

Molina Healthcare Marketplace

2025 Formulary Changes Effective July 1, 2025

Drug Name	Description of Formulary Change	Notes/Alternatives
Calcium + D3 TABS 250-3MG-MCG	Adding to Formulary, Preferred Generic Tier	
Calcium CHEW 500-2.5MG-MCG	Adding to Formulary, Preferred Generic Tier	
Cholestyramine Light PACK 4 GM	Adding to Formulary, Preferred Generic Tier with QL	
Cholestyramine PACK 4 GM	Adding to Formulary, Preferred Generic Tier with QL	
Dasatinib Tab 100MG	PA Removed	
Dasatinib Tab 140MG	PA Removed	
Dasatinib Tab 20MG	PA Removed	
Dasatinib Tab 50MG	PA Removed	
Dasatinib Tab 70MG	PA Removed	
Dasatinib Tab 80MG	PA Removed	
Descovy Tab 120-15MG	Updated to Preferred Brand Tier	
Descovy Tab 200-25MG	Updated to Preferred Brand Tier	
Eligard Inj 22.5MG	PA Removed	
Eligard Inj 7.5MG	PA Removed	
Eslicarbazep Tab 200MG	Adding to Formulary, Non-Preferred Brand Tier	
Eslicarbazep Tab 400MG	Adding to Formulary, Non-Preferred Brand Tier	
Eslicarbazep Tab 600MG	Adding to Formulary, Non-Preferred Brand Tier	
Eslicarbazep Tab 800MG	Adding to Formulary, Non-Preferred Brand Tier	

Drug Name	Description of Formulary Change	Notes/Alternatives
Estradiol PTTW 0.025MG/24HR	Updated to Preferred Generic Tier	
Estradiol PTTW 0.0375MG/24HR	Updated to Preferred Generic Tier	
Estradiol PTTW 0.05MG/24HR	Updated to Preferred Generic Tier	
Estradiol PTTW 0.075MG/24HR	Updated to Preferred Generic Tier	
Estradiol PTTW 0.1MG/24HR	Updated to Preferred Generic Tier	
Estradiol PTWK 0.025MG/24HR	Updated to Preferred Generic Tier	
Estradiol PTWK 0.0375MG/24HR	Updated to Preferred Generic Tier	
Estradiol PTWK 0.05MG/24HR	Updated to Preferred Generic Tier	
Estradiol PTWK 0.06MG/24HR	Updated to Preferred Generic Tier	
Estradiol PTWK 0.075MG/24HR	Updated to Preferred Generic Tier	
Estradiol PTWK 0.1MG/24HR	Updated to Preferred Generic Tier	
Estradiol Td Patch Weekly 14 MCG/24HR	Updated to Preferred Generic Tier	
Etodolac CAPS 300MG	Adding to Formulary, Preferred Generic Tier with QL	
Ferrous Sulfate Solution 300 MG/5ML	Adding to Formulary, Preferred Generic Tier	
Firmagon Inj 80MG	PA Removed	
IPOL INJ	Adding to Formulary, Preventive Tier	
Miudella IUD Copper	Adding to Formulary, Preventive Tier with QL	

Drug Name	Description of Formulary Change	Notes/Alternatives
Novolin R Flexpen	Adding to Formulary, Preferred Brand Tier with QL	
Novolog Flexpen Relion	Adding to Formulary, Preferred Brand Tier with QL	
Pyzchiva SOLN 130MG/26ML	Adding to Formulary, Specialty Tier	
Pyzchiva SOSY 45MG/0.5ML	Adding to Formulary, Specialty Tier with QL	
Pyzchiva SOSY 90MG/ML	Adding to Formulary, Specialty Tier with QL	
Rexulti Tab 0.25 MG	Adding to Formulary, Non-Preferred Brand Tier	
Rexulti Tab 0.5 MG	Adding to Formulary, Non-Preferred Brand Tier	
Rexulti Tab 1 MG	Adding to Formulary, Non-Preferred Brand Tier	
Rexulti Tab 2 MG	Adding to Formulary, Non-Preferred Brand Tier	
Rexulti Tab 3 MG	Adding to Formulary, Non-Preferred Brand Tier	
Rexulti Tab 4 MG	Adding to Formulary, Non-Preferred Brand Tier	
Rybelsus Tab 1.5MG	Adding to Formulary, Preferred Brand Tier with QL; ST	
Rybelsus Tab 4MG	Adding to Formulary, Preferred Brand Tier with QL; ST	
Rybelsus Tab 9MG	Adding to Formulary, Preferred Brand Tier with QL; ST	
Se-Natal 19 Chew 29-1 MG	Adding to Formulary, Preferred Generic Tier with QL	
Simlandi 1 Pen Kit 80/0.8 ML	Adding to Formulary, Specialty Tier with QL	
Tacrolimus OINT 0.03%	PA Removed; QL Updated	100g per 30 days

Drug Name	Description of Formulary Change	Notes/Alternatives
Tacrolimus OINT 0.1%	PA Removed; QL Updated	100g per 30 days
Tazarotene Cream 0.05%	Adding to Formulary, Non-Preferred Generic Tier with PA; QL	
Techlite Insulin Syringe MISC 29G X 1/2"1 ML	Adding to Formulary, DME Tier with QL	
Techlite Pen Needles MISC 29G X 12MM	Adding to Formulary, DME Tier with QL	
Thrivite Rx TABS 29-1 MG	Adding to Formulary, Preferred Generic Tier	
Tremfya Crohn's INJ 200/2ML	Adding to Formulary, Specialty Tier	
Tremfya INJ 200/2ML	Adding to Formulary, Specialty Tier	
Vraylar Cap 1.5 MG	Adding to Formulary, Non-Preferred Brand Tier	
Vraylar Cap 3 MG	Adding to Formulary, Non-Preferred Brand Tier	
Vraylar Cap 4.5 MG	Adding to Formulary, Non-Preferred Brand Tier	
Vraylar Cap 6 MG	Adding to Formulary, Non-Preferred Brand Tier	
Yesintek SOLN 130MG/26ML	Adding to Formulary, Specialty Tier	
Yesintek SOLN 45MG/0.5ML	Adding to Formulary, Specialty Tier with QL	
Yesintek SOSY 45MG/0.5ML	Adding to Formulary, Specialty Tier with QL	
Yesintek SOSY 90MG/ML	Adding to Formulary, Specialty Tier with QL	
Zolinza Cap 100MG	PA Removed	
Zolmitriptan SOLN 2.5MG	Adding to Formulary, Preferred Generic Tier with QL; ST	

