen® Click-Easy® Cartridge / Vial  Zomacton® Vial  Zorbtive® Vial  YCEMICS - INJECTABLE  tapid Acting Insulin  of only one preferred drug required  Non-Preferred	
Preferred bupropion SR tablet (generic for Zyban® Tablet) Chantix® Tablet / Starting Box / Continuation Month Box - Quantity limited to 6 months per 12 months nicotine gum / lozenge (buccal) / patch  BN GR Clinical criter Preferred  Genotropin® Cartridge / MiniQuick® Norditropin® Flexpro® Serostim® Vial  HYPOGL R Trial and failure Preferred	zolpidem SL tablet (generic for Intermezzo®)  OKING CESSATION  Non-Preferred  Nicotrol® Inhaler / NS Nasal Spray  NDOCRINOLOGY COWTH HORMONE ria apply to all drugs in this class  Non-Preferred  Humatrope® Cartridge / Vial  Nutropin® AQ NuSpin®  Omnitrope® Cartridge / Vial  Saizen® Citc-Easy® Cartridge / Vial  Zomacton® Vial  Zorbtive® Vial  Zorbtive® Vial  Admelog® SoloStar® / Vial  Non-Preferred  Non-Preferred	
Preferred  bupropion SR tablet (generic for Zyban® Tablet)  Chantix® Tablet / Starting Box / Continuation Month Box - Quantity limited to 6 months per 12 months  nicotine gum / lozenge (buccal) / patch    DN	zolpidem SL tablet (generic for Intermezzo®)  OKING CESSATION  Non-Preferred  Nicotrol® Inhaler / NS Nasal Spray  NDOCRINOLOGY COWTH HORMONE ria apply to all drugs in this class  Non-Preferred  Humatrope® Cartridge / Vial  Nutropin® AQ NuSpin®  Omnitrope® Cartridge / Vial  Saizen® Click-Easy® Cartridge / Vial  Zomacton® Vial  Zorbtive® Vial  YCEMICS - INJECTABLE Lapid Acting Insulin  of only one preferred drug required  Non-Preferred  Admelog® SoloStar® / Vial  Afrezza® Inhalation Powder	
Preferred  bupropion SR tablet (generic for Zyban® Tablet)  Chantix® Tablet / Starting Box / Continuation Month Box - Quantity limited to 6 months per 12 months  nicotine gum / lozenge (buccal) / patch    DN	zolpidem SL tablet (generic for Intermezzo®)  OKING CESSATION  Non-Preferred  Nicotrol® Inhaler / NS Nasal Spray  NDOCRINOLOGY COWTH HORMONE ria apply to all drugs in this class  Non-Preferred  Humatrope® Cartridge / Vial  Nutropin® AQ NuSpin®  Omnitrope® Cartridge / Vial  Saizen® Click-Easy® Cartridge / Vial  Zomacton® Vial  Zorbtive® Vial  ACTECTABLE  Lapid Acting Insulin  of only one preferred drug required  Admelog® SoloStar® / Vial  Afrezza® Inhalation Powder  Apidra® SoloStar® / Vial	
Preferred bupropion SR tablet (generic for Zyban® Tablet) Chantix® Tablet / Starting Box / Continuation Month Box - Quantity limited to 6 months per 12 months nicotine gum / lozenge (buccal) / patch  BN GR Clinical criter Preferred  Genotropin® Cartridge / MiniQuick® Norditropin® Flexpro® Serostim® Vial  HYPOGL R Trial and failure Preferred  Humalog® U-100 Junior KwikPen® Hunalog® U-100 KwikPen® / Vial	zolpidem SL tablet (generic for Intermezzo®)  OKING CESSATION  Non-Preferred  Nicotrol® Inhaler / NS Nasal Spray  NDOCRINOLOGY  OWITH HORMONE  ria apply to all drugs in this class  Non-Preferred  Humatrope® Cartridge / Vial  Nutropin® AQ NuSpin®  Omnitrope® Cartridge / Vial  Saizen® Click-Easy® Cartridge / Vial  Zomacton® Vial  Zomocton® Vial  Zorbtive® Vial  Afrezza® Inhalation Powder  Apidra® SoloStar® / Vial  Afrezza® Inhalation Powder  Apidra® SoloStar® / Vial  Fiasp® FlexTouch® / Penfill® / Vial	
Preferred  bupropion SR tablet (generic for Zyban® Tablet)  Chantix® Tablet / Starting Box / Continuation Month Box - Quantity limited to 6 months per 12 months  nicotine gum / lozenge (buccal) / patch    DN	zolpidem SL tablet (generic for Intermezzo®)  OKING CESSATION  Non-Preferred  Nicotrol® Inhaler / NS Nasal Spray  NDOCRINOLOGY  COWTH HORMONE  ria apply to all drugs in this class  Non-Preferred  Humatrope® Cartridge / Vial  Nutropin® AQ NuSpin®  Omnitrope® Cartridge / Vial  Saizen® Click-Easy® Cartridge / Vial  Zomacton® Vial  Zorbtive® Vial  ACTURENTE SINJECTABLE  rapid Acting Insulin  of only one preferred drug required  Admelog® SoloStar® / Vial  Afrezza® Inhalation Powder  Apidra® SoloStar® / Penfil® / Vial  Fiasp® FlexTouch® / Penfil® / Vial  Humalog® U-100 Cartridge	
Preferred  bupropion SR tablet (generic for Zyban® Tablet)  Chantix® Tablet / Starting Box / Continuation Month Box - Quantity limited to 6 months per 12 months  nicotine gum / lozenge (buccal) / patch    DN	zolpidem SL tablet (generic for Intermezzo®)  OKING CESSATION  Non-Preferred  Nicotrol® Inhaler / NS Nasal Spray  NDOCRINOLOGY  NOWTH HORMONE  ria apply to all drugs in this class  Non-Preferred  Humatrope® Cartridge / Vial  Nutropin® AQ NuSpin®  Omnitrope® Cartridge / Vial  Saizen® Click-Easy® Cartridge / Vial  Zomacton® Vial  Zomocton® Vial  Zorbtive® Vial  Afrezza® Inhalation Powder  Apidra® SoloStar® / Vial  Afrezza® Inhalation Powder  Apidra® SoloStar® / Vial  Fiasp® FlexTouch® / Penfill® / Vial	
Preferred bupropion SR tablet (generic for Zyban® Tablet) Chantix® Tablet / Starting Box / Continuation Month Box - Quantity limited to 6 months per 12 months nicotine gum / lozenge (buccal) / patch    DN	zolpidem SL tablet (generic for Intermezzo®)  OKING CESSATION  Non-Preferred  Nicotrol® Inhaler / NS Nasal Spray  NODCRINOLOGY  (OWTH HORMONE  ria apply to all drugs in this class  Non-Preferred  Humatrope® Cartridge / Vial  Nutropin® AQ NuSpin®  Omnitrope® Cartridge / Vial  Saizen® Click-Easy® Cartridge / Vial  Zomacton® Vial  Zorbtive® Vial  Acting Insulin  of only one preferred drug required  Non-Preferred  Adnelog® SoloStar® / Vial  Afrezza® Inhalation Powder  Apidra® SoloStar® / Vial  Fiasp® TexTouch® / Penfill® / Vial  Humalog® U-100 Cartridge  Humalog® U-100 Cartridge  Humalog® U-200 KwikPen®	
Preferred bupropion SR tablet (generic for Zyban® Tablet) Chantix® Tablet / Starting Box / Continuation Month Box - Quantity limited to 6 months per 12 months nicotine gum / lozenge (buccal) / patch    DN	zolpidem SL tablet (generic for Intermezzo®)  OKING CESSATION  Non-Preferred  Nicotrol® Inhaler / NS Nasal Spray  NODOCRINOLOGY  OWTH HORMONE  ria apply to all drugs in this class  Non-Preferred  Humatrope® Cartridge / Vial  Nutropin® AQ NuSpin®  Omnitrope® Cartridge / Vial  Saizen® Click-Easy® Cartridge / Vial  Zomacton® Vial  Zorbitve® Vial  Zorbitve® Vial  YCEMICS - INJECTABLE  tapid Acting Insulin  of only one preferred drug required  Non-Preferred  Adnelog® SoloStar® / Vial  Afrezza® Inhalation Powder  Apidra® SoloStar® / Vial  Fiasp® FlexTouch® / Pentill® / Vial  Humalog® U-100 Cartridge  Humalog® U-100 Cartridge  Humalog® U-100 Cartridge / FlexPen® / vial (generic for Novolog®)  insulin aspart U-100 cartridge / FlexPen® / vial (generic for Novolog®)	
Preferred bupropion SR tablet (generic for Zyban® Tablet) Chantix® Tablet / Starting Box / Continuation Month Box - Quantity limited to 6 months per 12 months nicotine gum / lozenge (buccal) / patch    DN	zolpidem SL tablet (generic for Intermezzo®)  OKING CESSATION  Non-Preferred  Nicotro® Inhaler / NS Nasal Spray  Non-Preferred  Nicotro® Inhaler / NS Nasal Spray  NOORINOLOGY  OWITH HORMONE  ria apply to all drugs in this class  Non-Preferred  Humatrope® Cartridge / Vial  Nutropin® AQ NuSpin®  Omnitrope® Cartridge / Vial  Saizen® Click-Easy® Cartridge / Vial  Zomacton® Vial  Zorbtive® Vial  Zorbtive® Vial  YCEMICS - INJECTABLE  tapid Acting Insulin  of only one preferred drug required  Non-Preferred  Admelog® SoloStar® / Vial  Afrezza® Inhalation Powder  Apidra® SoloStar® / Vial  Humalog® U-100 Cartridge  Humalog® U-100 Cartridge  Humalog® U-100 Cartridge  Humalog® U-100 Lortridge  Humalog® U-100 Lortridge / FlexPen® / vial (generic for Humalog® Junior)  insulin Ispor U-100 WikPen® / vial (generic for Humalog® Junior)	
Preferred bupropion SR tablet (generic for Zyban® Tablet) Chantix® Tablet / Starting Box / Continuation Month Box - Quantity limited to 6 months per 12 months nicotine gum / lozenge (buccal) / patch    DN	zolpidem SL tablet (generic for Intermezzo®)  OKING CESSATION  Non-Preferred  Nicotrof® Inhaler / NS Nasal Spray  NOOCRINOLOGY  COWTH HORMONE  ria apply to all drugs in this class  Non-Preferred  Humatrope® Cartridge / Vial  Nutropin® AQ NuSpin®  Omaitrope® Cartridge / Vial  Saizen® Click-Easy® Cartridge / Vial  Saizen® Click-Easy® Cartridge / Vial  Zomacton® Vial  Zorbitve® Vial  Afrezza® Insulin  of only one preferred drug required  Adnelog® SoloStar® / Vial  Afrezza® Inhalation Powder  Apitra® SoloStar® / Vial  Fiasp® FlexTouch® / Penfill® / Vial  Humalog® U-100 Cartridge  Humalog® U-200 KwikPen® / vial (generic for Novolog®)  insulin ispro U-100 KwikPen® / vial (generic for Humalog®)  insulin ilspro U-100 KwikPen® / vial (generic for Humalog®)  insulin ilspro U-100 KwikPen® / vial (generic for Humalog®)	

## Effective: 06/01/2021

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 NOT 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

	/providers/programs-services/prescription-drugs/outpatient-pharmacy-services
	Acting Insulin
Preferred	lly one preferred drug required  Non-Preferred
Humulin® R Vial	Myxredlin <sup>™</sup> Injection
Humulin® R U-500 KwikPen® / U500 Vial	Novolin® R Vial / ReliOn® R Vial
	Novolin R FlexPen® NOT REVIEWED
	iate Acting Insulin
Preferred	Non-Preferred
Humulin® N Vial	Humulin® N KwikPen®
	Novolin® N Vial / ReliOn® N Vial
Lons	Acting Insulin
	aly one preferred drug required
Preferred	Non-Preferred
Lantus® SoloStar® / Vial	Basaglar® KwikPen®
_evemir® FlexTouch® / Vial	Semglee <sup>™</sup> Pen / Vial
	Toujeo® SoloStar® / Max SoloStar®
	Tresiba® FlexTouch® / Vial
n 'In	id Combination Insulin
Premixed Kap  Preferred	id Combination Insulin  Non-Preferred
Humalog® 50/50 Mix KwikPen® / Vial	insulin aspart protamine-aspart 70/30 U-100 FlexPen® / vial (generic for Novolog® Mix 70/30)
Humalog® 75/25 Mix KwikPen® / Vial	insulin lispro protamine-aspart 70/30 U-100 FiexPen / Viai (generic for Novolog Mix 70/30) insulin lispro protamine 75/25 KwikPen® (generic for Humalog® 75/25 Mix)
Novolog® Mix 70/30 FlexPen® / Vial	The state of the s
	30 Combination Insulin
Preferred	Non-Preferred
Humulin® 70/30 KwikPen® / Vial	Novolin® 70/30 FlexPen® / Vial / ReliOn® 70/30 Vial
Δn	lylin Analogs
	raindicated or documented adverse event when using either a preferred or non-preferred Amylin Analog
Preferred	Non-Preferred
Symlin® Pen Injector	Noil-Treierreu
synnin Ten injector	
GLP-1 Receptor	Agonists and Combinations
Requires trial and failure or insufficient response to metformin containing products (except for diabetic bene	ficiaries with ASCVD, heart failure, or CKD) unless contraindicated or documented adverse event when using either a
preferred or a non-preferred G	LP-1 Receptor Agonist and Combination
Preferred	Non-Preferred
	Continuation of therapy requires documentation that clinical goals have been met
Bydureon® Pen	Adlyxin® Injection
Byetta® Pen	Bydureon <sup>®</sup> BCise <sup>™</sup>
Trulicity <sup>®</sup> Pen Victoza <sup>®</sup> Pen	Ozempic <sup>®</sup> Injection  Rybelsus <sup>®</sup> Tablet
Victoza Pen	Soliqua® Injection
	Xultophy® Injection
	Autophy injection
HYPOGL	YCEMICS - ORAL
2nd Gener	ation Sulfonylureas
Preferred	Non-Preferred
Amaryi <sup>®</sup> Tablet	
glimepiride tablet (generic for Amaryl®)	
glipizide tablet / ER tablet (generic for Glucotrol® / XL)	
Glucotrol® Tablet / XL Tablet	
elyburide micronized tablet (generic for Micronase®, Glynase®)	
Plyburide tablet (generic for Diabeta®)	
Jiynase Tablet	
	acosidase Inhibitors
Alpha-Glı	acosidase Inhibitors  Non-Preferred
	Non-Preferred
Alpha-Glu  Preferred  scarbose tablet (generic for Precose®)	
Alpha-Glu  Preferred  ncarbose tablet (generic for Precose®)	Non-Preferred miglitol tablet (generic for Glyset®)
Alpha-Gli  Preferred  acarbose tablet (generic for Precose®) Glyset® Tablet	Non-Preferred miglitol tablet (generic for Glyset®)
Alpha-Gli  Preferred  acarbose tablet (generic for Precose®) Glyset® Tablet	Non-Preferred miglitol tablet (generic for Glyset®) Precose® Tablet
Alpha-Gli Preferred  acarbose tablet (generic for Precose®) Glyset® Tablet  Biguanide Preferred	Non-Preferred  miglitol tablet (generic for Glyset®)  Precose® Tablet  s and Combinations  Non-Preferred  Fortamet® Tablet
Alpha-Gli Preferred  acarbose tablet (generic for Precose®) Glyset® Tablet  Biguanide  Preferred  glipizide-metformin tablet (generic for Metaglip®)	Non-Preferred  miglitol tablet (generic for Glyset®)  Precose® Tablet  s and Combinations  Non-Preferred
Alpha-Gli Preferred  acarbose tablet (generic for Precose®) Glyset® Tablet  Biguanide Preferred  Alpha-Gli Preferred  Biguanide Preferred	Non-Preferred  miglitol tablet (generic for Glyset®)  Precose® Tablet  s and Combinations  Non-Preferred  Fortamet® Tablet
Alpha-Gli Preferred  acarbose tablet (generic for Precose®) Glyset® Tablet  Biguanide Preferred glipizide-metformin tablet (generic for Metaglip®) glyburide-metformin tablet (generic for Glucovance®)	Non-Preferred  miglitol tablet (generic for Glyset®) Precose® Tablet  s and Combinations  Non-Preferred  Fortamet® Tablet Glucophage® Tablet / ER Tablet Glucophage® Tablet / ER Tablet
Alpha-Gli Preferred  acarbose tablet (generic for Precose®) Glyset® Tablet  Biguanide Preferred glipizide-metformin tablet (generic for Metaglip®) glyburide-metformin tablet (generic for Glucovance®)	Non-Preferred  miglitol tablet (generic for Glyset®)  Precose® Tablet  s and Combinations  Non-Preferred  Fortamet® Tablet  Glucophage® Tablet / ER Tablet
Alpha-Gli Preferred  acarbose tablet (generic for Precose®) Glyset® Tablet  Biguanide Preferred glipizide-metformin tablet (generic for Metaglip®) glyburide-metformin tablet (generic for Glucovance®)	miglitol tablet (generic for Glyset®) Precose® Tablet  s and Combinations  Non-Preferred  Fortamet® Tablet Glucophage® Tablet / ER Tablet Glucophage® Tablet / ER Tablet Glumetza® Tablet ** requires documentation as to why the beneficiary cannot use preferred long acting metformin product metformin solution (generic for Riomet® Solution) Exemption for children < 12 years of age
Preferred  acarbose tablet (generic for Precose®)  Glyset® Tablet  Biguanide	Non-Preferred  miglitol tablet (generic for Glyset®)  Precose® Tablet  s and Combinations  Non-Preferred  Fortamet® Tablet Glucophage® Tablet / ER Tablet  Glumetza® Tablet ** requires documentation as to why the beneficiary cannot use preferred long acting metformin product  metformin solution (generic for Riomet® Solution) Exemption for children < 12 years of age  metformin ER tablet (generic for Fortamet®)

## Effective: 06/01/2021

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

Preferred

reviewed by the PDL Panel. These drugs are listed as NOT 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

