

Washington Preferred Drug List

What is the Washington Preferred Drug List?

HRSA, in coordination with the Health Care Authority (HCA) and Labor & Industries (L & I), have developed a list of preferred drugs within a chosen therapeutic class that are selected based on clinical evidence of safety, efficacy, and effectiveness. The drugs within a chosen therapeutic class are studied by an evidence-based practice center (EPC). A written report on the comparative safety, efficacy, and effectiveness from the EPC is evaluated by the Washington State Pharmacy and Therapeutic Committee which makes recommendations to the state agencies regarding the selection of the preferred drugs on the Washington Preferred Drug List (PDL). [WAC 388-530-4100]

What is the process to obtain drugs on the Washington PDL?

1. **Preferred Drugs** - Prescription claims for preferred drugs submitted to DSHS are reimbursed without authorization requirements unless the drug requires authorization for:
 - a. Safety criteria;
 - b. Special subpopulation criteria; or
 - c. Limits based on age, gender, dose, or quantity.
2. **Non-preferred Drugs** - Prescription claims for non-preferred drugs submitted to DSHS are reimbursed without authorization requirements when written by an Endorsing Practitioner who has indicated “DAW” on the prescription unless the drug requires restrictions for safety. See WAC 388-530-4150.
3. Prescription claims for non-preferred drugs submitted to DSHS are reimbursed only after authorizing criteria are met if written by a non-endorsing practitioner.
4. Pharmacies must call HRSA for authorization when required.
Call 800.848.2842 (Option 2) or fax to **360.725.2141**.

What are the authorization criteria that must be met to obtain a non-preferred drug?

- For most drug classes on the Washington PDL, the authorization criteria is that the client must have tried and failed, or is intolerant to, at least one preferred drug. Drugs may have criteria that go beyond these basic criteria for the reasons stated in #1 on the previous page.
- Drugs that are in drug classes on the Washington PDL that have not been studied by the evidence-based practice center(s) and have not been reviewed by the P&T committee will be treated as non-preferred drugs and will require authorization.

HRSA requires pharmacies to obtain authorization for non-preferred drugs when a therapeutic equivalent is on the Washington PDL. The following table shows the preferred and non-preferred drug in each therapeutic drug class on the Washington PDL:

Note: HRSA changed the format for multiple drug listings. A slash (/) is used to denote multiple forms of a drug. For example: “Cardizem[®] /CD/LA/SR” represents immediate release Cardizem, as well as the CD, LA, and SR forms. A hyphen (-) is used to indicate combination products. For example: “benazepril-HCTZ” represents the combination product of benazepril and hydrochlorothiazide, rather than benazepril AND the combination product.

Drug Class	Preferred Drugs	Non-preferred Drugs
ACE Inhibitors	<p>Generic: benazepril captopril enalapril lisinopril ramipril*</p> <p>Brand: Altace[®] (<i>ramipril</i>)*</p> <p>*EPA required</p>	<p>Generic: fosinopril moexipril quinapril trandolapril</p> <p>Brand: Accupril[®] (<i>quinapril</i>) Aceon[®] (<i>perindopril</i>) Capoten[®] (<i>captopril</i>) Lotensin[®] (<i>benazepril</i>) Mavik[®] (<i>trandolapril</i>) Monopril[®] (<i>fosinopril</i>) Prinivil[®] (<i>lisinopril</i>) Univasc[®] (<i>moexipril</i>) Vasotec[®] (<i>enalapril</i>) Zestril[®] (<i>lisinopril</i>)</p>

