

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
ANTI-INFECTIVES: Antifungals for Onychomycosis	Griseofulvin Susp Terbinafine Tabs	Griseofulvin Caps/Tabs Griseofulvin Micro/Ultramicronsize Tabs Gris-PEG® Itraconazole Sporanox®	April
ANTI-INFECTIVES: Antifungals for Thrush	Clotrimazole Troche Fluconazole Susp/Tabs Nystatin Susp/Tabs	Diflucan® Oravig®	April
ANTI-INFECTIVES: Antiretroviral Therapy (ART)	Group A		January
	Biktarvy® Odefsey® Tivicay® Tivicay PD® Triumeq® Triumeq PD®		
	Group B (Single Tablet Regimens)		
	Efavirenz/Emtricitabine/Tenofovir disoproxil (gen Atripla®) Genvoya® Stribild® Symfi® Symfi Lo®	Abacavir/Lamivudine/Zidovudine (gen Trizivir®) Atripla® Efavirenz/Tenofovir disoproxil/Lamivudine (gen Symfi Lo®) Efavirenz/Tenofovir disoproxil/Lamivudine (gen Symfi®) Juluca® Symtuza® Trizivir®	
	Group B (Non-Single Tablet Regimens)		
Abacavir Abacavir/Lamivudine (gen Epzicom®) Atazanavir Caps Edurant® Efavirenz Emtricitabine Caps	Aptivus® Cabenuva® Cimduo® Combivir® Crixivan® Didanosine DR Caps		

The MO HealthNet Preferred Drug List is not all inclusive nor does it guarantee coverage but represents a summary of prescription coverage. For full criteria details see <https://dss.mo.gov/mhd/cs/pharmacy/pages/clinedit.htm>

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
	<p>Emtriva® Soln Evotaz® Isentress® Lamivudine Lamivudine/Zidovudine (gen Combivir®) Norvir® powder packet/solution Pifeltro® Prezcobix® Prezista® Ritonavir Tabs Tenofovir Tabs Tybost® Viread® Pwd</p>	<p>Emtriva® Caps Epivir® Epzicom® Etravirine Tabs Fosamprenavir Tabs Fuzeon® Intelence® Invirase® Kaletra® Lexiva® Lopinavir/Ritonavir (gen Kaletra®) Maraviroc Nevirapine Norvir® Tabs Rescriptor® Retrovir® Reyataz® Rukobia® Selzentry® Stavudine Caps Sunlenca® Sustiva® Temixys® Trogarzo® Viracept® Viramune® Viread® Tabs Ziagen® Zidovudine</p>	
	Group C		
	<p>Emtricitabine/Tenofovir disoproxil (gen Truvada®)</p>	<p>Apretude Descovy® Truvada®</p>	
<p>ANTI-INFECTIVES: Fluoroquinolones, Oral</p>	<p>Ciprofloxacin Tabs Levofloxacin Tabs</p>	<p>Baxdela® Cipro® Cipro XR® Ciprofloxacin Susp</p>	<p>Jan</p>

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
		Ciprofloxacin ER Levofloxacin Soln Moxifloxacin Tabs Ofloxacin	
ANTI-INFECTIVES: GI Antibiotics	Metronidazole Tabs Neomycin Vancomycin Caps	Aemcolo® Alinia® Difucid® Firvanq® Flagyl® Metronidazole Caps Nitazoxanide Paromomycin Tinidazole Vancocin® Vancomycin Soln Xifaxan®	Jan
ANTI-INFECTIVES: Hepatitis C Agents, Oral Direct Acting Antivirals	Mavyret®	Epclusa® Harvoni® Ledipasvir-Sofosbuvir Sofosbuvir-Velpatasvir Sovaldi® Viekira Pak™ Vosevi® Zepatier®	April
ANTI-INFECTIVES: Inhaled Antibiotics	Bethkis® Kitabis® Pak Tobramycin Amp (gen TOBI®)	Arikayce® Cayston® TOBI® TOBI® Podhaler® Tobramycin Amp (gen Bethkis®) Tobramycin Pak (gen Kitabis® Pak)	April
ANTI-INFECTIVES: Antivirals, General	Acyclovir Caps/Susp/Tabs Valacyclovir	Famciclovir Valtrex® Zovirax® Susp	April
ANTI-INFECTIVES: Vaginal Antibiotics	Cleocin® Vaginal Ovules Clindesse® Metronidazole Vaginal Gel	Cleocin® Vaginal Crm Clindamycin Vaginal Crm Solosec® Xaciato™	Jan

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
	Nuessa® Vaginal Gel Vandazole® Vaginal Gel		
ANTI-INFECTIVES: Cephalosporins, 1st Generation	Cefadroxil Caps Cephalexin Caps/Susp	Cefadroxil Susp/Tabs Cephalexin Tabs Keflex®	Jan
ANTI-INFECTIVES: Cephalosporins, 2nd Generation	Cefprozil Susp/Tabs Cefuroxime Tabs	Cefaclor Caps/Susp Cefaclor ER Tabs	Jan
ANTI-INFECTIVES: Cephalosporins, 3rd Generation	Cefdinir Caps/Susp	Cefixime Caps/Susp Cefpodoxime Susp/Tabs Suprax®	Jan
ANTI-INFECTIVES: Macrolides	Azithromycin Pwd Packet/Susp/Tabs Clarithromycin Susp/Tabs Erythromycin Base DR Caps Erythromycin Ethylsuccinate	Clarithromycin ER E.E.S.® EryPed® Ery-Tab® Erythromycin Base Tabs Erythromycin Base DR Tabs Zithromax®	Jan
ANTI-INFECTIVES: Penicillins	Amoxicillin Amox/Clav Susp/Tabs Ampicillin Bicillin® C-R Inj Dicloxacillin Penicillin VK	Amox/Clav Chew Tabs Amox/Clav XR Tabs Augmentin® Susp Augmentin XR®	Jan
ANTI-INFECTIVES: Tetracyclines	Doxycycline Hyclate Caps Doxycycline Hyclate Tabs (gen Vibra-Tabs®, Periostat®) Doxycycline Mono Susp Minocycline Caps	Amzeeq® Demeclocycline Doryx® Doryx® MPC Doxycycline Hyclate Tabs (gen Acticlate®) Doxycycline Hyclate Tab (gen Targadox®) Doxycycline Hyclate DR Doxycycline Mono Caps/Tabs Doxycycline Mono IR-DR Minocin® Minocycline ER	Jan

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
		Minocycline Tabs Minolira™ Mondoxyne™ NL Morgidox® Nuzyra® Solodyn® Targadox® Tetracycline Vibramycin® Xerava™ Ximino® Zilxi®	
CARDIOVASCULAR: Angiotensin Converting Enzyme Inhibitors (ACEIs)	Benazepril Enalapril Tabs Fosinopril Lisinopril Quinapril Ramipril	Accupril® Altace® Captopril Enalapril Sol Epaned® Lotensin® Moexipril Perindopril Prinivil® Qbrelis® Trandolapril Vasotec® Zestril®	October
CARDIOVASCULAR: ACEIs/Diuretic Combination Agents	Benazepril/HCTZ Enalapril/HCTZ Lisinopril/HCTZ	Accuretic® Captopril/HCTZ Fosinopril/HCTZ Lotensin HCT® Quinapril/HCTZ Vaseretic® Zestoretic®	October
CARDIOVASCULAR: ACEIs/Calcium Channel Blocker (CCB) Combination Agents	Amlodipine/Benazepril	Lotrel® Tarka® Trandolapril/Verapamil	October

