



MARYLAND DEPARTMENT OF HEALTH
Medicaid Pharmacy Program

ADVISORY

No. 197

June 18, 2019

Maryland's Preferred Drug List – July 1, 2019

Generic vs. Brand Status on Maryland's Preferred Drug List

Maryland Medicaid's Preferred Drug List (PDL), encompassing over 1800 drugs, covers most of the generic versions of preferred multisource brand drugs without any type of prior authorization. If the prescription for a brand name drug is to be dispensed as written, the prescriber must complete and submit a Medwatch form:

(<https://mmcp.health.maryland.gov/pap/docs/Maryland%20Medwatch%20Form.pdf>). The State's clinical pharmacy team will review the Medwatch form and notify the prescriber whether the request for the brand name drug was approved or denied. The State will forward the Medwatch form to the FDA when appropriate.

The Maryland Medicaid Pharmacy Program (MMPP) wants to alert you to changes in the exceptions to this rule that are included in the attached updated Preferred Drug List. **Effective July 1, 2019, the following brand name drugs are no longer preferred over their respective generic equivalents: Advair Diskus (Inhalation), Alphagan P 0.15% (Ophthalmic), AndroGel Packets and Pump (Topical), Differin Cream (Topical), Catapres-TTS Patches (Transderm), Focalin Tablets (Oral), Gleevec Tablets (Oral)*, Methylin Solution (Oral) and Pulmicort 0.25mg/2ml and 0.5mg/2ml Respules (Inhalation).** Claims for their respective generics will be handled in the same manner as claims for other multisource medications. Claims for the brands listed above will now adjudicate only if there is a prior authorization based on an approved MDH Medwatch form (link above).

Please refer to our website for a complete list of the PDL at the following link:

<https://mmcp.health.maryland.gov/pap/pages/Preferred-Drug-List.aspx>

*Gleevec is a Non-PDL Medication

In an effort to give timely notice to the pharmacy community concerning important pharmacy topics, the Maryland Department of Health (MDH), Maryland Medicaid Pharmacy Program (MMPP) has developed the **Maryland Medicaid Pharmacy Program Advisory**.

To expedite information timely to the pharmacy and prescriber communities, an email network has been established which incorporates the email lists of the Maryland Pharmacists Association, EPIC, CARE, Long Term Care Consultants, headquarters of all chain drugstores and prescriber associations and organizations.

It is our hope that the information is disseminated to all interested parties. If you have not received this email through any of the previously noted parties or via MDH, please contact the MMPP representative at 410-767-1455.

Not All Generics are Preferred

In order for the State to enhance the benefit of the PDL, in some instances when manufacturer rebates are taken into consideration, the multisource brand name drug is Preferred over its generic equivalent because the branded drug is more cost effective to the State than its generic counterpart. When the brand name drug is Preferred, no Medwatch nor authorization is needed¹. Enter a **DAW code of 6** on the claim to have it correctly priced. If any problems are encountered during the on-line claim adjudication of Preferred Brands, contact Conduent's 24-hour Help Desk at 800-932-3918 for additional system overrides related to the use of the correct DAW code (For example, when there is other insurance). Please maintain this Advisory as a reference in addition to any updates that follow.

The Brand Preferred exceptions are as follows:

Preferred Brands

Adderall XR Capsules
Copaxone 20mg/ml (Subcutaneous)
Cellcept Oral Suspension
Focalin XR Capsules
Gabitril Tablets
Kitabis Pak
Prevacid Solutabs ODT
ProAir HFA Inhalation
Pulmicort 1mg/2ml Respules
Sabril Powder Packet²
Sabril Tablets²
Suboxone Film
Tegretol Oral Suspension

Non-Preferred Generics

amphetamine salt combo ER capsules
glatiramer acetate (Glatopa) (subcutaneous)
mycophenolate mofetil oral suspension
dexmethylphenidate XR capsules
tiagabine tablets
tobramycin pak
lansoprazole ODT
albuterol HFA inhalation
budesonide inhalation 1mg/2ml suspension
vigabatrin powder packet²
vigabatrin tablets²
buprenorphine/naloxone film
carbamazepine oral suspension

In the following instances, both the multisource brand and the generic are preferred:

Brand also Preferred (no MedWatch form required)

Transderm-Scop Transdermal Patches

Preferred generics

scopolamine transdermal patches

¹ Unless the Program has established clinical criteria for the drug. Clinical Criteria can be found by going to the below link: <https://mmcp.health.maryland.gov/pap/Pages/Clinical-Criteria.aspx>

² Is a non-preferred drug and will require a prior authorization by the prescriber

*Generic vs. Brand Status of Non-PDL Medication

Preferred Brand

Norvir Tablets

Non-Preferred Generic

ritonavir tablets



MARYLAND DEPARTMENT OF HEALTH
Medicaid Pharmacy Program

Preferred Drug List

Effective Date: 7/1/2019

Only drugs that are part of the listed therapeutic categories are affected by the Medicaid Preferred Drug List (PDL). Therapeutic categories not listed here are not part of the PDL and will continue to be covered as they always have for Maryland Medicaid participants.

Note: Brand names listed in parentheses are only listed as a reference. For most multi-source products, the generic products are usually preferred and the branded innovator product is non-preferred. If a generic product is non-preferred, the corresponding brand product is also non-preferred except where specifically noted as “*(generic only)*”. PDL products that are new to market require prior authorization until they are reviewed. Changes in the Preferred Drug List are highlighted in **yellow**.

ANALGESICS

Drug Class	Preferred	Requires Prior Authorization
Analgesics, Narcotics (Long Acting) All drugs in this class are subject to review through the Opioid Drug Utilization Review Program .	fentanyl patches (All strengths except 37.5mcg, 62.5 mcg, 87.5 mcg) ^{cc,ql} morphine sulfate SR (MS Contin) ^{ql} Embeda	<i>buprenorphine patch (Butrans)^{ql}</i> <i>fentanyl 37.5 mcg, 62.5 mcg, 87.5 mcg patches^{cc,ql}</i> <i>hydromorphone ER (Exalgo)^{ql}</i> <i>methadone (Dolophine)^{ql}</i> <i>morphine sulfate ER (Avinza)^{ql}</i> <i>morphine sulfate ER (Kadian)^{ql}</i> <i>oxycodone ER (Oxycontin)^{ql}</i> <i>oxymorphone ER (Opana ER)^{ql}</i> <i>tramadol ER (Conzip, Ryzolt, Ultram ER)^{ql}</i> <i>Arymo ER</i> <i>Belbuca^{ql}</i> <i>Hysingla ER^{cc,ql}</i> <i>Morphabond ER</i> <i>Nucynta ER^{ql}</i> <i>Xtampza ER</i> <i>Zohydro ER^{cc,ql}</i>

cc-Clinical criteria can be found at the link [here](#)
 ql- Quantity limits can be found at the link [here](#)
 All lowercase letters = generic product.
 Leading capital letter = brand name product.