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Drug Class	Preferred Drugs	Non-preferred Drugs
<p>Antiemetics</p>	<p>Generic: ondansetron tablet/solution/ injection*</p> <p>*EPA required</p>	<p>Generic: granisetron tablet/injection</p> <p>Brand: Aloxi[®] (<i>palonosetron</i>) injection* Anzemet[®] (<i>dolasetron</i>) tablet/injection* Granisol[®] (<i>granisetron</i>) solution Kytril[®] (<i>granisetron</i>) tablet/solution/injection* Zofran[®]/ODT[®] (<i>ondansetron</i>) tablet/solution/injection*</p> <p>*EPA required</p>
<p>Antiplatelets</p> <p>(*Not subject to therapeutic interchange program (TIP). See pg. M.1.)</p>	<p>Generic: clopidogrel*</p> <p>Brand: Aggrenox[®] (<i>dipyridamole/aspirin ER</i>)* Plavix[®] (<i>clopidogrel bisulfate</i>)*</p> <p>*EPA required</p>	<p>Generic: ticlopidine</p> <p>Brand: Ticlid[®] (<i>ticlopidine</i>)</p>

Drug Class	Preferred Drugs	Non-preferred Drugs
<p>Attention Deficit/ Hyperactivity Disorder</p> <p>(*Not subject to TIP. See pg. M.1.)</p>	<p>Generic: amphetamine salt combo dextroamphetamine dextroamphetamine SA methylphenidate methylphenidate SA Methylin[®] (<i>methylphenidate HCl</i>) tablet Methylin ER[®] (<i>methylphenidate HCl</i>)</p> <p>Brand: Adderall XR[®] (<i>amphetamine salt combo</i>) Concerta[®] (<i>methylphenidate HCl</i>) Strattera[®] (<i>atomoxetine HCl</i>)</p>	<p>Generic: pemoline dexmethylphenidate</p> <p>Brand: Adderall[®] (<i>amphetamine salt combo</i>) Daytrana[™] (<i>methylphenidate HCl</i>) transdermal patch** Dexedrine[®] (<i>d-amphetamine</i>) Dexedrine SA[®] (<i>d-amphetamine</i>) Dextrostat[®] (<i>d-amphetamine</i>) Focalin[®] (<i>dexmethylphenidate</i>) Focalin XR[®] (<i>dexmethylphenidate</i>) Metadate CD[™] (<i>methylphenidate HCl</i>) Metadate ER[™] (<i>methylphenidate HCl</i>) Methylin[®] (<i>methylphenidate HCl</i>) chewable/solution Ritalin[®] (<i>methylphenidate HCl</i>) Ritalin LA[®] (<i>methylphenidate HCl</i>) Ritalin SR[®] (<i>methylphenidate HCl</i>) Vyvanse[™] (<i>lisdexamfetamine dimesylate</i>)**</p> <p>**Not subject to DAW-1 override.</p>

Drug Class	Preferred Drugs	Non-preferred Drugs
<p>Atypical Antipsychotic Drugs (*Not subject to TIP. See pg. M.1.)</p>	<p>Generic: clozapine tablet</p> <p>Brand: Abilify[®] (<i>aripiprazole</i>) tablet/solution/Discmelt[®] Fazaclo[®] (<i>clozapine</i>) disintegrating tablet Geodon[®] (<i>ziprasidone HCl</i>) capsule Geodon[®] (<i>ziprasidone mesylate</i>) IM injection* Risperdal[®] (<i>risperidone</i>) tablet/M-tab[®] Risperdal Consta[®] (<i>risperidone</i>) injection* Seroquel[®] (<i>quetiapine</i>) tablet Zyprexa[®] (<i>olanzapine</i>) tablet/Zydis[®] Zyprexa[®] (<i>olanzapine</i>) IM injection* Zyprexa Zydis[®] (<i>olanzapine</i>) tablet</p> <p>*EPA required</p>	<p>Generic:</p> <p>Brand: Abilify[®] (<i>aripiprazole</i>) IM injection** Clozaril[®] (<i>clozapine</i>) tablet Invega[™] (<i>paliperidone</i>) tablet** Seroquel[®] XR (<i>quetiapine</i>) tablet**</p> <p>** Not subject to DAW-1 override.</p>