PA = Prior Authorization QL = Quantity Limits ST = Step Therapy



Molina Healthcare Marketplace

2025 Formulary Changes Effective April 1, 2025

Drug Name	Description of Formulary Change	Notes/Alternatives
Diltiazem CD Cap 360mg/24	Adding To Formulary Generic Tier; QL	
Enbrel Mini Inj 50mg/ML	Removed Prior Authorization Requirement (PA)	QL Applies
Femlyv TBDP 1-0.02MG	Adding To Formulary Preventive Tier; QL	
Freestyle Libre 2 Plus Sensor MISC	Adding To Formulary, DME Tier (Takes Durable Medical Equipment Cost Sharing); PA; QL; AGE	
Freestyle Libre 3 Plus Sensor MISC	Adding To Formulary, DME Tier (Takes Durable Medical Equipment Cost Sharing); PA; QL; AGE	
Moxifloxacin Sol 0.5%(M)	Adding To Formulary Generic Tier; QL	
Simlandi (1 Pen) AJKT 40MG/0.4ML	Adding To Formulary Specialty Tier; QL	
Simlandi (2 Pen) AJKT 40MG/0.4ML	Adding To Formulary Specialty Tier; QL	
Simlandi Kit 20/0.2ml	Adding To Formulary Specialty Tier; QL	
Simlandi Kit 80/0.8ml	Adding To Formulary Specialty Tier; QL	
True Metrix Blood Glucose Test STRP	Adding To Formulary, DME Tier (Takes Durable Medical Equipment Cost Sharing); QL	
True Metrix Pro Blood Glucose STRP	Adding To Formulary, DME Tier (Takes Durable Medical Equipment Cost Sharing); QL	

PA = Prior Authorization **QL** = Quantity Limits **ST** = Step Therapy **AGE** = Age limits apply



Molina Healthcare Marketplace

2025 Formulary Changes Effective January 1, 2025

Drug Name	Description of Formulary Change	Notes/Alternatives
Acetasol HC Solution 2-1% Otic	Remove Brand Version from Formulary	Generic Covered
Afrezza Powder 4UNIT Inhalation	Removing from Formulary	Short Acting Insulins (Novolin, Novolog, Fiasp) Covered
Afrezza Powder 8UNIT Inhalation	Removing from Formulary	Short Acting Insulins (Novolin, Novolog, Fiasp) Covered
Afrezza Powder 12UNIT Inhalation	Removing from Formulary	Short Acting Insulins (Novolin, Novolog, Fiasp) Covered
Afrezza Powder 90 x 4 UNIT & 90x8 UNIT Inhalation	Removing from Formulary	Short Acting Insulins (Novolin, Novolog, Fiasp) Covered
Afrezza Powder 90 x 8 UNIT & 90x12 UNIT Inhalation	Removing from Formulary	Short Acting Insulins (Novolin, Novolog, Fiasp) Covered
Afrezza Powder 4 & 8 & 12UNIT Inhalation	Removing from Formulary	Short Acting Insulins (Novolin, Novolog, Fiasp) Covered
Alrex (loteprednol) Suspension 0.2% Ophthalmic	Remove Brand Version from Formulary	Generic Covered
Alvimopan Capsule 12MG Oral	Adding to formulary, non-preferred tier	
Amoxicillin Tablet 500MG Oral	Changing from non-preferred tier to preferred generic tier	
Atovaquone-Proguanil HCl Tablet 62.5-25MG Oral	Remove Prior Authorization Requirement	
Atovaquone-Proguanil HCl Tablet 250-100MG Oral	Remove Prior Authorization Requirement	
Balcoltra Tablet 0.1-20MG-MCG(21) Oral	Remove Brand Version from Formulary	Generic Covered
Candesartan Cilixetil Tablet 4MG Oral	Remove Step Therapy Requirement	
Candesartan Cilixetil Tablet 8MG Oral	Remove Step Therapy Requirement	
Candesartan Cilixetil Tablet 16MG Oral	Remove Step Therapy Requirement	
Candesartan Cilixetil Tablet 32MG Oral	Remove Step Therapy Requirement	
CARBAMAZEPIN CHW 200MG	Adding to formulary preferred generic tier	
COPAXONE 40 MG	Remove Brand Version from Formulary	Generic Covered

Drug Name	Description of Formulary Change	Notes/Alternatives
CORLANOR TAB 5MG	Remove Brand Version from Formulary	Generic Covered
CORLANOR TAB 7.5MG	Remove Brand Version from Formulary	Generic Covered
Darunavir Tablet 600MG Oral	Adding to formulary preferred generic tier	
Darunavir Tablet 800MG Oral	Adding to formulary preferred generic tier	
Descovy Tablet 120-15MG Oral	Adding to formulary preferred brand tier	
Descovy Tablet 200-25MG Oral	Adding to formulary preferred brand tier	
diITIAZem HCl ER Capsule Extended Release 12 Hour 60MG Oral	Adding to formulary preferred generic tier	
diITIAZem HCl ER Capsule Extended Release 12 Hour 90MG Oral	Adding to formulary preferred generic tier	
diITIAZem HCl ER Tablet Extended Release 24 Hour 120MG Oral	Adding to formulary preferred generic tier	
diITIAZem HCl ER Tablet Extended Release 24 Hour 180MG Oral	Adding to formulary preferred generic tier	
diITIAZem HCl ER Tablet Extended Release 24 Hour 240MG Oral	Adding to formulary preferred generic tier	
diITIAZem HCl ER Tablet Extended Release 24 Hour 300MG Oral	Adding to formulary preferred generic tier	
diITIAZem HCl ER Tablet Extended Release 24 Hour 360MG Oral	Adding to formulary preferred generic tier	
diITIAZem HCl ER Tablet Extended Release 24 Hour 420MG Oral	Adding to formulary preferred generic tier	
Dimethyl Fumarate Capsule Delayed Release 120MG Oral	Changing from specialty tier cost sharing tier to preferred generic cost sharing tier	Specialty pharmacy required
Dimethyl Fumarate Capsule Delayed Release 240MG Oral	Changing from specialty tier cost sharing tier to preferred generic cost sharing tier	Specialty pharmacy required
Dimethyl Fumarate Starter Pack Capsule Delayed Release Therapy Pack 120 & 240MG Oral	Changing from specialty tier cost sharing tier to preferred generic cost sharing tier	Specialty pharmacy required

