



**Office of Pharmacy Services
Medicaid Pharmacy Program
Preferred Drug List**

Effective Date: 01/01/2025

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.

cc-Clinical criteria can be found at the link [here](#)
hc- High cost form 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
Analgesics, Narcotics (Long Acting)	fentanyl patches (All strengths except 37.5mcg, 62.5mcg, 87.5mcg) ^{cc,ql} morphine sulfate SR (MS Contin) ^{ql}	<i>buprenorphine film (Belbuca)^{ql}</i> <i>buprenorphine patch (Butrans)^{ql}</i> <i>fentanyl 37.5mcg, 62.5mcg, 87.5mcg patches^{cc,ql}</i> <i>hydrocodone ER (Hysingla ER, Zohydro ER)^{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>
Analgesics, Narcotics (Short Acting)	acetaminophen/codeine (Tylenol w/ codeine) ^{ql} hydrocodone/acetaminophen tablets (Lorcet, Norco, Vicodin) ^{ql} hydromorphone tablets (Dilaudid) morphine sulfate tablets, solution oxycodone capsules, tablets, solution oxycodone/acetaminophen (Percocet) ^{ql} tramadol 50mg (Ultram) ^{ql} tramadol/acetaminophen (Ultracet) ^{ql}	<i>butalbital/acetaminophen/codeine/caffeine^{ql}</i> <i>butalbital/aspirin/codeine/caffeine^{ql}</i> <i>butalbital compound w/ codeine</i> <i>butorphanol nasal spray</i> <i>carisoprodol/codeine compound</i> <i>codeine tablets</i> <i>dihydrocodeine/acetaminophen/caffeine</i> <i>fentanyl buccal (Actiq, Fentora)^{cc,ql}</i> <i>hydrocodone/acetaminophen solution (Lortab)^{ql}</i> <i>hydrocodone/ibuprofen (Vicoprofen)</i> <i>hydromorphone solution, suppositories</i> <i>levorphanol</i> <i>meperidine (Demerol)</i> <i>morphine suppositories</i> <i>oxycodone concentrated solution</i> <i>oxycodone syringe</i> <i>oxycodone/acetaminophen (Prolate)^{ql}</i> <i>oxycodone/acetaminophen solution^{ql}</i> <i>oxymorphone (Opana)</i> <i>pentazocine/naloxone (Talwin NX)</i> <i>tramadol 25mg & 100mg (Ultram)^{ql}</i> <i>tramadol solution</i> <i>Dsuvia</i> <i>Seglentis</i>

cc-Clinical criteria can be found at the link [here](#)
 hc- High cost form 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>Anti-Migraine Agents, Other</p> <p>*Appears in 2 places within PDL document.</p>	<p>Ajovy (Step Therapy)^{cc,ql}</p> <p>Emgality 120mg/mL (Step Therapy)^{cc,ql}</p> <p>Nurtec ODT^{cc,ql}</p>	<p>Aimovig (Step Therapy)^{cc,ql}</p> <p>Emgality 100mg/mL (Step Therapy)^{cc,ql}</p> <p>Qulipta^{cc,ql}</p> <p>Reyvow^{cc,ql}</p> <p>Ubrelvy^{cc,ql}</p> <p>Vyepti^{cc,ql}</p> <p>Zavzpret^{cc,ql}</p>
<p>Anti-Migraine Agents, Triptans</p>	<p>naratriptan (Amerge)^{ql}</p> <p>rizatriptan, rizatriptan ODT (Maxalt, Maxalt MLT)^{ql}</p> <p>sumatriptan nasal, tablets, vial (Imitrex)^{ql}</p> <p>zolmitriptan (Zomig)^{ql}</p>	<p>almotriptan (Axert)^{ql}</p> <p>eletriptan (Relpax)^{ql}</p> <p>frovatriptan (Frova)^{ql}</p> <p>sumatriptan kit (Imitrex)^{ql}</p> <p>sumatriptan/naproxen (Treximet)^{ql}</p> <p>zolmitriptan nasal, zolmitriptan ODT</p> <p>Zomig nasal, (Zomig ZMT)^{ql}</p> <p>Tosymra</p> <p>Zembrace Symtouch</p>

cc-Clinical criteria can be found at the link [here](#)
 hc- High cost form 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	<i>Requires Prior Authorization</i>
Neuropathic Pain	capsaicin OTC duloxetine (Cymbalta) ^{cc,ql} gabapentin capsules, tablets (Neurontin) lidocaine patch (Lidoderm) ^{ql} pregabalin capsules ^{ql}	<i>duloxetine 40mg (Irenka)^{ql}</i> <i>gabapentin ER (Gralise)</i> <i>gabapentin solution (Neurontin)</i> <i>pregabalin XR (Lyrica CR)</i> <i>pregabalin solution</i> <i>DermacinRx Lidocaine Patch</i> <i>Drizalma Sprinkle^{cc}</i> <i>Horizant</i> <i>Lidocan Patch</i> <i>Qutenza Kit</i> <i>Savella</i> <i>Xyliderm</i> <i>ZTlido</i>

cc-Clinical criteria can be found at the link [here](#)
 hc- High cost form 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
Nonsteroidal Anti-Inflammatories (NSAIDs)	celecoxib (Celebrex) diclofenac sodium diclofenac gel (Voltaren Gel) ibuprofen Rx, OTC (Motrin) indomethacin (Indocin) meloxicam tablets (Mobic) nabumetone (Relafen) naproxen naproxen sodium OTC sulindac (Clinoril)	<i>diclofenac epolamine patch (Flector)^{cc,ql}</i> <i>diclofenac potassium capsule and tablet</i> <i>diclofenac topical solution (Pennsaid)</i> <i>diclofenac/misoprostol (Arthrotec)</i> <i>diclofenac SR (Voltaren XL)</i> <i>diflunisal (Dolobid)</i> <i>etodolac, etodolac XL (Lodine, Lodine XL)</i> <i>fenoprofen</i> <i>ibuprofen chewable tabs OTC</i> <i>ibuprofen/famotidine (Duexis)</i> <i>indomethacin ER (Indocin SR)</i> <i>indomethacin rectal</i> <i>ketoprofen, ketoprofen ER (Orudis, Oruvail)</i> <i>ketorolac (Toradol)</i> <i>ketorolac nasal spray (Sprix)</i> <i>meclofenamate (Meclomen)</i> <i>mefenamic acid (Ponstel)</i> <i>meloxicam capsules (Vivlodex)</i> <i>naproxen/esomeprazole (Vimovo)</i> <i>naproxen EC</i> <i>naproxen sodium RX</i> <i>naproxen CR, suspension</i> <i>oxaprozin (Daypro)</i> <i>piroxicam (Feldene)</i> <i>tolmetin sodium</i> <i>Lofena</i> <i>Licart Patch^{cc,ql}</i> <i>Relafen DS</i>