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
CARDIOVASCULAR: Angiotensin Receptor Blockers (ARBs)	Irbesartan Losartan Telmisartan Valsartan	Atacand® Avapro® Benicar® Candesartan Cozaar® Diovan® Edarbi® Eprosartan Micardis® Olmesartan	October
CARDIOVASCULAR: ARB/Diuretic Combination Agents	Irbesartan/HCTZ Losartan/ HCTZ Telmisartan/HCTZ Valsartan/HCTZ	Atacand HCT® Avalide® Benicar HCT® Candesartan/HCTZ Diovan HCT® Edarbyclor® Hyzaar® Micardis HCT® Olmesartan/HCTZ	October
CARDIOVASCULAR: ARB/CCB Combination Agents	Valsartan/Amlodipine	Azor® Exforge® Olmesartan/Amlodipine Telmisartan/Amlodipine Twynsta®	October
CARDIOVASCULAR: ARB/CCB/Thiazide Combination Agents		Exforge® HCT Olmesartan/Amlodipine/HCTZ Tribenzor® Valsartan/Amlodipine/HCTZ	October
CARDIOVASCULAR: ARB/Nepriylsin Inhibitor Combination Agents	Entresto®		October
CARDIOVASCULAR: Anticoagulants, Oral	Eliquis® Jantoven® Pradaxa® Warfarin	Bevyxxa® Coumadin® Dabigatran Etexilate Savaysa®	October

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
	<p>Xarelto® 10, 15, 20 mg Tabs Xarelto® Starter Pack</p>	<p>Xarelto® 2.5 mg Tabs Xarelto® Susp</p>	
<p>CARDIOVASCULAR: Anticoagulants, Injectables</p>	<p>Enoxaparin Fragmin®</p>	<p>Arixtra® Fondaparinux Lovenox®</p>	<p>October</p>
<p>CARDIOVASCULAR: Antiplatelets</p>	<p>Aspirin/Dipyridamole Brilinta® Clopidogrel Dipyridamole Prasugrel</p>	<p>Aggrenox® Cilostazol Effient® Plavix® Zontivity®</p>	<p>October</p>
<p>CARDIOVASCULAR: Beta-Blockers</p>	<p>Acebutolol Atenolol Bisoprolol Carvedilol Hemangeol® Labetalol Metoprolol Succinate Metoprolol Tartrate Nadolol Propranolol Soln/Tabs Sorine® Sotalol Sotalol AF</p>	<p>Betapace® Betapace AF® Betaxolol Bystolic® Carvedilol ER Coreg® Coreg CR® Corgard® Inderal LA® Inderal XL® InnoPran XL® Kaspargo® Sprinkle Caps Lopressor Nebivolol Pindolol Propranolol LA Sotylize® Tenormin® Timolol Maleate Toprol XL®</p>	<p>October</p>
<p>CARDIOVASCULAR: Beta-Blocker/Diuretic Combination Agents</p>	<p>Atenolol/Chlorthalidone Bisoprolol/HCTZ Metoprolol/HCTZ Propranolol/HCTZ</p>	<p>Lopressor HCT® Nadolol/Bendroflumethiazide Tenoretic® Ziac®</p>	<p>October</p>

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
CARDIOVASCULAR: CCB, Dihydropyridines	Amlodipine Felodipine ER Nifedipine ER Nifedipine IR	Adalat CC® Isradipine Katerzia® Levamlodipine Nicardipine Nimodipine Nisoldipine ER Norliqva® Norvasc® Nymalize® Procardia® Procardia XL® Sular®	October
CARDIOVASCULAR: CCB, Non- Dihydropyridines	Cartia XT® Dilt-XR Diltiazem CD Diltiazem ER Caps Diltiazem HCl Diltiazem XR Taztia XT® Tiadylt® ER Verapamil HCl Verapamil ER Caps/Tabs Verapamil SR	Calan® Calan SR® Cardizem Cardizem CD® Cardizem LA® Diltiazem LA Tabs Matzim LA® Tiazac® Verapamil ER PM Verelan® Verelan PM®	October
CARDIOVASCULAR: Direct Renin Inhibitors & Combination Agents	Aliskiren Tekturna HCT®	Tekturna®	October
CARDIOVASCULAR: Lipotropics, Homozygous Familial Hypercholesterol- emia (HoFH) Agents		Evkeeza™ Juxtapid®	October
CARDIOVASCULAR: Lipotropics, Niacin Derivatives	Niacin ER	Niacin IR	October

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
CARDIOVASCULAR: Lipotropics, PCSK9 Inhibitors	Praluent® Repatha® (Amgen USA Mft)	Leqvio®	October
CARDIOVASCULAR: Lipotropics, Statins (HMG-CoA Reductase Inhibitors) & Combination Agents	Atorvastatin Ezetimibe Lovastatin Pravastatin Rosuvastatin Simvastatin	Altoprev® Amlodipine/Atorvastatin Caduet® Crestor® Ezallor Sprinkle™ Ezetimibe/Simvastatin Fluvastatin Fluvastatin ER Lescol XL® Lipitor® Livalo® Nexletol® Nexlizet® Pravachol® Vytorin® Zetia® Zocor® Zypitamag™	October
CARDIOVASCULAR: Lipotropics, Triglyceride Lowering Agents	Fenofibrate 54, 67, 134, 160, 200mg (gen Lofibra®) Fenofibrate 48, 145mg (gen Tricor®) Gemfibrozil	Antara® Fenofibrate (gen Antara®) Fenofibrate (gen Fenoglide®) Fenofibrate (gen Lipofen®) Fenofibrate (gen Triglide®) Fenofibric Acid (gen Fibracor®) Fenofibric Acid (gen Trilipix®) Fenoglide® Fibracor® Icosapent Ethyl (gen Vascepa®) Lipofen® Lopid® Lovaza® Omega-3 Acid Ethyl Esters Tricor® Triglide®	October

The MO HealthNet Preferred Drug List is not all inclusive nor does it guarantee coverage but represents a summary of prescription coverage. For full criteria details see <https://dss.mo.gov/mhd/cs/pharmacy/pages/clinedit.htm>

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
		Trilipix® Vascepa®	
CARDIOVASCULAR: Sympatholytic Agents	Clonidine Patch Clonidine Tabs Guanfacine Methyldopa	Catapres® Tabs Catapres-TTS® Patch Clonidine ER 0.17 mg tabs (gen Nexiclon™) Lucemyra® Methyldopa/HCTZ	October
CENTRAL NERVOUS SYSTEM: ADHD, Amphetamine like, Long Acting	Adderall XR® Vyvanse® Caps	Adzenys XR ODT® Amphetamine ER Susp (gen Adzenys ER™) Dexedrine® Spansule Dextroamphetamine ER Dextroamphetamine/Amphetamine ER (gen Adderall XR®) Dyanavel® XR Mydayis® ER Caps Vyvanse® Chew Tabs Xelstry™	October
CENTRAL NERVOUS SYSTEM: ADHD, Amphetamine like, Short Acting	Dextroamphetamine 5, 10 mg Tabs (gen Dextrostat®) Dextroamphetamine/Amphetamine Procentra® Soln* (< 10 years of age)	Adderall® Amphetamine Sulfate Tabs (gen Evekeo®) Desoxyn® Tabs Dextroamphetamine Soln Dextroamphetamine Tabs (gen Zenedi®) Evekeo® Methamphetamine Tabs Procentra® Soln (>=10 years of age) Zenedi®	October
	<i>*Brand preferred over generic</i>		
CENTRAL NERVOUS SYSTEM: ADHD, Methylphenidate, Long Acting	Concerta® Daytrana® Dexmethylphenidate XR Methylphenidate SR Quillivant XR®	Aptensio XR® Azstarys™ Cotempla XR ODT® Focalin XR® Jornay PM® Methylphenidate CD Methylphenidate ER Caps (gen Aptensio XR®) Methylphenidate ER Tabs (gen Concerta®) Methylphenidate ER 45 mg, 63 mg, 72 mg Tabs (gen Relexxii™ ER Tabs) Methylphenidate LA	October