Drug Name	Description of Formulary Change	Notes/Alternatives
Doptelet Tablet 20MG	Adding to formulary specialty tier with prior authorization	
Dorzolamide HCl-Timolol Mal PF SOLN 2-0.5%	Adding to formulary preferred generic tier, Quantity Limit	
Edarbi Tablet 40MG Oral	Remove Brand Version from Formulary	Irbesartan, Valsartan, Losartan, Candesartan Covered
Edarbi Tablet 80MG Oral	Remove Brand Version from Formulary	Irbesartan, Valsartan, Losartan, Candesartan Covered
Ergomar Tablet Sublingual 2MG Sublingual	Removing Prior Authorization Requirement	
Estradiol Tablet 0.5MG Oral	Removing Prior Authorization Requirement	
Estradiol Tablet 1MG Oral	Removing Prior Authorization Requirement	
Estradiol Tablet 2MG Oral	Removing Prior Authorization Requirement	
Eurax Cream 10% External	Removing Step Therapy Requirement	
Ezetimibe Tablet 10MG Oral	Removing Step Therapy Requirement	
Firvanq Solution Reconstituted Oral	Remove Brand Version from Formulary	Generic Covered
guanFACINE HCl ER Tablet Extended Release 24 Hour 1MG Oral	Removing Prior Authorization Requirement	
guanFACINE HCl ER Tablet Extended Release 24 Hour 2MG Oral	Removing Prior Authorization Requirement	
guanFACINE HCl ER Tablet Extended Release 24 Hour 3MG Oral	Removing Prior Authorization Requirement	
guanFACINE HCl ER Tablet Extended Release 24 Hour 4MG Oral	Removing Prior Authorization Requirement	
INSULIN ASPART INJ 100 UNIT/ML	Removing from formulary	Brand Fiasp and Brand Novolog Covered
INSULIN ASPART SOLN PEN-INJECTOR 100 UNIT/ML	Removing from formulary	Brand Fiasp and Brand Novolog Covered
INSULIN ASPART SOLN CARTRIDGE 100 UNIT/ML	Removing from formulary	Brand Fiasp and Brand Novolog Covered
INSULIN ASPART PROT & ASPART (HUMAN) INJ 100 UNIT/ML (70-30)	Removing from formulary	Brand Fiasp and Brand Novolog Covered

Drug Name	Description of Formulary Change	Notes/Alternatives
INSULIN ASPART PROT & ASPART SUS PEN-INJ 100 UNIT/ML (70-30)	Removing from formulary	Brand Fiasp and Brand Novolog Covered
Lanabiotic Ointment 5-500-10000 External	Adding to formulary, Preferred Generic Tier	
Lansoprazole Capsule Delayed Release 15MG Oral	Changing from non-preferred tier to preferred generic tier	
Lansoprazole Capsule Delayed Release 30MG Oral	Changing from non-preferred tier to preferred generic tier	
Ledipasvir-Sofosbuvir Tablet 90-400MG Oral	Changing from specialty cost sharing tier to preferred brand cost sharing tier	Specialty pharmacy required
Levonorgest-Eth Estradiol-Iron Tablet 0.1-20MG-MCG(21) Oral	Adding to formulary, preventative tier	
Liraglutide SOPN 18MG/3ML	Adding to formulary, preferred generic tier, Step Therapy required, Quantity Limit	Prior use of metformin within the past 180 days
Loteprednol Etabonate Gel 0.5% Ophthalmic	Adding to formulary, non-preferred generic tier with prior authorization requirement	
MIRABEGRON TAB ER 24 HR 25 MG	Adding to formulary, non-preferred tier with prior authorization requirement	
MIRABEGRON TAB ER 24 HR 50 MG	Adding to formulary, non-preferred tier with prior authorization requirement	
MYRBETRIQ (Mirabegron) TAB 25MG	Remove Brand Version from Formulary	Generic Covered
MYRBETRIQ (Mirabegron) TAB 50MG	Remove Brand Version from Formulary	Generic Covered
Naftifine HCl Gel 2% External	Adding to formulary, non-preferred tier with prior authorization requirement	
Naftin Gel 2% External	Remove Brand Version from Formulary	Generic Covered
Narcan Liquid 4MG/0.1ML Nasal (Prescription Only Version)	Remove Brand Version from Formulary	Generic Covered, Over-the-Counter Brand Narcan covered
Paser Packet 4GM Oral	Adding to formulary, non-preferred brand tier	
Pataday (olopatadine) OTC 0.1% and 0.2%	Remove Brand Version from Formulary	Generic Covered
PAZOPanib HCl Tablet 200MG Oral	Adding to formulary, specialty tier with prior authorization requirement	
PREGABALIN SOL 20MG/ML	Adding to formulary non-preferred generic tier	
Prezista Tablet 600MG Oral	Remove Brand Version from Formulary	Generic Covered

Drug Name	Description of Formulary Change	Notes/Alternatives
Prezista Tablet 800MG Oral	Remove Brand Version from Formulary	Generic Covered
Promacta Tablet 12.5MG Oral	Removing from formulary	Doptelet and Tavalisse Covered with Prior Authorization
Promacta Tablet 25MG Oral	Removing from formulary	Doptelet and Tavalisse Covered with Prior Authorization
Promacta Tablet 50MG Oral	Removing from formulary	Doptelet and Tavalisse Covered with Prior Authorization
Promacta Tablet 75MG Oral	Removing from formulary	Doptelet and Tavalisse Covered with Prior Authorization
Rectiv Ointment 0.4% Rectal	Remove Brand Version from Formulary	Generic Covered
Simlandi (2 Pen) AJKT 40MG/0.4ML	Adding to formulary preferred specialty tier with prior authorization	
Simlandi (1 Pen) AJKT 40MG/0.4ML	Adding to formulary preferred specialty tier with prior authorization	
Sofosbuvir-Velpatasvir Tablet 400-100MG Oral	Changing from specialty tier to preferred brand tier	Specialty pharmacy required
Sprycel (dasatinib) Tablet 20MG Oral	Remove Brand Version from Formulary	Generic Covered
Sprycel (dasatinib) Tablet 50MG Oral	Remove Brand Version from Formulary	Generic Covered
Sprycel (dasatinib) Tablet 70MG Oral	Remove Brand Version from Formulary	Generic Covered
Sprycel (dasatinib) Tablet 80MG Oral	Remove Brand Version from Formulary	Generic Covered
Sprycel (dasatinib) Tablet 100MG Oral	Remove Brand Version from Formulary	Generic Covered
Sprycel (dasatinib) Tablet 140MG Oral	Remove Brand Version from Formulary	Generic Covered
SUBLOCADE SOSY 100MG/0.5ML	Adding to formulary, non-preferred Brand tier with day supply max	
SUBLOCADE SOSY 300MG/1.5ML	Adding to formulary, non-preferred Brand tier with day supply max	
Tavalisse TABS 100MG	Adding to formulary, specialty tier with Prior Authorization	
Tavalisse TABS 150MG	Adding to formulary, specialty tier with Prior Authorization	
TechLITE Insulin Syringe 29G X 1/2"0.3 ML	Adding to formulary, DME Tier (takes Durable Medical Equipment Cost Sharing)	