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

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 or Combination

Non-Preferred

Preferred	Non-Preferred
Glyxambi® Tablet	alogliptin tablet (generic for Nesina®)
Janumet® Tablet	alogliptin-metformin tablet (generic for Kazano®)
Janumet® XR Tablet	alogliptin-pioglitazone tablet (generic for Oseni®)
Januvia® Tablet	Jentadueto® XR Tablet
Jentadueto® Tablet	Kazano <sup>®</sup> Tablet
Onglyza <sup>®</sup> Tablet	Kombiglyze® XR Tablet
Tradjenta® Tablet	Nesina® Tablet
Iradjenta labiet	
	Oseni <sup>®</sup> Tablet
	Qtern <sup>®</sup> Tablet
	Steglujan® Tablet
	Trijardy® XR Tablet
	Injardy AK raolet
Me	glitinides
Preferred	Non-Preferred
nateglinide tablet (generic for Starlix®)	Prandin® Tablet
	Starlix Tablet
repaglinide tablet (generic for Prandin®)	
	repaglinide-metformin tablet (generic for Prandimet®)
Sodium-Glucose Co-Transporter	2 (SGLT2) Inhibitor and Combinations
event when using either a preferred or a non-preferred SGLT2 Inhibitor and Combination. When	roducts (except for beneficiaries with ASCVD, heart failure, or CKD) unless contraindicated or documented adverse he primary indication is heart failure, no trial and failure of metformin-containing products is required.
Preferred	Non-Preferred
Farxiga® Tablet	Invokamet® Tablet / XR Tablet
Jardiance <sup>®</sup> Tablet	Invokana® Tablet
	Segluromet <sup>™</sup> Tablet
	Steglatro Tablet
	Synjardy® Tablet / XR Tablet
	Xigduo® XR Tablet
Thiazolidinadio	nes and Combinations
Preferred	Non-Preferred
pioglitazone tablet (generic for Actos®)	ActoPlus Met® Tablet / XR Tablet
	Actos® Tablet
	Avandia® Tablet
	Duetact® Tablet
	pioglitazone-glimepiride tablet (generic for Duetact®)
	pioglitazone-metformin tablet (generic for ActoPlus Met <sup>®</sup> )
	pioglitazone-metformin tablet (generic for ActoPlus Met®)
CASTDO	
	INTESTINAL
	INTESTINAL ITIVERTIGO AGENTS
	INTESTINAL
ANTIEMETIC-AP Preferred	INTESTINAL TIVERTIGO AGENTS Non-Preferred
ANTIEMETIC-ANDIELEGIS® Tablet	INTESTINAL  ITIVERTIGO AGENTS  Non-Preferred  Akynzeo® Capsule / Vial
ANTIEMETIC-ANDICLEGIS® Tablet  dimenhydrinate vial (generic for Dramamine®)	INTESTINAL  ITIVERTIGO AGENTS  Non-Preferred  Akynzeo® Capsule / Vial  Aloxi® Vial NOT REVIEWED
ANTIEMETIC-AND Preferred  Diclegis® Tablet dimenhydrinate vial (generic for Dramamine®)  Emend® Capsule - Clinical criteria apply	INTESTINAL  ITIVERTIGO AGENTS  Non-Preferred  Akynzeo® Capsule / Vial  Aloxi® Vial NOT REVIEWED  Anzemet® Tablet
ANTIEMETIC-AND Preferred  Diclegis® Tablet dimenhydrinate vial (generic for Dramamine®)  Emend® Capsule - Clinical criteria apply meclizine tablet (generic for Antivert®)	INTESTINAL  TIVERTIGO AGENTS  Non-Preferred  Akynzeo® Capsule / Vial  Alost® Vial NOT REVIEWED  Anzemet® Tablet aprepitant capsule/pack (generic for Emend®) - Clinical criteria apply
ANTIEMETIC-AND Preferred  Diclegis® Tablet dimenhydrinate vial (generic for Dramamine®)  Emend® Capsule - Clinical criteria apply	INTESTINAL  ITIVERTIGO AGENTS  Non-Preferred  Akynzeo® Capsule / Vial  Aloxi® Vial NOT REVIEWED  Anzemet® Tablet
ANTIEMETIC-ANDICLESS® Tablet  Diclegis® Tablet  dimenhydrinate vial (generic for Dramamine®)  Emend® Capsule - Clinical criteria apply  meclizine tablet (generic for Antivert®)  metoclopramide solution / tablet (generic for Reglan®)	INTESTINAL  TIVERTIGO AGENTS  Non-Preferred  Akynzeo® Capsule / Vial  Aloxi® Vial NOT REVIEWED  Anzemet® Tablet aprepitant capsule/pack (generic for Emend®) - Clinical criteria apply  Barhemsys® Vial NOT REVIEWED
ANTIEMETIC-AP  Preferred  Diclegis® Tablet dimenhydrinate vial (generic for Dramanine®) Emend® Capsule - Clinical criteria apply meclizine tablet (generic for Antivert®) metoclopramide solution / tablet (generic for Reglan®) ondansetron ODT / solution / tablet (generic for Zofran®)	INTESTINAL  TIVERTIGO AGENTS  Non-Preferred  Akynzeo® Capsule / Vial Alosi® Vial NOT REVIEWED  Anzeme® Tablet aprepitant capsule/pack (generic for Emend®) - Clinical criteria apply  Barhemsys® Vial NOT REVIEWED  Bonjesta® Tablet
ANTIEMETIC-ANDICLEGIS® Tablet  Diclegis® Tablet  dimenhydrinate vial (generic for Dramanine®)  Emend® Capsule - Clinical criteria apply  meclizine tablet (generic for Antivert®)  metoclopramide solution / tablet (generic for Reglan®)  ondansetron ODT / solution / tablet (generic for Zofran®)  prochlorperazine tablet (generic for Compazine®)	INTESTINAL  TIVERTIGO AGENTS  Non-Preferred  Akynzeo® Capsule / Vial  Aloxi® Vial NOT REVIEWED  Anzemet® Tablet  aprepitant capsule/pack (generic for Emend®) - Clinical criteria apply  Barhemsys® Vial NOT REVIEWED  Bonjesta® Tablet Cinvant® Injectable Emulsion
ANTIEMETIC-AS  Preferred  Diclegis® Tablet dimenhydrinate vial (generic for Dramamine®) Emend® Capsule - Clinical criteria apply meclizine tablet (generic for Antivert®) metoclopramide solution / tablet (generic for Reglan®) ondansetron ODT / solution / tablet (generic for Zofran®) prochlorperazine tablet (generic for Compazine®) promethazine 12.5 mg. 25 mg rectal (generic for Phenergan®)	INTESTINAL  TIVERTIGO AGENTS  Non-Preferred  Akynzeo® Capsule / Vial  Aloxi® Vial NOT REVIEWED  Anzemet® Tablet aprepitant capsule/pack (generic for Emend®) - Clinical criteria apply  Barhensys® Vial NOT REVIEWED  Bonjesta® Tablet Cinvant® Injectable Emulsion  Compro® Rectal
ANTIEMETIC-ANDICLEGIS® Tablet  Diclegis® Tablet  dimenhydrinate vial (generic for Dramanine®)  Emend® Capsule - Clinical criteria apply  meclizine tablet (generic for Antivert®)  metoclopramide solution / tablet (generic for Reglan®)  ondansetron ODT / solution / tablet (generic for Zofran®)  prochlorperazine tablet (generic for Compazine®)	INTESTINAL  TIVERTIGO AGENTS  Non-Preferred  Akynzeo® Capsule / Vial  Aloxi® Vial NOT REVIEWED  Anzemet® Tablet  aprepitant capsule/pack (generic for Emend®) - Clinical criteria apply  Barhemsys® Vial NOT REVIEWED  Bonjesta® Tablet Cinvant® Injectable Emulsion
ANTIEMETIC-AS  Preferred  Diclegis® Tablet dimenhydrinate vial (generic for Dramamine®) Emend® Capsule - Clinical criteria apply meclizine tablet (generic for Antivert®) metoclopramide solution / tablet (generic for Reglan®) ondansetron ODT / solution / tablet (generic for Zofran®) prochlorperazine tablet (generic for Compazine®) promethazine 12.5 mg. 25 mg rectal (generic for Phenergan®)	INTESTINAL  TIVERTIGO AGENTS  Non-Preferred  Akynzeo® Capsule / Vial  Aloxi® Vial NOT REVIEWED  Anzemet® Tablet aprepitant capsule/pack (generic for Emend®) - Clinical criteria apply  Barhensys® Vial NOT REVIEWED  Bonjesta® Tablet Cinvant® Injectable Emulsion  Compro® Rectal
ANTIEMETIC-AN  Preferred  Diclegis® Tablet dimenhydrinate vial (generic for Dramamine®) Emend® Capsule - Clinical criteria apply meclizine tablet (generic for Antiver®) metoclopramide solution / tablet (generic for Reglan®) ondansetron ODT / solution / tablet (generic for Zofran®) prochlorperazine tablet (generic for Compazine®) promethazine 12.5 mg, 25 mg rectal (generic for Phenergan®) promethazine syrup / tablet (generic for Phenergan®) promethazine ampule/vial (generic for Phenergan®)	INTESTINAL TIVERTIGO AGENTS  Non-Preferred  Akynzeo® Capsule / Vial Aloxi® Vial NOT REVIEWED  Anzemet® Tablet aprepitant capsule/pack (generic for Emend®) - Clinical criteria apply  Barhensys® Vial NOT REVIEWED  Bonjesta® Tablet Cinvanti® Injectable Emulsion Compro® Rectal doxylamine-pyridoxine tablet (generic for Diclegis® Tablet) dronabinol capsule (generic for Marinol®)
ANTIEMETIC-ANDICLEGIS® Tablet  dimenhydrinate vial (generic for Dramamine®)  Emend® Capsule - Clinical criteria apply meelizine tablet (generic for Antiver®) meetolopramide solution / tablet (generic for Reglan®) ondansetron ODT / solution / tablet (generic for Zofran®) prochlorperazine tablet (generic for Compazine®) promethazine 12.5 mg, 25 mg rectal (generic for Phenergan®) promethazine syrup / tablet (generic for Phenergan®)	INTESTINAL  TIVERTIGO AGENTS  Non-Preferred  Akynzeo® Capsule / Vial  Aloxi® Vial NOT REVIEWED  Anzemet® Tablet aprepitant capsule/pack (generic for Emend®) - Clinical criteria apply  Barhemsys® Vial NOT REVIEWED  Bonjesta® Tablet  Cinvani® Injectable Emulsion  Compro® Rectal doxylamine-pyridoxine tablet (generic for Diclegis® Tablet) dronabinol capsule (generic for Marinol®)  Emend® Powder Packet / Trifold Pack - Clinical criteria apply
ANTIEMETIC-AN  Preferred  Diclegis® Tablet dimenhydrinate vial (generic for Dramamine®) Emend® Capsule - Clinical criteria apply meclizine tablet (generic for Antiver®) metoclopramide solution / tablet (generic for Reglan®) ondansetron ODT / solution / tablet (generic for Zofran®) prochlorperazine tablet (generic for Compazine®) promethazine 12.5 mg, 25 mg rectal (generic for Phenergan®) promethazine syrup / tablet (generic for Phenergan®) promethazine ampule/vial (generic for Phenergan®)	INTESTINAL  TIVERTIGO AGENTS  Non-Preferred  Akynzeo® Capsule / Vial  Aloxi® Vial NOT REVIEWED  Anzemet® Tablet  aprepitant capsule/pack (generic for Emend®) - Clinical criteria apply  Barhemsys® Vial NOT REVIEWED  Bonjesta® Tablet  Cinvani® Injectable Emulsion  Compro® Rectal  doxylamine-pyridoxine tablet (generic for Diclegis® Tablet)  dronabinol capsule (generic for Marinol®)  Emend® Powder Packet / Trifold Pack - Clinical criteria apply  Emend® Vial NOT REVIEWED
ANTIEMETIC-AN  Preferred  Diclegis® Tablet dimenhydrinate vial (generic for Dramamine®) Emend® Capsule - Clinical criteria apply meclizine tablet (generic for Antiver®) metoclopramide solution / tablet (generic for Reglan®) ondansetron ODT / solution / tablet (generic for Zofran®) prochlorperazine tablet (generic for Compazine®) promethazine 12.5 mg, 25 mg rectal (generic for Phenergan®) promethazine syrup / tablet (generic for Phenergan®) promethazine ampule/vial (generic for Phenergan®)	INTESTINAL  TIVERTIGO AGENTS  Non-Preferred  Akynzeo® Capsule / Vial Adot® Vial NOT REVIEWED  Anzeme® Tablet aprepitant capsule/pack (generic for Emend®) - Clinical criteria apply  Barhemsys® Vial NOT REVIEWED  Bonjesta® Tablet Cinvant® Injectable Emulsion  Compro® Rectal doxylamine-pyridoxine tablet (generic for Diclegis® Tablet) dronabinol capsule (generic for Marinol®)  Emend® Powder Packet / Trifold Pack - Clinical criteria apply  Emend® Vial NOT REVIEWED  fosaprepitant vial (generic for Emend®)
ANTIEMETIC-ANDICLEGIS® Tablet  dimenhydrinate vial (generic for Dramamine®)  Emend® Capsule - Clinical criteria apply meclizine tablet (generic for Antiver®) metoclopramide solution / tablet (generic for Reglan®) ondansetron ODT / solution / tablet (generic for Zofran®) pronchlorperazine tablet (generic for Compazine®) promethazine 12.5 mg, 25 mg rectal (generic for Phenergan®) promethazine syrup / tablet (generic for Phenergan®) promethazine ampule/vial (generic for Phenergan®)	INTESTINAL  TIVERTIGO AGENTS  Non-Preferred  Akynzeo® Capsule / Vial  Aloxi® Vial NOT REVIEWED  Anzemet® Tablet  aprepitant capsule/pack (generic for Emend®) - Clinical criteria apply  Barhemsys® Vial NOT REVIEWED  Bonjesta® Tablet  Cinvani® Injectable Emulsion  Compro® Rectal  doxylamine-pyridoxine tablet (generic for Diclegis® Tablet)  dronabinol capsule (generic for Marinol®)  Emend® Powder Packet / Trifold Pack - Clinical criteria apply  Emend® Vial NOT REVIEWED
ANTIEMETIC-ANDICLEGIS® Tablet  dimenhydrinate vial (generic for Dramamine®)  Emend® Capsule - Clinical criteria apply meclizine tablet (generic for Antiver®) metoclopramide solution / tablet (generic for Reglan®) ondansetron ODT / solution / tablet (generic for Zofran®) pronchlorperazine tablet (generic for Compazine®) promethazine 12.5 mg, 25 mg rectal (generic for Phenergan®) promethazine syrup / tablet (generic for Phenergan®) promethazine ampule/vial (generic for Phenergan®)	INTESTINAL  ITIVERTIGO AGENTS  Non-Preferred  Akynzeo® Capsule / Vial  Akynzeo® Capsule / Vial  Aloxi® Vial NOT REVIEWED  Anzemet® Tablet aprepitant capsule/pack (generic for Emend®) - Clinical criteria apply  Barhemsys® Vial NOT REVIEWED  Bonjesta® Tablet Cinvanti® Injectable Emulsion  Compro® Rectal doxylamine-pyridoxine tablet (generic for Diclegis® Tablet) dronabinol capsule (generic for Marinol®)  Emend® Powder Packet / Trifold Pack - Clinical criteria apply  Emend® Vial NOT REVIEWED  fosaprepitant vial (generic for Emend®)  Gimoti™ Nasal Spray NOT REVIEWED
ANTIEMETIC-AN  Preferred  Diclegis® Tablet dimenhydrinate vial (generic for Dramamine®) Emend® Capsule - Clinical criteria apply meclizine tablet (generic for Antiver®) metoclopramide solution / tablet (generic for Reglan®) ondansetron ODT / solution / tablet (generic for Zofran®) prochlorperazine tablet (generic for Compazine®) promethazine 12.5 mg, 25 mg rectal (generic for Phenergan®) promethazine syrup / tablet (generic for Phenergan®) promethazine ampule/vial (generic for Phenergan®)	INTESTINAL  ITIVERTIGO AGENTS  Non-Preferred  Akynzeo® Capsule / Vial  Akynzeo® Capsule / Vial  Aloxi® Vial NOT REVIEWED  Anzemet® Tablet aprepitant capsule/pack (generic for Emend®) - Clinical criteria apply  Barhemsys® Vial NOT REVIEWED  Bonjesta® Tablet Cinvanti® Injectable Emulsion  Compro® Rectal doxylamine-pyridoxine tablet (generic for Diclegis® Tablet) dronabinol capsule (generic for Marinol®)  Emend® Powder Packet / Trifold Pack - Clinical criteria apply  Emend® Vial NOT REVIEWED  Gimoti® Nasal Spray NOT REVIEWED  granisetron tablets (generic for Kytril®)
ANTIEMETIC-AN  Preferred  Diclegis® Tablet dimenhydrinate vial (generic for Dramamine®) Emend® Capsule - Clinical criteria apply meclizine tablet (generic for Antiver®) metoclopramide solution / tablet (generic for Reglan®) ondansetron ODT / solution / tablet (generic for Zofran®) prochlorperazine tablet (generic for Compazine®) promethazine 12.5 mg, 25 mg rectal (generic for Phenergan®) promethazine syrup / tablet (generic for Phenergan®) promethazine ampule/vial (generic for Phenergan®)	INTESTINAL  TIVERTIGO AGENTS  Non-Preferred  Akynzeo® Capsule / Vial  Akynzeo® Capsule / Vial  Aloxi® Vial NOT REVIEWED  Anzemet® Tablet aprepitant capsule/pack (generic for Emend®) - Clinical criteria apply  Barhemys® Vial NOT REVIEWED  Bonjesta® Tablet Cinvanti® Injectable Emulsion Compro® Rectal doxylamine-pyridoxine tablet (generic for Diclegis® Tablet) dronabinol capsule (generic for Marinol®) Emend® Powder Packet / Trifold Pack - Clinical criteria apply Emend® Vial NOT REVIEWED fosaprepitant vial (generic for Emend®) Gimoti® Nasal Spray NOT REVIEWED granisetron injection (generic for Kytril®) granisetron injection (generic for Kytril®) NOT REVIEWED
ANTIEMETIC-AN  Preferred  Diclegis® Tablet dimenhydrinate vial (generic for Dramamine®) Emend® Capsule - Clinical criteria apply meclizine tablet (generic for Antiver®) metoclopramide solution / tablet (generic for Reglan®) ondansetron ODT / solution / tablet (generic for Zofran®) prochlorperazine tablet (generic for Compazine®) promethazine 12.5 mg, 25 mg rectal (generic for Phenergan®) promethazine syrup / tablet (generic for Phenergan®) promethazine ampule/vial (generic for Phenergan®)	INTESTINAL  TIVERTIGO AGENTS  Non-Preferred  Akynzeo® Capsule / Vial  Aloxi® Vial NOT REVIEWED  Anzemet® Tablet aprepitant capsule/pack (generic for Emend®) - Clinical criteria apply  Barhemsys® Vial NOT REVIEWED  Bonjesta® Tablet Cinvant® Injectable Emulsion  Compro® Rectal doxylamine-pyridoxine tablet (generic for Diclegis® Tablet) dronabinol capsule (generic for Marinol®)  Emend® Powder Packet / Trifold Pack - Clinical criteria apply  Emend® Vial NOT REVIEWED  fosaprepitant vial (generic for Emend®)  Gimoti® Nasal Spray NOT REVIEWED  granisetron injection (generic for Kytril®)  granisetron injection (generic for Kytril®)  Marinol® Capsule
ANTIEMETIC-AN  Preferred  Diclegis® Tablet dimenhydrinate vial (generic for Dramamine®) Emend® Capsule - Clinical criteria apply meclizine tablet (generic for Antiver®) metoclopramide solution / tablet (generic for Reglan®) ondansetron ODT / solution / tablet (generic for Zofran®) prochlorperazine tablet (generic for Compazine®) promethazine 12.5 mg, 25 mg rectal (generic for Phenergan®) promethazine syrup / tablet (generic for Phenergan®) promethazine ampule/vial (generic for Phenergan®)	INTESTINAL  TIVERTIGO AGENTS  Non-Preferred  Akynzeo® Capsule / Vial  Akynzeo® Capsule / Vial  Aloxi® Vial NOT REVIEWED  Anzemet® Tablet aprepitant capsule/pack (generic for Emend®) - Clinical criteria apply  Barhemys® Vial NOT REVIEWED  Bonjesta® Tablet Cinvanti® Injectable Emulsion Compro® Rectal doxylamine-pyridoxine tablet (generic for Diclegis® Tablet) dronabinol capsule (generic for Marinol®) Emend® Powder Packet / Trifold Pack - Clinical criteria apply Emend® Vial NOT REVIEWED fosaprepitant vial (generic for Emend®) Gimoti® Nasal Spray NOT REVIEWED granisetron injection (generic for Kytril®) granisetron injection (generic for Kytril®) NOT REVIEWED
ANTIEMETIC-AN  Preferred  Diclegis® Tablet dimenhydrinate vial (generic for Dramamine®) Emend® Capsule - Clinical criteria apply meclizine tablet (generic for Antiver®) metoclopramide solution / tablet (generic for Reglan®) ondansetron ODT / solution / tablet (generic for Zofran®) prochlorperazine tablet (generic for Compazine®) promethazine 12.5 mg, 25 mg rectal (generic for Phenergan®) promethazine syrup / tablet (generic for Phenergan®) promethazine ampule/vial (generic for Phenergan®)	INTESTINAL  TIVERTIGO AGENTS  Non-Preferred  Akynzeo® Capsule / Vial  Aloxi® Vial NOT REVIEWED  Anzemet® Tablet aprepitant capsule/pack (generic for Emend®) - Clinical criteria apply  Barhemsys® Vial NOT REVIEWED  Bonjesta® Tablet Cinvant® Injectable Emulsion  Compro® Rectal doxylamine-pyridoxine tablet (generic for Diclegis® Tablet) dronabinol capsule (generic for Marinol®)  Emend® Powder Packet / Trifold Pack - Clinical criteria apply  Emend® Vial NOT REVIEWED  fosaprepitant vial (generic for Emend®)  Gimoti® Nasal Spray NOT REVIEWED  granisetron injection (generic for Kytril®)  granisetron injection (generic for Kytril®)  Marinol® Capsule
