

Alabama Medicaid Agency
Pharmacy and Therapeutics Committee
Date of Meeting: Wednesday, May 8, 2024
Preferred Drug List Final

AHFS Drug Class Re-reviewed: HYPOTENSIVE AGENTS

Subclasses Reviewed

Central Alpha-Agonists
Direct Vasodilators
Peripheral Adrenergic Inhibitors
Hypotensive Agents, Miscellaneous

AHFS Drug Class Re-reviewed: ALPHA-ADRENERGIC BLOCKING AGENTS

AHFS Drug Class Re-reviewed: BETA-ADRENERGIC BLOCKING AGENTS

AHFS Drug Class Re-reviewed: CALCIUM-CHANNEL BLOCKING AGENTS

Subclasses Reviewed

Dihydropyridines
Calcium-Channel Blocking Agents, Miscellaneous

AHFS Drug Class Re-reviewed: RENIN-ANGIOTENSIN-ALDOSTERONE SYSTEM INHIBITORS

Subclasses Reviewed

Angiotensin-Converting Enzyme Inhibitors
Angiotensin II Receptor Antagonists
Mineralocorticoid (Aldosterone) Receptor Antagonists
Renin Inhibitors

AHFS Drug Class Re-reviewed: DIURETICS

Subclasses Reviewed

Loop Diuretics
Potassium-Sparing Diuretics
Thiazide Diuretics
Thiazide-like Diuretics
Vasopressin Antagonists
Diuretics, Miscellaneous

AHFS Drug Class Re-reviewed: ALZHEIMER'S AGENTS

AHFS Drug Class Reviewed: SKIN AND MUCOUS MEMBRANE IMMUNOMODULATORS

*Denotes generic available in at least one dosage form or strength

Drug name denotes all dosage forms and strengths unless noted

^cDenotes agent is preferred with clinical criteria in place

Central Alpha-Agonists

Preferred Generic	Preferred Brand	Non-Preferred Brand or PA Generic
All covered products	None	None

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Direct Vasodilators

Preferred Generic	Preferred Brand	Non-Preferred Brand or PA Generic
All covered products	None	BIDIL*

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Peripheral Adrenergic Inhibitors

Preferred Generic	Preferred Brand	Non-Preferred Brand or PA Generic
All covered products	None	None

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Hypotensive Agents, Miscellaneous

Preferred Generic	Preferred Brand	Non-Preferred Brand or PA Generic
All covered products	None	VECAMYL

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Alpha-Adrenergic Blocking Agents

Preferred Generic	Preferred Brand	Non-Preferred Brand or PA Generic
All covered products	None	CARDURA* CARDURA XL MINIPRESS*

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Beta-Adrenergic Blocking Agents

Preferred Generic	Preferred Brand	Non-Preferred Brand or PA Generic
All covered products	HEMANGEOL ^{CC}	BETAPACE* BETAPACE AF* BYSTOLIC* COREG* COREG CR* INDERAL LA* INDERAL XL INNOPRAN XL KAPSPARGO SPRINKLE LEVATOL LOPRESSOR* SOTYLIZE TENORETIC* TENORMIN* TOPROL XL* ZIAC*

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Dihydropyridines

Preferred Generic	Preferred Brand	Non-Preferred Brand or PA Generic
All covered products	None	ADALAT CC* AZOR* CLEVIPREX EXFORGE* EXFORGE HCT* KATERZIA LOTREL* NORLIQVA NORVASC* NYMALIZE PROCARDIA XL* SULAR*

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Calcium-Channel Blocking Agents, Miscellaneous

Preferred Generic	Preferred Brand	Non-Preferred Brand or PA Generic
All covered products	None	CALAN SR* CARDIZEM* CARDIZEM CD* CARDIZEM LA* MATZIM LA* TIAZAC* VERELAN* VERELAN PM*

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Angiotensin-Converting Enzyme Inhibitors

Preferred Generic	Preferred Brand	Non-Preferred Brand or PA Generic
All covered products	None	ACCUPRIL* ACCURETIC* ALTACE* EPANED* LOTENSIN* LOTENSIN HCT* PRINIVIL* PRINZIDE* QBRELIS VASERETIC* VASOTEC* ZESTORETIC* ZESTRIL*

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Angiotensin II Receptor Antagonists

Preferred Generic	Preferred Brand	Non-Preferred Brand or PA Generic
All covered products	None	ATACAND* ATACAND HCT* AVALIDE* AVAPRO* BENICAR* BENICAR HCT* COZAAR* DIOVAN* DIOVAN HCT* EDARBI EDARBYCLOR HYZAAR* MICARDIS* MICARDIS HCT* TRIBENZOR*

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Mineralocorticoid (Aldosterone) Receptor Antagonists

Preferred Generic	Preferred Brand	Non-Preferred Brand or PA Generic
All covered products	None	ALDACTAZIDE* ALDACTONE* CAROSPIR INSPRA* KERENDIA

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Renin Inhibitors

Preferred Generic	Preferred Brand	Non-Preferred Brand or PA Generic
All covered products	None	TEKTURNA* TEKTURNA HCT

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Loop Diuretics

Preferred Generic	Preferred Brand	Non-Preferred Brand or PA Generic
All covered products	None	EDECIN* FUROSCIX LASIX*

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Potassium-Sparing Diuretics

Preferred Generic	Preferred Brand	Non-Preferred Brand or PA Generic
All covered products	None	None

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Thiazide Diuretics

Preferred Generic	Preferred Brand	Non-Preferred Brand or PA Generic
All covered products	None	DIURIL

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Thiazide-like Diuretics

Preferred Generic	Preferred Brand	Non-Preferred Brand or PA Generic
All covered products	None	THALITONE

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Vasopressin Antagonists

Preferred Generic	Preferred Brand	Non-Preferred Brand or PA Generic
All covered products	None	JYNARQUE SAMSCA*

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Diuretics, Miscellaneous

Preferred Generic	Preferred Brand	Non-Preferred Brand or PA Generic
All covered products	None	None

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Alzheimer's Agents

Preferred Generic	Preferred Brand	Non-Preferred Brand or PA Generic
All covered products	ARICEPT*	ADLARITY ADUHELM EXELON* LEQEMBI NAMENDA* NAMENDA XR* NAMZARIC

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Skin and Mucous Membrane Immunomodulators

Preferred Generic	Preferred Brand	Non-Preferred Brand or PA Generic
All covered products	ADBRY ^{CC} DUPIXENT ^{CC}	BIMZELX ILUMYA SILIQ SKYRIZI SOTYKTU SPEVIGO STELARA TALTZ TREMIFYA

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