ANALGESICS

Drug Class	Preferred	Requires Prior Authorization
<p>Analgesics, Narcotics (Short Acting)</p> <p>All drugs in this class are subject to review through the Opioid Drug Utilization Review Program.</p>	<p>acetaminophen/codeine (Tylenol w/ codeine)^{ql}</p> <p>butalbital/acetaminophen/codeine/caffeine^{ql}</p> <p>codeine tablets</p> <p>hydrocodone/acetaminophen tablets (Lorcet, Norco, Vicodin)^{ql}</p> <p>hydromorphone tablets (Dilaudid)</p> <p>morphine sulfate tablets, solution</p> <p>oxycodone capsules, tablets, solution</p> <p>oxycodone/acetaminophen (Percocet)^{ql}</p> <p>tramadol (Ultram)^{ql}</p> <p>tramadol/acetaminophen (Ultracet)^{ql}</p>	<p>benzhydrocone/acetaminophen (Apadaz)</p> <p>butalbital/aspirin/codeine/caffeine^{ql}</p> <p>butorphanol nasal spray</p> <p>carisoprodol/codeine/aspirin</p> <p>dihydrocodeine/acetaminophen/caffeine</p> <p>fentanyl buccal (Actiq)^{cc,ql}</p> <p>hydrocodone/acetaminophen solution (Lortab)^{ql}</p> <p>hydrocodone/ibuprofen (Vicoprofen)</p> <p>hydromorphone solution, suppositories</p> <p>levorphanol</p> <p>meperidine (Demerol)</p> <p>morphine suppositories</p> <p>oxycodone syringe</p> <p>oxycodone/acetaminophen (Primlev)^{ql}</p> <p>oxycodone concentrated solution</p> <p>oxycodone/aspirin (Percodan)</p> <p>oxycodone/ibuprofen (Combunox)</p> <p>oxymorphone (Opana)</p> <p>pentazocine/naloxone (Talwin NX)</p> <p>Abstral^{cc,ql}</p> <p>Fentora^{cc,ql}</p> <p>Lazanda^{cc,ql}</p> <p>Nucynta</p> <p>Oxaydo</p> <p>Roxybond</p> <p>Subsys^{cc,ql}</p>
<p>Anti-Migraine Agents, Other</p> <p>*Appears in 2 places within PDL document.</p>	<p>Emgality (Step Therapy)^{cc,ql}</p>	<p>Aimovig (Step Therapy)^{cc,ql}</p> <p>Ajovy (Step Therapy)^{cc,ql}</p>

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ANALGESICS

Drug Class	Preferred	Requires Prior Authorization
Anti-Migraine Agents, Triptans	rizatriptan, rizatriptan ODT (Maxalt, Maxalt MLT) ^{ql} sumatriptan nasal, tablets, vial (Imitrex) ^{ql}	<i>almotriptan (Axert)^{ql}</i> <i>eletriptan (Relpax)^{ql}</i> <i>frovatriptan (Frova)^{ql}</i> <i>naratriptan (Amerge)^{ql}</i> <i>sumatriptan kit (Imitrex)^{ql}</i> <i>sumatriptan/naproxen 85/500 (Treximet)^{ql}</i> <i>zolmitriptan, zolmitriptan ODT (Zomig, Zomig ZMT)^{ql}</i> <i>Migranow Kit</i> <i>Onzetra Xsail</i> <i>Sumavel Dosepro</i> <i>Treximet 10/60^{ql}</i> <i>Zembrace Symtouch</i> <i>Zomig nasal^{ql}</i>
Neuropathic Pain	capsaicin OTC duloxetine (Cymbalta) ^{cc,ql} gabapentin capsules, tablets (Neurontin) lidocaine patch (Lidoderm) ^{ql} Lyrica capsules ^{ql}	<i>duloxetine 40mg (Irenka)^{ql}</i> <i>gabapentin solution (Neurontin)</i> <i>DermacinRx PHN Pak</i> <i>Gralise</i> <i>Horizant</i> <i>Lyrica CR</i> <i>Lyrica solution</i> <i>Qutenza Kit</i> <i>Savella</i> ZTlido

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ANALGESICS

Drug Class	Preferred	Requires Prior Authorization
Nonsteroidal Anti-Inflammatories (NSAIDS)	diclofenac, diclofenac XL (Cataflam, Voltaren XR) diclofenac gel (Voltaren Gel) flurbiprofen (Ansaid) ibuprofen Rx, OTC (Motrin) indomethacin (Indocin) ketorolac (Toradol) meloxicam tablets (Mobic) nabumetone (Relafen) naproxen Rx, OTC (Aleve, Naprosyn) sulindac (Clinoril)	celecoxib (Celebrex) diclofenac epolamine patch (Flector) ^{cc,ql} diclofenac potassium (Zipsor) diclofenac topical solution (Pennsaid) diclofenac/capsicum oleoresin kit diclofenac/misoprostol (Arthrotec) diflunisal (Dolobid) etodolac, etodolac XL (Lodine, Lodine XL) fenoprofen ibuprofen chewable tabs OTC indomethacin ER (Indocin SR) ketoprofen, ketoprofen ER (Orudis, Oruvail) meclufenamate (Meclomen) mefenamic acid (Ponstel) meloxicam suspension naproxen sodium RX naproxen CR, Suspension oxaprozin (Daypro) piroxicam (Feldene) tolmetin, tolmetin DS (Tolectin, Tolectin DS) Dermacinrx Lexitral Duexis Indocin suppositories, suspension Pennsaid Pump Sprix Tivorbex Vimovo Vivlodex Vopac MDS Xrylix Kit Zorvolex
Opioid Use Disorder Treatments	buprenorphine (Subutex) ^{cc,ql} naloxone (Narcan) naltrexone (Revia) ^{cc} Bunavai ^{ql} Narcan nasal spray Sublocade ^{cc,ql} Suboxone film (Brand only) ^{ql} Vivitrol ^{cc,ql} Zubsolv ^{ql}	buprenorphine/naloxone film (Suboxone) (generic only) ^{ql} buprenorphine/naloxone tablets (Suboxone) ^{ql} Lucemyra ^{ql}

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ANALGESICS

Drug Class	Preferred	Requires Prior Authorization
Skeletal Muscle Relaxants	baclofen (Lioresal) chlorzoxazone (Parafon) cyclobenzaprine (Flexeril) ^{ql} methocarbamol (Robaxin) orphenadrine ER (Norflex) tizanidine tablets (Zanaflex)	carisoprodol (Soma) carisoprodol compound (Soma Compound) cyclobenzaprine ER (Amrix) ^{ql} dantrolene (Dantrium) metaxalone (Skelaxin) tizanidine capsules (Zanaflex) Lorzone