ANTIEMETIC-AN  Preferred  Diclegis® Tablet dimenhydrinate vial (generic for Dramamine®) Emend® Capsule - Clinical criteria apply meclizine tablet (generic for Antiver®) metoclopramide solution / tablet (generic for Reglan®) ondansetron ODT / solution / tablet (generic for Zofran®) prochlorperazine tablet (generic for Compazine®) promethazine 12.5 mg, 25 mg rectal (generic for Phenergan®) promethazine syrup / tablet (generic for Phenergan®) promethazine ampule/vial (generic for Phenergan®)	INTESTINAL  ITIVERTIGO AGENTS  Non-Preferred  Akynzeo® Capsule / Vial  Akynzeo® Capsule / Vial  Aloxi® Vial NOT REVIEWED  Anzemet® Tablet aprepitant capsule/pack (generic for Emend®) - Clinical criteria apply  Barhensys® Vial NOT REVIEWED  Bonjesta® Tablet Cinvant® Injectable Emulsion  Compro® Rectal doxylamine-pyridoxine tablet (generic for Diclegis® Tablet) dronabinot capsule (generic for Marinol®)  Emend® Powder Packet / Trifold Pack - Clinical criteria apply  Emend® Vial NOT REVIEWED  fosaprepitant vial (generic for Emend®)  Gimoti™ Nasal Spray NOT REVIEWED  granisetron injection (generic for Kytril®) NOT REVIEWED  Marinol® Capsule  metoclopramide ODT (generic for Metozolv®)  metoclopramide ODT (generic for Reglan®)  metoclopramide ODT (generic for Reglan®)
ANTIEMETIC-AN  Preferred  Diclegis® Tablet dimenhydrinate vial (generic for Dramamine®) Emend® Capsule - Clinical criteria apply meclizine tablet (generic for Antiver®) metoclopramide solution / tablet (generic for Reglan®) ondansetron ODT / solution / tablet (generic for Zofran®) prochlorperazine tablet (generic for Compazine®) promethazine 12.5 mg, 25 mg rectal (generic for Phenergan®) promethazine syrup / tablet (generic for Phenergan®) promethazine ampule/vial (generic for Phenergan®)	INTESTINAL  TIVERTIGO AGENTS  Non-Preferred  Akynzeo® Capsule / Vial  Akynzeo® Capsule / Vial  Aloxi® Vial NOT REVIEWED  Anzemet® Tablet aprepitant capsule/pack (generic for Emend®) - Clinical criteria apply  Barhemsys® Vial NOT REVIEWED  Bonjesta® Tablet Cinvant® Injectable Emulsion  Compro® Rectal  doxylamine-pyridoxine tablet (generic for Diclegis® Tablet) dronabinol capsule (generic for Marinol®)  Emend® Powder Packet / Trifold Pack - Clinical criteria apply  Emend® Vial NOT REVIEWED  Gimoti® Nasal Spray NOT REVIEWED  granisetron tablets (generic for Kytril®)  granisetron injection (generic for Kytril®) NOT REVIEWED  Marinof® Capsule  metoclopramide ODT (generic for Mezolv®)  metoclopramide Vol NOT REVIEWED  metoclopramide ODT (generic for Reglan®)  metoclopramide Vol NOT REVIEWED  metoclopramide Vol NOT REVIEWED  metoclopramide Vol NOT REVIEWED
ANTIEMETIC-AN  Preferred  Diclegis® Tablet dimenhydrinate vial (generic for Dramamine®) Emend® Capsule - Clinical criteria apply meclizine tablet (generic for Antiver®) metoclopramide solution / tablet (generic for Reglan®) ondansetron ODT / solution / tablet (generic for Zofran®) prochlorperazine tablet (generic for Compazine®) promethazine 12.5 mg, 25 mg rectal (generic for Phenergan®) promethazine syrup / tablet (generic for Phenergan®) promethazine ampule/vial (generic for Phenergan®)	INTESTINAL  TIVERTIGO AGENTS  Non-Preferred  Akynzeo® Capsule / Vial  Akynzeo® Capsule / Vial  Aloxi® Vial NOT REVIEWED  Anzemet® Tablet aprepitant capsule/pack (generic for Emend®) - Clinical criteria apply  Barhemsys® Vial NOT REVIEWED  Bonjesta® Tablet Cinvanti® Injectable Emulsion  Compro® Rectal doxylamine-pyridoxine tablet (generic for Diclegis® Tablet) dronabinol capsule (generic for Marinol®)  Emend® Powder Packet / Trifold Pack - Clinical criteria apply  Emend® Vial NOT REVIEWED  Gimoti® Nasal Spray NOT REVIEWED  granisetron tablets (generic for Kytril®) NOT REVIEWED  Marino® Capsule  metoclopramide ODT (generic for Metozolv®)  metoclopramide ODT (generic for Reglan®)  metoclopramide Vol NOT REVIEWED  ondansetron vial NOT REVIEWED  ondansetron vial NOT REVIEWED
ANTIEMETIC-AN  Preferred  Diclegis® Tablet dimenhydrinate vial (generic for Dramamine®) Emend® Capsule - Clinical criteria apply meclizine tablet (generic for Antiver®) metoclopramide solution / tablet (generic for Reglan®) ondansetron ODT / solution / tablet (generic for Zofran®) prochlorperazine tablet (generic for Compazine®) promethazine 12.5 mg, 25 mg rectal (generic for Phenergan®) promethazine syrup / tablet (generic for Phenergan®) promethazine ampule/vial (generic for Phenergan®)	INTESTINAL TIVERTIGO AGENTS  Non-Preferred  Akynzeo® Capsule / Vial  Aloxi® Vial NOT REVIEWED  Anzemet® Tablet aprepitant capsule/pack (generic for Emend®) - Clinical criteria apply  Barhensys® Vial NOT REVIEWED  Bonjesta® Tablet Cinvanti® Injectable Emulsion Compro® Rectal doxylamine-pyridoxine tablet (generic for Diclegis® Tablet) dronabinol capsule (generic for Marinol®) Emend® Powder Packet / Trifold Pack - Clinical criteria apply  Emend® Vial NOT REVIEWED fosaprepitant vial (generic for Emend®) Gimoti® Nasal Spray NOT REVIEWED granisetron tablets (generic for Kytril®) granisetron tablets (generic for Kytril®) NOT REVIEWED  Marinol® Capsule metoclopramide ODT (generic for Reglan®) metoclopramide od NOT REVIEWED ondansetron vial NOT REVIEWED ondansetron vial NOT REVIEWED
ANTIEMETIC-AN  Preferred  Diclegis® Tablet dimenhydrinate vial (generic for Dramamine®) Emend® Capsule - Clinical criteria apply meclizine tablet (generic for Antiver®) metoclopramide solution / tablet (generic for Reglan®) ondansetron ODT / solution / tablet (generic for Zofran®) prochlorperazine tablet (generic for Compazine®) promethazine 12.5 mg, 25 mg rectal (generic for Phenergan®) promethazine syrup / tablet (generic for Phenergan®) promethazine ampule/vial (generic for Phenergan®)	INTESTINAL  TIVERTIGO AGENTS  Non-Preferred  Akynzeo® Capsule / Vial  Akynzeo® Capsule / Vial  Aloxi® Vial NOT REVIEWED  Anzemet® Tablet aprepitant capsule/pack (generic for Emend®) - Clinical criteria apply  Barhemsys® Vial NOT REVIEWED  Bonjesta® Tablet Cinvanti® Injectable Emulsion  Compro® Rectal doxylamine-pyridoxine tablet (generic for Diclegis® Tablet) dronabinol capsule (generic for Marinol®)  Emend® Powder Packet / Trifold Pack - Clinical criteria apply  Emend® Vial NOT REVIEWED  Gimoti® Nasal Spray NOT REVIEWED  granisetron tablets (generic for Kytril®) NOT REVIEWED  Marino® Capsule  metoclopramide ODT (generic for Metozolv®)  metoclopramide ODT (generic for Reglan®)  metoclopramide Vol NOT REVIEWED  ondansetron vial NOT REVIEWED  ondansetron vial NOT REVIEWED
ANTIEMETIC-ANDICLEGIS® Tablet  dimenhydrinate vial (generic for Dramamine®)  Emend® Capsule - Clinical criteria apply meclizine tablet (generic for Antiver®) metoclopramide solution / tablet (generic for Reglan®) ondansetron ODT / solution / tablet (generic for Zofran®) pronchlorperazine tablet (generic for Compazine®) promethazine 12.5 mg, 25 mg rectal (generic for Phenergan®) promethazine syrup / tablet (generic for Phenergan®) promethazine ampule/vial (generic for Phenergan®)	INTESTINAL TIVERTIGO AGENTS  Non-Preferred  Akynzeo® Capsule / Vial  Aloxi® Vial NOT REVIEWED  Anzemet® Tablet aprepitant capsule/pack (generic for Emend®) - Clinical criteria apply  Barhensys® Vial NOT REVIEWED  Bonjesta® Tablet Cinvanti® Injectable Emulsion Compro® Rectal doxylamine-pyridoxine tablet (generic for Diclegis® Tablet) dronabinol capsule (generic for Marinol®) Emend® Powder Packet / Trifold Pack - Clinical criteria apply  Emend® Vial NOT REVIEWED fosaprepitant vial (generic for Emend®) Gimoti® Nasal Spray NOT REVIEWED granisetron tablets (generic for Kytril®) granisetron tablets (generic for Kytril®) NOT REVIEWED  Marinol® Capsule metoclopramide ODT (generic for Reglan®) metoclopramide ODT (generic for Aloxi®) Phenergan® injection (generic for Aloxi®) Phenergan® injection (NOT REVIEWED)
ANTIEMETIC-ANDICLEGIS® Tablet  dimenhydrinate vial (generic for Dramamine®)  Emend® Capsule - Clinical criteria apply meclizine tablet (generic for Antiver®) metoclopramide solution / tablet (generic for Reglan®) ondansetron ODT / solution / tablet (generic for Zofran®) pronchlorperazine tablet (generic for Compazine®) promethazine 12.5 mg, 25 mg rectal (generic for Phenergan®) promethazine syrup / tablet (generic for Phenergan®) promethazine ampule/vial (generic for Phenergan®)	INTESTINAL  TIVERTIGO AGENTS  Non-Preferred  Akynzeo® Capsule / Vial  Aloxi® Vial NOT REVIEWED  Anzemet® Tablet aprepitant capsule/pack (generic for Emend®) - Clinical criteria apply  Barhemsys® Vial NOT REVIEWED  Bonjesta® Tablet  Cinvant® Injectable Emulsion  Compro® Rectal doxylamine-pyridoxine tablet (generic for Diclegis® Tablet)  dronabinol capsule (generic for Marinot®)  Emend® Powder Packet / Trifold Pack - Clinical criteria apply  Emend® Vial NOT REVIEWED  fosaprepitant vial (generic for Emend®)  Gimoti™ Nasal Spray NOT REVIEWED  granisetron tablets (generic for Kytrii®) NOT REVIEWED  Marinot® Capsule  metoclopramide ODT (generic for Metozolv®)  metoclopramide ODT (generic for Reglan®)  metoclopramide vial NOT REVIEWED  palonosetron injection (generic for Aloxi®)  Phenergan® injection NOT REVIEWED  promethazine 50 mg rectal (generic for Phenergan®)
ANTIEMETIC-ANDICLEGIS® Tablet  dimenhydrinate vial (generic for Dramamine®)  Emend® Capsule - Clinical criteria apply meclizine tablet (generic for Antiver®) metoclopramide solution / tablet (generic for Reglan®) ondansetron ODT / solution / tablet (generic for Zofran®) pronchlorperazine tablet (generic for Compazine®) promethazine 12.5 mg, 25 mg rectal (generic for Phenergan®) promethazine syrup / tablet (generic for Phenergan®) promethazine ampule/vial (generic for Phenergan®)	INTESTINAL  ITIVERTIGO AGENTS  Non-Preferred  Akynzeo® Capsule / Vial  Aloxi® Vial NOT REVIEWED  Anzeme® Tablet aprepitant capsule/pack (generic for Emend®) - Clinical criteria apply  Barhensys® Vial NOT REVIEWED  Bonjesta® Tablet Cinvant® Injectable Emulsion  Compro® Rectal  doxylamine-pyridoxine tablet (generic for Diclegis® Tablet)  dronabinol capsule (generic for Marinol®)  Emend® Powder Packet / Trifold Pack - Clinical criteria apply  Emend® Vial NOT REVIEWED  fosaprepitant vial (generic for Emend®)  Gimoti® Nasal Spray NOT REVIEWED  granisetron injection (generic for Kytril®)  granisetron injection (generic for Metzolov®)  metoclopramide ODT (generic for Metzolov®)  metoclopramide ODT (generic for Reglan®)  metoclopramide Vol REVIEWED  polonosetron vial NOT REVIEWED  polonosetron vial NOT REVIEWED  polonosetron injection (generic for Aloxi®)  Phenergam® injection (generic for Aloxi®)  Phenergam® injection (generic for Phenergan®)  prochlorperazine rectal (generic for Compazine®)
ANTIEMETIC-ANDICLEGIS® Tablet  dimenhydrinate vial (generic for Dramamine®)  Emend® Capsule - Clinical criteria apply meclizine tablet (generic for Antiver®) metoclopramide solution / tablet (generic for Reglan®) ondansetron ODT / solution / tablet (generic for Zofran®) pronchlorperazine tablet (generic for Compazine®) promethazine 12.5 mg, 25 mg rectal (generic for Phenergan®) promethazine syrup / tablet (generic for Phenergan®) promethazine ampule/vial (generic for Phenergan®)	INTESTINAL  TIVERTIGO AGENTS  Non-Preferred  Akynzeo® Capsule / Vial  Aloxi® Vial NOT REVIEWED  Anzemet® Tablet aprepitant capsule/pack (generic for Emend®) - Clinical criteria apply  Barhemsys® Vial NOT REVIEWED  Bonjesta® Tablet  Cinvant® Injectable Emulsion  Compro® Rectal doxylamine-pyridoxine tablet (generic for Diclegis® Tablet)  dronabinol capsule (generic for Marinot®)  Emend® Powder Packet / Trifold Pack - Clinical criteria apply  Emend® Vial NOT REVIEWED  fosaprepitant vial (generic for Emend®)  Gimoti™ Nasal Spray NOT REVIEWED  granisetron tablets (generic for Kytrii®) NOT REVIEWED  Marinot® Capsule  metoclopramide ODT (generic for Metozolv®)  metoclopramide ODT (generic for Reglan®)  metoclopramide vial NOT REVIEWED  palonosetron injection (generic for Aloxi®)  Phenergan® injection NOT REVIEWED  promethazine 50 mg rectal (generic for Phenergan®)
ANTIEMETIC-AN  Preferred  Diclegis® Tablet dimenhydrinate vial (generic for Dramamine®) Emend® Capsule - Clinical criteria apply meclizine tablet (generic for Antiver®) metoclopramide solution / tablet (generic for Reglan®) ondansetron ODT / solution / tablet (generic for Zofran®) prochlorperazine tablet (generic for Compazine®) promethazine 12.5 mg, 25 mg rectal (generic for Phenergan®) promethazine syrup / tablet (generic for Phenergan®) promethazine ampule/vial (generic for Phenergan®)	INTESTINAL  ITIVERTIGO AGENTS  Non-Preferred  Akynzeo® Capsule / Vial  Aloxi® Vial NOT REVIEWED  Anzeme® Tablet aprepitant capsule/pack (generic for Emend®) - Clinical criteria apply  Barhensys® Vial NOT REVIEWED  Bonjesta® Tablet Cinvant® Injectable Emulsion  Compro® Rectal  doxylamine-pyridoxine tablet (generic for Diclegis® Tablet)  dronabinol capsule (generic for Marinol®)  Emend® Powder Packet / Trifold Pack - Clinical criteria apply  Emend® Vial NOT REVIEWED  fosaprepitant vial (generic for Emend®)  Gimoti® Nasal Spray NOT REVIEWED  granisetron injection (generic for Kytril®)  granisetron injection (generic for Metzolov®)  metoclopramide ODT (generic for Metzolov®)  metoclopramide ODT (generic for Reglan®)  metoclopramide Vol REVIEWED  polonosetron vial NOT REVIEWED  polonosetron vial NOT REVIEWED  polonosetron injection (generic for Aloxi®)  Phenergam® injection (generic for Aloxi®)  Phenergam® injection (generic for Phenergan®)  prochlorperazine rectal (generic for Compazine®)
ANTIEMETIC-AN  Preferred  Diclegis® Tablet dimenhydrinate vial (generic for Dramamine®) Emend® Capsule - Clinical criteria apply meclizine tablet (generic for Antiver®) metoclopramide solution / tablet (generic for Reglan®) ondansetron ODT / solution / tablet (generic for Zofran®) prochlorperazine tablet (generic for Compazine®) promethazine 12.5 mg, 25 mg rectal (generic for Phenergan®) promethazine syrup / tablet (generic for Phenergan®) promethazine ampule/vial (generic for Phenergan®)	INTESTINAL  TIVERTIGO AGENTS  Non-Preferred  Akynzeo® Capsule / Vial  Alox® Vial NOT REVIEWED  Anzeme® Tablet aprepiant capsule/pack (generic for Emend®) - Clinical criteria apply  Barhemsyo® Vial NOT REVIEWED  Bonjesta® Tablet Cinvant® Injectable Emulsion  Compro® Rectal doxylamine-pyridoxine tablet (generic for Diclegis® Tablet) dronabinol capsule (generic for Marinol®)  Emend® Powder Packer / Trifold Pack - Clinical criteria apply  Emend® Vial NOT REVIEWED  fosaprepitant vial (generic for Emend®)  Gimoti ™ Nasal Spray NOT REVIEWED  granisetron tablets (generic for Kytril®) NOT REVIEWED  Marinol® Capsule  metoclopramide ODT (generic for Retozolv®)  metoclopramide ODT (generic for Retozolv®) metoclopramide ODT (generic for Retozolv®) metoclopramide ODT (generic for Retozolv®) metoclopramide ODT (generic for Retozolv®) metoclopramide ODT (generic for Retozolv®) metoclopramide ODT (generic for Retozolv®) metoclopramide ODT (generic for Repressed)  palonosetron injection (generic for Aloxi®)  Phenergan® injection NOT REVIEWED  pronethazine 50 mg rectal (generic for Phenergan®) prochloprerazine rectal (generic for Compazine®) prochloprerazine injection NOT REVIEWED  Reglan® Tablet
ANTIEMETIC-AN  Preferred  Diclegis® Tablet dimenhydrinate vial (generic for Dramamine®) Emend® Capsule - Clinical criteria apply meclizine tablet (generic for Antiver®) metoclopramide solution / tablet (generic for Reglan®) ondansetron ODT / solution / tablet (generic for Zofran®) prochlorperazine tablet (generic for Compazine®) promethazine 12.5 mg, 25 mg rectal (generic for Phenergan®) promethazine syrup / tablet (generic for Phenergan®) promethazine ampule/vial (generic for Phenergan®)	INTESTINAL  (TIVERTIGO AGENTS  Non-Preferred  Akynzeo® Capsule / Vial  Alox® Vial NOT REVIEWED  Anzeme® Tablet aprepitant capsule/pack (generic for Emend®) - Clinical criteria apply  Barhemsys® Vial NOT REVIEWED  Bonjesta® Tablet  Cinvant® Injectable Emulsion  Compro® Rectal doxylamine-pyridoxine tablet (generic for Diclegis® Tablet) dronabinol capsule (generic for Marinol®)  Emend® Powder Packer / Trifold Pack - Clinical criteria apply  Emend® Vial NOT REVIEWED  fosaprepitant vial (generic for Emend®)  Gimoti® Nasal Spray NOT REVIEWED  granisetron tablets (generic for Kytril®) NOT REVIEWED  granisetron injection (generic for Kytril®) NOT REVIEWED  Marinol® Capsule  metoclopramide ODT (generic for Metozolv®) metoclopramide ODT (generic for Reglan®) metoclopramide ODT (generic for Reglan®) metoclopramide ODT (generic for Aloxi®)  Phenergan® injection NOT REVIEWED  palonosetron injection (generic for Aloxi®)  Phenergan® injection NOT REVIEWED  prochloprepazine rectal (generic for Compazine®) prochloprepazine injection NOT REVIEWED  Reglan® Tablet  Sancuso® Patch
ANTIEMETIC-ANDICLEGIS® Tablet  dimenhydrinate vial (generic for Dramamine®)  Emend® Capsule - Clinical criteria apply meclizine tablet (generic for Antiver®) metoclopramide solution / tablet (generic for Reglan®) ondansetron ODT / solution / tablet (generic for Zofran®) pronchlorperazine tablet (generic for Compazine®) promethazine 12.5 mg, 25 mg rectal (generic for Phenergan®) promethazine syrup / tablet (generic for Phenergan®) promethazine ampule/vial (generic for Phenergan®)	INTESTINAL  TIVERTIGO AGENTS  Non-Preferred  Akynzeo® Capsule / Vial  Akoxi® Vial NOT REVIEWED  Anzeme® Tablet aprepitant capsule/pack (generic for Emend®) - Clinical criteria apply  Barhemsys® Vial NOT REVIEWED  Bonjesta® Tablet Cinvanti® Injectable Emulsion  Compro® Rectal doxylamine-pyridoxine tablet (generic for Diclegis® Tablet) dronabinol capsule (generic for Marinol®)  Emend® Powder Packet / Trifold Pack - Clinical criteria apply  Emend® Powder Packet / Trifold Pack - Clinical criteria apply  Emend® Vial NOT REVIEWED  fosaprepitant vial (generic for Emend®)  Gimoti® Nasal Spray NOT REVIEWED  granisetron tablets (generic for Kytril®) NOT REVIEWED  metoclopramide ODT (generic for Metozolv®)  metoclopramide ODT (generic for Reglan®)  metoclopramide ODT (generic for Reglan®)  metoclopramide ODT (generic for Reglan®)  metoclopramide ODT (generic for Replan®)  prometharine S0 mg rectal (generic for Phenergan®)  prochloprerazine injection NOT REVIEWED  Reglan® Tablet

