

Table 121-0030-1 Oregon Fee-for-Service Enforceable Physical Health Preferred Drug List
Effective: April 1, 2019

System	Class	Preferred
Allergy/Cold	Anaphylaxis Rescue	epinephrine AUTO INJECT
Allergy/Cold	Antihistamines, Second Generation	cetirizine HCl cetirizine HCl loratadine loratadine loratadine SOLUTION *** TABLET SOLUTION *** TAB RAPDIS *** TABLET
Allergy/Cold	Cough and Cold	codeine phosphate/guaifenesin * codeine phosphate/guaifenesin * codeine phosphate/guaifenesin * DM/acetaminophen/doxylamine ‡ guaifenesin ‡ guaifenesin ‡ guaifenesin ‡ guaifenesin ‡ guaifenesin ‡ guaifenesin ‡ guaifenesin/dextromethorphan ‡ guaifenesin/dextromethorphan ‡ guaifenesin/dextromethorphan ‡ guaifenesin/dextromethorphan ‡ guaifenesin/dextromethorphan ‡ guaifenesin/dextromethorphan ‡ guaifenesin/dextromethorphan ‡ guaifenesin/dextromethorphan ‡ guaifenesin/dextromethorphan ‡ pseudoephedrine HCl ‡ pseudoephedrine HCl ‡ LIQUID SYRUP TABLET LIQUID GRAN PACK LIQUID SYRUP TAB ER 12H TABLET TABLET ER CAPSULE DROPS ELIXIR GRAN PACK LIQUID LIQUID PKT SYRUP TAB ER 12H TABLET CAPSULE TABLET
Allergy/Cold	Nasal Allergy Inhalers	fluticasone propionate * SPRAY SUSP
Analgesics	Analgesics, Topical	capsaicin CREAM (G)
Analgesics	Gout	allopurinol probenecid/colchicine TABLET TABLET
Analgesics	Muscle Relaxants, Oral	baclofen cyclobenzaprine HCl tizanidine HCl TABLET TABLET *** TABLET

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System	Class	Preferred	
Analgesics	Non-Steroidal Anti-Inflammatory Drugs	diclofenac potassium	TABLET
		diclofenac sodium	TABLET DR
		etodolac	TABLET
		flurbiprofen	TABLET
		ibuprofen	CAPSULE
		ibuprofen	DROPS SUSP
		ibuprofen	ORAL SUSP
		ibuprofen	TAB CHEW
		ibuprofen	TABLET
		indomethacin	CAPSULE
		ketoprofen	CAPSULE
		ketorolac tromethamine **	TABLET
		meloxicam	TABLET
		nabumetone	TABLET
		naproxen	TABLET
		naproxen	TABLET DR
naproxen sodium	TABLET		
oxaprozin	TABLET		
salsalate	TABLET		
sulindac	TABLET		
Analgesics	Opioids, Long-Acting	fentanyl **	PATCH TD72
		morphine sulfate **	TABLET ER
Analgesics	Opioids, Short-Acting	acetaminophen with codeine *	ELIXIR
		acetaminophen with codeine *	ORAL SUSP
		acetaminophen with codeine *	SOLUTION
		acetaminophen with codeine *	TABLET
		butorphanol tartrate **	SPRAY
		codeine sulfate *	TABLET
		hydrocodone/acetaminophen **	SOLUTION
		hydrocodone/acetaminophen **	TABLET
		hydromorphone HCl **	SUPP.RECT
		hydromorphone HCl **	TABLET
		morphine sulfate **	SOLUTION
		morphine sulfate **	SUPP.RECT
		morphine sulfate **	TABLET
		opium/belladonna alkaloids **	SUPP.RECT
		oxycodone HCl **	SOLUTION
		oxycodone HCl **	TABLET
oxycodone HCl/acetaminophen **	CAPSULE		
oxycodone HCl/acetaminophen **	TABLET		
tramadol HCl **	TABLET		
Analgesics	Triptans, Nasal	sumatriptan **	SPRAY
Analgesics	Triptans, Oral	naratriptan HCl **	TABLET
		sumatriptan succinate **	TABLET

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Analgesics	Triptans, Subcutaneous	sumatriptan succinate ** sumatriptan succinate ** sumatriptan succinate ** CARTRIDGE PEN INJECTR VIAL
Antibiotics	Amoxicillin and Clavulanate, Oral	amoxicillin/potassium clav amoxicillin/potassium clav amoxicillin/potassium clav SUSP RECON TAB CHEW TABLET
Antibiotics	Antibiotics, Vaginal	clindamycin phosphate clindamycin phosphate metronidazole CREAM/APPL SUPP.VAG GEL W/APPL
Antibiotics	Cephalosporins (1st Gen), Oral	cephalexin cephalexin CAPSULE *** SUSP RECON
Antibiotics	Cephalosporins (2nd Gen), Oral	cefprozil cefprozil cefuroxime axetil SUSP RECON TABLET TABLET
Antibiotics	Cephalosporins (3rd Gen), Oral	cefdinir cefdinir CAPSULE SUSP RECON
Antibiotics	Clostridium Difficile Drugs	metronidazole metronidazole vancomycin HCl vancomycin HCl CAPSULE TABLET CAPSULE VIAL
Antibiotics	Fluroquinolones, Oral	ciprofloxacin ciprofloxacin HCl levofloxacin levofloxacin SUS MC REC TABLET SOLUTION TABLET
Antibiotics	Macrolides, Oral	azithromycin azithromycin clarithromycin SUSP RECON TABLET TABLET
Antibiotics	Oxazolidinones, Oral	linezolid linezolid SUSP RECON TABLET
Antibiotics	Tetracyclines, Oral	doxycycline hyclate ** doxycycline hyclate ** doxycycline monohydrate ** doxycycline monohydrate ** tetracycline HCl ** CAPSULE TABLET CAPSULE SUSP RECON CAPSULE