The MO HealthNet Preferred Drug List is not all inclusive nor does it guarantee coverage but represents a summary of prescription coverage. For full criteria details see <https://dss.mo.gov/mhd/cs/pharmacy/pages/clinedit.htm>

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
		Methylphenidate Patches Quillichew ER® Relexxii™ ER Tabs Ritalin LA®	
CENTRAL NERVOUS SYSTEM: ADHD, Methylphenidate, Short Acting	Dexmethylphenidate Methylphenidate Soln/Tabs	Focalin® Methylphenidate Chew Methylin® Ritalin®	October
CENTRAL NERVOUS SYSTEM: ADHD, Non-Stimulants	Atomoxetine Clonidine ER 0.1 mg tabs (gen Kapvay™) Guanfacine ER	Intuniv® Qelbree™ Strattera®	October
CENTRAL NERVOUS SYSTEM: Alzheimer's Agents, Acetylcholinesterase Inhibitors, N-Methyl-D-Aspartate Receptor Antagonists and Combinations	Donepezil ODT Donepezil 5, 10 mg Tabs Exelon® Patch Memantine Tabs	Adlarity® Aricept® Donepezil 23 mg Tabs Galantamine Soln/Tabs Galantamine ER Memantine Soln Memantine ER Namenda® Namenda XR® Namzaric® Razadyne® Razadyne ER® Rivastigmine	January
CENTRAL NERVOUS SYSTEM: Anti-Parkinsonism Agents, Monoamine Oxidase B Inhibitors	Selegiline	Azilect® Rasagiline Xadago® Zelapar®	January
CENTRAL NERVOUS SYSTEM: Anti-Parkinsonism Agents, Non-Ergot Dopamine Agonists	Amantadine Pramipexole Ropinirole	Apokyn® Apomorphine Gocovri® Kynmobi® Mirapex® Mirapex ER® Neupro®	January

The MO HealthNet Preferred Drug List is not all inclusive nor does it guarantee coverage but represents a summary of prescription coverage. For full criteria details see <https://dss.mo.gov/mhd/cs/pharmacy/pages/clinedit.htm>

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
		Osmolex® ER Pramipexole ER Requip® Requip XL® Ropinirole ER	
CENTRAL NERVOUS SYSTEM: Analgesics, NSAIDS	Celecoxib Diclofenac 1% Gel OTC Diclofenac Sodium DR/EC Tabs Ibuprofen Ketorolac Inj/Tabs Meloxicam Tabs Naproxen OTC Naproxen Tabs Rx (gen Naprosyn®)	Arthrotec® Celebrex® Daypro® Diclofenac 1% Gel Rx Diclofenac 1.3% Patch (gen Flector®) Diclofenac Topical Soln Diclofenac Caps (gen Zorvolex®) Diclofenac Potassium Diclofenac Sodium ER (gen Voltaren® XR) Diclofenac/Misoprostol Diflunisal Duexis® Elyxyb Etodolac Etodolac ER Feldene® Fenoprofen Flector® Patch Flurbiprofen Ibuprofen/Famotidine Indocin® Indomethacin Indomethacin ER Ketoprofen Ketoprofen ER Ketorolac Nasal Spray Licart™ Lofena™ Meclofenamate Mefenamic Acid Meloxicam Caps Mobic®	January

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
		Nabumetone Nalfon® Naprelan® Naprosyn® Naproxen CR (gen Naprelan®) Naproxen DS (gen Anaprox® DS) Naproxen EC (gen Naprosyn® EC) Naproxen Sodium (gen Anaprox®) Naproxen Susp Naproxen/Esomeprazole Oxaprozin Pennsaid® Piroxicam Qmiiiz™ ODT Relafen® DS Sulindac Tolmetin Vimovo® Voltaren®	
CENTRAL NERVOUS SYSTEM: Analgesics, Opioids, Long-acting Narcotics	Butrans® Fentanyl Patch 12, 25, 50, 75, 100mcg/hr Morphine Sulfate ER Tabs (gen MS Contin®)	Belbuca® Buprenorphine Film/Patch Duragesic® Fentanyl Patch 37.5, 62.5, 87.5mcg/hr Hydrocodone ER (gen Hysingla® ER and Zohydro® ER) Hydromorphone ER Hysingla® ER Kadian® Morphine ER Caps (gen Avinza®) Morphine ER Caps (gen Kadian®) MS Contin® Oxycodone ER Tabs OxyContin® Oxymorphone ER Xtampza ER®	January

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
CENTRAL NERVOUS SYSTEM: Analgesics, Opioid and Select Alcohol Dependence Agents	<p>Buprenorphine SL Tabs Buprenorphine/Naloxone SL Tabs Naltrexone Tabs Sublocade™ Suboxone® Film Vivitrol®</p>	<p>Buprenorphine/Naloxone SL Film Zubsolv®</p>	January
CENTRAL NERVOUS SYSTEM: Analgesics, Opiate Emergency Reversal Agents	<p>Kloxxado™ Naloxone 0.4 mg/mL, 2 mg/2 mL, 4 mg/10 mL Inj Narcan® NS Zimhi™</p>	<p>Naloxone 4 mg NS (gen Narcan) Naloxone 10 mg Auto-inj</p>	January
CENTRAL NERVOUS SYSTEM: Analgesics, Tramadol-Like Agents	<p>Tramadol 50mg (gen Ultram®) Tramadol ER Tabs (gen Ultram® ER) Tramadol/APAP</p>	<p>ConZip® Nucynta® Nucynta® ER Qdolo® Seglentis® Tramadol 100 mg Tramadol ER Caps (gen ConZip®) Tramadol ER Tabs (gen Ryzolt™) Tramadol Solution</p>	January
CENTRAL NERVOUS SYSTEM: Analgesics, Fibromyalgia Agents	<p>Duloxetine 20, 30, 60 mg Pregabalin Caps</p>	<p>Cymbalta® Drizalma Sprinkle™ Duloxetine 40 mg Lyrica® Lyrica® CR Pregabalin CR Pregabalin Soln Savella®</p>	January
CENTRAL NERVOUS SYSTEM: Analgesics, Neuropathic Pain Agents	<p>Gabapentin Caps/Tabs Lidocaine 5% Patch Lidoderm® 5% Patch</p>	<p>Gabapentin Soln Gralise® Horizant® Neurontin® Qutenza® Ztlido®</p>	January

