



Department of Health and Human Services

**Approved PDL for IOWA Medicaid Program
BRANDS PREFERRED OVER GENERICS ***

EFFECTIVE 06-01-23

ANTIASTHMATIC - ADRENERGIC COMBOS	ELECTROLYTES/ NUTRITIONALS
SYMBICORT	AMINOSYN II
ANTIBIOTICS - MISC.	ESTROGENS - PATCHES
AZACTAM	ALORA
ANTICOAGULANTS	GI - INFLAMMATORY BOWEL AGENTS
PRADAXA	DELZICOL
ANTICONSULSANTS	GI, CONSTIPATION - IBS-OIC
GABITRIL	AMITIZA
ANTIEMETIC - 5-HT3 RECEPTOR ANTAGONISTS/ SUBSTANCE P NEUROKININ	GI - MISC.
EMEND	MOVIPREP
ANTIEMETIC - ANTICHOLINERGIC / DOPAMINERGIC	GI - PROTON PUMP INHIBITOR
TRANSDERM-SCOP	PROTONIX ORAL PACKET
ANTIFUNGALS - ASSORTED	HEPATITIS B ONLY
VFEND ORAL SUSPENSION	HEPSERA
ANTINEOPLASTICS - ANTIESTROGENS	HEREDITARY TYROSINEMIA TYPE 1 (HT-1) TREATMENT - AGENTS
FARESTON	ORFADIN
ANTINEOPLASTICS - PROTEIN-TYROSINE KINASE INHIBITORS	IMMUNOSUPPRESSANTS
AFINITOR	CELLCEPT ORAL SUSPENSION
NEXAVAR	MULTIPLE SCLEROSIS AGENTS – NON-INTERFERONS
SUTENT	GILENYA
TYKERB	OP. ANTIINFLAMMATORY/STEROIDS OPHTH
ANTI-PARKINSONIAN DRUGS	TOBRADEX
PARLODEL	OP. CARBONIC ANHYDRASE INHIBITORS/COMBO
ANTIRETROVIRALS - COMBINATIONS	COMBIGAN
SYMFI	OP. PROSTAGLANDINS
SYMFI LO	TRAVATAN Z
ANTIRETROVIRALS - RTI - NUCLEOSIDE/NUCLEOTIDE ANALOGUES	OP. SELECTIVE ALPHA ADRENERGIC AGONISTS
EMTRIVA	ALPHAGAN P SOLN 0.15%
CARNITINE REPLENISHER - AGENTS	TOPICAL - ACNE PREPARATIONS
CARNITOR TABS	DIFFERIN CREAM
CONTRACEPTIVES - MONOPHASIC COMBINATION O/C'S	METROGEL 1%
BEYAZ	TOPICAL - ANTINEOPLASTICS
CONTRACEPTIVES - PATCHES/ VAGINAL PRODUCTS	EFUDEX CREAM
NUVARING	TOPICAL - IMMUNOMODULATORS
CYTO-MEGALOVIRUS AGENTS	ELIDEL
VALCYTE ORAL SOLUTION	TOPICAL - LOCAL ANESTHETICS
DIABETIC - ALPHAGLUCOSIDASE	MARCAINE
GLYSET	TOPICAL - SCABICIDES AND PEDICULICIDES
DIABETIC - OTHER	NATROBA
PROGLYCEM	TOPICAL - TRETINOIDS
EAR	RETIN-A
CIPRODEX	UREA CYCLE DISORDER - AGENTS
DERMOTIC	BUPHENYL