Analgesics

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| --- | --- | --- | --- | --- |
| Drug Class | Preferred | | Requires Prior Authorization | |
| Long-Acting Narcotics\*  \* Clinical criteria apply to this entire therapeutic class | Butrans® fentanyl 12, 25, 50, 75,  100 mcg/hr (transdermal) | morphine ER tablet (gen  MSContin/Oramorph SR)  Xtampza® ER | *Arymo® ER Belbuca® buprenorphine buccal film*  *and patch Duragesic® fentanyl 37.5, 62.5, 87.5,*  *mcg/hr (transdermal)*  *hydrocodone ER hydromorphone ER*  *Hysingla® ER* | *Kadian®*  *MorphaBond® ER morphine ER cap (gen*  *for Avinza & Kadian)*  *MS Contin® Nucynta® ER oxycodone ER OxyContin® oxymorphone ER*  *Zohydro® ER* |
| NSAIDS: Oral and Topical | celecoxib diclofenac gel OTC diclofenac sodium gel OTC ibuprofen (tab & susp) indomethacin IR cap | meloxicam tab naproxen tab sulindac Voltaren® | *Arthrotec Celebrex® diclofenac/capsicum diclofenac epolamine patch diclofenac potassium cap,*  *tab, & soln*  *diclofenac/misoprostol diclofenac solution (topical) diclofenac SR Diclotrex® Kit diflunisal Duexis® etodolac IR and SR fenoprofen Flector® patch flurbiprofen Ibupak® Kit ibuprofen-famotidine Indocin® rectal & susp*  *indomethacin ER cap &*  *rectal*  *ketoprofen ketoprofen ER ketorolac* | *meclofenamate mefenamic acid meloxicam cap Mobic*® *nabumetone Nalfon*® *Naprelan® naproxen CR naproxen EC naproxenesomeprazole naproxen sodium naproxen susp oxaprozin Pennsaid® piroxicam*  *Relafen® DS Sprix® tolmetin Vimovo*®  *Vivlodex® Zipsor*®  *Zorvolex®* |
| Opiate Dependence Treatment Agents, Oral and Injectable | Brixadi l® Bunavail® buprenorphine buprenorphine/naloxone  film & tab  Evzio®  Kloxxado® Lucemyra®  naloxone syringe, vial, spray | naltrexone  Narcan® nasal spray  Opvee®  Probuphine®  Rextovy®  Rivive®  Sublocade®  Suboxone® Film  Vivitrol®  Zimhi®  Zubsolv® | *N/A* |  |

Analgesics

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| --- | --- | --- | --- | --- |
| Drug Class | Preferred | | Requires Prior Authorization | |
| Tramadol and Tramadol Like Agents | tramadol 50 mg tramadol-acetaminophen | tramadol® ER (generic for Ultram) | *Nucynta®*  *Qdolo®*  *Seglentis® tramadol 25 mg & 100 mg* | *tramadol® ER (gen. for*  *ConZip, Ryzolt) tramadol solution* |

ANTI-INFECTIVES

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| Drug Class | Preferred | | Requires Prior Authorization | |
| Antibiotics: Fluoroquinolones | ciprofloxacin tablet | *levofloxacin tabs & soln* | *Baxdela®*  *ciprofloxacin suspension Cipro® tablets & susp* | *moxifloxacin ofloxacin* |
| Antibiotics: GI | metronidazole tabs | vancomycin caps vancomycin solution (generic for Firvanq) | *Aemcolo®*  *Dificid® Firvanq® metronidazole caps neomycin nitazoxanide paromomycin*  *Solosec®* | *Rebyota® enema tinidazole Vancocin®*  *vancomycin solution*  *Vowst®*  *Xifaxan®* |
| Antibiotics: Macrolides & Ketolides | azithromycin tabs and susp clarithromycin IR tab | erythromycin base tab | *azithromycin pack clarithromycin ER tab clarithromycin susp*  *E.E.S. 200 Susp®*  *E.E.S. 400 Tab®*  *Eryped® susp*  *Erythrocin®*  *Ery-tab®* | *erythromycin base DR cap erythromycin base DR tab erythromycin*  *ethylsuccinate susp*  *Zithromax®* |
| Antibiotics: Vaginal | Cleocin® cream  Cleocin® Ovules | Clindesse®  metronidazole vaginal gel | *clindamycin vaginal crm*  *Nuvessa®* | *Vandazole®*  *Xaciato®* |
| Antifungals, Oral | fluconazole tabs and susp griseofulvin susp  Noxafil® tab | nystatin susp terbinafine | *Brexafemme® clotrimazole*  *Cresemba® Diflucan® flucytosine griseofulvin tabs griseofulvin ultra-*  *microsize tab itraconazole* | *ketoconazole*  *Noxafil® PowderMix, Susp nystatin tabs posaconazole*  *Sporanox® Tolsura® voriconazole*  *Vfend® tabs and susp* |

ANTI-INFECTIVES

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| --- | --- | --- | --- | --- |
| Drug Class | Preferred | | Requires Prior Authorization | |
| Antifungals, Topical | ciclopirox (cream & soln) clotrimazole crm (OTC & RX) clotrimazole soln (OTC) clotrimazole-betamethasone  crm  econazole topical ketoconazole shampoo | miconazole OTC (crm,  powder)  nystatin (crm, oint,  powder)  terbinafine OTC cream tolnaftate OTC (crm &  powder) | *Alevazol® OTC Bensal® HP*  *ciclopirox (gel, kit, shampoo, susp)*  *clotrimazole soln (RX) clotrimazole-*  *betamethasone lotion*  *Desenex Aero® powder*  *OTC*  *Ertaczo® (topical)*  *Exelderm®*  *Fungoid® OTC*  *Jublia® Kerydin*  *ketoconazole (crm, foam)*  *Loprox®*  *Lotrimin AF® OTC*  *Lotrimin Ultra® OTC* | *luliconazole Luzu®*  *Mentax® miconazole/zinc*  *oxide/petrolatum Mycozyl® AC Crm OTC naftifine crm & gel Naftin® nystatin-triamcinolone*  *topical*  *oxiconazole cream Oxistat® sulconazole tavaborole tolnaftate OTC (soln, Aero*  *pwdr & spray)*  *triamazole kit*  *Vusion®* |
| Antivirals: Herpes | acyclovir cap, susp & tab famciclovir | valacyclovir | *Sitavig®* | *Valtrex®* |
| Hepatitis B: Oral Agents | entecavir  Epivir® HBV soln | lamivudine (HBV) tab | *adefovir*  *Baraclude® soln & tablet*  *Epivir® HBV tab* | *Hepsera®*  *Vemlidy®* |
| Hepatitis C Agents | Mavyret®  *Pegasys® vial*  RibaPak® | ribavirin caps & tabs sofosbuvir-velpatasvir  Vosevi® | *Epclusa® Harvoni®*  *ledipasvir-sofosbuvir*  *Pegasys® syringe*  *PEG-Intron®* | *Ribasphere® ribavirin dose pack*  *Sovaldi®*  *Viekira® Pak*  *Zepatier®* |