ANTI-INFECTIVES

Drug Class	Preferred	Requires Prior Authorization
Antibiotics, GI	metronidazole tablets (Flagyl) neomycin vancomycin capsules (Vancocin) Alinia suspension Firvanq	metronidazole capsules (Flagyl capsules) paromomycin tinidazole (Tindamax) Difucid ^{cc,ql} Solosec Xifaxan ^{cc,ql}
Antibiotics, Inhaled	Bethkis ^{cc,ql} Kitabis Pak (Brand only) ^{cc,ql} Tobi Podhaler (Step therapy) ^{cc,ql}	tobramycin inhalation solution (Tobi) ^{cc,ql} tobramycin pak (Kitabis) (generic only) ^{cc,ql} Arikayce Cayston ^{cc,ql}
Antibiotics, Topical	bacitracin OTC bacitracin/polymyxin OTC gentamicin mupirocin ointment (Bactroban Ointment) neomycin/polymyxin/pramoxine OTC triple antibiotic OTC	mupirocin cream (Bactroban Cream) Centany
Antibiotics, Vaginal	clindamycin (Cleocin) metronidazole vaginal (Metrogel) Cleocin ovules Clindesse Nuvessa	Vandazole
Antifungals, Oral	clotrimazole troches (Mycelex) fluconazole (Diflucan) griseofulvin suspension (GriFulvin V) ketoconazole (Nizoral) nystatin suspension, tablets terbinafine (Lamisil)	flucytosine (Ancobon) griseofulvin tablets (Gris Peg, GriFulvin V) itraconazole (Sporanox) voriconazole (Vfend) Cresemba Lamisil granules Noxafil Onmel Oravig Tolsura

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ANTI-INFECTIVES

Drug Class	Preferred	Requires Prior Authorization
Antifungals, Topical	clotrimazole Rx, OTC clotrimazole/betamethasone cream (Lotrisone) ketoconazole cream, shampoo (Nizoral) miconazole cream OTC nystatin nystatin/triamcinolone (Mycolog) terbinafine OTC tolnaftate OTC	<i>ciclopirox (Loprox, Loprox Kit, Loprox Shampoo, Penlac)</i> <i>clotrimazole/betamethasone lotion (Lotrisone)</i> <i>econazole (Spectazole)</i> <i>ketoconazole foam (Ketodan)</i> <i>luliconazole (Luzu)^{cc,ql}</i> <i>miconazole ointment, powder, spray OTC</i> <i>miconazole nitrate/zinc oxide/petrolatum (Vusion)</i> <i>naftifine (Naftin)</i> <i>oxiconazole cream (Oxistat)</i> <i>Alevazol OTC</i> <i>Bensal HP</i> <i>DermacinRx Therazole Pak</i> <i>Desenex spray powder</i> <i>Ertaczo</i> <i>Exelderm</i> <i>Fungoid OTC</i> <i>Jublia</i> <i>Kerydin</i> <i>Lamisil OTC</i> <i>Lotrimin AF, Ultra OTC</i> <i>Mentax</i> <i>Oxistat lotion</i>
Antiparasitics, Topical	permethrin Rx, OTC (Elimite, Acticin) piperonyl/pyrethrins OTC	<i>lindane shampoo^{cc}</i> <i>malathion (Ovide)^{cc,ql}</i> <i>spinosad (Natroba)^{cc,ql}</i> <i>Eurax</i> <i>Sklice^{cc,ql}</i>
Antivirals, Oral	acyclovir (Zovirax) oseltamivir (Tamiflu) ^{ql} valacyclovir (Valtrex)	<i>famciclovir (Famvir)</i> <i>rimantadine (Flumadine)</i> <i>Relenza</i> <i>Sitavig</i> <i>Xofluza</i>
Antivirals, Topical	acyclovir cream (Zovirax) docosanol 10% cream (Abreva OTC)	<i>acyclovir ointment (Zovirax ointment)</i> <i>Denavir</i> <i>Xerese</i>

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ANTI-INFECTIVES

Drug Class	Preferred	Requires Prior Authorization
Cephalosporins and Related Antibiotics	amoxicillin/clavulanate tablets, suspension (Augmentin, Augmentin ES) cefaclor capsules (Ceclor) cefadroxil capsules (Duricef) cefdinir (Omnicef) cefprozil (Cefzil) cefuroxime tablets (Ceftin) cephalexin capsules, suspension (Keflex)	<i>amoxicillin/clavulanate chewable tablets (Augmentin)</i> <i>amoxicillin/clavulanate ER (Augmentin XR)</i> <i>cefaclor suspension, ER tablets (Ceclor, Ceclor CD)</i> <i>cefadroxil suspension, tablets (Duricef)</i> <i>cefixime capsules, suspension (Suprax)</i> <i>cefprozil (Vantin)</i> <i>ceftibuten (Cedax)</i> <i>cephalexin tablets (Keflex)</i> <i>Augmentin 125 suspension</i> <i>Daxbia</i> <i>Suprax chewable</i>
Fluoroquinolones, Oral	ciprofloxacin tablets (Cipro) levofloxacin tablets (Levaquin)	<i>ciprofloxacin ER (Cipro XR)</i> <i>ciprofloxacin suspension (Cipro)</i> <i>levofloxacin solution (Levaquin)</i> <i>moxifloxacin (Avelox)</i> <i>ofloxacin (Floxin)</i> <i>Baxdela</i>
Hepatitis B Agents	entecavir (Baraclude) lamivudine HBV (Epivir HBV)	<i>adefovir dipivoxil (Hepsera)</i> <i>Baraclude solution</i> <i>Vemlidy</i>
Hepatitis C Agents	ribavirin (Copegus, Rebetol) ledipasvir/sofosbuvir (Harvoni) ^{cc} sofosbuvir/velpatasvir (Epclusa) ^{cc} Mavyret ^{cc} Pegasys PegIntron Vosevi ^{cc} Zepatier ^{cc}	<i>ribavirin dose pack</i> <i>Daklinza^{cc}</i> <i>Rebetol solution</i> <i>Ribapak</i> <i>Ribasphere</i> <i>Sovaldi^{cc}</i> <i>Viekira Pak^{cc}</i>
Macrolides/Ketolides	azithromycin (Zithromax) clarithromycin tablets (Biaxin) erythromycin base capsule DR erythromycin ethyl succinate oral suspension (EryPed, E.E.S) Ery-Tab	<i>clarithromycin suspension (Biaxin)</i> <i>clarithromycin ER (Biaxin XL)</i> <i>erythromycin base tablet</i> <i>E.E.S. 400 tablet</i> <i>Erythrocin</i>

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ANTI-INFECTIVES

Drug Class	Preferred	Requires Prior Authorization
Tetracyclines	doxycycline hyclate (Vibramycin) doxycycline monohydrate 50mg, 100mg (Monodox) minocycline capsules (Minocin) tetracycline (Sumycin)	<i>demeclocycline (Declomycin)</i> <i>doxycycline hyclate DR (Doryx, Doryx MPC)</i> <i>doxycycline monohydrate 40mg, 75mg, 150mg (Oracea, Monodox, Adoxa)</i> <i>doxycycline monohydrate suspension (Vibramycin)</i> <i>minocycline tablets</i> <i>minocycline ER (Solodyn)</i> <i>Doryx MPC</i> <i>Morgidox Kit</i> Nuzyra <i>Vibramycin syrup</i> <i>Ximino</i>

