



**Office of Pharmacy Services
Medicaid Pharmacy Program
Preferred Drug List: Generic vs. Brand Status**

Not all Generics are Preferred. In some instances, the State prefers the multisource brand name drug over its generic equivalent because the branded drug is more cost effective than its generic counterpart.

- When the brand name drug is preferred, no Medwatch nor authorization is needed ^{1,2}
- Pharmacy providers must enter a **DAW code of 6** on the claim to have it correctly priced.
- If any problems are encountered during the on-line claim adjudication of Preferred Brands, contact Conduent's 24-hour Help Desk at 800-932-3918 for additional system overrides related to the use of the correct DAW code (For example, when there is other insurance)

Therapeutic Class	Preferred BRAND	Non-Preferred GENERIC
Antibiotics, Inhaled	Bethkis (inhalation)	tobramycin powder (inhalation)
Antibiotics, Inhaled	Kitabis Pak (inhalation)	tobramycin pak (inhalation)
Anticonvulsants	Banzel tablets, suspension ²	rufinamide tablets, suspension ²
Anticonvulsants	Carbatrol capsule	carbamazepine ER capsule
Anticonvulsants	Depakote Sprinkle capsule	divalproex sprinkle capsule
Anticonvulsants	Diastat, Diastat Acudial	diazepam rectal
Anticonvulsants	Sabril tablet, Powder Packet ²	vigabatrin tablet, powder packet ²
Anticonvulsants	Tegretol suspension (oral)	carbamazepine suspension (oral)
Anticonvulsants	Trileptal suspension (oral)	oxcarbazepine suspension (oral)
Bronchodilators, Beta Agonists	ProAir HFA (inhalation)	albuterol HFA (inhalation)
Glucocorticoids, Inhaled	Symbicort (inhalation)	budesonide/formoterol (inhalation)
Hypoglycemics, Insulins	Humalog Junior Kwikpen ³	insulin lispro Junior Kwikpen ³
Hypoglycemics, Insulins	Humalog Mix 75/25 pen ³	insulin lispro mix pen ³
Hypoglycemics, Insulins	Humalog pen, vial ³	insulin lispro pen, vial ³
Hypoglycemics, Insulins	Novolog cartridge, pen, vial ³	insulin aspart cartridge, pen, vial ³
Hypoglycemics, Insulins	Novolog Mix 70/30 pen, vial ³	insulin aspart protamine/insulin aspart pen, vial ³
Immunosuppressives, Oral	Cellcept suspension	mycophenolate mofetil suspension
Opioid Use Disorder Treatments	Suboxone Film	buprenorphine/naloxone film
Proton Pump Inhibitors	Prevacid SoluTab ODT	lansoprazole ODT
Stimulants and Related Agents	Adderall XR capsule	amphetamine salt combo ER capsule
Stimulants and Related Agents	Concerta tablet	methylphenidate ER capsule
Stimulants and Related Agents	Focalin XR capsule	dexmethylphenidate XR capsule

¹ Unless the Program has established clinical criteria for the drug. Clinical criteria can be found [here](#).

² Is a non-preferred drug on the PDL and will require a prior authorization by the prescriber

³ Both brand and generic preferred