cc-Clinical criteria can be found at the link [here](#)
 hc- High cost form 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>Opioid Use Disorder Treatments</p>	<p>buprenorphine (Subutex)^{cc,ql} buprenorphine/naloxone tablets (Suboxone)^{ql} naloxone injectable (Narcan) naloxone nasal spray (Narcan nasal spray) (Brand and generic and OTC) naltrexone (Revia) ^{cc,ql} Brixadi Weekly^{cc,ql} Brixadi Monthly^{cc,ql} Opvee Nasal Spray Rextovy Nasal Spray Sublocade^{cc,ql} Suboxone film (Brand only)^{ql} Vivitrol^{cc,ql} Zubsolv^{ql}</p>	<p><i>buprenorphine/naloxone film (Suboxone) (generic only)</i>^{ql} Kloxxado Lucemyra^{cc,ql} Zimhi</p>
<p>Skeletal Muscle Relaxants</p>	<p>baclofen (Lioresal) chlorzoxazone (Parafon) cyclobenzaprine (Flexeril)^{ql} methocarbamol (Robaxin) orphenadrine ER (Norflex) tizanidine tablets (Zanaflex)</p>	<p><i>baclofen solution, suspension (Ozobax, Ozobax DS)</i> <i>carisoprodol (Soma)</i> <i>carisoprodol compound (Soma Compound)</i> <i>cyclobenzaprine ER (Amrix)</i>^{ql} <i>dantrolene (Dantrium)</i> <i>metaxalone (Skelaxin)</i> <i>orphenadrine/aspirin/caffeine</i> <i>tizanidine capsules (Zanaflex)</i> Lorzone Lyvispah</p>

cc-Clinical criteria can be found at the link [here](#)
 hc- High cost form 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.

ANTI-INFECTIVES

Drug Class	Preferred	Requires Prior Authorization
Antibiotics, GI	metronidazole tablets (Flagyl) neomycin tinidazole (Tindamax) vancomycin capsules (Vancocin) vancomycin solution (Firvanq)	<i>metronidazole capsules (Flagyl capsules)</i> <i>nitazoxanide tablets (Alinia)</i> <i>paromomycin</i> <i>vancomycin solution 250mg/5ml</i> <i>Aemcolo</i> <i>Difidia^{cc,ql}</i> <i>Rebyota enema</i> <i>Solosec</i> <i>Vowst</i> <i>Xifaxan^{cc,ql}</i>
Antibiotics, Inhaled	tobramycin inhalation solution (Tobi) ^{cc,ql} tobramycin solution (Bethkis) ^{cc,ql} Tobi Podhaler ^{cc,ql}	<i>tobramycin pak (Kitabis Pak)^{cc,ql}</i> <i>Arikayce^{cc,ql}</i> <i>Cayston^{cc,ql}</i>
Antibiotics, Topical	bacitracin OTC bacitracin/polymyxin OTC double antibiotic OTC gentamicin mupirocin ointment (Bactroban Ointment) neomycin/polymyxin/pramoxine OTC triple antibiotic OTC	<i>mupirocin cream (Bactroban Cream)</i> <i>Centany</i> <i>Xepi</i>
Antibiotics, Vaginal	clindamycin (Cleocin) metronidazole vaginal (Metrogel/Nuversa) Cleocin ovules	<i>Clindesse</i> <i>Vandazole</i> <i>Xaciatto</i>
Antifungals, Oral	clotrimazole troches (Mycelex) fluconazole (Diflucan) griseofulvin suspension (GriFulvin V) ketoconazole (Nizoral) nystatin suspension, tablets terbinafine (Lamisil)	<i>flucytosine (Ancobon)</i> <i>griseofulvin tablets (Gris Peg, GriFulvin V)</i> <i>itraconazole (Sporanox)</i> <i>posaconazole (Noxafil)</i> <i>voriconazole (Vfend)</i> <i>Brexafemme</i> <i>Cresemba</i> <i>Noxafil suspension Packet</i> <i>Oravig buccal</i> <i>Tolsura</i> <i>Vivjoa</i>

cc-Clinical criteria can be found at the link [here](#)
 hc- High cost form 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.

ANTI-INFECTIVES

Drug Class	Preferred	Requires Prior Authorization
Antifungals, Topical	ciclopirox cream, solution clotrimazole cream Rx, OTC clotrimazole/betamethasone cream (Lotrisone) ketoconazole cream, shampoo (Nizoral) miconazole cream OTC nystatin cream, ointment, powder nystatin/triamcinolone (Mycolog) terbinafine cream OTC tolnaftate cream, powder OTC	<i>ciclopirox gel, kit, shampoo, suspension</i> <i>clotrimazole solution Rx</i> <i>clotrimazole/betamethasone lotion (Lotrisone)</i> <i>econazole (Spectazole)</i> <i>ketoconazole foam (Ketodan)</i> <i>luliconazole (Luzu)^{cc,ql}</i> <i>miconazole powder, solution, spray OTC</i> <i>miconazole nitrate/zinc oxide/petrolatum (Vusion)</i> <i>naftifine (Naftin)</i> <i>oxiconazole cream (Oxistat)</i> <i>salicylic acid 3% ointment</i> <i>sulconazole nitrate cream, solution</i> <i>tavaborole (Kerydin)</i> <i>Ertaczo</i> <i>Jublia</i> <i>Oxistat lotion</i> <i>Tripenicol OTC cream</i>
Antiparasitics, Topical	permethrin Rx, OTC (Elimite, Acticin) pip butoxide/pyretherins/permethrin kit OTC piperonyl/pyrethrins OTC	<i>lindane shampoo</i> <i>malathion (Ovide)^{ql}</i> <i>spinosad (Natroba)^{cc,ql}</i> <i>Crotan</i> <i>Eurax</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, ointment (Zovirax) docosanol 10% cream (Abreva OTC)	<i>penciclovir (Denavir)</i> <i>Xerese</i>

cc-Clinical criteria can be found at the link [here](#)

hc- High cost form 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.

ANTI-INFECTIVES

Drug Class	Preferred	Requires Prior Authorization
Cephalosporins and Related Antibiotics	amoxicillin/clavulanate tablets, suspension (Augmentin, Augmentin ES) cefaclor capsules (Ceclor) cefadroxil capsules, suspension (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 tablets (Duricef)</i> <i>cefixime capsules, suspension (Suprax)</i> <i>cefpodoxime (Vantin)</i> <i>cephalexin tablets (Keflex)</i> <i>Augmentin 125 suspension</i> <i>Suprax chewable</i>
Fluoroquinolones, Oral	ciprofloxacin tablets (Cipro) levofloxacin tablets (Levaquin)	<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 tablets Epivir HBV solution	<i>adefovir dipivoxil (Hepsera)</i> <i>Baraclude solution</i> <i>Vemlidy</i>
Hepatitis C Agents	ribavirin (Copegus, Rebetol) sofosbuvir/velpatasvir (Epclusa) ^{cc} Mavyret ^{cc} Pegasys Vosevi ^{cc}	<i>ledipasvir/sofosbuvir (Harvoni)^{cc}</i> <i>Harvoni Pellet Pack^{cc}</i> <i>Sovaldi^{cc}</i> <i>Sovaldi Pellet Pack^{cc}</i> <i>Zepatier^{cc}</i>
Macrolides/Ketolides	azithromycin (Zithromax) clarithromycin tablets (Biaxin) erythromycin base DR capsule erythromycin ethyl succinate oral suspension (EryPed, E.E.S)	<i>clarithromycin suspension (Biaxin)</i> <i>clarithromycin ER (Biaxin XL)</i> <i>erythromycin base tablet</i> <i>erythromycin base tablet DR</i> <i>erythromycin ethylsuccinate tablet (E.E.S. 400)</i> <i>Erythrocin</i>

cc-Clinical criteria can be found at the link [here](#)
 hc- High cost form 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.

