



Missouri Pharmacy Program – Preferred Drug List



ACE Inhibitors/Diuretic Combinations

Effective 01/10/2013

Revised 01/10/2019

Preferred Agents

- Benazepril/HCTZ
- Enalapril/HCTZ
- Lisinopril/HCTZ

Non-Preferred Agents

- Accuretic®
- Captopril/HCTZ
- Fosinopril/HCTZ
- Lotensin HCT®
- Moexipril/HCTZ
- Quinapril/HCTZ
- Quinaretic®
- Vaseretic®
- Zestoretic®

Approval Criteria

- Failure to achieve desired therapeutic outcomes with trial on 3 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