ANTI-INFECTIVES

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| Drug Class | Preferred | | Requires Prior Authorization | |
| HIV / AIDS | abacavir soln, tab abacavir/lamivudine  Apretude® Aptivus® atazanavir Biktarvy®  Cabenuva®  Cimduo® Complera® darunavir Delstrigo®  Descovy®  Dovato® Edurant® efavirenz tab efavirenz / emtricitabine /  tenofovir disoproxil fumarate  efavirenz / lamivudine /  tenofovir disoproxil fumarate  (gen for Symfi) emtricitabine emtricitabine / tenofovir disoproxil fumarate Emtriva® solution etravirine Evotaz® fosamprenavir  Fuzeon®  Genvoya®  Intelence®  Isentress®  Isentress® HD  Juluca®  Kaletra® soln, tab | lamivudine soln, tab lamivudine / zidovudine lopinavir-ritonavir soln,  tab Maraviroc nevirapine susp, tab nevirapine ER  Norvir® powder pack  Odefsey®  Pifeltro®  Prezcobix®  Prezista® susp  Reyataz® powder pack ritonavir tab  Rukobia®  Selzentry® soln  Stribild®  Sunlenca®  Symfi® Lo  Symtuza®  Tenofovir disoproxil fumarate  Tivicay®  Tivicay PD®  Triumeq®  Triumeq® PD  Tybost®  Viread® powder Ziagen ® soln zidovudine cap, tab, syrup | *Atripla® didanosine DR cap efavirenz cap efavirenz / lamivudine /*  *tenofovir disoproxil fumarate Lo (gen for Symfi Lo)*  *Emtriva® caps*  *Epivir® soln. & tab*  *Epzicom®*  *Lexiva®* | *Norvir tab®*  *Prezista® tabs*  *Reyataz® cap*  *Selzentry® tabs stavudine Symfi®*  *Trogarzo®*  *Truvada®*  *Viracept®*  *Viread® tab* |
| Influenza Agents | oseltamivir  Relenza® | rimantadine | *Tamiflu®* | *Xofluza*® |
| Topical Antibiotics | bacitracin OTC gentamicin cream & ointment mupirocin ointment | triple antibiotic oint OTC | *bacitracin packet OTC bacitracin/polymyxin OTC*  *Centany® Centany AT® double antibiotic oint OTC* | neomycin / polymyxin /  pramoxine topical OTC  *mupirocin cream*  *triple antibiotic oint PLUS*  *Xepi®* |
| Topical Antivirals | acyclovir cream & ointment | docosanol OTC | *Denavir® penciclovir* | *Xerese®*  *Zovirax® cream & ointment* |

CARDIOVASCULAR

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| Drug Class | Preferred | | Requires Prior Authorization | |
| ACE Inhibitors | benazepril enalapril | lisinopril ramipril | *Accupril® Altace® captopril Epaned®*  *fosinopril moexipril* | *perindopril Qbrelis® quinapril trandolapril*  *Zestril®* |
| ACE Inhibitor/Diuretic Combinations | enalapril w/HCTZ | lisinopril w/HCTZ | *Accuretic® benazepril w/HCTZ captopril w/HCTZ* | *fosinopril w/HCTZ quinapril w/HCTZ*  *Zestoretic®* |
| Angiotensin Receptor Blockers | Entresto® irbesartan losartan | olmesartan telmisartan valsartan | *Atacand®*  *Avapro® Benicar® candesartan*  *Cozaar®* | *Diovan®*  *Edarbi®*  *Eprosartan*  *Micardis®* |
| Angiotensin Receptor Blockers/Diuretic | irbesartan/HCTZ losartan/HCTZ | olmesartan/HCTZ telmisartan/HCTZ valsartan/HCTZ | *Atacand HCT®*  *Avalide® Benicar HCT® candesartan/HCTZ* | *Diovan HCT®*  *Edarbyclor®*  *Hyzaar®*  *Micardis® HCT* |
| Angiotensin Receptor Modulators Combinations | amlodipine / benazepril amlodipine/ olmesartan | amlodipine / valsartan  amlodipine / valsartan /  HCTZ | *amlodipine/ olmesartan/ HCTZ*  *Azor®*  *Exforge®*  *Exforge® HCT* | *Lotrel® Tarka® telmisartan / amlodipine trandolapril / verapamil*  *Tribenzor®* |
| Antihypertensives, Sympatholytics | clonidine clonidine patches | guanfacine methyldopa | *Catapres*®  *Catapres-TTS® patches clonidine ER* | *methyldopa HCTZ* |
| Beta Blockers | atenolol bisoprolol Carvedilol labetalol metoprolol succinate ER metoprolol tartrate | nadolol nebivolol HCL propranolol ER / SA propranolol tabs / soln sotalol | *acebutolol betaxolol Bystolic® carvedilol ER Coreg®*  *Coreg CR®*  *Corgard®*  *Hemangeol®*  *Inderal LA®* | *Inderal XL®*  *InnoPran XL*  *®Kapspargo® Sprinkle Lopressor® pindolol Sotylize® Tenormin® timolol Toprol XL®* |
| Beta Blockers/Diuretic Combinations | atenolol / chlorthalidone | bisoprolol / HCTZ | *metoprolol / HCTZ nadolol /*  *bendroflumethiazide* | *propranolol / HCTZ* |
| Bidil | Bidil® |  | *N/A* |  |
| Calcium Channel Blockers (DHP) | amlodipine | nifedipine ER/SA/XL | *Conjupri felodipine ER isradipine Katerzia® susp levamlodipine maleate nicardipine HCl nifedipine IR* | *nimodipine nisoldipine Norliqva®*  *Norvasc®*  *Nymalize®*  *Procardia XL®* |

CARDIOVASCULAR

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| Drug Class | Preferred | | Requires Prior Authorization | |
| Calcium Channel Blockers (NonDHP) | diltiazem ER cap diltiazem tab | verapamil tab verapamil ER tab | *Calan SR®*  *Cardizem CD® Cardizem LA® diltiazem LA® Matzim LA®* | *verapamil 360 mg cap verapamil ER cap verapamil ER PM*  *Verelan*  *Verelan PM* |
| Direct Renin Inhibitors | N/A |  | *aliskiren*  *Tekturna®* | *Tekturna HCT®* |
| Lipotropics: Bile Acid Sequestrants | Cholestyramine pwdr & packets | Colestid® colestipol tablet | *colesevelam colestipol granules* | *Welchol®* |
| Lipotropics: Cholesterol Absorption Inhibitors and Others | ezetimibe |  | *Juxtapid®*  *Nexletol®*  *Nexlizet®*  *Leqvio®* | *Praluent®*  *Repatha*  *Zetia®* |
| Lipotropics: HMG-CoA Reductase Inhibitors (Statins) | atorvastatin lovastatin pravastatin | rosuvastatin simvastatin | *Altoprev®*  *amlodipine/atorvastatin*  *Atorvaliq®*  *Caduet®*  *Crestor®*  *Ezallor Sprinkle® fluvastatin SR and ER*  *Lescol XL®* | *Lipitor® Livalo® pitavastatin Pravachol® simvastatin/ezetimibe*  *Vytorin®*  *Zocor®*  *Zypitamag®* |
| Lipotropics: Niacin Derivatives | Niaspan® |  | *niacin ER* |  |
| Lipotropics: Triglyceride Lowering Agents | fenofibrate (generic for  Tricor®) fenofibric acid (generic for  Trilipix®) | Gemfibrozil omega-3 OTC omega-3 acid ethyl esters (Rx)  Vascepa® | *Antara® fenofibrate (Antara,*  *Fenoglide, Fibricor,*  *Lofibra, Lipofen, Triglide) Fenoglide® icosapent ethyl*  *Lipofen®* | *Lopid®*  *Lovaza®*  *Tricor*  *Triglide®*  *Trilipix®* |
| Platelet Aggregation Inhibitors | Aggrenox®  Brilinta® clopidogrel | dipyridamole prasugrel | *aspirin / dipyridamole*  *Effient®*  *Plavix®* | *Yosprala®*  *Zontivity®* |
| Ranexa-like Agents  Anti-Angina/Anti-Ischemic | ranolazine ER |  | *Aspruzyo® Sprinkle ER* | *Ranexa®* |

