

NEW YORK STATE MEDICAID PREFERRED DRUG LIST

All non-preferred drugs in these classes require prior authorization

I. ANALGESICS

Cyclooxygenase II (COX II) Inhibitors

PREFERRED AGENTS

Celebrex[®]

Narcotics – Long Acting

PREFERRED AGENTS

Duragesic[®] morphine sulfate SR
fentanyl patch Opana ER[®]
Kadian[®] Oramorph SR[®]

Cyclooxygenase II (COX II) Inhibitors

NON-PREFERRED AGENTS

None

Narcotics – Long Acting

NON-PREFERRED AGENTS

Avinza[®] oxycodone HCL CR
MS Contin[®] Oxycotin[®]

II. ANTI-INFECTIVES

Anti-Fungals

PREFERRED AGENTS

ciclopirox (lacquer) griseofulvin (suspension)
Grifulvin V[®] (tablet) terbinafine (tablet)
Gris-PEG[®]

Anti-Virals

PREFERRED AGENTS

acyclovir (capsule, suspension, tablet)
famciclovir
Valtrex[®]

Cephalosporins – Third Generation

PREFERRED AGENTS

Cedax[®] cefpodoxime proxetil
cefdinir Suprax[®]

Fluoroquinolones - Oral

PREFERRED AGENTS

Avelox[®]
Avelox ABC Pack[®]
Cipro[®] (suspension)
ciprofloxacin (tablet)
ofloxacin (tablet)

Pegylated Interferons

PREFERRED AGENTS

PEG-Intron[®]
Peg-Intron Redipen[®]
Pegasys[®]
Pegasys Convenience Pack[®]

Anti-Fungals

NON-PREFERRED AGENTS

Grifulvin V[®] (suspension) Penlac[®]
itraconazole Sporanox[®]
Lamisil[®] (tablet)

Anti-Virals

NON-PREFERRED AGENTS

Famvir[®]
Zovirax[®] (capsule, suspension, tablet)

Cephalosporins – Third Generation

NON-PREFERRED AGENTS

Omnicef[®] Vantin[®]
Spectracef[®]

Fluoroquinolones - Oral

NON-PREFERRED AGENTS

Cipro[®] (tablet) Levaquin[®]
Cipro XR[®] Noroxin[®]
ciprofloxacin ER Proquin XR[®]
Factive[®] Tequin[®]
Floxin[®] (tablet)

Pegylated Interferons

NON-PREFERRED AGENTS

None

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III. CARDIOVASCULAR

Angiotensin Converting Enzyme Inhibitors (ACEIs)

PREFERRED AGENTS

Altace [®] (capsule)	lisinopril
benazepril	moexipril
captopril	ramipril (capsule)
enalapril maleate	trandolapril

ACEIs + Calcium Channel Blockers

PREFERRED AGENTS

benazepril/amlodipine	Tarka [®]
Lotrel [®]	

ACEIs + Diuretics

PREFERRED AGENTS

benazepril/HCTZ	lisinopril/HCTZ
captopril/HCTZ	moexipril/HCTZ
enalapril maleate/HCTZ	

Angiotensin Receptor Blockers (ARBs)

PREFERRED AGENTS

Avapro [®]	Diovan [®]
Benicar [®]	Exforge [®]
Cozaar [®]	Micardis [®]

ARBs + Diuretics

PREFERRED AGENTS

Avalide [®]	Hyzaar [®]
Benicar HCT [®]	Micardis HCT [®]
Diovan HCT [®]	

Beta Blockers

PREFERRED AGENTS

acebutolol	metoprolol tartrate
atenolol	nadolol
betaxolol	pindolol
bisoprolol fumarate	propranolol
carvedilol	propranolol ER/SA
labetalol	timolol maleate

Angiotensin Converting Enzyme Inhibitors (ACEIs)