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Antifungal	Antifungals, Oral	clotrimazole TROCHE fluconazole SUSP RECON fluconazole TABLET nystatin ORAL SUSP nystatin TABLET
Antivirals	Hepatitis B	lamivudine * SOLUTION lamivudine * TABLET tenofovir disoproxil fumarate * TABLET
Antivirals	Hepatitis C, Direct-Acting Antivirals	elbasvir/grazoprevir (ZEPATIER™) * TABLET glecaprevir/pibrentasvir (MAVYRET™) * TABLET sofosbuvir/velpatas/voxilaprev * TABLET sofosbuvir/velpatasvir (EPCLUSA™) * TABLET sofosbuvir/velpatasvir * TABLET
Antivirals	Hepatitis C, Other Agents	peginterferon alfa-2a * PEN INJECTR peginterferon alfa-2a * SYRINGE peginterferon alfa-2a * VIAL peginterferon alfa-2b * KIT ribavirin * CAPSULE ribavirin * TABLET
Antivirals	Herpes Simplex	acyclovir CAPSULE acyclovir ORAL SUSP acyclovir TABLET

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Antivirals	HIV	abacavir sulfate	SOLUTION
		abacavir sulfate	TABLET
		abacavir sulfate/lamivudine	TABLET
		abacavir/dolutegravir/lamivudi	TABLET
		abacavir/lamivudine/zidovudine	TABLET
		atazanavir sulfate	CAPSULE
		atazanavir sulfate	POWD PACK
		atazanavir sulfate/cobicistat (EVOTAZ™)	TABLET
		bictegrav/emtricit/tenofov ala (BIKTARVY™)	TABLET
		cobicistat	TABLET
		darunavir ethanolate	ORAL SUSP
		darunavir ethanolate	TABLET
		darunavir/cob/emtri/tenof alaf (SYMTUZA™)	TABLET
		darunavir/cobicistat (PREZCOBIX™)	TABLET
		delavirdine mesylate	TAB DISPER
		delavirdine mesylate	TABLET
		didanosine	CAPSULE DR
		didanosine	SOLN RECON
		didanosine/sodium citrate	PACKET
		dolutegravir sodium	TABLET
		dolutegravir/rilpivirine	TABLET
		doravirine	TABLET
		doravirine/lamivu/tenofov diso	TABLET
		efavirenz	CAPSULE
		efavirenz	TABLET
		efavirenz/emtricit/tenofovr df	TABLET
		efavirenz/lamivu/tenofov disop (SYMFI™)	TABLET
		efavirenz/lamivu/tenofov disop (SYMFI LO™)	TABLET
		elviteg/cob/emtri/tenof alafen (GENVOYA™)	TABLET
		elviteg/cob/emtri/tenofo disop	TABLET
		elvitegravir	TABLET
		emtricitabine/rilpivirine/tenof DF	TABLET
		emtricitabine/rilpiviri/tenof ala (ODEFSEY™)	TABLET
		emtricitabine	CAPSULE
		emtricitabine	SOLUTION
		emtricitabine/tenofov alafenam (DESCOVY™)	TABLET
		emtricitabine/tenofovir (TDF)	TABLET
		enfuvirtide	VIAL
		etravirine	TABLET
		fosamprenavir calcium	ORAL SUSP
		fosamprenavir calcium	TABLET
		ibalizumab-uiyk	VIAL
		indinavir sulfate	CAPSULE
		lamivudine	SOLUTION
lamivudine	TABLET		
lamivudine/tenofovir disop fum (CIMDUO™)	TABLET		
lamivudine/zidovudine	TABLET		
lopinavir/ritonavir	SOLUTION		
lopinavir/ritonavir	TABLET		
maraviroc	SOLUTION		

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Antivirals	HIV	maraviroc TABLET nelfinavir mesylate TABLET nevirapine ORAL SUSP nevirapine TAB ER 24H nevirapine TABLET raltegravir potassium POWD PACK raltegravir potassium TAB CHEW raltegravir potassium TABLET rilpivirine HCl TABLET ritonavir SOLUTION ritonavir TABLET ritonavir (NORVIR™) POWD PACK ritonavir (NORVIR™) TABLET saquinavir mesylate TABLET stavudine CAPSULE stavudine SOLN RECON tipranavir CAPSULE tipranavir/vitamin E TPGS SOLUTION zidovudine CAPSULE zidovudine SYRUP zidovudine TABLET zidovudine VIAL
Antivirals	Influenza	oseltamivir phosphate ** CAPSULE oseltamivir phosphate ** SUSP RECON
Cardiovascular	ACEIs, ARBs and DRIs	benazepril HCl TABLET enalapril maleate TABLET irbesartan TABLET lisinopril TABLET losartan potassium TABLET olmesartan medoxomil TABLET ramipril CAPSULE telmisartan TABLET valsartan TABLET
Cardiovascular	Antianginals	isosorbide dinitrate CAPSULE ER isosorbide dinitrate TABLET isosorbide mononitrate TABLET nitroglycerin PATCH TD24 nitroglycerin TAB SUBL

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Cardiovascular	Anticoagulants, Oral and SQ	apixaban (ELIQUIS™) apixaban (ELIQUIS™) dabigatran etexilate mesylate (PRADAXA™) dalteparin sodium, porcine edoxaban tosylate enoxaparin sodium enoxaparin sodium rivaroxaban (XARELTO™) rivaroxaban (XARELTO™) warfarin sodium	TAB DS PK TABLET CAPSULE SYRINGE TABLET SYRINGE VIAL TAB DS PK TABLET TABLET
Cardiovascular	Beta-Blockers, Oral	acebutolol HCl atenolol carvedilol labetalol HCl metoprolol succinate metoprolol tartrate propranolol HCl	CAPSULE TABLET TABLET TABLET TAB ER 24H TABLET TABLET
Cardiovascular	Calcium Channel Blockers - Dihydropyridine, Oral	amlodipine besylate nicardipine HCl nifedipine nifedipine	TABLET CAPSULE TAB ER 24 TABLET ER
Cardiovascular	Calcium Channel Blockers - Non-Dihydropyridine, Oral	diltiazem HCl diltiazem HCl diltiazem HCl diltiazem HCl diltiazem HCl verapamil HCl verapamil HCl verapamil HCl	CAP ER 12H CAP ER 24H CAP ER DEG CAP SA 24H TABLET CAP24H PEL TABLET TABLET ER
Cardiovascular	Combination Antihypertensives	amlodipine bes/olmesartan med benazepril/hydrochlorothiazide enalapril/hydrochlorothiazide lisinopril/hydrochlorothiazide losartan/hydrochlorothiazide olmesartan/amlodipin/hcthiazyd olmesartan/hydrochlorothiazide telmisartan/hydrochlorothiazid	TABLET TABLET TABLET TABLET TABLET TABLET TABLET TABLET