CENTRAL NERVOUS SYSTEM

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| Drug Class | Pref | erred | Requires Prior Authorization | |
| Alzheimer’s Agents: Cholinesterase Inhibitors | donepezil ODT donepezil tabs | Exelon® patch rivastigmine caps | *Adlarity®*  *Aricept®*  *Aricept® 23 mg* | *donepezil 23 mg galantamine IR/ER/soln rivastigmine patch* |
| Alzheimer’s Agents: NMDA Receptor Antagonist and combinations | memantine tablets |  | *memantine dose pack memantine ER memantine solution*  *Namenda®* | *Namenda® Dose Pack*  *Namenda® XR*  *Namzaric®*  *Namzaric® Dose Pack* |

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| Drug Class | Preferred | | Requires Prior Authorization | |
| Anti-Convulsants: Carbamazepine Derivatives | carbamazepine chew tabs Carbatrol® oxcarbazepine tabs | Tegretol® susp  Tegretol® tablets  Tegretol® XR  Trileptal® oral susp | *Aptiom® carbamazepine ER caps*  *(generic for Carbatrol®) carbamazepine oral susp carbamazepine tablets* | *carbamazepine XR tablets Equetro®*  *oxcarbazepine susp Oxtellar® XR*  *Trileptal® tablets* |
| Anti-Convulsants: First Generation | clobazam clonazepam tablets Depakote® sprinkle diazepam rectal diazepam rectal device divalproex sodium DR divalproex sodium ER ethosuximide syrup Nayzilam® phenobarbital elixir phenobarbital tablets | phenytoin chewtab phenytoin oral susp phenytoin sodium  extended cap  primidone valproic acid capsule valproic acid syrup  Valtoco® | *Celontin® clonazepam ODT Depakote®*  *Depakote® ER*  *Diastat®*  *Diastat® AcuDial*  *Dilantin® capsule*  *Dilantin-125® oral susp Dilantin® chew tab divalproex sodium sprinkle ethosuximide capsule felbamate Felbatol®* | *Klonopin®*  *Libervant*® *methsuximide*  *Mysoline® tablet*  *Onfi® Phenytek® phenytoin sodium*  *extended cap (generic for Phenytek)*  *Sympazan®*  *Zarontin®* |
| Anti-Convulsants: Second Generation and Others | lacosamide lamotrigine chewable-  dispersible tablet  lamotrigine tab levetiracetam solution levetiracetam tablet | rufinamide topiramate sprinkle cap topiramate tablet zonisamide | *Banzel®*  *Briviact®*  *Diacomit®*  *Elepsia® XR*  *Epidiolex®*  *Eprontia®*  *Fintepla®*  *Fycompa®*  *Gabitril®*  *Keppra® soln & tabs*  *Keppra® XR*  *Lamictal® tab / CD / ODT /*  *XR*  *Lamictal® tab / ODT / XR*  *Dose Packs lamotrigine ER / ODT lamotrigine tab / ODT*  *Dose Packs* | *levetiracetam ER*  *Motpoly XR*  *Qudexy XR®*  *Sabril® Spritam® tiagabine*  *Topamax® sprinkle cap Topamax® tablet topiramate ER (generics*  *for both Qudexy XR & Trokendi XR) Trokendi XR® vigabatrin Vigafyde®*  *Vimpat®*  *Xcopri®*  *Zonisade®*  *Ztalmy®* |
| Anti-Depressants: SSRIs | citalopram solution citalopram tablet escitalopram tabs | fluoxetine caps, soln, tabs paroxetine tablet sertraline tablet | *Celexa® tablet citalopram 30 mg cap escitalopram soln fluoxetine DR / weekly fluoxetine 60 mg fluvoxamine fluvoxamine ER*  *Lexapro®* | *paroxetine (gen. for*  *Brisdelle®) paroxetine CR paroxetine suspension*  *Paxil® susp / tab*  *Paxil CR® Prozac®*  *sertraline capsule / soln*  *Zoloft®* |

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| Drug Class | Preferred | | Requires Prior Authorization | |
| Anti-Depressants: Others | bupropion IR/SR/XL 150,  300 mirtazapine IR trazodone | venlafaxine IR  venlafaxine ER HCL caps  (OSM 24) vilazodone | *Aplenzin® Auvelity®*  *bupropion XL 450 (gen. for*  *Forfivo XL) desvenlafaxine ER*  *Effexor XR®*  *Emsam®*  *Fetzima®*  *Forfivo XL® Marplan® mirtazapine ODT Nardil® nefazodone* | *phenelzine Pristiq®*  *Remeron® Spravato®*  *tranylcypromine sulfate Trintellix® venlafaxine besylate ER tabs*  *venlafaxine HCl ER tabs*  *Viibryd®*  *Wellbutrin®* *SR / XL*  *Zurzuvae®* |

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| Drug Class | Preferred | | Requires Prior Authorization | |
| Anti-Hyperkinesis Agents  Stimulants, CNS Activating Agents, and Related Agents\*  \* Clinical criteria apply to this entire therapeutic class | amphetamine salt combo IR  amphetamine salt  combo ER (gen. for  Adderall XR®) atomoxetine clonidine ER dexmethylphenidate IR dexmethylphenidate ER | dextroamphetamine IR  tabs  guanfacine ER methylphenidate ER (gen.  Concerta®) methylphenidate soln &  tablet  Vyvanse® caps  Vyvanse® chewable tabs | *Adderall XR®*  *Adhansia XR® Adzenys® XR ODT* amphetamine salt  combo ER (gen. for  Mydayis®) *amphetamine sulfate tab Aptensio® XR armodafinil Azstarys®*  *Concerta®*  *Cotempla® XR-ODT*  *Daytrana®*  *Dexedrine® Spansule dextroamphetamine ER cap*  *dextroamphetamine soln dextroamphetamine-*  *amphetamine ER*  *Dyanavel® XR (susp & tab)*  *Evekeo®*  *Evekeo® ODT*  *Focalin®*  *Focalin® XR®*  *Intuniv®*  *Jornay® PM lisdexamfetamine methamphetamine Methylin® methylphenidate CD methylphenidate chew*  *tabs* | *methylphenidate ER (gen.*  *Aptensio® XR) methylphenidate ER (gen.*  *Metadate®ER) methylphenidate ER (gen.*  *Relexxii®) methylphenidate ER cap*  *(gen Ritalin® LA) methylphenidate*  *ER/SR/SA (generics for all other methylphenidate oral modified release products)*  *methylphenidate*  *transdermal patch (gen.*  *Daytrana®) modafinil Mydayis®*  *Nuvigil®*  *Onyda® XR*  *ProCentra®*  *Provigil®*  *Qelbree®*  *QuilliChew® ER*  *Quillivant® XR*  *Relexxii®*  *Ritalin®*  *Ritalin LA®*  *Strattera®*  *Sunosi®*  *Wakix®*  *Xelstrym®*  *Zenzedi®* |
| Antiparkinson’s Agents | amantadine caps & syrup benztropine carbidopa / levodopa carbidopa / levodopa ER | entacapone pramipexole ropinirole trihexyphenidyl | *amantadine tab Apokyn®*  *apomorphine cartridges Azilect® bromocriptine carbidopa carbidopa / levodopa ODT carbidopa / levodopa /*  *entacapone*  *Comtan®*  *Dhivy®*  *Duopa®*  *Gocovri®*  *Inbrija®*  *Lodosyn®*  *Mirapex® ER* | *Neupro® Nourianz®*  *Ongentys®* *Osmolex® ER pramipexole ER rasagiline ropinirole ER Rytary® selegiline Sinemet®*  *Stalevo®*  *Tasmar® tolcapone Xadago®*  *Zelapar®* |