Drug Name	Description of Formulary Change	Notes/Alternatives
TechLITE Insulin Syringe 30G X 5/16"0.3 ML	Adding to formulary, DME Tier (takes Durable Medical Equipment Cost Sharing)	
TechLITE Insulin Syringe 30G X 1/2"0.3 ML	Adding to formulary, DME Tier (takes Durable Medical Equipment Cost Sharing)	
TechLITE Insulin Syringe 29G X 1/2"0.5 ML	Adding to formulary, DME Tier (takes Durable Medical Equipment Cost Sharing)	
TechLITE Insulin Syringe 30G X 5/16"0.5 ML	Adding to formulary, DME Tier (takes Durable Medical Equipment Cost Sharing)	
TechLITE Insulin Syringe 29G X 1/2"1 ML	Adding to formulary, DME Tier (takes Durable Medical Equipment Cost Sharing)	
TechLite Pen Needles 29G X 10MM	Adding to formulary, DME Tier (takes Durable Medical Equipment Cost Sharing)	
TechLite Pen Needles 29G X 12MM	Adding to formulary, DME Tier (takes Durable Medical Equipment Cost Sharing)	
TechLite Pen Needles 31G X 6 MM	Adding to formulary, DME Tier (takes Durable Medical Equipment Cost Sharing)	
Tiopronin Tablet 100MG Oral	Adding to formulary, specialty tier with prior authorization requirement	
Vancomycin solutions reconstituted oral	Adding to formulary, preferred generic tier	
Victoza (liraglutide) 18MG/3ML	Remove Brand Version from Formulary	Generic Covered
Votrient (pazopanib) Tablet 200MG Oral	Remove Brand Version from Formulary	Generic Covered
Vyvanse (lisdexamfetamine) Capsule 10MG Oral	Remove Brand Version from Formulary	Generic Covered
Vyvanse (lisdexamfetamine) Capsule 20MG Oral	Remove Brand Version from Formulary	Generic Covered
Vyvanse (lisdexamfetamine) Capsule 30MG Oral	Remove Brand Version from Formulary	Generic Covered
Vyvanse (lisdexamfetamine) Capsule 40MG Oral	Remove Brand Version from Formulary	Generic Covered
Vyvanse (lisdexamfetamine) Capsule 50MG Oral	Remove Brand Version from Formulary	Generic Covered
Vyvanse (lisdexamfetamine) Capsule 60MG Oral	Remove Brand Version from Formulary	Generic Covered
Vyvanse (lisdexamfetamine) Capsule 70MG Oral	Remove Brand Version from Formulary	Generic Covered
ZOLMiptan SOLN 2.5MG	Adding to formulary, non-preferred generic tier with QL and ST requirement	

PA = Prior Authorization **QL** = Quantity Limits **ST** = Step Therapy

The medications listed below are available on the pharmacy benefit without a Prior Authorization:

Los medicamentos que se enumeran a continuación están disponibles en el beneficio de farmacia sin autorización previa.

ABIRATERONE TAB 500MG	Enbrel SOLN 25MG/0.5ML	Hadlima SOSY 40MG/0.4ML
ABIRATERONE TAB 250MG	ENBREL SRCLK INJ 50MG/ML	Hadlima SOSY 40MG/0.8ML
ACTEMRA INJ 162/0.9	ERIVEDGE CAP 150MG	HIZENTRA INJ 1GM/5ML
ACTEMRA INJ 200/10ML	ERLOTINIB TAB 100MG	HIZENTRA INJ 2GM/10ML
ACTEMRA INJ 400/20ML	ERLOTINIB TAB 150MG	HIZENTRA 1 GM/5ML
ACTEMRA INJ 80MG/4ML	ERLOTINIB TAB 25MG	HIZENTRA 10 GM/50ML
ACTEMRA INJ ACTPEN	ETOPOSIDE CAP 50MG	HIZENTRA 4 GM/20ML
ACTIMMUNE INJ 2MU/0.5	EVEROLIMUS TAB 10MG	HIZENTRA INJ 2GM/10ML
ALECENSA CAP 150MG	EVEROLIMUS TAB 2.5MG	HIZENTRA SOL 20% SOLN PR
ARCALYST INJ 220MG	EVEROLIMUS TAB 2MG	HUMIRA PSKT 40MG/0.8ML
BEXAROTENE CAP 75MG	EVEROLIMUS TAB 3MG	HUMIRA PEN PNKT 40MG/0.8ML
CAPECITABINE TAB 150MG	EVEROLIMUS TAB 5MG	HUMIRA PEN-CD/UC/HS
CAPECITABINE TAB 500MG	EVEROLIMUS TAB 5MG	STARTER PNKT 40MG/0.8ML
CAPRELSA TAB 100MG	EVEROLIMUS TAB 7.5MG	HUMIRA PEN-PS/UV/ADOL HS
CAPRELSA TAB 300MG	FARYDAK CAP 10MG	START PNKT 40MG/0.8ML
CIMZIA KIT	FARYDAK CAP 15MG	HUMIRA PSKT 40MG/0.4ML
CIMZIA PREFL KIT 200MG/ML	FARYDAK CAP 20MG	HUMIRA PEDIATRIC CROHNS
Cosentyx Sensoready Pen SOAJ	FIRMAGON INJ 80MG	START PSKT 80 MG/0.8ML
150MG/ML	FLEBOGAMMA INJ 20/200ML	&40MG/0.4ML
Cosentyx SOSY 150MG/ML	FLEBOGAMMA INJ DIF 5%	HUMIRA PEN PNKT 40MG/0.4ML
Cosentyx SOSY 75MG/0.5ML	FLEBOGAMMA INJ DIF 5%	HUMIRA PEDIATRIC CROHNS
Cosentyx UnoReady SOAJ	GAMMAGARD INJ 1GM/10ML	START PSKT 80MG/0.8ML
300MG/2ML	GAMMAGARD SD INJ 10GM HU	HUMIRA PSKT 10MG/0.1ML
CUVITRU INJ 2GM/10ML	GAMMAKED INJ 1GM/10ML	HUMIRA PSKT 20MG/0.2ML
CYCLOPHOSPH CAP 25MG	GAMMAPLEX INJ 10%	HUMIRA PEN PNKT 80MG/0.8ML
CYCLOPHOSPH CAP 50MG	GAMMAPLEX INJ 5%	HUMIRA PEN-CD/UC/HS
DASATINIB TAB 20MG	GAMUNEX-C INJ 1GM/10ML	STARTER PNKT 80MG/0.8ML
DASATINIB TAB 50MG	GILOTRIF TAB 20MG	HUMIRA PEN-PED UC START
DASATINIB TAB 70MG	GILOTRIF TAB 30MG	PNKT 80MG/0.8ML
DASATINIB TAB 80MG	GILOTRIF TAB 40MG	HUMIRA PEN-PSOR/UEVIT
DASATINIB TAB 100MG	GLEOSTINE CAP 100MG	STARTER PNKT 80 MG/0.8ML
DASATINIB TAB 140MG	GLEOSTINE CAP 10MG	&40MG/0.4ML
ELIGARD INJ 7.5MG	GLEOSTINE CAP 40MG	HYQVIA INJ 10-800
ELIGARD INJ 22.5MG	Hadlima PushTouch SOAJ	HYQVIA INJ 2.5-200
EMCYT CAP 140MG	40MG/0.4ML	HYQVIA INJ 20-1600
ENBREL INJ 25/0.5ML	Hadlima PushTouch SOAJ	HYQVIA INJ 30-2400
ENBREL INJ 50MG/ML	40MG/0.8ML	HYQVIA INJ 5-400