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Cardiovascular	Diuretics, Oral	amiloride HCl amiloride/hydrochlorothiazide bumetanide furosemide furosemide hydrochlorothiazide hydrochlorothiazide hydrochlorothiazide indapamide spironolact/hydrochlorothiazid spironolactone torsemide triamterene/hydrochlorothiazid	TABLET TABLET TABLET SOLUTION *** TABLET CAPSULE SOLUTION TABLET TABLET TABLET TABLET TABLET TABLET CAPSULE
Cardiovascular	Other Dyslipidemia Drugs	cholestyramine (with sugar) cholestyramine (with sugar) cholestyramine/aspartame cholestyramine/aspartame fenofibrate gemfibrozil	POWD PACK POWDER POWD PACK POWDER TABLET *** TABLET
Cardiovascular	Platelet Inhibitors	aspirin aspirin aspirin aspirin/dipyridamole cilostazol clopidogrel bisulfate dipyridamole	TAB CHEW TABLET TABLET DR CPMP 12HR TABLET TABLET TABLET
Cardiovascular	Statins & Combos (High Potency)	atorvastatin calcium simvastatin	TABLET TABLET
Cardiovascular	Statins & Combos (Low-Medium Potency)	lovastatin pravastatin sodium	TABLET TABLET

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Dermatologicals	Acne	adapalene * adapalene * adapalene * adapalene * adapalene/benzoyl peroxide * azelaic acid * benzoyl peroxide * benzoyl peroxide * benzoyl peroxide * benzoyl peroxide * clindamycin phos/benzoyl perox * clindamycin phos/benzoyl perox * clindamycin phosphate * clindamycin phosphate * clindamycin phosphate * clindamycin phosphate * clindamycin phosphate * clindamycin/tretinoin * dapsone * erythromycin base in ethanol * erythromycin base in ethanol * erythromycin base in ethanol * isotretinoin * sulfacetamide sodium * tretinoin * tretinoin * tretinoin microspheres * tretinoin microspheres *	CREAM (G) GEL (GRAM) GEL W/PUMP LOTION GEL W/PUMP GEL (GRAM) CLEANSER FOAM GEL (GRAM) TOWELETTE GEL (GRAM) GEL W/PUMP FOAM GEL (GRAM) LOTION MED. SWAB SOLUTION GEL (GRAM) GEL (GRAM) MED. SWAB SOLUTION CAPSULE SUSPENSION CREAM (G) GEL (GRAM) GEL (GRAM) GEL W/PUMP
Dermatologicals	Antibiotics, Topical	bacitracin bacitracin zinc bacitracin zinc/polymyxin B bacitracin/polymyxin B sulfate gentamicin sulfate mupirocin neomycin/bacitracin/polymyxinB	OINT. (G) *** OINT. (G) OINT. (G) OINT. (G) CREAM (G) OINT. (G) OINT. (G)
Dermatologicals	Antifungals, Topical	miconazole nitrate nystatin nystatin	CREAM (G) CREAM (G) OINT. (G)

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System	Class	Preferred
Dermatologicals	Antiparasitics, Topical	permethrin COMBO. PKG permethrin CREAM (G) permethrin LIQUID piperonyl butox/pyrethr/permet KIT piperonyl butoxide/pyrethrins GEL (GRAM) piperonyl butoxide/pyrethrins GEL (ML) piperonyl butoxide/pyrethrins KIT piperonyl butoxide/pyrethrins LIQUID piperonyl butoxide/pyrethrins SHAMPOO
Dermatologicals	Antipsoriatics, Topical	calcipotriene * CREAM (G) calcipotriene * SOLUTION calcipotriene/betamethasone * OINT. (G) tazarotene * CREAM (G) tazarotene * GEL (GRAM)
Dermatologicals	Atopic Dermatitis Drugs	pimecrolimus * CREAM (G) tacrolimus * OINT. (G)
Dermatologicals	Steroids, Topical	alclometasone dipropionate CREAM (G) alclometasone dipropionate OINT. (G) betamethasone dipropionate CREAM (G) betamethasone dipropionate LOTION betamethasone dipropionate OINT. (G) betamethasone valerate CREAM (G) betamethasone valerate OINT. (G) clobetasol propionate CREAM (G) clobetasol propionate OINT. (G) desonide CREAM (G) desonide OINT. (G) fluocinolone acetonide CREAM (G) fluocinolone acetonide SOLUTION fluocinonide CREAM (G) fluocinonide SOLUTION fluocinonide/emollient base CREAM (G) hydrocortisone CREAM (G) *** hydrocortisone OINT. (G) hydrocortisone acetate CREAM (G) hydrocortisone butyrate SOLUTION triamcinolone acetonide CREAM (G) triamcinolone acetonide OINT. (G)
Endocrine	Androgens, Topical & Parenteral	testosterone * GEL (GRAM) testosterone * GEL MD PMP testosterone * GEL PACKET testosterone cypionate * VIAL testosterone enanthate * VIAL

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Endocrine	Bone Metabolism Drugs	alendronate sodium ibandronate sodium risedronate sodium TABLET TABLET TABLET
Endocrine	Diabetes, DPP-4 Inhibitors	sitagliptin phos/metformin HCl (JANUMET™) * sitagliptin phosphate (JANUVIA™) * TABLET TABLET
Endocrine	Diabetes, GLP-1 Receptor Agonists	exenatide * PEN INJCTR
Endocrine	Diabetes, Insulins	HUMALOG™ - BRAND ONLY insulin aspart insulin aspart insulin aspart insulin aspart prot/insulin asp insulin aspart prot/insulin asp * insulin detemir * insulin glargine,hum.rec.analog insulin lispro protamin/lispro insulin NPH hum/reg insulin hm insulin NPH hum/reg insulin hm * insulin NPH human isophane insulin regular, human insulin zinc human recombinant LANTUS SOLOSTAR™ - BRAND ONLY * VIAL CARTRIDGE INSULN PEN VIAL VIAL INSULN PEN INSULN PEN VIAL VIAL INSULN PEN VIAL VIAL INSULN PEN INSULN PEN
Endocrine	Diabetes, Miscellaneous Antidiabetic Agents	metformin HCl metformin HCl TAB ER 24H TABLET
Endocrine	Diabetes, Sulfonylureas	glimepiride glipizide glyburide TABLET TABLET TABLET
Endocrine	Diabetes, Thiazolidinediones	pioglitazone HCl TABLET
Endocrine	Estrogen Replacement, Oral	estradiol ‡ estrogens,conj.,synthetic A ‡ estropipate ‡ TABLET TABLET TABLET
Endocrine	Estrogen Replacement, Topical	estradiol ‡ estradiol ‡ PATCH TDSW PATCH TDWK
Endocrine	Estrogen Replacement, Vaginal	estradiol estrogens, conjugated TABLET CREAM/APPL
Endocrine	Growth Hormones	somatropin (GENOTROPIN™) * somatropin (GENOTROPIN™) * somatropin (NORDITROPIN FLEXPRO™) * somatropin (NUTROPIN AQ NUSPIN™) * CARTRIDGE SYRINGE PEN INJCTR PEN INJCTR