NON-PREFERRED AGENTS

<i>Accupril[®]</i>	<i>Monopril[®]</i>
<i>Aceon[®]</i>	<i>Prinivil[®]</i>
<i>Altace[®] (tablet)</i>	<i>quinapril</i>
<i>Capoten[®]</i>	<i>Univasc[®]</i>
<i>fosinopril sodium</i>	<i>Vasotec[®]</i>
<i>Lotensin[®]</i>	<i>Zestril[®]</i>
<i>Mavik[®]</i>	

ACEIs + Calcium Channel Blockers

NON-PREFERRED AGENTS

Lexxel[®]

ACEIs + Diuretics

NON-PREFERRED AGENTS

<i>Accuretic[®]</i>	<i>quinapril/HCTZ</i>
<i>Capozide[®]</i>	<i>Quinaretic[®]</i>
<i>fosinopril/HCTZ</i>	<i>Uniretic[®]</i>
<i>Lotensin HCT[®]</i>	<i>Vaseretic[®]</i>
<i>Monopril HCT[®]</i>	<i>Zestoretic[®]</i>
<i>Prinzide[®]</i>	

Angiotensin Receptor Blockers (ARBs)

NON-PREFERRED AGENTS

<i>Atacand[®]</i>	<i>Teveten[®]</i>
<i>Azor[®]</i>	

ARBs + Diuretics

NON-PREFERRED AGENTS

<i>Atacand HCT[®]</i>
<i>Teveten HCT[®]</i>

Beta Blockers

NON-PREFERRED AGENTS

<i>Bystolic[®]</i>	<i>Levadol[®]</i>
<i>Coreg[®]</i>	<i>Lopressor[®]</i>
<i>Coreg CR[®]</i>	<i>metoprolol succinate</i>
<i>Corgard[®]</i>	<i>Sectral[®]</i>
<i>Inderal[®]</i>	<i>Tenormin[®]</i>
<i>Inderal LA[®]</i>	<i>Toprol XL[®]</i>
<i>InnoPran XL[®]</i>	<i>Trandate[®]</i>
<i>Kerlone[®]</i>	<i>Zebeta[®]</i>

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Beta Blockers + Diuretics

PREFERRED AGENTS

atenolol/chlorthalidone
bisoprolol fumarate/HCTZ
metoprolol tartrate/HCTZ
nadolol/bendroflumethiazide
propranolol/HCTZ

Calcium Channel Blockers (Dihydropyridine)

PREFERRED AGENTS

Afedtab CR [®]	nicardipine HCl
amlodipine	Nifediac CC [®]
DynaCirc [®]	Nifedical XL [®]
DynaCirc CR [®]	nifedipine
felodipine ER	nifedipine ER/SA
isradipine	

Cholesterol Absorption Inhibitors

PREFERRED AGENTS

Zetia[®]

HMG-CoA Reductase Inhibitors (Statins)

PREFERRED AGENTS

Crestor [®]	lovastatin
Lescol [®]	pravastatin
Lescol XL [®]	Simcor [®]
Lipitor [®]	simvastatin

Niacin Derivatives

PREFERRED AGENTS

Niaspan

Triglyceride Lowering Agents

PREFERRED AGENTS

fenofibrate	Lovaza [®]
gemfibrozil	Tricor [®]

Beta Blockers + Diuretics

NON-PREFERRED AGENTS

<i>Corzide[®]</i>	<i>Tenoretic[®]</i>
<i>Inderide[®]</i>	<i>Ziac[®]</i>
<i>Lopressor HCT[®]</i>	

Calcium Channel Blockers (Dihydropyridine)

NON-PREFERRED AGENTS

<i>Adalat CC[®]</i>	<i>Plendil[®]</i>
<i>Cardene[®]</i>	<i>Procardia[®]</i>
<i>Cardene SR[®]</i>	<i>Procardia XL[®]</i>
<i>nisoldipine</i>	<i>Sular[®]</i>
<i>Norvasc[®]</i>	

Cholesterol Absorption Inhibitors

NON-PREFERRED AGENTS

None

HMG-CoA Reductase Inhibitors (Statins)

NON-PREFERRED AGENTS

<i>Advicor[®]</i>	<i>Mevacor[®]</i>
<i>Altaprev[®]</i>	<i>Pravachol[®]</i>
<i>Caduet[®]</i>	<i>Vytorin[®]</i>
	<i>Zocor[®]</i>