ANTI-INFECTIVES

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

cc-Clinical criteria can be found at the link [here](#)

hc- High cost form 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.

BLOOD MODIFIERS

Drug Class	Preferred	Requires Prior Authorization
Antihyperuricemics	allopurinol 100mg and 300mg (Zyloprim) colchicine tablets (Colcrys) ^{ql} febuxostat (Uloric) probenecid probenecid/colchicine	<i>allopurinol 200mg</i> <i>colchicine capsules (Mitigare)^{ql}</i> <i>Gloperba</i>
Colony Stimulating Factors	Fylnetra Neupogen	<i>Fulphila</i> <i>Granix syringe</i> <i>Granix vial</i> <i>Leukine</i> <i>Neulasta</i> <i>Nivestym</i> <i>Nyvepria</i> <i>Releuko</i> <i>Rolvedon</i> <i>Stimufend</i> <i>Udenyca^{cc,ql}</i> <i>Udenyca OnBody</i> <i>Zarxio</i> <i>Ziextenzo</i>
Erythropoiesis Stimulating Proteins	Aranesp Epogen Retacrit	<i>Mircera</i> <i>Procrit</i> <i>Reblozyl</i> <i>Retacrit Vifor</i>
Phosphate Binders	calcium acetate (PhosLo) sevelamer carbonate (Renvela) Calphron OTC	<i>lanthanum carbonate (Fosrenol)</i> <i>sevelamer carbonate powder pack (Renvela)</i> <i>sevelamer HCl (Renagel)</i> <i>Auryxia</i> <i>Fosrenol powder pack</i> <i>Magnebind 400Rx</i> <i>Phoslyra</i> <i>Velphoro</i> <i>Xphozah</i>

cc-Clinical criteria can be found at the link [here](#)
 hc- High cost form 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.

CARDIOVASCULAR

Drug Class	Preferred	Requires Prior Authorization
Angiotensin Modulator Combinations	amlodipine/benazepril (Lotrel) amlodipine/olmesartan (Azor) amlodipine/valsartan (Exforge)	<i>amlodipine/olmesartan/HCTZ (Tribenzor)</i> <i>amlodipine/telmisartan (Twynsta)</i> <i>amlodipine/valsartan/HCTZ (Exforge HCT)</i> <i>trandolapril/verapamil (Tarka)</i>
Angiotensin Modulators	benazepril, benazepril/HCTZ (Lotensin, Lotensin HCT) enalapril, enalapril/HCTZ (Vasotec, Vasoretic) irbesartan, irbesartan/HCTZ (Avapro, Avalide) lisinopril, lisinopril/HCTZ (Prinivil, Zestril, Prinzide, Zestoretic) losartan, losartan/HCTZ (Cozaar, Hyzaar) olmesartan, olmesartan/HCTZ (Benicar, Benicar HCT) quinapril, quinapril/HCTZ (Accupril, Accuretic) ramipril (Altace) valsartan, valsartan/HCTZ (Diovan, Diovan HCT) Entresto ^{cc,ql}	<i>aliskiren (Tekturna)</i> <i>candesartan, candesartan/HCTZ (Atacand, Atacand HCT)</i> <i>captopril, captopril/HCTZ (Capozide)</i> <i>enalapril solution (Epaned)</i> <i>eprosartan (Teveten)</i> <i>fosinopril, fosinopril/HCTZ (Monopril, Monopril HCT)</i> <i>moexipril (Univasc)</i> <i>perindopril (Aceon)</i> <i>telmisartan, telmisartan/HCTZ (Micardis, Micardis HCT)</i> <i>trandolapril (Mavik)</i> <i>valsartan solution</i> <i>Edarbi, Edarbyclor</i> <i>Entresto Sprinkle</i> <i>Qbrelis</i> <i>Tekturna HCT</i>
Anticoagulants	dabigatran (Pradaxa) ^{ql} enoxaparin (Lovenox) ^{ql} warfarin (Coumadin) Eliquis tablets Xarelto Dose Pack Xarelto tablets (except 2.5mg)	<i>fondaparinux (Arixtra)^{ql}</i> <i>Eliquis Dose Pack</i> <i>Fragmin^{ql}</i> <i>Pradaxa 110 mg</i> <i>Pradaxa Pellet Pack</i> <i>Savaysa</i> <i>Xarelto 2.5mg tablets^{cc,ql}</i> <i>Xarelto suspension</i>
Antihypertensives, Sympatholytics	clonidine patch (Catapres TTS) ^{ql} clonidine tablet (Catapres) guanfacine (Tenex) methyldopa (Aldomet)	<i>methyldopa/HCTZ (Aldoril)</i> <i>clonidine ER tablets (Nexiclon)</i>

cc-Clinical criteria can be found at the link [here](#)
 hc- High cost form 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.

CARDIOVASCULAR

Drug Class	Preferred	Requires Prior Authorization
Beta Blockers	atenolol, atenolol/chlorthalidone (Tenormin, Tenoretic) bisoprolol (Zebeta) bisoprolol/HCTZ (Ziac) carvedilol (Coreg) labetalol (Normodyne, Trandate) metoprolol succinate XL (Toprol XL) metoprolol tartrate (Lopressor) nadolol (Corgard) nebivolol (Bystolic) propranolol (Inderal) propranolol LA (Inderal LA) sotalol, sotalol AF (Betapace, Betapace AF)	<i>acebutolol (Sectral)</i> <i>betaxolol (Kerlone)</i> <i>carvedilol ER (Coreg CR)</i> <i>metoprolol/HCTZ (Lopressor HCT)</i> <i>pindolol (Visken)</i> <i>propranolol/HCTZ (Inderide)</i> <i>timolol (Blocadren)</i> <i>Hemangeol</i> <i>Kapsargo</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>levamlodipine (Conjupri)</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>Katerzia</i> <i>Norliqva</i> <i>Nymalize, Nymalize syringe</i>
Lipotropics, Other	cholestyramine colestipol tablet (Colestid) ezetimibe (Zetia) fenofibrate capsule, tablet (Lofibra) fenofibrate nanocrystals (Tricor) gemfibrozil (Lopid) niacin ER (Niaspan) omega-3 ethyl esters (Lovaza)	<i>colesevelam (Welchol)</i> <i>colestipol granules (Colestid)</i> <i>fenofibrate (Antara, Fenoglide, Lipofen, Triglide)</i> <i>fenofibric acid (Fibricor, Trilipix)</i> <i>icosapent ethyl (Vascepa)</i> <i>Evkeeza^{cc}</i> <i>Juxtapid^{cc}</i> <i>Leqvio^{cc}</i> <i>Nexletol^{cc,ql}</i> <i>Nexlizet^{cc,ql}</i> <i>Praluent^{cc,ql}</i> <i>Repatha^{cc,ql}</i>

cc-Clinical criteria can be found at the link [here](#)
 hc- High cost form 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.