BLOOD MODIFIERS

Drug Class	Preferred	Requires Prior Authorization
Antihyperuricemics	allopurinol (Zyloprim) probenecid probenecid/colchicine	<i>colchicine capsules (Mitigare)^{ql}</i> <i>colchicine tablets (Colcrys)^{ql}</i> <i>Uloric</i>
Colony Stimulating Factors	Granix Neupogen	<i>Fulphila</i> <i>Leukine</i> <i>Neulasta</i> <i>Nivestym</i> Udenyca <i>Zarxio</i>
Erythropoiesis Stimulating Proteins	Aranesp Procrit	<i>Epogen</i> <i>Mircera</i> <i>Retacrit</i>
Phosphate Binders	calcium acetate (PhosLo) sevelamer carbonate (Renvela) Calphron OTC	<i>lanthanum carbonate (Fosrenol)</i> sevelamer HCl (Renagel) <i>Auryxia</i> <i>Fosrenol powder pack</i> <i>Magnebind 400 Rx</i> <i>Phoslyra</i> <i>Velphoro</i>

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CARDIOVASCULAR

Drug Class	Preferred	Requires Prior Authorization
Angiotensin Modulator Combinations	amlodipine/benazepril (Lotrel) amlodipine/valsartan (Exforge) amlodipine/valsartan/HCTZ (Exforge HCT)	amlodipine/olmesartan (Azor) amlodipine/olmesartan/HCTZ (Tribenzor) amlodipine/telmisartan (Twynsta) trandolapril/verapamil (Tarka) Byvalson Prestalia
Angiotensin Modulators	benazepril, benazepril/HCTZ (Lotensin, Lotensin HCT) enalapril, enalapril/HCTZ (Vasotec, Vaseretic) irbesartan, irbesartan/HCTZ (Avapro, Avalide) lisinopril, lisinopril/HCTZ (Prinivil, Zestril, Prinzide, Zestoretic) losartan, losartan/HCTZ (Cozaar, Hyzaar) quinapril, quinapril/HCTZ (Accupril, Accuretic) ramipril (Altace) valsartan, valsartan/HCTZ (Diovan, Diovan HCT) Entresto ^{cc,ql}	aliskiren (Tekturna) candesartan, candesartan/HCTZ (Atacand, Atacand HCT) captopril, captopril/HCTZ (Capozide) eprosartan (Teveten) fosinopril, fosinopril/HCTZ (Monopril, Monopril HCT) moexipril, moexipril/HCTZ (Univasc, Uniretic) olmesartan, olmesartan/HCTZ (Benicar, Benicar HCT) perindopril (Aceon) telmisartan, telmisartan/HCTZ (Micardis, Micardis HCT) trandolapril (Mavik) Edarbi, Edarbyclor Epaned solution Qbrelis Tekturna HCT
Anticoagulants	enoxaparin (Lovenox) ^{ql} warfarin (Coumadin) Eliquis tablets Xarelto Dose Pack Xarelto tablets (except 2.5 mg)	fondaparinux (Arixtra) ^{ql} Eliquis Dose Pack Fragmin ^{ql} Pradaxa ^{ql} Savaysa Xarelto 2.5 mg tablets ^{ql}
Antihypertensives, Sympatholytics	clonidine patch (Catapres TTS) ^{ql} clonidine tablet (Catapres) guanfacine (Tenex) methyldopa (Aldomet) methyldopa/HCTZ (Aldoril)	

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CARDIOVASCULAR

Drug Class	Preferred	Requires Prior Authorization
Beta Blockers	atenolol, atenolol/chlorthalidone (Tenormin, Tenoretic) bisoprolol/HCTZ (Ziac) carvedilol (Coreg) labetalol (Normodyne, Trandate) metoprolol succinate XL (Toprol XL) metoprolol tartrate (Lopressor) propranolol (Inderal) propranolol LA (Inderal LA) sotalol, sotalol AF (Betapace, Betapace AF)	<i>acebutolol (Sectral)</i> <i>betaxolol (Kerlone)</i> <i>bisoprolol (Zebeta)</i> <i>carvedilol ER (Coreg CR)</i> <i>metoprolol/HCTZ (Lopressor HCT)</i> <i>nadolol (Corgard)</i> <i>nadolol/bendroflumethiazide (Corzide)</i> <i>pindolol (Visken)</i> <i>propranolol/HCTZ (Inderide)</i> <i>timolol (Blocadren)</i> <i>Bystolic</i> <i>Hemangeol</i> <i>Kapspargo</i> <i>Sotylize</i>
Calcium Channel Blockers	amlodipine (Norvasc) diltiazem (Cardizem) diltiazem ER capsules (Cardizem CD, Tiazac) nifedipine ER (Adalat CC, Procardia XL) verapamil (Calan) verapamil ER tablets (Calan SR)	<i>diltiazem ER tablets (Cardizem LA)</i> <i>felodipine (Plendil)</i> <i>isradipine (Dynacirc)</i> <i>nicardipine (Cardene)</i> <i>nifedipine (Adalat, Procardia)</i> <i>nimodipine (Nimotop)</i> <i>nisoldipine (Sular)</i> <i>verapamil ER capsules (Verelan, Verelan PM)</i> <i>Nymalize</i>
Lipotropics, Other	cholestyramine (Questran) colestipol tablet (Colestid) ezetimibe (Zetia) fenofibrate nanocrystals (Tricor) gemfibrozil (Lopid) niacin ER (Niaspan) Niacor	<i>colesevelam (Welchol)</i> <i>colestipol granules (Colestid)</i> <i>fenofibrate (Antara, Fenoglide, Lipofen, Lofibra, Triglide)</i> <i>fenofibric acid (Fibricor, Trilipix)</i> <i>omega-3 ethyl esters (Lovaza)</i> <i>Juxtapid</i> <i>Praluent^{cc}</i> <i>Repatha^{cc}</i> <i>Vascepa</i>
Lipotropics, Statins	atorvastatin (Lipitor) lovastatin (Mevacor) pravastatin (Pravachol) rosuvastatin (Crestor) simvastatin (Zocor)	<i>amlodipine/atorvastatin (Caduet)</i> <i>ezetimibe/simvastatin (Vytorin)</i> <i>fluvastatin, fluvastatin ER (Lescol, Lescol XL)</i> <i>Altoprev</i> <i>Livalo</i> <i>Zypitamag</i>

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CARDIOVASCULAR

Drug Class	Preferred	Requires Prior Authorization
Platelet Aggregation Inhibitors	clopidogrel (Plavix) ^{ql} dipyridamole (Persantine) ^{ql} prasugrel (Effient) ^{ql} Brilinta ^{ql}	aspirin/dipyridamole (Aggrenox) ^{ql} aspirin/omeprazole (Yosprala) Zontivity
PAH Agents, Oral and Inhaled	ambrisentan (Letairis) bosentan tablets (Tracleer) sildenafil tablets (Revatio) ^{cc,ql}	sildenafil suspension (Revatio) ^{cc,ql} tadalafil (Adcirca) ^{cc,ql} Adempas Opsumit ^{cc,ql} Orenitram ER ^{cc,ql} Tracleer suspension Tyvaso ^{cc} Uptravi ^{cc,ql} Ventavis

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CENTRAL NERVOUS SYSTEM

THE MENTAL HEALTH FORMULARY CAN BE FOUND AT THE LINK [HERE](#)