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
CENTRAL NERVOUS SYSTEM: Anticonvulsants, Dravet Syndrome	Epidiolex®	Diacomit® Fintepla®	January
CENTRAL NERVOUS SYSTEM: Anticonvulsants, Rescue Agents	Diastat® Diazepam Rectal Nayzilam® Valtoco®		October
CENTRAL NERVOUS SYSTEM: Anti-Migraine, Alternative Oral Agents	Nurtec® ODT* <i>*Step therapy may apply</i>	Reyvow® Ubrelvy®	January
CENTRAL NERVOUS SYSTEM: Calcitonin Gene-Related Peptide (CGRP) Receptors	Ajovy® Emgality® 120mg/mL	Aimovig® Emgality® 100mg/mL Qulipta™ Vyepiti®	January
CENTRAL NERVOUS SYSTEM: Anti-Migraine, Serotonin (5-HT1) Receptor Agonists	Rizatriptan Sumatriptan	Almotriptan Eletriptan Frova® Frovatriptan Imitrex® Maxalt® Maxalt-MLT® Naratriptan Onzetra® Xsail® Relpax® Sumatriptan/Naproxen Tosymra® Treximet® Zembrace® SymTouch® Zolmitriptan Zomig® Nasal Spray/Tabs Zomig-ZMT®	January

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
CENTRAL NERVOUS SYSTEM: Multiple Sclerosis, Injectable Agents	<p>Avonex® Copaxone® Kesimpta® Rebif® Rebif® Rebidose®</p>	<p>Betaseron® Briumvi™ Extavia® Glatiramer Glatopa® Lemtrada® Ocrevus® Plegridy® Tysabri®</p>	July
CENTRAL NERVOUS SYSTEM: Multiple Sclerosis, Oral Agents	<p>Dimethyl fumarate Gilenya®*</p> <p><i>*Pending trial of one injectable agent, generic Tecfidera, or evidence of highly active disease.</i></p>	<p>Aubagio® Bafiertam® Fingolimod Mavenclad® Mayzent® Ponvory® Tascenso ODT™ Tecfidera® Vumerity® Zeposia®</p>	July
CENTRAL NERVOUS SYSTEM: Sedative Hypnotics, Benzodiazepines	Temazepam 15, 30 mg	<p>Estazolam Flurazepam Halcion® Midazolam Syrup Restoril™ Temazepam 7.5, 22.5 mg Triazolam</p>	January
CENTRAL NERVOUS SYSTEM: Sedative Hypnotics, Non-Benzodiazepines	<p>Doxepin 10, 25, 50, 75, 100, 150 mg Caps Eszopiclone Zaleplon Zolpidem Tabs</p>	<p>Ambien® Ambien CR® Belsomra® Dayvigo® Doxepin 3, 6 mg Tabs Edluar® Lunesta® Quviviq™ Silenor® Zolpidem ER Zolpidem SL</p>	January

The MO HealthNet Preferred Drug List is not all inclusive nor does it guarantee coverage but represents a summary of prescription coverage. For full criteria details see <https://dss.mo.gov/mhd/cs/pharmacy/pages/clinedit.htm>

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
CENTRAL NERVOUS SYSTEM: Sedative Hypnotics, Non-Benzodiazepines, Melatonin Receptor Agonists		Hetlioz® Ramelteon Rozerem® Tasimelteon	January
CENTRAL NERVOUS SYSTEM: Skeletal Muscle Relaxants	Baclofen Chlorzoxazone 250, 500mg Cyclobenzaprine Tabs (gen Flexeril®) Dantrolene Methocarbamol Orphenadrine ER Tizanidine Tabs	Amrix® Baclofen Soln (gen Ozobax®) Carisoprodol Carisoprodol/ASA Carisoprodol/ASA/Codeine Chlorzoxazone 375, 750 mg Cyclobenzaprine 7.5 mg Tabs (gen Fexmid®) Cyclobenzaprine ER Dantrium® Fexmid® Fleqsuvy™ Lorzone® Lyvispah™ Metaxalone Orphenadrine/ASA/Caffeine (Norgesic®, Norgesic® Forte, Orphengesic® Forte) Soma® Tizanidine Caps Zanaflex®	January
CENTRAL NERVOUS SYSTEM: Spinal Muscular Atrophy Agents	Zolgensma®		October

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
CENTRAL NERVOUS SYSTEM: Vesicular Monoamine Transporter 2 (VMAT2) Inhibitors	Austedo® Tetrabenazine	Ingrezza® Xenazine®	January
CENTRAL NERVOUS SYSTEM: MISC	Zulresso™		April
DERMATOLOGIC AGENTS: Oral Agents for Psoriasis	Acitretin	Methoxsalen Soriatane®	Jul
DERMATOLOGIC AGENTS: Topical Agents for Psoriasis	Calcipotriene Crm/Oint/Soln	Calcipotriene Foam Calcipotriene/Betamethasone Calcitriol Duobrii® Enstilar® Sorilux® Taclonex® Vtama® Zoryve™	Jul
DERMATOLOGIC AGENTS: Topical Agents for Actinic Keratosis	Fluorouracil 5% Crm (gen Efudex®) Fluorouracil Soln Imiquimod 5% (gen Aldara®)	Aldara® Carac® Diclofenac 3% Gel Efudex® Fluorouracil 0.5% Crm (gen Carac®) Imiquimod 3.75% (gen Zyclara®) Picato® Zyclara®	April
DERMATOLOGIC: Topical Antibiotics, Mupirocin	Mupirocin Oint	Centany® Centany® AT Oint Kit Mupirocin Crm	Jan
DERMATOLOGIC AGENTS: Topical Antibiotic/Benzoyl Peroxide	Clindamycin/Benzoyl Peroxide 1.2%/5% (gen Duac®)	Acanya® BenzaClin® Benzamycin® Clindamycin/Benzoyl Peroxide 1.2%/2.5% (gen Acanya®) Clindamycin/Benzoyl Peroxide 1%/5% (gen BenzaClin®)	April

The MO HealthNet Preferred Drug List is not all inclusive nor does it guarantee coverage but represents a summary of prescription coverage. For full criteria details see <https://dss.mo.gov/mhd/cs/pharmacy/pages/clinedit.htm>

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
		Erythromycin/Benzoyl Peroxide (gen Benzamycin®) Neucac® Onexton®	
DERMATOLOGIC AGENTS: Topical Antifungals	Alevazol® OTC Butenafine Crm OTC Ciclopirox 0.77% Crm/Susp Clotrimazole Crm OTC Clotrimazole Soln Rx Clotrimazole/Betamethasone Crm Ketoconazole Shampoo Miconazole Crm/Pwd/Spray Pwd OTC Nyamyc® Pwd Nystatin Crm/Oint/Pwd Nystop® Pwd Terbinafine Crm OTC Tolnaftate Crm/Pwd/Soln OTC Zeasorb® AF	Azolen™ Tinc OTC CicloDan® Ciclopirox 0.77% Gel Ciclopirox 1% Shampoo Ciclopirox 8% Kit/Soln Clotrimazole Crm Rx Clotrimazole Soln OTC Clotrimazole/Betamethasone Lot Econazole Ertaczo® Exelderm® Extina® Fungoid®-D Jublia® Kerydin® Ketoconazole Crm/Foam Ketodan® Lamisil® Spray OTC Loprox® Lotrimin® Luliconazole Luzu® Mentax® Miconazole-Zinc-Petro 0.25-15% Naftifine Naftin® Nizoral® A-D Nystatin/Triamcinolone Oxiconazole Oxistat® Sulconazole Crm/Sol Tavaborole Tinactin® Tolnaftate Spray OTC	April

