

Table 121-0030-1 Oregon Fee-for-Service Enforceable Physical Health Preferred Drug List  
Effective: January 1, 2025

System	Class	Preferred
Allergy/Cold	Anaphylaxis Rescue	epinephrine epinephrine (AUVI-Q™) AUTO INJECT 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 * guaifenesin ‡ 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 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	Hereditary Angioedema	C1 esterase inhibitor * C1 esterase inhibitor * KIT VIAL
Allergy/Cold	Nasal Allergy Inhalers	fluticasone propionate ‡ SPRAY SUSP
Analgesics	CGRP Inhibitors	erenumab-aooe * fremanezumab-vfrm (AJOVY AUTOINJECTOR™) * fremanezumab-vfrm (AJOVY SYRINGE™) * ubrogepant (UBRELVY™) * AUTO INJECT AUTO INJECT SYRINGE TABLET
Analgesics	Gout	allopurinol colchicine ** probenecid/colchicine TABLET *** TABLET TABLET
Analgesics	Muscle Relaxants, Oral	baclofen cyclobenzaprine HCl methocarbamol tizanidine HCl TABLET *** TABLET *** TABLET *** TABLET

\* Drug coverage subject to meeting clinical prior authorization criteria

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Analgesics	Non-Steroidal Anti-Inflammatory Drugs	celecoxib	CAPSULE
		diclofenac potassium	TABLET ***
		diclofenac sodium	TABLET DR
		etodolac	TABLET
		ibuprofen	CAPSULE
		ibuprofen	DROPS SUSP
		ibuprofen	ORAL SUSP
		ibuprofen	TAB CHEW
		ibuprofen	TABLET
		indomethacin	CAPSULE
		ketoprofen	CAPSULE
		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 *	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	Pain Medications, Topical	capsaicin	CREAM (G)
		diclofenac sodium	GEL (GRAM) ***
		lidocaine HCl	CREAM (G)
		lidocaine HCl	JEL/PF APP
		lidocaine HCl	SOLUTION
		lidocaine/prilocaine	CREAM (G)

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Analgesics	Serotonin Agonists, Nasal	sumatriptan ** zolmitriptan ** SPRAY SPRAY
Analgesics	Serotonin Agonists, Oral	naratriptan HCl ** sumatriptan succinate ** zolmitriptan ** zolmitriptan ** TABLET TABLET TAB RAPDIS TABLET
Analgesics	Serotonin Agonists, Subcutaneous	sumatriptan succinate ** sumatriptan succinate ** sumatriptan succinate ** CARTRIDGE PEN INJCTR 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	Clostridioides difficile Drugs	metronidazole vancomycin HCl vancomycin HCl TABLET CAPSULE VIAL ***
Antibiotics	Fluoroquinolones, Oral	ciprofloxacin ciprofloxacin HCl levofloxacin levofloxacin moxifloxacin HCl SUS MC REC TABLET SOLUTION TABLET TABLET
Antibiotics	Macrolides, Oral	azithromycin azithromycin clarithromycin SUSP RECON TABLET TABLET
Antibiotics	Oxazolidinones, Oral	linezolid linezolid SUSP RECON TABLET

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Antibiotics	Tetracyclines, Oral	doxycycline hyclate ** doxycycline hyclate ** doxycycline monohydrate ** doxycycline monohydrate ** tetracycline HCl **
Antifungal	Antifungals, Oral	clotrimazole fluconazole fluconazole nystatin nystatin
Antifungal	Antifungals, Vaginal	clotrimazole clotrimazole miconazole nitrate miconazole nitrate miconazole nitrate miconazole nitrate terconazole tioconazole
Antivirals	Coronavirus Antivirals	nirmatrelvir/ritonavir remdesivir
Antivirals	Hepatitis B	lamivudine * tenofovir disoproxil fumarate *
Antivirals	Hepatitis C, Direct-Acting Antivirals	glecaprevir/pibrentasvir (MAVYRET™) ** sofosbuvir/velpatasvir (SOFOSBUVIR-VELPATASVIR™) **
Antivirals	Hepatitis C, Other Agents	peginterferon alfa-2a peginterferon alfa-2a ribavirin ribavirin
Antivirals	Herpes Simplex	acyclovir acyclovir acyclovir valacyclovir HCl

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System	Class	Preferred	
Antivirals	HIV	abacavir sulfate	SOLUTION
		abacavir sulfate	TABLET
		abacavir sulfate/lamivudine	TABLET
		abacavir/dolutegravir/lamivudi	TAB SUSP
		abacavir/dolutegravir/lamivudi (TRIUMEQ™)	TABLET
		atazanavir sulfate	CAPSULE
		atazanavir sulfate	POWD PACK
		atazanavir sulfate/cobicistat (EVOTAZ™)	TABLET
		bictegrav/emtricit/tenofov ala (BIKTARVY™)	TABLET
		cabotegravir	SUSER VIAL
		cabotegravir (APRETUDE™)	SUSER VIAL
		cabotegravir sodium	TABLET
		cabotegravir/rilpivirine (CABENUVA™)	SUSER VIAL
		cobicistat	TABLET
		darunavir	ORAL SUSP
		darunavir	TABLET
		darunavir/cob/emtri/tenof alaf (SYMTUZA™)	TABLET
		darunavir/cobicistat (PREZCOBIX™)	TABLET
		dolutegravir sodium	TAB SUSP
		dolutegravir sodium	TABLET
		dolutegravir sodium/lamivudine (DOVATO™)	TABLET
		dolutegravir/rilpivirine (JULUCA™)	TABLET
		doravirine (PIFELTRO™)	TABLET
		doravirine/lamivu/tenofov diso (DELSTRIGO™)	TABLET
		efavirenz	CAPSULE
		efavirenz	TABLET
		efavirenz/emtricit/tenofovr df	TABLET
		efavirenz/lamivu/tenofov disop	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
		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	TABLET		
fostemsavir tromethamine	TAB ER 12H		
ibalizumab-uiyk	VIAL		
lamivudine	SOLUTION		
lamivudine	TABLET		
lamivudine/tenofovir disop fum (CIMDUO™)	TABLET		
lamivudine/zidovudine	TABLET		
lenacapavir sodium	TABLET		
lenacapavir sodium	VIAL		
lopinavir/ritonavir	SOLUTION		