Drug Class	Preferred	Requires Prior Authorization
Anticonvulsants	carbamazepine (Tegretol) carbamazepine ER (Carbatrol ER) clonazepam (Klonopin) diazepam rectal (Diastat, Diastat, Acudial) divalproex, divalproex ER (Depakote, Depakote ER) divalproex sprinkles (Depakote sprinkles) lamotrigine (Lamictal) levetiracetam tablets, solution (Keppra) oxcarbazepine tablets, suspension (Trileptal) phenobarbital phenytoin, phenytoin ER (Dilantin, Dilantin Infatabs, Phenytek) primidone (Mysoline) topiramate (Topamax) topiramate sprinkles (Topamax Sprinkles) valproic acid (Depakene) zonisamide (Zonegran) Gabitril (Brand only) Tegretol suspension (Brand only) Vimpat ^{ql}	carbamazepine suspension (Tegretol) (generic only) carbamazepine XR (Tegretol XR) clobazam (Onfi) ^{cc,ql} clonazepam ODT (Klonopin ODT) ethosuximide (Zarontin) felbamate (Felbatol) lamotrigine dose pack lamotrigine XR (Lamictal XR) lamotrigine ODT (Lamictal ODT) levetiracetam ER (Keppra XR) tiagabine (Gabitril) (generic only) topiramate ER (Qudexy XR) ^{cc,ql} Aptiom ^{cc} Banzel ^{cc,ql} Briviact Celontin Epidiolex ^{cc} Equetro Fycompa ^{cc} Lamictal XR dose pack Oxtellar XR Peganone Sabril powder pack, tablets (Brand only) Spritam Sympazan Trokendi XR
Antidepressants, Other	bupropion, bupropion SR, bupropion XL (Wellbutrin, Wellbutrin SR, Wellbutrin XL) mirtazapine, mirtazapine ODT (Remeron, Remeron ODT) phenelzine (Nardil) tranylcypromine (Parnate) trazodone (Desyrel) venlafaxine (Effexor) venlafaxine ER capsules (Effexor XR)	bupropion XL (Forfivo XL) desvenlafaxine ER (Khedezla, Pristiq) desvenlafaxine fumarate ER nefazodone (Serzone) venlafaxine ER tablets Aplenzin Emsam Fetzima Marplan Trintellix Viibryd

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CENTRAL NERVOUS SYSTEM

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Drug Class	Preferred	<i>Requires Prior Authorization</i>
Antidepressants, Selective Serotonin Reuptake Inhibitors (SSRIs)	citalopram tablets, solution (Celexa) ^{ql} escitalopram tablets (Lexapro) fluoxetine capsules, solution (all strengths except 60mg) (Prozac) fluvoxamine (Luvox) paroxetine (Paxil) sertraline tablets, concentrated solution (Zoloft)	<i>escitalopram solution (Lexapro)</i> <i>fluoxetine capsules 60mg</i> <i>fluoxetine tablets (Sarafem)</i> <i>fluoxetine weekly (Prozac weekly)</i> <i>fluvoxamine ER (Luvox CR)</i> <i>paroxetine CR (Paxil CR)</i> <i>paroxetine 7.5mg capsules (Brisdelle)^{cc,ql}</i> <i>Paxil suspension</i> <i>Pexeva</i>
Anti-Migraine Agents, Other *Excluded from the Mental Health Formulary.	Emgality (Step Therapy)^{cc,ql}	Aimovig (Step Therapy)^{cc,ql} Ajovy (Step Therapy)^{cc,ql}

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CENTRAL NERVOUS SYSTEM

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Drug Class	Preferred	Requires Prior Authorization
<p>Antipsychotics Antipsychotic Review Programs</p>	<p>1st Tier aripiprazole (Abilify)^{ql} aripiprazole ODT(Abilify Discmelt)^{ql} chlorpromazine (Thorazine) clozapine (Clozaril) fluphenazine (Prolixin) fluphenazine decanoate inj (Prolixin Inj.)^{ql} haloperidol (Haldol) haloperidol decanoate inj (Haldol IM)^{ql} loxapine capsules (Loxitane) olanzapine IM (Zyprexa IM)^{ql} olanzapine ODT (Zyprexa Zydis)^{ql} olanzapine tablets (Zyprexa)^{ql} perphenazine (Trilafon) perphenazine/amitriptyline (Triavil) pimozide (Orap) quetiapine (Seroquel)^{ql} quetiapine ER (Seroquel XR)^{ql} risperidone, risperidone ODT (Risperdal)^{ql} thioridazine (Mellaril) thiothixene (Navane) trifluoperazine (Stelazine) ziprasidone (Geodon)^{ql} Abilify Maintena^{ql} Aristada^{ql} Aristada Initio^{ql} Geodon IM Invega Sustenna^{ql} Invega Trinza^{cc,ql} Risperdal Consta^{ql} 2nd Tier Latuda^{cc,ql}</p>	<p><i>clozapine ODT (Fazacllo)^{cc}</i> <i>olanzapine/fluoxetine (Symbyx)^{cc,ql}</i> <i>paliperidone (Invega)^{cc,ql}</i> Abilify MyCite^{cc} Adasuve^{cc} Nuplazid^{cc,ql} Perseris^{cc,ql} Rexulti^{cc,ql} Saphris^{cc,ql} Versacloz^{cc} Vraylar^{cc,ql} Zyprexa Relprevv^{cc,ql}</p>
<p>Sedative Hypnotics</p>	<p>flurazepam (Dalmane)^{ql} temazepam 15mg, 30mg (Restoril)^{ql} triazolam (Halcion)^{ql} zaleplon (Sonata)^{ql} zolpidem (Ambien)^{ql}</p>	<p><i>estazolam (ProSom)^{ql}</i> <i>eszopiclone (Lunesta)^{cc,ql}</i> <i>temazepam 7.5mg, 22.5mg^{ql}</i> <i>zolpidem SL (Intermezzo)^{ql}</i> <i>zolpidem ER (Ambien CR)</i> Belsomra^{cc,ql} Edluar^{ql} Hetlioz^{cc,ql} Rozerem^{ql} Silenor</p>

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CENTRAL NERVOUS SYSTEM

THE MENTAL HEALTH FORMULARY CAN BE FOUND AT THE LINK [HERE](#)

Drug Class	Preferred	Requires Prior Authorization
Stimulants and Related Agents	1st Tier amphetamine salt combo (Adderall) clonidine ER tablets (Kapvay) ^{cc,ql} dextroamphetamine capsules (Dexedrine ER) dextroamphetamine tablets dexmethylphenidate tablets (Focalin) guanfacine ER (Intuniv) ^{cc,ql} methylphenidate CD capsules (Metadate CD) methylphenidate CR tablets (All strengths except 72mg) (Concerta) methylphenidate ER capsules (Ritalin LA) methylphenidate ER tablets (Ritalin SR) methylphenidate oral solution (Methylin) methylphenidate tablets (Ritalin) Adderall XR (Brand only) Daytrana Focalin XR (Brand only) Quillichew ER Quillivant XR Vyvanse Vyvanse chewable tablets ^{cc}	<i>amphetamine salt combo ER (Adderall XR) (generic only)</i> <i>amphetamine sulfate (Evekeo)</i> <i>armodafinil (Nuvigil)^{cc,ql}</i> <i>dexmethylphenidate (Focalin) (generic only)</i> <i>dexmethylphenidate XR (Focalin XR) (generic only)</i> <i>dextroamphetamine solution (Procentra)</i> <i>methamphetamine (Desoxyn)</i> <i>methylphenidate chewable (Methylin chewable)</i> <i>methylphenidate CR tablets 72mg</i> <i>methylphenidate oral solution (Methylin) (generic only)</i> <i>modafinil (Provigil)^{cc,ql}</i> <i>Adzenys ER suspension</i> <i>Adzenys XR ODT^{cc}</i> <i>Aptensio XR</i> <i>Cotempla XR ODT</i> <i>Dyanavel XR</i> <i>Mydayis ER</i> <i>Zenzedi</i>
	2nd Tier atomoxetine (Strattera) ^{cc}	