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
DERMATOLOGIC AGENTS: Topical Antiparasitics, Treatment of Lice & Scabies	<p>Natroba™ Nix® Ultra Solution Permethrin OTC/Rx Crm Piperonyl butoxide/Pyrethrin (gen Rid® Shampoo OTC) Piperonyl butoxide/ Pyrethrin/Permethrin (gen Rid® Lice Complete Kit OTC) Sklice® OTC VanaLice™ OTC Gel</p>	<p>Vusion® CroTan™ Elimite™ Eurax® Ivermectin Lot OTC Lindane Malathion Lot Ovide® Spinosad</p>	April
DERMATOLOGIC AGENTS: Topical Antivirals	<p>Docosanol Zovirax® Crm</p>	<p>Abreva® OTC Acyclovir Crm/Oint Denavir® Penciclovir (gen Denavir®) Sitavig® Xerese® Zovirax® Oint</p>	April
DERMATOLOGIC AGENTS: Topical Corticosteroids	<p>Anusol-HC™ Betamethasone Dip Lot Betamethasone Val Crm/Lot/Oint Clobetasol Emollient Crm Clobetasol Prop Crm/Gel/Oint/Soln Fluocinolone Scalp Oil Fluticasone Prop Crm/Oint Hydrocortisone Crm/Lot/Oint Rx Hydrocortisone Crm/Oint OTC Mometasone Procto-Med HC™ Proctosol-HC® Proctozone-HC® Triamcinolone Crm/Lot/Oint (excluding gen Trianex®)</p>	<p>Ala-Scalp® Alclometasone Dip Amcinonide Apexicon E® Aqua Glycolic® HC Kit Beser™ Betamethasone Dip Aug Crm/Gel/Lot/Oint Betamethasone Dip Crm/Oint Betamethasone Val Foam Bryhali® Clobetasol Emollient Foam Clobetasol Prop Foam/Lot/Shampoo/Spray Clorcortolone Clodan® Cloderm® Cordran® Cutivate® Derma-Smoothe/FS® Dermatop® Desonate®</p>	April

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
		Desonide Desoximetasone Diflorasone Crm/Oint Diprolene® Elocon® Fluocinolone Body Oil/Crm/Oint/Soln Fluocinonide Fluocinonide Emollient Flurandrenolide Fluticasone Prop Lot Halcinonide Halobetasol Halog® Hydrocortisone Absorbbase Rx Hydrocortisone Butyrate Hydrocortisone Lot OTC Hydrocortisone Valerate Hydrocortisone/Aloe Impeklo® Impoyz® Kenalog® Lexette® Locoid® Locoid Lipocream® Luxiq® Micort-HC® Nolix® Nucort® Olux® Olux-E® Pandel® Prednicarbate Procto-Pak™ Sernivo® Synalar® Temovate® Texacort®	

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
		Topicort® Tovet® Triamcinolone 0.05% Oint (gen Trianex®) Triamcinolone Acet Aerosol Trianex® Triderm™ Tridesilon® Ultravate® Ultravate® X Vanos® Verdeso®	
DERMATOLOGIC AGENTS: Atopic Dermatitis	Elidel®	Eucrisa® Opzelura™ Pimecrolimus Protopic® Tacrolimus	Jul
DERMATOLOGIC AGENTS: Topical Retinoid Agents	Adapalene 0.1% gel, OTC Adapalene 0.3% gel Retin-A® Crm/Gel	Adapalene 0.1% cream Adapalene 0.3% gel pump Adapalene/Benzoyl Peroxide Altreno® Arazlo® Atralin® Clindamycin/Tretinoin Fabior® Retin-A® Micro® Gel/Pump Tazarotene Tretinoin Crm/Gel Tretinoin Micro Gel Tretin-X® Ziana®	April
ENDOCRINE AND METABOLIC AGENTS: Androgenic Agents	Androderm® Gel Patch Testosterone Cypionate Testosterone Enanthate Testosterone 1.62% Pump (gen AndroGel® 1.62% Pump)	AndroGel® Android® Aveed® Depo®-Testosterone Fortesta® Methitest™ Tabs Methyltestosterone Caps	April

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
		Natesto® Striant® Testim® Testopel® Testosterone 1% Pump (gen AndroGel®) Testosterone Gel (gen Fortesta®) Testosterone Gel (gen Testim®) Testosterone Gel Pack (gen AndroGel® Pack) Testosterone Gel Pump (gen Axiron®) Testred® Tlando® Vogelxo® Xyosted®	
ENDOCRINE AND METABOLIC AGENTS: Antihyperglycemic, Amylin-Analogs	Symlin Pen®		July
ENDOCRINE AND METABOLIC AGENTS: Antihyperglycemic, GLP-1 Receptor Agonist & Combinations	Bydureon® Byetta® Trulicity® Victoza®	Adlyxin® Bydureon Bcise® Mounjaro™ Ozempic® Rybelsus® Soliqua® Xultophy®	July
ENDOCRINE AND METABOLIC AGENTS: Antihyperglycemic, Alpha Glucosidase Inhibitor	Acarbose Miglitol	Glyset® Precose®	July
ENDOCRINE AND METABOLIC AGENTS: Antihyperglycemic, Meglitinide	Nateglinide Repaglinide	Prandin®	July
ENDOCRINE AND METABOLIC AGENTS:	Glipizide/Metformin Glyburide/Metformin	Fortamet® Glucophage®	July

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
Antihyperglycemic, Biguanide & Combination Agents	Metformin HCl Metformin ER (gen Glucophage® XR)	Glucophage® XR Glumetza® Metformin ER (gen Fortamet® OSM) Metformin ER (gen Glumetza® MOD) Metformin Soln Repaglinide/Metformin Riomet® Riomet ER™	
ENDOCRINE AND METABOLIC AGENTS: Antihyperglycemic, Dipeptidyl Peptidase-4 (DPP-IV) Inhibitors & Combination Agents	Janumet® Janumet® XR Januvia® Jentadueto® Kombiglyze® XR Onglyza® Tradjenta®	Alogliptin Alogliptin/Metformin Alogliptin/Pioglitazone Glyxambi® Jentadueto® XR Kazano Nesina™ Oseni Qtern® Steglujan®	July
ENDOCRINE AND METABOLIC AGENTS: Antihyperglycemic, SGLT2-Inhibitors & Combination Agents	Farxiga® Invokana® Jardiance® Synjardy®	Invokamet® Invokamet XR® Segluromet® Steglatro® Synjardy® XR Trijardy® XR Xigduo® XR	July
ENDOCRINE AND METABOLIC AGENTS: Antihyperglycemic, Thiazolidinediones (TZDs) & Combination Agents	Pioglitazone	ActoplusMet® Actos® Avandia® Duetact® Pioglitazone/Glimepiride Pioglitazone/Metformin	July
ENDOCRINE AND METABOLIC AGENTS: Agents for Bone Ossification, Bisphosphonates	Alendronate Tabs Ibandronate	Actonel® Alendronate Soln Atelvia® Boniva® Etidronate	October