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System	Class	Preferred	
Antivirals	HIV	lopinavir/ritonavir	TABLET
		maraviroc	SOLUTION
		maraviroc	TABLET
		nevirapine	ORAL SUSP
		nevirapine	TAB ER 24H
		nevirapine	TABLET
		raltegravir potassium	POWD PACK
		raltegravir potassium	TAB CHEW
		raltegravir potassium	TABLET
		rilpivirine	SUSER VIAL
		rilpivirine HCl	TABLET
		ritonavir	POWD PACK
		ritonavir	TABLET
		tipranavir	CAPSULE
		zidovudine	CAPSULE
zidovudine	SYRUP		
zidovudine	TABLET		
zidovudine	VIAL		
Antivirals	Influenza	oseltamivir phosphate **	CAPSULE
		oseltamivir phosphate **	SUSP RECON
Cardiovascular	Antianginals	isosorbide dinitrate	TABLET
		isosorbide mononitrate	TABLET
		nitroglycerin	PATCH TD24
		nitroglycerin	TAB SUBL
Cardiovascular	Anticoagulants, Oral and SQ	apixaban (ELIQUIS ™)	TAB DS PK
		apixaban (ELIQUIS ™)	TABLET
		dabigatran etexilate mesylate	CAPSULE
		edoxaban tosylate	TABLET
		enoxaparin sodium	SYRINGE
		enoxaparin sodium	VIAL
		rivaroxaban (XARELTO ™)	TAB DS PK
		rivaroxaban (XARELTO ™)	TABLET
warfarin sodium	TABLET		
Cardiovascular	Beta-Blockers, Oral	acebutolol HCl	CAPSULE
		atenolol	TABLET
		carvedilol	TABLET
		labetalol HCl	TABLET
		metoprolol succinate	TAB ER 24H
		metoprolol tartrate	TABLET
		nadolol	TABLET
		propranolol HCl	CAP SA 24H
		propranolol HCl	SOLUTION
propranolol HCl	TABLET		

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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/hcthiazid olmesartan/hydrochlorothiazide telmisartan/hydrochlorothiazid TABLET TABLET TABLET TABLET TABLET TABLET TABLET TABLET
Cardiovascular	Diuretics, Oral	amiloride HCl amiloride/hydrochlorothiazide bumetanide chlorthalidone furosemide furosemide hydrochlorothiazide hydrochlorothiazide hydrochlorothiazide indapamide spironolact/hydrochlorothiazid spironolactone torsemide triamterene triamterene/hydrochlorothiazid triamterene/hydrochlorothiazid TABLET TABLET TABLET TABLET SOLUTION *** TABLET CAPSULE SOLUTION TABLET TABLET TABLET TABLET TABLET CAPSULE CAPSULE TABLET

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Cardiovascular	Inhibitors of the Renin-Angiotensin-Aldosterone System (RAAS)	benazepril HCl TABLET candesartan cilexetil TABLET enalapril maleate TABLET fosinopril sodium TABLET irbesartan TABLET lisinopril TABLET losartan potassium TABLET olmesartan medoxomil TABLET quinapril HCl TABLET ramipril CAPSULE telmisartan TABLET valsartan TABLET
Cardiovascular	Other Dyslipidemia Drugs	cholestyramine (with sugar) POWD PACK cholestyramine (with sugar) POWDER cholestyramine/aspartame POWD PACK cholestyramine/aspartame POWDER evolocumab (REPATHA PUSHTRONEX™) * WEAR INJCT evolocumab (REPATHA SURECLICK™) * PEN INJCTR evolocumab (REPATHA SYRINGE™) * SYRINGE ezetimibe TABLET fenofibrate TABLET *** fenofibrate nanocrystallized TABLET fenofibrate, micronized CAPSULE fenofibric acid (choline) CAPSULE DR omega-3 acid ethyl esters * CAPSULE
Cardiovascular	Platelet Inhibitors	aspirin TAB CHEW aspirin TABLET aspirin TABLET DR aspirin/dipyridamole CPMP 12HR cilostazol TABLET clopidogrel bisulfate TABLET dipyridamole TABLET prasugrel HCl TABLET ticagrelor TABLET
Cardiovascular	Statins & Combos	atorvastatin calcium TABLET lovastatin TABLET pravastatin sodium TABLET rosuvastatin calcium TABLET simvastatin TABLET

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

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Dermatologicals	Antiparasitics, Topical	permethrin	COMBO. PKG
		permethrin	CREAM (G)
		permethrin	LIQUID
		piperonyl but/pyrethins/permet	KIT
		piperonyl butoxide/pyrethrins	GEL (GRAM)
		piperonyl butoxide/pyrethrins	KIT
		piperonyl butoxide/pyrethrins	LIQUID
		piperonyl butoxide/pyrethrins	SHAMPOO