ENDOCRINE

Drug Class	Preferred	Requires Prior Authorization
Androgenic Agents	testosterone gel packet, pump (Androgel) Androderm ^{cc,ql}	<i>testosterone gel (Testim)</i> <i>testosterone gel (Vogelxo)</i> <i>testosterone gel pump (Axiron)</i> <i>testosterone gel pump (Fortesta)</i>
Bone Resorption Suppression and Related Agents	alendronate tablets (Fosamax) ^{ql} calcitonin salmon nasal (Miacalcin) ^{ql}	<i>alendronate solution (Fosamax Solution)^{ql}</i> <i>etidronate (Didronel)^{ql}</i> <i>ibandronate (Boniva)^{ql}</i> <i>raloxifene (Evista)^{ql}</i> <i>risedronate (Actonel, Atelvia)^{ql}</i> <i>Binosto^{ql}</i> <i>Forteo^{cc,ql}</i> <i>Fosamax Plus D^{ql}</i> <i>Prolia^{cc,ql}</i> <i>Tymlos^{cc,ql}</i>

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ENDOCRINE

Drug Class	Preferred	Requires Prior Authorization
Growth Hormone	Genotropin ^{cc} Norditropin ^{cc} Nutropin AQ ^{cc}	<i>Humatrope^{cc}</i> <i>Omnitrope^{cc}</i> <i>Saizen^{cc}</i> <i>Serostim^{cc}</i> <i>Zomacton^{cc}</i> <i>Zorbtive^{cc}</i>
Hypoglycemics, Incretin Mimetics and Enhancers	Bydureon Byetta Glyxambi ^{cc,ql} Janumet, Janumet XR Januvia Jentadueto Symlin Tradjenta Victoza ^{ql}	<i>alogliptin (Nesina)</i> <i>alogliptin/metformin (Kazano)</i> <i>alogliptin/pioglitazone (Oseni)</i> <i>Adlyxin</i> <i>Bydureon BCise</i> <i>Jentadueto XR</i> <i>Kombiglyze XR</i> <i>Onglyza</i> <i>Ozempic</i> <i>Qtern^{cc,ql}</i> <i>Soliqua</i> <i>Steglujan^{cc,ql}</i> <i>Tanzeum</i> <i>Trulicity</i> <i>Xultophy</i>
Hypoglycemics, Insulins	insulin lispro vial (Humalog) Humalog Mix vial Humulin vial Humulin 70/30 vial Humulin 500 unit/mL vial Lantus Levemir NovoLog NovoLog Mix	<i>insulin lispro pen (Humalog)</i> <i>Admelog</i> <i>Afrezza</i> <i>Apidra</i> <i>Basaglar</i> <i>Fiasp</i> <i>Humalog cartridge</i> <i>Humalog Junior Kwikpen</i> <i>Humalog Mix pen</i> <i>Humulin pen</i> <i>Humulin 70/30 pen</i> <i>Humulin 500 unit/mL pen</i> <i>Novolin vial</i> <i>Novolin 70/30 vial</i> <i>Toujeo SoloStar, Toujeo Max Solostar</i> <i>Tresiba</i>
Hypoglycemics, Meglitinides	nateglinide (Starlix) repaglinide (Prandin)	<i>repaglinide/metformin (Prandimet)</i>

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ENDOCRINE

Drug Class	Preferred	Requires Prior Authorization
Hypoglycemics, Metformins	glipizide/metformin (Metaglip) glyburide/metformin (Glucovance) metformin (Glucophage) metformin ER (Glucophage XR)	metformin ER (Fortamet) ^{cc,ql} metformin ER (Glumetza) ^{cc,ql} Riomet
Hypoglycemics, SGLT2 Inhibitors	Farxiga (Step Therapy) ^{cc,ql} Invokana (Step Therapy) ^{cc,ql} Jardiance (Step Therapy) ^{cc,ql}	Invokamet (Step Therapy) ^{cc,ql} Invokamet XR (Step Therapy) ^{cc,ql} Segluromet (Step Therapy) ^{cc,ql} Steglatro (Step Therapy) ^{cc,ql} Synjardy (Step Therapy) ^{cc,ql} Synjardy XR (Step Therapy) ^{cc,ql} Xigduo XR (Step Therapy) ^{cc,ql}
Hypoglycemics, TZDs	pioglitazone (Actos) pioglitazone/metformin (ActoPlusMet)	pioglitazone/glimepiride (Duetact) ActoPlusMet XR Avandia

GASTROINTESTINAL

Drug Class	Preferred	Requires Prior Authorization
Antiemetic/Antivertigo Agents	dimenhydrinate OTC meclizine Rx, OTC (Bonine, Antivert) metoclopramide (Reglan) ondansetron, ondansetron ODT (Zofran) ^{ql} prochlorperazine tablets (Compazine) promethazine injectable, solution, tablets (Phenergan) promethazine suppositories (except 50mg) scopolamine patches (TransDerm Scop) (Brand and generic)	aprepitant capsules, tripack (Emend) ^{ql} dimenhydrinate Rx dronabinol (Marinol) ^{cc,ql} granisetron (Kytril) ^{ql} metoclopramide ODT (Metozolv ODT) palonosetron (Aloxi) prochlorperazine injectable, suppositories (Compro) promethazine 50mg suppositories trimethobenzamide (Tigan) Akynteo capsules ^{cc} Akynteo IV Anzemet ^{ql} Bonjesta Cesamet ^{ql} Cinvanti Diclegis ^{cc,ql} Emend IV Emend powder packets ^{ql} Sancuso ^{ql} Sustol Syndros Varubi Zuplenz

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GASTROINTESTINAL

Drug Class	Preferred	Requires Prior Authorization
Bile Salts	ursodiol capsules (Actigall) ursodiol tablets (URSO, URSO Forte)	<i>Chenodal</i> <i>Cholbam</i> <i>Ocaliva</i>
GI Motility, Chronic	Amitiza cc,ql Linzess cc,ql Movantik cc,ql	<i>alosetron (Lotronex)</i> Motegrity cc,ql <i>Relistor</i> cc,ql <i>Symproic</i> cc,ql <i>Trulance</i> cc,ql <i>Viberzi</i>
Pancreatic Enzymes	Creon ql Zenpep ql	<i>Pancreaze</i> ql <i>Pertzye</i> ql <i>Viokace</i> ql
Proton Pump Inhibitors	lansoprazole capsules (Prevacid) omeprazole capsules (Prilosec) pantoprazole (Protonix) Nexium packet for suspension Prevacid Solutab (Brand only) Protonix suspension	<i>esomeprazole magnesium (Nexium)</i> <i>esomeprazole OTC</i> <i>lansoprazole OTC</i> <i>lansoprazole ODT (generic only)</i> <i>omeprazole OTC</i> <i>omeprazole/sodium bicarb (Zegerid)</i> <i>rabeprazole (Aciphex)</i> <i>Aciphex Sprinkle</i> <i>Dexilant</i> <i>Esomep-EZS</i> <i>Prilosec suspension</i>
Ulcerative Colitis Agents	balsalazide (Colazal) mesalamine enema (Rowasa, sfRowasa) sulfasalazine, sulfasalazine DR (Azulfidine, Azulfidine DR) Apriso	<i>budesonide ER (Uceris)</i> <i>mesalamine (Lialda)</i> <i>mesalamine DR (Delzicol)</i> <i>mesalamine HD (Asacol HD)</i> mesalamine rectal (Canasa) <i>Dipentum</i> <i>Pentasa</i> <i>Uceris Rectal</i>