CARDIOVASCULAR

Drug Class	Preferred	Requires Prior Authorization
Lipotropics, Statins	atorvastatin (Lipitor) ezetimibe/simvastatin (Vytorin) lovastatin (Mevacor) pravastatin (Pravachol) rosuvastatin (Crestor) simvastatin (Zocor)	<i>amlodipine/atorvastatin (Caduet)</i> <i>fluvastatin, fluvastatin ER (Lescol, Lescol XL)</i> <i>pitavastatin (Livalo)</i> <i>Atoprev</i> <i>Atorvaliq</i> <i>Ezallor Sprinkle</i> <i>Zypitamag</i>
Platelet Aggregation Inhibitors	clopidogrel (Plavix) ^{ql} dipyridamole (Persantine) ^{ql} prasugrel (Effient) ^{ql} Brilinta ^{ql}	<i>aspirin/dipyridamole (Aggrenox)^{ql}</i>
PAH Agents, Oral and Inhaled	ambrisentan (Letairis) bosentan tablets (Tracleer) sildenafil tablets (Revatio) ^{cc,ql} tadalafil (Adcirca) ^{cc,ql}	<i>sildenafil suspension (Revatio)^{cc,ql}</i> <i>Adempas</i> <i>Liqrev</i> <i>Opsumit^{cc,ql}</i> <i>Opsynvi^{cc}</i> <i>Orenitram ER^{cc,ql}</i> <i>Orenitram Titration kit</i> <i>Tadliq suspension</i> <i>Tracleer tablets for suspension</i> <i>Tyvaso, Tyvaso DPI^{cc}</i> <i>Uptravi^{cc,ql}</i> <i>Ventavis</i>

cc-Clinical criteria can be found at the link [here](#)
 hc- High cost form 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.

CENTRAL NERVOUS SYSTEM

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

Drug Class	Preferred	Requires Prior Authorization
Anticonvulsants	carbamazepine chewable, suspension, tablets (Tegretol) carbamazepine ER (Carbatrol) clobazam tablets (Onfi) ^{ql} clobazam suspension (Onfi) ^{cc,ql} clonazepam (Klonopin) diazepam rectal (Diastat, Diastat Acudial) divalproex, divalproex ER, divalproex sprinkle (Depakote, Depakote ER, Depakote Sprinkle) lacosamide solution, tablet (Vimpat) ^{ql} lamotrigine (Lamictal) levetiracetam tablets, solution (Keppra) oxcarbazepine tablets (Trileptal) phenobarbital phenytoin, phenytoin ER (Dilantin, Dilantin Infatabs, Phenytek) primidone (Mysoline) tiagabine (Gabitril) topiramate (Topamax) topiramate sprinkles (Topamax Sprinkles) valproic acid (Depakene) zonisamide (Zonegran) Nayzilam Sezaby Trileptal suspension (Brand only) Valtoco	carbamazepine XR (Tegretol XR) clonazepam ODT (Klonopin ODT) ethosuximide (Zarontin) felbamate (Felbatol) lamotrigine dose pack lamotrigine XR (Lamictal XR) lamotrigine ODT (Lamictal ODT) levetiracetam ER (Keppra XR) methsuximide (Celontin) rufinamide suspension, tablets (Banzel) ^{cc,ql} topiramate ER (Qudexy XR) ^{cc,ql} topiramate ER (Trokendi XR) ^{cc,ql} Aptiom ^{cc} Briviact Diacomit capsules, powder pack Dilantin 30 mg capsules Elepsia XR Epidiolex ^{cc,ql} Eprontia solution Equetro Fintepla ^{cc} Fycompa ^{cc} Lamictal XR dose pack Libervant Motpoly XR Oxtellar XR Sabril powder pack, tablets ^{cc} (Brand only) Spritam Sympazan ^{cc,ql} Vigafyde solution Vimpat starter pack Xcopri Zonisade Ztalmy

cc-Clinical criteria can be found at the link [here](#)
 hc- High cost form 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.

CENTRAL NERVOUS SYSTEM

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

Drug Class	Preferred	Requires Prior Authorization
Antidepressants, Other	bupropion, bupropion SR, bupropion XL (Wellbutrin, Wellbutrin SR, Wellbutrin XL) desvenlafaxine ER (Pristiq) mirtazapine, mirtazapine ODT (Remeron, Remeron ODT) trazodone (Desyrel) venlafaxine (Effexor) venlafaxine ER capsules (Effexor XR) vilazodone (Viibryd)	<i>bupropion XL (Forfivo XL)</i> <i>desvenlafaxine fumarate ER</i> <i>nefazodone (Serzone)</i> <i>phenelzine (Nardil)</i> <i>tranylcypromine (Parnate)</i> <i>venlafaxine besylate ER</i> <i>venlafaxine ER tablets</i> <i>Aplenzin</i> <i>Auvelity^{cc}</i> <i>Emsam</i> <i>Fetzima</i> <i>Marplan</i> <i>Spravato^{cc,ql}</i> <i>Trintellix</i> <i>Zulresso^{cc,ql}</i> <i>Zurzuva^{cc,ql}</i>

cc-Clinical criteria can be found at the link [here](#)

hc- High cost form 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.

CENTRAL NERVOUS SYSTEM

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

Drug Class	Preferred	<i>Requires Prior Authorization</i>
Antidepressants, Selective Serotonin Reuptake Inhibitors (SSRIs)	citalopram tablets, solution (Celexa) ^{ql} escitalopram solution and tablets (Lexapro) fluoxetine capsules, solution, tablets (all strengths except 60mg and weekly) (Prozac) fluvoxamine (Luvox) paroxetine (Paxil) sertraline tablets, concentrated solution (Zoloft)	<i>citalopram capsules</i> <i>fluoxetine 60mg</i> <i>fluoxetine weekly (Prozac Weekly)</i> <i>fluvoxamine ER (Luvox CR)</i> <i>paroxetine CR (Paxil CR)</i> <i>paroxetine mesylate 7.5mg capsules</i> <i>(Brisdelle)^{cc,ql}</i> <i>paroxetine suspension (Paxil)</i> <i>sertraline capsules</i>

cc-Clinical criteria can be found at the link [here](#)

hc- High cost form 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.

CENTRAL NERVOUS SYSTEM

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

Drug Class	Preferred	Requires Prior Authorization
Anti-Migraine Agents, Other *Excluded from the Mental Health Formulary.	Ajoovy (Step Therapy) ^{cc,ql} Emgality 120mg/mL (Step Therapy) ^{cc,ql} Nurtec ODT ^{cc,ql}	Aimovig (Step Therapy) ^{cc,ql} Emgality 100mg/mL (Step Therapy) ^{cc,ql} Qulipta ^{cc,ql} Reyvow ^{cc,ql} Ubrelvy ^{cc,ql} Vyepti ^{cc,ql} Zavzpret ^{cc,ql}

cc-Clinical criteria can be found at the link [here](#)
 hc- High cost form 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.