Niacin Derivatives

NON-PREFERRED AGENTS

None

Triglyceride Lowering Agents

NON-PREFERRED AGENTS

<i>Antara[®]</i>	<i>Lofibra[®]</i>
<i>Fenoglide[®]</i>	<i>Lopid[®]</i>
<i>Lipofen[®]</i>	<i>Triglide[®]</i>

IV. CENTRAL NERVOUS SYSTEM

Carbamazepine Derivatives

PREFERRED AGENTS

carbamazepine (chewable, suspension, tablet)
Carbatrol[®]
Epilex[®]
Equetro[®]
oxcarbazepine
Tegretol[®] (chewable, suspension, tablet)
Tegretol XR[®]
Trileptal[®]

Carbamazepine Derivatives

NON-PREFERRED AGENTS

None

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Central Nervous System (CNS) Stimulants

PREFERRED AGENTS

Adderall XR [®]	Focalin XR [®]
amphetamine salt combo	Metadate ER [®]
Concerta [®]	Methylin [®]
dexmethylphenidate	Methylin ER [®]
dextroamphetamine	methylphenidate
dextroamphetamine SR	methylphenidate ER/SA
Focalin [®]	Vyvanse [®]

Multiple Sclerosis Agents

PREFERRED AGENTS

Avonex [®]	Copaxone [®]
Betaseron [®]	Rebif [®]

Sedative Hypnotics/Sleep Agents

PREFERRED AGENTS

chloral hydrate	temazepam
estazolam	triazolam
flurazepam	zolpidem

Serotonin Receptor Agonists (Triptans)

PREFERRED AGENTS

Imitrex [®]	Relpax [®]
Maxalt [®]	sumatriptan

V. ENDOCRINE AND METABOLIC AGENTS

Bisphosphonates – Oral

PREFERRED AGENTS

alendronate	Fosamax [®] Plus D
Fosamax [®]	

Calcitonins – Intranasal

PREFERRED AGENTS

Miacalcin[®]

Dipeptidyl Peptidase-4 (DPP-4) Inhibitors

PREFERRED AGENTS

Janumet [®]	Januvia [®]
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Growth Hormones

PREFERRED AGENTS

Genotropin [®]	Nutropin AQ [®]
Nutropin [®]	Saizen [®]

Central Nervous System (CNS) Stimulants^{CC}

NON-PREFERRED AGENTS

Adderall [®]	Metadate CD [®]
Daytrana [®]	Provigil ^{®CC}
Desoxyn [®]	Ritalin [®]
Dexedrine [®]	Ritalin LA [®]
Dexedrine Spansule [®]	Ritalin SR [®]
Dextrostat [®]	
LiquADD [®]	

Multiple Sclerosis Agents

NON-PREFERRED AGENTS

None

Sedative Hypnotics/Sleep Agents

NON-PREFERRED AGENTS

Ambien [®]	Prosom [®]
Ambien CR [®]	Restoril [®]
Dalmane [®]	Rozerem [®]
Doral [®]	Somnote [®]
Halcion [®]	Sonata [®]
Lunesta [®]	zaleplon

Serotonin Receptor Agonists (Triptans)

NON-PREFERRED AGENTS

Amerge [®]	Treximet [®]
Axert [®]	Zomig [®]
Frova [®]	

Bisphosphonates - Oral

NON-PREFERRED AGENTS

Actonel [®]	Boniva [®]
Actonel [®] with Calcium	

Calcitonins - Intranasal

NON-PREFERRED AGENTS

Fortical[®]

Dipeptidyl Peptidase-4 (DPP-4) Inhibitors

NON-PREFERRED AGENTS

None

Growth Hormones^{CC}

NON-PREFERRED AGENTS

Humatrope ^{®CC}	Tev-Tropin ^{®CC}
Norditropin ^{®CC}	Zorbitive ^{®CC}
Omnitrope ^{®CC}	

