



Missouri Pharmacy Program – Preferred Drug List



ACE Inhibitors

Effective 01/10/2013

Revised 01/10/2019

Preferred Agents

- Benazepril
- Enalapril
- Fosinopril
- Lisinopril
- Quinapril
- Ramipril

Non-Preferred Agents

- Accupril®
- Altace® Caps/Tabs
- Captopril
- Epaned®
- Lotensin®
- Moexipril
- Perindopril
- Prinivil®
- Qbrelis®
- Trandolapril
- Univas®
- Vasotec®
- Zestril®

Approval Criteria

- Failure to achieve desired therapeutic outcomes with trial on 4 or more preferred agents
 - Documented trial period for preferred agents
 - Documented ADE/ADR to preferred agents
- Documented compliance on current therapy regimen

Denial Criteria

- Lack of adequate trial on required preferred agents
- Therapy will be denied if no approval criteria are met
- Drug Prior Authorization Hotline: (800) 392-8030