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
		Fosamax® Fosamax Plus D® Risedronate Risedronate DR	
ENDOCRINE AND METABOLIC AGENTS: Agents for Bone Ossification, Calcitonin Agents		Calcitonin Salmon Nasal Spray	October
ENDOCRINE AND METABOLIC AGENTS: Growth Hormones & Growth Hormone Releasing Factors, Select Agents	Increlex®	Egrifta SV®	July
ENDOCRINE AND METABOLIC AGENTS: Somatropin Agents	Genotropin® Genotropin MiniQuick® Norditropin® FlexPro®	Humatrope® Nutropin AQ®Nuspina® Omnitrope® Saizen® Serostim® Skytrofa® Zomacton® Zorbtive®	July
ENDOCRINE AND METABOLIC AGENTS: Antihyperglycemic, Oral Sulfonylurea, 2nd Generation	Glimepiride Glipizide Glipizide ER Glyburide Glyburide Micronized	Amaryl® Glucotrol® Glucotrol XL® Glynase® PresTab®	July
ENDOCRINE AND METABOLIC AGENTS: Insulins, Non-Analogs	Humulin® N Vial Humulin® R Vial Humulin® R U-500 KwikPen®/Vial Novolin® N Vial Novolin® R Vial	Humulin® N KwikPen® Novolin® N FlexPen® Novolin® R FlexPen®	July

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
ENDOCRINE AND METABOLIC AGENTS: Insulins, Long-acting	Lantus® SoloStar®/Vial Levemir® FlexTouch®/Vial	Basaglar® KwikPen, Tempo™ Pen Insulin Degludec Pen/Vial Insulin Glargine SoloStar U100 & 100 Unit/mL Vial Insulin Glargine-YFGN (gen Semglee®) Semglee® (YFGN) Toujeo® SoloStar®/Max Solostar® Tresiba® FlexTouch®/Vial	July
ENDOCRINE AND METABOLIC AGENTS: Insulins, Mix	Humalog® Mix 50/50™ KwikPen®/Vial Humalog® Mix 75/25™ KwikPen®/Vial Humulin® 70/30 Vial NovoLog® Mix 70/30 FlexPen®/Vial	Humulin® 70/30 KwikPen® Insulin Aspart Protamine and Insulin Aspart 70/30 FlexPen®/Vial Insulin Lispro Mix 75/25 KwikPen® Novolin® 70/30 FlexPen®/Vial	July
ENDOCRINE AND METABOLIC AGENTS: Insulins, Rapid-acting	Humalog® Cartridge/Vial NovoLog® Cartridge/FlexPen®/Vial	Admelog® SoloStar® Pen/Vial Afrezza® Cartridge Apidra® SoloStar® Pen/Vial Fiasp® FlexTouch®/PenFill®/Vial Humalog KwikPen®, Tempo™ Pen Humalog® Jr KwikPen® Insulin Aspart FlexPen®/PenFill®/Vial Insulin Lispro Jr KwikPen® Insulin Lispro KwikPen®/Vial Lyumjev®	July
ENDOCRINE AND METABOLIC AGENTS: Antihyperuricemic Agents	Allopurinol 100 mg, 300 mg tabs Colchicine Tabs Probenecid Probenecid/Colchicine	Allopurinol 200 mg tabs Colchicine Caps Colcrys® Febuxostat Gloperba® Mitigare® Uloric® Zyloprim®	October
ENDOCRINE AND METABOLIC AGENTS: Agents for Hypoglycemia	Baqsimi® GlucaGen HypoKit® Glucagon Kit (Eli Lilly)	Glucagon Emergency Kit (gen Glucagon Kit by Eli Lilly) Glucagon Kit (Fresenius Kabi) Gvoke® Zegalogue®	January
ENDOCRINE AND METABOLIC AGENTS:	Oriahnn® Orilissa®	Myfembree® Orgovyx®	July

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
LHRH, GnRH Antagonists, Oral			
ENDOCRINE AND METABOLIC AGENTS: LHRH, GnRH Antagonists, Injectable	<p>Eligard® Fensolvi® Firmagon® Lupron Depot® 3.75, 11.25 mg Lupron Depot-Ped® Triptodur®</p>	<p>Camcevi™ Leuprolide (gen Lupron) 2 wk 14 mg/2.8 mL kit and vial Leuprolide (gen Lutrate Depot) 22.5 mg vial Lupron Depot® 7.5, 22.5, 30, 45 mg Supprelin® LA Synarel® Trelstar®</p>	July
ENDOCRINE AND METABOLIC AGENTS: Somatostatin Agents	<p>Octreotide (gen Sandostatin®) Sandostatin® LAR Depot</p>	<p>Bynfezia Pen™ Lanreotide (gen Somatuline® Depot) Mycapssa® Sandostatin® Somatuline® Depot</p>	January
GASTROINTESTINAL: Antiemetics, 5-HT3 and NK1 Injectable Agents	<p>Fosaprepitant Ondansetron Amp/Syringe/Vial Palonosetron Vial</p>	<p>Akynzeo® Vial Aloxi® Barhemsys® Cinvanti® Emend® Vial Granisetron Vial Palonosetron Syringe Sustol® Varubi® Vial Zofran® Vial</p>	January
GASTROINTESTINAL: Antiemetics, 5-HT3, NK1 & Other Select Non-Injectable Agents	<p>Aprepitant Caps Metoclopramide Soln/Tabs Ondansetron ODT/Soln/Tabs</p>	<p>Akynzeo® Caps Anzemet™ Bonjesta® Diclegis® Doxylamine/Pyridoxine Emend® Caps/Pwd Packet Gimoti® Granisetron Tabs Metoclopramide ODT Reglan® Sancuso® Zofran® Tabs</p>	January

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
GASTROINTESTINAL: Antiemetics, THC Derivative Agents	Dronabinol	Marinol®	January
GASTROINTESTINAL: Bile Salt Agents	Ursodiol	Bylvay™ Chenodal® Cholbam® Livmarli™ Ocaliva® Reltone™ Urso® Urso Forte®	October
GASTROINTESTINAL: Carbamoyl Phosphate Synthetase 1 Activators	Carglumic acid (Eton Pharmaceuticals)	Carbaglu® Carglumic acid (Burel Pharmaceuticals)	October
GASTROINTESTINAL: IBS-C/CIC Agents	Amitiza® Linzess®	Ibsrela® Lubiprostone Motegrity® Trulance®	January
GASTROINTESTINAL: Agents for Opioid Induced Constipation, Opioid Antagonists	Movantik®	Relistor® Symproic®	January
GASTROINTESTINAL: IBS Agents, Anti- Diarrheal		Alosetron Lotronex® Viberzi®	January
GASTROINTESTINAL: Pancreatic Enzymes	Creon® Zenpep®	Pertzye® Viokace®	April
GASTROINTESTINAL: Proton Pump Inhibitors	Nexium® Rx Packet Omeprazole Rx Pantoprazole Tabs Protonix® Susp	Aciphex® Sprinkle™ Dexilant Dexlansoprazole Esomeprazole Lansoprazole Nexium® Rx Caps Omeprazole OTC	October

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
		Omeprazole/Sodium Bicarbonate Pantoprazole Susp Prevacid® Prilosec® Protonix® Tabs Rabeprazole Zegerid®	
GASTROINTESTINAL: Ulcerative Colitis Agents, Oral	Balsalazide Lialda® Pentasa® Sulfasalazine DR & IR	Apriso® Asacol HD® Azulfidine® Azulfidine EN®-tabs® Budesonide (gen Uceris®) Colazal® Delzicol® Dipentum® Mesalamine (gen Apriso®) Mesalamine (gen Asacol HD®) Mesalamine (gen Delzicol®) Mesalamine (gen Lialda®) Ortikos™ Uceris® Tabs	April
GASTROINTESTINAL: Ulcerative Colitis Agents, Rectal	Mesalamine Kit/Supp	Canasa® Mesalamine (gen sfRowasa®) Rowasa® Enema/Kit sfRowasa® Enema Uceris® Foam	April
HEMATOLOGICAL AGENTS: Erythropoiesis Stimulating Agents (ESAs)	Aranesp® Epogen® Procrit®	Mircera® Retacrit®	July
HEMATOLOGICAL AGENTS: Leukocytes (WBC) Stimulants	Leukine® Neulasta® Onpro® Neulasta® Syringe Neupogen®	Fulphila® Fylnetra® Granix® Nivestym® Nyvepria™	July

