

Utah Medicaid Preferred Drug List

Effective July 1, 2018

| Preferred Drugs | Date | Key | Non Preferred Drugs | Date |
|---|--|---------------------|---------------------|-----------------------------|
| Allergenic Extracts | | | | |
| Allergen Immunotherapy | | | | |
| B | Grastek* | 01/01/15 | | |
| B | Ragwitek* | 01/01/15 | | |
| Analgesics | | | | |
| Non-Steroidal Anti-Inflammatory Drugs (NSAIDs) | | | | |
| COX-2 Inhibitors | | | | |
| G | Celecoxib | 09/15/15 | B | Celebrex |
| Non-Selective | | | | |
| G | diclofenac potassium | 07/01/12 | BG | Daypro (oxaprozin) |
| G | diclofenac Na DR 50, 75mg [#] | 01/01/12 | G | diclofenac gel [†] |
| G | diclofenac Na SR | 01/01/13 | G | diclofenac Na DR 25mg |
| G | etodolac 200, 400, 500mg | 01/01/12 | G | diclofenac sol |
| B | Flector patch | 01/01/18 | G | diclofenex DC |
| G | flurbiprofen | 01/01/12 | B | DicloPR kit* |
| G | ibuprofen [#] | 09/28/09 | B | EC-Naprosyn |
| B | Indocin susp | 01/01/12 | G | etodolac 300mg |
| G | indomethacin [non-CR] | 01/01/12 | G | etodolac ER |
| G | ketoprofen | 01/01/12 | BG | Feldene (piroxicam) |
| G | ketorolac* | 09/28/09 | G | ibuprofen crm 10% |
| G | meloxicam tab [#] | 09/28/09 | G | indomethacin CR |
| G | nabumetone | 09/28/09 | G | ketoprofen ER |
| G | naproxen Na | 01/01/18 | B | Lodine |
| G | naproxen tab [#] , EC, susp | 09/28/09 | G | meclofenamate |
| B | Pennsaid | 01/01/18 | G | meloxicam susp |
| G | sulindac | 01/01/12 | B | Mobic |
| B | Voltaren gel [†] | 04/01/12 | BG | Nalfon (fenoprofen) |
| | | | BG | Naprelan (naproxen Na CR) |
| | | | B | Naprosyn |
| | | | BG | Ponstel (mefenamic acid) |
| | | | B | Prastera* |
| | | | B | Rexaphenac crm 1% |
| | | | B | Solaraze gel |
| | | | B | Sprix |
| | | | B | Tivorbex |
| | | | B | Tolmetin |
| | | | B | Vivlodex |
| | | | BG | Voltaren-XR |
| | | | B | Zipsor |
| | | | B | Zorvolex |

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| Opioids | | | | | | |
| Short Acting[†] | | | | | | |
| B | Actiq ^{†¶} | 01/01/15 | ¶ Metastatic cancer diagnosis only. | B | Abstral [¶] | 01/01/15 |
| G | codeine | 01/01/15 | | BG | Demerol (meperidine) | 01/01/15 |
| B | Dilaudid liq | 01/01/15 | | B | Dilaudid | 01/01/15 |
| B | Fentora [¶] | 01/01/15 | | G | fentanyl loz ^{†¶} | 01/01/15 |
| G | hydromorphone | 01/01/15 | | B | lonsys [¶] | 10/15/15 |
| G | morphine tab, sol | 01/01/15 | | B | Lazanda [¶] | 01/01/15 |
| G | oxycodone tab, sol | 01/01/15 | | G | levorphanol | 01/01/15 |
| G | tramadol | 01/01/15 | | G | morphine sup | 01/01/15 |
| | | | | B | Nucynta | 01/01/15 |
| | | | | G | Opana (oxymorphone) | 08/01/17 |
| | | | | B | Oxaydo | 10/01/15 |
| | | | | B | Oxecta | 01/01/15 |
| | | | | G | oxycodone con | 02/01/16 |
| | | | B | RoxyBond | 07/01/18 | |
| | | | B | Subsys [¶] | 01/01/15 | |
| | | | B | Ultram | 01/01/15 | |
| Long Acting^{**†} | | | | | | |
| B | Butrans 5, 10, 15, 20mcg ^{*†} | 10/01/17 | ¶ Metastatic cancer diagnosis only. | B | Arymo ER | 04/01/17 |
| B | Embeda | 01/01/17 | | B | Belbuca | 01/01/16 |
| G | fentanyl patch 100mcg [¶] | 02/01/16 | | G | buprenorphine patch ^{*†} | 10/30/14 |
| G | fentanyl patch 12, 25, 50, 75mcg | 02/01/10 | | B | Butrans 7.5 mcg ^{*†} | 10/30/14 |
| G | morphine sulfate ER tab | 01/01/14 | | B | Conzip ER (tramadol ER) | 08/18/14 |
| B | Nucynta ER | 10/01/17 | | BG | Dolophine (methadone) | 01/01/16 |
| | | | | B | Duragesic patch | 01/01/11 |
| | | | | BG | Exalgo (hydromorphone ER) | 01/01/15 |
| | | | | G | fentanyl patch 37.5, 62.5, 87.5mcg | 09/28/09 |
| | | | | B | Hysingla ER | 12/15/14 |
| | | | | B | Kadian | 01/01/17 |
| | | | | B | MorphaBond | 06/01/17 |
| | | | | G | morphine sulfate beads | 09/28/09 |
| | | | G | morphine sulfate ER cap | 01/01/14 | |
| | | | B | MS Contin | 09/01/16 | |
| | | | BG | OxyContin (oxycodone ER) [†] | 01/01/18 | |
| | | | G | oxymorphone ER | 01/01/13 | |
| | | | BG | Ultram ER (tramadol ER) | 01/01/16 | |
| | | | B | Xartemis XR | 03/26/14 | |
| | | | B | Xtampza ER | 06/01/16 | |
| | | | B | Zohydro ER | 01/01/14 | |

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| Opioid Combinations[‡] | | | | | | |
| G | apap/codeine, sol | 05/01/17 | | B | Capital/codeine | 05/01/17 |
| G | hydrocodone/apap, sol | 05/01/17 | | G | carisoprodol/asa/codeine | 09/28/09 |
| G | oxycodone/apap | 05/01/17 | | G | dihydrocodeine/apap/caf | 05/01/17 |
| G | tramadol/apap | 05/01/17 | | BG | Fioricet/codeine (but/apap/caf/codeine)* | 05/01/17 |
| | | | | BG | Fiorinal/codeine (but/asa/caf/codeine)* | 05/01/17 |
| | | | | BG | Ibudone (hydrocodone/ibu) | 05/01/17 |
| | | | | B | Lortab, sol | 05/01/17 |
| | | | | B | Norco | 05/01/17 |
| | | | | G | oxycodone/asa | 05/01/17 |
| | | | | G | oxycodone/ibu | 05/01/17 |
| | | | | B | Percocet | 05/01/17 |
| | | | | B | Primlev | 05/01/17 |
| | | | | BG | Reprexain (hydrocodone/ibu) | 05/01/17 |
| | | | | BG | Synalgos-DC (dihydrocodeine/asa/caf) | 05/01/17 |
| | | | | B | Tylenol/codeine | 05/01/17 |
| | | | | B | Ultracet | 05/01/17 |
| | | | | B | Xodol | 05/01/17 |
| | | | | BG | Xylon (hydrocodone/ibu) | 05/01/17 |
| | | | | B | Zamiset sol | 05/01/17 |
| Opioid Use Disorder Treatments[‡] | | | | | | |
| G | naltrexone tab** | 12/01/17 | | B | Bunavail* | 01/01/15 |
| B | Suboxone*† | 01/01/12 | | G | buprenorphine* | 06/01/17 |
| B | Vivitrol*## | 01/01/18 | | G | buprenorphine/naloxone*† | 01/01/15 |
| | | | | B | Sublocade*## | 01/01/18 |
| | | | | B | Zubsolv* | 01/01/17 |
| Androgens | | | | | | |
| Topical* | | | | | | |
| B | Androgel | 10/01/16 | | B | Androderm | 01/01/13 |
| | | | | B | Axiron | 01/01/13 |
| | | | | B | Fortesta | 06/01/12 |
| | | | | B | Natesto | 03/16/15 |
| | | | | B | Striant | 02/15/16 |
| | | | | B | Testim | 10/01/16 |
| | | | | G | testosterone 1% | 06/24/14 |
| | | | | B | Vogelxo | 06/09/14 |
| Other* | | | | | | |
| G | danazol | 02/15/16 | | B | Anadrol-50 | 06/01/12 |
| G | testosterone cypionate | 06/01/16 | | B | Android | 01/01/13 |
| | | | | B | Androxy | 01/01/13 |
| | | | | B | Aveed | 03/17/14 |
| | | | | B | Depo-Testosterone | 06/01/16 |
| | | | | B | Methitest | 01/01/13 |
| | | | | G | methyltestosterone | 02/15/16 |
| | | | | G | oxandrolone* | 01/01/13 |
| | | | | G | testosterone enanthate | 06/01/12 |
| | | | | B | Testred | 01/01/13 |

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| Antibiotics | | | | | |
| Aminoglycosides | | | | | |
| Inhaled for CF | | | | | |
| B | Bethkis neb | 01/01/15 | BG | Tobi (tobramycin) neb | 01/01/16 |
| B | Kitabis Pak neb | 01/01/16 | B | Tobi Podhaler cap | 01/01/18 |
| Cephalosporins | | | | | |
| 3rd Generation Oral | | | | | |
| G | cefdinir | 02/01/10 | BG | Cedax (ceftibuten) | 02/15/16 |
| G | cefixime susp | 02/15/16 | G | cefpodoxime tab | 02/01/10 |
| G | cefpodoxime susp | 01/01/13 | BG | Spectracef (cefditoren) | 02/15/16 |
| B | Suprax cap, tab, chw | 02/01/10 | B | Suprax susp | 02/15/16 |
| Quinolones | | | | | |
| B | Cipro susp | 02/01/10 | BG | Avelox (moxifloxacin) | 01/01/14 |
| G | ciprofloxacin | 02/01/10 | B | Baxdela | 10/01/17 |
| G | levofloxacin | 02/01/16 | B | Cipro, XR tab | 02/01/10 |
| | | | G | ciprofloxacin SR | 02/01/10 |
| | | | B | Levaquin | 02/01/16 |
| | | | G | ofloxacin | 02/01/10 |
| Anticoagulants | | | | | |
| Oral | | | | | |
| B | Coumadin | 01/01/14 | B | Bevyxxa | 10/01/17 |
| B | Eliquis | 01/01/14 | G | jantoven (warfarin) | 01/01/14 |
| B | Pradaxa | 01/01/14 | B | Savaysa | 01/20/15 |
| B | Xarelto | 01/01/13 | G | warfarin | 01/01/14 |
| Injectable | | | | | |
| G | enoxaparin 60,80,100,120,150,300 | 01/01/18 | BG | Arixtra (fondaparinux) | 01/01/13 |
| B | Lovenox 30,40 [†] | 01/01/18 | G | enoxaparin 30,40 [†] | 01/01/18 |
| | | | B | Fragmin | 01/01/18 |
| | | | B | Lovenox 60,80,100,120,150,300 | 01/01/18 |
| Antidiabetics | | | | | |
| Insulin | | | | | |
| Rapid Acting[†] | | | | | |
| B | Apidra, Solostar vial, pen | 01/01/17 | B | Admelog | 02/01/18 |
| B | Humalog vial, pen | 09/28/09 | B | Afrezza | 07/01/17 |
| B | Novolog vial, pen | 02/01/10 | B | Fiasp | 02/01/18 |
| | | | B | Humulin-R/Novolin-R vial, pen | 01/01/17 |
| Intermediate Acting[†] | | | | | |
| B | Humulin-N/Novolin-N vial, pen | 09/28/09 | | | |
| Long Acting[†] | | | | | |
| B | Lantus, Solostar vial, pen | 01/01/17 | B | Basaglar | 12/01/16 |
| B | Levemir vial, pen | 09/28/09 | G | Toujeo Solostar | 03/09/15 |
| | | | B | Tresiba | 03/15/16 |
| Mixtures[†] | | | | | |
| B | Humalog 50/50 | 09/28/09 | B | Humulin 70/30 kwikpen | 01/01/18 |
| B | Humalog 75/25 | 09/28/09 | B | Soliqua | 07/01/17 |
| B | Humulin 70/30 vial | 01/01/18 | B | Xultophy | 04/01/17 |
| B | Novolin 70/30 | 01/01/18 | | | |
| B | Novolog 70/30 | 02/01/10 | | | |

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| Non-Insulin | | | | | | |
| Sulfonylureas | | | | | | |
| | G glimepiride [#] | 07/01/14 | | B | Amaryl | 07/01/14 |
| | G glipizide [#] | 07/01/14 | | BG | Chlorpropam (chlorpropamide) | 07/01/14 |
| | G glyburide [#] | 05/15/16 | | B | Diabeta | 05/15/16 |
| | G glyburide micronized | 07/01/14 | | B | Glucotrol | 07/01/14 |
| | | | | B | Glynase | 07/01/14 |
| | | | | G | tolazamide | 07/01/14 |
| | | | | G | tolbutamide | 07/01/14 |
| Sulfonylurea Combinations | | | | | | |
| | G glyburide/metformin | 07/01/14 | | BG | Duetact (pioglitazone/glimepiride) | 10/01/17 |
| | | | | G | glipizide/metformin | 07/01/14 |
| | | | | B | Glucovance | 07/01/14 |
| GLP-1 Agonists | | | | | | |
| | B Bydureon | 01/01/18 | | B | Adlyxin | 09/01/17 |
| | B Tanzeum | 01/01/16 | | B | Byetta | 01/01/16 |
| | B Trulicity | 01/01/18 | | B | Ozempic | 01/01/18 |
| | B Victoza | 01/01/14 | | | | |
| DPP- 4 Inhibitors | | | | | | |
| | B Januvia | 09/28/09 | | BG | Nesina (alogliptin) | 04/01/16 |
| | B Onglyza | 01/01/18 | | | | |
| | B Tradjenta | 11/01/16 | | | | |
| DPP- 4 Inhibitor Combinations | | | | | | |
| | G alogliptin/metformin | 02/01/18 | | BG | alogliptin/pioglitazone [†] | 04/01/16 |
| | B Janumet | 09/28/09 | | B | Glyxambi | 02/11/15 |
| | B Janumet XR | 11/01/16 | | B | Jentadueto XR | 11/01/16 |
| | B Jentadueto | 11/01/16 | | B | Kazano | 02/01/18 |
| | B Kombiglyze | 10/01/17 | | | | |
| | B Oseni [†] | 12/01/17 | | | | |
| SGLT-2 Inhibitors | | | | | | |
| | B Farxiga | 01/01/18 | | B | Invokana | 01/01/18 |
| | | | | B | Jardiance | 01/01/16 |
| | | | | B | Steglatro | 02/01/18 |
| SGLT-2 Inhibitor Combinations | | | | | | |
| | B Synjardy, XR | 01/01/18 | | B | Invokamet, XR | 01/01/18 |
| | B Xigduo XR | 01/01/18 | | B | Qtern | 12/01/17 |
| | | | | B | Segluromet | 03/01/18 |
| | | | | B | Steglujan | 02/01/18 |
| Antifungals | | | | | | |
| Oral | | | | | | |
| | B Ancobon [†] | 01/01/14 | | B | Cresemba | 04/01/15 |
| | G clotrimazole | 10/01/11 | | B | Diflucan | 01/01/13 |
| | G fluconazole | 10/01/11 | | G | flucytosine [†] | 08/01/16 |
| | G griseofulvin susp | 01/01/13 | | G | griseofulvin tab | 10/01/11 |
| | G ketoconazole | 01/15/12 | | B | Gris-PEG | 10/01/11 |
| | G nystatin | 10/01/11 | | B | Lamisil | 10/01/11 |
| | G terbinafine | 10/01/11 | | B | Noxafil | 10/01/11 |
| | G voriconazole | 10/01/15 | | B | Onmel | 01/01/14 |
| | | | | B | Oravig | 01/01/13 |
| | | | | BG | Sporanox (itraconazole) | 04/01/13 |
| | | | | B | Vfend | 01/01/13 |