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Endocrine	Progestational Agents	hydroxyprogesterone caproat/PF (MAKENA™) * MAKENA™ - BRAND ONLY * medroxyprogesterone acetate medroxyprogesterone acetate norethindrone acetate progesterone, micronized	AUTO INJECT VIAL TABLET VIAL TABLET CAPSULE
Endocrine	Vitamin D Analogs	calcitriol calcitriol calcitriol	AMPUL CAPSULE SOLUTION
Gastrointestinal	Antacid, H2 Antagonists	famotidine ranitidine HCl ranitidine HCl	TABLET SYRUP TABLET
Gastrointestinal	Antacid, Proton Pump Inhibitors	omeprazole ** pantoprazole sodium **	CAPSULE DR TABLET DR
Gastrointestinal	Antidiarrheals	loperamide HCl loperamide HCl loperamide HCl	CAPSULE LIQUID TABLET
Gastrointestinal	Antiemetics, Conventional	metoclopramide HCl metoclopramide HCl metoclopramide HCl phosphorated carbo(dext-fruct) prochlorperazine prochlorperazine edisylate prochlorperazine maleate promethazine HCl promethazine HCl promethazine HCl	ORAL CONC SOLUTION TABLET SOLUTION SUPP.RECT SYRUP TABLET SUPP.RECT SYRUP TABLET
Gastrointestinal	Antiemetics, Newer	ondansetron ondansetron HCl ondansetron HCl	TAB RAPDIS SOLUTION TABLET
Gastrointestinal	Bile Therapy	ursodiol ursodiol	CAPSULE TABLET
Gastrointestinal	Hyoscyamine	hyoscyamine sulfate hyoscyamine sulfate	ELIXIR TAB RAPDIS

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Gastrointestinal	Inflammatory Bowel Disease	balsalazide disodium	CAPSULE
		budesonide	CAPDR - ER
		mesalamine	CAP ER 24H
		mesalamine	SUPP.RECT
		mesalamine	TABLET DR ***
		mesalamine (LIALDA™)	TABLET DR
		olsalazine sodium	CAPSULE
		sulfasalazine	TABLET
		sulfasalazine	TABLET DR

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Gastrointestinal	Laxatives, Chronic Constipation	bisacodyl	TABLET
		bisacodyl	TABLET DR
		calcium polycarbophil	TABLET
		cellulose	POWDER
		docusate calcium	CAPSULE
		docusate sodium	CAPSULE
		docusate sodium	LIQUID
		docusate sodium	SYRUP
		docusate sodium	TABLET
		fructooligosacch/maltodextrin	LIQUID
		fructooligosaccharides/polydex	LIQUID
		fructooligosaccharides/polydex	LIQUID PKT
		glycerin/maltodextrin	LIQUID
		guar gum	PACKET
		guar gum	POWDER
		inulin	TAB CHEW
		isomaltooligosaccharides	POWDER
		lactulose	SOLUTION
		magnesium citrate	SOLUTION
		magnesium hydroxide	ORAL SUSP
		magnesium hydroxide	TAB CHEW
		methylcellulose	TABLET
		methylcellulose (with sugar)	POWDER ***
		polyethylene glycol 3350	POWDER
		psyllium husk	CAPSULE ***
		psyllium husk	POWDER
		psyllium husk (with dextrose)	POWDER
		psyllium husk (with sugar)	POWDER
		psyllium husk/aspartame	POWD PACK
		psyllium husk/aspartame	POWDER
		psyllium husk/calcium carb	CAPSULE
		psyllium husk/inulin/aspartame	POWDER
		psyllium seed	POWDER
		psyllium seed (with dextrose)	PACKET
		psyllium seed (with dextrose)	POWDER
		psyllium seed (with sugar)	POWDER
		psyllium seed/aspartame	POWDER
		psyllium seed/sod bicarb	PACKET
		psyllium/sucr/sacchar/dextrose	POWD PACK
		senna leaf	TEA (GRAM)
senna leaf extract	SYRUP		
sennosides	SYRUP		
sennosides	TAB CHEW		
sennosides	TABLET		
sennosides/docusate sodium	TABLET		
sennosides/psyllium husk	CAPSULE		
soluble corn fiber	POWDER		
wheat dextrin	POWD PACK ***		
wheat dextrin	POWDER		