Hyrimoz SOAJ 40MG/0.4ML
Hyrimoz SOAJ 40MG/0.8ML
Hyrimoz SOAJ 80MG/0.8ML
Hyrimoz-Plaques Psoriasis Start
SOAJ 80 MG/0.8ML
&40MG/0.4ML
Hyrimoz SOSY 20MG/0.2ML
Hyrimoz SOSY 40MG/0.4ML
Hyrimoz SOSY 40MG/0.8ML
IBRANCE CAP 100MG
IBRANCE CAP 125MG
IBRANCE CAP 75MG
Ibrance TABS 100MG
Ibrance TABS 125MG
Ibrance TABS 75MG
ICLUSIG TAB 10MG
ICLUSIG TAB 15MG
ICLUSIG TAB 30MG
ICLUSIG TAB 45MG
IMATINIB MES TAB 100MG
IMATINIB MES TAB 400MG
IMBRUVICA CAP 140MG
JAKAFI TAB 10MG
JAKAFI TAB 15MG
JAKAFI TAB 20MG
JAKAFI TAB 25MG
JAKAFI TAB 5MG
KEVZARA INJ 150/1.14
KEVZARA INJ 150/1.14
KEVZARA INJ 200/1.14
KEVZARA INJ 200/1.14
KINERET INJ
LAPATINIB TAB 250MG
LENALIDOMIDE CAP 10 MG
LENALIDOMIDE CAP 15 MG
LENALIDOMIDE CAP 20 MG
LENALIDOMIDE CAP 25 MG
LENALIDOMIDE CAP 5 MG
LENALIDOMIDE CAPS 2.5 MG
LENVIMA CAP 10 MG
LENVIMA CAP 12MG
LENVIMA CAP 14 MG
LENVIMA CAP 18 MG
LENVIMA CAP 20 MG
LENVIMA CAP 24 MG
LENVIMA CAP 4MG
LENVIMA CAP 8 MG
LEUKERAN TAB 2MG
LEUPROLIDE INJ 1MG/0.2
LYNPARZA TAB 100MG
LYNPARZA TAB 150MG
LYSODREN TAB 500MG
MATULANE CAP 50MG
MEKINIST TAB 0.5MG
MEKINIST TAB 2MG
MELPHALAN TAB 2MG
NILUTAMIDE TAB 150MG
OCTAGAM INJ 20/200ML
OCTAGAM INJ 5GM
ODOMZO CAP 200MG
ORENCIA CLCK INJ 125MG/ML
ORENCIA INJ 125MG/ML
ORENCIA INJ 250MG
ORENCIA INJ 50/0.4
ORENCIA INJ 87.5/0.7
OTEZLA TAB 10/20/30
OTEZLA TAB 30MG
PAZOPanib HCI TABS 200MG
POMALYST CAP 1MG
POMALYST CAP 2MG
POMALYST CAP 3MG
POMALYST CAP 4MG
PRIVIGEN INJ 20GRAMS
Rinvoq TB24 15MG
Rinvoq TB24 30MG
Rinvoq TB24 45MG
RUBRACA TAB 200 MG
RUBRACA TAB 250 MG
RUBRACA TAB 300 MG
Simlandi (2 Pen) AJKT
40MG/0.4ML
Simlandi (1 Pen) AJKT
40MG/0.4ML
SIMPONI INJ 100MG/ML
SIMPONI INJ 100MG/ML
SIMPONI INJ 50/0.5ML
SIMPONI INJ 50/0.5ML
Skrizzi (150 MG Dose) PSKT
75MG/0.83ML
Skrizzi Pen SOAJ 150MG/ML
Skrizzi SOCT 180MG/1.2ML
Skrizzi SOCT 360MG/2.4ML
Skrizzi SOLN 600MG/10ML
Skrizzi SOSY 150MG/ML
SORafenib Tosylate TABS 200MG
Sprycel TABS 20MG
Sprycel TABS 50MG
Sprycel TABS 70MG
Sprycel TABS 80MG
Sprycel TABS 100MG
Sprycel TABS 140MG
Stelara SOLN 130MG/26ML
Stelara SOLN 45MG/0.5ML
Stelara SOSY 45MG/0.5ML
Stelara SOSY 90MG/ML
STIVARGA TAB 40MG
SUNItinib Malate CAPS 12.5MG
SUNItinib Malate CAPS 25MG
SUNItinib Malate CAPS 37.5MG
SUNItinib Malate CAPS 50MG
TABLOID TAB 40MG
TAFINLAR CAP 50MG
TAFINLAR CAP 75MG
Tagrisso TABS 40MG
Tagrisso TABS 80MG
TASIGNA CAP 150MG
TASIGNA CAP 200MG
TASIGNA CAP 50MG
TEMOZOLOMIDE CAP 100MG
TEMOZOLOMIDE CAP 140MG
TEMOZOLOMIDE CAP 180MG
TEMOZOLOMIDE CAP 20MG
TEMOZOLOMIDE CAP 250MG
TEMOZOLOMIDE CAP 5MG
THALOMID CAP 100MG
THALOMID CAP 150MG
THALOMID CAP 200MG
THALOMID CAP 50MG
TOREMIFENE TAB 60MG
Tremfya SOPN 100MG/ML
Tremfya SOSY 100MG/ML