CENTRAL NERVOUS SYSTEM

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

Drug Class	Preferred	Requires Prior Authorization
Antipsychotics Antipsychotic Review Programs	<p>1st Tier</p> <ul style="list-style-type: none"> 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} haloperidol lactate oral, IM loxapine capsules (Loxitane) lurasidone (Latuda)^{ql} olanzapine IM (Zyprexa IM)^{ql} olanzapine ODT (Zyprexa Zydis)^{ql} olanzapine tablets (Zyprexa)^{ql} paliperidone (Invega)^{ql} perphenazine (Trilafon) pimozide (Orap) quetiapine (Seroquel)^{ql} quetiapine ER (Seroquel XR)^{ql} risperidone, risperidone ODT thioridazine (Mellaril) thiothixene (Navane) trifluoperazine (Stelazine) ziprasidone (Geodon)^{ql} ziprasidone IM (Geodon IM) Abilify Asimtufii^{ql} Abilify Maintena^{ql} Aristada^{ql} Aristada Initio^{ql} Invega Hafyera^{cc,ql} Invega Sustenna^{ql} Invega Trinza^{cc,ql} Perseris^{ql} Risperdal Consta^{ql} (Brand only) <p>2nd Tier</p> <ul style="list-style-type: none"> Vraylar^{cc,ql} 	<ul style="list-style-type: none"> asenapine (Saphris)^{cc,ql} clozapine ODT (Fazaclor)^{cc} molindone^{cc} olanzapine/fluoxetine (Symbyax)^{cc,ql} perphenazine/amitriptyline (Triavil) risperidone intramuscular (Risperdal Consta) (generic only) Abilify MyCite^{cc} Adasuve Caplyta^{cc} Fanapt^{cc,ql} Lybalvi^{cc,ql} Nuplazid^{cc,ql} Rexulti^{cc,ql} Rykindo^{cc,ql} Secuado^{cc} Uzedy^{cc,ql} Versacloz^{cc} Zyprexa Relprevv^{cc,ql}

cc-Clinical criteria can be found at the link [here](#)
 hc- High cost form 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.

CENTRAL NERVOUS SYSTEM

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

Drug Class	Preferred	Requires Prior Authorization
Sedative Hypnotics	eszopiclone (Lunesta)(Step Therapy) ^{cc,ql} ramelteon (Rozerem) ^{ql} temazepam 15mg, 30mg (Restoril) ^{ql} triazolam (Halcion) ^{ql} zaleplon (Sonata) ^{ql} zolpidem tablet (Ambien) ^{ql} zolpidem ER (Ambien CR)	doxepin (Silenor) estazolam (ProSom) ^{ql} flurazepam ^{ql} quazepam (Doral) ^{ql} temazepam 7.5mg, 22.5mg ^{ql} tasimelteon (Hetlioz) ^{cc,ql} zolpidem capsules ^{ql} zolpidem SL (Intermezzo) ^{ql} Belsomra ^{cc,ql} Dayvigo ^{cc,ql} Edluar ^{ql} Hetlioz LQ ^{cc} Igalmi Quviviq ^{cc}

cc-Clinical criteria can be found at the link [here](#)
 hc- High cost form 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.

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) amphetamine salt combo ER (Adderall XR) (Brand and generic) atomoxetine (Strattera) ^{cc} clonidine ER tablets (Kapvay) ^{cc,ql} dexmethylphenidate tablets (Focalin) dexmethylphenidate XR (Focalin XR) (Brand and generic) dextroamphetamine capsules (Dexedrine ER) dextroamphetamine tablets guanfacine ER (Intuniv) ^{cc,ql} lisdexamfetamine chewable tablets (Vyvanse) ^{cc} methylphenidate CD capsules (Metadate CD) methylphenidate ER tablets (Ritalin SR, Metadate ER) methylphenidate oral solution (Methylin) methylphenidate tablets (Ritalin) modafinil (Provigil) ^{cc,ql} Concerta (Brand only) Daytrana (Brand only) Qelbree ^{cc,ql} Quillivant XR Ritalin LA (Brand only) Vyvanse capsules (Brand only)	Amphetamine salt comb ER (Mydayis) amphetamine sulfate (Evekeo) armodafinil (Nuvigil) ^{cc,ql} dextroamphetamine solution (Procentra) lisdexamfetamine capsules (generic only) methamphetamine (Desoxyn) methylphenidate chewable (Methylin chewable) methylphenidate CR tablets (All strengths except 72mg) (Concerta) (generic only) methylphenidate CR tablets (Relexxii) methylphenidate ER capsules (Aptensio XR) methylphenidate ER capsules (Ritalin LA) (generic only) methylphenidate patch TD24 (Daytrana) (generic only) Adzenys XR ODT ^{cc} Azstarys Cotempla XR ODT Dyanavel XR suspension, tablet Evekeo ODT Jornay PM Mydayis ER Onyda XR suspension ^{cc} Quillichew ER Sunosi ^{cc,ql} Wakix ^{cc,ql} Xelstrym Zenzedi

cc-Clinical criteria can be found at the link [here](#)
 hc- High cost form 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.

ENDOCRINE

Drug Class	Preferred	Requires Prior Authorization
Androgenic Agents	testosterone gel packet (Vogelxo) testosterone gel pump (Androgel) Androderm ^{cc,ql}	<i>testosterone gel packet (Androgel)</i> <i>testosterone gel (Vogelxo)</i> <i>testosterone gel pump (Axiron)</i> <i>testosterone gel pump (Fortesta)</i> <i>Natesto</i> <i>Testim</i>
Bone Resorption Suppression and Related Agents	alendronate tablets (Fosamax) ^{ql} calcitonin salmon nasal (Miacalcin) ^{ql} ibandronate (Boniva) ^{ql} risedronate (Actonel) ^{ql}	<i>alendronate solution (Fosamax Solution)^{ql}</i> <i>rалoxifene (Evista)^{ql}</i> <i>risedronate DR (Atelvia)^{ql}</i> <i>teriparatide(Forteo)^{cc,ql}</i> <i>Binosto</i> <i>Evenity^{cc}</i> <i>Fosamax Plus D^{ql}</i> <i>Prolia^{cc,ql}</i> <i>Teriparatide^{cc,ql}</i> <i>Tymlos^{cc,ql}</i>
Growth Hormone	Genotropin ^{cc} Norditropin ^{cc}	<i>Humatrope^{cc}</i> <i>Nutropin AQ^{cc}</i> <i>Ngenla^{cc}</i> <i>Omnitrope^{cc}</i> <i>Saizen^{cc}</i> <i>Serostim^{cc}</i> <i>Skytrofa</i> <i>Sogroya^{cc}</i> <i>Zomacton^{cc}</i>

cc-Clinical criteria can be found at the link [here](#)
 hc- High cost form 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.

ENDOCRINE

Drug Class	Preferred	Requires Prior Authorization
Hypoglycemics, Incretin Mimetics and Enhancers	saxagliptin (Onglyza) Byetta Glyxambi ^{cc,ql} Janumet, Janumet XR Januvia Jentadueto Ozempic Tradjenta Trulicity Victoza ^{ql}	<i>alogliptin (Nesina)</i> <i>alogliptin/metformin (Kazano)</i> <i>alogliptin/pioglitazone (Oseni)</i> <i>saxagliptin/metformin ER (Kombiglyze XR)</i> <i>Bydureon BCise</i> <i>Jentadueto XR</i> <i>Mounjaro</i> <i>Qtern^{cc,ql}</i> <i>Rybelsus</i> <i>Soliqua</i> <i>Steglujan^{cc,ql}</i> <i>Symlin</i> <i>Trijardy XR^{cc,ql}</i> <i>Xultophy</i> <i>Zituvio</i>
Hypoglycemics, Insulins	insulin aspart (Novolog) insulin aspart mix 70/30 (Novolog 70/30 Mix) insulin glargine (Lantus and Lantus Solostar) (Brand and generic) insulin lispro pen, vial (Humalog pen, vial) insulin lispro Junior Kwikpen (Humalog Junior Kwikpen) insulin lispro mix 75/25 pen (Humalog Mix 75/25 pen) Humalog cartridge Humalog Mix 50/50 pen, vial Humalog Mix 75/25 vial Humulin vial Humulin 70/30 pen, vial Humulin R U-500 pen, vial	<i>insulin degludec (Tresiba)</i> <i>Insulin glargine pen & max pen (Toujeo, Toujeo Max)</i> <i>insulin glargine-YFGN (Semglee-YFGN)</i> <i>Admelog</i> <i>Afrezza</i> <i>Apidra</i> <i>Basaglar, Basaglar Tempo</i> <i>Fiasp</i> <i>Fiasp pumpcart</i> <i>Humalog 200 unit/mL pen</i> <i>Humalog Tempo</i> <i>Humulin pen</i> <i>Levemir</i> <i>Lyumjev, Lyumjev Tempo</i> <i>Novolin pen, vial</i> <i>Novolin 70/30</i> <i>Rezvoglar Kwikpen</i>
Hypoglycemics, Meglitinides	nateglinide (Starlix) repaglinide (Prandin)	