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| Antihistamines | | | | | |
| 1st Generation | | | | | |
| G | Aller-Chlor Syrup | 07/01/14 | BG | carbinoxamine | 07/01/14 |
| G | chlorpheniramine | 01/01/18 | BG | clemastine | 07/01/14 |
| G | cyproheptadine | 07/01/14 | B | ED Chlorped liq | 07/01/14 |
| BG | diphenhydramine | 07/01/14 | BG | Vanahist (triprolidine) | 12/01/17 |
| BG | doxylamine | 02/15/16 | B | Vistaril | 07/01/14 |
| G | ED-Chlortan | 07/01/14 | | | |
| G | hydroxyzine HCl, pam | 07/01/14 | | | |
| 2nd Generation | | | | | |
| G | cetirizine tab [#] , sol | 01/01/18 | G | cetirizine chw | 01/01/18 |
| G | loratadine [#] | 07/01/14 | BG | Clarinet (desloratadine) | 07/01/14 |
| | | | B | Claritin | 09/01/16 |
| | | | G | fexofenadine | 07/01/14 |
| | | | BG | Xyzal (levocetirizine) | 07/01/14 |
| | | | B | Zyrtec | 07/01/14 |
| Anti-infectives (NOS) | | | | | |
| Amebicide & Antiprotozoal Agents | | | | | |
| B | Alinia susp | 01/01/15 | B | Alinia tab | 01/01/15 |
| B | Flagyl 375mg [†] | 01/01/15 | B | Flagyl 250, 500mg | 01/01/15 |
| G | metronidazole 250, 500mg | 01/01/15 | G | metronidazole 375mg | 01/01/15 |
| G | tinidazole | 05/15/16 | B | Nebupent | 01/01/15 |
| | | | G | paromomycin | 01/01/15 |
| | | | B | Pentam | 01/01/15 |
| | | | B | Solosec | 02/01/18 |
| | | | B | Tindamax | 05/15/16 |
| Antimalarials | | | | | |
| G | atovoquone/proguanil | 12/01/17 | B | Coartem | 01/01/16 |
| G | chloroquine | 01/01/16 | B | Daraprim | 01/01/16 |
| G | hydroxychloroquine | 01/01/18 | B | Malarone | 12/01/17 |
| B | Primaquine | 01/01/16 | G | mefloquine | 01/01/16 |
| | | | B | Plaquenil | 01/01/18 |
| | | | BG | Qualaquin (quinine)* | 01/01/16 |
| Vaginal | | | | | |
| B | AVC | 01/01/13 | B | Cleocin | 03/01/16 |
| G | clindamycin | 03/01/16 | B | Clindesse | 11/01/16 |
| G | clotrimazole 1% | 10/01/11 | B | Gynazole-1 | 10/01/11 |
| G | clotrimazole 3 | 01/01/18 | B | Metrogel vaginal | 09/01/16 |
| G | metronidazole vaginal | 04/18/13 | G | miconazole 1-3 kit | 10/01/11 |
| G | miconazole 4% crm | 01/01/13 | B | Monistat 7 | 10/01/11 |
| G | miconazole 7 | 10/01/11 | B | Nuversa | 03/06/15 |
| G | Vandazole | 01/01/13 | B | Terazol | 10/01/11 |
| | | | G | terconazole | 10/01/11 |
| | | | G | tioconazole | 01/01/13 |
| | | | B | Vagistat-1-3 kit | 10/01/11 |

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| Antivirals | | | | | | |
| Anti-Influenza | | | | | | |
| Oral | | | | | | |
| G | amantadine | 01/01/14 | | B | Flumadine | 01/01/14 |
| B | Relenza | 03/01/16 | | G | oseltamivir [†] | 01/01/17 |
| B | Tamiflu [†] | 06/01/13 | | G | rimantadine | 06/01/13 |
| | | | | BG | Virazole (ribavirin) | 01/01/14 |
| Antiretrovirals | | | | | | |
| Entry, Fusion Inhibitors | | | | | | |
| B | Selzentry* | 07/01/17 | | B | Fuzeon | 07/01/17 |
| Integrase Inhibitors | | | | | | |
| B | Isentress | 07/01/17 | | B | Vitekta | 01/01/18 |
| B | Tivicay | 07/01/17 | | | | |
| Non-Nucleoside Reverse Transcriptase Inhibitors (NNRTIs) | | | | | | |
| B | Edurant | 07/01/17 | | G | efavirenz [†] | 01/01/18 |
| B | Intelence | 07/01/17 | | B | Rescriptor | 07/01/17 |
| G | nevirapine | 07/01/17 | | B | Viramune | 07/01/17 |
| B | Sustiva [†] | 07/01/17 | | | | |
| Nucleoside/Nucleotide Reverse Transcriptase Inhibitors (NRTIs)[¶] | | | | | | |
| G | abacavir | 07/01/17 | ¶ See NIH Guidelines for recommendations accessed 04/09/2017 | B | Epivir | 07/01/17 |
| B | Emtriva | 07/01/17 | | B | Retrovir | 07/01/17 |
| G | lamivudine | 07/01/17 | | BG | Videx (didanosine) | 07/01/17 |
| G | tenofovir disoproxil 300mg | 07/01/18 | | G | Viread 300mg | 07/01/18 |
| B | Viread 150mg, 200mg, 250mg, powder | 07/01/18 | | BG | Zerit (stavudine) | 07/01/17 |
| G | zidovudine | 07/01/17 | | B | Ziagen | 07/01/17 |
| Protease Inhibitors | | | | | | |
| B | Norvir [†] | 01/01/16 | | B | Aptivus | 01/01/16 |
| B | Prezista | 01/01/16 | | G | atazanavir [†] | 01/01/18 |
| B | Reyataz [†] | 01/01/16 | | B | Crixivan | 01/01/16 |
| | | | | B | Invirase | 01/01/16 |
| | | | | BG | Lexiva (fosamprenavir) | 01/01/16 |
| | | | | G | ritonavir [†] | 04/01/18 |
| | | | | B | Viracept | 01/01/16 |
| Combination Products[¶] | | | | | | |
| G | abacavir/lamivudine | 07/01/17 | ¶ See NIH Guidelines for recommendations accessed 04/09/2017 | B | Combivir | 07/01/17 |
| B | Atripla | 07/01/17 | | B | Complera | 07/01/17 |
| B | Biktarvy | 03/01/18 | | B | Epzicom | 07/01/17 |
| B | Cimduo | 05/01/18 | | B | Juluca | 12/01/17 |
| B | Descovy | 07/01/17 | | BG | Kaletra (lopinavir/ritonavir) | 07/01/17 |
| B | Evotaz | 01/01/17 | | B | Stribild | 07/01/17 |
| B | Genvoya | 07/01/17 | | BG | Trizivir (abacavir/lamivudine/zidovudine) | 07/01/17 |
| G | lamivudine/zidovudine | 07/01/17 | | B | Truvada | 07/01/17 |
| B | Odefsey | 07/01/17 | | | | |
| B | Prezcobix | 07/01/17 | | | | |
| B | Symfi, Lo | 05/01/18 | | | | |
| B | Triumeq | 07/01/17 | | | | |

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| Hepatitis C | | | | | |
| Direct Acting Antivirals (DAAs)* | | | | | |
| B | Epclusa | 10/01/17 | B | Daklinza | 01/01/18 |
| B | Harvoni | 01/01/15 | B | Olysio | 09/01/17 |
| B | Mavyret | 09/01/17 | B | Sovaldi | 01/01/18 |
| B | Technivie | 01/01/16 | B | Viekira Pak, Viekira XR | 01/01/18 |
| B | Zepatier | 04/01/16 | B | Vosevi | 08/01/17 |
| Interferons | | | | | |
| B | Pegasys | 10/01/09 | B | Intron-A | 01/01/14 |
| B | Peg-Intron | 01/01/14 | B | Sylatron | 01/01/14 |
| Nucleoside Analogues | | | | | |
| G | moderiba 200mg | 03/01/16 | B | Copegus | 07/01/12 |
| B | Rebetol sol | 01/01/14 | B | Moderiba Pak | 03/01/16 |
| G | ribasphere 200mg | 01/01/14 | B | Rebetol cap | 07/01/12 |
| G | ribavirin | 07/01/12 | B | Ribapak | 07/01/12 |
| | | | G | ribasphere 400, 600mg | 01/01/14 |
| Herpes Simplex, Varicella Zoster, & Cytomegalovirus | | | | | |
| Oral | | | | | |
| G | acyclovir | 01/01/14 | BG | Famvir (famciclovir) | 06/01/13 |
| G | valacyclovir | 01/01/14 | B | Prevymis | 01/01/18 |
| | | | B | Sitavig | 03/01/16 |
| | | | BG | Valcyte (valganciclovir) | 06/01/13 |
| | | | B | Valtrex | 01/01/14 |
| | | | B | Zovirax | 06/01/13 |
| Appetite Stimulants | | | | | |
| G | megestrol | 01/01/15 | BG | Marinol (dronabinol) | 01/01/15 |
| | | | B | Megace susp | 01/01/15 |
| | | | B | Syndros | 07/01/17 |
| Bile Acid Sequestrants | | | | | |
| G | cholestyramine | 01/01/15 | G | colesevelam [†] | 06/01/18 |
| G | colestipol | 01/01/15 | B | Colestid | 01/01/15 |
| B | Welchol [†] | 01/01/18 | B | Questran | 01/01/15 |
| Bone Density Regulators | | | | | |
| Osteoporosis Agents | | | | | |
| G | alendronate 5, 10, 35, 70mg [#] | 10/01/09 | BG | Actonel (risedronate) | 01/01/18 |
| | | | G | alendronate 40mg | 10/01/09 |
| | | | BG | Atelvia (risedronate) | 01/01/18 |
| | | | B | Binosto | 01/01/13 |
| | | | BG | Boniva (ibandronate) | 04/15/13 |
| | | | G | etidronate | 10/01/09 |
| | | | B | Forteo* | 03/01/16 |
| | | | BG | Fortical (calcitonin) | 01/01/16 |
| | | | B | Fosamax | 10/01/09 |
| | | | B | Fosamax-D | 10/01/09 |
| | | | G | Miacalcin | 01/01/14 |
| | | | B | Prolia | 01/01/14 |
| | | | B | Tymlos | 06/01/17 |
| | | | B | Xgeva | 10/15/15 |

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| Cardiovascular | | | | | | |
| Antianginal Agents | | | | | | |
| G | isosorbide dinitrate | 01/01/16 | | B | Dilatrate SR | 01/01/16 |
| G | isosorbide mononitrate | 01/01/16 | | B | Gonitro powder | 11/01/17 |
| G | nitroglycerin CR | 01/01/16 | | B | Isordil | 01/01/16 |
| B | nitroglycerin patch | 01/01/18 | | G | isosorbide dinitrate SL,CR | 01/01/16 |
| BG | Nitrostat (nitroglycerin SL) | 11/01/17 | | B | Minitran patch | 01/01/18 |
| | | | | B | Nitro-Bid oint | 01/01/16 |
| | | | | B | Nitro-Dur patch | 01/01/16 |
| | | | | G | nitroglycerin lingual spray | 01/01/16 |
| | | | | B | Nitrolingual | 01/01/16 |
| | | | | B | Nitromist | 01/01/16 |
| | | | | B | Ranexa | 01/01/16 |
| Antihyperlipidemics | | | | | | |
| HMG Co-A Reductase Inhibitors ("Statins") – Lower Potency | | | | | | |
| G | lovastatin [#] | 09/28/09 | | B | Altprev | 01/01/13 |
| G | pravastatin [#] | 09/28/09 | | BG | Lescol (fluvastatin), XL | 11/01/16 |
| | | | | B | Livalo | 01/01/13 |
| | | | | B | Pravachol | 01/01/13 |
| | | | | B | Zypitamag | 04/01/18 |
| HMG Co-A Reductase Inhibitors ("Statins") – High Potency | | | | | | |
| G | atorvastatin [#] | 11/01/12 | | B | Flolipid susp ^{**} | 09/01/17 |
| B | Crestor [†] | 01/01/14 | | B | Lipitor | 11/01/12 |
| G | simvastatin ^{**#} | 09/28/09 | | G | rosuvastatin [†] | 05/15/16 |
| | | | | B | Zocor ^{**} | 01/01/13 |
| Cholesterol-Lowering Combinations | | | | | | |
| B | Vytorin [†] | 01/01/13 | | BG | Caduet (amlodipine/atorvastatin) | 01/01/14 |
| | | | | G | ezetimibe/simvastatin [†] | 05/01/17 |
| PCSK-9 Inhibitors* | | | | | | |
| B | Praluent | 04/01/16 | | B | Repatha | 04/01/16 |
| Fibrates | | | | | | |
| G | fenofibrate [¶] | 01/01/17 | ¶ Only the following strengths of fenofibrate are preferred: 48, 50, 54, 145, 150, 160mg | BG | Antara (fenofibrate) [¶] | 01/01/12 |
| G | gemfibrozil [#] | 09/28/09 | | BG | Fenoglide (fenofibrate) [¶] | 07/01/15 |
| | | | | BG | Fibricor (fenofibric acid) | 01/01/13 |
| | | | | B | Lipofen | 05/14/14 |
| | | | | BG | Lofibra (fenofibrate) [¶] | 09/28/09 |
| | | | | B | Lopid | 01/01/13 |
| | | | | B | Tricor | 01/01/17 |
| | | | | B | Triglide | 01/01/17 |
| | | | | BG | Trilipix (choline fenofibrate) [¶] | 01/01/17 |
| | | | | | | |
| Nicotinic Acid Derivatives | | | | | | |
| B | Niaspan [†] | 09/28/09 | | G | niacin ER [†] | 01/01/16 |
| | | | | B | Niacor | 01/01/16 |
| Miscellaneous | | | | | | |
| G | omega-3 acid ethyl esters | 11/01/16 | | G | ezetimibe [†] | 01/01/17 |
| B | Zetia [†] | 09/28/09 | | B | Lovaza | 11/01/16 |
| | | | | B | Vascepa | 11/01/15 |