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| Drug Class | Preferred | | Requires Prior Authorization | |
| Anti-Migraine: 5-HT1 Receptor  Agonists and others  \* Clinical criteria may apply | Aimovig®  Imitrex® Spray *Nurtec® ODT* rizatriptan ODT rizatriptan tab  Qulipta® | sumatriptan disp syringe sumatriptan kit sumatriptan tablet sumatriptan vial  Ubrelvy® | Ajovy® *almotriptan Cambia®*  *Eletriptan*  *Emgality® Frova® frovatriptan*  *Imitrex® tablet, kit, vial*  *Maxalt MLT®*  *Maxalt® tab*  *Naratriptan* | *Onzetra Xsail®*  *Relpax® Reyvow® sumatriptan-naproxen sumatriptan spray*  *Tosymra®*  *Treximet®*  *Zavzpret®*  *Zembrace SymTouch® zolmitriptan*  *Zomig®* |
| Atypical Antipsychotics – Oral | aripiprazole tablet clozapine lurasidone olanzapine paliperidone | quetiapine (IR &ER) risperidone solution risperidone tablet Saphris® ziprasidone | *Abilify®*  *Abilify MyCite® aripiprazole ODT aripiprazole solution asenapine Caplyta® clozapine ODT*  *Clozaril®*  *Fanapt®*  *Geodon®*  *Invega®*  *Latuda®*  *Lybalvi®* | *Nuplazid®*  *olanzapine/fluoxetine*  *Rexulti® Risperdal® risperidone ODT*  *Secuado®*  *Seroquel®*  *Seroquel XR®*  *Symbyax®*  *Versacloz®*  *Vraylar®*  *Zyprexa®*  *Zyprexa® Zydis* |
| Atypical Antipsychotics, Long Acting  Injectables  \* Clinical criteria may apply | Abilify® Asimtufii  Abilify® Maintena  Aristada®  Aristada® Initio  Invega Hafyera® | Invega® Sustenna  Invega® Trinza Perseris® risperidone intramuscular | *Risperdal® Consta*  *Rykindo*® | *Uzedy®*  *Zyprexa*® *Relprevv* |
| Movement Disorder Agents | Austedo®  Austedo® XR tab | Ingrezza® cap tetrabenazine | *Austedo® XR titration pack*  *Ingrezza® initiation pack*  *& Sprinkle* | *Xenazine®* |
| Multiple Sclerosis Agents  \* Clinical criteria may apply | Avonex®  Avonex® pen  Betaseron® Kit Copaxone® 20 mg Kit dalfampridine ER dimethyl fumarate DR dimethyl fumarate DR starter pack | fingolimod  Kesimpta®  Rebif®  Rebif® Rebidose teriflunomide | *Ampyra®*  *Aubagio®*  *Bafiertam®*  *Copaxone® 40 mg syringe Gilenya®*  *glatiramer syringe*  *Mavenclad®* | *Mayzent®*  *Plegridy®*  *Ponvory®*  *Tascenso® ODT*  *Tecfidera®*  *Vumerity®*  *Zeposia®* |
| Drug Class | Preferred | | Requires Prior Authorization | |
| Neuropathic Pain | capsaicin OTC topical duloxetine (gen for  Cymbalta®) gabapentin tablets | lidocaine topical  Lyrica® capsules Neurontin® cap, soln pregabalin cap, soln | *Cymbalta®*  *Drizalma® Sprinkle duloxetine (gen for*  *Irenka®) gabapentin caps, soln gabapentin ER*  *Gralise® Horizant® lidocan patch* | *Lidoderm®*  *Lyrica® CR*  *Lyrica® solution Neurontin® tablets pregabalin ER*  *Qutenza®*  *Savella®*  *Xyliderm®*  *ZTlido®* |
| Sedative Hypnotic Agents | eszopiclone temazepam 15 & 30 mg | zaleplon  zolpidem tartrate IR tab | *Ambien®*  *Ambien CR®*  *Belsomra® Dayvigo® doxepin Edluar® estazolam flurazepam Halcion®*  *Hetlioz®*  *Hetlioz® LQ Lunesta® quazepam* | *Quviviq® ramelteon*  *Restoril®*  *Rozerem®*  *Silenor® tasimelteon temazepam 7.5 & 22.5mg triazolam zolpidem IR cap*  *zolpidem SL (generic for*  *Intermezzo) zolpidem ER* |
| Skeletal Muscle Relaxants | baclofen tablets chlorzoxazone cyclobenzaprine HCl | methocarbamol  tizanidine HCl tablet | *Amrix® baclofen soln & susp carisoprodol carisoprodol compound cyclobenzaprine ER Dantrium® dantrolene sodium*  *Fleqsuvy*® | *Lorzone® Lyvispah® metaxalone orphenadrine ER*  *Skelaxin® Soma®*  *tizanidine HCl capsule*  *Zanaflex®* |

ENDOCRINE AND METABOLIC AGENTS

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Drug Class | Preferred | | Requires Prior Authorization | |
| Agents for Gout  \* Clinical criteria may apply to this therapeutic class | allopurinol 100 mg colchicine tabs febuxostat | probenecid probenecid-colchicine | *allopurinol 200 mg colchicine caps*  *Colcrys®*  *Gloperba®* | *Krystexxa®*  *Mitigare®*  *Uloric®* |
| Androgenic Agents | testosterone gel pump  (generic for AndroGel®) |  | *Androderm®*  *Androgel®*  *Fortesta®*  *Natesto®*  *Testim®* | *testosterone (topical;*  *generics for Androgel® packets, Axiron®, Fortesta®, Vogelxo®)*  *Vogelxo®* |
| Bone: Bisphosphonates | alendronate tablet | ibandronate | *Actonel®*  *alendronate soln*  *Atelvia®*  *Binosto®* | *Fosamax® Fosamax® Plus D risedronate* |