TRETINOIN CAP 10MG
Verzenio TABS 100MG
Verzenio TABS 150MG
Verzenio TABS 200MG
Verzenio TABS 50MG
XALKORI CAP 200MG
XALKORI CAP 250MG
Xeljanz SOLN 1MG/ML
XELJANZ TAB 10MG
XELJANZ TAB 5MG
XELJANZ XR TAB 22MG
XELJANZ XR TAB 11MG
Xtandi CAPS 40MG
Xtandi TABS 40MG
Xtandi TABS 80MG
ZEJULA CAP 100MG
ZOLINZA CAP 100MG
ZYDELIG TAB 100MG
ZYDELIG TAB 150MG

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Acamprosate Calcium	Anti-addiction/ Substance Abuse Treatment Agents	Alcohol Deterrents/Anti-craving	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.	Agents for Chemical Dependency
Alprazolam	Anxiolytics	Benzodiazepines	ANTIANKIETY AGENTS	Benzodiazepines
Amitriptyline Hydrochloride	Antidepressants	Tricyclics	ANTIDEPRESSANTS	Tricyclic Agents
Amoxapine	Antidepressants	Tricyclics	ANTIDEPRESSANTS	Tricyclic Agents
Amphetamine	Central Nervous System Agents	Attention Deficit Hyperactivity Disorder Agents, Amphetamines	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS	Amphetamines
Aripiprazole	Antidepressants	Antidepressants, Other	ANTIPSYCHOTICS/ANTIMANIC AGENTS	Quinolinone Derivatives
Aripiprazole	Antipsychotics	2nd Generation/Atypical2	ANTIPSYCHOTICS/ANTIMANIC AGENTS	Quinolinone Derivatives
Aripiprazole	Bipolar Agents	Bipolar Agents, Other	ANTIPSYCHOTICS/ANTIMANIC AGENTS	Quinolinone Derivatives
Asenapine	Antipsychotics	2nd Generation/Atypical2	ANTIPSYCHOTICS/ANTIMANIC AGENTS	Dibenzapines
Asenapine	Bipolar Agents	Bipolar Agents, Other	ANTIPSYCHOTICS/ANTIMANIC AGENTS	Dibenzapines
Atomoxetine Hydrochloride	Central Nervous System Agents	Attention Deficit Hyperactivity Disorder Agents, Non-amphetamines	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS	Attention-Deficit/Hyperactivity Disorder (ADHD) Agents
Benzotropine Mesylate	Antiparkinson Agents	Anticholinergics	ANTIPARKINSON AND RELATED THERAPY AGENTS	Antiparkinson Anticholinergics
Brexipiprazole	Antipsychotics	2nd Generation/Atypical2	ANTIPSYCHOTICS/ANTIMANIC AGENTS	Quinolinone Derivatives
Buprenorphine	Anti-addiction/ Substance Abuse Treatment Agents	Opioid Dependence	ANALGESICS - OPIOID	Opioid Partial Agonists
Buprenorphine/ Naloxone Hydrochloride	Anti-addiction/ Substance Abuse Treatment Agents	Opioid Dependence	ANALGESICS - OPIOID	Opioid Partial Agonists
Bupropion Hydrobromide	Antidepressants	Antidepressants, Other	ANTIDEPRESSANTS	Antidepressants - Misc.

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Bupropion Hydrochloride	Anti-addiction/ Substance Abuse Treatment Agents	Smoking Cessation Agents	ANTIDEPRESSANTS	Antidepressants - Misc.
Bupropion Hydrochloride	Antidepressants	Antidepressants, Other	ANTIDEPRESSANTS	Antidepressants - Misc.
Bupropion Hydrochloride	Anxiolytics	Anxiolytics, Other	ANTI-ANXIETY AGENTS	Anti-anxiety Agents - Misc.
Carbamazepine	Anticonvulsants	Sodium Channel Agents	ANTICONVULSANTS	Anticonvulsants - Misc.
Carbamazepine	Bipolar Agents	Mood Stabilizers	ANTICONVULSANTS	Anticonvulsants - Misc.
Cariprazine Hydrochloride	Antipsychotics	2nd Generation/ Atypical2	ANTIPSYCHOTICS/ ANTIMANIC AGENTS	Antipsychotics - Misc.
Chlordiazepoxide	Anxiolytics	Benzodiazepines	ANTI-ANXIETY AGENTS	Benzodiazepines
Chlordiazepoxide/Am itriptyline Hydrochloride	Antidepressants	Antidepressants, Other	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.	Combination Psychotherapeutics
Chlorpromazine	Antipsychotics	1st Generation/ Typical1	ANTIPSYCHOTICS/ ANTIMANIC AGENTS	Phenothiazines
Citalopram Hydrobromide	Antidepressants	SSRIs/SNRIs (Selective Serotonin Reuptake Inhibitors/ Serotonin and Norepinephrine Reuptake Inhibitors)	ANTIDEPRESSANTS	Selective Serotonin Reuptake Inhibitors (SSRIs)
Clomipramine Hydrochloride	Antidepressants	Tricyclics	ANTIDEPRESSANTS	Tricyclic Agents
Clonazepam	Anxiolytics	Benzodiazepines	ANTICONVULSANTS	Anticonvulsants - Benzodiazepines
Clonidine Hydrochloride	Central Nervous System Agents	Attention Deficit Hyperactivity Disorder Agents, Non-amphetamines	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS	Attention-Deficit/Hyperactivity Disorder (ADHD) Agents
Clorazepate Dipotassium	Anxiolytics	Benzodiazepines	ANTI-ANXIETY AGENTS	Benzodiazepines