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| Antihypertensives | | | | | | |
| Alpha/Beta-Adrenergic Blocking Agents | | | | | | |
| G | carvedilol [#] | 09/28/09 | | B | Coreg | 09/28/09 |
| G | labetalol | 09/28/09 | | B | Coreg CR (carvedilol ER) [†] | 12/01/17 |
| G | prazosin | 10/01/11 | | B | Minipress | 10/01/11 |
| | | | | B | Trandate | 09/28/09 |
| Angiotensin Converting Enzyme (ACE) Inhibitors | | | | | | |
| G | benazepril [#] | 09/28/09 | | B | Accupril | 09/28/09 |
| G | captopril [#] | 09/28/09 | | B | Altace | 09/28/09 |
| G | enalapril [#] | 09/28/09 | | B | Epaned | 04/18/14 |
| G | fosinopril [#] | 09/28/09 | | B | Lotensin | 09/28/09 |
| G | lisinopril [#] | 09/28/09 | | G | moexipril | 01/01/13 |
| G | quinapril [#] | 09/28/09 | | G | perindopril | 01/01/14 |
| G | ramipril [#] | 09/28/09 | | B | Prinivil | 09/28/09 |
| G | trandolapril | 01/01/14 | | B | Qbrelis | 09/01/16 |
| | | | | B | Vasotec | 09/28/09 |
| | | | | B | Zestril | 09/28/09 |
| Angiotensin Converting Enzyme (ACE) Inhibitor Combinations | | | | | | |
| G | benazepril/hctz | 09/28/09 | | B | Accuretic | 09/28/09 |
| G | captopril/hctz | 09/28/09 | | B | Lotensin HCT | 09/28/09 |
| G | enalapril/hctz | 09/28/09 | | G | moexipril/hctz | 01/01/13 |
| G | fosinopril/hctz | 09/28/09 | | B | Vaseretic | 09/28/09 |
| G | lisinopril/hctz [#] | 09/28/09 | | B | Zestoretic | 09/28/09 |
| G | quinapril/hctz | 09/28/09 | | | | |
| Angiotensin Receptor Blockers (ARBs) | | | | | | |
| G | irbesartan [#] | 10/15/15 | | BG | Atacand (candesartan) | 10/15/15 |
| G | losartan [#] | 04/01/12 | | B | Avapro | 10/15/15 |
| G | olmesartan | 08/01/17 | | B | Benicar | 08/01/17 |
| G | telmisartan | 11/01/16 | | B | Cozaar | 09/28/09 |
| G | valsartan [#] | 03/01/16 | | B | Diovan | 03/01/16 |
| | | | | B | Edarbi | 04/01/12 |
| | | | | G | eprosartan | 09/28/09 |
| | | | | B | Micardis | 11/01/16 |
| Angiotensin Receptor Blocker (ARB) + Thiazide Combinations | | | | | | |
| G | irbesartan/hctz | 01/01/14 | | BG | Atacand HCT (candesartan/hctz) | 01/01/14 |
| G | losartan/hctz [#] | 09/28/09 | | B | Avalide | 01/01/14 |
| B | Micardis HCT [†] | 01/01/12 | | B | Benicar/hctz | 08/01/17 |
| G | olmesartan/hctz | 08/01/17 | | B | Diovan/hctz | 10/15/15 |
| G | valsartan/hctz [#] | 10/15/15 | | B | Edarbyclor | 01/01/13 |
| | | | | B | Hyzaar | 09/28/09 |
| | | | | G | telmisartan/hctz [†] | 01/01/14 |
| Angiotensin Receptor Blocker (ARB) Combinations - Other | | | | | | |
| G | amlodipine/olmesartan | 08/01/17 | | G | amlodipine/valsartan/hctz [†] | 03/01/16 |
| G | amlodipine/olmesartan/hctz | 08/01/17 | | G | amlodipine/valsartan [†] | 10/08/14 |
| B | Exforge HCT [†] | 09/28/09 | | G | Azor | 08/01/17 |
| B | Exforge [†] | 09/28/09 | | B | Byvalson | 09/01/16 |
| | | | | B | Entresto* | 11/01/15 |
| | | | | B | Tribenzor | 08/01/17 |
| | | | | BG | Twynsta (telmisartan/amlodipine) | 01/01/12 |

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| Beta-Adrenergic Blocking Agents - Cardio Selective | | | | | | |
| G | atenolol [#] | 09/28/09 | | G | acebutolol | 08/01/17 |
| G | metoprolol succinate [#] | 10/15/15 | | G | betaxolol | 01/01/14 |
| G | metoprolol tartrate 25, 50, 100mg [#] | 01/01/13 | | G | bisoprolol | 01/01/14 |
| | | | | B | Bystolic | 09/28/09 |
| | | | | B | Lopressor | 09/28/09 |
| | | | | G | metoprolol tartrate 37.5, 75mg | 03/15/16 |
| | | | | B | Tenormin | 09/28/09 |
| | | | | B | Toprol XL | 10/15/15 |
| Beta-Adrenergic Blocking Agents - Cardio Nonselective | | | | | | |
| G | nadolol | 10/15/15 | | B | Betapace | 09/28/09 |
| G | pindolol | 09/28/09 | | BG | Betapace AF (sotalol AF) | 01/01/14 |
| G | propranolol SR | 03/01/16 | | B | Corgard | 10/15/15 |
| G | propranolol [#] | 04/01/13 | | B | Hemangeol | 05/07/14 |
| G | sotalol [#] | 01/01/14 | | B | Inderal LA | 03/01/16 |
| G | timolol | 09/28/09 | | B | Innopran XL | 09/28/09 |
| | | | | B | Sotylize | 02/19/15 |
| Beta-Adrenergic Blocking Agent Combinations | | | | | | |
| G | atenolol/chlorthalidone [#] | 09/28/09 | | BG | Corzide (nadolol/bendroflumethiazide) | 11/01/16 |
| G | bisoprolol/hctz [#] | 09/28/09 | | B | Dutoprol | 09/28/09 |
| G | propranolol/hctz | 01/01/14 | | B | Lopressor HCT | 01/01/14 |
| | | | | G | metoprolol/hctz | 01/01/13 |
| | | | | B | Tenoretic | 09/28/09 |
| | | | | B | Ziac | 09/28/09 |
| Calcium Channel Blocking Agents | | | | | | |
| G | amlodipine [#] | 09/28/09 | ¶ This includes all generic equivalents of all solid oral dosage forms except Cardizem LA generic equivalents | B | Adalat CC | 01/01/13 |
| G | diltiazem [¶] | 09/28/09 | | B | Calan, SR | 09/28/09 |
| G | felodipine ER [#] | 09/28/09 | | BG | Cardizem LA [¶] | 03/01/16 |
| G | isradipine | 09/28/09 | | B | Cardizem, CD | 09/28/09 |
| G | nicardipine | 09/28/09 | | G | nimodipine | 09/28/09 |
| G | nifedipine, ER | 01/01/14 | | B | Norvasc | 09/28/09 |
| G | verapamil tab | 09/28/09 | | B | Nymalize | 07/08/13 |
| B | Verelan PM | 05/15/16 | | B | Procardia, XL | 01/01/14 |
| | | | | BG | Sular (nisoldipine) | 04/01/13 |
| | | | B | Tiazac | 03/01/16 | |
| | | | G | verapamil cap | 01/01/14 | |
| | | | B | Verelan | 05/15/16 | |
| Diuretics | | | | | | |
| Loop | | | | | | |
| G | furosemide [#] | 01/01/16 | | BG | Bumex (bumetanide) | 01/01/16 |
| G | toremide [#] | 01/01/16 | | B | Demadex | 01/01/16 |
| | | | | BG | Edecrin (ethacrynic acid) | 11/01/17 |
| | | | | B | Lasix | 01/01/16 |
| Thiazide | | | | | | |
| G | chlorothiazide | 12/01/16 | | G | chlorthalidone | 01/01/16 |
| G | hydrochlorothiazide [#] | 01/01/16 | | B | Diuril | 12/01/16 |
| G | indapamide [#] | 01/01/16 | | G | methyclothiazide | 01/01/16 |
| | | | | G | metolazone | 01/01/16 |
| | | | | B | Microzide | 01/01/16 |

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| Potassium Sparing & Combination | | | | | |
| G | amiloride/hctz [#] | 01/01/16 | B | Aldactazide | 01/01/16 |
| G | spironolactone [#] | 01/01/16 | B | Aldactone | 01/01/16 |
| G | spironolactone/hctz | 01/01/16 | G | amiloride | 01/01/16 |
| G | triamterene/hctz 37.5/25, 75/50mg [#] | 01/01/16 | B | CaroSpir | 11/01/17 |
| | | | B | Dyazide | 01/01/16 |
| | | | B | Dyrenium | 07/01/17 |
| | | | BG | Inspra (eplerenone) | 01/01/16 |
| | | | B | Maxzide | 01/01/16 |
| | | | G | triamterene/hctz 50/25mg | 01/01/16 |
| Platelet Aggregation Inhibitors | | | | | |
| Platelet Aggregation Inhibitors | | | | | |
| G | clopidogrel 75mg [#] | 06/01/12 | B | Brilinta | 01/01/13 |
| G | prasugrel | 07/01/18 | G | clopidogrel 300mg | 01/01/14 |
| | | | G | dipyridamole | 06/01/12 |
| | | | B | Durlaza | 07/01/16 |
| | | | B | Effient | 07/01/18 |
| | | | B | Plavix | 01/01/13 |
| | | | G | ticlopidine | 06/01/12 |
| | | | B | Zontivity | 10/01/15 |
| Platelet Aggregation Inhibitors-Miscellaneous, Combinations | | | | | |
| B | Aggrenox [†] | 07/01/12 | B | Agrylin | 07/01/12 |
| G | anagrelide | 07/01/12 | G | asa/dipyridamole [†] | 10/15/15 |
| G | cilostazol | 11/01/12 | B | Pletal | 01/01/13 |
| G | clopidogrel/asa pack | 10/01/17 | | | |
| G | pentoxifylline | 07/01/12 | | | |
| Central Nervous System | | | | | |
| Antidementia Agents | | | | | |
| Oral | | | | | |
| G | donepezil 5, 10mg [#] | 10/01/13 | B | Aricept | 01/15/13 |
| G | memantine tab | 02/01/16 | G | donepezil 23mg, ODT | 10/01/13 |
| B | Namenda sol [†] | 03/15/16 | B | Exelon | 05/15/16 |
| G | rivastigmine | 05/15/16 | G | memantine sol [†] | 03/15/16 |
| | | | B | Namenda tab | 02/01/16 |
| | | | B | Namenda XR (memantine ER) [†] | 03/01/18 |
| | | | B | Namzaric | 04/15/15 |
| | | | BG | Razadyne (galantamine) | 09/28/09 |
| Topical | | | | | |
| B | Exelon patch | 09/28/09 | G | rivastigmine patch | 09/15/15 |

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| Hypnotics | | | | | | |
| Benzodiazepines[†] | | | | | | |
| G | flurazepam | 06/01/13 | | G | estazolam | 06/01/13 |
| G | temazepam 15, 30mg | 06/01/13 | | BG | Halcion (triazolam) | 06/01/13 |
| | | | | G | midazolam | 11/01/16 |
| | | | | B | Restoril | 06/01/13 |
| | | | | G | temazepam 7.5, 22.5mg | 06/01/13 |
| Non Benzodiazepines, Non Barbiturates[†] | | | | | | |
| G | zaleplon | 10/15/15 | | B | Ambien | 06/01/13 |
| G | zolpidem | 06/01/13 | | BG | Ambien CR (zolpidem CR) | 06/01/13 |
| | | | | B | Belsomra | 12/10/14 |
| | | | | B | Edluar | 06/01/13 |
| | | | | B | Hetlioz | 03/17/14 |
| | | | | BG | Intermezzo (zolpidem SL) | 06/01/13 |
| | | | | BG | Lunesta (eszopiclone) | 04/28/14 |
| | | | | B | Rozerem | 06/01/13 |
| | | | | B | Silenor | 10/01/15 |
| | | | | B | Sonata | 06/01/13 |
| | | | | B | Zolpimist | 06/01/13 |
| Barbiturates, Miscellaneous | | | | | | |
| G | phenobarb 15, 30, 60, 100mg | 06/01/13 | | B | Butisol | 11/01/17 |
| G | phenobarb elixir | 06/01/13 | | G | phenobarb 16.2, 32.4, 64.8, 97.2mg | 06/01/13 |
| | | | | B | Seconal | 06/01/13 |
| Mental Health | | | | | | |
| ADHD Stimulants^{SS} | | | | | | |
| B | Adzenys XR-ODT, ER sus | 01/01/18 | | B | Adderall | 07/01/16 |
| G | amph/damph tab | 07/01/16 | | BG | Adderall XR (amph/damph ER) | 07/01/16 |
| B | Aptensio XR | 01/01/18 | | B | Daytrana | 07/01/16 |
| B | Concerta [†] | 01/01/17 | | BG | Desoxyn (methamphetamine) [†] | 07/01/16 |
| B | Cotempla XR-ODT | 01/01/18 | | BG | Dexedrine (damph) | 07/01/16 |
| B | Dyanavel XR | 01/01/18 | | G | dmph, ER [†] | 07/01/16 |
| B | Evekeo | 01/01/18 | | BG | Metadate (mph ER) | 07/01/16 |
| B | Focalin, XR [†] | 01/01/18 | | G | mph ER osmotic release [†] | 07/01/16 |
| G | mph tab | 07/01/16 | | G | mph sol, chw | 07/01/16 |
| B | Procentra [†] | 01/01/18 | | B | Mydayis | 07/01/17 |
| B | Quillichew ER | 01/01/18 | | B | Ritalin | 07/01/16 |
| B | Quillivant susp | 01/01/18 | | BG | Ritalin LA (mph ER) cap | 07/01/16 |
| B | Vyvanse | 01/01/18 | | | | |
| B | Zenzedi | 01/01/18 | | | | |