cc-Clinical criteria can be found at the link [here](#)
 hc- High cost form 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.

ENDOCRINE

Drug Class	Preferred	Requires Prior Authorization
Hypoglycemics, Metformins	glipizide/metformin (Metaglip) glyburide/metformin (Glucovance) metformin (Glucophage) metformin ER (Glucophage XR)	metformin 625 mg metformin ER (Fortamet) ^{cc,ql} metformin ER (Glumetza) ^{cc,ql} metformin solution (Riomet) Riomet ER suspension
Hypoglycemics, SGLT2 Inhibitors	dapagliflozin/metformin (Xigduo XR) ^{cc,ql} Farxiga ^{cc,ql} (Brand only) Invokana ^{cc,ql} Jardiance ^{cc,ql}	dapagliflozin ^{cc,ql} (generic only) Inpefa ^{cc} 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}
Hypoglycemics, TZDs	pioglitazone (Actos) pioglitazone/metformin (ActoPlusMet)	pioglitazone/glimepiride (Duetact)

cc-Clinical criteria can be found at the link [here](#)
 hc- High cost form 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.

GASTROINTESTINAL

Drug Class	Preferred	Requires Prior Authorization
Antiemetic/Antivertigo Agents	dimenhydrinate OTC meclizine Rx, OTC (Bonine, Antivert) metoclopramide solution, tablets, vial (Reglan) ondansetron ODT, solution, tablets, vial (Zofran) ^{ql} prochlorperazine tablets (Compazine) promethazine injectable, solution, tablets (Phenergan) promethazine suppositories (except 50mg) scopolamine patches (TransDerm Scop)	<i>aprepitant capsules, tripack (Emend)^{ql}</i> <i>dimenhydrinate Rx</i> <i>doxylamine/pyridoxine (Diclegis)^{cc,ql}</i> <i>dronabinol (Marinol)^{cc,ql}</i> <i>fosaprepitant dimeglumine IV (Emend)</i> <i>granisetron (Kytril)^{ql}</i> <i>ondansetron syringe (Zofran)</i> <i>palonosetron (Aloxi)</i> <i>phosphoric acid/dextrose/fructose solution</i> <i>prochlorperazine injectable, suppositories (Compro)</i> <i>promethazine 50mg suppositories</i> <i>trimethobenzamide (Tigan)</i> Anzemet Akynzeo capsules ^{cc} Akynzeo IV ^{cc} Barhemsys Vial Bonjesta Cinvanti <i>Emend powder packets^{ql}</i> Focinvez Vial Gimoti Sancuso ^{ql} Sustol
Bile Salts	ursodiol capsules (Actigall) ursodiol tablets (URSO, URSO Forte)	<i>Bylway Capsule, Pellet^{cc}</i> Chenodal Cholbam Iqirvo Livdelzi Livmarli Ocaliva Reltone
GI Motility, Chronic	lubiprostone (Amitiza) ^{cc,ql} Linzess ^{cc,ql} Movantik ^{cc,ql}	<i>alosecron (Lotronex)</i> Ibsrela Motegrity ^{cc,ql} Relistor ^{cc,ql} Symproic ^{cc,ql} Trulance ^{cc,ql} Viberzi ^{cc,ql}

cc-Clinical criteria can be found at the link [here](#)
 hc- High cost form 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.

GASTROINTESTINAL

Drug Class	Preferred	Requires Prior Authorization
Pancreatic Enzymes	Creon ^{ql} Zenpep ^{ql}	Pertzye ^{ql} Viokace ^{ql}
Proton Pump Inhibitors	esomeprazole packet for suspension (Nexium) lansoprazole capsules (Prevacid) lansoprazole ODT (Prevacid Solutab) omeprazole capsules (Prilosec) pantoprazole suspension, tablets (Protonix)	dexlansoprazole (Dexilant) esomeprazole magnesium (Nexium) esomeprazole OTC lansoprazole OTC omeprazole OTC omeprazole/sodium bicarb (Zegerid) rabeprazole (Aciphex) Konvomep Prilosec suspension
Ulcerative Colitis Agents	balsalazide (Colazal) mesalamine ER (Pentasa) (Brand and generic) mesalamine rectal (Canasa) sulfasalazine, sulfasalazine DR (Azulfidine, Azulfidine DR)	budesonide ER (Uceris) budesonide rectal foam (Uceris rectal) mesalamine DR (Lialda) mesalamine DR (Delzicol) mesalamine ER (Apriso) mesalamine HD (Asacol HD) mesalamine kit mesalamine rectal (Rowasa) Dipentum
Urea Cycle Disorders	carglumic acid sodium phenylbutyrate powder and tablet Pheburane	Olpruva ^{cc} Ravicti ^{cc}

cc-Clinical criteria can be found at the link [here](#)
 hc- High cost form 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.

Drug Class	Preferred	Requires Prior Authorization
Cytokine and CAM Antagonists	adalimumab-ADAZ (Hyrimoz) adalimumab-ADBM (Cyltezo) (Brand and generic) adalimumab-AATY (Yuflyma) infliximab (Remicade) ^{cc} Enbrel Hadlima Humira Otezla (Step Therapy) ^{cc,ql} Tyenne syringe	<i>adalimumab-AACF (Idacio)</i> <i>adalimumab-ADBM</i> <i>adalimumab-FKJP (Hulio)</i> <i>adalimumab-RYVK (Simlandi)</i> <i>Abrilada</i> <i>Actemra</i> ^{cc} <i>Amjevita Autoinjector, Syringe</i> <i>Arcalyst</i> ^{cc} <i>Avsola</i> ^{cc} <i>Bimzelx</i> ^{cc} <i>Cibinqo</i> ^{cc,ql} <i>Cimzia</i> ^{cc} <i>Cosentyx</i> ^{cc} <i>Enspryng</i> ^{cc} <i>Entyvio</i> ^{cc} <i>Ilaris</i> ^{cc,ql} <i>Ilumya</i> ^{cc} <i>Inflectra</i> ^{cc} <i>Kevzara</i> ^{cc} <i>Kineret</i> ^{cc,ql} <i>Litfulo</i> <i>Olumiant</i> ^{cc,ql} <i>OmvoH</i> ^{cc} <i>Orencia</i> ^{cc,ql} <i>Renflexis</i> ^{cc} <i>Rinvoq ER, Rinvoq LQ</i> ^{cc} <i>Siliq</i> ^{cc} <i>Simponi, Simponi Aria</i> ^{cc} <i>Skyrizi, Skyrizi On-body, Skyrizi vial</i> ^{cc} <i>Sotyktu</i> ^{cc} <i>Spevigo</i> ^{cc} <i>Stelara</i> ^{cc,ql} <i>Taltz</i> ^{cc,ql} <i>Tofidence</i> <i>Tremfya</i> ^{cc} <i>Tyenne autoinjector and vial</i> <i>Uplizna</i> ^{cc} <i>Velsipity</i> ^{cc} <i>Xeljanz (tablet, solution), Xeljanz XR</i> ^{cc,ql} <i>Yusimry</i>

cc-Clinical criteria can be found at the link [here](#)

hc- High cost form 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.