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IMMUNOLOGICS

Drug Class	Preferred	Requires Prior Authorization
Cytokine and CAM Antagonists	Enbrel Humira Cosentyx	Actemra Arcalyst Cimzia Entyvio Ilaris Ilumya Inflectra Kevzara Kineret ^{cc} Olumiant Orencia ^{cc,ql} Otezla ^{cc,ql} Remicade Renflexis Siliq Simponi Stelara ^{cc,ql} Taltz ^{cc,ql} Tremfya Xeljanz, Xeljanz XR ^{cc,ql}
Immunosuppressives, Oral	azathioprine (Imuran) cyclosporine modified capsules, solution (Neoral) mycophenolic acid (Myfortic) mycophenolate mofetil capsules, tablets (Cellcept) sirolimus (Rapamune) tacrolimus (Prograf) Cellcept suspension (Brand only)	cyclosporine capsules (Sandimmune) cyclosporine modified Softgel (Gengraf) mycophenolate mofetil suspension (generic only) Astagraf XL Envarsus XR Sandimmune solution Zortress

NEUROLOGICS

Drug Class	Preferred	Requires Prior Authorization
Alzheimer's Agents	donepezil, donepezil ODT (all strengths except 23mg) (Aricept, Aricept ODT) memantine (Namenda) rivastigmine capsules, patches (Exelon) ^{ql}	donepezil 23mg (Aricept) galantamine, galantamine ER (Razadyne, Razadyne ER) memantine dose pack memantine solution memantine ER (Namenda XR) Namzaric, Namzaric dose pack

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NEUROLOGICS

Drug Class	Preferred	Requires Prior Authorization
Anti-Parkinson's Agents	amantadine (Symmetrel) benzotropine (Cogentin) carbidopa/levodopa IR (Sinemet) carbidopa/levodopa ER (Sinemet CR) carbidopa/levodopa/entacapone (Stalevo) pramipexole (Mirapex) ropinirole (Requip) selegiline tablets (Eldepryl) trihexyphenidyl (Artane)	bromocriptine (Parlodel) carbidopa (Lodosyn) carbidopa/levodopa ODT (Parcopa) entacapone (Comtan) pramipexole ER (Mirapex ER) rasagiline (Azilect) ropinirole ER (Requip XL) selegiline capsules (Eldepryl) tolcapone (Tasmar) Duopa Gocovri Inbrija Neupro Osmolex ER Rytary Xadago Zelapar
Multiple Sclerosis Agents	Avonex Betaseron kit Copaxone 20mg (Brand only) Rebif	dalfampridine ER (Ampyra) ^{cc,ql} glatiramer acetate 20mg (Glatopa) (generic only) glatiramer acetate 40mg (Copaxone) Aubagio ^{cc,ql} Extavia kit ^{cc} Gilenya ^{cc,ql} Lemtrada ^{cc} Ocrevus ^{cc,ql} Plegridy ^{cc} Tecfidera ^{cc,ql} Tysabri

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OPHTHALMICS

Drug Class	Preferred	Requires Prior Authorization
Ophthalmics, Allergic Conjunctivitis	cromolyn (Crolom) ketotifen OTC (Zaditor OTC) Alrex Pazeo	<i>azelastine (Optivar)</i> <i>epinastine (Elestat)</i> <i>olopatadine (Pataday, Patanol)</i> <i>Alocril</i> <i>Alomide</i> <i>Bepreve</i> <i>Emadine</i> <i>Lastacraft</i>
Ophthalmics, Antibiotics	bacitracin/polymyxin B ointment ciprofloxacin solution (Ciloxan) erythromycin gentamicin (Garamycin) moxifloxacin (Vigamox) neomycin/bacitracin/polymyxin ointment neomycin/polymyxin/gramicidin (Neosporin) ofloxacin (Ocuflox) polymyxin/trimethoprim (Polytrim) sulfacetamide solution (Bleph-10) tobramycin (Tobrex Drops) Ciloxan ointment Moxeza Tobrex ointment	<i>bacitracin</i> <i>gatifloxacin (Zymaxid)</i> <i>levofloxacin (Quixin)</i> <i>sulfacetamide ointment</i> <i>AzaSite</i> <i>Besivance</i> <i>Natacyn</i>
Ophthalmics, Antibiotic/Steroid Combinations	neomycin/polymyxin/dexamethasone (Maxitrol) sulfacetamide/prednisolone tobramycin/dexamethasone drops (Tobradex) Tobradex ointment	<i>neomycin/bacitracin/polymyxin/hydrocortisone</i> <i>neomycin/polymyxin/hydrocortisone</i> <i>Blephamide, Blephamide S.O.P.</i> <i>Pred-G</i> <i>Tobradex ST</i> <i>Zylet</i>
Ophthalmics, Glaucoma Agents	brimonidine (Alphagan P) carteolol (Ocupress) dorzolamide (Trusopt) dorzolamide/timolol (Cosopt) latanoprost (Xalatan) levobunolol (Betagan) pilocarpine (Pilocar) timolol (Timoptic, Timoptic XE) Azopt Combigan Simbrinza Travatan Z	<i>apraclonidine (Iopidine)</i> <i>betaxolol</i> <i>bimatoprost 0.03% (Lumigan)</i> <i>timolol (Istalol)</i> <i>Betoptic S</i> <i>Cosopt PF</i> <i>Lumigan 0.01%</i> <i>Phospholine Iodide</i> <i>Rhopressa</i> <i>Timoptic Ocudose</i> <i>Vyzulta</i> Xelpros <i>Zioptan</i>

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OPHTHALMICS

Drug Class	Preferred	Requires Prior Authorization
Ophthalmics, Anti-Inflammatories	diclofenac (Voltaren) fluorometholone (FML) flurbiprofen (Ocufen) ketorolac (Acular) loteprednol (Lotemax drops) Durezol Flarex FML SOP Ilevro Maxidex Pred Mild	<i>bromfenac (Xibrom)</i> <i>dexamethasone (Decadron)</i> <i>ketorolac LS (Acular LS)</i> <i>prednisolone acetate (Pred Forte)</i> <i>prednisolone sodium</i> <i>Acuvail</i> <i>Bromsite</i> <i>FML Forte</i> <i>Iluvien</i> Inveltys <i>Lotemax gel, ointment</i> <i>Nevanac</i> <i>Ozurdex</i> <i>Prolensa</i> <i>Retisert</i> <i>Triesence</i> Yutiq
Ophthalmics, Anti-Inflammatory/ Immunomodulator	Restasis multidose Restasis single-use	Cequa Xiidra