Tigan® Capsule / Iinjection NOT REVIEWED

## Effective: 06/01/2021

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 NOT 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

 $More information on the PDL can be found at: {\color{red} \underline{https://medicaid.ncdhhs.gov/providers/programs-services/prescription-drugs/outpatient-pharmacy-services}$ 

More information on the PDL can be found at: <a href="https://medicaid.ncdhhs.gov/providers/programs-services/prescription-drugs/outpatient-pharmacy-services">https://medicaid.ncdhhs.gov/providers/programs-services/prescription-drugs/outpatient-pharmacy-services</a>		
	trimethobenzamide capsule (generic for Tigan®)	
	Varubi <sup>®</sup> Tablet	
	Zofran® ODT / Tablet Zuplenz® Soluble Film	
	Zupienz Solubie riim	
	BILE ACID SALTS	
Preferred	Non-Preferred	
ursodiol capsule (generic for Actigall®)	Actigall® Capsule	
ursodiol tablet (generic for Urso®)	Chenodal® Tablet	
	Cholbam® Capsule Ocaliva® Tablet	
	Urso® Tablet / Urso® Forte Tablet	
	H. PYLORI COMBINATIONS	
Preferred	Non-Preferred	
Pylera® Capsule	Helidac® Therapy Pack	
	lansoprazole-amoxicillin-clarithromycin pack (generic for Prevpac®)	
	Omeclamox-Pak® Combo Pack Talicia® Capsule	
	Tancia Capsule	
HIST	FAMINE-2 RECEPTOR ANTAGONISTS	
Preferred	Non-Preferred	
famotidine tablet / suspension (generic for Pepcid <sup>®</sup> )	cimetidine solution / tablet (generic for Tagamet®)	
ranitidine capsule / syrup / tablet (generic for Zantac®)	nizatidine capsule / solution (generic for Axid®)	
	Pepcid <sup>®</sup> Tablet	
	PANCREATIC ENZYMES	
Preferred	Non-Preferred	
Creon® Capsule	Pancreaze® Capsule	
Zenpep® Capsule	Pertzye <sup>®</sup> Capsule	
	Viokase® Tablet	
	ROGESTINS USED FOR CACHEXIA	
Preferred	Non-Preferred	
megestrol suspension / tablet (generic for Megace®)	megestrol ES suspension (generic for Megace® ES)	
	PROTON PUMP INHIBITORS	
	T	
Preferred	Non-Preferred	
Preferred esomeprazole magnesium capsule (generic for Nexium® Rx )	Non-Preferred  Exemption for children < 12 years of age	
esomeprazole magnesium capsule (generic for Nexium® Rx ) esomeprazole magnesium capsule OTC (generic for Nexium® OTC )	Exemption for children < 12 years of age Aciphex® Sprinkle Capsules / Tablets	
esomeprazole magnesium capsule (generic for Nexium® Rx ) esomeprazole magnesium capsule OTC (generic for Nexium® OTC ) lansoprazole capsule (generic for Prevacid® Rx)	Exemption for children < 12 years of age  Aciphex® Sprinkle Capsules / Tablets  Dexilant® Capsule	
esomeprazole magnesium capsule (generic for Nexium® Rx ) esomeprazole magnesium capsule OTC (generic for Nexium® OTC ) lansoprazole capsule (generic for Prevacid® Rx) Nexium® Rx Packet	Exemption for children < 12 years of age  Aciphex® Sprinkle Capsules / Tablets  Dexilant® Capsule esomeprazole magnesium packet (generic for Nexium® Rx Packet)	
esomeprazole magnesium capsule (generic for Nexium® Rx ) esomeprazole magnesium capsule OTC (generic for Nexium® OTC ) lansoprazole capsule (generic for Prevacid® Rx) Nexium® Rx Packet omeprazole Rx capsule (generic for Prilosec® Rx)	Exemption for children < 12 years of age  Aciphex® Sprinkle Capsules / Tablets  Dexilant® Capsule  esomeprazole magnesium packet (generic for Nexium® Rx Packet)  lansoprazole capsule (generic for Prevacid® OTC)	
esomeprazole magnesium capsule (generic for Nexium® Rx ) esomeprazole magnesium capsule OTC (generic for Nexium® OTC ) lansoprazole capsule (generic for Prevacid® Rx) Nexium® Rx Packet	Exemption for children < 12 years of age  Aciphex® Sprinkle Capsules / Tablets  Dexilant® Capsule esomeprazole magnesium packet (generic for Nexium® Rx Packet)	
esomeprazole magnesium capsule (generic for Nexium® Rx ) esomeprazole magnesium capsule OTC (generic for Nexium® OTC ) lansoprazole capsule (generic for Prevacid® Rx) Nexium® Rx Packet omeprazole Rx capsule (generic for Prilosec® Rx) pantoprazole tablet (generic for Protonix®)	Exemption for children < 12 years of age  Aciphex® Sprinkle Capsules / Tablets  Dexilant® Capsule  esomeprazole magnesium packet (generic for Nexium® Rx Packet)  lansoprazole capsule (generic for Prevacid® OTC)  lansoprazole ODT (generic for Prevacid® SoluTab™)	
esomeprazole magnesium capsule (generic for Nexium® Rx ) esomeprazole magnesium capsule OTC (generic for Nexium® OTC ) lansoprazole capsule (generic for Prevacid® Rx) Nexium® Rx Packet omeprazole Rx capsule (generic for Prilosec® Rx) pantoprazole tablet (generic for Protonix®)	Exemption for children < 12 years of age  Aciphex® Sprinkle Capsules / Tablets  Dexilant® Capsule  esomeprazole magnesium packet (generic for Nexium® Rx Packet)  lansoprazole capsule (generic for Prevacid® OTC)  lansoprazole ODT (generic for Prevacid® SoluTab™)  Nexium® Rx Capsule  omeprazole OTC capsule / tablet (generic for Prilosec® OTC)  omeprazole / sodium bicarbonate capsule (generic for Zegerid® Rx / OTC)	
esomeprazole magnesium capsule (generic for Nexium® Rx ) esomeprazole magnesium capsule OTC (generic for Nexium® OTC ) lansoprazole capsule (generic for Prevacid® Rx) Nexium® Rx Packet omeprazole Rx capsule (generic for Prilosec® Rx) pantoprazole tablet (generic for Protonix®)	Exemption for children < 12 years of age  Aciphex® Sprinkle Capsules / Tablets  Dexilant® Capsule  esomeprazole magnesium packet (generic for Nexium® Rx Packet)  lansoprazole capsule (generic for Prevacid® OTC)  lansoprazole ODT (generic for Prevacid® SoluTab™)  Nexium® Rx Capsule  omeprazole OTC capsule / tablet (generic for Prilosec® OTC)  omeprazole / sodium bicarbonate capsule (generic for Zegerid® Rx / OTC)  pantoprazole suspension (generic for Protonix®)	
esomeprazole magnesium capsule (generic for Nexium® Rx ) esomeprazole magnesium capsule OTC (generic for Nexium® OTC ) lansoprazole capsule (generic for Prevacid® Rx) Nexium® Rx Packet omeprazole Rx capsule (generic for Prilosec® Rx) pantoprazole tablet (generic for Protonix®)	Exemption for children < 12 years of age  Aciphex® Sprinkle Capsules / Tablets  Dexilant® Capsule  esomeprazole magnesium packet (generic for Nexium® Rx Packet)  lansoprazole capsule (generic for Prevacid® OTC)  lansoprazole ODT (generic for Prevacid® SolutTab™)  Nexium® Rx Capsule  omeprazole OTC capsule / tablet (generic for Prilosec® OTC)  omeprazole / sodium bicarbonate capsule (generic for Zegerid® Rx / OTC)  pantoprazole suspension (generic for Protonix®)  Prevacid® Rx / OTC Capsule / Solutab	
esomeprazole magnesium capsule (generic for Nexium® Rx ) esomeprazole magnesium capsule OTC (generic for Nexium® OTC ) lansoprazole capsule (generic for Prevacid® Rx) Nexium® Rx Packet omeprazole Rx capsule (generic for Prilosec® Rx) pantoprazole tablet (generic for Protonix®)	Exemption for children < 12 years of age  Aciphex® Sprinkle Capsules / Tablets  Dexilant® Capsule  esomeprazole magnesium packet (generic for Nexium® Rx Packet)  lansoprazole capsule (generic for Prevacid® OTC)  lansoprazole ODT (generic for Prevacid® SoluTab™)  Nexium® Rx Capsule  omeprazole OTC capsule / tablet (generic for Prilosec® OTC)  omeprazole / sodium bicarbonate capsule (generic for Zegerid® Rx / OTC)  pantoprazole suspension (generic for Protonix®)	
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esomeprazole magnesium capsule (generic for Nexium® Rx ) esomeprazole magnesium capsule OTC (generic for Nexium® OTC ) lansoprazole capsule (generic for Prevacid® 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 esomeprazole magnesium packet (generic for Nexium® Rx Packet) lansoprazole capsule (generic for Prevacid® OTC) lansoprazole ODT (generic for Prevacid® SoluTab™)  Nexium® Rx Capsule omeprazole OTC capsule / tablet (generic for Prilosec® OTC) omeprazole / sodium bicarbonate capsule (generic for Zegerid® Rx / OTC) pantoprazole suspension (generic for Protonix®) Prevacid® Rx / OTC Capsule / Solutab Prilosec® Rx Suspension Protonix® Tablet rabeprazole tablet (generic for Aciphex®) Zegerid® Rx / Capsule / Packet	
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North Carolina Medicaid and Health Choice Preferred Drug List (PDL)

## Effective: 06/01/2021

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 NOT 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

mesalamine DR capsule (generic for Delzicol® Capsule)
mesalamine ER capsule (generic for Apriso® Capsule)
mesalamine tablet (generic for Asacol® HD / Lialda® Tablet )
Pentasa® Capsule
Uceris <sup>®</sup> Tablet

#### ULCERATIVE COLITIS

#### Rectal

## Trial and failure of only one preferred drug required

Preferred	Non-Preferred
Canasa® Suppository	mesalamine kit (generic for Rowasa® Kit)
mesalamine enema (generic for Rowasa <sup>®</sup> Enema)	mesalamine suppository (generic for Canasa® Suppository)
	Rowasa® Kit
	SF Rowasa® Enema
	Uceris® Rectal Foam

## ELECTROLYTE DEPLETERS (KIDNEY DISEASE)

Preferred	Non-Preferred
calcium acetate capsule (generic for PhosLo®)	Auryxia <sup>®</sup> Tablet
calcium acetate tablet (generic for Eliphos®)	Fosrenol® Chewable
sevelamer tablet / powder pack (generic for Renagel® and Renvela®)	Fosrenol® Powder Pack
	MagneBind® 400 Rx Tablet
	Phoslyra <sup>®</sup> Solution
	Renagel® Tablet
	Renvela® Powder Pack / Tablet
	Velphoro® Chewable

## BENIGN PROSTATIC HYPERPLASIA TREATMENTS

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

## URINARY ANTISPASMODICS

Preferred	Non-Preferred
oxybutynin syrup / tablet (generic for Ditropan®)	darifenacin ER tablet (generic for Enablex®)
oxybutynin ER tablet (generic for Ditropan XL <sup>®</sup> )	Detrol® Tablet / LA Capsule
solifenacin tablet (generic for Vesicare® Tablet)	Ditropan® XL Tablet
Toviaz <sup>®</sup> Tablet	Enablex® Tablet
	flavoxate tablet (generic for Urispas®)
	Gelnique <sup>®</sup> Gel / Gel Sachets
	Gemtesa® Tablet NOT REVIEWED
	Myrbetriq <sup>®</sup> Tablet
	Oxytrol® Patch
	tolterodine tablet / ER capsule(generic for Detrol® / LA)
	trospium tablet / ER capsule (generic for Sanctura® / XR)
	Vesicare® Tablet
	Vesicare® LS Suspension NOT REVIEWED
	GOUT
Preferred	Non-Preferred

	6001
Preferred	Non-Preferred
allopurinol tablet (generic for Zyloprim <sup>®</sup> )	colchicine tablet (generic for Colcrys®)
Mitigare® (branded colchicine 0.6mg) Capsules	colchicine capsule (generic for Mitigare®)
probenecid tablet(generic for Benemid®)	Colcrys <sup>®</sup> Tablet
probenecid-colchicine tablet (generic for Col-Benemid®)	febuxostat tablet (generic for Uloric® Tablet)
	Gloperba® Solution
	Krystexxa <sup>®</sup> Injection
	Uloric® Tablet
	Zyloprim <sup>®</sup> Tablet

## HEMATOLOGIC

## ANTICOAGULANTS

т.	. 11
In	iectable

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

## Effective: 06/01/2021

Trial and failure of two Preferred drugs are required unless only one Preferred option is listed or is otherwise indicated.

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Oral	
Preferred	Non-Preferred
Eliquis® Tablet and Starter Dose Pack	Bevyxxa <sup>®</sup> Capsule
Jantoven® (branded generic for Coumadin®)	Coumadin® Tablet
Pradaxa® Capsule	Savaysa® Tablet
warfarin tablet (generic for Coumadin®)	·
Xarelto® Starter Pack / Tablet	
COLONY STIM	ULATING FACTORS
Preferred	Non-Preferred
Fulphila <sup>™</sup> Syringe	Neulasta® Syringe / Kit
Granix® Injection	Nivestym Syringe / Vial
Leukine <sup>®</sup> Injection	Nyvepria <sup>™</sup> Syringe <b>NOT REVIEWED</b>
Neupogen <sup>®</sup> Vial / Syringe	Ziextenzo <sup>®</sup> Syringe
Udenyca <sup>™</sup> Syringe	
Zarxio <sup>®</sup> Injection	
	DIETIC AGENTS
	ly to all drugs in this class
Preferred	Non-Preferred
Aranesp® Syringe / Vial	Epogen® Vial
Procrit® Vial	Mircera® Syringe
	Reblozyl® Vial
	Retacrit <sup>®</sup> Vial
TUDOMPODOIESIS	CTIMILI ATING ACENTS
	STIMULATING AGENTS
Preferred	Non-Preferred
Nplate® Vial	Tavalisse <sup>™</sup> Tablet
Promacta® Suspension / Tablet	
(ADII)	THALMIC
	UNCTIVITIS AGENTS
Preferred	Non-Preferred
cromolyn sodium drops (generic for Crolom®) olopatadine drops (generic for Pataday®)	Alomide® Drops
Pazeo® Drops	Alrex® Drops
razeo Diops	azelastine drops (generic for Optivar®)
	Bepreve® Drops
	epinastine drops (generic for Elestat <sup>®</sup> )
	Lastacaft <sup>®</sup> Drops
	olopatadine drops (generic for Patanol®)
	Pataday® Drops
	Patanol® Drops
	Zerviate <sup>™</sup> Drops
	·
ANT	IBIOTICS
Preferred	Non-Preferred
AK-Poly-Bac® Ointment (branded generic for Polysporin®)	bacitracin ointment (generic for AK-Tracin®)
Azasite® Drops	Besivance® Suspension
bacitracin-polymyxin ointment (generic for Polysporin®)	Bleph-10 <sup>®</sup> Drops
ciprofloxacin solution drops (generic for Ciloxan®)	Ciloxan® Drops / Ointment
erythromycin ointment (generic for Ilotycin®)	gatifloxacin drops (generic for Zymaxid®)
Gentak® Ointment (branded generic for Garamycin®)	levofloxacin drops (generic for Quixin®)
gentamicin drops (generic for Garamycin®)	Moxeza® Drops
moxifloxacin ophthalmic solution (generic for Moxeza® and Vigamox® Drops)	Natacyn <sup>®</sup> Drops
ofloxacin drops (generic for Ocuflox®)	Neo-Polycin® Ointment (branded generic for Neosporin® Ophthalmic Ointment)
Polycin® Ointment (branded generic for Polysporin®)	neomycin-bacitracin-polymyxin ointment (generic for Neosporin® Ophthalmic Ointment)
polymyxin-trimethoprim drops (generic for Polytrim <sup>®</sup> )	neomycin-polymyxin-gramicidin drops (generic for Neosporin® Ophthalmic Drops)
sulfacetamide drops (generic for Bleph-10®)	Ocuflox® Drops
tobramycin drops (generic for Tobrex®)	Polytrin® Drops
	sulfacetamide ointment (generic for Cetamide®)  Token® Ointment (Deepe
	Tobrex® Ointment/ Drops
	Vigamox® Drops Zymaxid® Drops
	дунали торь
ANTIRIOTICS-STE	ROID COMBINATIONS
Preferred	Non-Preferred
neomycin-polymyxin-dexamethasone drops / ointment (generic for Maxitrol®)	Blephamide® Drops / S.O.P. Ointment
neomycin-polymyxin-dexametnasone drops / ointment (generic for Maxitro) )  Tobradex Drops / Ointment	Maxitrol® Drops / Ointment
вонием вторы Општин	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 <sup>®</sup> )

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 $\label{thm:model} \textit{More information on the PDL can be found at: } \underline{\textit{https://medicaid.ncdhhs.gov/providers/programs-services/prescription-drugs/outpatient-pharmacy-services} \\$ 