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Dermatologicals	Moisturizers, Topical	ammonium lactate	CREAM (G)
		ammonium lactate	LOTION
		calamine/phenol liquid	LOTION
		calamine/zinc oxide	CREAM (G)
		calamine/zinc oxide	LOTION
		ceramides 1,3,6-II	LOTION
		cetyl alc/stearyl alc/pg/sls	CREAM (G)
		cetyl alcohol/stearyl alcohol	LOTION
		colloidal oatmeal	CREAM (G)
		colloidal oatmeal	CREAM(ML)
		colloidal oatmeal	LOTION
		dimethic/zinc ox/vits A,D/aloe	CREAM (G)
		dimethicone	CREAM (G)
		dimethicone/colloidal oatmeal	LOTION
		dimethicone/zinc oxide	CREAM (G)
		emollient combination no.116	LOTION
		emollient combination no.40	LOTION
		gly/benzyl alc/petrolat,wht	LOTION
		gly/dimeth/petrolat,wht/water	CREAM (G)
		glycerin/dimeth/surfactants	LOTION
		lactic acid/urea	LOTION
		lanolin	CREAM (G)
		lanolin	OINT. (G)
		lanolin/mineral oil	LOTION
		lecithin/glycerin/dimethicone	LOTION
		menthol/zinc oxide	OINT. (G)
		menthol/zinc/aloe/chamomil oil	OINT. (G)
		min oil/petrolatum/castor oil	LOTION
		mineral oil/i-prop myr/water	LOTION
		mineral oil/petrolatum,white	CREAM (G)
		petrolatum,white	CREAM (G)
		petrolatum,white	OINT. (G)
		petrolatum/vits A,C,E/aloe xt	OINT.(ML)
		vit A/vitamin D3/E/aloe v/zinc	OINT. (G)
		vit E acet/gly/dimeth/water	LOTION
		vitamin E	CREAM (G)
		vitamin E/vitamins A and D	CREAM (G)
		vitamins A and D	CREAM (G)
		vits A and D/white pet/lanolin	OINT. (G)
		zinc oxide	CREAM (G)
zinc oxide	OINT. (G)		
zinc oxide/cod liver oil	OINT. (G)		
zinc oxide/menthol/calamine	OINT. (G)		
zinc oxide/panthenol/vitamin E	CREAM (G)		

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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)
		betamethasone/propylene glyc	CREAM (G)
		clobetasol propionate	CREAM (G)
		clobetasol propionate	OINT. (G)
		clobetasol propionate	SOLUTION
		desonide	CREAM (G)
		desonide	OINT. (G)
		desoximetasone	CREAM (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)		
Dermatologicals	Topical Products for Inflammatory Skin Diseases	calcipotriene ‡	CREAM (G)
		calcipotriene/betamethasone ‡	OINT. (G)
		pimecrolimus ‡	CREAM (G)
		tacrolimus ‡	OINT. (G)
		tazarotene ‡	CREAM (G)
Endocrine	Androgens, Topical & Parenteral	testosterone *	GEL (GRAM)
		testosterone *	GEL MD PMP
		testosterone *	GEL PACKET
		testosterone cypionate *	VIAL
		testosterone enanthate *	VIAL
Endocrine	Bone Metabolism Drugs	alendronate sodium	TABLET
		ibandronate sodium	TABLET
		risedronate sodium	TABLET
Endocrine	Diabetes, DPP-4 Inhibitors	saxagliptin HCl *	TABLET
		sitagliptin phos/metformin HCl *	TABLET
		sitagliptin phosphate *	TABLET
Endocrine	Diabetes, GLP-1 Receptor Agonists and GIP Therapies	dulaglutide (TRULICITY™) *	PEN INJCTR
		exenatide *	PEN INJCTR
		liraglutide *	PEN INJCTR

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<b>System</b>	<b>Class</b>	<b>Preferred</b>
Endocrine	Diabetes, Glucagon	glucagon glucagon (BAQSIMI™) VIAL SPRAY
Endocrine	Diabetes, Insulins	HUMALOG™ - BRAND ONLY HUMALOG™ - BRAND ONLY HUMALOG KWIKPEN U-100™ - BRAND ONLY insulin lispro insulin lispro INSULIN LISPRO - GENERIC ONLY insulin lispro protamin/lispro insulin lispro protamin/lispro insulin NPH hum/reg insulin hm * insulin NPH hum/reg insulin hm * insulin NPH human isophane insulin regular, human insulin regular, human insulin zinc human recombinant LANTUS™ - BRAND ONLY LANTUS SOLOSTAR™ - BRAND ONLY CARTRIDGE VIAL INSULN PEN INS PEN HF INSULN PEN VIAL INSULN PEN VIAL INSULN PEN VIAL INSULN PEN VIAL VIAL VIAL INSULN PEN VIAL INSULN PEN
Endocrine	Diabetes, Miscellaneous Antidiabetic Agents	metformin HCl metformin HCl TAB ER 24H TABLET
Endocrine	Diabetes, SGLT-2 Inhibitors	canagliflozin dapagliflozin propanediol empagliflozin TABLET TABLET TABLET
Endocrine	Diabetes, Sulfonylureas	glimepiride glipizide glyburide TABLET *** TABLET *** TABLET
Endocrine	Diabetes, Thiazolidinediones	pioglitazone HCl TABLET
Endocrine	Estrogen Replacement, Oral	drospirenone/estradiol estradiol estrogen,con/m-progest acet estrogens, conjugated estrogens,conj, synthetic A estropipate TABLET TABLET TABLET TABLET TABLET TABLET
Endocrine	Estrogen Replacement, Topical	estradiol estradiol estradiol GEL MD PMP PATCH TDSW PATCH TDWK
Endocrine	Estrogen Replacement, Vaginal	estradiol estradiol estradiol estradiol acetate estrogens, conjugated CREAM/APPL TABLET VAG RING VAG RING CREAM/APPL

\* Drug coverage subject to meeting clinical prior authorization criteria

\*\* Drug coverage subject to quantity limits

\*\*\* Certain strengths may require Prior Authorization

‡ Age restrictions apply

Note: New drugs in classes already evaluated for the PDL shall be non-preferred until the new drug has been reviewed by the P&T (see OAR 410-121-0030).