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Thiazolidinediones (TZDs)

PREFERRED AGENT

Actoplus Met [®]	Avandaryl [®]
Actos [®]	Avandia [®]
Avandamet [®]	Duetact [®]

Thiazolidinediones (TZDs)

NON-PREFERRED AGENT

None

VI. GASTROINTESTINAL

Anti-Emetics

PREFERRED AGENTS

ondansetron (ODT, solution, tablet)

Anti-Emetics

NON-PREFERRED AGENTS

<i>Anzemet[®]</i>	<i>Kytril[®] (solution, tablet)</i>
<i>granisetron (tablet)</i>	<i>Zofran[®] (ODT, solution, tablet)</i>
<i>Granisol[®]</i>	

Proton Pump Inhibitors (PPIs)

PREFERRED AGENTS

Nexium[®] (capsule)
omeprazole OTC
Prevacid[®] (capsule)

Proton Pump Inhibitors (PPIs)

NON-PREFERRED AGENTS

<i>Aciphex[®]</i>	<i>Prevacid NapraPAC[®]</i>
<i>Nexium Packet[®]</i>	<i>Prilosec[®] Rx</i>
<i>omeprazole Rx</i>	<i>Protonix[®]</i>
<i>pantoprazole</i>	<i>Zegerid[®]</i>
<i>Prevacid[®] (packet, solutab)</i>	

VII. HEMATOLOGICAL AGENTS

Anticoagulants - Injectable

PREFERRED AGENTS

Arixtra [®]	Innohep [®]
Fragmin [®]	Lovenox [®]

Anticoagulants - Injectable

NON-PREFERRED AGENTS

None

Erythropoiesis Stimulating Agents (ESAs)

PREFERRED AGENTS

Aranesp [®]	Procrit [®]
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Erythropoiesis Stimulating Agents (ESAs)

NON-PREFERRED AGENTS

Epogen[®]

VIII. IMMUNOLOGIC AGENTS

Immunomodulators - Injectable

PREFERRED AGENTS

Enbrel [®]	Humira [®]
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Immunomodulators - Injectable

NON-PREFERRED AGENTS

<i>Cimzia[®]</i>	<i>Kineret[®]</i>
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Immunomodulators – Topical

PREFERRED AGENTS

Elidel [®]	Protopic [®]
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Immunomodulators - Topical

NON-PREFERRED AGENTS

None

IX. MISCELLANEOUS

Progestins (for Cachexia)

PREFERRED AGENTS

megestrol acetate (suspension)

Progestins (for Cachexia)

NON-PREFERRED AGENTS

<i>Megace[®] (suspension)</i>	<i>Megace ES[®]</i>
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X. OPHTHALMICS

Alpha-2 Adrenergic Agonists (for Glaucoma) – Ophthalmic

PREFERRED AGENTS

Alphagan P[®] brimonidine

Antihistamines – Ophthalmic

PREFERRED AGENTS

Pataday[®] Patanol[®]

Fluoroquinolones – Ophthalmic

PREFERRED AGENTS

ciprofloxacin

ofloxacin

Vigamox[®]

Non-Steroidal Anti-Inflammatory Drugs (NSAIDs) – Ophthalmic

PREFERRED AGENTS

Acular[®] Acular PF[®]

Acular LS[®] flurbiprofen

Prostaglandin Agonists – Ophthalmic

PREFERRED AGENTS

Travatan[®] Xalatan[®]

Travatan Z[®]

Alpha-2 Adrenergic Agonists (for Glaucoma) - Ophthalmic

NON-PREFERRED AGENTS

Iopidine[®]

Antihistamines - Ophthalmic

NON-PREFERRED AGENTS

Elestat[®] *ketotifen RX*

Emadine[®] *Optivar[®]*

Fluoroquinolones – Ophthalmic

NON-PREFERRED AGENTS

Ciloxan[®] *Quixin[®]*

IQUIX[®] *Zymar[®]*

Ocuflox[®]