Drug Class	Preferred Drugs	Non-preferred Drugs
Beta Blockers	<p>Generic: atenolol carvedilol* metoprolol succinate* metoprolol tartrate nadolol propranolol timolol</p> <p>Brand: Coreg[®] (<i>carvedilol</i>)* Toprol XL (<i>metoprolol succinate</i>)*</p> <p>*EPA required</p>	<p>Generic: acebutolol betaxolol bisoprolol labetalol pindolol propranolol ER</p> <p>Brand: Blocadren[®] (<i>timolol</i>) Bystolic[®] (<i>nebivolol</i>)** Cartrol[®] (<i>carteolol</i>) Coreg CR[®] (<i>carvedilol CR</i>)** Corgard[®] (<i>nadolol</i>) Inderal[®] /LA (<i>propranolol</i>) InnoPran XL[®] (<i>propranolol</i>) Kerlone[®] (<i>betaxolol</i>) Levatol[®] (<i>penbutolol</i>) Lopressor[®] (<i>metoprolol tartrate</i>) Sectral[®] (<i>acebutolol</i>) Tenormin[®] (<i>atenolol</i>) Trandate[®] (<i>labetalol</i>) Zebeta[®] (<i>bisoprolol</i>)</p> <p>**Not subject to TIP or DAW-1 override.</p>

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Drug Class	Preferred Drugs	Non-preferred Drugs
<p>Calcium Channel Blockers</p>	<p>Generic: amlodipine diltiazem /XR felodipine ER nifedipine ER verapamil /XR</p>	<p>Generic: isradipine nicardipine nifedipine</p> <p>Brand: Adalat[®] /CC (<i>nifedipine</i>) Calan[®] /SR (<i>verapamil</i>) Cardene[®] SR (<i>nicardipine</i>) Cardizem[®] /CD/LA (<i>diltiazem</i>) Cartia XT[®] (<i>diltiazem</i>) Dilacor[®] XR (<i>diltiazem</i>) Diltia XT[®] (<i>diltiazem</i>) DynaCirc[®] /CR (<i>isradipine</i>) Isoptin[®] /SR (<i>verapamil</i>) Norvasc[®] (<i>amlodipine</i>) Plendil[®] (<i>felodipine</i>) Procardia[®] /XL (<i>nifedipine</i>) Sular[®] (<i>nisoldipine</i>) Tazia XT[®] (<i>diltiazem</i>) Tiazac[®] (<i>diltiazem</i>) Verelan[®] /PM (<i>verapamil</i>)</p>
<p>Drugs to treat Alzheimer's Disease</p> <p>(*Not subject to TIP. See pg. M.1.)</p>	<p>Brand: Aricept[®] /ODT(<i>donepezil</i>) Exelon[®] (<i>rivastigmine</i>) Razadyne[®] /ER(<i>galantamine</i>) Namenda[™] (<i>memantine</i>)</p>	<p>Brand: Cognex[®] (<i>tacrine</i>) Exelon[®] (<i>rivastigmine</i>) patch**</p> <p>**Not subject to DAW-1 override.</p>

Drug Class	Preferred Drugs	Non-preferred Drugs
<p>Estrogens</p>	<p>Generic: estradiol tablets</p> <p>Brand: Menest[®] (<i>esterified estrogens</i>) Premarin[®] cream (<i>conjugated equine estrogen vaginal cream</i>)</p>	<p>Generic: estradiol transdermal patch estropipate</p> <p>Brand: Alora[®] (<i>estradiol</i>) transdermal Cenestin[®] (<i>synthetic conjugated estrogens</i>) Climara[®] (<i>estradiol</i>) transdermal Divigel[®] (<i>estradiol</i>) gel** Elestrin[™] (<i>estradiol</i>) gel** Enjuvia[®] (<i>synthetic conjugated estrogens</i>) tablet** Esclim[®] (<i>estradiol</i>) transdermal Estrace[®] (<i>estradiol</i>) oral/vaginal Estraderm[®] (<i>estradiol</i>) transdermal Estring[®] (<i>estradiol</i>) vaginal ring Estrogel[®] (<i>estradiol</i>) gel Evamist[®] (<i>estradiol</i>) spray** Femring[®] (<i>estradiol</i>) vaginal ring Femtrace[®] (<i>estradiol</i>) tablet** Menostar[®] (<i>estradiol</i>) patch Ogen[®] (<i>estropipate</i>) Premarin[®] (<i>conjugated equine estrogens</i>) oral Vagifem[®] (<i>estradiol</i>) vaginal tablets Vivelle[®] /DOT (<i>estradiol</i>) transdermal</p> <p>**Not subject to TIP or DAW-1 override.</p>
<p>Hepatitis C drugs (pegylated interferons)</p> <p>(*Not subject to TIP. See page M.1.)</p>	<p>Pegasys[®] (<i>peginterferon alfa-2a</i>)</p>	<p>PegIntron[®] (<i>peginterferon alfa-2b</i>)</p>