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

Effective: January 1, 2025

System	Class	Preferred	
Endocrine	Glucocorticoids, Oral	cortisone acetate	TABLET
		dexamethasone	DROPS
		dexamethasone	ELIXIR
		dexamethasone	SOLUTION
		dexamethasone	TAB DS PK
		dexamethasone	TABLET
		hydrocortisone	TABLET
		methylprednisolone	TAB DS PK
		methylprednisolone	TABLET
		prednisolone	SOLUTION
		prednisone	ORAL CONC
		prednisone	SOLUTION
		prednisone	TAB DS PK
		prednisone	TABLET
prednisone	TABLET DR		
Endocrine	GnRH Agonists	leuprolide acetate *	KIT
Endocrine	Growth Hormones	somatropin (GENOTROPIN™) *	CARTRIDGE
		somatropin (GENOTROPIN™) *	SYRINGE
		somatropin (NORDITROPIN FLEXPRO™) *	PEN INJCTR
Endocrine	Progestational Agents	hydroxyprogesterone caproat/PF	AUTO INJCT
		medroxyprogesterone acetate	TABLET
		norethindrone acetate	TABLET
		progesterone, micronized	CAPSULE
Endocrine	Thyroid Hormone, Oral	levothyroxine sodium	TABLET
Endocrine	Vitamin D Analogs	calcitriol	CAPSULE
		calcitriol	SOLUTION
Gastrointestinal	Antacid, H. pylori	bismuth/metronid/tetracycline	CAPSULE
		lansoprazole/amoxiciln/clarith	COMBO. PKG
		omeprazole/amoxicill/rifabutin	CAP IR DR
Gastrointestinal	Antacid, H2 Antagonists	famotidine	TABLET
		famotidine/Ca carb/mag hydrox	TAB CHEW
		ranitidine HCl	SYRUP
		ranitidine HCl	TABLET
Gastrointestinal	Antacid, Proton Pump Inhibitors	esomeprazole magnesium **	CAPSULE DR
		lansoprazole **	CAPSULE DR
		omeprazole **	CAPSULE DR
		pantoprazole sodium **	TABLET DR
		rabeprazole sodium **	TABLET DR

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**Table 121-0030-1 Oregon Fee-for-Service Enforceable Physical Health Preferred Drug List  
Effective: January 1, 2025**

<b>System</b>	<b>Class</b>	<b>Preferred</b>
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	Bowel Preparation Agents	peg3350/sod sul/NaCl/KCl/asb/C peg3350/sod sulf,bicarb,Cl/KCl sodium chloride/NaHCO3/KCl/peg sodium phosphate,mono-dibasic sodium phosphate,mono-dibasic sodium, potassium,mag sulfates POWD PK SQ SOLN RECON SOLN RECON LIQUID SOLUTION SOLN RECON
Gastrointestinal	Hyoscyamine	hyoscyamine sulfate hyoscyamine sulfate ELIXIR TAB RAPDIS
Gastrointestinal	Inflammatory Bowel Disease	balsalazide disodium budesonide mesalamine mesalamine mesalamine olsalazine sodium sulfasalazine sulfasalazine CAPSULE CAPDR - ER CAP ER 24H SUPP.RECT TABLET DR CAPSULE TABLET TABLET DR

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Table 121-0030-1 Oregon Fee-for-Service Enforceable Physical Health Preferred Drug List  
Effective: January 1, 2025

System	Class	Preferred	
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
		fructooligosaccharides/polydex	LIQUID
		guar gum	PACKET
		guar gum	POWDER
		inulin	TAB CHEW
		lactulose	SOLUTION
		magnesium citrate	SOLUTION
		magnesium hydroxide	ORAL SUSP
		magnesium hydroxide	TAB CHEW ***
		magnesium sulfate	GRANULES
		methylcellulose	TABLET
		methylcellulose (with sugar)	POWDER ***
		polyethylene glycol 3350	POWDER
		psyllium husk	CAPSULE ***
		psyllium husk	POWDER
		psyllium husk (with sugar)	POWDER
		psyllium husk/aspartame	POWD PACK
		psyllium husk/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 extract	SYRUP
senna/psyllium seed	GRANULES		
sennosides	CAPSULE		
sennosides	SYRUP		
sennosides	TAB CHEW		
sennosides	TABLET		
sennosides/docusate sodium	TABLET		
soluble corn fiber	POWDER		
Gastrointestinal	Pancreatic Enzymes	lipase/protease/amylase	CAPSULE DR
		lipase/protease/amylase (ZENPEP™)	CAPSULE DR
Genito-Urinary	Benign Prostate Hypertrophy Drugs	doxazosin mesylate	TABLET
		finasteride	TABLET
		tamsulosin HCl	CAPSULE
		terazosin HCl	CAPSULE

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Table 121-0030-1 Oregon Fee-for-Service Enforceable Physical Health Preferred Drug List  
Effective: January 1, 2025