	Tobradex® ST Drops
	tobramycin-dexamethasone suspension (generic for Tobradex® Suspension)
	Zylet <sup>®</sup> Drops
	I-INFLAMMATORY
Preferred	Non-Preferred
dexamethasone drops (generic for Decadron®) diclofenac drops (generic for Voltaren®)	Acular® Drops / LS Solution  Acuvaii® Solution
Durezol® Drops	bromfenac drops (generic for Xibrom®)
Flarex® Drops	Bromsite <sup>™</sup> Solution
fluorometholone drops (generic for FML®)	Dextenza® Insert
flurbiprofen drops (generic for Ocufen <sup>®</sup> )	Dexycu <sup>™</sup> Vial
Ilevro® Drops	FML <sup>®</sup> Forte Drops / S.O.P. Ointment
ketorolac solution (generic for Acular® / LS)	FML® Liquifilm® Drops
Lotemax® Drops	Iluvien <sup>®</sup> Implant ™
Pred Mild® Drops	Inveltys <sup>™</sup> Drops
prednisolone acetate drops (generic for Pred Forte®)	Lotemax® Gel / SM Gel / Ointment loteprednol drops / gel (generic for Lotemax®) GEL IS NOT REVIEWED
	Maxidex® Drops
	Nevanac <sup>®</sup> Droptainer
	Omnipred® Drops
	Ozurdex <sup>®</sup> Implant
	Pred Forte® Drops
	prednisolone sodium phosphate drops (generic for Inflamase Forte®)
	Prolensa® Drops
	Retiser® Implant
	Triesence® Vial  Yuiq   Minplant
	тину тирлан
ANTI-INFLAMMA	ATORY/IMMUNOMODULATOR
Preferred	Non-Preferred
Restasis® Drops / Restasis® Multidose™ Drops	Cequa <sup>™</sup> Drops
	Eysuvis <sup>™</sup> Drops NOT REVIEWED
	Xiidra <sup>®</sup> Drops
ALDUA 2	ADDENIED CIC ACENTE
	ADRENERGIC AGENTS
Preferred Alphagan® P Drops	Non-Preferred  apraclonidine drops (generic for Iopidine®)
brimonidine drops (generic for Alphagan®)	brimonidine P drops (generic for Alphagan® P)
ormoname dops (genere to rippingum )	Iopidine® Drops
BETA BLOCKE	R AGENTS / COMBINATIONS
Preferred	Non-Preferred
Combigan <sup>®</sup> Drops	betaxolol drops (generic for Betoptic®)
timolol drops / GFS gel-solution (generic for Timoptic® / Timoptic XE®)	Betoptic® S Drops
	carteolol drops (generic for Ocupress®)  Istalol® Drops
	levobunolol drops (generic for Betagan®)
	timolol drop (generic for Istalol® Drops)
	timolol maleate drop (generic for Timoptic® Ocudose® Drops) NOT REVIEWED
	Timoptic <sup>®</sup> Drops / Ocudose <sup>®</sup> Drops / XE <sup>®</sup> Solution
	AGE BUILDITIONS (COMBINATIONS
	ASE INHIBITORS / COMBINATIONS
Preferred	Non-Preferred
dorzolamide drops (generic for Trusopt <sup>®</sup> ) dorzolamide-timolol drops (generic for Cosopt <sup>®</sup> )	Azopt® Drops brinzolamide drops (generic for Azopt® Drops) NOT REVIEWED
dorzolamiae-timolol drops (generic for Cosopt.) Simbrinza® Drops	Cosopt® Drops / PF Drops
	dorzolamide-timolol PF drops (generic for Cosopt® PF)
	Trusopi® Drops
	GLANDIN AGONISTS
Preferred	Non-Preferred
latanoprost drops (generic for Xalatan®)	bimatoprost drops (generic for Lumigan® Drops)
Travatan® Z Drops	Lunigan® Drops travoprost drops (generic for Travatan® Z)
	travoprost drops (generic for fravatan Z)  Vyzulta® Drops
	Xalatan <sup>®</sup> Drops
	Xelpros® Drops
	Zioptan <sup>®</sup> Drops
	ODIFIERS / COMBINATIONS
Preferred	Non-Preferred
Rhopressa® Drops	
Rocklatan® Drops	

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Wore information		
OSTEOPOROSIS		
BONE RESORPTION SUPPRESSION AND RELATED AGENTS		
	Preferred	Non-Preferred
alendronate tablet (generic for Fosamax®)		Actonel® Tablet
raloxifene tablet (generic for Evista®)		alendronate solution (generic for Fosamax® Solution)
		Atelvia® Tablet
		Binosto® Effervescent Tablet
		Boniva® Tablet
		calcitonin salmon nasal spray (generic for Miacalcin <sup>®</sup> )
		Evenity <sup>™</sup> Syringe
		Evista® Tablet
		Forteo® Pen Injection
		Fosamax® Tablet / Plus D Tablet
		ibandronate tablet (generic for Boniva®)
		Prolia® Syringe
		risedronate tablet (generic for Actonel®)
		teriparatide injection (generic for Forteo® Injection)
		Tymlos® Injection
		OTIC
	ANT	IBIOTICS
	Preferred	Non-Preferred
Ciprodex <sup>®</sup> Suspension		Cipro® HC Suspension
neomycin-polymyxin-hydrocortisone solution / suspension	n (generic for Cortisporin®)	ciprofloxacin solution (generic for Cetraxal <sup>®</sup> )
ofloxacin drops (generic for Floxin®)		ciprofloxacin-dexamethasone suspension (generic for Ciprodex®)
,		ciprofloxacin-fluocinolone drops (generic for Otovel®)
		Cortisporin-TC <sup>®</sup> Suspension
		Otiprio® Suspension
		Ottopio Suspension Otovel® Drops
		Other Biolis
	ANTI INEECTIVE	S AND ANESTHETICS
do	Preferred	Non-Preferred
acetic acid solution (generic for Vosol®)		acetic acid-hydrocortisone solution (generic for Vosol® HC)
	ANTI-INF	LAMMATORY
	Preferred	Non-Preferred
Dermotic <sup>®</sup> Oil		Flac® Otic Oil NOT REVIEWED
		fluocinolone 0.01% oil (generic for Dermotic®)
	RESP	IRATORY
		IRATORY ANDHELD, LONG ACTING
	BETA-ADRENERGIC F	ANDHELD, LONG ACTING
Course P. Land		ANDHELD, LONG ACTING  Non-Preferred
Serevent® Diskus®	BETA-ADRENERGIC F	ANDHELD, LONG ACTING  Non-Preferred  Arcapta® Neohaler®
Serevent® Diskus®	BETA-ADRENERGIC F	ANDHELD, LONG ACTING  Non-Preferred
Serevent <sup>®</sup> Diskus <sup>®</sup>	BETA-ADRENERGIC F Preferred	ANDHELD, LONG ACTING  Non-Preferred  Arcapta® Nochaler®  Striverdi® Respirat® Inhalation Spray
Serevent® Diskus®	BETA-ADRENERGIC F Preferred  BETA-ADRENERGIC H	ANDHELD, LONG ACTING  Non-Preferred  Arcapta® Neohaler®  Striverdi® Respimat® Inhalation Spray  ANDHELD, SHORT ACTING
	BETA-ADRENERGIC F Preferred	ANDHELD, LONG ACTING  Non-Preferred  Arcapta® Neohaler®  Striverdi® Respirat® Inhalation Spray  ANDHELD, SHORT ACTING  Non-Preferred
Serevent® Diskus® Proair® HFA Inhaler	BETA-ADRENERGIC F Preferred  BETA-ADRENERGIC H	ANDHELD, LONG ACTING  Non-Preferred  Arcapta® Neohaler®  Striverdi® Respirat® Inhalation Spray  ANDHELD, SHORT ACTING  Non-Preferred  albuterol HFA Inhaler (generic for Proair® HFA Inhaler / Proventil® HFA Inhaler / Ventolin® HFA Inhaler)
	BETA-ADRENERGIC F Preferred  BETA-ADRENERGIC H	ANDHELD, LONG ACTING  Non-Preferred  Arcapta® Neohaler®  Striverdi® Respimat® Inhalation Spray  ANDHELD, SHORT ACTING  Non-Preferred  albuterol HFA inhaler (generic for Proair® HFA Inhaler) Proventil® HFA Inhaler / Ventolin® HFA Inhaler)  levalbuterol HFA inhaler (generic for Xopenex® HFA Inhaler)
	BETA-ADRENERGIC F Preferred  BETA-ADRENERGIC H	ANDHELD, LONG ACTING  Non-Preferred  Arcapta® Neohaler®  Striverdi® Respirat® Inhalation Spray  ANDHELD, SHORT ACTING  Non-Preferred  albuterol HFA Inhaler (generic for Proair® HFA Inhaler / Proventil® HFA Inhaler / Ventolin® HFA Inhaler)
	BETA-ADRENERGIC F Preferred  BETA-ADRENERGIC H	ANDHELD, LONG ACTING  Non-Preferred  Arcapta® Neohaler®  Striverdi® Respimat® Inhalation Spray  ANDHELD, SHORT ACTING  Non-Preferred  albuterol HFA inhaler (generic for Proair® HFA Inhaler) Proventil® HFA Inhaler / Ventolin® HFA Inhaler)  levalbuterol HFA inhaler (generic for Xopenex® HFA Inhaler)
	BETA-ADRENERGIC F Preferred  BETA-ADRENERGIC H	ANDHELD, LONG ACTING  Non-Preferred  Arcapta® Neohaler®  Striverdi® Respimat® Inhalation Spray  ANDHELD, SHORT ACTING  Non-Preferred  albuterol HFA inhaler (generic for Proair® HFA Inhaler) Proair® Digihaler™  Proair® Digihaler™
	BETA-ADRENERGIC F Preferred  BETA-ADRENERGIC H	ANDHELD, LONG ACTING  Non-Preferred  Arcapta® Neohaler®  Striverdi® Respimat® Inhalation Spray  ANDHELD, SHORT ACTING  Non-Preferred  albuterol HFA inhaler (generic for Proair® HFA Inhaler) / Proair® Neighbaler™  Proair® Digihaler™  Proair® RespiClick®
	BETA-ADRENERGIC F Preferred  BETA-ADRENERGIC H	ANDHELD, LONG ACTING  Non-Preferred  Arcapta® Neohaler®  Striverdi® Respimat® Inhalation Spray  ANDHELD, SHORT ACTING  Non-Preferred  albuterol HFA inhaler (generic for Proair® HFA Inhaler / Proventil® HFA Inhaler / Ventolin® HFA Inhaler)  levalbuterol HFA inhaler (generic for Xopenex® HFA Inhaler)  Proair® Digihaler™  Proair® RespiClick®  Proventil® HFA Inhaler  Ventolin® HFA Inhaler
	BETA-ADRENERGIC F Preferred  BETA-ADRENERGIC H	ANDHELD, LONG ACTING  Non-Preferred  Arcapta® Neohaler®  Striverd® Respirat® Inhalation Spray  ANDHELD, SHORT ACTING  Non-Preferred  albuterol HFA inhaler (generic for Proair® HFA Inhaler)    levalbuterol HFA inhaler (generic for Xopenex® HFA Inhaler)  Proair® Digihaler™  Proair® RespiClick®  Proventil® HFA Inhaler
	BETA-ADRENERGIC F Preferred  BETA-ADRENERGIC H Preferred	ANDHELD, LONG ACTING  Non-Preferred  Arcapta® Neohaler®  Striverdi® Respimat® Inhalation Spray  ANDHELD, SHORT ACTING  Non-Preferred  albuterol HFA inhaler (generic for Proair® HFA Inhaler / Proventil® HFA Inhaler / Ventolin® HFA Inhaler)  levalbuterol HFA inhaler (generic for Xopenex® HFA Inhaler)  Proair® Digithaler  Proair® RespiClick®  Proventil® HFA Inhaler  Ventolin® HFA Inhaler  Xopenex® HFA Inhaler
	BETA-ADRENERGIC F Preferred  BETA-ADRENERGIC H Preferred  BETA-ADRENERGIC H BETA-ADRENERGIC H	ANDHELD, LONG ACTING  Non-Preferred  Arcapta® Neohaler®  Striverdi® Respimat® Inhalation Spray  ANDHELD, SHORT ACTING  Non-Preferred  albuterol HFA inhaler (generic for Proair® HFA Inhaler / Proventil® HFA Inhaler / Ventolin® HFA Inhaler)  levalbuterol HFA inhaler (generic for Xopenex® HFA Inhaler)  Proair® Digihaler™  Proair® Digihaler™  Proair® RespiClick®  Proventil® HFA Inhaler  Ventolin® HFA Inhaler  Xopenex® HFA Inhaler  RGIC, NEBULIZERS
	BETA-ADRENERGIC F Preferred  BETA-ADRENERGIC H Preferred  BETA-ADRENERGIC H Trial and failure of only	ANDHELD, LONG ACTING  Non-Preferred  Arcapta® Neohaler®  Striverd® Respimat® Inhalation Spray  ANDHELD, SHORT ACTING  Non-Preferred  albuterol HFA inhaler (generic for Proair® HFA Inhaler / Proventil® HFA Inhaler / Ventolin® HFA Inhaler)  levalbuterol HFA inhaler (generic for Xopenex® HFA Inhaler)  Proair® Digihaler™  Proair® Digihaler™  Proair® RespiClick®  Proventil® HFA Inhaler  Ventolin® HFA Inhaler  RGIC, NEBULIZERS  one preferred drug required
Proair® HFA Inhaler	BETA-ADRENERGIC F Preferred  BETA-ADRENERGIC H Preferred  BETA-ADRENERGIC H BETA-ADRENERGIC H	ANDHELD, LONG ACTING  Non-Preferred  Arcapta® Neohaler®  Striverdi® Respimat® Inhalation Spray  ANDHELD, SHORT ACTING  Non-Preferred  albuterol HFA inhaler (generic for Proair® HFA Inhaler / Proventil® HFA Inhaler / Ventolin® HFA Inhaler)  levalbuterol HFA inhaler (generic for Xopenex® HFA Inhaler)  Proair® Digihaler™  Proair® RespiClick®  Proventil® HFA Inhaler  Ventolin® HFA Inhaler  Xopenex® HFA Inhaler  RGIC, NEBULIZERS  one preferred drug required  Non-Preferred
Proair® HFA Inhaler  albuterol 0.63mg / 3ml solution (generic for Accuneb®)	BETA-ADRENERGIC F Preferred  BETA-ADRENERGIC H Preferred  BETA-ADRENERGIC H Trial and failure of only	ANDHELD, LONG ACTING  Non-Preferred  Arcapta® Neohaler®  Striverdi® Respimat® Inhalation Spray  ANDHELD, SHORT ACTING  Non-Preferred  albuterol HFA inhaler (generic for Proair® HFA Inhaler / Proventil® HFA Inhaler / Ventolin® HFA Inhaler)  levalbuterol HFA inhaler (generic for Xopenex® HFA Inhaler)  Proair® RespiClick®  Proventil® HFA Inhaler  Ventolin® HFA Inhaler  Ventolin® HFA Inhaler  Sopenex® HFA Inhaler  Non-Preferred drug required  Non-Preferred  Brovana® Solution
Proair® HFA Inhaler  albuterol 0.63mg / 3ml solution (generic for Accuneb®) albuterol 1.25mg / 3ml solution (generic for Accuneb®)	BETA-ADRENERGIC F Preferred  BETA-ADRENERGIC H Preferred  BETA-ADRENERGIC H Trial and failure of only	ANDHELD, LONG ACTING  Non-Preferred  Arcapta® Neohaler®  Striverdi® Respirat® Inhalation Spray  ANDHELD, SHORT ACTING  Non-Preferred  albuterol HFA inhaler (generic for Proair® HFA Inhaler / Proventil® HFA Inhaler / Ventolin® HFA Inhaler)  levalbuterol HFA inhaler (generic for Xopenex® HFA Inhaler)  Proair® Respictick®  Proair® Respictick®  Proventil® HFA Inhaler  Ventolin® HFA Inhaler  Aspences® HFA Inhaler  Ventolin® HFA Inhaler  Non-Preferred  Non-Preferred  Brovana® Solution  levalbuterol solution / concentrate solution (generic for Xopenex® / Concentrate)
Proair® HFA Inhaler  albuterol 0.63mg / 3ml solution (generic for Accuneb®) albuterol 1.25mg / 3ml solution (generic for Accuneb®) albuterol sulfate 2.5mg / 0.5ml solution	BETA-ADRENERGIC F Preferred  BETA-ADRENERGIC H Preferred  BETA-ADRENERGIC H Trial and failure of only	ANDHELD, LONG ACTING  Non-Preferred  Arcapa® Neohaler®  Striverd® Respimat® Inhalation Spray  ANDHELD, SHORT ACTING  Non-Preferred  albuterol HFA inhaler (generic for Proair® HFA Inhaler / Proventil® HFA Inhaler / Ventolin® HFA Inhaler)  levalbuterol HFA inhaler (generic for Xopenex® HFA Inhaler)  Proair® Digithaler®  Proair® RespiClick®  Proventil® HFA Inhaler  Ventolin® HFA Inhaler  Xopenex® HFA Inhaler  Xopenex® HFA Inhaler  Non-Preferred  Brovana® Solution  levalbuterol solution / concentrate solution (generic for Xopenex® / Concentrate)  Perforomist® Solution
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	BETA-ADRENERGIC F Preferred  BETA-ADRENERGIC H Preferred  BETA-ADRENERGIC H Trial and failure of only	ANDHELD, LONG ACTING  Non-Preferred  Arcapta® Neohaler®  Striverdi® Respirat® Inhalation Spray  ANDHELD, SHORT ACTING  Non-Preferred  albuterol HFA inhaler (generic for Proair® HFA Inhaler / Proventil® HFA Inhaler / Ventolin® HFA Inhaler)  levalbuterol HFA inhaler (generic for Xopenex® HFA Inhaler)  Proair® Respictick®  Proair® Respictick®  Proventil® HFA Inhaler  Ventolin® HFA Inhaler  Aspences® HFA Inhaler  Ventolin® HFA Inhaler  Non-Preferred  Non-Preferred  Brovana® Solution  levalbuterol solution / concentrate solution (generic for Xopenex® / Concentrate)
Proair® HFA Inhaler  albuterol 0.63mg / 3ml solution (generic for Accuneb®) albuterol 1.25mg / 3ml solution (generic for Accuneb®) albuterol sulfate 2.5mg / 0.5ml solution	BETA-ADRENERGIC F Preferred  BETA-ADRENERGIC H Preferred  BETA-ADRENERGIC H Trial and failure of only	ANDHELD, LONG ACTING  Non-Preferred  Arcapa® Neohaler®  Striverd® Respimat® Inhalation Spray  ANDHELD, SHORT ACTING  Non-Preferred  albuterol HFA inhaler (generic for Proair® HFA Inhaler / Proventil® HFA Inhaler / Ventolin® HFA Inhaler)  levalbuterol HFA inhaler (generic for Xopenex® HFA Inhaler)  Proair® Digithaler®  Proair® RespiClick®  Proventil® HFA Inhaler  Ventolin® HFA Inhaler  Xopenex® HFA Inhaler  Xopenex® HFA Inhaler  Non-Preferred  Brovana® Solution  levalbuterol solution / concentrate solution (generic for Xopenex® / Concentrate)  Perforomist® Solution
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	BETA-ADRENERGIC F Preferred  BETA-ADRENERGIC H Preferred  BETA-ADRENERGIC H  Trial and failure of only Preferred	ANDHELD, LONG ACTING  Non-Preferred  Arcapta® Neohaler®  Striverdi® Respimat® Inhalation Spray  ANDHELD, SHORT ACTING  Non-Preferred  albuterol HFA inhaler (generic for Proair® HFA Inhaler / Proventil® HFA Inhaler / Ventolin® HFA Inhaler)  levalbuterol HFA inhaler (generic for Xopenex® HFA Inhaler)  Proair® RespiClick®  Proventil® HFA Inhaler  Ventolin® HFA Inhaler  Ventolin® HFA Inhaler  Sopenex® HFA Inhaler  Non-Preferred  Non-Preferred drug required  Non-Preferred  Brovana® Solution  levalbuterol solution / Concentrate solution (generic for Xopenex® / Concentrate)  Performst® Solution / Concentrate Solution  Xopenex® Solution / Concentrate Solution