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Gastrointestinal	Pancreatic Enzymes	lipase/protease/amylase lipase/protease/amylase (CREON™) lipase/protease/amylase (ZENPEP™)	CAPSULE DR CAPSULE DR CAPSULE DR
Genito-Urinary	Benign Prostate Hypertrophy Drugs	doxazosin mesylate finasteride tamsulosin HCl terazosin HCl	TABLET TABLET CAPSULE CAPSULE
Genito-Urinary	Overactive Bladder Drugs	fesoterodine fumarate oxybutynin oxybutynin chloride oxybutynin chloride oxybutynin chloride	TAB ER 24H PATCH TDSW SYRUP TAB ER 24 TABLET
Hematology-Oncology	Colony Stimulating Factors	filgrastim (NEUPOGEN™) filgrastim (NEUPOGEN™) filgrastim-sndz pegfilgrastim pegfilgrastim sargramostim tbo-filgrastim tbo-filgrastim (GRANIX™)	SYRINGE VIAL SYRINGE SYR W/ INJ SYRINGE VIAL VIAL SYRINGE
Hematology-Oncology	Erythropoetic Stimulating Agents	darbepoetin alfa in polysorbat (ARANESP™) * darbepoetin alfa in polysorbat (ARANESP™) *	SYRINGE VIAL
Hematology-Oncology	Iron Chelators	deferoxamine mesylate	VIAL
Immunological	Biologics for Autoimmune Conditions	adalimumab (HUMIRA™) * adalimumab (HUMIRA PEDIATRIC CROHN'S™) * adalimumab (HUMIRA PEN™) * adalimumab (HUMIRA PEN CROHN'S-UC-HS™) * adalimumab (HUMIRA PEN PSOR-UVEITS-ADOL HS™) * adalimumab (HUMIRA(CF)™) * adalimumab (HUMIRA(CF) PEDIATRIC CROHN'S™) * adalimumab (HUMIRA(CF) PEN™) * adalimumab (HUMIRA(CF) PEN CROHN'S-UC-HS™) * adalimumab (HUMIRA(CF) PEN PSOR-UV-ADOL HS™) * etanercept (ENBREL™) * etanercept (ENBREL™) * etanercept (ENBREL MINI™) * etanercept (ENBREL SURECLICK™) *	SYRINGEKIT SYRINGEKIT PEN IJ KIT PEN IJ KIT PEN IJ KIT SYRINGEKIT SYRINGEKIT PEN IJ KIT PEN IJ KIT PEN IJ KIT SYRINGE VIAL CARTRIDGE PEN INJECTR
Immunological	Immunoglobulins	GAMUNEX-C™ - BRAND ONLY	VIAL ***

* Drug coverage subject to meeting clinical prior authorization criteria

** Drug coverage subject to quantity limits

*** Certain strengths may require Prior Authorization

‡ Age restrictions apply

Table 121-0030-1 Oregon Fee-for-Service Enforceable Physical Health Preferred Drug List
Effective: April 1, 2019

System	Class	Preferred	
Immunological	Immunosuppressants	azathioprine cyclosporine cyclosporine cyclosporine, modified cyclosporine, modified everolimus mycophenolate mofetil mycophenolate mofetil mycophenolate mofetil mycophenolate sodium sirolimus sirolimus tacrolimus	TABLET CAPSULE SOLUTION CAPSULE SOLUTION TABLET CAPSULE SUSP RECON TABLET TABLET DR SOLUTION TABLET CAPSULE
Neurology	Alzheimer's Disease Drugs	donepezil HCl galantamine HBr galantamine HBr memantine HCl memantine HCl memantine HCl rivastigmine	TABLET *** CAP24H PEL TABLET SOLUTION TAB DS PK TABLET PATCH TD24
Neurology	Antiepileptics (oral & rectal)	carbamazepine carbamazepine carbamazepine carbamazepine diazepam ethosuximide ethosuximide ethotoin gabapentin gabapentin lacosamide (VIMPAT™) levetiracetam levetiracetam methsuximide oxcarbazepine oxcarbazepine phenobarbital phenobarbital phenytoin phenytoin phenytoin sodium extended primidone rufinamide tiagabine HCl topiramate zonisamide	ORAL SUSP TAB CHEW TAB ER 12H TABLET KIT CAPSULE SOLUTION TABLET CAPSULE TABLET TABLET TABLET SOLUTION TABLET CAPSULE ORAL SUSP TABLET ELIXIR TABLET ORAL SUSP TAB CHEW CAPSULE TABLET TABLET TABLET TABLET TABLET CAPSULE

* Drug coverage subject to meeting clinical prior authorization criteria

** Drug coverage subject to quantity limits

*** Certain strengths may require Prior Authorization

‡ Age restrictions apply

Table 121-0030-1 Oregon Fee-for-Service Enforceable Physical Health Preferred Drug List
Effective: April 1, 2019

System	Class	Preferred
Neurology	Multiple Sclerosis	COPAXONE™ - BRAND ONLY interferon beta-1a interferon beta-1a interferon beta-1a/albumin interferon beta-1a/albumin interferon beta-1a/albumin interferon beta-1b SYRINGE *** PEN IJ KIT SYRINGEKIT KIT PEN INJCTR SYRINGE KIT
Neurology	Parkinson's Disease Drugs, Oral & Topical	benztropine mesylate carbidopa/levodopa carbidopa/levodopa carbidopa/levodopa/entacapone entacapone pramipexole di-HCl selegiline HCl trihexyphenidyl HCl trihexyphenidyl HCl TABLET TABLET TABLET ER TABLET TABLET TABLET CAPSULE ELIXIR TABLET
Nutritional	B-vitamins, Oral	cyanocobalamin (vitamin B-12) cyanocobalamin (vitamin B-12) cyanocobalamin (vitamin B-12) cyanocobalamin (vitamin B-12) cyanocobalamin (vitamin B-12) cyanocobalamin (vitamin B-12) pyridoxine HCl (vitamin B6) thiamine HCl thiamine mononitrate (vit B1) DROPS LOZENGE TAB IR ER TAB RAPDIS *** TAB SUBL *** TABLET *** TABLET TABLET *** TABLET
Nutritional	Calcium/Vit D Replacement, Oral	calcium carbonate calcium carbonate calcium carbonate calcium carbonate calcium carbonate/vitamin D3 calcium carbonate/vitamin D3 calcium carbonate/vitamin D3 calcium carbonate/vitamin D3 calcium citrate cholecalciferol (vitamin D3) cholecalciferol (vitamin D3) ergocalciferol (vitamin D2) ergocalciferol (vitamin D2) CAPSULE ORAL SUSP TAB CHEW TABLET CAPSULE *** LIQUID TAB CHEW TABLET *** TABLET *** CAPSULE *** TABLET *** CAPSULE *** TABLET
Nutritional	Iron Replacement, Oral	ferrous gluconate ferrous sulfate ferrous sulfate ferrous sulfate ferrous sulfate ferrous sulfate iron fum, ps/FA/vit C/L. casei TABLET *** ELIXIR *** LIQUID TABLET TABLET DR TABLET ER *** POWD PACK

* Drug coverage subject to meeting clinical prior authorization criteria

** Drug coverage subject to quantity limits

*** Certain strengths may require Prior Authorization

‡ Age restrictions apply

Table 121-0030-1 Oregon Fee-for-Service Enforceable Physical Health Preferred Drug List
Effective: April 1, 2019