System	Class	Preferred
Genito-Urinary	Overactive Bladder Drugs	fesoterodine fumarate oxybutynin oxybutynin chloride oxybutynin chloride oxybutynin chloride solifenacin succinate TAB ER 24H PATCH TDSW SYRUP TAB ER 24 TABLET *** TABLET
Hematology-Oncology	Colony Stimulating Factors	filgrastim (NEUPOGEN™) filgrastim (NEUPOGEN™) sargramostim SYRINGE VIAL VIAL
Hematology-Oncology	Erythropoiesis Stimulating Agents	darbepoetin alfa in polysorbat (ARANESP™) darbepoetin alfa in polysorbat (ARANESP™) SYRINGE VIAL
Hematology-Oncology	Iron Chelators	deferoxamine mesylate VIAL
Hematology-Oncology	Sickle Cell Disease	hydroxyurea CAPSULE
Hematology-Oncology	Thrombocytopenia Drugs	eltrombopag olamine eltrombopag olamine romiplostim POWD PACK TABLET VIAL
Immunological	Immunoglobulins	immun glob G(IgG)/gly/IgA ov50 immun glob G(IgG)/pro/IgA 0-50 immun glob G(IgG)/pro/IgA 0-50 VIAL SYRINGE VIAL
Immunological	Immunosuppressants	azathioprine cyclosporine cyclosporine cyclosporine, modified cyclosporine, modified everolimus mycophenolate mofetil mycophenolate mofetil mycophenolate mofetil mycophenolate sodium sirolimus sirolimus tacrolimus tacrolimus tacrolimus tacrolimus TABLET CAPSULE SOLUTION CAPSULE SOLUTION TABLET CAPSULE SUSP RECON TABLET TABLET DR SOLUTION TABLET CAP ER 24H CAPSULE GRAN PACK TAB ER 24H

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Table 121-0030-1 Oregon Fee-for-Service Enforceable Physical Health Preferred Drug List  
Effective: January 1, 2025

System	Class	Preferred	
Immunological	Targeted Immune Modulators	adalimumab (HUMIRA™) *	SYRINGEKIT
		adalimumab (HUMIRA PEN™) *	PEN IJ KIT
		adalimumab (HUMIRA(CF)™) *	SYRINGEKIT
		adalimumab (HUMIRA(CF) PEN™) *	PEN IJ KIT
		adalimumab (HUMIRA(CF) PEN CROHN'S-UC-HS™) *	PEN IJ KIT
		adalimumab (HUMIRA(CF) PEN PEDIATRIC UC™) *	PEN IJ KIT
		adalimumab (HUMIRA(CF) PEN PSOR-UV-ADOL HS™) *	PEN IJ KIT
		adalimumab-atto (AMJEVITA(CF)™) *	SYRINGE
		adalimumab-atto (AMJEVITA(CF) AUTOINJECTOR™) *	AUTO INJECT
		adalimumab-fkjp (ADALIMUMAB-FKJP(CF)™) *	SYRINGEKIT
		adalimumab-fkjp (ADALIMUMAB-FKJP(CF) PEN™) *	PEN IJ KIT
		adalimumab-ryvk (SIMLANDI(CF) AUTOINJECTOR™) *	AUTOINJECT
		apremilast *	TAB DS PK
		apremilast *	TABLET
		etanercept (ENBREL™) *	SYRINGE
		etanercept (ENBREL™) *	VIAL
		etanercept (ENBREL MINI™) *	CARTRIDGE
		etanercept (ENBREL SURECLICK™) *	PEN INJECTR
		infliximab-axxq *	VIAL
		ixekizumab (TALTZ AUTOINJECTOR™) *	AUTO INJECT
ixekizumab (TALTZ AUTOINJECTOR (2 PACK)™) *	AUTO INJECT		
ixekizumab (TALTZ AUTOINJECTOR (3 PACK)™) *	AUTO INJECT		
ixekizumab (TALTZ SYRINGE™) *	SYRINGE		
tofacitinib citrate *	SOLUTION		
tofacitinib citrate *	TAB ER 24H		
tofacitinib citrate *	TABLET		
Metabolic Disorders	Lysosomal Storage Disorders	taliglucerase alfa *	VIAL
Metabolic Disorders	Urea Cycle Disorders	sodium phenylbutyrate	GRANULES
		sodium phenylbutyrate	POWDER
		sodium phenylbutyrate	TABLET
Neurology	Alzheimer's Disease, Non-injectable Drugs	donepezil HCl	TAB RAPDIS
		donepezil HCl	TABLET
		galantamine HBr	CAP24H PEL
		galantamine HBr	TABLET
		memantine HCl	CAP SPR 24
		memantine HCl	SOLUTION
		memantine HCl	TAB DS PK
		memantine HCl	TABLET
		memantine HCl/donepezil HCl	CAP SPR 24
		memantine HCl/donepezil HCl	CAP24 DSPK
		rivastigmine	PATCH TD24
rivastigmine tartrate	CAPSULE		
Neurology	Amyotrophic Lateral Sclerosis	riluzole	TABLET

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\*\* Drug coverage subject to quantity limits