Drug Class	Preferred Drugs	Non-preferred Drugs
<p>Histamine-2 Receptor Antagonist (H2RA) (*Not subject to TIP. See pg. M.1.)</p>	<p>Generic: ranitidine</p>	<p>Generic: cimetidine famotidine nizatidine</p> <p>Brand: Axid[®] (<i>nizatidine</i>) Pepcid[®] (<i>famotidine</i>) Tagamet[®] (<i>cimetidine</i>) Zantac[®] (<i>ranitidine</i>)</p>
<p>Inhaled Beta-Agonists</p>	<p>Generic short-acting nebulized: albuterol inhalation solution metaproterenol inhalation solution</p> <p>Brand short-acting nebulized: Xopenex[®] (<i>levalbuterol</i>) inhalation solution</p> <p>Generic short-acting inhaled: albuterol inhaler</p> <p>Brand short-acting inhaled: Alupent[®] (<i>metaproterenol</i>) inhaler Ventolin[®] HFA (<i>albuterol</i>) inhaler Xopenex[®] HFA (<i>levalbuterol</i>) inhaler</p> <p>Brand long-acting : Foradil[®] Aerolizer[®] (<i>formoterol</i>) Serevent[®] Diskus[®] (<i>salmeterol</i>)</p>	<p>Brand short-acting nebulized: Accuneb[®] (<i>albuterol</i>) inhalation solution Proventil[®] (<i>albuterol</i>) inhalation solution</p> <p>Brand short-acting inhaled: Maxair Autohaler[™] (<i>pirbuterol</i>) inhaler ProAir[™] HFA (<i>albuterol</i>) inhaler Proventil[®] (<i>albuterol</i>) inhaler Proventil[®] HFA (<i>albuterol</i>) inhaler</p> <p>Brand long-acting (nebulized): Brovana[™] (<i>arformoterol</i>)** Perforomist[™] (<i>formoterol</i>)**</p> <p>**Not subject to TIP or DAW-1 override.</p>

Drug Class	Preferred Drugs	Non-preferred Drugs
<p>Inhaled Corticosteroids</p>	<p>Generic:</p> <p>Brand: Aerobid/Aerobid-M[®] (<i>flunisolide MDI</i>) Asmanex Twisthaler[®] (<i>mometasone furoate DPI</i>) Azmacort[®] (<i>triamcinolone acetonide MDI</i>) Flovent[®] /HFA/Rotadisk[®] (<i>fluticasone propionate MDI/HFA/DPI</i>) Qvar[®] (<i>beclomethasone dipropionate MDI</i>) Pulmicort Respules[®] (<i>budesonide inhalation suspension</i>) Pulmicort Turbuhaler[®]/Flexhaler[®] (<i>budesonide DPI</i>)</p>	<p>Generic:</p> <p>Brand:</p>
<p>Insulin-release stimulant type oral hypoglycemics</p>	<p>Generic immediate release: glipizide glyburide glyburide micronized</p>	<p>Generic: chlorpropamide glimepiride glipizide XR tolazamide tolbutamide</p> <p>Brand: Amaryl[®] (<i>glimepiride</i>) Diabinese[®] (<i>chlorpropamide</i>) DiaBeta[®] (<i>glyburide</i>) Glucotrol[®] /XR (<i>glipizide</i>) Glynase[®] (<i>glyburide micronized</i>) Micronase[®] (<i>glyburide</i>) Prandin[®] (<i>repaglinide</i>) Starlix[®] (<i>nateglinide</i>) Tolinase[®] (<i>tolazamide</i>)</p>