Non-Steroidal Anti-Inflammatory Drugs (NSAIDs) – Ophthalmic

NON-PREFERRED AGENTS

diclofenac *Voltaren[®]*

Nevanac[®] *Xibrom[®]*

Ocufen[®]

Prostaglandin Agonists – Ophthalmic

NON-PREFERRED AGENTS

Lumigan[®]

XI. OTICS

Fluoroquinolones - Otic

PREFERRED AGENTS

Ciprodex[®] ofloxacin

Fluoroquinolones - Otic

NON-PREFERRED AGENTS

Cipro HC[®] *Floxin[®]*

XII. RENAL AND GENITOURINARY

Phosphate Binders/Regulators

PREFERRED AGENTS

calcium acetate (capsule) Phoslo[®]

Fosrenol[®] Renagel[®]

Selective Alpha Adrenergic Blockers

PREFERRED AGENTS

Flomax[®] Uroxatral[®]

Urinary Tract Antispasmodics

PREFERRED AGENTS

Detrol LA[®] Sanctura[®]

Enablex[®] Sanctura XR[®]

oxybutynin Vesicare[®]

Oxytrol[®]

Phosphate Binders/Regulators

NON-PREFERRED AGENTS

Renvela[®]

Selective Alpha Adrenergic Blockers

NON-PREFERRED AGENTS

None

Urinary Tract Antispasmodics

NON-PREFERRED AGENTS

Detrol[®] *Ditropan XL[®]*

Ditropan[®] *oxybutynin ER*

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XIII. RESPIRATORY

Anticholinergics – Inhaled

PREFERRED AGENTS

Atrovent HFA[®] ipratropium/albuterol¹
Combivent[®] Spiriva[®]
ipratropium

Antihistamines – Second Generation

PREFERRED AGENTS

OTC cetirizine
OTC cetirizine-D
OTC loratadine
OTC loratadine-D

Beta₂ Adrenergic Agents – Inhaled Long Acting

PREFERRED AGENTS

Foradil[®] Serevent Diskus[®]

Beta₂ Adrenergic Agents – Inhaled Short Acting

PREFERRED AGENTS

albuterol Ventolin HFA[®]
Maxair Autohaler[®]

Corticosteroids – Inhaled

PREFERRED AGENTS

Advair Diskus[®] Flovent Diskus[®]
Advair HFA[®] Flovent HFA[®]
Asmanex[®] QVAR[®]
Azmacort[®]

Corticosteroids – Intranasal

PREFERRED AGENTS

fluticasone Nasonex[®]

Leukotriene Modifiers

PREFERRED AGENT

Accolate[®] Singulair[®]

Anticholinergics - Inhaled

NON-PREFERRED AGENTS

Duoneb[®]

Antihistamines – Second Generation^{CC}

NON-PREFERRED AGENTS

Allegra[®] ^{CC} *Semprex-D[®]*
Allegra-D[®] *Xyzal[®]*
Clarinet[®] ^{CC}
Clarinet-D[®]
fexofenadine

Beta₂ Adrenergic Agents – Inhaled Long Acting

NON-PREFERRED AGENTS

Brovana[®] *Perforomist[®]*

Beta₂ Adrenergic Agents – Inhaled Short Acting

NON-PREFERRED AGENTS

Accuneb[®] *Proventil HFA[®] ²*
Alupent[®] *Xopenex[®] (solution) ²*
metaproterenol *Xopenex HFA[®]*
ProAir HFA[®]

Corticosteroids – Inhaled^{CC}

NON-PREFERRED AGENTS

Aerobid[®] *Symbicort[®]*
Aerobid-M[®]
Alvesco[®]
Pulmicort[®] (Flexhaler, Turbuhaler)^{CC}

Corticosteroids - Intranasal

NON-PREFERRED AGENTS

Beconase AQ[®] *Nasarel[®]*
Flonase[®] *Omnaris[®]*
flunisolide *Rhinocort Aqua[®]*
Nasacort AQ[®] *Veramyst[®]*

Leukotriene Modifiers

NON-PREFERRED AGENT

None

¹ Preferred as of 02/18/09

² Non-Preferred as of 02/18/09