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† Age restrictions apply

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

Effective: January 1, 2025

System	Class	Preferred	
Neurology	Antiepileptics, Outpatient	carbamazepine	ORAL SUSP
		carbamazepine	TAB CHEW
		carbamazepine	TAB ER 12H
		carbamazepine	TABLET
		diazepam	KIT
		diazepam (VALTOCO™)	SPRAY
		ethosuximide	CAPSULE
		ethosuximide	SOLUTION
		gabapentin	CAPSULE
		gabapentin	TABLET
		lacosamide	TABLET
		levetiracetam	SOLUTION
		levetiracetam	TABLET
		methsuximide	CAPSULE
		midazolam (NAYZILAM™)	SPRAY
		oxcarbazepine	ORAL SUSP
		oxcarbazepine	TABLET
		phenobarbital	ELIXIR ***
		phenobarbital	TABLET
		phenytoin	ORAL SUSP
phenytoin	TAB CHEW		
phenytoin sodium extended	CAPSULE		
primidone	TABLET ***		
rufinamide	TABLET		
tiagabine HCl	TABLET		
topiramate	TABLET		
zonisamide	CAPSULE		
Neurology	Duchenne Muscular Dystrophy	deflazacort (EMFLAZA™) *	TABLET
		deflazacort *	TABLET
Neurology	Multiple Sclerosis	COPAXONE™ - BRAND ONLY *	SYRINGE
		interferon beta-1a	PEN IJ KIT
		interferon beta-1a	SYRINGE
		interferon beta-1a	SYRINGEKIT
		interferon beta-1a/albumin	PEN INJECTR
		interferon beta-1a/albumin	SYRINGE
		interferon beta-1b (BETASERON™)	KIT
		peginterferon beta-1a (PLEGRIDY™)	SYRINGE
peginterferon beta-1a (PLEGRIDY PEN™)	PEN INJECTR		

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Table 121-0030-1 Oregon Fee-for-Service Enforceable Physical Health Preferred Drug List  
Effective: January 1, 2025

System	Class	Preferred	
Neurology	Parkinson's Disease Drugs, Oral & Topical	amantadine HCl amantadine HCl benztropine mesylate carbidopa/levodopa carbidopa/levodopa carbidopa/levodopa/entacapone entacapone pramipexole di-HCl selegiline HCl trihexyphenidyl HCl trihexyphenidyl HCl	CAPSULE TABLET TABLET TABLET TABLET ER TABLET TABLET TABLET CAPSULE SOLUTION TABLET
Neurology	Spinal Muscular Atrophy	onasemnogene abeparvovec-xioi *	KIT
Nutritional	B-vitamins, Oral	cyanocobalamin (vitamin B-12) pyridoxine HCl (vitamin B6) thiamine HCl thiamine mononitrate (vit B1)	TABLET *** TABLET TABLET *** TABLET
Nutritional	Calcium/Vit D Replacement, Oral	calcium carbonate calcium carbonate calcium carbonate/vitamin D3 calcium carbonate/vitamin D3 cholecalciferol (vitamin D3) cholecalciferol (vitamin D3) cholecalciferol (vitamin D3) ergocalciferol (vitamin D2)	ORAL SUSP TABLET TAB CHEW TABLET *** CAPSULE *** DROPS *** TABLET *** CAPSULE ***
Nutritional	Iron Replacement, Oral	ferrous gluconate ferrous sulfate ferrous sulfate ferrous sulfate ferrous sulfate	TABLET *** LIQUID TABLET TABLET DR TABLET ER ***
Nutritional	Magnesium Replacement,	magnesium magnesium oxide/vit B6	TABLET TABLET

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Table 121-0030-1 Oregon Fee-for-Service Enforceable Physical Health Preferred Drug List  
Effective: January 1, 2025

System	Class	Preferred	
Nutritional	Multivitamins, Oral	beta-carotene(A)-vits C,E/mins *	TABLET
		folic acid/vit B complex and C *	TABLET
		multivit 38/folate no.6/ginger *	TABLET
		multivit 47/iron/folate 1/dha *	CAPSULE
		multivit no.40/iron/folat1/dha *	CAPSULE
		multivit no.42/iron/folate/dha *	CAPSULE
		multivit no.48/iron fum/FA/dha *	CAPSULE
		multivit with minerals/lutein *	TABLET
		multivit37/iron/Lmfolate/algal *	CAPSULE
		multivit41/iron/folate8/ps-dha *	CAP IR DR
		multivitamin *	TABLET
		multivitamin no.36/folate no.6 *	TAB CHEW
		multivitamin,therapeutic *	TABLET
		multivitamin/iron/folic acid *	TABLET
		multivit-min/FA/lycopen/lutein *	TABLET
		multivit-min69/iron/folic acid *	TABLET
		mv-mins 71/iron/folic no.1/dha *	CAPSULE
		mvn no.53/iron/folic/dss/dha *	CAPSULE
mvn-min 74/iron fum/iron/FA *	CAPSULE		
mvn-min75/iron/iron ps/om3/dha *	CAPSULE		
vitamin B complex *	CAPSULE		
Nutritional	Potassium and K-Phos, Oral	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		

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Table 121-0030-1 Oregon Fee-for-Service Enforceable Physical Health Preferred Drug List  
Effective: January 1, 2025

System	Class	Preferred	
Nutritional	Prenatal Vitamins	PNV 11/iron fum/folic acid/om3	CAPSULE
		PNV 119/iron fum/folic acid	TABLET
		PNV 30/iron carb,ag/folic/om3	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 80/iron fum/folic/dss/dha	CAPSULE
		PNV 85/iron/folic/dha/fish oil	CAPSULE
		PNV cmb 52/iron/FA/omega-3/dha	COMBO. PKG
		PNV no.118/iron fumarate/FA	TAB CHEW
		PNV no.164/iron/folate no.6	TABLET
		PNV w-CA8/iron/FA/Lmefolate Ca	TABLET
		PNV,Ca42/iron/FA/Lmefolate/dha	CAPSULE
		PNV,calcium 72/iron/folic acid	TABLET
		PNV/iron fum,b-g/folic acid	TABLET
		PNV/iron ps cplx/folic acid	TABLET
		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
		prenatal 114/iron a-g/folate 1	TABLET
		prenatal 118/iron/folate 6/dha	CAPSULE
		prenatal 25/iron/folate 6/dha	CAPSULE
		prenatal 26/iron ps/folic/dha	CAPSULE
		prenatal 59/iron/folic/dss/dha	CAPSULE
		prenatal 78/iron/folate 1/dha	CAPSULE
		prenatal 87/iron bis/folic/dha	COMBO. PKG
		prenatal no.75/iron/folate no1	TABLET
		prenatal no.77/iron asp gly/FA	TABLET
		prenatal no13/iron ps/folate 1	TAB CHEW
		prenatal vit 10/iron fum/folic	TABLET
		prenatal vit 10/iron/folic/dha	COMBO. PKG
		prenatal vit 14/iron fum/folic	TAB CHEW
		prenatal vit 33/iron/folic/dha	COMBO. PKG
		prenatal vit 85/iron/FA 1/dha	CAPSULE
		prenatal vit 87/iron/folic/dha	CAPSULE
		prenatal vit,calc76/iron/folic	TABLET
		prenatal vit/iron carb&sulf/FA	TABLET
		prenatal vit/iron fum/folic ac	TABLET
		prenatal vit103/iron fum/folic	TABLET
		prenatal vit128/iron/folic acd	TAB CHEW
		prenatal vit136/iron/folic acd	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,calc.40/iron/folate 1	TABLET
		prenatal56/iron/folic acid/dha	CAPSULE
prenatal71/iron/folic acid/dha	CAP IR DR		
Pv w-o Vit A/iron/docus/FA/Zn	CAP SEQ		