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	BETA-ADRENERGIC F Preferred  BETA-ADRENERGIC H Preferred  BETA-ADRENERGIC H  Trial and failure of only Preferred	ANDHELD, LONG ACTING  Non-Preferred  Arcapa® Neohaler®  Striverd® Respimat® Inhalation Spray  ANDHELD, SHORT ACTING  Non-Preferred  albuterol HFA inhaler (generic for Proair® HFA Inhaler / Proventil® HFA Inhaler / Ventolin® HFA Inhaler)  levalbuterol HFA inhaler (generic for Xopenex® HFA Inhaler)  Proair® Digithaler®  Proair® RespiClick®  Proventil® HFA Inhaler  Ventolin® HFA Inhaler  Xopenex® HFA Inhaler  Xopenex® HFA Inhaler  Non-Preferred  Brovana® Solution  levalbuterol solution / concentrate solution (generic for Xopenex® / Concentrate )  Perforomist® Solution
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	BETA-ADRENERGIC F Preferred  BETA-ADRENERGIC H Preferred  BETA-ADRENERGIC H  Trial and failure of only Preferred	ANDHELD, LONG ACTING  Non-Preferred  Arcapta® Neohaler®  Striverdi® Respimat® Inhalation Spray  ANDHELD, SHORT ACTING  Non-Preferred  albuterol HFA inhaler (generic for Proair® HFA Inhaler / Proventil® HFA Inhaler / Ventolin® HFA Inhaler)  levalbuterol HFA inhaler (generic for Xopenex® HFA Inhaler)  Proair® RespiClick®  Proventil® HFA Inhaler  Ventolin® HFA Inhaler  Ventolin® HFA Inhaler  Sopenex® HFA Inhaler  Non-Preferred  Non-Preferred drug required  Non-Preferred  Brovana® Solution  levalbuterol solution / Concentrate solution (generic for Xopenex® / Concentrate)  Performst® Solution / Concentrate Solution  Xopenex® Solution / Concentrate Solution
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	BETA-ADRENERGIC F  Preferred  BETA-ADRENERGIC H  Preferred  BETA-ADRENER  Trial and failure of only  Preferred  BETA-ADRENER	ANDHELD, LONG ACTING  Non-Preferred  Arcapta® Neohaler®  Striverdi® Respirat® Inhalation Spray  ANDHELD, SHORT ACTING  Non-Preferred albuterol HFA inhaler (generic for Proair® HFA Inhaler / Proventi® HFA Inhaler / Ventolin® HFA Inhaler)  levalbuterol HFA inhaler (generic for Xopenex® HFA Inhaler)  Proair® Respiclick®  Proair® Respiclick®  Proventi® HFA Inhaler  Ventolin® HFA Inhaler  Ventolin® HFA Inhaler  Sopenex® HFA Inhaler  Non-Preferred drug required  Non-Preferred drug required  Perforomis® Solution  levalbuterol solution / concentrate solution (generic for Xopenex® / Concentrate)  Perforomis® Solution  Xopenex® Solution / Concentrate Solution  ENERGIC, ORAL
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 / ml solution albuterol sulfate 5mg / ml solution albuterol sulfate 5mg / ml solution	BETA-ADRENERGIC F  Preferred  BETA-ADRENERGIC H  Preferred  BETA-ADRENER  Trial and failure of only  Preferred  BETA-ADRENER	ANDHELD, LONG ACTING  Non-Preferred  Arcapa® Neohaler®  Striverd® Respirat® Inhalation Spray  ANDHELD, SHORT ACTING  Non-Preferred  albuterol HFA inhaler (generic for Proair® HFA Inhaler / Proventil® HFA Inhaler / Ventolin® HFA Inhaler)  levalbuterol HFA inhaler (generic for Xopenex® HFA Inhaler)  Proair® Digithaler™  Proair® RespiClick®  Proventil® HFA Inhaler  Ventolin® HFA Inhaler  Ventolin® HFA Inhaler  And Inhaler  Non-Preferred  Non-Preferred  Brovana® Solution  levalbuterol solution / concentrate solution (generic for Xopenex® / Concentrate)  Perforomist® Solution  Xopenex® Solution / Concentrate Solution  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	BETA-ADRENERGIC F  Preferred  BETA-ADRENERGIC H  Preferred  BETA-ADRENER  Trial and failure of only  Preferred  BETA-ADRENER	ANDHELD, LONG ACTING  Non-Preferred  Arcapta® Neohaler®  Striverdi® Respirat® Inhalation Spray  ANDHELD, SHORT ACTING  Non-Preferred albuterol HFA inhaler (generic for Proair® HFA Inhaler / Proventil® HFA Inhaler / Ventolin® HFA Inhaler)  levalbuterol HFA inhaler (generic for Xopenex® HFA Inhaler)  Proair® Respictick®  Proair® Respictick®  Proventil® HFA Inhaler  Ventolin® HFA Inhaler  Xopenex® HFA Inhaler  RGIC, NEBULIZERS  one preferred drug required  Non-Preferred  Brovana® Solution  levalbuterol solution / concentrate solution (generic for Xopenex® / Concentrate)  Perforomist® Solution  Xopenex® Solution / Concentrate Solution  Non-Preferred  Non-Preferred  Non-Preferred  Non-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 / ml solution albuterol sulfate 5mg / ml solution albuterol sulfate 5mg / ml solution	BETA-ADRENERGIC F  Preferred  BETA-ADRENERGIC H  Preferred  BETA-ADRENER  Trial and failure of only  Preferred  BETA-ADRENER	ANDHELD, LONG ACTING  Non-Preferred  Arcapa® Neohaler®  Striverd® Respimat® Inhalation Spray  ANDHELD, SHORT ACTING  Non-Preferred  albuterol HFA inhaler (generic for Proair® HFA Inhaler / Proventil® HFA Inhaler / Ventolin® HFA Inhaler)  levalbuterol HFA inhaler (generic for Xopenex® HFA Inhaler)  Proair® Digithaler™  Proair® RespiClick®  Proventil® HFA Inhaler  Ventolin® HFA Inhaler  Ventolin® HFA Inhaler  Xopenex® HFA Inhaler  Non-Preferred  Brovana® Solution  levalbuterol solution / concentrate solution (generic for Xopenex® / Concentrate)  Perforomist® Solution  Xopenex® Solution / Concentrate Solution  Xopenex® Solution / Concentrate Solution  Non-Preferred  Non-Preferred  Non-Preferred  Non-Preferred  Non-Preferred  Non-Preferred  Sepectable Solution / Concentrate Solution  Non-Preferred  Non-Preferred  Non-Preferred  Non-Preferred  Non-Preferred  Sepectable Solution / Concentrate Solution
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	BETA-ADRENERGIC F  Preferred  BETA-ADRENERGIC H  Preferred  BETA-ADRENERGIC H  Trial and failure of only  Preferred  BETA-ADRENER  Trial and failure of Perferred	ANDHELD, LONG ACTING  Non-Preferred  Arcapta® Neohaler®  Striverdi® Respimat® Inhalation Spray  ANDHELD, SHORT ACTING  Non-Preferred  albuterol HFA inhaler (generic for Proair® HFA Inhaler / Proventil® HFA Inhaler / Ventolin® HFA Inhaler)  levalbuterol HFA inhaler (generic for Xopenex® HFA Inhaler)  Proair® RespiClick®  Proventil® HFA Inhaler  Ventolin® HFA Inhaler  Ventolin® HFA Inhaler  RGIC, NEBULIZERS  one preferred drug required  Non-Preferred  Brovana® Solution  levalbuterol solution / Concentrate solution (generic for Xopenex® / Concentrate )  Performst® Solution  Xopenex® Solution / Concentrate Solution  Xopenex® Solution / Concentrate Solution  Non-Preferred  Non-Preferred  Non-Preferred  And Solution / Concentrate Solution  Non-Preferred Solution / Concentrate Solution  Non-Preferred Solution / Concentrate Solution
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	BETA-ADRENERGIC F  Preferred  BETA-ADRENERGIC H  Preferred  BETA-ADRENERGIC H  Trial and failure of only  Preferred  BETA-ADRENER  Trial and failure of only  Preferred  ORALLY INHALED ANTIC	ANDHELD, LONG ACTING  Non-Preferred  Arcapta® Neohaler® Striverdi® Respimat® Inhalation Spray  ANDHELD, SHORT ACTING  Non-Preferred  albuterol HFA inhaler (generic for Proair® HFA Inhaler) Ievalbuterol HFA inhaler (generic for Xopenex® HFA Inhaler) Proair® Digitaler™ Proair® Digitaler™ Proair® RespiClick® Proventi® HFA Inhaler Ventolin® HFA Inhaler Ventolin® HFA Inhaler  Ventolin® HFA Inhaler  RGIC, NEBULIZERS one preferred drug required  Non-Preferred  Provana® Solution  Ievalbuterol solution / concentrate solution (generic for Xopenex® / Concentrate) Perforonist® Solution  Stopenex® Solution / Concentrate Solution  Non-Preferred  Non-Preferred  Non-Preferred  Non-Preferred  Non-Preferred  Non-Preferred  Non-Preferred  Non-Preferred  Solution / Concentrate Solution  Stopenex® Solution / Concentrate Solution  Non-Preferred  Albuterol tablets (generic for Proventi® Repetabs)  albuterol tablets (generic for VoSpire® ER)  HOLINERGICS / COPD AGENTS
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 albuterol syrup (generic for Ventolin® Syrup) metaproterenol syrup (generic for Alupent® Syrup) terbutaline tablet (generic for Brethine®)	BETA-ADRENERGIC F  Preferred  BETA-ADRENERGIC H  Preferred  BETA-ADRENERGIC H  Trial and failure of only  Preferred  BETA-ADRENER  Trial and failure of Perferred	ANDHELD, LONG ACTING  Non-Preferred  Arcapta® Neohaler®  Striverdi® Respimat® Inhalation Spray  ANDHELD, SHORT ACTING  Non-Preferred  albuterol HFA inhaler (generic for Proair® HFA Inhaler)  Invair® Levalbuterol HFA inhaler (generic for Xopenex® HFA Inhaler)  Proair® Digitaler™  Proair® CaspiClick®  Proventi® HFA Inhaler  Ventolin® HFA Inhaler  Ventolin® HFA Inhaler  Xopenex® HFA Inhaler  RGIC, NEBULIZERS  one preferred drug required  Non-Preferred  Brovan® Solution  Venerias Solution / Concentrate solution (generic for Xopenex® / Concentrate )  Perforomist® Solution  Xopenex® Solution / Concentrate Solution  Non-Preferred  Non-Preferred  Non-Preferred  Non-Preferred  Non-Preferred  ENERGIC, ORAL  Non-Preferred  Albuterol tablets (generic for Proventiв® Repetabs)  albuterol tablets (generic for VoSpire® ER)  HOLINERGICS / COPD AGENTS  Non-Preferred
albuterol 0.63mg / 3ml solution (generic for Accuneb®) albuterol 1.25mg / 3ml solution (generic for Accuneb®) albuterol 1.25mg / 3ml solution (generic for Accuneb®) albuterol sulfate 2.5mg / 3ml solution albuterol sulfate 2.5mg / 3ml solution albuterol sulfate 5mg / ml solution albuterol sulfate 5mg / ml solution albuterol syrup (generic for Ventolin® Syrup) metaproterenol syrup (generic for Alupen® Syrup) terbutaline tablet (generic for Brethine®)  Anoro® Ellipta® Inhaler	BETA-ADRENERGIC F  Preferred  BETA-ADRENERGIC H  Preferred  BETA-ADRENERGIC H  Trial and failure of only  Preferred  BETA-ADRENER  Trial and failure of only  Preferred  ORALLY INHALED ANTIC	ANDHELD, LONG ACTING  Non-Preferred  Arcapta® Neohaler®  Striverd® Respima® Inhalation Spray  ANDHELD, SHORT ACTING  Non-Preferred  albuterol HFA inhaler (generic for Proair® HFA Inhaler / Proventil® HFA Inhaler / Ventolin® HFA Inhaler)  levalbuterol HFA inhaler (generic for Xopenex® HFA Inhaler)  Proair® Digithaler™  Proair® RespiClick®  Proventil® HFA Inhaler  Ventolin® HFA Inhaler  Ventolin® HFA Inhaler  Solphila HFA Inhaler  Non-Preferred  Brovana® Solution  levalbuterol solution / concentrate solution (generic for Xopenex® / Concentrate)  Performist® Solution  Solution / Concentrate Solution  Non-Preferred  albuterol tablets (generic for Proventil® Repetabs)  albuterol ER tablets (generic for VoSpire® ER)  HOLINERGICS / COPD AGENTS  Non-Preferred  Daliresp® Tablet
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 / 0.5ml solution albuterol sulfate 2.5mg / 3ml solution albuterol sulfate 5mg / ml solution albuterol sulfate 5mg / ml solution albuterol syrup (generic for Ventolin® Syrup) metaproterenol syrup (generic for Alupent® Syrup) terbutaline tablet (generic for Brethine®)  Anoro® Ellipta® Inhaler Atrovent® HFA Inhaler	BETA-ADRENERGIC F  Preferred  BETA-ADRENERGIC H  Preferred  BETA-ADRENERGIC H  Trial and failure of only  Preferred  BETA-ADRENER  Trial and failure of only  Preferred  ORALLY INHALED ANTIC	ANDHELD, LONG ACTING  Non-Preferred  Arcapta® Neohaler®  Striverd® Respima® Inhalation Spray  ANDHELD, SHORT ACTING  Non-Preferred  albuterol HFA inhaler (generic for Proair® HFA Inhaler / Proventil® HFA Inhaler / Ventolin® HFA Inhaler)  levalbuterol HFA inhaler (generic for Xopenex® HFA Inhaler)  Proair® Digihaler®  Proair® Respiclick®  Proventil® HFA Inhaler  Ventolin® HFA Inhaler  Ventolin® HFA Inhaler  RGIC, NEBULIZERS  one preferred drug required  Non-Preferred  Brovana® Solution  levalbuterol solution / concentrate solution (generic for Xopenex® / Concentrate )  Performis® Solution  Xopenex® Solution / Concentrate Solution  Non-Preferred  albuterol tablets (generic for Proventil® Repetabs)  albuterol Ex tablets (generic for Proventil® Repetabs)  Albuterol Ex tablets (generic for VoSpiro® ER)  HOLINERGICS / COPD AGENTS  Non-Preferred  Daliresp® Tablet  Duaklir® Pressair®
albuterol 0.63mg / 3ml solution (generic for Accuneb®) albuterol 1.25mg / 3ml solution (generic for Accuneb®) albuterol 1.25mg / 3ml solution (generic for Accuneb®) albuterol sulfate 2.5mg / 3ml solution albuterol sulfate 2.5mg / 3ml solution albuterol sulfate 5mg / ml solution albuterol surfate 5mg / ml solution albuterol syrup (generic for Ventolin® Syrup) metaproterenol syrup (generic for Alupen® Syrup) terbutaline tablet (generic for Brethine®)  Anoro® Ellipta® Inhaler	BETA-ADRENERGIC F  Preferred  BETA-ADRENERGIC H  Preferred  BETA-ADRENERGIC H  Trial and failure of only  Preferred  BETA-ADRENER  Trial and failure of only  Preferred  ORALLY INHALED ANTIC	ANDHELD, LONG ACTING  Non-Preferred  Arcapta® Neohaler® Striverd® Respiran® Inhalation Spray  ANDHELD, SHORT ACTING  Non-Preferred  albuterol HFA inhaler (generic for Proair® HFA Inhaler) levalbuterol HFA inhaler (generic for Xopenex® HFA Inhaler) Proair® Digithaler  Proair® Respiclick® Proventi® HFA Inhaler  Avopenex® HFA Inhaler  Non-Preferred  RIC, NEBULIZERS  one preferred drug required  Non-Preferred  Brovana® Solution  Levalbuterol solution / concentrate solution (generic for Xopenex® / Concentrate )  Perforomis® Solution / Concentrate Solution  Nopenex® Solution / Concentrate Solution  Nopenex® Solution I Concentrate Solution  Non-Preferred  albuterol tablets (generic for VoSpire® ER)  HOLINERGICS / COPD AGENTS  Non-Preferred  Daliresp® Tablet  Daliresp® Tablet  Incruse® Ellipta® Inhaler
albuterol 0.63mg / 3ml solution (generic for Accuneb®) albuterol 0.63mg / 3ml solution (generic for Accuneb®) albuterol 0.52mg / 3ml solution (generic for Accuneb®) albuterol sulfate 2.5mg / 3ml solution albuterol sulfate 5mg / ml solution albuterol sulfate 5mg / ml solution albuterol syrup (generic for Ventolin® Syrup) metaproterenol syrup (generic for Alupent® Syrup) terbutaline tablet (generic for Brethine®)  Anoro® Ellipta® Inhaler Atrovent® HFA Inhaler	BETA-ADRENERGIC F  Preferred  BETA-ADRENERGIC H  Preferred  BETA-ADRENERGIC H  Trial and failure of only  Preferred  BETA-ADRENER  Trial and failure of only  Preferred  ORALLY INHALED ANTIC	ANDHELD, LONG ACTING  Non-Preferred  Arcapta® Neohaler®  Striverd® Respima® Inhalation Spray  ANDHELD, SHORT ACTING  Non-Preferred  albuterol HFA inhaler (generic for Proair® HFA Inhaler / Proventil® HFA Inhaler / Ventolin® HFA Inhaler)  levalbuterol HFA inhaler (generic for Xopenex® HFA Inhaler)  Proair® Digihaler™  Proair® Respiclick®  Proventil® HFA Inhaler  Ventolin® HFA Inhaler  Ventolin® HFA Inhaler  Ventolin® HFA Inhaler  RGIC, NEBULIZERS  one preferred drug required  Non-Preferred  Brovana® Solution  levalbuterol solution / concentrate solution (generic for Xopenex® / Concentrate )  Perforomis® Solution  Xopenex® Solution / Concentrate Solution  Non-Preferred  albuterol tablets (generic for Proventil® Repetabs)  albuterol Et tablets (generic for VoSpire® ER)  HOLINERGICS / COPD AGENTS  Non-Preferred  Daliresp® Tablet  Duaklir® Pressair®