System	Class	Preferred	
Nutritional	Magnesium Replacement, Oral	magnesium	TABLET
		magnesium amino acid chelate	TABLET
		magnesium carbonate	LIQUID
		magnesium citrate	TABLET
		magnesium gluconate	TABLET
		magnesium oxide	CAPSULE
		magnesium oxide/magnesium oxide/vit B6	TABLET
Nutritional	Multivitamins, Oral	beta-carotene(A)-vits C,E/mins *	TABLET
		folic acid/vit B complex and C *	TABLET
		multivit with minerals/lutein *	TABLET
		multivit,min52/folic/vitK/cQ10 *	CAPSULE
		multivit,tx with iron,minerals *	TABLET
		multivitamin *	TABLET
		multivitamin no.58/vit D3/K *	CAPSULE
		multivitamin,therapeutic *	TABLET
		multivitamin/iron/folic acid *	TABLET
		multivit-min 62/iron fum/folic *	CAPSULE
		multivit-min/FA/lycopen/lutein *	TABLET
		mv-min 51/folic acid/vit K/ubi *	TAB CHEW
		pedi multivit 22/vit D3/vit K *	TAB CHEW
vitamin B complex *	CAPSULE		
Nutritional	Potassium and K-Phos, Oral	pot chloride/cal phos/mag	TABLET
		potassium	TABLET
		potassium bicarbonate/cit ac	TABLET EFF ***
		potassium chloride	TAB ER PRT
		potassium chloride	TABLET ER
		potassium phosphate,monobasic	TABLET SOL
		sod phos di, mono/K phos mono	TABLET
		sod phos,m-b/K phos,monob	TABLET
sodium,potassium phosphates	POWD PACK		

* Drug coverage subject to meeting clinical prior authorization criteria

** Drug coverage subject to quantity limits

*** Certain strengths may require Prior Authorization

‡ Age restrictions apply

Table 121-0030-1 Oregon Fee-for-Service Enforceable Physical Health Preferred Drug List

Effective: April 1, 2019

System	Class	Preferred	
Nutritional	Prenatal Vitamins	PNV 11/iron fum/folic acid/om3	CAPSULE
		PNV 15/iron fum,ps/folic acid	CAPSULE
		PNV 16/iron fum,ps/folic/om-3	CAPSULE
		PNV 19/iron ps,heme/folic/dha	CAPSULE
		PNV 21/iron ps,heme ppep/folic	TABLET
		PNV 22/iron,gluc/folic/dss/dha	COMBO. PKG
		PNV 30/iron carb,ag/folic/om3	CAPSULE
		PNV 39/iron/folic/docusate/dha	CAPSULE
		PNV 66/iron/folic/docusate/dha	CAPSULE
		PNV 67/iron ps/folate no.1/dha	CAPSULE
		PNV 69/iron/folic/docusate/dha	CAPSULE
		PNV 76/iron,gluc/folic/dss/dha	COMBO. PKG
		PNV 80/iron fum/folic/dss/dha	CAPSULE
		PNV 85/iron/folic/dha/fish oil	CAPSULE
		PNV no.111/iron/folate/dha	CAPSULE
		PNV no.118/iron fumarate/FA	TAB CHEW
		PNV no.5/ferrous fum/folic ac	CAPSULE
		PNV w-CA8/iron/FA/Lmefolate Ca	TABLET
		PNV, calcium 70/iron/folic/dha	CAPSULE
		PNV,Ca42/iron/FA/Lmefolate/dha	CAPSULE
		PNV,calcium 72/iron/folic acid	TABLET
		PNV/folic ac/B6/calcium/ginger	TABLET
		PNV/iron fum,b-g/folic acid	TABLET
		PNV/iron ps cplx/folic acid	TABLET
		pnv20/iron/folic/docusate/om3s	CAPSULE
		PNV59/iron,carb,fum/FA/dss/dha	CAPSULE
		PNV72/iron,gluc/folic/dss/dha	COMBO. PKG
		PNV73/iron,gluc/folic/dss/dha	COMBO. PKG
		PNV83/iron,carb,asp/folic acid	TABLET
		prenat 115/iron fum/folic/dss	TABLET
		prenat90/iron fum,ps/folic/dha	CAPSULE
		prenatal 113/iron/lmfol/omeg3s	CMB TABAMP
		prenatal 114/iron a-g/folate 1	TABLET
		prenatal 118/iron/folate 6/dha	CAPSULE
		prenatal 123/iron/folic/omeg3s	CAPSULE
		prenatal 2/iron/folic acid/om3	COMBO. PKG
		prenatal 26/iron ps/folic/dha	CAPSULE
		prenatal 34/iron/folic/dss/dha	CAPSULE
		prenatal 47/iron/folate 1/dha	CAPSULE
		prenatal 53/iron/folic ac/omg3	COMBO. PKG
		prenatal 57/iron/folic/dss/dha	CAPSULE
		prenatal 59/iron/folic/dss/dha	CAPSULE
		prenatal 68/iron/folic no1/dha	CAPSULE
		prenatal 78/iron/folate 1/dha	CAPSULE
		prenatal 86/iron/folic/dha/epa	COMBO. PKG
		prenatal 87/iron bis/folic/dha	COMBO. PKG
		prenatal no.123/iron/folic ac	TABLET
prenatal no.52/iron/FA/dha	CAPSULE		
prenatal no.75/iron/folate no1	TABLET		
prenatal no.77/iron asp gly/FA	TABLET		

* Drug coverage subject to meeting clinical prior authorization criteria

** Drug coverage subject to quantity limits

*** Certain strengths may require Prior Authorization

‡ Age restrictions apply

Table 121-0030-1 Oregon Fee-for-Service Enforceable Physical Health Preferred Drug List

