



## Missouri Pharmacy Program – Preferred Drug List



### Antifungal Agents – Topical

Effective 03/20/2014

Revised 07/11/2019

#### Preferred Agents

- Butenafine 1% Crm OTC
- Ciclopirox Crm/Susp
- Clotrimazole Crm/Soln OTC
- Clotrimazole/Betamethasone Crm
- Ketoconazole Shampoo
- Lamisil AT<sup>®</sup> Crm OTC
- Miconazole Crm/Pwd OTC
- Nystatin Crm/Pwd
- Terbinafine Crm OTC
- Tolnaftate Crm/Soln OTC

#### Non-Preferred Agents

- Alevazol<sup>®</sup> OTC
- Azolen<sup>™</sup> Tinc OTC
- Bensal HP<sup>®</sup>
- CicloDan<sup>®</sup>
- Ciclopirox Gel/Shampoo/Kit/Soln
- Clotrimazole Crm/Soln Rx
- Clotrimazole/Betamethasone Lot
- CNL8<sup>™</sup> Nail Kit
- Desenex<sup>®</sup> Pwd OTC
- Econazole Cream/Foam
- Ecoza<sup>™</sup> Foam
- Ertaczo<sup>®</sup>
- Exelderm<sup>®</sup> Crm/Soln
- Extina<sup>®</sup>
- Fungoid<sup>®</sup> Tinc
- Jublia<sup>®</sup>
- Kerydin<sup>™</sup>
- Ketoconazole Crm/Foam
- Ketodan Foam Kit
- Lamisil<sup>®</sup> Gel/Spray OTC
- Lamisil Ultra<sup>®</sup> OTC
- Loprox<sup>®</sup> Crm/Gel/Kit/Susp/Shampoo
- Lotrimin<sup>®</sup> AF Crm OTC
- Lotrisone<sup>®</sup> Crm
- Luliconazole 1% Crm
- Luzu<sup>®</sup> Crm
- Mentax<sup>®</sup>
- Miconazole Nitrate OTC
- Miconazole Oint/Spray OTC
- Miconazole-Zinc-Petro 0.25-15%
- Naftifine Crm/Gel
- Naftin<sup>®</sup> Crm/Gel
- Nizoral<sup>®</sup> AD Shampoo
- Nizoral<sup>®</sup> Shampoo
- Nystatin Oint
- Nystatin-TAC Crm/Oint
- Oxiconazole Crm
- Oxistat<sup>®</sup> Crm/Lot
- Penlac<sup>®</sup>
- Tinactin<sup>®</sup> Crm/Pwd/Spray OTC

- Tolnaftate Pwd/Spray OTC
- Vusion®
- Xolegel®

## 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

## 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