## Effective: 06/01/2021

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 NOT 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

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

more information on the Libe can be found at: maps://medicard.indum	and the state of t
ipratropium nebulizer solution (generic for Atrovent <sup>®</sup> Nebulizer Solution)	Seebri <sup>®</sup> Neohaler <sup>®</sup>
ipratropium-albuterol solution (generic for Duoneb®)	Tudorza® Pressair® Inhaler
Spiriva® Handihaler®	Utibron® Neohaler®
Spiriva® Respimat® Inhalation Spray	Yupetri." Solution
Stiolto® Respirat® Inhalation Spray	
INHAI	LED CORTICOSTEROIDS
Preferred	Non-Preferred
Flovent® Diskus	Alvesco® Inhaler
Flovent® HFA Inhaler	ArmonAir <sup>™</sup> Digihaler <sup>™</sup>
Pulmicort® Respules 0.25mg, 0.5mg, 1mg	Arnuity <sup>®</sup> Ellipta <sup>®</sup> Inhaler
	Asmanex® HFA Inhaler
	Asmanex® Twisthaler®
	budesonide suspension (generic for Pulmicort® Respules)
	Pulmicort® Flexhaler
	QVAR <sup>®</sup> RediHaler <sup>™</sup>
INHALED COJ	RTICOSTEROID COMBINATIONS
Preferred	Non-Preferred
Advair® Diskus®	AirDuo® Digihaler™ / RespiClick®
Advair® HFA Inhaler	Breo® Ellipta®
Advair HFA Innaier  Dulera® Inhaler	Breziri™ Aerosphere™
Dutera inhater Symbicort® Inhaler	
Sympton mater	budesonide/formoterol inhalation (generic for Symbicort®)
	fluticasone/salmeterol inhalation (generic for Advair® Diskus®)
	fluticasone/salmeterol inhalation (generic for AirDuo <sup>®</sup> )
	Trelegy <sup>®</sup> Ellipta <sup>®</sup> Wixela <sup>™</sup> Inhub <sup>™</sup>
	wixeia innub
TA WITH A C	NACAL DIBNITIC ACENTO
	NASAL RHINITIS AGENTS
Preferred	Non-Preferred
Astepro® Nasal Spray	Exemption for steroids applies to children < 4 years of age
azelastine spray (generic for Astelin®)	azelastine nasal spray (generic for Astepro®)
fluticasone spray (generic for Flonase®)	azelastine-fluticasone nasal spray (generic for Dymista®)
ipratropium spray (generic for Atrovent® Nasal)	Beconase® AQ Nasal Spray
olopatadine nasal spray(generic for Patanase®)	Dymista <sup>®</sup> Nasal Spray
	flunisolide nasal spray (generic for Nasalide®)
	mometasone nasal spray (generic for Nasonex®)
	Nasonex® Nasal Spray
	Omnaris® Nasal Spray
	Patanase® Nasal Spray
	QNasl® Nasal Spray / Children's Spray
	Sinuva <sup>™</sup> Implant
	Xhance <sup>M</sup> Nasal Spray
	Zetonna <sup>®</sup> Nasal Spray
LEU	KOTRIENE MODIFIERS
Preferred	Non-Preferred
montelukast chewable / tablet (generic for Singulair <sup>®</sup> )	Accolate® Tablet
	montelukast granules (generic for Singulair®)
	Singulair <sup>®</sup> Chewable / Granules / Tablet
	zafirlukast tablet (generic for Accolate®)
	zileuton tablet (generic for Zyflo®)
	Zyflo <sup>®</sup> Filmtab
LOW SE	DATING ANTIHISTAMINES
Preferred	Non-Preferred
cetirizine tablets OTC (generic for Zyrtec® OTC Tablets)	cetirizine chewable tablet 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)
	Clarinex® Tablet - Exemption for children < 2 years of age
cetirizine Rx syrup (generic for Zyrtec <sup>®</sup> Syrup)	Carmex Tablet - Exemption for Children 2 years of age
levocetirizine Rx tablet (generic for Xyzal® Rx Tablet)	desloratadine ODT / Tablet (generic for Clarinex®)
levocetirizine Rx tablet (generic for Xyzal® Rx Tablet)	desloratadine ODT / Tablet (generic for Clarinex®)
levocetirizine Rx tablet (generic for Xyzal® Rx Tablet)	desloratadine ODT / Tablet (generic for Clarinex <sup>®</sup> )  fexofenadine OTC suspension / OTC tablet (generic for Allegra <sup>®</sup> OTC)
levocetirizine Rx tablet (generic for Xyzal® Rx Tablet)	desloratadine ODT / Tablet (generic for Clarinex <sup>®</sup> )  fexofenadine OTC suspension / OTC tablet (generic for Allegra <sup>®</sup> OTC)  levocetirizine Rx solution (generic for Xyzal <sup>®</sup> Rx Solution)
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levocetirizine Rx tablet (generic for Xyzaf® Rx Tablet)  loratadine tablet OTC (generic for Claritin® OTC)	desloratadine ODT / Tablet (generic for Clarinex®)  fexofenadine OTC suspension / OTC tablet (generic for Allegra® OTC)  levocetirizine Rx solution (generic for Xyzal® Rx Solution)  loratadine OTC chewable ODT / solution / soft gel (generic for Claritin® OTC)
levocetirizine Rx tablet (generic for Xyzal® Rx Tablet)  loratadine tablet OTC (generic for Claritin® OTC)  LOW SEDATING	desloratadine ODT / Tablet (generic for Clarinex®)  fexofenadine OTC suspension / OTC tablet (generic for Allegra® OTC)  levocetirizine Rx solution (generic for Xyzal® Rx Solution)  loratadine OTC chewable ODT / solution / soft gel (generic for Claritin® OTC)  Quzyttir™ Vial
levocetirizine Rx tablet (generic for Xyzal® Rx Tablet)  loratadine tablet OTC (generic for Claritin® OTC)  LOW SEDATING	desloratadine ODT / Tablet (generic for Clarinex®)  fexofenadine OTC suspension / OTC tablet (generic for Allegra® OTC)  levocetirizine Rx solution (generic for Xyzal® Rx Solution)  loratadine OTC chewable ODT / solution / soft gel (generic for Claritin® OTC)  Quzyttir™ Vial  ANTIHISTAMINE COMBINATIONS
levocetirizine Rx tablet (generic for Xyzal® Rx Tablet)  loratadine tablet OTC (generic for Claritin® OTC)  LOW SEDATING  Quantity limit of 102 days st	desloratadine ODT / Tablet (generic for Clarinex®)  fexofenadine OTC suspension / OTC tablet (generic for Allegra® OTC)  levocetirizine Rx solution (generic for Xyzal® Rx Solution)  loratadine OTC chewable ODT / solution / soft gel (generic for Claritin® OTC)  Quzyttir™ Vial  ANTIHISTAMINE COMBINATIONS  upply per 12 months apply to all drugs in this class
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levocetirizine Rx tablet (generic for Xyzal® Rx Tablet) loratadine tablet OTC (generic for Claritin® OTC)  LOW SEDATING Quantity limit of 102 days st  Preferred	desloratadine ODT / Tablet (generic for Clarinex®)  fexofenadine OTC suspension / OTC tablet (generic for Allegra® OTC)  levocetirizine Rx solution (generic for Xyzal® Rx Solution)  loratadine OTC chewable ODT / solution / soft gel (generic for Claritin® OTC)  Quzyttir™ Vial  ANTIHISTAMINE COMBINATIONS  upply per 12 months apply to all drugs in this class  Non-Preferred  cetirizine-D OTC tablet (generic for Zyrtec-D® OTC)  Clarinex-D® Tablet

North Carolina Medicaid and Health Choice Preferred Drug List (PDL)

# Effective: 06/01/2021

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Differii Cream / Gel Pump / Lotion  Epidon* Gel  Epidon* Forte  Aktipa* Twoch  Aktipa* Twoch  Aktipa* Twoch  Aktipa* Twoch  Aktipa* Twoch  Aktipa* Twoch  Arabo* Jointon  Bra* Jointon  Closchein* Jointon  Closchein* Jointon  Closchein* Jointon  Closchein* Jointon  Closchein* Jointon  Arabo* Jointon  Ar	Non-Preferred  I pump / solution (generic for Differin®) ide (generic for Epiduo® Gel)
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sladaujous phosphate pletigest Joulation (generic for Cloccion T <sup>®</sup> )  adaptation Cream (Gel Pump / Losion	
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	Non-Preferred
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Androgel Packet Axiron® Topical Gel / So	ution
Fortesta® Gel Pump	лил
Natesto® Nasal Gel	
Testim <sup>®</sup> Gel	
	generic for Testim®, Vogelxo®)
	neric for Androgel® Pump)
	olution (generic for Axiron®, Fortesta®)
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Preferred	
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diclofenac solution (gener	h (generic for Flector® Patch)
Diclofex <sup>™</sup> DC Pack	h (generic for Flector® Patch)

North Carolina Medicaid and Health Choice Preferred Drug List (PDL)

## Effective: 06/01/2021

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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

More information on the PDL can be found at. <u>https://medicaid.ncdniis.gov/</u>	providers/programs-services/prescription-drugs/outpatient-pnarmacy-services
	Flector® Patch
	Licart <sup>™</sup> Patch
	Pennsaid® Solution Packet / Pump
	Voltaren Gel <sup>®</sup>
	TBIOTICS
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
ANTENDA	TOO VIAONYAY
	ICS - VAGINAL
Preferred	Non-Preferred
Cleocin® Vaginal Ovules	Cleocin® Vaginal Cream
Clindesse® Vaginal Cream	clindamycin vaginal cream (generic for Cleocin® Vaginal Cream)
metronidazole vaginal gel (generic for Metrogel® Vaginal Gel)	Metrogel® Vaginal Gel
Nuvessa® Vaginal Gel	
Vandazole® Vaginal Gel	
ANT	TENIO II O
	FUNGALS
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® Kit)
ketoconazole cream / shampoo (generic for Nizoral®)	clotrimazole-betamethasone lotion (generic for Lotrisone® lotion)
Nyamyc® Powder (branded generic for Nystop®)	clotrimazole Rx solution (generic for Lotrimin <sup>®</sup> Rx)
nystatin cream / ointment / powder (generic for Mycostatin®, Nystop®)	econazole cream (generic for Spectazole®)  Ertaczo® Cream
Nystop <sup>®</sup> Powder	Extaczo* Cream  Exelderm® Cream / Solution
	Extina® Foam
	Jublia® Topical Solution
	Kerydin® Topical Solution
	ketoconazole foam (generic for Extina® Foam)
	Loprox® shampoo / suspension / cream / kit
	luliconazole cream (generic for Luzu® Cream)
	Luzu® Cream
	Mentax® Cream
	miconazole / zinc oxide / petrolatum ointment (generic for Vusion®) - Clinical criteria apply
	naftifine cream/gel (generic for Naftin® Cream/Gel)
	Naftin® Cream / Gel
	nystatin-triamcinolone cream / ointment (generic for Mycolog II®)
	oxiconazole cream (generic for Oxistat <sup>®</sup> )
	Oxistat® Cream / Lotion
	tavaborole topical solution (generic for Kerydin® Topical Solution) NOT REVIEWED
	Vusion® Ointment - Clinical criteria apply
	***
ANTII	ARASITICS
Trial and failure of only	one preferred drug required
Preferred	Non-Preferred
Natroba® Topical Suspension	Crotan <sup>™</sup> Lotion
permethrin cream (generic for Elimite®)	Elimite® Cream
	Eurax® Cream / Lotion
	ivermectin lotion (generic for Sklice® Lotion) NOT REVIEWED
	lindane shampoo
	malathion lotion (generic for Ovide®)
	Ovide <sup>®</sup> Lotion
	Sklice <sup>®</sup> Lotion
	spinosad topical suspension (generic for Natroba®)
AN	TIVIRAL
Preferred	Non-Preferred
Zovirax® Cream	acyclovir cream (generic for Zovirax® Cream)
Zovirax® Ointment	acyclovir ointment (generic for Zovirax® Ointment)
	Denavir® Cream
	Xerese® Cream
	MODULATORS
-	c Dermatitis
	ly to all drugs in this class
Preferred	Non-Preferred
Elidel® Cream	Dupixent® Injection
Eucrisa® 2% Ointment	pimecrolimus cream (generic for Elidel <sup>®</sup> Cream)
Protopic® Ointment	tacrolimus ointment (generic Protopic®)
	1

#### Effective: 06/01/2021

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 NOT 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

Imidazoquinolinamines Preferred Non-Preferred miquimod cream packet (generic for Aldara®) Aldara® Cream Condylox® Gel oodofilox solution (generic for Condylox® Solution) NOT REVIEWED Veregen® Ointment Zyclara® Cream / Cream Pump PSORIASIS Preferred Non-Preferred Dovonex® Cream calcipotriene-betamethasone suspension / ointment (generic for Talconex®) calcipotriene cream / ointment / solution (generic for Dovonex®) calcitriol ointment (generic for Vectical®) Duobrii<sup>™</sup> Lotion Enstilar® Foam Sorilux® Foam Taclonex® Ointment / Suspension Vectical® Ointment ROSACEA AGENTS Preferred Non-Preferred MetroCream<sup>0</sup> azelaic acid gel (generic for Finacea®) MetroGel® ivermectin cream (generic for Soolantra®) metronidazole cream (generic for MetroCream®) metronidazole gel / pump[ (generic for MetroGel® metronidazole lotion (generic for MetroLotion®) Mirvaso® Gel Pump Noritate® Cream Rhofade® Cream Rosadan® Cream / Gel / Kit Soolantra® Cream Zilxi Foam STEROIDS Low Potency Preferred Non-Preferred DermaSmoothe® FS Scalp and Body Oil alclometasone dipropionate cream / ointment (generic for Aclovate®) Aqua Glycolic® HC Kit nydrocortisone cream / lotion / ointment (generic for Hytone®) Capex Shampoo Desonate® Gel desonide cream / ointment (generic for DesOwen®) - Exemption for children < 12 years of age desonide lotion (generic for DesOwen® Lotion) fluocinolone body / scalp oil (generic for DermaSmoothe® FS Scalp / Body Oil) Micort® HC Cream Texacort® Solution Medium Potency Preferred Non-Preferred Beser<sup>™</sup> Lotion / Kit luticasone cream / ointment (generic for Cutivate clocortolone cream / pump (generic for Cloderm®) nometasone cream / ointment / solution (generic for Elocon®) Cloderm® Cream / Pump Cordran® Tape Cutivate® Cream / Lotion Dermatop® 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® Lipocream / Lotion LIPOCREAM NOT REVIEWED Luxiq® Foam Pandel® Cream prednicarbate cream / ointment (generic for Dermatop®) Synalar® Cream / Ointment / Kit / Solution / TS Kit High Potency Preferred Non-Preferred amcinonide cream / lotion (generic for Cyclocort®) etamethasone valerate cream / ointment (generic for Valisone® betamethasone dipropionate augmented cream / gel / lotion / ointment (generic for Diprolene®) riamcinolone 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 / spray (generic for Topicort®) diflorasone cream / ointment (generic for Florone®)

## Effective: 06/01/2021

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 NOT 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