IMMUNOLOGICS

Drug Class	Preferred	Requires Prior Authorization
Cytokine and CAM Antagonists		<i>Zymfentra</i>
Immunosuppressives, Oral	azathioprine cyclosporine modified capsules, solution (Neoral) mycophenolic acid (Myfortic) mycophenolate mofetil capsules, suspension, tablets (Cellcept) sirolimus (Rapamune) tacrolimus (Prograf)	<i>cyclosporine capsules (Sandimmune)</i> <i>cyclosporine modified softgel (Gengraf)</i> <i>everolimus (Zortress)</i> <i>Astagraf XL</i> <i>Envarsus XR</i> <i>Myhibbin suspension</i> <i>Prograf Granules Pack</i> <i>Rezurock</i> <i>Sandimmune solution</i> <i>Tavneos</i>

NEUROLOGICS

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

cc-Clinical criteria can be found at the link [here](#)

hc- High cost form 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.

NEUROLOGICS

Drug Class	Preferred	Requires Prior Authorization
Antiparkinson's Agents	amantadine (Symmetrel) benzotropine (Cogentin) carbidopa/levodopa IR (Sinemet) carbidopa/levodopa ER (Sinemet CR) carbidopa/levodopa/entacapone (Stalevo) entacapone (Comtan) pramipexole (Mirapex) ropinirole (Requip) selegiline (Eldepryl) trihexyphenidyl (Artane)	apomorphine (Apokyn) bromocriptine (Parlodel) carbidopa (Lodosyn) carbidopa/levodopa ODT (Parcopa) pramipexole ER (Mirapex ER) rasagiline (Azilect) ropinirole ER (Requip XL) tolcapone (Tasmar) Crexont Dhivy Duopa ^{cc} Gocovri Inbrija Neupro Nourianz Ongentys Osmolex ER Rytary Xadago Zelapar
Multiple Sclerosis Agents	dalfampridine ER (Ampyra) ^{cc,ql} dimethyl fumarate DR (Tecfidera) ^{ql} fingolimod (Gilenya) ^{cc,ql} glatiramer acetate 20mg/ml, 40mg/ml Avonex Betaseron kit	teriflunomide (Aubagio) ^{cc,ql} Bafiertam ^{cc,ql} Briumvi ^{cc} Extavia kit ^{cc,ql} Kesimpta ^{cc} Lemtrada ^{cc,ql} Mavenclad ^{cc,ql} Mayzent ^{cc} Ocrevus ^{cc,ql} Plegridy, Plegridy IM ^{cc,ql} Ponvory starter pack, tablet ^{cc,ql} Rebif Tascenso ODT Tysabri ^{cc,ql} Vumerity ^{cc,ql} Zeposia ^{cc,ql}

cc-Clinical criteria can be found at the link [here](#)
 hc- High cost form 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.

OPHTHALMICS

Drug Class	Preferred	Requires Prior Authorization
Ophthalmics, Allergic Conjunctivitis	azelastine (Optivar) cromolyn (Crolom) ketotifen OTC (Zaditor OTC) loteprednol etabonate (Alrex) olopatadine RX (Pataday) olopatadine (Patanol)	<i>bepotastine (Bepreve)</i> <i>epinastine (Elestat)</i> <i>Alocril</i> <i>Alomide</i> <i>Zerviate</i>
Ophthalmics, Antibiotics	bacitracin/polymyxin B ointment ciprofloxacin solution (Ciloxan) erythromycin gentamicin (Garamycin) moxifloxacin (Vigamox) neomycin/bacitracin/polymyxin ointment ofloxacin (Ocuflox) polymyxin/trimethoprim (Polytrim) sulfacetamide solution (Bleph-10) tobramycin (Tobrex Drops) Ciloxan ointment Tobrex ointment	<i>bacitracin</i> <i>gatifloxacin (Zymaxid)</i> <i>moxifloxacin (Moxeza)</i> <i>neomycin/polymyxin/gramicidin (Neosporin)</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>Tobradex ST</i> <i>Zylet</i>

cc-Clinical criteria can be found at the link [here](#)
 hc- High cost form 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.

OPHTHALMICS

Drug Class	Preferred	<i>Requires Prior Authorization</i>
Ophthalmics, Glaucoma Agents	brimonidine 0.2% brimonidine 0.15% (Alphagan P) brimonidine/timolol (Combigan) carteolol (Ocupress) dorzolamide (Trusopt) dorzolamide/timolol (Cosopt) latanoprost (Xalatan) levobunolol (Betagan) pilocarpine (Pilocar) timolol (Timoptic, Timoptic XE) travoprost (Travatan Z) Rhopressa Rocklatan	<i>apraclonidine (Iopidine)</i> <i>betaxolol</i> <i>bimatoprost 0.03% (Lumigan)</i> <i>brimonidine 0.1% (Alphagan P)</i> <i>brinzolamide (Azopt)</i> <i>dorzolamide/timolol PF</i> <i>tafluprost (Zioptan)</i> <i>timolol (Istalol)</i> <i>timolol (Timoptic Ocudose)</i> <i>Betimol</i> <i>Betoptic S</i> <i>Durysta Implant</i> <i>Iyuzeh</i> <i>Lumigan 0.01%</i> <i>Phospholine Iodide</i> <i>Simbrinza</i> <i>Vuity</i> <i>Vyzulta</i> <i>Xelpros</i>

cc-Clinical criteria can be found at the link [here](#)
 hc- High cost form 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.

OPHTHALMICS

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

OTIC

Drug Class	Preferred	Requires Prior Authorization
Otic Antibiotics	ciprofloxacin/dexamethasone (Ciprodex) neomycin/polymyxin/HC (Cortisporin) ofloxacin (Floxin otic)	<i>ciprofloxacin</i> <i>ciprofloxacin/fluocinolone</i> <i>Cipro HC</i> <i>Cortisporin TC</i>

cc-Clinical criteria can be found at the link [here](#)
 hc- High cost form 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.