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Clozapine	Antipsychotics	Treatment-Resistant	ANTIPSYCHOTICS/ ANTIMANIC AGENTS	Dibenzapines
Desipramine Hydrochloride	Antidepressants	Tricyclics	ANTIDEPRESSANTS	Tricyclic Agents
Desvenlafaxine	Antidepressants	SSRIs/SNRIs (Selective Serotonin Reuptake Inhibitors/ Serotonin and Norepinephrine Reuptake Inhibitors)	ANTIDEPRESSANTS	Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)
Deutetrabenazine	Central Nervous System Agents	Central Nervous System Agents, Other	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.	Movement Disorder Drug Therapy
Dexmethylphenidate Hydrochloride	Central Nervous System Agents	Attention Deficit Hyperactivity Disorder Agents, Non-amphetamines	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS	Stimulants - Misc.
Dextroamphetamine Saccharate/ Amphetamine Aspartate/ Dextroamphetamine Sulfate/ Amphetamine Sulfate	Central Nervous System Agents	Attention Deficit Hyperactivity Disorder Agents, Amphetamines	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS	Amphetamines
Dextroamphetamine Sulfate	Central Nervous System Agents	Attention Deficit Hyperactivity Disorder Agents, Amphetamines	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS	Amphetamines
Diazepam	Anxiolytics	Benzodiazepines	ANTI-ANXIETY AGENTS	Benzodiazepines
Diphenhydramine Hydrochloride	Antiparkinson Agents	Anticholinergics	ANTI-HISTAMINES	Antihistamines - Ethanolamines
Disulfiram	Anti-addiction/ Substance Abuse Treatment Agents	Alcohol Deterrents/Anti-craving	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.	Agents for Chemical Dependency

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Divalproex sodium	Anticonvulsants	Anticonvulsants, Other	ANTICONVULSANTS	Valproic Acid
Divalproex Sodium	Bipolar Agents	Mood Stabilizers	ANTICONVULSANTS	Valproic Acid
Doxepin Hydrochloride	Antidepressants	Tricyclics	ANTIDEPRESSANTS	Tricyclic Agents
Doxepin Hydrochloride	Anxiolytics	Anxiolytics, Other	ANTIDEPRESSANTS	Tricyclic Agents
Duloxetine Hydrochloride	Antidepressants	SSRIs/SNRIs (Selective Serotonin Reuptake Inhibitors/ Serotonin and Norepinephrine Reuptake Inhibitors)	ANTIDEPRESSANTS	Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)
Duloxetine Hydrochloride	Anxiolytics	SSRIs/SNRIs (Selective Serotonin Reuptake Inhibitors/ Serotonin and Norepinephrine Reuptake Inhibitors)	ANTIDEPRESSANTS	Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)
Escitalopram Oxalate	Antidepressants	SSRIs/SNRIs (Selective Serotonin Reuptake Inhibitors/ Serotonin and Norepinephrine Reuptake Inhibitors)	ANTIDEPRESSANTS	Selective Serotonin Reuptake Inhibitors (SSRIs)

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Escitalopram Oxalate	Anxiolytics	SSRIs/SNRIs (Selective Serotonin Reuptake Inhibitors/ Serotonin and Norepinephrine Reuptake Inhibitors)	ANTIDEPRESSANTS	Selective Serotonin Reuptake Inhibitors (SSRIs)
Esketamine Hydrochloride	Antidepressants	Antidepressants, Other	ANTIDEPRESSANTS	N-Methyl-D-aspartic acid (NMDA) Receptor Antagonists
Eszolam	Sleep Disorder Agents	Sleep Promoting Agents	HYPNOTICS/SEDATIVES/ SLEEP DISORDER AGENTS	Non-Barbiturate Hypnotics
Eszopiclone	Sleep Disorder Agents	Sleep Promoting Agents	HYPNOTICS/SEDATIVES/ SLEEP DISORDER AGENTS	Non-Barbiturate Hypnotics
Fluoxetine Hydrochloride	Antidepressants	SSRIs/SNRIs (Selective Serotonin Reuptake Inhibitors/ Serotonin and Norepinephrine Reuptake Inhibitors)	ANTIDEPRESSANTS	Selective Serotonin Reuptake Inhibitors (SSRIs)
Fluphenazine	Antipsychotics	1st Generation/ Typical1	ANTIPSYCHOTICS/ ANTIMANIC AGENTS	Phenothiazines
Flurazepam	Sleep Disorder Agents	Sleep Promoting Agents	HYPNOTICS/SEDATIVES/ SLEEP DISORDER AGENTS	Non-Barbiturate Hypnotics
Fluvoxamine Maleate	Antidepressants	SSRIs/SNRIs (Selective Serotonin Reuptake Inhibitors/ Serotonin and Norepinephrine Reuptake Inhibitors)	ANTIDEPRESSANTS	Selective Serotonin Reuptake Inhibitors (SSRIs)

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Gabapentin	Anticonvulsants	Gamma-aminobutyric Acid (GABA) Augmenting Agents	ANTICONVULSANTS	Anticonvulsants - Misc.
Guanfacine Hydrochloride	Central Nervous System Agents	Attention Deficit Hyperactivity Disorder Agents, Non-amphetamines	ADHD/ANTI-NARCOLEPSY/ ANTI-OBESITY/ ANOREXIANTS	Attention-Deficit/Hyperactivity Disorder (ADHD) Agents
Haloperidol	Antipsychotics	1st Generation/ Typical1	ANTIPSYCHOTICS/ ANTIMANIC AGENTS	Butyrophenones
Hydroxyzine Hydrochloride	Anxiolytics	Anxiolytics, Other	ANTIANSIETY AGENTS	Antianxiety Agents - Misc.
Hydroxyzine Pamoate	Anxiolytics	Anxiolytics, Other	ANTIANSIETY AGENTS	Antianxiety Agents - Misc.
Iloperidone	Antipsychotics	2nd Generation/ Atypical2	ANTIPSYCHOTICS/ ANTIMANIC AGENTS	Benzisoxazoles
Imipramine Hydrochloride	Antidepressants	Tricyclics	ANTIDEPRESSANTS	Tricyclic Agents
Imipramine Pamoate	Antidepressants	Tricyclics	ANTIDEPRESSANTS	Tricyclic Agents
Isocarboxazid	Antidepressants	Monoamine Oxidase Inhibitors	ANTIDEPRESSANTS	Monoamine Oxidase Inhibitors (MAOIs)
Lamotrigine	Anticonvulsants	Anticonvulsants, Other	ANTICONVULSANTS	Anticonvulsants - Misc.
Lamotrigine	Bipolar Agents	Mood Stabilizers	ANTICONVULSANTS	Anticonvulsants - Misc.
Liothyronine (for augmentation in severe depression)	Hormonal Agents, Stimulant/ Replacement/ Modifying (Thyroid)	Not applicable – no class assigned by USP	THYROID AGENTS	Thyroid Hormones
Lisdexamfetamine Dimesylate	Central Nervous System Agents	Attention Deficit Hyperactivity Disorder Agents, Amphetamines	ADHD/ANTI-NARCOLEPSY/ ANTI-OBESITY/ ANOREXIANTS	Amphetamines
Lithium Carbonate	Bipolar Agents	Mood Stabilizers	ANTIPSYCHOTICS/ ANTIMANIC AGENTS	Antimanic Agents