Effective: April 1, 2019

System	Class	Preferred	
Nutritional	Prenatal Vitamins	prenatal no13/iron ps/folate 1	TAB CHEW
		prenatal no4/iron fum,ps/folic	CAPSULE
		prenatal vit 10/iron fum/folic	TABLET
		prenatal vit 10/iron/folic/dha	COMBO. PKG
		prenatal vit 113/iron/lmfolate	TAB CHEW
		prenatal vit 14/iron fum/folic	TAB CHEW
		prenatal vit 33/iron/folic/dha	COMBO. PKG
		prenatal vit 65/iron fum,ps/FA	CAPSULE
		prenatal vit 84/iron/FA 1/dha	CAPSULE
		prenatal vit 85/iron/FA 1/dha	CAPSULE
		prenatal vit 87/iron/folic/dha	CAPSULE
		prenatal vit no.109/iron/FA	TAB CHEW
		prenatal vit no.112/folate no6	TAB CHEW
		prenatal vit no.127/iron/folic	TABLET
		prenatal vit,cal 73/iron/folic	TABLET
		prenatal vit,calc76/iron/folic	TABLET
		prenatal vit,calc78/iron/folic	TABLET
		prenatal vit/iron bisgly/folic	TABLET
		prenatal vit/iron carb&sulf/FA	TABLET
		prenatal vit/iron fum/folic ac	TABLET
		prenatal vit103/iron fum/folic	TABLET
		prenatal vit114/folate6/ginger	TABLET
		prenatal vit128/iron/folic acid	TAB CHEW
		prenatal vit136/iron/folic acid	TABLET
		prenatal vit27,calcium/iron/FA	TABLET
		prenatal vit68/iron/FA no6/dha	CAPSULE
		prenatal vit69/iron/folate6/dh	CAPSULE
		prenatal vit86/iron/folic acid	TABLET
		prenatal vits15/iron/folic/dss	TABLET
		prenatal vits16/iron/folic/dss	TABLET
		prenatal vits18/iron/folic/dss	TABLET
		prenatal,calc.40/iron/folate 1	TABLET
		prenatal56/iron/folic acid/dha	CAPSULE
		prenatal64/iron/Lmfolate/algal	CAPSULE
prenatal81/iron/folic/docusate	TABLET		
Pv w-o Vit A/iron/docus/FA/Zn	CAP SEQ		

* Drug coverage subject to meeting clinical prior authorization criteria

** Drug coverage subject to quantity limits

*** Certain strengths may require Prior Authorization

‡ Age restrictions apply

Table 121-0030-1 Oregon Fee-for-Service Enforceable Physical Health Preferred Drug List
Effective: April 1, 2019

System	Class	Preferred
Ophthalmics	Antibiotics, Ophthalmic	bacitracin/polymyxin B sulfate OINT. (G) ciprofloxacin HCl DROPS ciprofloxacin HCl OINT. (G) erythromycin base OINT. (G) gentamicin sulfate DROPS gentamicin sulfate OINT. (G) moxifloxacin HCl DROPS natamycin DROPS SUSP neomycin/polymyxn B/gramicidin DROPS ofloxacin DROPS polymyxin B sulf/trimethoprim DROPS sulfacetamide sodium DROPS tobramycin DROPS tobramycin OINT. (G)
Ophthalmics	Antibiotic-Steroids, Ophthalmic	gentamicin sulf/prednisolone DROPS SUSP gentamicin sulf/prednisolone OINT. (G) neomycin/polymyxin B/dexametha DROPS SUSP neomycin/polymyxin B/dexametha OINT. (G) sulfacetamide/prednisolone DROPS SUSP sulfacetamide/prednisolone OINT. (G) tobramycin/dexamethasone DROPS SUSP tobramycin/dexamethasone OINT. (G)
Ophthalmics	Anti-Inflammatory Drugs, Ophthalmic	dexamethasone DROPS SUSP dexamethasone sodium phosphate DROPS diclofenac sodium DROPS *** fluorometholone DROPS SUSP fluorometholone OINT. (G) flurbiprofen sodium DROPS ketorolac tromethamine DROPS loteprednol etabonate DROPS SUSP prednisolone acetate DROPS SUSP
Ophthalmics	Glaucoma Drugs	betaxolol HCl DROPS brimonidine tartrate DROPS *** brinzolamide DROPS SUSP carteolol HCl DROPS dorzolamide HCl/timolol maleat DROPS dorzolamide/timolol/PF DROPERETTE latanoprost DROPS latanoprost DRPS EMULS pilocarpine HCl DROPS timolol maleate DROPS travoprost DROPS
Ophthalmics	Vascular Endothelial Growth Factors	bevacizumab VIAL

* Drug coverage subject to meeting clinical prior authorization criteria

** Drug coverage subject to quantity limits

*** Certain strengths may require Prior Authorization

‡ Age restrictions apply

Table 121-0030-1 Oregon Fee-for-Service Enforceable Physical Health Preferred Drug List
Effective: April 1, 2019

System	Class	Preferred
Otics	Otic Antibiotics	neomyc/colist/hydrocort/thonzn DROPS SUSP neomycin/polymyxin B/hydrocort DROPS SUSP *** ofloxacin DROPS
Psychiatric	ADHD Drugs	dexmethylphenidate HCl ** ‡ CPBP 50-50 dexmethylphenidate HCl ** ‡ TABLET dextroamphetamine/amphetamine ** ‡ CAP ER 24H dextroamphetamine/amphetamine ** ‡ TABLET lisdexamfetamine dimesylate (VYVANSE™) ** ‡ CAPSULE methylphenidate ** ‡ PATCH TD24 methylphenidate HCl ** ‡ CPBP 30-70 methylphenidate HCl ** ‡ TABLET
Psychiatric	Benzodiazepines	clonazepam ** TABLET
Psychiatric	Opioid Reversal Agents	naloxone HCl AMPUL naloxone HCl SPRAY naloxone HCl SYRINGE naloxone HCl VIAL
Psychiatric	Sedatives	zolpidem tartrate * TABLET
Psychiatric	Substance Use Disorders, Opioid & Alcohol	acamprosate calcium TABLET DR buprenorphine HCl/naloxone HCl (SUBOXONE™) ** FILM buprenorphine HCl/naloxone HCl (ZUBSOLV™) ** TAB SUBL buprenorphine HCl/naloxone HCl ** FILM buprenorphine HCl/naloxone HCl ** TAB SUBL naltrexone HCl TABLET naltrexone microspheres (VIVITROL™) SUS ER REC
Psychiatric	Tobacco Smoking Cessation	bupropion HCl TAB ER 12H nicotine ** PATCH DYSQ nicotine ** PATCH TD24 nicotine polacrilex ** GUM nicotine polacrilex ** LOZENGE nicotine polacrilex ** LOZNG MINI varenicline tartrate (CHANTIX™) ** TAB DS PK varenicline tartrate (CHANTIX™) ** TABLET
Pulmonary	Anticholinergics, Inhaled	ipratropium bromide HFA AER AD ipratropium bromide SOLUTION ipratropium/albuterol sulfate AMPUL-NEB tiotropium bromide CAP W/DEV
Pulmonary	Beta-Agonists, Inhaled Long Acting	salmeterol xinafoate BLST W/DEV
Pulmonary	Beta-Agonists, Inhaled Short- Acting	albuterol sulfate HFA AER AD albuterol sulfate SOLUTION albuterol sulfate VIAL-NEB