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Table 121-0030-1 Oregon Fee-for-Service Enforceable Physical Health Preferred Drug List  
Effective: January 1, 2025

System	Class	Preferred
Nutritional	Prenatal Vitamins	
Ophthalmics	Antibiotics, Ophthalmic	bacitracin/polymyxin B sulfate OINT. (G) ciprofloxacin HCl DROPS ciprofloxacin HCl OINT. (G) erythromycin base OINT. (G) gentamicin sulfate DROPS 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	neomycin/polymyxin B/dexametha DROPS SUSP neomycin/polymyxin B/dexametha 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 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
Otics	Otic Antibiotics	neomyc/colist/hydrocort/thonzn DROPS SUSP neomycin/polymyxin B/hydrocort DROPS SUSP *** ofloxacin DROPS

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Table 121-0030-1 Oregon Fee-for-Service Enforceable Physical Health Preferred Drug List  
Effective: January 1, 2025

System	Class	Preferred	
Psychiatric	ADHD Drugs	amphetamine sulfate ** ‡ dexamethylphenidate HCl ** ‡ dexamethylphenidate HCl ** ‡ dextroamphetamine sulfate ** ‡ dextroamphetamine/amphetamine ** ‡ dextroamphetamine/amphetamine ** ‡ lisdexamfetamine dimesylate ** ‡ lisdexamfetamine dimesylate ** ‡ methylphenidate ** ‡ methylphenidate HCl ** ‡ methylphenidate HCl ** ‡ methylphenidate HCl ** ‡ methylphenidate HCl ** ‡	TABLET CPBP 50-50 TABLET CAPSULE ER CAP ER 24H TABLET CAPSULE TAB CHEW PATCH TD24 CPBP 30-70 TAB ER 24 TABLET TABLET ER
Psychiatric	Benzodiazepines	clonazepam **	TABLET
Psychiatric	Opioid Reversal Agents	nalmefene HCl (OPVEE™) naloxone HCl naloxone HCl naloxone HCl naloxone HCl naloxone HCl naloxone HCl (KLOXXADO™)	SPRAY AMPUL CARTRIDGE SPRAY SYRINGE VIAL SPRAY
Psychiatric	Sedatives	melatonin * ramelteon * zolpidem tartrate *	TABLET TABLET TABLET
Psychiatric	Substance Use Disorders, Opioid & Alcohol	acamprosate calcium buprenorphine (BRIXADI™) buprenorphine (SUBLOCADE™) buprenorphine HCl/naloxone HCl (ZUBSOLV™) ** buprenorphine HCl/naloxone HCl ** buprenorphine HCl/naloxone HCl ** naltrexone HCl naltrexone microspheres (VIVITROL™)	TABLET DR SOLER SYR SOLER SYR TAB SUBL FILM TAB SUBL TABLET SUS ER REC
Psychiatric	Tobacco Smoking Cessation	bupropion HCl nicotine nicotine nicotine polacrilex nicotine polacrilex nicotine polacrilex varenicline tartrate ‡ varenicline tartrate ‡	TAB ER 12H PATCH DYSQ PATCH TD24 GUM LOZENGE LOZNG MINI TAB DS PK TABLET
Pulmonary	Beta-Agonists, Inhaled Long Acting	salmeterol xinafoate	BLST W/DEV

\* Drug coverage subject to meeting clinical prior authorization criteria

\*\* Drug coverage subject to quantity limits

\*\*\* Certain strengths may require Prior Authorization

‡ Age restrictions apply

Note: New drugs in classes already evaluated for the PDL shall be non-preferred until the new drug has been reviewed by the P&T (see OAR 410-121-0030).