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| Anticonvulsants^{SS} | | | | | | |
| B | Aptiom | 01/01/17 | | B | Banzel | 10/01/16 |
| G | carbamazepine chw [#] | 01/01/17 | | B | Briviact | 10/01/16 |
| G | carbamazepine ER | 08/01/17 | | G | carbamazepine tab, sol [†] | 01/01/17 |
| B | Celontin | 01/01/17 | | B | Carbatrol | 01/01/17 |
| G | clonazepam | 01/01/17 | | G | clonazepam ODT | 01/01/17 |
| B | Diastat [†] | 01/01/17 | | B | Depakene | 01/01/17 |
| B | Dilantin 30mg | 01/01/17 | | B | Depakote | 01/01/17 |
| G | divalproex | 01/01/17 | | G | diazepam rectal [†] | 01/01/17 |
| B | Fycompa | 01/01/18 | | B | Dilantin chw, 100mg | 01/01/17 |
| G | gabapentin | 10/01/16 | | BG | Felbatol (felbamate) | 10/01/16 |
| B | Gabitril [†] | 01/01/18 | | B | Keppra | 10/01/16 |
| G | lamotrigine tab, chw [#] | 11/01/16 | | B | Klonopin | 01/01/17 |
| G | levetiracetam [#] | 10/01/16 | | B | Lamictal | 10/01/16 |
| B | Lyrica | 10/01/16 | | BG | Lamictal (lamotrigine) ODT [†] | 10/01/16 |
| G | oxcarbazepine tab | 10/01/16 | | G | lamotrigine ER | 10/01/16 |
| B | Peganone | 10/01/16 | | B | Lyrica CR | 02/01/18 |
| G | phenytoin | 01/01/17 | | B | Mysoline | 01/01/17 |
| G | primidone | 01/01/17 | | B | Neurontin | 10/01/16 |
| B | Tegretol tab, sol [†] | 01/01/17 | | B | Onfi | 10/01/16 |
| G | topiramate | 10/01/16 | | B | Oxtellar XR | 10/01/16 |
| G | valproic acid | 01/01/17 | | B | Phenytek | 01/01/17 |
| B | Vimpat | 10/01/16 | | B | Potiga | 10/01/16 |
| G | zonisamide [#] | 10/01/16 | | B | Qudexy XR | 10/01/16 |
| | | | | BG | Sabril (vigabatrin) [†] | 09/01/17 |
| | | | | B | Spritam | 10/01/16 |
| | | | | B | Tegretol XR | 08/01/17 |
| | | | | G | tiagabine [†] | 01/01/18 |
| | | | | B | Topamax | 10/01/16 |
| | | | | B | Trileptal | 10/01/16 |
| | | | | BG | Trileptal (oxcarbazepine) susp | 10/01/16 |
| | | | | B | Trokendi XR | 10/01/16 |
| | | | | BG | Zarontin (ethosuximide) | 01/01/17 |
| | | | | B | Zonegran | 10/01/16 |
| Atypical Antipsychotics^{SS} | | | | | | |
| B | Abilify Maintena ^{##} | 10/01/16 | | B | Abilify | 01/01/18 |
| G | aripiprazole tab | 01/01/18 | | G | aripiprazole sol, ODT | 01/01/18 |
| B | Aristada ^{##} | 05/01/18 | | B | Clozaril | 10/01/16 |
| G | clozapine | 10/01/16 | | B | Fanapt | 10/01/16 |
| B | Invega Sustenna ^{##} | 05/01/18 | | BG | Fazaclol (clozapine ODT) [†] | 10/01/16 |
| B | Invega Trinza ^{##} | 05/01/18 | | B | Geodon | 01/01/18 |
| B | Latuda | 01/01/18 | | BG | Invega (paliperidone) | 10/01/16 |
| G | olanzapine | 10/01/16 | | G | quetiapine, ER 25, 50mg | 10/01/16 |
| G | quetiapine, ER ≥ 100mg | 01/01/18 | | B | Rexulti | 10/01/16 |
| G | risperidone tab, sol | 01/01/18 | | B | Risperdal | 10/01/16 |
| B | Saphris | 01/01/18 | | BG | Risperdal Consta (risperidone inj) ^{##} | 10/01/16 |
| B | Vraylar | 01/01/18 | | BG | Risperdal M (risperidone ODT) | 10/01/16 |
| G | ziprasidone | 01/01/18 | | B | Seroquel, XR | 10/01/16 |
| | | | | B | Versacloz | 10/01/16 |
| | | | | B | Zyprexa | 10/01/16 |
| | | | | BG | Zyprexa Relprevv (olanzapine inj) ^{##} | 10/01/16 |
| | | | | BG | Zyprexa Zydys (olanzapine ODT) | 10/01/16 |

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| Antidepressants - SSRI/SNRI^{SS} | | | | | | |
| G | citalopram tab [#] | 02/01/17 | | BG | Brisdelle (paroxetine 7.5mg) [†] | 10/01/17 |
| G | duloxetine 20, 30, 60mg [#] | 10/01/16 | | B | Celexa | 10/01/16 |
| G | escitalopram [#] | 10/01/16 | | G | citalopram sol | 10/01/16 |
| G | fluoxetine cap [#] | 10/01/16 | | B | Cymbalta | 10/01/16 |
| G | fluoxetine sol | 10/01/16 | | G | duloxetine 40mg | 10/01/16 |
| G | paroxetine [#] | 10/01/16 | | B | Effexor XR | 10/01/16 |
| B | Savella [#] | 01/01/18 | | B | Fetzima | 10/01/16 |
| G | sertraline | 10/01/16 | | G | fluoxetine tab, weekly | 01/01/18 |
| G | venlafaxine ER cap [#] | 10/01/16 | | G | fluvoxamine, ER | 10/01/16 |
| | | | | BG | Khedezla (desvenlafaxine) [†] | 10/01/16 |
| | | | | B | Lexapro | 10/01/16 |
| | | | | BG | Lexapro (escitalopram) sol | 10/01/16 |
| | | | | B | Paxil | 10/01/16 |
| | | | | BG | Paxil CR (paroxetine ER) | 10/01/16 |
| | | | | B | Paxil susp | 10/01/16 |
| | | | | B | Pexeva | 10/01/16 |
| | | | | BG | Pristiq (desvenlafaxine) [†] | 08/01/17 |
| | | | | B | Prozac | 10/01/16 |
| | | | | BG | Sarafem (fluoxetine) | 10/01/16 |
| | | | | BG | Symbyax (olanzapine/fluoxetine) [†] | 10/01/16 |
| | | | | G | venlafaxine ER tab | 10/01/16 |
| | | | | G | venlafaxine tab [non-ER] | 10/01/16 |
| | | | | B | Zoloft | 10/01/16 |
| | | | | BG | Zoloft (sertraline) con | 10/01/16 |
| Antidepressants -TCAs^{SS} | | | | | | |
| G | amitriptyline | 01/01/18 | | G | amitriptyline/chlordiazepoxide | 01/01/18 |
| G | doxepin | 01/01/18 | | G | amitriptyline/perphenazine | 01/01/18 |
| G | imipramine HCl [#] | 01/01/18 | | G | amoxapine | 01/01/18 |
| G | nortriptyline cap | 01/01/18 | | BG | Anafranil (clomipramine) | 01/01/18 |
| G | trimipramine | 01/01/18 | | G | imipramine pam | 01/01/18 |
| | | | | BG | Norpramin (desipramine) | 01/01/18 |
| | | | | G | nortriptyline sol | 01/01/18 |
| | | | | B | Pamelor | 01/01/18 |
| | | | | G | protriptyline | 01/01/18 |
| | | | | B | Surmontil | 01/01/18 |
| | | | | B | Tofranil | 01/01/18 |

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| Antidepressants -MAOIs^{SS} | | | | | | |
| B | Marplan | 01/01/18 | | B | Emsam* | 01/01/18 |
| B | Parnate [†] | 01/01/18 | | B | Nardil | 01/01/18 |
| G | phenelzine | 01/01/18 | | G | tranylcypromine [†] | 01/01/18 |
| Antidepressants - Miscellaneous^{SS} | | | | | | |
| G | bupropion | 10/19/16 | | B | Aplenzin | 10/01/16 |
| G | mirtazapine 15, 30, 45mg [#] | 10/01/16 | | B | Forfivo XL | 10/01/16 |
| G | mirtazapine ODT | 10/01/16 | | G | mirtazapine 7.5mg | 10/01/16 |
| G | trazodone 50, 100, 150mg [#] | 10/01/16 | | G | nefazodone | 10/01/16 |
| | | | | B | Olepto | 10/01/16 |
| | | | | B | Remeron, ODT | 10/01/16 |
| | | | | G | trazodone 300mg | 10/01/16 |
| | | | | B | Trintellix | 10/01/16 |
| | | | | B | Viiibryd | 10/01/16 |
| | | | | B | Wellbutrin | 10/19/16 |
| | | | | B | Zyban | 10/01/16 |
| Anxiolytic Benzodiazepines^{SS} | | | | | | |
| G | alprazolam | 01/01/17 | | G | alprazolam con, ODT | 01/01/17 |
| G | chlordiazepoxide | 01/01/17 | | B | Ativan | 01/01/17 |
| G | diazepam | 01/01/17 | | G | diazepam con, sol | 01/01/17 |
| G | lorazepam | 01/01/17 | | G | lorazepam con | 01/01/17 |
| | | | | G | oxazepam | 01/01/17 |
| | | | | BG | Tranxene (clorazepate) | 01/01/17 |
| | | | | B | Xanax | 01/01/17 |
| Miscellaneous Mood Stabilizers^{SS} | | | | | | |
| G | atomoxetine | 10/01/17 | | B | Lithobid | 08/01/17 |
| G | lithium | 01/01/18 | | B | Strattera | 10/01/17 |

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| Contraceptives | | | | | | |
| Oral | | | | | | |
| Low Dose and Mono-phasic[#] | | | | | | |
| G | altavera | 01/01/12 | | B | Balcoltra | 05/01/18 |
| G | alyacen | 01/01/13 | | G | balziva | 01/01/13 |
| G | apri | 01/01/14 | | B | Beyaz | 08/01/17 |
| G | aubra | 05/05/15 | | G | blisovi 24 FE 1/20 | 03/15/16 |
| G | aviane | 03/15/16 | | B | Brevicon | 01/01/16 |
| G | blisovi FE 1/20, 1.5/30 | 11/01/16 | | B | Desogen | 05/15/16 |
| G | briellyn | 01/01/18 | | G | desogestrel/ee | 01/01/16 |
| G | chateal | 01/01/14 | | G | drosiprenone/ee | 01/01/16 |
| G | cryselle | 10/01/11 | | G | ethynodiol/ee | 01/01/18 |
| G | cyclafem | 01/01/13 | | B | FaLessa kit | 01/01/16 |
| G | cyred | 01/01/16 | | B | Femcon FE chw | 08/01/17 |
| G | dasetta | 01/01/13 | | G | gianvi | 01/01/13 |
| G | elinest | 04/30/13 | | G | gildess 1.5/30 | 10/01/11 |
| G | emoquette | 01/01/14 | | G | gildess 1/20 | 01/01/18 |
| G | enskyce | 01/01/14 | | G | gildess 24 FE 1/20 | 01/01/16 |
| G | estarylla | 01/01/14 | | G | junel 1.5/30 | 03/15/16 |
| G | falmina | 01/01/13 | | G | junel 1/20 | 01/01/18 |
| G | femynor | 03/01/18 | | G | junel 24 FE 1/20 | 01/01/16 |
| B | Generess FE chw | 01/01/18 | | G | larin 1.5/30 | 01/01/18 |
| G | gildagia | 01/01/18 | | G | larin 24 FE 1/20 | 01/01/16 |
| G | gildess FE 1/20, 1.5/30 | 01/01/16 | | G | larin FE 1.5/30 | 03/15/16 |
| G | isibloom | 07/01/18 | | G | layolis FE chw | 01/01/16 |
| G | juleber | 05/15/16 | | B | Loestrin | 01/01/16 |
| G | junel FE 1/20, 1.5/30 | 01/01/16 | | G | lomedina 24 FE | 01/01/16 |
| G | kelnor | 01/01/13 | | G | loryna | 10/01/14 |
| G | kurvelo | 01/01/14 | | G | melodetta 24 chw | 10/01/17 |
| G | larin 1/20 | 01/01/18 | | G | mibelas 24 chw | 04/01/17 |
| G | larin FE 1/20 | 01/01/16 | | G | microgestin 1/20, 1.5/30 | 01/01/12 |
| G | larissia | 09/01/17 | | G | microgestin 24 FE 1/20 | 01/01/18 |
| G | lessina | 10/01/11 | | G | necon 0.5/35 | 01/01/18 |
| G | levonorgestrel/ee | 01/01/16 | | G | nikki | 08/04/14 |
| G | levora | 03/15/16 | | G | norethindrone/ee FE chw | 01/01/16 |
| G | lillow | 09/01/17 | | B | Norinyl 1/50 | 09/01/16 |
| G | low-ogestrel | 10/01/11 | | G | nortrel | 01/01/18 |
| G | lutera | 10/01/11 | | G | ocella | 01/01/13 |
| G | marlissa | 01/01/13 | | B | Ogestrel | 01/01/13 |
| G | microgestin FE 1/20, 1.5/30 | 01/01/18 | | B | Ortho Micronor | 11/01/17 |
| G | mili | 06/01/18 | | B | Ovcon-35 | 10/01/11 |
| B | Minastrin 24 FE chw | 01/01/18 | | G | rajani | 08/01/17 |
| G | mono-linyah | 04/01/13 | | G | syeda | 10/01/11 |
| G | mononessa | 03/15/16 | | B | Taytulla | 10/01/16 |
| G | necon 1/35, 1/50 | 01/01/18 | | G | tydemy | 04/01/18 |
| G | norethindrone/ee | 01/01/16 | | G | vestura | 01/01/13 |
| G | norethindrone/ee FE | 03/15/16 | | G | vyfemla | 01/01/16 |
| G | norgestimate/ee | 01/01/13 | | G | wera | 01/01/18 |
| B | Norinyl 1/35 | 01/01/17 | | G | wymzya | 01/01/13 |
| G | orsythia | 01/01/13 | | B | Yasmin | 01/01/16 |
| B | Ortho-Cyclen | 01/01/18 | | B | Yaz | 01/01/16 |
| B | Ortho-Novum | 10/01/11 | | G | zarah | 11/15/11 |
| G | philith | 01/01/18 | | G | zovia 1/50 | 01/01/18 |

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|--|----------------------|----------|-----|---|---------------------|----------|
| G | pirmella | 07/08/13 | | | | |
| G | portia | 01/01/12 | | | | |
| G | previfem | 01/01/13 | | | | |
| G | reclipsen | 01/01/14 | | | | |
| B | Safyral | 01/01/18 | | | | |
| G | sprintec | 10/01/11 | | | | |
| G | sronyx | 10/01/11 | | | | |
| G | tarina | 01/01/16 | | | | |
| G | vienva | 12/01/16 | | | | |
| G | vylibra | 03/01/18 | | | | |
| G | zenchent | 01/01/18 | | | | |
| G | zovia 1/35 | 01/01/18 | | | | |
| Bi-phasic[#] | | | | | | |
| G | azurette | 01/01/18 | | B | Lo Loestrin | 01/01/12 |
| G | bekyree | 01/01/18 | | B | Lo Minastrin FE | 03/15/16 |
| G | desogestrel/ee | 01/01/18 | | B | Mircette | 01/01/16 |
| G | kariva | 01/01/18 | | | | |
| G | kimidess | 01/01/18 | | | | |
| G | pimtrea | 01/01/18 | | | | |
| G | violele | 01/01/18 | | | | |
| Tri-phasic/Multi-phasic[#] | | | | | | |
| G | alyacen 7/7/7 | 01/01/13 | | G | aranelle | 10/01/11 |
| G | cyclafem 7/7/7 | 01/01/13 | | G | caziant | 09/01/17 |
| B | Cyclessa | 01/01/18 | | G | leena | 01/01/11 |
| G | dasetta 7/7/7 | 01/01/13 | | B | Ortho-Novum 7/7/7 | 05/01/18 |
| G | enpresse | 01/01/11 | | G | tilia FE | 01/01/11 |
| B | Estrostep FE | 01/01/18 | | G | tri-legest FE | 01/01/11 |
| G | levonest | 01/01/13 | | G | tri-lo estaryl | 07/01/18 |
| G | levonorgestrel/ee | 03/15/16 | | B | Tri-Norinyl | 01/01/17 |
| G | myzilra | 01/01/13 | | G | velivet | 09/01/17 |
| B | Natazia | 01/01/16 | | | | |
| G | necon 7/7/7 | 11/15/11 | | | | |
| G | norgestimate/ee | 01/01/16 | | | | |
| G | nortrel 7/7/7 | 11/15/11 | | | | |
| B | Ortho Tri-Cyclen, Lo | 01/01/18 | | | | |
| G | pirmella 7/7/7 | 07/08/13 | | | | |
| G | tri femynor | 06/01/17 | | | | |
| G | tri-estaryl | 04/01/13 | | | | |
| G | tri-linyah | 04/01/13 | | | | |
| G | tri-marzia | 01/01/18 | | | | |
| G | tri-mili | 06/01/18 | | | | |
| G | trinessa | 03/15/16 | | | | |
| G | tri-previfem | 01/01/13 | | | | |
| G | tri-sprintec | 03/15/16 | | | | |
| G | trivora | 01/01/11 | | | | |
| G | tri-vylibra | 03/01/18 | | | | |