OTIC

Drug Class	Preferred	Requires Prior Authorization
Otic Antibiotics	neomycin/polymyxin/HC (Cortisporin) ofloxacin otic (Floxin Otic) Ciprodex	<i>ciprofloxacin</i> <i>Cipro HC</i> <i>Coly-Mycin S</i> <i>Otiprio</i> <i>Otovel</i>

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RESPIRATORY

Drug Class	Preferred	Requires Prior Authorization
Antihistamines, Minimally Sedating	cetirizine, cetirizine D; Rx, OTC (Zyrtec, Zyrtec D) fexofenadine tablets, suspension OTC (Allegra OTC) levocetirizine tablets (Xyzal) loratadine, loratadine D, loratadine ODT; Rx, OTC (Claritin, Claritin D)	<i>desloratadine, desloratadine ODT (Clarinex, Clarinex RDT)</i> <i>fexofenadine ODT OTC</i> <i>fexofenadine D OTC (Allegra D)</i> <i>levocetirizine solution (Xyzal)</i> <i>loratadine capsule OTC</i> <i>Clarinex D</i> <i>Semprex D</i>
Bronchodilators, Beta Agonists	albuterol HFA (Proventil HFA) ^{ql} albuterol neb 0.083%, 5mg/ml albuterol neb 0.63mg/3ml, 1.25mg/3ml (AccuNeb) albuterol syrup (Proventil, Ventolin) ProAir HFA (Brand only) ^{ql} Serevent	<i>albuterol tablets</i> <i>albuterol ER (Vospire ER)</i> <i>albuterol HFA (ProAir HFA) (generic only) ^{ql}</i> <i>albuterol HFA (Ventolin HFA) ^{ql}</i> <i>levalbuterol neb (Xopenex)</i> <i>levalbuterol HFA (Xopenex HFA) ^{ql}</i> <i>metaproterenol (Alupent)</i> <i>terbutaline (Brethine)</i> <i>Arcapta Neohaler</i> <i>Brovana</i> <i>Perforomist</i> <i>ProAir Respiclick ^{ql}</i> <i>Striverdi Respimat</i>

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RESPIRATORY

Drug Class	Preferred	Requires Prior Authorization
COPD Agents	ipratropium neb (Atrovent) ipratropium/albuterol neb (DuoNeb) Atrovent HFA Combivent Respimat ^{ql} Spiriva Handihaler Stiolto Respimat	Anoro Ellipta Bevespi Aerosphere Daliresp Incruse Ellipta Lonhala Magnair Seebri Neohaler Spiriva Respimat Tudorza Pressair Utibron Neohaler Yupelri
Glucocorticoids, Inhaled	budesonide inhalation suspension 0.25mg, 0.5mg (Pulmicort Respules) fluticasone/salmeterol (Advair Diskus) Advair HFA Asmanex Dulera Flovent HFA Pulmicort Respules 1mg (Brand only) Symbicort	budesonide inhalation suspension 1mg (generic only) fluticasone/salmeterol (AirDuo Respiclick) Alvesco Armonair Respiclick Arnuity Ellipta Asmanex HFA Breo Ellipta Flovent Diskus Pulmicort Flexhaler ^{ql} QVAR Redihaler Trelegy Ellipta

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 Leading capital letter = brand name product.

RESPIRATORY

Drug Class	Preferred	Requires Prior Authorization
Intranasal Rhinitis Agents	azelastine nasal (Astelin) fluticasone nasal (Flonase) ipratropium (Atrovent Nasal)	<i>azelastine nasal (Astepro)</i> <i>budesonide nasal (Rhinocort Allergy OTC)</i> <i>flunisolide (Nasarel, Nasalide)</i> <i>fluticasone (Ticanase)</i> <i>mometasone nasal (Nasonex)</i> <i>olopatadine (Patanase)</i> <i>triamcinolone OTC (Nasacort OTC)</i> Beconase AQ Dymista Flonase OTC Omnaris Qnasl Xhance Zetonna
Leukotriene Modifiers	montelukast chewables, tablets (Singulair) zafirlukast (Accolate)	<i>montelukast granules (Singulair Granules)</i> <i>zileuton CR (Zyflo CR)</i> Zyflo
Epinephrine, Self-Injected	epinephrine 0.15mg (EpiPen Jr.) ^{ql} epinephrine 0.3mg (EpiPen) ^{ql}	<i>epinephrine 0.15mg (Adrenaclick)^{ql}</i> <i>epinephrine 0.3mg (Adrenaclick)^{ql}</i> Symjepi

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TOPICAL DERMATOLOGICS

Drug Class	Preferred	Requires Prior Authorization
Acne Agents, Topical	adapalene cream (Differin) ^{cc} benzoyl peroxide OTC (except 3%, 9% cleanser) clindamycin (all forms except the foam) clindamycin/benzoyl peroxide (Duac) erythromycin pledgets, solution tretinoin (Avita, Retin-A) ^{cc} Azelex Differin lotion ^{cc}	adapalene gel (Differin gel) ^{cc} adapalene/benzoyl peroxide (Epiduo) benzoyl peroxide 3%, 9% cleanser OTC benzoyl peroxide Rx bp-10-1 clindamycin foam clindamycin/benzoyl peroxide (Acanya) clindamycin/tretinoin (Veltin) dapsone 5% (Aczone) erythromycin gel erythromycin/benzoyl peroxide (Benzamycin) salicylic acid wash OTC sulfacetamide sulfacetamide/sulfur sulfacetamide/sulfur/urea tazarotene cream (Tazorac) ^{cc} tretinoin micro (Retin-A Micro) ^{cc} AcneFree Clearing System Aczone 7.5% gel Altreno Avar Clindacin Differin Gel OTC Epiduo Forte Gel w/Pump Fabior Neuac Onexton Ovace Plixda Retin-A Micro 0.06%, 0.08% Sumaxin CP Kit Tazorac gel
Immunomodulators, Atopic Dermatitis	tacrolimus ointment (Protopic) pimecrolimus (Elidel)	Dupixent Eucrisa

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UROLOGIC

Drug Class	Preferred	<i>Requires Prior Authorization</i>
BPH Treatments	alfuzosin (Uroxatral) doxazosin (Cardura) dutasteride (Avodart) finasteride (Proscar) tamsulosin (Flomax) terazosin (Hytrin)	<i>dutasteride/tamsulosin (Jalyn)</i> <i>Cardura XL</i> <i>Rapaflo</i>
Bladder Relaxant Preparations	oxybutynin, oxybutynin ER (Ditropan, Ditropan XL) Toviaz	<i>darifenacin ER (Enablex)</i> <i>flavoxate</i> <i>solifenacin (Vesicare)</i> <i>tolterodine, tolterodine ER (Detrol, Detrol LA)</i> <i>trospium, trospium ER (Sanctura, Sanctura XR)</i> <i>Gelnique</i> <i>Myrbetriq</i> <i>Oxytrol</i>

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