**Table 121-0030-1 Oregon Fee-for-Service Enforceable Physical Health Preferred Drug List**  
**Effective: January 1, 2025**

<b>System</b>	<b>Class</b>	<b>Preferred</b>
Pulmonary	Beta-Agonists, Inhaled Short-Acting	albuterol sulfate HFA AER AD albuterol sulfate VIAL-NEB
Pulmonary	Corticosteroids, Inhaled	beclomethasone dipropionate HFA AEROBA budesonide AER POW BA fluticasone furoate BLST W/DEV fluticasone propionate BLST W/DEV mometasone furoate AER POW BA mometasone furoate HFA AER AD
Pulmonary	Corticosteroids/Beta-Agonist Combination, Inhaled	fluticasone propion/salmeterol AER POW BA fluticasone propion/salmeterol BLST W/DEV fluticasone propion/salmeterol HFA AER AD mometasone/formoterol HFA AER AD SYMBICORT™ - BRAND ONLY HFA AER AD
Pulmonary	Cystic Fibrosis	dornase alfa SOLUTION sodium chloride for inhalation VIAL-NEB tobramycin in 0.225% sod chlor AMPUL-NEB
Pulmonary	LAMA/LABA Combination, Inhalers	tiotropium Br/olodaterol HCl (STIOLTO RESPIMAT™) MIST INHAL umeclidinium brm/vilanterol tr BLST W/DEV
Pulmonary	Miscellaneous Pulmonary Agents	montelukast sodium TAB CHEW montelukast sodium TABLET
Pulmonary	Muscarinic Antagonists, Inhaled	ipratropium bromide HFA AER AD ipratropium bromide SOLUTION ipratropium/albuterol sulfate AMPUL-NEB ipratropium/albuterol sulfate (COMBIVENT RESPIMAT™) MIST INHAL tiotropium bromide (SPIRIVA RESPIMAT™) MIST INHAL umeclidinium bromide BLST W/DEV
Pulmonary	Pulmonary Arterial Hypertension Oral and Inhaled Drugs	bosentan TABLET sildenafil citrate TABLET *** tadalafil TABLET ***
Pulmonary	Pulmonary Arterial Hypertension Parenteral Drugs	epoprostenol sodium (glycine) VIAL
Renal	Phosphate Binders & Absorption Inhibitors	calcium acetate CAPSULE calcium acetate TABLET *** sevelamer carbonate 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

Note: New drugs in classes already evaluated for the PDL shall be non-preferred until the new drug has been reviewed by the P&T (see OAR 410-121-0030).

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

Effective: January 1, 2025

System	Class	Preferred	
Neurology	Antiepileptics, Outpatient	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
Neurology	Other Stimulants	armodafinil *	TABLET
		modafinil *	TABLET
Psychiatric	ADHD Drugs	atomoxetine HCl ** ‡	CAPSULE
		clonidine HCl	TAB ER 12H
		guanfacine HCl	TAB ER 24H
		viloxazine HCl (QELBREE™) ** ‡	CAP ER 24H
Psychiatric	Antidepressants	amitriptyline HCl ‡	TABLET
		bupropion HCl	TAB ER 24H
		bupropion HCl	TAB SR 12H
		bupropion HCl	TABLET
		citalopram hydrobromide	SOLUTION
		citalopram hydrobromide	TABLET
		desipramine HCl ‡	TABLET
		desvenlafaxine succinate	TAB ER 24H
		doxepin HCl ‡	CAPSULE
		doxepin HCl ‡	ORAL CONC
		duloxetine HCl	CAPSULE DR
		escitalopram oxalate	TABLET
		fluoxetine HCl	CAPSULE
		fluoxetine HCl	SOLUTION
		fluoxetine HCl	TABLET
		fluvoxamine maleate	TABLET
		imipramine HCl ‡	TABLET
		mirtazapine	TAB RAPDIS
		mirtazapine	TABLET
		nefazodone HCl	TABLET
		nortriptyline HCl ‡	CAPSULE
		nortriptyline HCl ‡	SOLUTION
		paroxetine HCl	TABLET
sertraline HCl	ORAL CONC		
sertraline HCl	TABLET		
venlafaxine HCl	CAP ER 24H		
venlafaxine 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

Note: New drugs in classes already evaluated for the PDL shall be non-preferred until the new drug has been reviewed by the P&T (see OAR 410-121-0030).

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

Effective: January 1, 2025

System	Class	Preferred
Psychiatric	Antipsychotics, 1st Gen	chlorpromazine HCl ‡ fluphenazine HCl ‡ fluphenazine HCl ‡ fluphenazine HCl ‡ haloperidol ‡ haloperidol lactate ‡ loxapine succinate ‡ perphenazine ‡ thioridazine HCl ‡ thioridazine HCl ‡ thiothixene ‡ thiothixene HCl ‡ trifluoperazine HCl ‡
Psychiatric	Antipsychotics, 2nd Gen	aripiprazole ‡ asenapine maleate ‡ cariprazine HCl (VRAYLAR™) ‡ clozapine ‡ lurasidone HCl ‡ olanzapine ‡ quetiapine fumarate ** ‡ quetiapine fumarate ** ‡ quetiapine fumarate ** ‡ risperidone ‡ risperidone ‡ ziprasidone HCl ‡
Psychiatric	Antipsychotics, Parenteral	aripiprazole (ABILIFY ASIMTUFI™) aripiprazole (ABILIFY MAINTENA™) aripiprazole (ABILIFY MAINTENA™) aripiprazole lauroxil (ARISTADA™) aripiprazole lauroxil, submicr. (ARISTADA INITIO™) chlorpromazine HCl chlorpromazine HCl fluphenazine decanoate fluphenazine HCl haloperidol decanoate haloperidol decanoate haloperidol lactate haloperidol lactate paliperidone palmitate paliperidone palmitate (INVEGA HAFYERA™) paliperidone palmitate (INVEGA SUSTENNA™) paliperidone palmitate (INVEGA TRINZA™) RISPERDAL CONSTA™ - BRAND ONLY ** risperidone (PERSERIS™) risperidone (UZEDY™) RYKINDO™ - BRAND ONLY **

\* Drug coverage subject to meeting clinical prior authorization criteria

\*\* Drug coverage subject to quantity limits

\*\*\* Certain strengths may require Prior Authorization

‡ Age restrictions apply

Note: New drugs in classes already evaluated for the PDL shall be non-preferred until the new drug has been reviewed by the P&T (see OAR 410-121-0030).