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| Extended Cycle[#] | | | | | |
| G | ashlyna | 01/01/18 | G | amethia, Lo | 01/01/13 |
| G | introvale | 01/01/18 | G | amethyst | 01/01/13 |
| G | jolessa | 01/01/16 | G | camrese, Lo | 01/01/13 |
| B | Loseasonique | 01/01/13 | G | daysee | 01/01/13 |
| G | quasense | 01/01/16 | G | fayosim | 05/01/17 |
| B | Seasonique | 01/01/13 | G | levonorgestrel/ee | 01/01/13 |
| G | setlakin | 01/01/17 | B | Quartette | 01/01/14 |
| | | | G | rivelsa | 05/01/17 |
| Emergency | | | | | |
| G | aftera | 01/01/16 | G | econtra EZ, OS | 04/01/18 |
| B | Plan B | 10/01/11 | B | Ella | 01/01/16 |
| G | take action | 05/14/14 | G | fallback | 01/01/16 |
| | | | G | levonorgestrel | 01/01/16 |
| | | | G | my choice | 03/01/18 |
| | | | G | my way | 08/20/14 |
| | | | G | next choice | 01/01/13 |
| | | | G | opcicon | 01/01/18 |
| | | | G | option 2 | 11/01/17 |
| | | | G | react | 11/01/16 |
| Cytokine Modulators | | | | | |
| Immunomodulators | | | | | |
| B | Enbrel | 02/01/10 | B | Actemra | 01/01/16 |
| B | Humira | 02/01/10 | B | Cimzia | 01/01/13 |
| | | | B | Cosentyx | 01/01/16 |
| | | | B | Dupixent* | 01/01/18 |
| | | | B | Kevzara | 11/01/17 |
| | | | B | Kineret | 01/01/16 |
| | | | B | Olumiant | 07/01/18 |
| | | | B | Orencia | 01/01/14 |
| | | | B | Otezla | 04/02/14 |
| | | | B | Siliq | 07/01/17 |
| | | | B | Simponi | 02/01/10 |
| | | | B | Stelara | 10/01/11 |
| | | | B | Taltz | 05/01/16 |
| | | | B | Tremfya | 08/01/17 |
| | | | B | Xeljanz, XR | 09/15/14 |

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| Dermatological | | | | | |
| Acne Products | | | | | |
| Antibiotics & Combinations (topical)** | | | | | |
| B | Acanya | 01/01/16 | BG | Aczone (dapsone) gel [†] | 11/01/17 |
| B | Benzaclin | 01/01/13 | G | adapalene/bp gel | 08/01/17 |
| G | bp/erythromycin | 01/01/13 | B | Benzamycin | 08/01/11 |
| G | clindamycin lot, sol, pad | 01/01/13 | B | Cleocin T | 08/01/11 |
| B | Epiduo, Forte | 01/01/14 | B | Clindacin kit | 08/01/11 |
| G | erythromycin 2% gel, sol | 01/01/13 | G | clindamycin foam [†] , gel | 04/01/13 |
| B | Evoclin [†] | 01/01/14 | G | clindamycin/bp | 04/01/13 |
| B | Onexton | 01/01/16 | G | clindamycin/tretinoin [†] | 08/01/17 |
| B | Ziana [†] | 01/01/13 | B | Duac | 01/01/16 |
| | | | B | EryGel | 01/01/16 |
| | | | G | erythromycin | 01/01/16 |
| | | | G | Neuac | 01/01/16 |
| | | | BG | Rezesol (resorcinol/sulfur) | 05/01/18 |
| | | | B | Veltin | 01/01/13 |
| Retinoids (topical)** | | | | | |
| B | Avita | 01/01/14 | G | adapalene [†] | 01/01/14 |
| B | Differin [†] | 01/01/14 | B | Atralin | 11/01/17 |
| B | Retin-A crm** | 01/01/14 | B | Fabior | 01/01/14 |
| B | Retin-A gel** | 01/01/14 | B | Retin-A Micro** | 08/01/11 |
| B | Tazorac [†] | 01/01/14 | G | tazarotene [†] | 05/01/17 |
| | | | G | tretinoin** | 01/01/14 |
| Miscellaneous (topical)** | | | | | |
| B | Azelex | 01/01/14 | BG | all washes | 08/01/11 |
| G | bp gel, lot | 08/01/11 | G | benzepro | 01/01/14 |
| B | Finacea gel | 01/01/14 | G | bp foam | 04/28/14 |
| B | Mirvaso | 01/01/18 | G | bp/hc lot | 12/01/17 |
| G | ss/sulfur susp, liq, emul | 12/01/16 | B | Finacea foam | 10/01/15 |
| | | | B | Klaron | 05/15/16 |
| | | | B | Ovace | 01/01/12 |
| | | | G | ss lot | 01/01/18 |
| | | | G | ss/sulfur foam, crm | 12/01/16 |
| | | | B | Sumadan XLT kit | 10/01/17 |
| | | | B | Sumaxin TS | 05/01/16 |
| | | | G | virt-sulf | 01/01/14 |
| Oral** | | | | | |
| G | claravis, 10, 20, 40mg | 08/01/11 | B | Absorica | 01/01/14 |
| | | | G | amnestem | 08/01/11 |
| | | | G | claravis 30mg | 01/01/14 |
| | | | G | isotretinoin | 03/01/18 |
| | | | G | myorisan | 01/01/18 |
| | | | G | zenatane | 08/11/11 |

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| Antifungals | | | | | | |
| G | butenafine | 12/01/17 | | G | ciclopirox sol | 01/01/13 |
| G | ciclopirox shmp, gel, crm, susp | 08/01/17 | | G | clotrimazole crm | 10/01/11 |
| G | clotrimazole sol | 10/01/11 | | B | CNL 8 Nail kit | 10/01/11 |
| B | Ertaczo | 01/01/14 | | G | econazole nitrate crm | 04/01/13 |
| G | ketoconazole shmp, crm | 10/01/11 | | B | Exelderm | 01/01/13 |
| B | Naftin 1% crm, gel [†] | 01/01/13 | | B | Extina | 10/01/11 |
| G | nystatin oint, crm | 10/01/11 | | B | Fungoid tincture | 01/01/13 |
| B | Nystop powder | 10/01/11 | | G | gentian violet sol | 06/01/13 |
| B | Pediaderm AF Complete | 01/01/13 | | B | Jublia | 09/15/14 |
| | | | | B | Kerydin | 09/15/14 |
| | | | | G | ketoconazole foam | 01/01/13 |
| | | | | B | Ketodan kit | 01/01/13 |
| | | | | B | Lamisil | 10/01/11 |
| | | | | B | Loprox | 08/01/17 |
| | | | | B | Luzu | 02/26/14 |
| | | | | B | Mentax | 10/01/11 |
| | | | | G | miconazole | 10/01/11 |
| | | | | G | naftifine 1% crm [†] | 08/01/17 |
| | | | | B | Naftin 2% | 01/01/14 |
| | | | | B | Nizoral | 10/01/11 |
| | | | | G | nyamyc | 10/01/11 |
| | | | | G | nystatin powder | 01/01/15 |
| | | | | BG | Oxistat (oxiconazole) | 10/01/11 |
| | | | | B | Pedipirox-4 | 01/01/14 |
| | | | | BG | Penlac (ciclopirox) | 10/01/11 |
| | | | | G | selenium sulfide | 04/01/12 |
| | | | | B | Spectazole | 10/01/11 |
| | | | | G | tolnaftate | 10/01/11 |
| | | | | B | Vusion | 10/01/11 |
| | | | | B | Xolegel | 10/01/11 |
| Antivirals | | | | | | |
| B | Zovirax [†] | 05/15/16 | | G | acyclovir oint [†] | 05/15/16 |
| | | | | B | Denavir | 01/01/14 |
| | | | | B | Xerese | 06/01/13 |
| Corticosteroids | | | | | | |
| Very Potent | | | | | | |
| G | betamethasone dip aug crm, lot | 10/01/13 | | B | Apexicon E | 10/01/13 |
| G | betamethasone dip crm | 01/01/18 | | G | betamethasone dip gel, aug lot, oint, aug oint | 10/01/13 |
| G | clobetasol crm, sol, oint | 01/01/18 | | G | clobetasol gel, foam, lot, shmp, spray | 01/01/18 |
| B | Clobex lot, shmp | 10/01/13 | | B | Clodan | 10/01/15 |
| B | Clobex spray | 01/01/16 | | B | Cordran tape | 10/01/13 |
| G | halobetasol | 01/01/18 | | B | Diprolene oint | 10/01/13 |
| | | | | G | fluocinonide 0.1% | 01/01/14 |
| | | | | G | flurandrenolide | 03/01/17 |
| | | | | B | Impoyz | 02/01/18 |
| | | | | B | Olux | 06/01/16 |
| | | | | BG | Psorcon (diflorasone) | 11/01/17 |
| | | | | B | Sernivo | 11/01/16 |
| | | | | B | Temovate | 10/01/13 |
| | | | | B | Ultravate | 01/01/18 |
| | | | | B | Vanos | 10/01/13 |

Utah Medicaid Preferred Drug List

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| Preferred Drugs | | Date | Key | Non Preferred Drugs | | Date |
|--|-----------------------------------|----------|---------------------|---------------------|---------------------------------|----------|
| Potent | | | | | | |
| G | fluocinonide 0.05% | 01/01/18 | | G | amcinonide | 10/01/13 |
| G | mometasone 0.1% oint | 10/01/13 | | B | Elocon oint | 10/01/13 |
| | | | | B | Halog | 10/01/13 |
| | | | | BG | Topicort (desoximetasone) 0.25% | 10/01/13 |
| | | | | G | tac 0.5% | 01/01/16 |
| Midstrength | | | | | | |
| G | betamethasone val crm, oint, foam | 01/01/18 | | G | betamethasone val lot | 10/01/13 |
| G | fluocinolone 0.025% crm, oint | 10/01/13 | | BG | Cloderm (clocortolone) | 01/01/14 |
| G | fluticasone lot, oint | 10/01/13 | | B | Cutivate | 10/01/13 |
| B | Kenalog spray [†] | 10/01/13 | | BG | Dermatop (prednicarbate) | 01/01/15 |
| G | mometasone 0.1% crm, sol | 10/01/13 | | B | Elocon crm, lot | 01/01/16 |
| B | Pandel crm 0.1% | 10/01/13 | | G | fluticasone crm, lot | 01/01/18 |
| G | tac 0.1% oint, crm, lot | 10/01/13 | | G | hc val 0.2% crm, oint | 01/01/16 |
| | | | | B | Luxiq | 10/01/17 |
| | | | | B | Synalar 0.025% crm, oint | 10/01/13 |
| | | | | G | tac spray [†] | 01/01/18 |
| | | | | BG | Topicort (desoximetasone) 0.05% | 10/01/13 |
| Mild strength | | | | | | |
| G | alclometasone | 01/01/16 | | B | Desowen | 10/01/15 |
| B | Capex | 10/01/13 | | G | fluocinolone 0.01% sol, oil | 10/01/13 |
| B | Corticoool gel | 10/01/13 | | G | hc buty 0.1% oint, lot, crm | 06/01/18 |
| B | Derma-Smoothe/FS oil | 10/01/13 | | B | MiCort HC | 01/01/18 |
| B | Desonate | 11/01/16 | | B | Pediaderm HC kit | 10/01/13 |
| G | desonide | 10/01/13 | | B | Texacort | 10/01/13 |
| G | fluocinolone 0.01% crm | 01/01/16 | | B | Trianex | 10/01/13 |
| G | hc 0.5% crm, oint | 10/01/13 | | | | |
| G | hc 1% crm, lot, oint | 10/01/13 | | | | |
| G | hc 2.5% crm, lot, oint | 10/01/13 | | | | |
| G | hc buty 0.1% sol | 10/01/13 | | | | |
| G | tac 0.025% oint, lot, crm | 10/01/13 | | | | |
| Steroid/Antifungal Combinations | | | | | | |
| G | clotrimazole/betamethasone | 1/1/2017 | | G | iodoquinol/hc | 10/01/17 |
| | | | | B | Lotrisone | 01/01/13 |
| | | | | G | nystatin/tac | 01/01/17 |
| Immunomodulating Agents* | | | | | | |
| B | Elidel | 01/01/15 | | BG | Protopic (tacrolimus) | 09/01/16 |

Utah Medicaid Preferred Drug List

Effective July 1, 2018

| | Preferred Drugs | Date | Key | | Non Preferred Drugs | Date |
|-----------------------------------|------------------------------------|----------|---------------------|----|-----------------------------------|----------|
| Local Anesthetic Agents | | | | | | |
| G | lidocaine hc rectal crm non-kit* | 01/01/15 | | B | Captracin | 01/15/15 |
| G | lidocaine oint, sol, gel, crm* | 01/01/15 | | B | Dermacinrx | 10/15/15 |
| G | lidocaine/prilocaine* | 11/01/16 | | B | Epifoam | 01/01/15 |
| | | | | G | lidocaine hc rectal crm, gel kit* | 01/01/15 |
| | | | | G | lidocaine lot* | 05/01/18 |
| | | | | G | lidocaine/tetracaine crm* | 03/01/18 |
| | | | | BG | Lidoderm (lidocaine patch)* | 03/01/16 |
| | | | | B | Lidosol-HC* | 04/01/18 |
| | | | | BG | Lidotral (lidocaine 3.88%)* | 11/01/16 |
| | | | | B | Lidotrex* | 04/01/18 |
| | | | | G | Pramcort | 01/01/15 |
| | | | | B | Proctofoam | 01/01/15 |
| | | | | B | Qutenza | 01/01/15 |
| | | | | B | Synera* | 01/01/15 |
| | | | | B | VP GKL crm kit* | 11/01/17 |
| | | | | B | Xylocaine sol* | 11/01/16 |
| Scabicides/Pediculocides | | | | | | |
| B | Natroba [†] | 01/01/15 | | B | Elimite | 01/01/15 |
| G | permethrin | 01/01/15 | | B | Eurax | 01/01/16 |
| B | Sklice | 01/01/15 | | G | lindane | 01/01/16 |
| | | | | BG | Ovide (malathion) | 01/01/15 |
| | | | | G | spinosad [†] | 01/01/15 |
| Diagnostic Products | | | | | | |
| Diabetic Test Supplies***† | | | | | | |
| | Abbott Products | 01/01/11 | | BG | All other diabetic test strips | 01/01/18 |
| B | Freestyle Test Strips | 01/01/11 | | BG | All other lancets | 01/01/18 |
| B | Precision Test Strips | 01/01/11 | | | | |
| | Trividia/True Metrix | 01/01/18 | | | | |
| B | TrueTrack Test Strips | 01/01/18 | | | | |
| B | True Metrix Test Strips | 01/01/18 | | | | |
| | | | | | | |
| | Lancets and lancing devices | | | | | |
| B | Accu-Check Fastclix products | 07/01/17 | | | | |
| B | Accu-Check Multiclix products | 02/01/18 | | | | |
| B | Accu-Check Softclix products | 07/01/17 | | | | |