ENDOCRINE AND METABOLIC AGENTS

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Drug Class | Preferred | | Requires Prior Authorization | |
| Bone: Others | raloxifene |  | *calcitonin, salmon (nasal)*  *Evenity®*  *Evista®*  *Forteo®* | *Prolia® teriparatide Tymlos®* |
| Diabetes: Amylin Analogs | N/A |  | *Symlin® Pens* |  |
| Diabetes: DPP-IV Inhibitors | Glyxambi®  Janumet®  Janumet® XR | Januvia®  Jentadueto®  Tradjenta® | *alogliptin alogliptin / metformin alogliptin / pioglitazone*  *Jentadueto® XR*  *Kazano®*  *Kombiglyze XR®*  *Nesina®*  *Onglyza®* | *Oseni® Qtern® saxagliptin saxagliptin/metformin ER sitagliptin-metformin*  *Steglujan®*  *Trijardy® XR*  *Zituvio®* |
| Diabetes: GLP-1 Receptor Agonists | Byetta®  Ozempic® | Trulicity®  Victoza® | *Bydureon® BCISE liraglutide Mounjaro®* | *Rybelsus®*  *Soliqua®*  *Xultophy®* |
| Diabetes: Insulin Long Acting | insulin glargine pen & vial  Lantus Solostar® Pen  Lantus® vial | Levemir® FlexPens  Levemir® vial | *Basaglar® insulin degludec*  *Insulin glargine Max pen insulin glargine-YFGN*  *Rezvoglar®* | *Semglee®-YFGN*  *Toujeo® Max Solostar*  *Toujeo® Solostar*  *Tresiba®* |
| Diabetes: Insulin Mixes 70/30 | Humulin® 70/30 pen  Humulin® 70/30 vial | insulin aspart/insulin  aspart protamine 70/30 pen and vial | *Novolin® 70/30 pen*  *Novolin® 70/30 vial* | *NovoLog® Mix 70/30*  *FlexPen syr*  *NovoLog® Mix 70/30 vial* |
| Diabetes: Insulin Mixes – Other | Humalog® Mix 50/50 pen  Humalog® Mix 50/50 vial | Humalog® Mix 75/25 pen  Humalog® Mix 75/25 vial | *insulin lispro protamine /*  *insulin lispro Mix 75/25 KwikPen* | *Novolog® Mix 50/50 pen*  *Novolog® Mix 50/50 vial* |
| Diabetes: Insulin NPH | Humulin® N 100 u/ml vial |  | *Humulin® N 100 u/ml pen* |  |
| Diabetes: Insulin Rapid Acting | Humalog® 100 u/ml cartridge  Humalog Junior KwikPen®  Humalog® 100 u/ml pen  Humalog® 100 u/ml vial | insulin aspart pen insulin aspart vial  NovoLog® cartridge  Novolog®vial | *Admelog® vial*  *Admelog Solostar®*  *Afrezza® (Inhalation)*  *Apidra®*  *Apidra Solostar®*  *Fiasp®*  *Humalog® 200 u/ml pen*  *Humalog® Tempo pen* | *insulin aspart cartridge*  *insulin lispro Junior*  *KwikPen*  *insulin lispro pen insulin lispro vial*  *Lyumjev®*  *Novolog® FlexPen syr* |
| Diabetes: Insulin Regular | Humulin® R 500 u/ml Pen | Humulin® R 500 u/ml vial |  | *Novolin® R* |
| Diabetes: Meglitinides | nateglinide | repaglinide |  |  |
| Diabetes: Metformins and  Metformin-Sulfonylurea  Combinations | metformin metformin-glyburide | metformin ER (generic for Glucophage XR) | *Glumetza® metformin 625 mg metformin ER (generic for*  *Fortamet & Glumetza) metformin-glipizide* | *metformin soln (generic for Riomet) Riomet®*  *Riomet® ER* |
| Diabetes: SGLT2 Inhibitors | Farxiga®  Invokamet®  Invokana® | Jardiance®  Synjardy®  Xigduo XR® | *dapagliflozin dapagliflozin with ER*  *metformin*  *Inpefa*® | *Invokamet® XR*  *Segluromet*®  *Steglatro*®  *Synjardy® XR* |

ENDOCRINE AND METABOLIC AGENTS

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| --- | --- | --- | --- | --- |
| Drug Class | Preferred | | Requires Prior Authorization | |
| Diabetes: Thiazolidinediones | pioglitazone |  | *ActoPlus® Met*  *Actos®*  *Duetact®* | *pioglitazone / glimepiride pioglitazone / metformin* |
| Fertility Agents  \* Clinical criteria may apply to this entire therapeutic class | cabergoline clomiphene ganirelix syringe  (authorized generic only) | Gonal-F® RFF vial letrozole pregnyl vial | *Cetrotide® kit chorionic gonadotropin, human vial*  *Follistim® AQ cartridge ganirelix syringe* | *Gonal-F® RFF Redi-ject pen*  *Gonal-F® vial leuprolide acetate menopur® vial ovidrel syringe*  *Synarel®* |
| Growth Hormones\*  \* Clinical criteria apply to this entire therapeutic class | Genotropin® cartridge  Genotropin® syringe | Nutropin® AQ Pen | *Humatrope® Cartridge*  *Ngenla®*  *Norditropin® FlexPro*  *Omnitrope®*  *Saizen®* | *Serostim®*  *Skytrofa®*  *Sogroya®*  *Zomacton®* |
| Glucagon Agents | Baqsimi® glucagon | glucagon emergency kit  Gvoke® Pen | *diazoxide susp*  *glucagon emergency kit (Fresenius)* | *Gvoke® Syringe and Vial*  *Proglycem®*  *Zegalogue* |
| Hyperparathyroid Agents | cinacalcet | paricalcitol | *doxercalciferol Rayaldee® caps* | *Sensipar®* |
| Progestins Used for Cachexia | megestrol oral susp |  | *megestrol ES oral susp* |  |
| Vaginal Estrogen Preparations | estradiol vaginal cream  Premarin® | Vagifem® | *Estrace®*  *estradiol vaginal tablet*  *Estring®* | *Femring®*  *Imvexxy®*  *Intrarosa®* |

GASTROINTESTINAL

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Drug Class | Preferred | | Requires Prior Authorization | |
| Antiemetics – Oral | meclizine metoclopramide solution metoclopramide tablet ondansetron ODT | ondansetron tablet promethazine tablet scopolamine transdermal | *Akynzeo® Anzemet® aprepitant Bonjesta®*  *Compro®*  *Diclegis® doxylamine / vitamin B6 dronabinol*  *Emend®*  *Gimoti®* | *granisetron ondansetron solution prochlorperazine promethazine syrup,*  *rectal*  *Reglan®*  *Sancuso® Transderm-Scop® trimethobenzamide* |
| Histamine-2-Receptor Antagonists | famotidine tabs | ranitidine tabs | *cimetidine soln and tabs famotidine susp* | *nizatidine caps Pepcid® tablets* |
| *H. pylori* Combinations | Pylera® |  | *bismuth-metronidazole-*  *tetracycline*  *lansoprazole / amoxicillin*  */ clarithromycin (pack)* | *Omeclamox-Pak®*  *Talicia®* |

GASTROINTESTINAL

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Drug Class | Preferred | | Requires Prior Authorization | |
| Irritable Bowel Syndrome &  Chronic GI Motility | Amitiza®  Linzess® | Movantik® | *alosetron Ibsrela® Lotronex® lubiprostone Motegrity®* | *Relistor®*  *Symproic®*  *Trulance®*  *Viberzi®* |
| Pancreatic Enzymes | Creon® | Zenpep® | *Pertzye®* | *Viokace®* |
| Proton Pump Inhibitors | Nexium® susp omeprazole (Rx) | pantoprazole tab  Protonix® susp | *Aciphex® Dexilant® dexlansoprazole*  *esomeprazole (generic for*  *Nexium) esomeprazole Mg cap &*  *tab OTC*  *Konvomep®*  *lansoprazole (all) Nexium® caps omeprazole / sodium*  *bicarbonate (all)* | *omeprazole DR tab OTC omeprazole Mg OTC pantoprazole susp Prevacid® capsules*  *Prevacid® 15mg OTC*  *Prevacid SoluTab®*  *Prilosec® susp (Rx)* Protonix® tab *rabeprazole Zegerid®* |
| Ulcerative Colitis – Oral | Apriso®  Delzicol®  Lialda® | sulfasalazine DR sulfasalazine IR | *Asacol-HD®*  *Azulfidine EN-tabs® balsalazide budesonide DR* | *Dipentum®*  *mesalamine (IR, DR, & ER)*  *Pentasa®*  *Uceris®* |
| Ulcerative Colitis – Rectal | mesalamine (generic for  Canasa®) rectal suppositories |  | *Canasa®*  *mesalamine enema*  *(generic for SfRowasa) mesalamine kit (generic for Rowasa® enema kit)* | *Rowasa®*  *SFRowasa®*  *Uceris® rectal* |