RESPIRATORY

Drug Class	Preferred	Requires Prior Authorization
Antihistamines, Minimally Sedating	cetirizine, cetirizine D tablets, solution, Rx, OTC (Zyrtec, Zyrtec D) desloratadine (Clarinx) fexofenadine tablets, OTC (Allegra OTC) levocetirizine tablets Rx, OTC (Xyzal) loratadine, loratadine D, loratadine ODT; Rx, OTC (Claritin, Claritin D)	<i>cetirizine capsules, chewable, 5mg/5mL solution OTC</i> <i>desloratadine ODT (Clarinx RDT)</i> <i>fexofenadine D OTC (Allegra D)</i> <i>levocetirizine solution (Xyzal)</i> <i>loratadine chewable OTC Clarinx D</i>
Bronchodilators, Beta Agonists	albuterol HFA (Proair HFA, Proventil HFA, Ventolin HFA) ^{ql} albuterol neb 0.083%, 5mg/ml albuterol neb 0.63mg/3ml, 1.25mg/3ml (AccuNeb) albuterol syrup (Proventil, Ventolin) Serevent	<i>albuterol tablets</i> <i>albuterol ER (Vospire ER)</i> <i>arformoterol (Brovana)</i> <i>formoterol (Perforomist)</i> <i>levalbuterol neb (Xopenex)</i> <i>levalbuterol HFA (Xopenex HFA) ^{ql}</i> <i>terbutaline (Brethine)</i> <i>ProAir Digihaler</i> <i>ProAir Respiclick ^{ql}</i> <i>Striverdi Respimat</i>

cc-Clinical criteria can be found at the link [here](#)
 hc- High cost form 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.

RESPIRATORY

Drug Class	Preferred	<i>Requires Prior Authorization</i>
COPD Agents	ipratropium neb (Atrovent) ipratropium/albuterol neb (DuoNeb) roflumilast (Daliresp) Anoro Ellipta Atrovent HFA Combivent Respimat ^{ql} Spiriva Handihaler (Brand only) Spiriva Respimat Stiolto Respimat	tiotropium (Spiriva Handihaler) generic only <i>Bevespi Aerosphere</i> <i>Duaklir Pressair</i> <i>Incruse Ellipta</i> <i>Ohtuvayre</i> <i>Tudorza Pressair</i> <i>Yupelri</i>

cc-Clinical criteria can be found at the link [here](#)
 hc- High cost form 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.

RESPIRATORY

Drug Class	Preferred	Requires Prior Authorization
Glucocorticoids, Inhaled	budesonide inhalation suspension (Pulmicort Respules) fluticasone propionate (Flovent HFA) (Brand and Generic) fluticasone/salmeterol HFA (Advair HFA) Arnuity Ellipta Asmanex Twisthaler and HFA Dulera QVAR Redihaler Symbicort (Brand only) Trelegy Ellipta	<i>budesonide/formoterol (Symbicort) (generic only)</i> <i>fluticasone/salmeterol (Advair Diskus)</i> <i>fluticasone/salmeterol (AirDuo RespiClick)</i> <i>fluticasone/vilanterol (Breo Ellipta)</i> <i>AirDuo Digihaler</i> <i>AirSupra HFA</i> <i>Alvesco</i> <i>ArmonAir Digihaler</i> <i>Breztri Aerosphere</i> <i>Flovent Diskus</i> <i>Pulmicort Flexhaler^{ql}</i>
Intranasal Rhinitis Agents	azelastine nasal (Astelin) fluticasone nasal (Flonase) ipratropium (Atrovent Nasal)	<i>azelastine nasal (Astepro)</i> <i>azelastine/fluticasone nasal (Dymista)</i> <i>budesonide nasal (Rhinocort Allergy OTC)</i> <i>flunisolide (Nasarel, Nasalide)</i> <i>mometasone nasal (Nasonex)</i> <i>olopatadine (Patanase)</i> <i>triamcinolone OTC (Nasacort OTC)</i> <i>Omnaris</i> <i>Ryaltris</i> <i>Qnasl</i> <i>Xhance</i> <i>Zetonna</i>
Leukotriene Modifiers	montelukast (Singulair) zafirlukast (Accolate)	<i>zileuton ER</i> <i>Zyflo</i>
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> <i>Auvi-Q</i> <i>Symjepi</i>

cc-Clinical criteria can be found at the link [here](#)
 hc- High cost form 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.

TOPICAL DERMATOLOGICS

Drug Class	Preferred	Requires Prior Authorization
<p>Acne Agents, Topical</p>	<p>benzoyl peroxide OTC (except foaming cloths) clindamycin gel, solution, swabs (excludes generic Clindagel) clindamycin/benzoyl peroxide (Benzaclin, Duac) erythromycin solution tretinoin (Avita, Retin-A)^{cc}</p>	<p><i>adapalene cream, gel (Differin)^{cc}</i> <i>adapalene/benzoyl peroxide (Epiduo, Epiduo Forte)</i> <i>bp-10-1</i> <i>clindamycin (Clindagel)</i> <i>clindamycin foam, lotion</i> <i>clindamycin/benzoyl peroxide pump (Acanya)</i> <i>clindamycin/tretinoin (Ziana)</i> <i>dapsone (Aczone)</i> <i>erythromycin gel, pledgets</i> <i>erythromycin/benzoyl peroxide (Benzamycin)</i> <i>sulfacetamide</i> <i>sulfacetamide/sulfur</i> <i>sulfacetamide/sulfur/urea</i> <i>tazarotene cream, gel, foam (Tazorac, Fabior)^{cc}</i> <i>tretinoin microspheres gel pump 0.04%, 0.08%, 0.1% (Retin-A Micro)^{cc}</i> <i>Altreno</i> <i>Amzeeq</i> <i>Arazlo</i> <i>Avar</i> <i>Cabtreo</i> <i>Clindacin</i> <i>Onexton</i> <i>Ovace</i> <i>Retin-A Micro 0.06%^{cc}</i> <i>Sumaxin CP Kit</i> <i>Winlevi</i> <i>ZMA Clear Cleanser</i></p>
<p>Immunomodulators, Atopic Dermatitis</p>	<p>pimecrolimus (Elidel) tacrolimus (Protopic) Eucrisa</p>	<p><i>Adbry^{cc}</i> <i>Dupixent^{cc}</i> <i>Opzelura^{cc,ql}</i> <i>Zoryve Cream^{cc}</i> <i>Zoryve Foam^{cc}</i></p>

cc-Clinical criteria can be found at the link [here](#)
 hc- High cost form 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.

UROLOGIC

Drug Class	Preferred	Requires Prior Authorization
BPH Treatments	alfuzosin (Uroxatral) doxazosin (Cardura) dutasteride (Avodart) finasteride (Proscar) tamsulosin (Flomax) terazosin (Hytrin)	<i>dutasteride/tamsulosin (Jalyn)</i> <i>silodosin (Rapaflo)</i> <i>Cardura XL</i> <i>Entadfi^{cc}</i>
Bladder Relaxant Preparations	fesoterodine ER (Toviaz) mirabegron (Myrbetriq) ^{cc} oxybutynin syrup, 5mg tablet (Ditropan) oxybutynin ER (Ditropan XL) solifenacin (Vesicare)	<i>darifenacin ER (Enablex)</i> <i>flavoxate</i> <i>oxybutynin 2.5mg</i> <i>tolterodine, tolterodine ER (Detrol, Detrol LA)</i> <i>trospium, trospium ER (Sanctura, Sanctura XR)</i> <i>Gelnique</i> <i>Gemtesa</i> <i>Myrbetriq Granules^{cc}</i> <i>Oxytrol</i> <i>Vesicare LS</i>

cc-Clinical criteria can be found at the link [here](#)
 hc- High cost form 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.