	Diprolene® Ointment
	fluocinonide cream / emollient cream / gel (generic for Lidex® / Lidex® E)
	fluocinonide ointment (generic for Lidex® Ointment)
	fluocinonide solution (generic for Lidex® / Lidex®)
	halcinonide cream (generic for Halog <sup>®</sup> )
	Halog® Cream / Ointment / Solution
	Kenalog® Spray
	Sanaderm® Rx Solution
	Sernivo® Spray
	Topicort® Cream / Gel / Ointment / Spray / LP
	triamcinolone spray (generic for Kenalog® Spray)
	Trianex® Ointment
	Vanos® Cream
Voru	High Potency
Preferred	Non-Preferred
	Apexicon E <sup>®</sup> Cream
clobetasol cream / emollient cream / gel / ointment (generic for Temovate®)	
clobetasol solution (generic for Cormax®)	Bryhali™ Lotion
Clobex® Shampoo	clobetasol foam / emollient foam / emulsion foam (generic for Olux® / Olux-E®)
halobetasol propionate cream / ointment (generic for Ultravate®)	clobetasol lotion / shampoo (generic for Clobex®)
	clobetasol propionate spray (generic for Clobex® spray)
	Clobex® Lotion / Spray Clodan® Kit / Shampoo
	Clodan Kit / Shampoo halobetasol propionate foam (generic for Lexette® Foam)
	Impeklo TM Lotion NOT REVIEWED
	Lexette® Foam
	Olux® Foam / E-Foam
	Temovate® Cream / Ointment
	Tovet Foam / Foam Kit
	Ultravate® Cream / Lotion / Ointment / X Cream Combo Pack / X Ointment Combo Pack
	Oldavate Cleani/ Lonon/ Oldanicit/ A Cleani Combo i ack / A Oldanicit Combo i ack
MISC	ELLANEOUS
	PRIATICS, ORAL
Preferred	Non-Preferred
	methoxsalen rapid (generic for Oxsoralen-Ultra®)
acitretin (generic for Soriatane®)	Oxsoralen-Ultra®
	Soriatane <sup>®</sup>
	Sociatane
EPINEPHRIT	VE, SELF INJECTED
	ply to all drugs in this class
Preferred	Non-Preferred
epinephrine auto injector / JR (generic for Epi-Pen® Auto Injector / JR Auto Injector)	epinephrine auto injector (generic for Adrenaclick®)
epinepinine and injector for the first factority of the injectory	
	Epi-Pen® Auto Injector / JR Auto Injector
	Epi-ren Auto Injector / JR Auto Injector  Symjepi <sup>TM</sup>
ESTROGEN AG	Symjepi™
	Symjepi <sup>™</sup> ENTS, COMBINATIONS
Preferred	Symjepi <sup>™</sup> ENTS, COMBINATIONS  Non-Preferred
Preferred Activella® Tablet	Symjepi <sup>™</sup> ENTS, COMBINATIONS  Non-Preferred  Bijuva <sup>®</sup> Capsule
Preferred  Activella® Tablet estradiol/norethindrone tablet (generic for Activella®)	Symjepi <sup>™</sup> ENTS, COMBINATIONS  Non-Preferred  Bijuva <sup>®</sup> Capsule  FemHRT <sup>®</sup> Tablet
Preferred  Activella® Tablet estradiol/norethindrone tablet (generic for Activella®)  Fyavolv™ Tablet	Symjepi <sup>™</sup> ENTS, COMBINATIONS  Non-Preferred  Bijuva <sup>®</sup> Capsule  FemHRT <sup>®</sup> Tablet  Loprecza <sup>®</sup> Tablet
Preferred  Activella® Tablet estradiol/norethindrone tablet (generic for Activella®)  Fyavolv™ Tablet  Jevantique™ Lo Tablet	Symjepi <sup>™</sup> ENTS, COMBINATIONS  Non-Preferred  Bijuva <sup>®</sup> Capsule  FemHRT <sup>®</sup> Tablet
Preferred  Activella® Tablet estradiol/norethindrone tablet (generic for Activella®)  Fyavolv™ Tablet  Jevantique™ Lo Tablet  Jinteli® (branded generic for FemHRT®)	Symjepi <sup>™</sup> ENTS, COMBINATIONS  Non-Preferred  Bijuva <sup>®</sup> Capsule  FemHRT <sup>®</sup> Tablet  Loprecza <sup>®</sup> Tablet
Preferred  Activella® Tablet estradiol/norethindrone tablet (generic for Activella®)  Fyavolv™ Tablet  Jevantique™ Lo Tablet  Jinteli® (branded generic for FemHRT®)  Mimvey® / Lo (branded generic for Activella®)	Symjepi <sup>™</sup> ENTS, COMBINATIONS  Non-Preferred  Bijuva <sup>®</sup> Capsule  FemHRT <sup>®</sup> Tablet  Loprecza <sup>®</sup> Tablet
Preferred  Activella® Tablet estradio/norethindrone tablet (generic for Activella®)  Fyavolv™ Tablet Jevantique™ Lo Tablet Jintell® (branded generic for FemHRT®)  Minwey® / Lo (branded generic for Activella®) norethindrone-ethinyl estradiol (generic for FemHRT®)	Symjepi <sup>™</sup> ENTS, COMBINATIONS  Non-Preferred  Bijuva <sup>®</sup> Capsule  FemHRT <sup>®</sup> Tablet  Loprecza <sup>®</sup> Tablet
Preferred  Activella® Tablet estradiolnorethindrone tablet (generic for Activella®)  Fyavolv™ Tablet  Jevantrqu™ Lo Tablet  Jinteli® (branded generic for FemHRT®)  Mimvey® /Lo (branded generic for Activella®) norethindrone-ethinyl estradiol (generic for FemHRT®)  Premphase® Tablet	Symjepi <sup>™</sup> ENTS, COMBINATIONS  Non-Preferred  Bijuva <sup>®</sup> Capsule  FemHRT <sup>®</sup> Tablet  Loprecza <sup>®</sup> Tablet
Preferred  Activella® Tablet estradiolnorethindrone tablet (generic for Activella®)  Fyavolv™ Tablet  Jevantique™ Lo Tablet  Jinteli® (branded generic for FemHRT®)  Mimvey® / Lo (branded generic for Activella®) norethindrone-ethinyl estradiol (generic for FemHRT®)	Symjepi <sup>™</sup> ENTS, COMBINATIONS  Non-Preferred  Bijuva <sup>®</sup> Capsule  FemHRT <sup>®</sup> Tablet  Loprecza <sup>®</sup> Tablet
Preferred  Activella® Tablet estradiol/norethindrone tablet (generic for Activella®)  Fyavolv® Tablet Jevantique® Lo Tablet Jintell® (branded generic for FemHRT®)  Mimvey® /Lo (branded generic for FemHRT®)  Premphase® Tablet  Prempro® Tablet	Symjepi <sup>™</sup> ENTS, COMBINATIONS  Non-Preferred  Bijuva <sup>®</sup> Capsule  FemHRT <sup>®</sup> Tablet  Loprecza <sup>®</sup> Tablet
Preferred  Activella® Tablet estradiol/norethindrone tablet (generic for Activella®)  Fyavolv® Tablet Jevantique® Lo Tablet Jintell® (branded generic for FemHRT®)  Mimvey® /Lo (branded generic for FemHRT®)  Premphase® Tablet  Prempro® Tablet  Prempro® Tablet	Symjepi™  ENTS, COMBINATIONS    Non-Preferred
Preferred  Activella® Tablet estradiol/norethindrone tablet (generic for Activella®)  Fyavolv™ Tablet Jevantique™ Lo Tablet Jinteli® (branded generic for FemHRT®)  Mimvey® / Lo (branded generic for FemHRT®) norethindrone-ethinyl estradiol (generic for FemHRT®)  Premphase® Tablet  Prempro® Tablet  Preferred  PROGESTA	Symjepi™  ENTS, COMBINATIONS  Non-Preferred  Bijuva® Capsule FemHRT® Tablet  Lopreeza® Tablet  Prefest® Tablet  TIONAL AGENTS  Non-Preferred
Preferred  Activella® Tablet estradio/norethindrone tablet (generic for Activella®)  Fyavolv™ Tablet Jevantique™ Lo Tablet Jinteli® (branded generic for FemHRT®)  Minnvey® / Lo (branded generic for Activella®) norethindrone-ethinyl estradiol (generic for FemHRT®)  Premphase® Tablet  Prempro® Tablet  Prempro® Tablet  Preferred  Compounded 17 P	Symjepi™  ENTS, COMBINATIONS    Non-Preferred
Preferred  Activella® Tablet estradio/norethindrone tablet (generic for Activella®)  Fyavolv™ Tablet Jevantiqu™ Lo Tablet Jevantiqu™ Lo (tranded generic for FemHRT®)  Minvey® / Lo (branded generic for FemHRT®) norethindrone-ethinyl estradiol (generic for FemHRT®)  Premphase® Tablet  Prempro® Tablet  Preferred  Compounded 17 P hydroxyprogesterone caproate injection (generic for Makena®) single dose vial	Symjepi™  ENTS, COMBINATIONS  Non-Preferred  Bijuva® Capsule FemHRT® Tablet  Lopreeza® Tablet  Prefest® Tablet  TIONAL AGENTS  Non-Preferred
Preferred  Activella® Tablet estradio/norethindrone tablet (generic for Activella®)  Fyavolv™ Tablet Jevantique™ Lo Tablet Jinteli® (branded generic for FemHRT®)  Minnvey® / Lo (branded generic for Activella®) norethindrone-ethinyl estradiol (generic for FemHRT®)  Premphase® Tablet  Prempro® Tablet  Prempro® Tablet  Preferred  Compounded 17 P	Symjepi™  ENTS, COMBINATIONS  Non-Preferred  Bijuva® Capsule FemHRT® Tablet  Lopreeza® Tablet  Prefest® Tablet  TIONAL AGENTS  Non-Preferred
Preferred  Activella® Tablet estradio/norethindrone tablet (generic for Activella®)  Fyavolv™ Tablet Jevantque™ Lo Tablet Jinteli® (branded generic for FemHRT®) Mimvey® (Lo (branded generic for FemHRT®) norethindrone-ethinyl estradiol (generic for FemHRT®)  Premphase® Tablet  Prempro® Tablet  Preferred  Compounded 17 P hydroxyprogesterone caproate injection (generic for Makena®) single dose vial Makena® (hydroxyprogesterone caproate) Vial	Symjepi™  ENTS, COMBINATIONS  Non-Preferred  Bijuva® Capsule FemHRT® Tablet  Lopreeza® Tablet  Prefest® Tablet  TIONAL AGENTS  Non-Preferred
Preferred  Activella® Tablet estradio/norethindrone tablet (generic for Activella®)  Fyavolv™ Tablet Jevantique™ Lo Tablet Jintell® (branded generic for FemHRT®) Minnvey® / Lo (branded generic for Activella®) norethindrone-ethinyl estradiol (generic for FemHRT®) Premphase® Tablet Prempro® Tablet  Prempro® Tablet  Preferred  Compounded 17 P hydroxyprogesterone caproate injection (generic for Makena®) single dose vial Makena® (hydroxyprogesterone caproate injection) Auto Injector	Symjepi™  ENTS, COMBINATIONS  Non-Preferred  Bijuva® Capsule FemHRT® Tablet  Lopreza® Tablet  Prefest® Tablet  Tional AGENTS  Non-Preferred  hydroxyprogesterone caproate injection (generic for Makena®) multi dose vial
Preferred  Activella® Tablet estradio/norethindrone tablet (generic for Activella®)  Fyavolv™ Tablet Jevantique™ Lo Tablet Jintell® (branded generic for FemHRT®) Minnvey® / Lo (branded generic for Activella®) norethindrone-ethinyl estradiol (generic for FemHRT®) Premphase® Tablet Prempro® Tablet  Prempro® Tablet  Preferred  Compounded 17 P hydroxyprogesterone caproate injection (generic for Makena®) single dose vial Makena® (hydroxyprogesterone caproate injection) Auto Injector	Symjepi™  ENTS, COMBINATIONS  Non-Preferred  Bijuva® Capsule FemHRT® Tablet  Lopreeza® Tablet  Prefest® Tablet  TIONAL AGENTS  Non-Preferred
Preferred  Activella® Tablet estradio/norethindrone tablet (generic for Activella®)  Fyavolv™ Tablet Jevantique™ Lo Tablet Jinteli® (branded generic for FemHRT®)  Mimvey® / Lo (branded generic for Activella®) norethindrone-ethinyl estradiol (generic for FemHRT®)  Premphase® Tablet  Prempro® Tablet  Prempro® Tablet  Preferred  Compounded 17 P hydroxyprogesterone caproate injection (generic for Makena®) single dose vial  Makena® (hydroxyprogesterone caproate injection) Auto Injector  ESTROGEN AGENT  Preferred	Symjept™  ENTS, COMBINATIONS  Non-Preferred  Bijuva® Capsule FemHRT® Tablet  Lopreca® Tablet  Prefest® Tablet  TIONAL AGENTS  Non-Preferred  hydroxyprogesterone caproate injection (generic for Makena®) multi dose vial  S, ORAL / TRANSDERMAL  Non-Preferred
Preferred  Activella® Tablet estradio/norethindrone tablet (generic for Activella®)  Fyavolv™ Tablet Jevantique™ Lo Tablet Jevantique™ Lo (tranded generic for FemHRT®)  Minwey® / Lo (branded generic for FemHRT®)  morethindrone-ethinyl estradiol (generic for FemHRT®)  Premphase® Tablet  Prempro® Tablet  Prempro® Tablet  Preferred  Compounded 17 P  hydroxyprogesterone caproate injection (generic for Makena®) single dose vial  Makena® (hydroxyprogesterone caproate injection) Auto Injector  ESTROGEN AGENT  Preferred  Climara® Pro Patch	Symjept™  ENTS, COMBINATIONS  Non-Preferred  Bijuva® Capsule FemHRT® Tablet  Lopreca® Tablet  Prefest® Tablet  TIONAL AGENTS  Non-Preferred hydroxyprogesterone caproate injection (generic for Makena®) multi dose vial  S, ORAL / TRANSDERMAL  Non-Preferred Alora® Patch
Preferred  Activella® Tablet estradio/norethindrone tablet (generic for Activella®)  Fyavolv™ Tablet Jevantiqu™ Lo Tablet Jevantiqu™ Lo (tranded generic for FemHRT®)  Minnvey® (Lo (branded generic for FemHRT®) norethindrone-ethinyl estradiol (generic for FemHRT®)  Premphase® Tablet  Prempro® Tablet  Preferred  Compounded 17 P hydroxyprogesterone caproate injection (generic for Makena®) single dose vial  Makena® (hydroxyprogesterone caproate injection) Auto Injector  ESTROGEN AGENT  Preferred  Climara® Pro Patch CombiPatch®	Symjept Non-Preferred  Bijuva® Capsule  FemHRT® Tablet  Lopreeza® Tablet  Prefest® Tablet  TIONAL AGENTS  Non-Preferred  hydroxyprogesterone caproate injection (generic for Makena®) multi dose vial  S, ORAL / TRANSDERMAL  Non-Preferred  Alora® Patch  Climara® Patch
Preferred  Activella® Tablet estradio/norethindrone tablet (generic for Activella®)  Fyavolv™ Tablet Jevantqu™ Lo Tablet Jevantqu™ Lo Tablet Jinteli® (branded generic for FemHRT®) Minrey® (Lo (branded generic for Activella®) norethindrone-ethinyl estradiol (generic for FemHRT®)  Premphase® Tablet Prempro® Tablet  Preferred  Compounded 17 P hydroxyprogesterone caproate injection (generic for Makena®) single dose vial Makena® (hydroxyprogesterone caproate injection) Auto Injector  ESTROGEN AGENT  Preferred  Climara® Pro Patch CombiPatch® estradiol patch (generic for Climara®, Menostar®, Vivelle-Dot®)	Symjept Non-Preferred  Bijuva® Capsule FemHRT® Tablet Lopreeza® Tablet Prefest® Tablet  TIONAL AGENTS  Non-Preferred hydroxyprogesterone caproate injection (generic for Makena®) multi dose vial  S, ORAL / TRANSDERMAL  Non-Preferred Alora® Patch Climara® Patch Divigel® Gel Packet
Preferred  Activella® Tablet estradio/norethindrone tablet (generic for Activella®)  Fyavolv™ Tablet Jevantque™ Lo Tablet Jinteli® (branded generic for FemHRT®) Mimvey® /Lo (branded generic for FemHRT®) norethindrone-ethindrone-ethindrone-thindrone-eth	Symjept™  ENTS, COMBINATIONS    Non-Preferred
Preferred  Activella® Tablet estradiol/norethindrone tablet (generic for Activella®)  Fyavolv™ Tablet Jevantique™ Lo Tablet Jinteli® (branded generic for FemHRT®) Mimvey® /Lo (branded generic for Activella®) norethindrone-ethinyl estradiol (generic for FemHRT®)  Premphase® Tablet Prempro® Tablet  Preferred  Compounded 17 P hydroxyprogesterone caproate injection (generic for Makena®) single dose vial Makena® (hydroxyprogesterone caproate injection) Auto Injector  ESTROGEN AGENT  Preferred  Climara® Pro Patch CombiPatch® estradiol patch (generic for Climara®, Menostar®, Vivelle-Dot®) estradiol patch (generic for Climara®, Menostar®, Vivelle-Dot®)	Symjept Non-Preferred  Bijuva® Capsule FemHRT® Tablet Lopreeza® Tablet Prefest® Tablet  TIONAL AGENTS  Non-Preferred hydroxyprogesterone caproate injection (generic for Makena®) multi dose vial  S, ORAL / TRANSDERMAL  Non-Preferred Alora® Patch Climara® Patch Divigel® Gel Packet
Preferred  Activella® Tablet estradiofnorethindrone tablet (generic for Activella®)  Fyavolv ™ Tablet  Fyavolv ™ Tablet  Jinteli® (branded generic for FemHRT®)  Mirnvey® / Lo (branded generic for FemHRT®)  Mirnvey® / Lo (branded generic for Activella®) norethindrone-ethinyl estradiol (generic for FemHRT®)  Premphase® Tablet  Prempro® Tablet  Prempro® Tablet  Preferred  Compounded 17 P  hydroxyprogesterone caproate injection (generic for Makena®) single dose vial  Makena® (hydroxyprogesterone caproate injection) Auto Injector  ESTROGEN AGENT  Preferred  Climara® Pro Patch  CombiPatch®  estradiol patch (generic for Climara®, Menostar®, Vivelle-Dot®) estradiol patch (generic for Estrace®)  Evamist® Spray	Symjept™  ENTS, COMBINATIONS    Non-Preferred
Preferred  Activella® Tablet estradiol/norethindrone tablet (generic for Activella®)  Fyavolv™ Tablet Jevantiqu™ Lo (branded generic for FemHRT®)  Mimvey® / Lo (branded generic for Activella®) norethindrone-ethinyl estradiol (generic for FemHRT®)  Premphase® Tablet  Prempro® Tablet  Prempro® Tablet  Preferred  Compounded 17 P hydroxyprogesterone caproate injection (generic for Makena®) single dose vial  Makena® (hydroxyprogesterone caproate) Vial Makena® (hydroxyprogesterone caproate injection) Auto Injector  ESTROGEN AGENT  Preferred  Climara® Pro Patch CombiPatch® estradiol patch (generic for Climara®, Menostar®, Vivelle-Dot®) estradiol tablet (generic for Estrace®)  Evanist® Spray Meness® Tablet	Symjepi™  SINTS, COMBINATIONS  Non-Preferred  Bijuva® Capsule  FemHRT® Tablet  Loprecza® Tablet  Prefess® Tablet  TIONAL AGENTS  Non-Preferred  hydroxyprogesterone caproate injection (generic for Makena®) multi dose vial  S, ORAL / TRANSDERMAL  Non-Preferred  Alora® Patch  Climara® Patch  Divigel® Gel Packet  Dotti™ Patch  Duave® Tablet  Elestrin® Gel

North Carolina Medicaid and Health Choice Preferred Drug List (PDL)

## Effective: 06/01/2021

Trial and failure of two Preferred drugs are required unless only one Preferred option is listed or is otherwise indicated.

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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 NOT REVIEWED. Drugs requiring prior authorization, clinical criteria and prior authorization request forms can be found at: <a href="https://www.nctracks.nc.gov/content/public/providers/pharmacy.html">https://www.nctracks.nc.gov/content/public/providers/pharmacy.html</a>

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	Menostar® Patch
	Minivelle® Patch Vivelle-Dot® Patch
	VAGINAL PREPARATIONS
Preferred  Estring® Vaginal Ring	Non-Preferred  Estrace® Cream
Premarin® Vaginal Cream	estradiol vaginal cream/tablet (generic for Estrace®)
Vagifem® Vaginal Tablet	Femring® Vaginal Ring
	Imvexxy® Vaginal Inserts
	Yuvafem® Vaginal Tablet
GLUCOCORTIC	OID STEROIDS, ORAL
Preferred	Non-Preferred
budesonide EC capsule (generic for Entocort® EC)	Alkindi® Sprinkle Capsule NOT REVIEWED
dexamethasone elixir / tablet (generic for Decadron®)	Cortef® Tablet
dexamethasone solution (generic for Concedix®)	cortisone tablet (generic for Patisone®)
hydrocortisone tablet (generic for Cortef®) methylprednisolone 4mg dosepack / tablet (generic for Medrol®)	dexamethasone tablet dosepack dexamethasone Intensol® Drops
prednisolone sodium phosphate solution (generic for PediaPred®, OraPred®, Veripred®)	Emflaza® Suspension / Tablet Clinical criteria apply
prednisolone solution (generic for Prelone®, Millipred®)	Entocort® EC Capsule
prednisone dose pack (generic for Sterapred®)	Hemady <sup>™</sup> Tablet
prednisone solution / tablet (generic for Deltasone®)	Medrol® Dose Pack / Tablet
	methylprednisolone 8mg / 16mg / 32mg / tablet (generic for Medrol®)
	Millipred® Dose Pack / Tablet
	Ortikos <sup>™</sup> Capsule
	prednisolone ODT (generic for Orapred® ODT)  Prednisone Intensol® Concentrated Solution
	Prednisone Intensol* Concentrated Solution  Rayos® Tablet
	Taperdex® Tablet
	Tubetus Tubet
IMMUNOMODI	JLATORS, SYSTEMIC
Clinical criteria ap	oly to all drugs in this class
	y one Preferred drug required
Preferred	Non-Preferred
Cosentyx® Pen / Syringe	Actemra® ACTPen™ / Syringe / Vial
Enbrel® Kit / Mini Cartridge / Sureclick® Syringe / Syringe  Humira® Crohn's Starter Pack / Ped. Crohn's Starter Pack / Pen / Psoriasis Starter Pack / Syringe	Arcalyst® SQ Syringe Avsola® Injection
Humana Clombs Starter Lack / Lett. Clombs Starter Lack / Lett / Lsonasis Starter Lack / Syringe	Cimzia® Starter Kit / Syringe Kit / Vial Kit
	Enspryng M Injection
	Entyvio® Vial
	Ilaris <sup>®</sup> Injection
	Ilumya® Injection
	Inflectra <sup>™</sup> Vial
	Kevzara® Injection
	Kineret® Syringe - Exemption for diagnosis of Neonatal Onset Multi-System Inflammatory Disease Olumiant® Tablet
	Orencia® Clickjet® / Syringe / Vial
	Otezla® Starter Pack / Tablet
	Remicade® Injection
	Renflexis <sup>™</sup> Injection
	Rinvoq <sup>™</sup> ER Tablet
	Siliq® Injection
	Simponi® Aria Vial / Pen Injector / Syringe
	Skyrizi <sup>™</sup> Syringe
	Stelara® Syringe / vial  Taltz® Auto-injector / Syringe
	Tremfya® Injection
	Uplizna® Vial
	Xeljanz® Tablet / Solution / XR Tablet SOLUTION IS NOT REVIEWED
	SUPPRESSANTS
Preferred  Astagraf® XL Capsule	Non-Preferred
Astagrar XI. Capsule  Azasan® Tablet	
azathioprine tablet (generic for Imuran <sup>®</sup> )	
Cellcept® Capsule / Suspension / Tablet	
cyclosporine capsule (generic for Sandimmune®)	
cyclosporine modified capsule / solution (generic for Gengraf®, Neoral®)	
Envarsus® XR Tablet	
everolimus tablet (generic for Zortress® Tablet)	
Gengraf® Capsule / Solution	
Imuran® Tablet mycophenolate capsule / suspension / tablet (generic for Cellcept®)	
mycophenolic acid tablet (generic for Myfortic®)	
Myfortic® Tablet	

North Carolina Medicaid and Health Choice Preferred Drug List (PDL)

## Effective: 06/01/2021

Trial and failure of two Preferred drugs are required unless only one Preferred option is listed or is otherwise indicated.

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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 NOT 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

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Neoral® Capsule / Solution	
Prograf® Capsule / Granule Packet	
Rapamune® Solution / Tablet	
Sandimmune® Capsule / Solution	
sirolimus tablet / solution (generic for Rapamune® Solution / Tablet)	
tacrolimus capsule (generic for Hecoria®, Prograf®)	
Zortress <sup>®</sup> Tablet	
MOVEME	NT DISORDERS
Clinical criteria app	ly to all drugs in this class
Preferred	Non-Preferred
Austedo <sup>™</sup> Tablet	Xenazine <sup>®</sup> Tablet
Ingrezza <sup>®</sup> Capsule	
tetrabenazine tablet	
OPIOID	ANTAGONIST
Preferred	Non-Preferred
naloxone ampule / syringe / vial (generic for Narcan <sup>®</sup> )	
naltrexone (oral)	
Narcan® Nasal Spray	
Vivitrol® Injection	
OPIOID I	DEPENDENCE
Clinical criteria app	ly to all drugs in this class
Trial and failure of Suboxone <sup>®</sup> SL film r	equired for coverage of non-preferred options
	ted treatment with a transmucosal buprenorphine-containing product followed by a dose adjustment period for a
	of seven days.
Preferred	Non-Preferred
Suboxone® SL Film	Bunavail® Film
Sublocade <sup>™</sup>	buprenorphine sl tablet (generic for Subutex®)
	buprenorphine-naloxone sl tablet and film (generic for Suboxone®)
	Zubsolv® Tablet SL
	USCLE RELAXANTS
Preferred	Non-Preferred
baclofen tablet (generic for Lioresal®)	Amrix <sup>®</sup> ER Capsule
chlorzoxazone tablet (generic for Parafon Forte <sup>®</sup> )	cyclobenzaprine ER capsule (generic for Amrix <sup>®</sup> ER Capsule)
cyclobenzaprine tablet (generic for Flexeril®)	Dantrium® Capsule / Vial
methocarbamol tablet (generic for Robaxin®)	dantrolene sodium capsule (generic for Dantrium®)
tizanidine tablet (generic for Zanaflex® Tablet)	Fexmid <sup>®</sup> Tablet
,	Lorzone® Tablet
	metaxalone tablet (generic for Skelaxin®)
	Norgesic <sup>™</sup> Forte Tablet
	orphenadrine citrate ampule / tablet / vial (generic for Norflex®)
	Ozobax® Solution NOT REVIEWED
	Parafon® Forte Caplet
	Robaxin® Tablet / Vial
	Skelaxin® Tablet
	tizanidine capsules (generic for Zanaflex® Capsule)
	Zanaflex® Capsule / Tablet
DISPOSABLE INSUI	IN DELIVERY DEVICES
Preferred	Non-Preferred
Omnipod DASH®	
DIABETIC CONTINUOUS (	GLUCOSE MONITOR SUPPLIES
	ly to all items in this class
	Transmitters / Receivers / Readers
Preferred	Non-Preferred
	Freestyle Libre 14 day Reader
Dexcom G5® Transmitter / Receiver	Freestyre Libre 14 day Reader
Dexcom G6® Transmitter / Receiver	
Freestyle Libre™ 2 Reader	
Continuous Glu	cose Monitor Sensors
Preferred	
	Non-Preferred
Dexcom G4 <sup>®</sup> / G5 <sup>®</sup> Platinum Sensor 4 Pack	Non-Preferred Freestyle Libre™ 14 day Sensor
Dexcom G4® / G5® Platinum Sensor 4 Pack  Dexcom G6® Sensor 3 Pack	
Dexcom G6 <sup>®</sup> Sensor 3 Pack	

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## 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 NC Tracks call center at 1-800-688-6696. \*All blood glucose meters are billed using the NC Medicaid Free BIN Meter program. BIN 610524, PCN 1016, Group 40026479, ID 066499643.\*

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