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| Preferred Drugs | Date | Key | Non Preferred Drugs | Date |
|------------------------------------|----------|---|--------------------------------------|----------|
| Epinephrine | | | | |
| Autoinjectors | | | | |
| G Mylan epinephrine [¶] | 01/01/18 | ¶ Only Mylan authorized generic is preferred. This includes the following NDCs: 49502-0101-## 49502-0201-## | B AdrenaClick | 01/01/15 |
| | | | B Auvi-Q | 05/01/18 |
| | | | G epinephrine [¶] | 01/01/18 |
| | | | B EpiPen, JR | 01/01/18 |
| Estrogens | | | | |
| Oral Single Ingredient | | | | |
| G estradiol [#] | 10/01/11 | | B Enjuvia | 01/01/17 |
| B Menest | 10/01/11 | | B Estrace | 10/01/11 |
| B Premarin | 01/01/17 | | G estropipate | 01/01/18 |
| Oral Combination | | | | |
| B Activella | 01/01/18 | | G amabelz | 01/01/18 |
| B Premphase | 01/01/17 | | B Angeliq | 10/01/11 |
| B Prempro | 10/01/11 | | B Duavee | 11/01/16 |
| | | | G estradiol/norethindrone | 01/01/18 |
| | | | B FemHRT | 12/01/16 |
| | | | G fyavolv | 11/01/16 |
| | | | G jevantique | 01/01/18 |
| | | | G jinteli | 10/01/11 |
| | | | G lopreeza | 01/01/17 |
| | | | G mimvey, mimvey lo | 10/01/11 |
| | | | B Prefest | 10/01/11 |
| Topical & Miscellaneous | | | | |
| B Alora patch | 01/01/14 | | B Climara patch | 01/01/16 |
| B Climara Pro | 01/01/16 | | G estradiol patch | 10/01/11 |
| B Combipatch patch | 01/01/14 | | B Evamist spray | 10/01/11 |
| B Divigel | 01/01/16 | | B Menostar | 10/01/11 |
| B Elestrin gel | 01/01/18 | | B Minivelle patch | 01/01/14 |
| | | | B Vivelle-DOT patch | 01/01/18 |
| Vaginal | | | | |
| B Premarin crm | 10/01/11 | | BG Estrace (estriadiol) | 02/01/18 |
| B Vagifem [†] | 01/01/17 | | B Estring | 01/01/18 |
| | | | B Femring | 11/01/17 |
| | | | G yuvafem [†] | 01/01/17 |
| Gastrointestinal (GI) | | | | |
| Antiemetics | | | | |
| Anticholinergics | | | | |
| G meclizine | 11/01/16 | | B Cesamet | 01/01/15 |
| G prochlorperazine tab | 01/01/15 | | B Compro sup | 01/01/15 |
| G promethazine | 01/01/15 | | B Diclegis | 01/01/15 |
| B Tigan cap [†] | 01/01/15 | | G dimenhydrinate tab, inj | 01/01/15 |
| | | | G phenadoz | 01/01/15 |
| | | | B Phenergan | 01/01/15 |
| | | | G prochlorperazine sup, inj | 01/01/15 |
| | | | B Tigan inj | 01/01/15 |
| | | | BG Transderm-SC (scopolamine) | 06/01/16 |
| | | | G trimethobenzamide cap [†] | 01/01/15 |

Utah Medicaid Preferred Drug List

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| Preferred Drugs | | Date | Key | Non Preferred Drugs | | Date |
|--|-----------------------------|----------|---------------------|---------------------|-----------------------------------|----------|
| Miscellaneous newer classes | | | | | | |
| G | ondansetron tab, ODT**, inj | 01/01/13 | | B | Akynzeo | 10/15/15 |
| | | | | BG | Anzemet (granisetron) | 12/01/17 |
| | | | | B | Bonjesta | 04/01/18 |
| | | | | BG | Emend (aprepitant)* | 09/30/09 |
| | | | | G | ondansetron sol | 01/01/13 |
| | | | | B | Sancuso | 04/01/12 |
| | | | | B | Varubi | 10/15/15 |
| | | | | B | Zofran | 09/30/09 |
| | | | | B | Zuplenz | 04/01/12 |
| Bowel Evacuant Combinations | | | | | | |
| B | Colyte | 01/01/18 | | B | Clenpiq | 01/01/18 |
| G | gavilyte-c, g, n | 01/01/18 | | G | gavilyte-h | 01/01/16 |
| B | Golytely | 01/01/16 | | B | Poly-Prep kit | 10/01/17 |
| B | Moviprep | 01/01/16 | | B | Prepopik | 01/01/16 |
| B | Nulytely | 01/01/16 | | B | Suprep | 01/01/16 |
| G | PEG-3350/electrolytes | 01/01/18 | | | | |
| G | trilyte | 01/01/18 | | | | |
| PAMORAs* | | | | | | |
| B | Movantik | 04/01/16 | | B | Relistor | 04/01/16 |
| | | | | B | Symproic | 11/01/17 |
| Inflammatory Bowel Agents | | | | | | |
| Oral | | | | | | |
| B | Apriso | 01/01/15 | | B | Asacol | 04/01/18 |
| G | balsalazide | 07/01/14 | | B | Azulfidine | 07/01/14 |
| B | Lialda [†] | 01/01/18 | | B | Colazal | 07/01/14 |
| G | mesalamine 800mg tab | 04/01/18 | | B | Delzicol | 01/01/17 |
| B | Pentasa | 01/01/17 | | B | Dipentum | 07/01/14 |
| G | sulfasalazine | 07/01/14 | | B | Giazo | 07/01/14 |
| | | | | G | mesalamine 1.2g tab [†] | 01/01/18 |
| Rectal | | | | | | |
| B | Canasa sup | 07/01/14 | | BG | Rowasa (mesalamine) kit | 07/01/14 |
| G | mesalamine enema | 07/01/14 | | B | SfRowasa enema | 07/01/14 |
| Irritable Bowel Syndrome Agents | | | | | | |
| B | Amitiza | 01/01/18 | | G | alosectron [†] | 01/01/18 |
| B | Linzess | 01/01/16 | | B | Trulance | 03/01/17 |
| B | Lotronex [†] | 01/01/18 | | B | Viberzi | 01/01/16 |
| Pancreatic Enzymes | | | | | | |
| B | Creon | 08/01/11 | | B | Pancreaze | 01/01/12 |
| B | Zenpep | 08/01/11 | | G | pancrelipase | 01/01/18 |
| | | | | B | Pertzye | 01/01/14 |
| | | | | B | Viokace | 12/01/17 |
| Phosphate Binders | | | | | | |
| G | calcium acetate | 10/15/15 | | B | Auryxia | 10/15/15 |
| B | Eliphos | 07/01/14 | | BG | Fosrenol (lanthanum) [†] | 07/01/14 |
| B | Phoslyra sol | 07/01/14 | | G | sevelamer | 01/01/18 |
| B | Renagel | 07/01/14 | | B | Velphoro | 07/01/14 |
| B | Renvela | 01/01/18 | | | | |

Utah Medicaid Preferred Drug List

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| Preferred Drugs | Date | Key | Non Preferred Drugs | Date | |
|---|----------------------------------|---------------------|---------------------|--|----------|
| Ulcer Drugs | | | | | |
| H2 Antagonists | | | | | |
| G | cimetidine | 06/01/13 | G | nizatidine | 12/01/17 |
| G | famotidine [#] | 06/01/13 | B | Pepcid | 06/01/13 |
| G | ranitidine [#] | 06/01/13 | B | Zantac | 06/01/13 |
| Proton Pump Inhibitors^{#†} | | | | | |
| B | Dexilant | 01/01/18 | B | Aciphex | 01/01/16 |
| G | esomeprazole mag | 04/01/18 | G | esomeprazole str | 04/01/18 |
| B | Nexium granules ^{**} | 06/01/18 | B | Nexium cap | 04/01/18 |
| G | omeprazole 20, 40mg [#] | 01/01/13 | B | omeprazole 10mg | 01/01/13 |
| G | pantoprazole [#] | 01/01/13 | BG | Prevacid (lansoprazole) cap | 02/01/10 |
| | | | BG | Prevacid (lansoprazole) Solutabs ^{**†} | 02/01/10 |
| | | | B | Prilosec ^{**} | 01/01/18 |
| | | | B | Protonix ^{**} | 06/01/18 |
| | | | G | rabeprazole | 11/13/13 |
| | | | B | Yosprala | 10/01/16 |
| | | | BG | Zegerid (omeprazole/NaHCO ₃) ^{**} | 01/01/14 |
| † Liquid and quick dissolving formulations are only available to patients under 12 years old and those with any type of feeding tube. | | | | | |
| Gout | | | | | |
| Acute* | | | | | |
| G | colchicine cap | 07/01/17 | G | colchicine tab | 07/01/17 |
| | | | B | Colcrys | 07/01/17 |
| | | | B | Mitigare | 07/01/17 |
| | | | G | probenecid/colchicine | 07/01/17 |
| Chronic | | | | | |
| G | allopurinol [#] | 07/01/17 | B | Duzallo | 10/01/17 |
| G | probenecid | 07/01/17 | B | Uloric* | 07/01/17 |
| | | | B | Zurampic | 07/01/17 |
| | | | B | Zyloprim | 07/01/17 |
| Growth Hormone* | | | | | |
| B | Genotropin | 10/01/10 | B | Humatrope | 01/01/15 |
| B | Norditropin | 01/01/14 | B | Nutropin | 01/01/13 |
| | | | B | Omnitrope | 01/01/13 |
| | | | B | Saizen | 10/01/10 |
| | | | B | Serostim | 10/01/10 |
| | | | B | Zomacton | 11/01/16 |
| | | | B | Zorbtive | 01/01/13 |
| Hematopoietics | | | | | |
| Erythropoiesis Stimulating Agents (ESAs) | | | | | |
| B | Aranesp | 01/01/18 | B | Procrit | 01/01/18 |
| B | Épogen | 01/01/18 | B | Retacrit | 06/01/18 |

Utah Medicaid Preferred Drug List

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|------------------------|---------------------|----------|---------------------|---------------------|--|----------|
| Immune Globulin | | | | | | |
| B | Gamastan S/D | 01/01/16 | | B | Bivigam | 01/01/16 |
| B | Gammagard | 01/01/16 | | B | Carimune | 01/01/16 |
| B | Gammagard S/D | 01/01/16 | | B | Cuvitru | 01/01/18 |
| B | Gamunex-C | 01/01/16 | | B | Flebogamma | 01/01/16 |
| | | | | B | Gammaked | 01/01/16 |
| | | | | B | Gammaplex | 01/01/18 |
| | | | | B | Hizentra | 01/01/16 |
| | | | | B | Hyqvia | 01/01/16 |
| | | | | B | Octagam | 01/01/16 |
| | | | | B | Privigen | 01/01/16 |
| Migraine Agents | | | | | | |
| B | Relpax [†] | 01/01/13 | | BG | Amerge (naratriptan) | 01/01/13 |
| G | rizatriptan | 01/01/17 | | BG | Axert (almotriptan) | 01/01/13 |
| G | sumatriptan tab | 01/01/13 | | BG | Cafergot (ergotamine/caf) | 01/01/16 |
| B | Sumavel | 01/01/17 | | B | Cambia | 01/01/16 |
| | | | | G | eletriptan [†] | 09/01/17 |
| | | | | B | Ergomar | 05/01/18 |
| | | | | BG | Frova (frovatriptan) | 04/01/16 |
| | | | | BG | Imitrex (sumatriptan) spray, inj | 01/01/17 |
| | | | | B | Imitrex tab | 01/01/12 |
| | | | | B | Maxalt | 01/01/14 |
| | | | | BG | Migranal (dhe) spray | 12/01/17 |
| | | | | B | Onzetra | 05/01/16 |
| | | | | B | Treximet (sumatriptan/naproxen) [†] | 09/28/09 |
| | | | | B | Zembrace | 04/01/16 |
| | | | | BG | Zomig (zolmitriptan) | 06/01/13 |