Drug Class	Preferred Drugs	Non-preferred Drugs
<p>Long-Acting Opioids (oral tabs/caps/liquids) (*Not subject to TIP. See pg. M.1.)</p>	<p>Generic: methadone morphine sulfate /SA/SR</p>	<p>Generic: fentanyl transdermal levorphanol oxycodone ER Oramorph[®] SR</p> <p>Brand: Avinza[®] (<i>morphine sulfate ER</i>) Dolophine[®] (<i>methadone</i>) Duragesic[®] (<i>fentanyl</i>) transdermal Kadian[®] (<i>morphine sulfate SR</i>) Kadian[®] 200mg (<i>morphine sulfate SR</i>)** Levo-Dromoran[®] (<i>levorphanol</i>) MS Contin[®] (<i>morphine sulfate SA</i>) Opana ER[®] (<i>oxymorphone HCl</i>) OxyContin[®] (<i>oxycodone ER</i>)</p> <p>**Not subject to DAW-1 or EPA overrides due to safety concerns (to prevent potential error/overdose).</p>
<p>Macrolides (*Not subject to TIP. See pg. M.1.)</p>	<p>Generic: azithromycin – all forms clarithromycin immediate release tablet/suspension erythromycin EC erythromycin ethylsuccinate erythromycin filmtab erythromycin stearate</p> <p>Brand: Ery-Tab 333mg[®] (<i>erythromycin base EC</i>)</p>	<p>Generic:</p> <p>Brand: Biaxin[®] (<i>clarithromycin</i>) tablet/suspension Biaxin XL[®] (<i>clarithromycin</i>) EES[®] (<i>erythromycin ethylsuccinate</i>) granules/suspension/filmtab Eryc[®] (<i>erythromycin base EC</i>) Eryped[®] (<i>erythromycin ethylsuccinate</i>) drops/granules Ery-Tab[®] (<i>erythromycin base EC</i>) Erythrocin[®] (<i>erythromycin stearate</i>) filmtab PCE Dispertab[®] (<i>erythromycin base</i>) Zithromax[®] (<i>azithromycin</i>) capsule/powder packet/suspension/tablet Zmax[®] (<i>azithromycin SR</i>)</p>

Drug Class	Preferred Drugs	Non-preferred Drugs
Nasal Corticosteroids	<p>Generic:</p> <p>Brand: Nasacort AQ[®] (<i>triamcinolone acetonide</i>) Nasonex[®] (<i>mometasone furoate</i>)*</p> <p>*EPA required</p>	<p>Generic: flunisolide fluticasone propionate</p> <p>Brand: Beconase AQ[®] (<i>beclomethasone dipropionate</i>) Flonase[®] (<i>fluticasone propionate</i>) Nasacort[®] (<i>triamcinolone acetonide</i>) Nasarel[®] (<i>flunisolide</i>) Rhinocort Aqua[®] (<i>budesonide</i>) Veramyst[™] (<i>fluticasone</i>)**</p> <p>**Not subject to DAW-1 override or TIP.</p>
Newer Antihistamines (formerly Non-Sedating Antihistamines)	<p>Generic: loratadine OTC</p> <p>Brand: Clarinet[®] (<i>desloratadine</i>) syrup*</p> <p>*EPA required</p>	<p>Generic: cetirizine fexofenadine</p> <p>Brand: Allegra /ODT[®] (<i>fexofenadine</i>) Clarinet[®] (<i>desloratadine</i>) Claritin[®] (<i>loratadine</i>) Zyrtec[®] (<i>cetirizine</i>) Xyzal[®] (<i>levocetirizine</i>)**</p> <p>**Not subject to TIP or DAW-1 override.</p>
Newer Sedative/Hypnotics	<p>Generic: zolpidem*</p> <p>*EPA required</p>	<p>Generic: zaleplon*</p> <p>Brand: Ambien /CR[®] (<i>zolpidem tartrate</i>)* Lunesta[®] (<i>eszopiclone</i>)* Sonata[®] (<i>zaleplon</i>)*</p> <p>*EPA required</p>