GENITOURINARY AND RENAL

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Drug Class | Preferred | | Requires Prior Authorization | |
| Alpha Blockers for BPH | alfuzosin doxazosin | tamsulosin terazosin | *Cardura®*  *Cardura® XL*  *Flomax®* | *Rapaflo® silodosin* |
| Androgen Hormone Inhibitors | dutasteride | finasteride | *Avodart®*  *dutasteride/tamsulosin*  *Entadfi®* | *Jalyn®*  *Proscar®* |
| Electrolyte Depleters | calcium acetate caps, tabs  Renvela® packs and tabs | Renagel® | *Auryxia® Fosrenol®*  *lanthanum carbonate Phoslyra® sevelamer carbonate pack* | *sevelamer carbonate tabs sevelamer HCl tabs*  *Velphoro®*  *Xphozah®* |

GENITOURINARY AND RENAL

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Drug Class | Preferred | | Requires Prior Authorization | |
| Urinary Tract Antispasmodics | fesoterodine oxybutynin IR and ER tabs oxybutynin syrup | solifenacin  Toviaz® | *darifenacin ER*  *Detrol®*  *Detrol LA®*  *Ditropan XL®*  *Enablex®*  *Flavoxate*  *Gelnique®* | *Gemtesa® Myrbetriq® oxybutynin 2.5 mg Oxytrol® tolterodine IR and ER trospium IR and ER*  *Vesicare®*  *Vesicare® LS* |

HEMATOLOGICAL AGENTS

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Drug Class | Preferred | |  | Requires Prior Authorization | |
| Anticoagulants | Eliquis®  enoxaparin syringe& vial  Pradaxa® | warfarin  Xarelto® tabs, dose pack | *Arixtra®*  *Bevyxxa® Coumadin® dabigatran fondaparinux* |  | *fondaparinux*  *Fragmin®*  *Lovenox® syringe & vial*  *Savaysa®*  *Xarelto® susp* |
| Bile Salts | ursodiol 300 mg cap | ursodiol tab | *Bylvay*®  *Chenodal*®  *Cholbam*®  *Iqirvo*®  *Livdelzi*® |  | *Livmarli*®  *Ocaliva*®  *Reltone*®  *Urso/Urso Forte*® |
| Colony Stimulating Factors | Neupogen® | Nyvepria® | *Fulphila®*  *Fylnetra®*  *Granix®*  *Leukine®*  *Neulasta®*  *Nivestym®* |  | *Releuko®*  *Rolvedon®*  *Stimufend®*  *Udenyca®*  *Zarxio®*  *Ziextenzo®* |
| Hematopoietic Agents | Epogen® | Retacrit® (Pfizer) | *Aranesp®*  *Jesduvroq®*  *Mircera®* |  | *Procrit®*  *Reblozyl®*  *Retacrit® (Vifor)*  *Vafseo®* |
| Hemophilia Treatments | Advate®  Adynovate®  Afstyla®  Alphanate®  AlphaNine SD®  Alprolix®  Altuviiio®  Balfaxar®  BeneFIX Kit®  Beqvez® Kit  Coagadex®  Corifact Kit®  Eloctate®  Esperoct®  Feiba NF®  Hemgenix®  Hemlibra®  Hemofil-M®  Humate-P Kit®  Idelvion®  Jivi® | Koate-DVI Kit®  Koate-DVI Vial®  Kogenate FS®  Kovaltry®  Novoeight®  NovoSeven RT®  Nuwiq®  Obizur®  Profilnine SD®  Rebinyn®  Recombinate®  Rixubis®  Roctavian®  Sevenfact®  Tretten®  Vonvendi®  Wilate®  Xyntha Kit®  Xyntha Solofuse® Syringe Kit | *N/A* |  |  |
| Sickle Cell Anemia Treatments | hydroxyurea |  | *Droxia®*  *Endari®* |  | *L-glutamine*  *Siklos®* |

IMMUNOLOGIC AND ONCOLOGY AGENTS

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Drug Class | Preferred | | Requires Prior Authorization | |
| Immunomodulators:  Cytokine and Cam Antagonists | Enbrel® (kit, mini cartridge, pen, syringe) | Humira®  Xeljanz® tablets  *Xeljanz® XR* | *ABRILADA*  *Actemra® (subcutaneous) adalimumab*  *Arcalyst® (subcutaneous)*  *Amjevita®*  *Bimzelx®*  *Cibinqo®*  *Cimzia®*  *Cosentyx®*  *Cyltezo®*  *Enbrel® (vial)*  *Enspryng®*  *Entyvio®*  *Hadlima®*  *Hulio®*  *Hyrimoz®*  *Idacio®*  *Ilaris ® (subcutane.)*  *Ilumya®*  *Kevzara®*  *Omvoh®* | *Kineret®*  *LITFULO*  *Olumiant®*  *Orencia®*  *Otezla®*  *Rinvoq® ER & LQ*  *Siliq®*  *Simlandi®*  *Simponi®*  *Skyrizi®*  *Sotyktu®*  *Spevigo®*  *Stelara®*  *Taltz®*  *Tyenne®*  *Tremfya®*  *Velsipity®*  *Xeljanz® solution* |
| Immunomodulators, Topical | Imiquimod (generic for Aldara) |  | *Condylox® gel Hyftor®*  *imiquimod (generic for*  *Zyclara)* | *Podofilox gel, solution*  *Veregen®*  *Zyclara®* |
| Immunomodulators Topical, Atopic Dermatitis | Adbry® autoinjector  Adbry® syringe  Dupixent® | Elidel® Eucrisa® tacrolimus topical | *Ebglyss® pen Opzelura® pimecrolimus* | *Zoryve® 0.15% crm, foam* |
| Immunosuppressants | azathioprine CellCept® susp cyclosporine, modified  cap | mycophenolate mofetil  cap & tab  Sirolimus tab & soln tacrolimus | *Astagraf XL®*  *Azasan®*  *CellCept® cap and tab cyclosporine cap cyclosporine modified soln cyclosporine softgel Envarsus® XR everolimus Imuran® mycophenolate mofetil*  *susp* | *mycophenolic acid*  *Myfortic®*  *Neoral®*  *Prograf®*  *Rapamune® tab & soln*  *Rezurock®*  *Sandimmune®*  *Tavneos®*  *Zortress®* |
| Methotrexate Agents | methotrexate tablets  (excluding dose-pack) | methotrexate vial methotrexate vial pf | *Jylamvo®*  *Otrexup® auto injector*  *Rasuvo® auto injector* | *Trexall®*  *Xatmep® soln* |