Utah Medicaid Preferred Drug List

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| Preferred Drugs | Date | Key | Non Preferred Drugs | Date | | |
|--------------------------|---|---------------------|---|--------------------------|-------------------------|----------|
| Multivitamins | | | | | | |
| Prenatal Vitamins | | | | | | |
| B | Citranatal 90 DHA | 01/01/15 | † All rebate eligible prescription prenatal vitamins not listed here should be considered PREFERRED if they contain folic acid and DHA. | B | Citranatal Medley | 04/01/18 |
| B | Citranatal Assure | 01/01/17 | | B | Extra-Virt | 01/01/18 |
| B | Citranatal DHA | 01/01/17 | | B | Focalgin 90 DHA | 01/01/15 |
| B | Citranatal Harmony | 01/01/15 | | B | Focalgin CA | 01/01/15 |
| B | Concept DHA | 01/01/15 | | B | Infanate Cap Plus | 01/01/15 |
| B | Select-OB+DHA | 01/01/18 | | B | Nestabs ABC | 01/01/15 |
| B | Vitafof Fe+ | 01/01/17 | | B | Nexa Plus | 01/01/18 |
| B | Vitafof One | 01/01/18 | | BG | NON-DHA/Folate products | 01/01/16 |
| B | Vitafof Ultra | 01/01/17 | | B | OB Complete, Gold | 01/01/18 |
| B | Vitafof-OB+DHA | 04/01/17 | | B | PreferaOb +DHA | 01/01/15 |
| | | | | | | |
| BG | ALL OTHERS with DHA/Folate [†] | 01/01/16 | | B | Prenaisance, Plus | 01/01/18 |
| | | | | B | Prenatal DHA Pak | 03/01/18 |
| | | | B | Prenate DHA | 01/01/15 | |
| | | | B | Prenate Enhance | 01/01/18 | |
| | | | B | Prenate Essential | 01/01/15 | |
| | | | B | Prenate Mini | 01/01/16 | |
| | | | B | Prenate Pixie | 01/01/15 | |
| | | | B | Prenate Restore | 01/01/17 | |
| | | | B | Provida DHA | 01/01/15 | |
| | | | B | Rulavite DHA | 01/01/18 | |
| | | | B | Tricare | 01/01/18 | |
| | | | B | Tristart DHA | 01/01/15 | |
| | | | B | Vinate DHA | 01/01/15 | |
| | | | B | Virt-Select | 01/01/18 | |
| | | | B | VP-CH, Heme, Plus, Ultra | 01/01/15 | |

| | | | | | | |
|---|-----------------------------|----------|---|----|-----------------------------|------------------------------------|
| Muscle Relaxants | | | | | | |
| Antispasmodic Agents[‡] | | | | | | |
| G | chlorzoxazone 500mg | 09/28/09 | | B | Amrix | 09/28/09 |
| G | cyclobenzaprine 5, 10mg | 09/28/09 | | G | carisoprodol/asa | 09/28/09 |
| | | | | G | chlorzoxazone 250mg | 10/01/17 |
| | | | | G | cyclobenzaprine 7.5mg | 01/01/14 |
| | | | | B | Fexmid | 04/01/12 |
| | | | | B | Lorzone | 01/01/14 |
| | | | | G | orphenadrine | 09/28/09 |
| | | | | B | Parafon Forte | 01/01/16 |
| | | | | BG | Robaxin (methocarbamol) | 01/01/13 |
| | | | | BG | Skelaxin (metaxalone) | 01/01/16 |
| | | | | BG | Soma (carisoprodol) | 01/01/14 |
| Antispasticity Agents | | | | | | |
| G | baclofen [#] | 09/28/09 | | | BG | Dantrium (dantrolene) [‡] |
| G | tizanidine tab [‡] | 10/15/15 | G | | tizanidine cap [‡] | 10/15/15 |
| | | | B | | Zanaflex [‡] | 09/28/09 |

| | | | | | | |
|-----------------------|-----------------------|----------|--|---|--------------------------|----------|
| Nasal | | | | | | |
| Antihistamines | | | | | | |
| G | azelastine | 05/15/16 | | B | Astepro | 05/15/16 |
| B | Dymista | 01/01/18 | | B | Azenase Pak* | 01/01/18 |
| B | Patanase [†] | 10/01/10 | | G | olapatadine [†] | 01/01/16 |

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| Corticosteroids | | | | | | |
| B | Beconase AQ | 01/01/13 | | G | mometasone [†] | 01/01/18 |
| G | flunisolide | 01/01/13 | | B | Qnasl | 01/01/13 |
| G | fluticasone [#] | 10/01/09 | | B | Zetonna | 01/01/14 |
| B | Nasonex [†] | 01/01/18 | | | | |
| B | Omnaris | 01/01/13 | | | | |
| B | Veramyst | 10/01/09 | | | | |
| Neurological Agents | | | | | | |
| Antiparkinson Agents | | | | | | |
| COMT Inhibitors & Combinations | | | | | | |
| G | amantadine | 06/01/13 | | G | carbidopa/levodopa ODT | 10/01/09 |
| G | carbidopa/levodopa, ER | 01/01/14 | | G | carbidopa/levodopa/entacapone | 01/01/14 |
| | | | | BG | Comtan (entacapone) | 01/01/14 |
| | | | | B | Duopa | 02/11/15 |
| | | | | B | Gocovri | 10/01/17 |
| | | | | BG | Lodosyn (carbidopa) | 11/01/16 |
| | | | | B | Northera | 08/15/14 |
| | | | | B | Rytary | 10/01/15 |
| | | | | B | Sinemet | 01/01/14 |
| | | | | B | Stalevo | 01/01/14 |
| | | | | B | Tasmar (tolcapone) | 10/01/09 |
| MAO Inhibitors | | | | | | |
| G | selegiline | 02/01/10 | | BG | Azilect (rasagiline) | 10/01/09 |
| | | | | B | Osmolex ER | 06/01/18 |
| | | | | B | Xadago | 06/01/17 |
| | | | | B | Zelapar | 10/01/09 |
| Non-ergot Derived Dopamine Receptor Agonists and Others | | | | | | |
| G | pramipexole [#] | 12/02/11 | | B | Mirapex, ER | 01/01/13 |
| G | ropinirole [#] | 10/01/09 | | B | Neupro patch | 10/01/09 |
| | | | | B | Nuplazid | 06/01/17 |
| | | | | G | pramipexole ER | 04/01/17 |
| | | | | B | Requip, XL | 10/01/09 |
| | | | | G | ropinirole ER | 10/01/09 |
| Movement Disorder Treatments | | | | | | |
| VMAT-2 Inhibitors | | | | | | |
| B | Xenazine [†] | 07/01/18 | | B | Austedo | 07/01/18 |
| | | | | B | Ingrezza | 07/01/18 |
| | | | | G | tetrabenazine [†] | 07/01/18 |
| Multiple Sclerosis Agents | | | | | | |
| B | Avonex | 02/01/10 | | B | Ampyra* | 01/01/13 |
| B | Betaseron | 01/01/16 | | B | Aubagio | 01/01/13 |
| B | Copaxone 20mg [†] | 09/28/09 | | B | Copaxone 40mg | 05/30/14 |
| B | Gilenya [§] | 01/01/18 | | B | Extavia | 01/01/16 |
| B | Tecfidera [§] | 01/01/18 | | G | glatiramer [†] | 07/01/15 |
| | | | | B | Rebif | 01/01/15 |
| | | | | B | Zinbryta | 08/01/16 |

Utah Medicaid Preferred Drug List

Effective July 1, 2018

| Preferred Drugs | | Date | Key | Non Preferred Drugs | | Date |
|-----------------------------|-------------------------------|----------|---------------------|---------------------|---|----------|
| Ophthalmics | | | | | | |
| Anti-Glaucoma Agents | | | | | | |
| Alpha Adrenergics | | | | | | |
| B | Alphagan P 0.15% [†] | 01/01/13 | | G | apraclonidine | 10/01/10 |
| B | Alphagan P 0.1% | 01/01/14 | | G | brimonidine 0.15% [†] | 10/01/10 |
| G | brimonidine 0.2% | 10/01/10 | | G | brimonidine/dorzolamide | 07/01/18 |
| B | Simbrinza | 06/30/14 | | B | lopidine | 01/01/14 |
| Beta Blockers | | | | | | |
| G | dorzolamide/timolol | 04/01/16 | | B | Betagan | 04/01/16 |
| G | levobunolol | 04/01/16 | | G | betaxolol | 04/01/16 |
| G | timolol | 04/01/16 | | B | Betoptic-S | 04/01/16 |
| | | | | G | carteolol | 04/01/16 |
| | | | | B | Combigan | 04/01/16 |
| | | | | B | Cosopt, PF | 04/01/16 |
| | | | | G | dorzolamide/timolol/brimonidine | 07/01/18 |
| | | | | G | dorzolamide/timolol/brimonidine/latanoprost | 07/01/18 |
| | | | | G | dorzolamide/timolol/latanoprost | 07/01/18 |
| | | | | BG | Istalol (timolol once daily) [†] | 01/01/18 |
| | | | | G | latanoprost/timolol | 07/01/18 |
| | | | | B | Timoptic | 04/01/16 |
| | | | | BG | Timoptic Occudose (timolol PF) | 04/01/16 |
| | | | | BG | Timoptic-XE (timolol) gel | 04/01/16 |
| Prostaglandins | | | | | | |
| G | latanoprost | 12/02/11 | | G | bimatoprost | 05/06/15 |
| B | Travatan Z | 01/01/12 | | B | Lumigan | 01/01/12 |
| B | Zioptan | 04/18/13 | | G | travoprost | 04/30/13 |
| | | | | B | Vyzulta | 12/01/17 |
| | | | | B | Xalatan | 12/02/11 |
| Cholinergic Agonists | | | | | | |
| G | pilocarpine | 04/01/16 | | B | Isopto Carpine | 04/01/16 |
| Antibiotics | | | | | | |
| Quinolones | | | | | | |
| B | Besivance | 01/01/18 | | B | Ciloxan | 11/01/16 |
| G | ciprofloxacin | 06/01/12 | | G | levofloxacin | 06/01/12 |
| B | Moxeza | 01/01/13 | | G | moxifloxacin | 08/01/17 |
| | | | | BG | Ocuflox (ofloxacin) | 06/01/12 |
| | | | | B | Vigamox | 01/01/18 |
| | | | | B | Zymaxid | 06/01/12 |
| Non-Quinolones | | | | | | |
| G | erythromycin oint | 12/01/17 | | G | ak/poly/bac | 01/01/13 |
| B | Gentak | 01/01/13 | | B | Azasite | 06/01/12 |
| G | gentamicin drops, oint | 06/01/12 | | G | bac | 06/01/12 |
| G | neomycin/poly/gram sol | 12/01/17 | | G | bac/poly B | 01/01/13 |
| G | poly/trimethoprim | 06/01/12 | | B | Bleph-10 | 12/01/17 |
| G | ss drops | 12/01/17 | | B | Natacyn | 06/01/12 |
| | | | | G | neomycin/bac/poly | 01/01/13 |
| | | | | G | polycin | 01/01/13 |
| | | | | B | Polytrim | 01/01/13 |
| | | | | G | ss oint | 12/01/17 |
| | | | | G | tobramycin drops | 01/01/13 |
| | | | | B | Tobrex drops, oint | 01/01/13 |

Utah Medicaid Preferred Drug List

Effective July 1, 2018

| Preferred Drugs | Date | Key | Non Preferred Drugs | Date |
|--|----------|---------------------|---|----------|
| Antihistamines | | | | |
| B Alomide | 01/01/14 | | B Alocril | 01/01/14 |
| B Bepreve | 01/01/18 | | G azelastine | 10/01/10 |
| G cromolyn | 01/01/14 | | B Elestat | 10/01/10 |
| B Lastacaft | 1/1/2018 | | B Emadine | 01/01/13 |
| B Pazeo | 01/01/17 | | G epinastine | 01/01/14 |
| | | | G olopatadine | 01/01/16 |
| | | | B Pataday | 01/01/18 |
| | | | B Patanol | 01/01/17 |
| Anti-Inflammatory | | | | |
| Corticosteroids | | | | |
| B Alrex | 06/01/12 | | G dexamethasone NaPO ₄ | 01/01/13 |
| B Flarex | 06/01/12 | | B Durezol | 06/01/12 |
| G fluorometholone | 06/01/12 | | B FML liquifilm | 01/01/18 |
| B FML oint, Forte | 01/01/18 | | B Lotemax oint, gel | 06/01/12 |
| B Lotemax drops | 06/01/12 | | B Omnipred | 06/01/12 |
| B Maxidex | 06/01/12 | | B Pred Forte | 01/01/13 |
| B Pred Mild | 06/01/12 | | G prednisolone NaPO ₄ | 06/01/12 |
| G prednisolone acetate | 06/01/12 | | B Vexol | 06/01/12 |
| NSAIDs | | | | |
| B Acuvail | 06/01/12 | | B Acular | 06/01/12 |
| G diclofenac | 06/01/12 | | G bromfenac | 01/01/13 |
| G flurbiprofen | 06/01/12 | | B Bromsite | 11/01/16 |
| G ketorolac | 06/01/12 | | B Ilevro | 01/01/14 |
| | | | B Nevanac | 06/01/12 |
| | | | B Ocufen | 06/01/12 |
| | | | B Prolensa | 04/16/13 |
| Combinations | | | | |
| B Blephamide drops | 06/01/12 | | B Blephamide S.O.P. oint | 01/01/16 |
| G gatifloxacin/dexamethasone | 06/01/18 | | B Maxitrol oint | 01/01/16 |
| B Maxitrol drops | 06/01/12 | | G moxifloxacin/dexamethasone | 07/01/18 |
| G neomycin/poly/dexamethasone | 06/01/12 | | G moxifloxacin/triamcinolone | 07/01/18 |
| B Pred-G, S.O.P. | 01/01/18 | | G neomycin/poly/bac | 01/01/18 |
| B Tobradex [0.3/0.1% drops] [†] | 01/01/13 | | G neomycin/poly/bac/hc | 06/01/12 |
| B Tobradex oint | 01/01/16 | | G neomycin/poly/hc | 06/01/12 |
| | | | B Pred-G S.O.P. | 06/01/12 |
| | | | B Pred-Gati | 06/01/18 |
| | | | G prednisolone/gatifloxacin/bromfenac | 07/01/18 |
| | | | G ss oint | 01/01/13 |
| | | | G ss/prednisolone drops | 06/01/12 |
| | | | B Tobradex ST | 01/01/18 |
| | | | G tobramycin/dexamethasone [†] | 06/01/12 |
| | | | B Zylet | 06/01/12 |
| Otic Agents | | | | |
| Antibiotics | | | | |
| G ciprofloxacin otic sol 0.2% | 01/01/16 | | BG Floxin otic (ofloxacin) | 12/01/17 |
| Corticosteroids | | | | |
| B DermOtic | 11/01/15 | | G fluocinonide 0.01% | 10/01/13 |
| G hc/acetic acid | 01/01/18 | | | |

Utah Medicaid Preferred Drug List

Effective July 1, 2018

| | Preferred Drugs | Date | Key | | Non Preferred Drugs | Date |
|---|--------------------------|----------|---------------------|----|--------------------------------|----------|
| Combinations | | | | | | |
| B | Cipro HC | 10/01/13 | | G | neomycin/poly/hc sol | 11/01/15 |
| B | CiproDex | 01/01/14 | | B | Otovel | 09/01/16 |
| B | Coly-Mycin susp | 11/01/15 | | | | |
| G | neomycin/poly/hc susp | 11/01/15 | | | | |
| Prostatic Hypertrophy Agents | | | | | | |
| G | alfuzosin | 01/01/14 | | B | Avodart | 01/01/18 |
| G | doxazosin [#] | 10/01/11 | | B | Cardura | 04/01/12 |
| G | dutasteride | 01/01/18 | | B | Flomax | 10/01/11 |
| G | finasteride [#] | 10/01/11 | | BG | Jalyn (dutasteride/tamsulosin) | 10/01/11 |
| B | Rapaflo | 01/01/18 | | B | Proscar | 10/01/11 |
| G | tamsulosin [#] | 01/01/12 | | B | Uroxatral | 01/01/13 |
| G | terazosin [#] | 10/01/11 | | | | |
| Pulmonary Hypertension | | | | | | |
| Endothelin Antagonists | | | | | | |
| B | Letairis | 01/01/12 | | B | Opsumit | 10/01/13 |
| B | Tracleer | 01/01/12 | | | | |
| Phosphodiesterase-5 Enzyme (PDE-5) Inhibitors* | | | | | | |
| G | sildenafil | 09/01/13 | | B | Adcirca | 01/01/14 |
| | | | | B | Revatio | 09/01/13 |
| Prostacyclins | | | | | | |
| G | epoprostenol | 06/01/12 | | B | Flolan | 06/01/12 |
| | | | | B | Orenitram | 04/02/14 |
| | | | | B | Remodulin | 06/01/12 |
| | | | | B | Tyvaso | 06/01/12 |
| | | | | B | Upravi | 01/15/16 |
| | | | | B | Veletri | 06/01/12 |
| | | | | B | Ventavis | 01/01/14 |
| Respiratory | | | | | | |
| Asthma & COPD | | | | | | |
| Anticholinergics[‡] | | | | | | |
| B | Atrovent HFA | 04/01/12 | | B | Incruse Ellipta | 01/01/15 |
| G | ipratropium | 04/01/12 | | B | Lonhala Magnair | 03/01/18 |
| B | Spiriva Handihaler | 01/01/11 | | B | Seebri Neohaler | 09/01/17 |
| | | | | B | Spiriva Respimat | 01/01/17 |
| | | | | B | Tudorza Pressair | 01/01/13 |
| Short Acting Beta Agonists (SABA)[‡] | | | | | | |
| G | albuterol neb | 01/01/13 | | G | levalbuterol HFA | 12/01/16 |
| G | levalbuterol neb | 05/15/16 | | B | ProAir RespiClick | 12/01/17 |
| B | ProAir HFA | 09/28/09 | | B | Xopenex neb | 05/15/16 |
| B | Proventil HFA | 01/01/13 | | | | |
| B | Ventolin HFA | 09/28/09 | | | | |
| B | Xopenex HFA [†] | 01/01/12 | | | | |
| Long Acting Beta Agonists (LABA)[‡] | | | | | | |
| B | Perforomist | 09/28/09 | | B | Arcapta | 10/01/15 |
| B | Serevent Diskus | 09/28/09 | | B | Brovana | 01/01/16 |
| | | | | B | Striverdi | 04/30/15 |