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
		Releuko® Rolvedon™ Stimufend® Udenyca® Zarxio® Ziextenzo®	
HEMATOLOGICAL AGENTS: Thrombocytopenia Treatment Agents	NPlate® Promacta®	Doptelet® Mulpleta® Tavalisse®	July
IMMUNOLOGIC AGENTS: Systemic Immunomodulators, Cryopyrin-Associated Periodic Syndrome (CAPS) Agents	Ilaris® Kineret®	Arcalyst®	July
IMMUNOLOGIC AGENTS: Targeted Immune Modulators (TIMs), IL-6 Receptor Inhibitors	Actemra® Syringe	Actemra ACTPen®/Vial Kevzara®	July
IMMUNOLOGIC AGENTS: TIMs, IL-17A Antibody/IL-17 Receptor Antagonists	Taltz®	Cosentyx® Siliq®	July
IMMUNOLOGIC AGENTS: TIMs, IL-23 Inhibitors and IL-23/IL-12 Inhibitors	Ilumya® Tremfya®	Skyrizi® Stelara®	July
IMMUNOLOGIC AGENTS: TIMs, JAK Inhibitors	Xeljanz® Tabs	Cibinqo™ Olumiant® Rinvoq® Xeljanz® Soln Xeljanz® XR	July

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
IMMUNOLOGIC AGENTS: TIMs, Misc. Allergy and Asthma-Related Antibodies	Adbry™ Cinqair® Fasenra® Xolair®	Dupixent® Nucala® Tezspire™	Jul
IMMUNOLOGIC AGENTS: TIMs, Select Agents	Otezla®	Benlysta® Entyvio® Orencia® Orencia® Clickject™ Saphnelo™ Sotyktu™ Spevigo®	July
IMMUNOLOGIC AGENTS: TIMs, TNF Inhibitors	Enbrel® Humira® Infliximab Renflexis®	Avsola® Cimzia® Inflectra® Remicade® Simponi® Simponi ARIA®	July
OPHTHALMIC: Antihistamines	Alaway® Ketotifen 10 mL OTC Olopatadine 0.1% OTC Olopatadine 0.2% OTC	Azelastine 0.05% Bepotastine Bepreve® Epinastine Ketotifen 5 mL OTC Lastacaft® Olopatadine 0.1% Rx Olopatadine 0.2% Rx (gen Pataday®) Pataday® Patanol® Zaditor® Zerviate®	April
OPHTHALMIC: Keratoconjunctivitis	Restasis® Xiidra®	Cequa™ Cyclosporine Opt Emulsion Restasis Multidose® Tyrvaya™ Verkazia®	October
OPHTHALMIC: Mast Cell Stabilizers	Cromolyn Sodium Opth	Alocril® Alomide®	April

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
OPHTHALMIC: NSAIDS	Diclofenac Flurbiprofen Sodium Ketorolac Opth	Acular® Acular LS® Acuvail® Bromfenac BromSite® Ilevro® Nevanac® Prolensa®	April
OPHTHALMIC: "Soft" Corticosteroids	Difluprednate Lotemax® 0.5% Gel/Susp	Alrex® Durezol® Eysuvis® Inveltys® Lotemax® 0.5% Oint Lotemax® SM Loteprednol	April
OPHTHALMIC: Glaucoma, Prostaglandin Agonists	Latanoprost Travatan-Z®	Bimatoprost Durysta™ Lumigan® Tafluprost Travoprost Vyzulta® Xalatan® Xelpros™ Zioptan®	April
OPHTHALMIC: Glaucoma, Rho Kinase (ROCK Inhibitors)		Rhopressa® Rocklatan®	April
OPHTHALMIC: Glaucoma, Alpha 2 Receptor Agonist/ Carbonic Anhydrase Inhibitor (CAI)		Simbrinza®	April
OPHTHALMIC: Antibiotics, Fluoroquinolones	Ciprofloxacin Opth Moxifloxacin (gen Vigamox®) Ofloxacin Opth	Besivance® Ciloxan® Gatifloxacin 0.5% Levofloxacin 0.5% and 1.5%	April

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
		Moxeza® Moxifloxacin (gen Moxeza®) Ocuflax® Vigamox® Zymaxid®	
ORAL ONCOLOGY: Antiandrogenic Agents	Abiraterone Xtandi® Caps Zytiga® 500mg	Erleada® Nubeqa® Xtandi® Tabs Yonsa® Zytiga® 250mg	January
ORAL ONCOLOGY: Cyclin-Dependent Kinase (CDK) 4/6 Inhibitors	Kisqali® Kisqali® Femara® Co-Pack Verzenio®	Cosela™ Ibrance®	January
OTIC PREPARATIONS: Fluoroquinolone & Combination Agents	Ciprodex®	Cipro HC® Ciprofloxacin Otic Ciprofloxacin/Dexamethasone Ciprofloxacin/Fluocinolone Ofloxacin Otic Otovel®	April
RENAL and GENITOURINARY: BPH Inhibitors	Alfuzosin Doxazosin Dutasteride Finasteride 5 mg Tamsulosin Terazosin	Avodart® Cardura® Cardura® XL Cialis® 5 mg Dutasteride/Tamsulosin Entadfi™ Flomax® Jalyn® Proscar® Rapaflo® Silodosin Tadalafil 5 mg Uroxatral®	October
RENAL and GENITOURINARY: Electrolyte Depleters,	Calcium Acetate Caps Sevelamer Carbonate Tabs (gen Renvela®)	Auryxia® Calcium Acetate Tabs Calphron®	October

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
Phosphate Lowering Agents		Fosrenol® Lanthanum Carbonate Phoslyra® Renagel® Renvela® Sevelamer Hydrochloride (gen Renagel®) Sevelamer Pwd Pack Velphoro®	
RENAL and GENITOURINARY: Electrolyte Depleters, Potassium Lowering Agents	Kionex® Susp Sodium Polystyrene Sulfonate Pwd/Susp SPS® Susp SPS® Rectal Enema Veltassa® Pwd Pack	Keveyis® Lokelma®	October
RENAL and GENITOURINARY: Urinary Tract Antispasmodics	Oxybutynin Oxybutynin ER Solifenacin Succinate Toviaz®	Darifenacin ER Detrol® Detrol® LA Ditropan XL® Enablex® Fesoterodine Flavoxate Gelnique® Gemtesa® Myrbetriq® Oxytrol® Tolterodine Tolterodine ER Trospium Trospium ER Vesicare® Vesicare LS™	July
RESPIRATORY: Agents to Treat Hereditary Angioedema	Berinert® Haegarda® Icatibant Sajazir™ Takhzyro®	Cinryze® Firazyr® Kalbitor® Orladeyo® Ruconest®	January