OPHTHALMICS

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Drug Class | Preferred | | Requires Prior Authorization | |
| Allergic Conjunctivitis Agents:  Antihistamines | azelastine ophth drops ketotifen OTC olopatadine once daily  OTC (gen. for Pataday®  Once Daily) | olopatadine twice a day  OTC (gen. for Pataday®  Twice Daily) | *Alrex® bepotastine Bepreve® epinastine Lastacaft® OTC loteprednol*  *olopatadine (gen. for*  *Patanol®)* | *olopatadine (gen. for*  *Pataday®)*  *Pataday® Once Daily OTC*  *Pataday® Twice Daily OTC*  *Pataday® XS Once Daily*  *OTC*  *Zaditor® OTC*  *Zerviate®* |
| Allergic Conjunctivitis Agents:  Mast Cell Stabilizers | cromolyn |  | *Alocril®* | *Alomide®* |
| Glaucoma Agents:  Alpha2 Adrenergic Agents | Alphagan P 0.1%®  Alphagan P 0.15%® | brimonidine 0.2% | *Apraclonidine brimonidine P 0.1%* | *brimonidine P 0.15%*  *Iopidine®* |
| Glaucoma Agents:  Beta Blockers | Combigan® | timolol maleate (generic  for Timoptic®) | *betaxolol Betimol® Betoptic S® carteolol Istalol® levobunolol* | *timolol (generic for Istalol®*  *& Timoptic® Ocudose) timolol-brimonidine*  *Timoptic® Ocudose*  *Timoptic® XE* |
| Glaucoma Agents:  Cholinergic Agonists |  |  | *pilopcarpine* | *Vuity®* |
| Glaucoma Agents:  Cholinesterase Inhibitors |  |  | *phospholine iodide* |  |
| Glaucoma Agents:  Carbonic Anhydrase Inhibitors | dorzolamide dorzolamide / timolol | Simbrinza® | *Azopt® brinzolamide*  *Cosopt®* | *Cosopt® PF*  *dorzolamide / timolol PF* |
| Glaucoma Agents:  Prostaglandin Agonists  \* Clinical criteria may apply | latanoprost | Travatan Z® | *bimatoprost Iyuzeh® Lumigan® tafluprost travoprost* | *Vyzulta®*  *Xalatan®*  *Xelpros®*  *Zioptan®* |
| Glaucoma Agents:  Rho Kinase Inhibitors and Others | Rhopressa® | Rocklatan® |  |  |
| Ophthalmic Antibiotics: Macrolides | erythromycin |  | *Azasite®* |  |
| Ophthalmic Antibiotics: Quinolones | ciprofloxacin drops *moxifloxacin (gen. Vigamox®)* | ofloxacin drops | *Besivance®*  *Ciloxan® ointment® gatifloxacin levofloxacin* | *moxifloxacin (gen. for Moxeza®*  *Ocuflox®*  *Vigamox®*  *Zymaxid®* |
| Ophthalmic Antibiotic-Steroid Combinations | neomycin / polymyxin /  dexamethasone  sulfacetamide / prednisolone | TobraDex® oint and susp *tobramycin /*  *dexamethasone susp* | *Maxitrol® drops* *Maxitrol® oint neomycin/bacitracin/*  *polymyxin/HC* | *neomycin/polymyxin/HC*  *Tobradex® ST*  *Zylet®* |

OPHTHALMICS

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Drug Class | Pref | erred | Requires Prior Authorization | |
| Ophthalmic Anti-Inflammatories: Corticosteroids | Pred Forte® | Pred Mild® | *dexamethasone opth difluprednate*  *Durezol® Flarex®*  *fluorometholone*  *FML®*  *FML Forte®* | *Inveltys® Lotemax® loteprednol Maxidex® prednisolone acetate prednisolone sodium*  *phosphate* |
| Ophthalmic Anti-Inflammatories: NSAIDs | diclofenac sodium | ketorolac ophth 0.5 | *Acular®*  *Acular® LS Acuvail® bromfenac BromSite®* | *flurbiprofen Ilevro®*  *ketorolac ophth 0.4 (LS)*  *Nevanac®*  *Prolensa®* |
| Ophthalmic Anti-Inflammatories: Immunomodulators | Restasis® | Xiidra® | *Cequa*®  *Cyclosporine*  *Eysuvis®*  *Miebo®* | *Tyrvaya®*  *Verkazia®*  *Vevye®* |

OTICS

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Drug Class | Pre | ferred | Requires Prior Authorization | |
| Otic Antibiotics | Ciprodex®  ciprofloxacin /  dexamethasone | neomycin/polymyxin/HC  soln and susp ofloxacin drops | *Cipro HC® ciprofloxacin otic ciprofloxacin HCl / fluocinolone* | *Cortisporin-TC®*  *Otovel®* |
| Otics, Anti-Inflammatories | fluocinolone otic oil |  | *DermOtic® otic drops* | *Flac® Otic Oil* |

RESPIRATORY

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Drug Class | Preferred | | Requires Prior Authorization | |
| Inhaled Antibiotics | tobramycin soln (gen. for Tobi) |  | *Arikayce*®  *Bethkis®*  *Cayston®*  *Kitabis® Pak* | *Tobi®*  *Tobi Podhaler® tobramycin pak*  *tobramycin soln (gen. for*  *Bethkis)* |
| COPD Agents | Anoro Ellipta®  Atrovent HFA®  Combivent Respimat® ipratropium / albuterol ipratropium bromide | roflumilast  Spiriva®  Spiriva Respimat®  Stiolto Respimat® | *Bevespi Aerosphere®*  *Daliresp®*  *Duaklir® Pressair*  *Incruse Ellipta®*  *Lonhala Magnair®* | *Seebri Neohaler® tiotropium Tudorza Pressair®*  *Utibron Neohaler®*  *Yupelri*® |
| Antihistamines, Non-Sedating | cetirizine solution cetirizine solution  5mg / 5mL (OTC) 30 cups (NDC 68094-004-62 packaged by  Precision Dose) cetirizine tablets (OTC) | levocetirizine tabs levocetirizine tabs (OTC) loratadine /  pseudoephedrine (OTC)  loratadine solution (OTC) loratadine tablet (OTC) | *cetirizine capsule (OTC) cetirizine chewable (OTC)*  *cetirizine solution*  *5 mg/5 ml (OTC)*  *(all other NDCs) cetirizine-D (OTC)*  *Clarinex®* | *Clarinex-D® desloratadine fexofenadine (OTC) fexofenadine-D (OTC) levocetirizine soln loratadine chew (OTC) loratadine ODT (OTC)* |
| Beta Agonists: Oral Agents | albuterol syrup |  | *albuterol ER albuterol tablet* | *metaproterenol syrup terbutaline* |