Utah Medicaid Preferred Drug List

Effective July 1, 2018

| | Preferred Drugs | Date | Key | | Non Preferred Drugs | Date |
|---|-----------------------------|----------|---------------------|----|---------------------------------|----------|
| Corticosteroids[†] | | | | | | |
| B | Alvesco | 01/01/18 | | B | Aerospan | 02/01/17 |
| B | Flovent Diskus, HFA | 06/28/11 | | B | Armonair | 09/01/17 |
| B | Pulmicort 0.25/2ml, 0.5/2ml | 01/01/13 | | B | Arnuity Ellipta | 01/01/15 |
| B | Pulmicort Flexhaler | 01/01/13 | | B | Asmanex | 01/01/15 |
| B | Qvar | 09/28/09 | | G | budesonide ampules | 01/01/13 |
| | | | | B | Pulmicort 1mg/2ml | 09/28/09 |
| Leukotriene Receptor Antagonists | | | | | | |
| G | montelukast tab, chw | 01/01/13 | | BG | Accolate (zafirlukast) | 01/01/18 |
| | | | | G | montelukast granules | 01/01/13 |
| | | | | B | Singulair | 01/01/13 |
| | | | | B | Zyflo (zileuton), CR | 10/15/15 |
| Oral Beta Agonists | | | | | | |
| G | albuterol tab, syp | 01/01/13 | | G | albuterol ER | 01/01/16 |
| G | metaproterenol syp | 01/01/13 | | G | metaproterenol tab 10, 20mg | 01/01/13 |
| G | terbutaline | 01/01/13 | | B | Vospire ER | 01/01/13 |
| Combinations[†] | | | | | | |
| B | Advair Diskus | 09/28/09 | | B | Advair HFA | 01/01/16 |
| B | Breo Ellipta | 01/01/16 | | BG | AirDuo (fluticasone/salmeterol) | 05/01/17 |
| B | Dulera | 05/23/11 | | B | Combivent, Respimat | 04/01/13 |
| G | ipratropium/albuterol | 01/01/14 | | | | |
| B | Symbicort | 01/01/13 | | | | |
| LABA/LAMA Combinations | | | | | | |
| B | Anoro Ellipta | 09/01/17 | | B | Stiolto Respimat | 09/01/17 |
| B | Bevespi | 01/01/18 | | B | Trelegy Ellipta | 11/01/17 |
| | | | | B | Utibron | 09/01/17 |
| Urinary | | | | | | |
| Antispasmodics | | | | | | |
| Short Acting Agents | | | | | | |
| G | bethanechol 10, 25mg | 01/01/14 | | G | bethanechol 5, 50mg | 01/01/14 |
| G | oxybutynin | 09/28/09 | | BG | Detrol (tolterodine) | 09/28/09 |
| | | | | G | flavoxate | 09/28/09 |
| | | | | G | tropium | 10/01/13 |
| | | | | B | Urecholine | 01/01/14 |
| Long Acting | | | | | | |
| G | oxybutynin ER | 02/01/10 | | BG | Detrol LA (tolterodine ER) | 01/01/14 |
| B | Toviaz | 09/28/09 | | B | Ditropan XL | 01/01/12 |
| B | Vesicare | 09/28/09 | | BG | Enablex (darifenacin) | 04/01/16 |
| | | | | B | Gelnique | 05/01/17 |
| | | | | B | Myrbetriq | 05/09/13 |
| | | | | B | Oxytrol Rx | 10/01/16 |
| | | | | G | tropium ER | 10/01/13 |
| Vitamin D Analogs | | | | | | |
| G | calcitriol cap | 01/01/18 | | G | calcitriol sol [†] | 01/01/18 |
| B | Rocaltrol sol [†] | 01/01/18 | | G | doxercalciferol | 01/01/15 |
| G | vitamin D | 01/01/15 | | B | Hectorol | 01/01/18 |
| | | | | B | Rayaldee | 05/01/17 |
| | | | | B | Rocaltrol cap | 01/01/18 |
| | | | | BG | Zemplar (paricalcitol) | 01/01/15 |

Utah Medicaid Preferred Drug List Explanations

Last Modified May 1, 2018

Explanations

Drugs not listed on the PDL are covered via regular pharmacy provider manual policy.

A drug listing on the PDL consists of 3 columns on one line. From left to right, these are the Brand/Generic indicator, the drug name, and the date that listing was last updated. The general convention used for the PDL is that the more generic the listing is, the broader the listing encompasses. For example, if there are several strengths and dosage forms available for a particular drug within a class, a simple listing of the generic name would indicate that all generic strengths, dosage forms, and formulations for that drug in that class are implied. The same principle applies to branded drugs. In some cases, formulations of a drug may fall in multiple classes - for example some contraceptives and some topical preparations. When the strength and/or dosage form is included in a listing, that narrows the listing to those particular strengths and/or dosage forms. A comma may be used to delineate multiple strengths, dosage forms, or formulations.

For example:

Drug ER indicates that only the ER formulation is part of that listing.

Drug, ER indicates that both the immediate release and ER formulations are part of that listing.

- If a footnote symbol is in the class name, the notation applies to the entire class; if a footnote symbol is after a drug name, the notation applies to that drug specifically.
- If a footnote symbol is before a strength, dosage form, or formulation, only those preceding the notation are covered by the notation.
- Unless otherwise noted, over-the-counter (OTC) products are not included on the PDL. A complete listing of covered OTC products can be found in the OTC reference.
- If a brand and generic have the same status (i.e. both are preferred or both are non-preferred). The generic name will be in parentheses ().
- Information in brackets [] indicates important notes about a drugs (i.e. specified strengths or formulations that are part of, or excluded from that drug's status).
- Within a drug class, "failure" on a preferred drug must be on a drug with a similar dosage form and use/indication to the requested drug where possible.
- For non-preferred combination products, if the separate single ingredient products are preferred, those must be tried before the non-preferred product will be approved
- For non-preferred drugs that have a dosage form or indications/general usage that are similar to a preferred drug, the similar drug must be failed before the non-preferred drug will be approved.
- For non-preferred drugs that have a preferred strength or dosage form on the PDL, the preferred strength or dosage form must be tried before the non-preferred strength will be approved.
- Kits - Utah Medicaid does not generally reimburse for dosing kits. Unless a product is only available in a kit, this form must be used prior to requesting a PA for a kit.
- The dosage form is generally not included in a listing unless a drug is available in more than one dosage form and they do not all have the same status (preferred or non-preferred).
- If multiple dosage forms of a drug are available, but the drug is only listed once (i.e. preferred or non-preferred), it is implied that all dosage forms fall under that listing.
- New changes made in the current release of the PDL have the date highlighted in yellow.
- Non-preferred Drugs require a Prior Authorization effective 5/15/2009.
- If a non-preferred drug requires a clinical prior authorization, the clinical PA form AND the non-preferred PA form must be submitted.

Utah Medicaid Preferred Drug List Footnotes

Last Modified July 1, 2018

| Symbols and Footnotes | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------|--|---------------|-------------|--|---------------|--|---------------|---------------|--|---------------|---------------|--|---------------|---------------|--|--|---------------|--|--|---------------|--|--|
| * | Clinical PA required PA Criteria Forms | | | | | | | | | | | | | | | | | | | | | |
| ** | Clinical PA required in some cases - see specific PA criteria for details | | | | | | | | | | | | | | | | | | | | | |
| † | Brand Required Over Generic. Refer to Brand Over Generic (BOG) reference in the Resource Library | | | | | | | | | | | | | | | | | | | | | |
| ‡ | Quantity Limits Apply. Drug Criteria and Limits Attachment to the Pharmacy Manual | | | | | | | | | | | | | | | | | | | | | |
| # | May be filled for up to a 90-day supply Utah Medicaid 90-Day Supply Medication List | | | | | | | | | | | | | | | | | | | | | |
| ## | Must be dispensed directly to the provider, not the patient | | | | | | | | | | | | | | | | | | | | | |
| ¶ | Indicates that additional pertinent information can be found in the center area between preferred and non-preferred drugs | | | | | | | | | | | | | | | | | | | | | |
| § | Step Therapy required. Must fail a preferred injectable agent first | | | | | | | | | | | | | | | | | | | | | |
| §§ | <p>Pursuant to HB 437, passed during the 2016 General Session, Utah Medicaid began placing psychotropic drugs on the Preferred Drug List (PDL) effective July 1, 2016. For the purposes of the Preferred Drug List, psychotropic medications are defined as atypical antipsychotics, anti-depressants, anti-convulsants/mood stabilizers, anti-anxiety medications, and attention deficit hyperactivity disorder (ADHD) stimulants. The first class that will be placed on the PDL in July will be ADHD stimulants with other classes being added in subsequent quarters.</p> <p>Non-preferred psychotropic medication classes listed on the PDL may bypass the non-preferred drug prior authorization if a prescriber writes “dispense as written” on a prescription and the pharmacy submits a Dispense As Written (DAW) Code of “1” on the claim.</p> <p>Note: In accordance with UCA 58-17b-606 (4) and (5), the DAW Code will not allow claims for the brand-name version of multisource drugs to bypass the prior authorization requirement, even if the brand-name version of the drug is listed as non-preferred and the prescriber writes “dispense as written” on the prescription. An exception to this is in the case that a brand-name drug is listed on the Brand Over Generic reference; in that case, the DAW Code will only override the brand-name drug.</p> <p>Note: In order for a prescription to be eligible for the pharmacy to submit the DAW Code of “1” to bypass the edit for a non-preferred medication the prescriber must write “dispense as written” on the physical prescription. Check boxes or pre-printed forms that include “dispense as written” are not acceptable substitutes for the prescriber writing “dispense as written” on the prescription. Electronic prescriptions must state “dispense as written” as either a note or as part of the prescription drug order to satisfy this requirement. Verbal orders that include “dispense as written” must be reduced to writing on the prescription by the pharmacist accepting the verbal order and documented in the member’s medical record.</p> | | | | | | | | | | | | | | | | | | | | | |
| *** | <p>The following meter NDCs are covered through Medicaid:</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 30%; border: none;">Abbott</td> <td style="width: 30%; border: none;">True Metrix</td> <td style="width: 40%; border: none;"></td> </tr> <tr> <td style="border: none;">99073-0711-43</td> <td style="border: none;"></td> <td style="border: none;">56151-1490-02</td> </tr> <tr> <td style="border: none;">99073-0709-14</td> <td style="border: none;"></td> <td style="border: none;">56151-1470-02</td> </tr> <tr> <td style="border: none;">99073-0708-05</td> <td style="border: none;"></td> <td style="border: none;">56151-0888-80</td> </tr> <tr> <td style="border: none;">57599-8814-01</td> <td style="border: none;"></td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">57599-0745-01</td> <td style="border: none;"></td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">57599-5175-01</td> <td style="border: none;"></td> <td style="border: none;"></td> </tr> </table> <p>Abbott meters may also be billed to the manufacturer using the following:</p> <ul style="list-style-type: none"> RxBIN: 610020 Group number: 99992432 ID: ERXUTMED Free for Medicaid members <p>Diabetic test supplies are not covered for Nursing Home clients.</p> <p>Non-preferred products must be billed through DME.</p> | Abbott | True Metrix | | 99073-0711-43 | | 56151-1490-02 | 99073-0709-14 | | 56151-1470-02 | 99073-0708-05 | | 56151-0888-80 | 57599-8814-01 | | | 57599-0745-01 | | | 57599-5175-01 | | |
| Abbott | True Metrix | | | | | | | | | | | | | | | | | | | | | |
| 99073-0711-43 | | 56151-1490-02 | | | | | | | | | | | | | | | | | | | | |
| 99073-0709-14 | | 56151-1470-02 | | | | | | | | | | | | | | | | | | | | |
| 99073-0708-05 | | 56151-0888-80 | | | | | | | | | | | | | | | | | | | | |
| 57599-8814-01 | | | | | | | | | | | | | | | | | | | | | | |
| 57599-0745-01 | | | | | | | | | | | | | | | | | | | | | | |
| 57599-5175-01 | | | | | | | | | | | | | | | | | | | | | | |

Utah Medicaid Preferred Drug List Key

Last Modified June 1, 2018

| Key | | | |
|------------------------|------------------------|-------------------|------------------------------|
| Selected Abbreviations | | | |
| Drug Name | | Dosage Form | |
| amph | amphetamine | aug | augmented |
| apap | acetaminophen | cap | capsule |
| asa | aspirin | chw | chewable |
| bac | bacitracin | con | concentrate |
| bp | benzoyl peroxide | crm | cream |
| but | butalbital | emul | emulsion |
| caf | caffeine | inj | injection |
| damp | dextroamphetamine | liq | liquid |
| dhe | dihydroergotamine | lot | lotion |
| dmph | dexmethylphenidate | loz | lozenge |
| ee | ethinyl estradiol | neb | nebulization solution |
| hc | hydrocortisone | ODT | orally disintegrating tablet |
| hctz | hydrochlorothiazide | oint | ointment |
| ibu | ibuprofen | shmp | shampoo |
| mph | methylphenidate | SL | sublingual |
| NaHCO ₃ | sodium bicarbonate | sol | solution |
| poly | polymyxin | sup | suppository |
| sa | sulfacetamide | susp | suspension |
| ss | sodium sulfacetamide | syp | syrup |
| tac | triamcinolone | tab | tablet |
| Brand/Generic | | Salt Form | |
| B | Brand | buty | butyrate |
| BG | Both Brand and Generic | dip | dipropionate |
| G | Generic | mag | Magnesium |
| | | Na | sodium |
| | | NaPO ₄ | sodium phosphate |
| | | pam | pamoate |
| | | str | Strontium |