* Drug coverage subject to meeting clinical prior authorization criteria

** Drug coverage subject to quantity limits

*** Certain strengths may require Prior Authorization

‡ Age restrictions apply

Table 121-0030-1 Oregon Fee-for-Service Enforceable Physical Health Preferred Drug List
Effective: April 1, 2019

System	Class	Preferred
Pulmonary	Corticosteroids, Inhaled	beclomethasone dipropionate AER W/ADAP budesonide AER POW BA fluticasone propionate AER W/ADAP fluticasone propionate BLST W/DEV
Pulmonary	Corticosteroids/LABA Combination, Inhaled	budesonide/formoterol fumarate HFA AER AD fluticasone propion/salmeterol BLST W/DEV fluticasone propion/salmeterol HFA AER AD
Pulmonary	Cystic Fibrosis	dornase alfa SOLUTION sodium chloride for inhalation VIAL-NEB tobramycin/nebulizer AMPUL-NEB tobramycin/nebulizer (KITABIS PAK™) AMPUL-NEB
Pulmonary	Miscellaneous Pulmonary Agents	montelukast sodium TAB CHEW montelukast sodium TABLET
Pulmonary	Pulmonary Arterial Hypertension Oral and Inhaled Drugs	bosentan TABLET sildenafil citrate TABLET
Pulmonary	Pulmonary Arterial Hypertension Parenteral Drugs	epoprostenol sodium (glycine) VIAL
Renal	Phosphate Binders	calcium acetate CAPSULE calcium acetate TABLET *** sevelamer HCl * TABLET

* Drug coverage subject to meeting clinical prior authorization criteria

** Drug coverage subject to quantity limits

*** Certain strengths may require Prior Authorization

‡ Age restrictions apply

Table 121-0030-1 Oregon Fee-for-Service Voluntary Mental Health Preferred Drug List

Effective: April 1, 2019

System	Class	Preferred	
Neurology	Antiepileptics (oral & rectal)	divalproex sodium	CAP DR SPR
		divalproex sodium	TAB ER 24H
		divalproex sodium	TABLET DR
		lamotrigine	TABLET
		valproic acid	CAPSULE
		valproic acid (as sodium salt)	SOLUTION
Psychiatric	ADHD Drugs	atomoxetine HCl ** ‡	CAPSULE
Psychiatric	Antidepressants	amitriptyline HCl	TABLET
		bupropion HCl	TAB SR 12H
		bupropion HCl	TABLET
		citalopram hydrobromide	SOLUTION
		citalopram hydrobromide	TABLET
		desipramine HCl	TABLET
		doxepin HCl	CAPSULE
		doxepin HCl	ORAL CONC
		escitalopram oxalate	TABLET
		fluoxetine HCl	CAPSULE
		fluoxetine HCl	SOLUTION
		fluoxetine HCl	TABLET
		fluvoxamine maleate	TABLET
		imipramine HCl	TABLET
		maprotiline HCl	TABLET
		mirtazapine	TAB RAPDIS
		mirtazapine	TABLET
		nortriptyline HCl	CAPSULE
		nortriptyline HCl	SOLUTION
		paroxetine HCl	TABLET
protriptyline HCl	TABLET		
sertraline HCl	ORAL CONC		
sertraline HCl	TABLET		
trimipramine maleate	CAPSULE		
venlafaxine HCl	CAP ER 24H		
venlafaxine HCl	TABLET		
Psychiatric	Antipsychotics, 1st Gen	chlorpromazine HCl	ORAL CONC
		fluphenazine HCl	ELIXIR
		fluphenazine HCl	ORAL CONC
		fluphenazine HCl	TABLET
		haloperidol	TABLET
		haloperidol lactate	ORAL CONC
		loxapine succinate	CAPSULE
		perphenazine	TABLET
		thioridazine HCl	ORAL CONC
		thioridazine HCl	TABLET
		thiothixene	CAPSULE
		thiothixene HCl	ORAL CONC
		trifluoperazine HCl	TABLET

* Drug coverage subject to meeting clinical prior authorization criteria

** Drug coverage subject to quantity limits

*** Certain strengths may require Prior Authorization

‡ Age restrictions apply

Table 121-0030-1 Oregon Fee-for-Service Voluntary Mental Health Preferred Drug List

Effective: April 1, 2019

System	Class	Preferred	
Psychiatric	Antipsychotics, 2nd Gen	asenapine maleate (SAPHRIS™)	TAB SUBL
		cariprazine HCl (VRAYLAR™)	CAP DS PK
		cariprazine HCl (VRAYLAR™)	CAPSULE
		clozapine	TABLET
		lurasidone HCl (LATUDA™)	TABLET
		olanzapine	TABLET
		quetiapine fumarate **	TABLET
		risperidone	SOLUTION
		risperidone	TABLET
Psychiatric	Antipsychotics, Parenteral	aripiprazole (ABILIFY MAINTENA™)	SUSER SYR
		aripiprazole (ABILIFY MAINTENA™)	SUSER VIAL
		aripiprazole lauroxil (ARISTADA™)	SUSER SYR
		aripiprazole lauroxil, submicr. (ARISTADA INITIO™)	SUSER SYR
		chlorpromazine HCl	AMPUL
		fluphenazine decanoate	VIAL
		fluphenazine HCl	VIAL
		haloperidol decanoate	AMPUL
		haloperidol decanoate	VIAL
		haloperidol lactate	AMPUL
		haloperidol lactate	SYRINGE
		haloperidol lactate	VIAL
		paliperidone palmitate (INVEGA SUSTENNA™)	SYRINGE
		paliperidone palmitate (INVEGA TRINZA™)	SYRINGE
		risperidone (PERSERIS™)	SUSER SYKT
		risperidone microspheres **	SYRINGE
		trifluoperazine HCl	VIAL

* Drug coverage subject to meeting clinical prior authorization criteria

** Drug coverage subject to quantity limits

*** Certain strengths may require Prior Authorization

‡ Age restrictions apply