RESPIRATORY

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Drug Class | Preferred | | Requires Prior Authorization | |
| Beta Agonists: Short-Acting MDI\* | albuterol sulfate HFA  (generic for Proventil)  ProAir® HFA | Ventolin HFA® | *albuterol sulfate HFA*  *(generic for ProAir and*  Ventolin*) levalbuterol HFA ProAir® Digihaler* | *ProAir® RespiClick*  *Proventil HFA®*  *Xopenex HFA®* |
| Beta Agonists: Long-Acting MDI\*  \*COPD Only | Serevent® |  | *Arcapta®* | *Striverdi Respimat®* |
| Beta Agonists: Nebulizer\* | albuterol sulfate  albuterol (gen for  AccuNeb®) | arformoterol | *Brovana® formoterol levalbuterol inh soln &*  *conc* | *Perforomist®*  *Xopenex®* |
| Beta Agonists: Combination Products | Advair Diskus®  Advair HFA® | Dulera®  Symbicort® | *AirDuo®*  *Breo Ellipta®*  *Breztri*® *Aerosphere* | *formoterol-budesonide salmeterol-fluticasone*  *Trelegy Ellipta®* |
| Corticosteroids, Inhaled | Arnuity Ellipta®  Asmanex®  Asmanex HFA®  budesonide 0.25, 0.5 mg  & 1 mg respules | Flovent Diskus® Flovent HFA®  fluticasone propionate HFA (peds 12yrs & younger)  Pulmicort Flexhaler®  *QVAR®* | *Alvesco®*  *ArmonAir RespiClick®* | *fluticasone propionate HFA (people 13yr & older)*  *Pulmicort® 0.25, 0.5 mg & 1 mg respules* |
| Intranasal Corticosteroids | fluticasone propionate - Rx |  | *Beconase AQ®*  *budesonide nasal spray*  *Breyna®*  *Dymista®*  *flunisolide fluticasone-azelastine fluticasone propionate OTC* | *mometasone Nasonex®*  *Omnaris® Qnasl®*  *triamcinolone Nasal Spray*  *Xhance®*  *Zetonna®* |
| Intranasal Rhinitis Agents | azelastine (generic for Astelin) | ipratropium | *azelastine (generic for Astepro)* | *Patanase®* |
| Leukotriene Receptor Antagonists | montelukast chew tabs | montelukast tabs | *Accolate®*  *montelukast granules*  *Singulair®* | *zafirlukast zileuton ER*  *Zyflo®* |
| Self-Injectable Epinephrine | epinephrine 0.15 mg,  0.3 mg injector  (authorized generics for  EpiPen & EpiPen Jr.) | EpiPen®  EpiPen® Jr. | *epinephrine 0.15 mg &*  *0.3 mg (generic for*  *Adrenaclick®)* | *epinephrine 0.3 mg autoinjector (other generics for EpiPen)*  *Symjepi®* |
| Smoking Cessation Agents | bupropion SR  Chantix®  Chantix® dose pack nicotine gum OTC | nicotine lozenge OTC nicotine patch OTC varenicline varenicline dose pack | *Nicotrol*® *inhaler* | *Nicotrol*® *NS nasal spray* |

PAH AGENTS

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Drug Class | Pref | erred | Requires Prior Authorization | |
| Endothelin Receptor Antagonists and Other PAH agents | ambrisentan | Tracleer® tab | *Adempas® bosentan*  *Letairis®*  *Opsumit®* | *Orenitram® ER*  *Tadliq® suspension*  *Tracleer® susp*  *Uptravi®* |
| PAH, Inhalation | Tyvaso® | Ventavis® | *Tyvaso DPI* |  |
| PDE Inhibitors for PPH/PAH  \* Clinical criteria apply to this entire therapeutic class | sildenafil tabs | tadalafil | *Adcirca®*  *Revatio®*  *Opsynvi®* | *Liqrev® sildenafil susp*  *Tadliq®* |

TOPICAL AGENTS FOR ACNE

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Drug Class | Preferred | | Requires Prior Authorization | |
| Benzoyl Peroxide, Antibiotic, Combination and other Products | benzoyl peroxide 5% and  10% wash OTC benzoyl peroxide/  clindamycin (generic for  Duac) | clindamycin gel and solution erythromycin gel erythromycin-benzoyl  peroxide | *Acanya Gel pump®*  *Aczone®*  *Aklief®*  *Amzeeq®*  *BenzaClin® Benzamycin®*  *benzoyl peroxide 6% wash*  *OTC benzoyl peroxide lotion benzoyl peroxide*  *towelette* | *benzoyl peroxide /*  *clindamycin (gen for Acanya and BenzaClin)*  *Cabtreo®*  *Cleocin® topical Clindagel® clindamycin foam & swab dapsone*  *erythromycin sol & swab*  *Neuac®*  *Onexton®* |
| Topical Retinoids | adapalene gel OTC  Retin-A® cream | Retin-A® gel | *adapalene gel adapalene gel pump adapalene/benzoyl peroxide Altreno®*  *Arazlo®*  *Atralin® Avita®*  *clindamycin/tretinoin*  *Differin®*  *Epiduo® Forte* | *Fabior®*  *Retin-A® micro* *Retin-A® micro pump tazarotene Tazorac® Cream tretinoin tretinoin micro*  *Tretin-X®*  *Twyneo®*  *Ziana®* |

TOPICAL AND ORAL AGENTS FOR PSORIASIS AND ROSACEA

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Drug Class | Pref | erred | Requires Prior Authorization | |
| Oral Agents for Psoriasis | acitretin |  |  |  |
| Topical Agents for Psoriasis | calcipotriene crm calcipotriene oint | calcipotriene scalp soln | *calcipotriene foam*  *calcipotriene / betamethasone*  *calcitriol oint*  *Duobrii®* | *Enstilar®*  *Sorilux®*  *Taclonex®*  *Vtama®*  *Zoryve® 0.3% cream* |

TOPICAL AND ORAL AGENTS FOR PSORIASIS AND ROSACEA

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Drug Class | Pref | erred | Requires Prior Authorization | |
| Rosacea Agents | azelaic acid Finacea® gel | metronidazole gel | *brimonidine gel pump Finacea® foam ivermectin metronidazole crm &*  *lotion* | *Noritate® Rhofade®*  *Rosadan®* |

TOPICAL STEROIDS

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Drug Class | Preferred | | Requires Prior Authorization | |
| Low Potency Topical Steroids | Derma-Smoothe-FS® desonide cream hydrocortisone topical &  rectal creams | hydrocortisone topical  ointment | *alclometasone*  *dipropionate (crm, oint)*  *desonide (lotion & oint) fluocinolone 0.01% oil* | *hydrocortisone lotion*  *Hydroxym® gel*  *Texacort®* |
| Medium Potency Topical Steroids | fluocinolone acetonide  (oint & soln) fluticasone propionate  cream | hydrocortisone valerate  cream  mometasone furoate  (crm, oint & soln) | *Beser®*  *Beser® Kit betamethasone valerate*  *foam*  *clocortolone crm Cloderm® fluocinolone acetonide crm flurandrenolide (crm, lot, &*  *oint)*  *fluticasone propionate*  *lotion & oint* | *hydrocortisone butyrate (crm, emol, lot, oint & soln)*  *hydrocortisone valerate*  *ointment*  *Locoid® Lotion Pandel® prednicarbate (crm &*  *oint)*  *Synalar® kit (crm & oint)*  *Synalar® crm, oint & soln*  *Synalar® TS kit* |
| High Potency Topical Steroids | betamethasone  dipropionate lotion  betamethasone valerate  (crm & oint) | triamcinolone acetonide (crm & oint) | *amcinonide (cream) fluocinonide (crm, emol,*  *betamethasone gel, oint & soln) dipropionate (crm, gel, & halcinonide*  *oint) Halog® (crm, oint & soln)*  *betamethasone Kenalog Aerosol®*  *dipropionate / prop gly Topicort® (crm, gel, oint,*  *(crm, lot, & oint) spray) betamethasone valerate Topicort® LP cream lotion triamcinolone acetonide*  *desoximetasone (crm, gel aerosol & lotion oint & spray) triamcinolone /*  *diflorasone diacetate (crm dimethicone*  *& oint)*  *Vanos® Diprolene® oint* | |
| Very High Potency Topical Steroids | clobetasol propionate (crm, gel, oint, soln & spray) | halobetasol propionate (crm & oint) | *ApexiCon E® Bryhali® clobetasol foam, lotion & shampoo*  *clobetasol emollient cream Clodan® Kit halobetasol propionate foam* | *Impeklo®*  *Lexette®*  *Olux-E®*  *Temovate® oint*  *Tovet® Kit*  *Ultravate®* |