Drug Class	Preferred Drugs	Non-preferred Drugs
Nonsteroidal anti-inflammatory drugs (NSAID) including Cyclo-oxygenase - 2 (Cox-II) Inhibitors	<p>Generic: diclofenac potassium* diclofenac sodium /SR/ER/EC* diflunisal* etodolac /XL* fenoprofen* flurbiprofen* ibuprofen* indomethacin /SA* ketoprofen /SA* ketorolac* meclofenamate* meloxicam* nabumetone* naproxen /EC* naproxen sodium /ER* oxaprozin* piroxicam* salsalate* sulindac* tolmetin*</p> <p>* EPA required</p>	<p>Generic:</p> <p>Brand: Amigesic[®] (<i>salsalate</i>)* Anaprox[®] /DS (<i>naproxen sodium</i>)* Ansaid[®] (<i>flurbiprofen</i>)* Cataflam[®] (<i>diclofenac potassium</i>)* Celebrex[®] (<i>celecoxib</i>)* Clinoril[®] (<i>sulindac</i>)* Dolobid[®] (<i>diflunisal</i>) Daypro[®] (<i>oxaprozin</i>)* Feldene[®] (<i>piroxicam</i>)* Flector[®] (<i>diclofenac epolamine</i>)** Indocin[®] /SR (<i>indomethacin</i>)* Lodine[®] /XL (<i>etodolac</i>)* Mobic[®] (<i>meloxicam</i>)* Motrin[®] (<i>ibuprofen</i>)* Nalfon[®] (<i>fenoprofen</i>)* Naprelan[®] (<i>naproxen sodium ER</i>)* Naprosyn[®] EC/DS (<i>naproxen</i>)* Oruvail[®] (<i>ketoprofen SA</i>)* Ponstel[®] (<i>mefenamic acid</i>) Salflex[®] (<i>salsalate</i>)* Voltaren[®] /XR (<i>diclofenac sodium</i>)* Voltaren[®] (<i>diclofenac sodium</i>) gel**</p> <p>* EPA required ** Not subject to TIP or DAW-1 override.</p>

Drug Class	Preferred Drugs	Non-preferred Drugs
<p>Overactive Bladder/Urinary Incontinence</p>	<p>Generic short acting: oxybutynin chloride tablets/syrup</p> <p>Brand long acting: Vesicare[®] (<i>solifenacin succinate</i>)</p>	<p>Generic short acting: flavoxate HCl</p> <p>Brand short acting: Detrol[®] (<i>tolterodine tartrate</i>) Ditropan[®] (<i>oxybutynin chloride</i>) Sanctura[®] (<i>trospium chloride</i>) Urispas[®] (<i>flavoxate HCl</i>)</p> <p>Brand long acting: Detrol LA[®] (<i>tolterodine tartrate</i>) Ditropan XL[®] (<i>oxybutynin chloride</i>) Enablex[®] (<i>darifenacin hydrobromide</i>) Oxytrol[®] (<i>oxybutynin chloride</i>) Sanctura XR[®] (<i>trospium chloride</i>)**</p> <p>**Not subject to DAW-1 override or TIP.</p>
<p>Proton Pump Inhibitors</p>	<p>Generic: omeprazole Rx</p> <p>Brand: Prilosec OTC[®] (<i>omeprazole</i>) tablets Prevacid[®] (<i>lansoprazole</i>) capsules Prevacid[®] SoluTab[™] (<i>lansoprazole</i>)* Prevacid[®] (<i>lansoprazole</i>) suspension*</p> <p>*EPA required</p>	<p>Generic: pantoprazole</p> <p>Brand: Aciphex[®] (<i>rabeprazole</i>) Nexium[®] (<i>esomeprazole</i>) Prilosec[®] Rx (<i>omeprazole</i>) Protonix[®] (<i>pantoprazole</i>) Zegerid[®] (<i>omeprazole</i>)</p>