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
RESPIRATORY: Anticholinergics, Long Acting Inhaled	Spiriva HandiHaler® Spiriva Respimat®	Incruse Ellipta® Lonhala® Magnair® Seebri Neohaler® Tudorza Pressair® Yupelri®	April
RESPIRATORY: Anticholinergics, Short Acting, & Combinations Inhaled	Atrovent HFA® Combivent Respimat® Ipratropium Soln Ipratropium-Albuterol		April
RESPIRATORY: Anticholinergics, Long-acting Beta Agonist (LABA) Combinations	Anoro Ellipta®	Bevespi Aerosphere® Duaklir® Pressair® Stiolto Respimat® Utibron Neohaler®	April
RESPIRATORY: Anticholinergics/ LABA/Inhaled Corticosteroid (ICS) Combinations and PDE4 Inhibitors		Breztri Aerosphere® Daliresp® Roflumilast Trelegy Ellipta®	April
RESPIRATORY: Beta-Adrenergic Agents, Long Acting	Serevent® Diskus	Arformoterol Brovana® Formoterol Perforomist® Striverdi® Respimat®	April
RESPIRATORY: Beta-Adrenergic Agonists, Short-acting, Nebulized	Albuterol Sulfate	Levalbuterol Xopenex®	April
RESPIRATORY: Beta-Adrenergic Agents, Short-acting	Ventolin® HFA	Albuterol HFA (gen Proair® HFA) Albuterol HFA (gen Proventil® HFA) Albuterol HFA (gen Ventolin® HFA) Levalbuterol HFA ProAir® Digihaler® ProAir® RespiClick® Proventil® HFA	April

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
RESPIRATORY: Epinephrines, Self-injectable	Epinephrine Inj (gen EpiPen [®] , Mylan Specialty) Epinephrine Jr Inj (gen EpiPen Jr. [®] , Mylan Specialty) EpiPen [®] EpiPen Jr. [®]	Xopenex HFA [®] Auvi-Q [®] Epinephrine Inj (gen Adrenaclick [®]) Epinephrine Inj (gen EpiPen [®] , Teva) Epinephrine Jr Inj (gen Adrenaclick [®] Jr) Epinephrine Jr Inj (gen EpiPen Jr. [®] , Teva) Symjepi [®]	April
RESPIRATORY: ICS	Budesonide Respules Flovent HFA [®]	Alvesco [®] ArmonAir [®] Digihaler [®] Arnuity [®] Ellipta [®] Asmanex [®] HFA and Twisthaler Flovent Diskus [®] Pulmicort [®] Flexhaler Pulmicort [®] Respules QVAR Redihaler [®]	April
RESPIRATORY: ICS/LABA	Advair Diskus [®] Dulera [®] 100mcg/5mcg, 200mcg/5mcg Symbicort [®]	Advair HFA [®] AirDuo [®] Digihaler [®] AirDuo [®] Respiclick [®] Breo [™] Ellipta [™] Budesonide/Formoterol (gen Symbicort [®]) Dulera [®] 50mcg/5mcg Fluticasone/Salmeterol (gen Advair Diskus [®]) Fluticasone/Salmeterol (gen AirDuo [®]) Wixela Inhub [®]	April
RESPIRATORY: Intranasal Antihistamines	Azelastine 0.1% Nasal (Rx)	Astepro (OTC) Astepro, Child (OTC) Azelastine 0.15% Nasal (Rx) Olopatadine Nasal Patanase [®]	April
RESPIRATORY: Intranasal Steroids	Fluticasone Nasal Rx	Azelastine/Fluticasone Beconase AQ [®] Budesonide Nasal Dymista [®] Flunisolide Fluticasone Nasal OTC Mometasone Furoate Nasacort [®] OTC	April

The MO HealthNet Preferred Drug List is not all inclusive nor does it guarantee coverage but represents a summary of prescription coverage. For full criteria details see <https://dss.mo.gov/mhd/cs/pharmacy/pages/clinedit.htm>

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
		Omnaris® Qnasl® Rhinocort® Allergy OTC Ryaltris™ Sinuva® Triamcinolone Nasal Xhance® Zetonna®	
RESPIRATORY: Leukotriene Receptor Modifiers	Montelukast	Accolate® Singulair® Zafirlukast Zileuton ER Zyflo®	April
RESPIRATORY: Pulmonary Arterial Hypertension (PAH) Agents, Prostacyclins, IV/SQ	Epoprostenol Injection Remodulin® Infusion/SQ Treprostinil Infusion/SQ	Flolan® Injection Uptravi® Vial Veletri® Injection	October
RESPIRATORY: PAH Agents, Prostacyclins, Inhaled	Tyvaso® Ventavis®	Tyvaso DPI™	October
RESPIRATORY: PAH Agents, Prostacyclins, Oral	Orenitram® ER	Uptravi®	October
RESPIRATORY: PAH Agents, Endothelin Receptor Antagonists (ETRA)	Ambrisentan Tracleer®	Bosentan Letairis® Opsumit®	October

PDL Class	Preferred Drugs	Non-Preferred Drugs	Review Date
RESPIRATORY: PAH Agents, Phosphodiesterase-5 Inhibitors (PDE5-I) & Soluble Guanylate Cyclase Stimulators (SGCS)	Sildenafil Inj/Tabs (gen Revatio®) Tadalafil Tabs (gen Adcirca®)	Adcirca® Adempas® Alyq™ Revatio® Sildenafil Susp Tadliq®	October
RESPIRATORY: Antihistamines, 2nd Generation	Cetirizine Tabs OTC Cetirizine Soln Rx Levocetirizine Tabs Rx Loratadine ODT/Soln/Tabs OTC	Allegra® Cetirizine Caps/Chew Tabs/Soln OTC Clarinex® Claritin® Desloratadine Fexofenadine Levocetirizine Soln Rx Levocetirizine Tabs OTC Loratadine Caps/Chew Tabs OTC Zyrtec®	April
RESPIRATORY: Antihistamines, 2nd Generation, & Decongestant Combination Agents	Cetirizine-D Loratadine-D	Allegra-D® Clarinex-D® Fexofenadine-D Zyrtec-D®	April
MISC: Methotrexate Products	Methotrexate PF Vials Methotrexate Tabs/Vials	Otrexup® Auto-Injector Rasuvo® Auto-Injector RediTrex® Syringe Trexall® Tabs Xatmep® Soln	July

PDL Class	Reference Products	Non-Reference Products	Review Date
<p>CENTRAL NERVOUS SYSTEM: Antipsychotics, Atypical (2nd Generation) Oral and Transdermal Products</p>	<p>Aripiprazole Clozapine Fanapt® Latuda® Lurasidone Olanzapine Olanzapine/Fluoxetine Paliperidone ER Quetiapine Quetiapine ER Rexulti® Risperidone Saphris® Vraylar® Ziprasidone</p>	<p>Abilify® Abilify MyCite® Asenapine (gen Saphris) Caplyta® Clozapine ODT Clozaril® Geodon® Invega® Lybalvi® Nuplazid® Quetiapine 150 mg tablet Risperdal® Secuado® Seroquel® Seroquel XR® Symbyax® Versacloz® Zyprexa® Zyprexa® Zydys®</p>	<p>January</p>
<p>CENTRAL NERVOUS SYSTEM: Antipsychotics, Atypical (2nd Generation) Depot Products</p>	<p>Abilify Maintena® Aristada® Aristada Initio® Invega Sustenna® Invega Trinza® Invega Hafyera™ Perseris®</p>	<p>Risperdal Consta® Zyprexa® Relprev™</p>	<p>January</p>