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Drug Class	Preferred Drugs	Non-preferred Drugs
<p>Second Generation Antidepressants (*Not subject to TIP. See pg. M.1.)</p>	<p>Generic: bupropion /SR* citalopram fluoxetine HCl mirtazapine/soltab paroxetine HCl venlafaxine HCl</p> <p>Brand: Effexor® /XR (venlafaxine HCl)</p> <p>*EPA required</p>	<p>Generic: fluvoxamine nefazodone paroxetine CR sertraline</p> <p>Brand: Celexa® (citalopram) Cymbalta® (duloxetine HCl) Lexapro® (escitalopram) Luvox CR (fluvoxamine)** Paxil® /CR (paroxetine HCl) Pexeva® (paroxetine mesylate) Pristiq® (desvenlafaxine)** Prozac® /Prozac Weekly® (fluoxetine HCl) Remeron® /SolTab (mirtazapine) Wellbutrin® /SR/XL (bupropion/SR/XL) Zoloft® (sertraline)</p>
<p>Skeletal Muscle Relaxants</p>	<p>Generic: baclofen cyclobenzaprine methocarbamol tizanidine</p>	<p>Generic: carisoprodol chlorzoxazone dantrolene orphenadrine</p> <p>Brand: Amrix® (cyclobenzaprine)** Dantrium® (dantrolene) Fexmid® (cyclobenzaprine) Flexeril® (cyclobenzaprine) Norflex® (orphenadrine) Parafon Forte® (chlorzoxazone) Robaxin® (methocarbamol) Skelaxin® (metaxalone) Soma® (carisoprodol) Zanaflex® (tizanidine)</p> <p>**Not subject to TIP or DAW-1 override.</p>

Drug Class	Preferred Drugs	Non-preferred Drugs
Statin-type cholesterol-lowering agents	<p>Generic: lovastatin pravastatin*</p> <p>Brand: Crestor[®] (<i>rosuvastatin</i>)</p> <p>*EPA required</p>	<p>Generic: simvastatin</p> <p>Brand: Altoprev[®] (<i>lovastatin</i>) Lescol[®] /XL (<i>fluvastatin</i>) Lipitor[®] (<i>atorvastatin</i>) Mevacor[®] (<i>lovastatin</i>) Pravachol[®] (<i>pravastatin</i>)* Zocor[®] (<i>simvastatin</i>)</p>
Targeted Immune Modulators (*Not subject to TIP. See pg. M.1.)	<p>Generic:</p> <p>Brand: Enbrel[®] (<i>etanercept</i>)* Humira[®] (<i>adalimumab</i>)* Remicade[®] (<i>infliximab</i>)*</p> <p>*EPA required</p>	<p>Generic:</p> <p>Brand: Amevive[®] (<i>alefacept</i>)* Kineret[®] (<i>anakinra</i>)* Orencia[®] (<i>abatacept</i>)* Raptiva[®] (<i>efalizumab</i>)* Rituxan[®] (<i>rituximab</i>)*</p> <p>*EPA required</p>
Thiazolidinediones (TZDs)	<p>Generic:</p> <p>Brand: Avandia[®] tablet (<i>rosiglitazone maleate</i>)</p>	<p>Generic:</p> <p>Brand: Actos[®] tablet (<i>pioglitazone HCl</i>)</p>
Triptans	<p>Generic:</p> <p>Brand: Imitrex[®] (<i>sumatriptan</i>) tablet/nasal spray/injection Relpax[®] (<i>eletriptan</i>) Zomig[®] (<i>zolmitriptan</i>) tablet/nasal spray/ZMT[®]</p>	<p>Generic:</p> <p>Brand: Amerge[®] (<i>naratriptan</i>) Axert[®] (<i>almotriptan</i>) Frova[®] (<i>frovatriptan</i>) Maxalt[®] (<i>rizatriptan</i>) tablet/MLT[®]</p>