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Lithium Citrate	Bipolar Agents	Mood Stabilizers	ANTIPSYCHOTICS/ ANTIMANIC AGENTS	Antimanic Agents
Lofexidine	Anti-addiction/ Substance Abuse Treatment Agents	Opioid Dependence	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.	Agents for Chemical Dependency
Lorazepam	Anxiolytics	Benzodiazepines	ANTIANSIETY AGENTS	Benzodiazepines
Loxapine	Antipsychotics	1st Generation/ Typical1	ANTIPSYCHOTICS/ ANTIMANIC AGENTS	Dibenzapines
Lurasidone	Bipolar Agents	Bipolar Agents, Other	ANTIPSYCHOTICS/ ANTIMANIC AGENTS	Antipsychotics - Misc.
Lurasidone Hydrochloride	Antipsychotics	2nd Generation/ Atypical2	ANTIPSYCHOTICS/ ANTIMANIC AGENTS	Antipsychotics - Misc.
Maprotiline Hydrochloride	Antidepressants	Antidepressants, Other	ANTIDEPRESSANTS	Antidepressants - Misc.
Meprobamate	Anxiolytics	Anxiolytics, Other	ANTIANSIETY AGENTS	Antianxiety Agents - Misc.
Methamphetamine Hydrochloride	Central Nervous System Agents	Attention Deficit Hyperactivity Disorder Agents, Amphetamines	ADHD/ANTI-NARCOLEPSY/ ANTI-OBESITY/ ANOREXIANTS	Amphetamines
Methylphenidate Hydrochloride	Central Nervous System Agents	Attention Deficit Hyperactivity Disorder Agents, Non-amphetamines	ADHD/ANTI-NARCOLEPSY/ ANTI-OBESITY/ ANOREXIANTS	Stimulants - Misc.
Midazolam	Anxiolytics	Benzodiazepines	ANTIANSIETY AGENTS	Benzodiazepines
Mirtazapine	Antidepressants	Antidepressants, Other	ANTIDEPRESSANTS	Alpha-2 Receptor Antagonists (Tetracyclics)
Naloxone Hydrochloride	Anti-addiction/ Substance Abuse Treatment Agents	Opioid Reversal Agents	ANTIDOTES AND SPECIFIC ANTAGONISTS	Opioid Antagonists
Naltrexone	Anti-addiction/ Substance Abuse Treatment Agents	Alcohol Deterrents/Anti-craving	ANTIDOTES AND SPECIFIC ANTAGONISTS	Opioid Antagonists
Naltrexone	Anti-addiction/ Substance Abuse Treatment Agents	Opioid Dependence	ANTIDOTES AND SPECIFIC ANTAGONISTS	Opioid Antagonists
Naltrexone Hydrochloride	Anti-addiction/ Substance Abuse Treatment Agents	Alcohol Deterrents/Anti-craving	ANTIDOTES AND SPECIFIC ANTAGONISTS	Opioid Antagonists

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Nefazodone Hydrochloride	Antidepressants	SSRIs/SNRIs (Selective Serotonin Reuptake Inhibitors/ Serotonin and Norepinephrine Reuptake Inhibitors)	ANTIDEPRESSANTS	Serotonin Modulators
Nicotine Polacrilex	Anti-addiction/ Substance Abuse Treatment Agents	Smoking Cessation Agents	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.	Smoking Deterrents
Nortriptyline Hydrochloride	Antidepressants	Tricyclics	ANTIDEPRESSANTS	Tricyclic Agents
Olanzapine	Antipsychotics	2nd Generation/ Atypical2	ANTIPSYCHOTICS/ ANTIMANIC AGENTS	Dibenzapines
Olanzapine	Bipolar Agents	Bipolar Agents, Other	ANTIPSYCHOTICS/ ANTIMANIC AGENTS	Dibenzapines
Olanzapine Pamoate	Bipolar Agents	Bipolar Agents, Other	ANTIPSYCHOTICS/ ANTIMANIC AGENTS	Dibenzapines
Olanzapine/ Fluoxetine	Antidepressants	Antidepressants, Other	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.	Combination Psychotherapeutics
Oxazepam	Anxiolytics	Benzodiazepines	ANTI ANXIETY AGENTS	Benzodiazepines
Oxcarbazepine	Anticonvulsants	Sodium Channel Agents	ANTICONVULSANTS	Anticonvulsants - Misc.
Paliperidone	Antipsychotics	2nd Generation/ Atypical2	ANTIPSYCHOTICS/ ANTIMANIC AGENTS	Benzisoxazoles
Paroxetine Hydrochloride	Antidepressants	SSRIs/SNRIs (Selective Serotonin Reuptake Inhibitors/ Serotonin and Norepinephrine Reuptake Inhibitors)	ANTIDEPRESSANTS	Selective Serotonin Reuptake Inhibitors (SSRIs)

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Paroxetine Hydrochloride	Anxiolytics	SSRIs/SNRIs (Selective Serotonin Reuptake Inhibitors/ Serotonin and Norepinephrine Reuptake Inhibitors)	ANTIDEPRESSANTS	Selective Serotonin Reuptake Inhibitors (SSRIs)
Perphenazine	Antipsychotics	1st Generation/ Typical1	ANTIPSYCHOTICS/ ANTIMANIC AGENTS	Phenothiazines
Perphenazine/ Amitriptyline Hydrochloride	Antidepressants	Antidepressants, Other	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.	Combination Psychotherapeutics
Phenelzine Sulfate	Antidepressants	Monoamine Oxidase Inhibitors	ANTIDEPRESSANTS	Monoamine Oxidase Inhibitors (MAOIs)
Pimavanserin Tartrate	Antipsychotics	2nd Generation/ Atypical2	ANTIPSYCHOTICS/ ANTIMANIC AGENTS	Antipsychotics - Misc.
Pimozide	Antipsychotics	1st Generation/ Typical1	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.	Psychotherapeutic and Neurological Agents - Misc.
Pramipexole Dihydrochloride (for augmentation in severe depression)	Antiparkinson Agents	Dopamine Agonists	ANTIPARKINSON AND RELATED THERAPY AGENTS	Antiparkinson Dopaminergics
Prazosin Hydrochloride (for treatment of PTSD)	Cardiovascular Agents	Alpha-adrenergic Blocking Agents	ANTIHYPERTENSIVES	Antiadrenergic Antihypertensives
Pregabalin	Anticonvulsants	Gamma-aminobutyric Acid (GABA) Augmenting Agents	ANTICONVULSANTS	Anticonvulsants - Misc.
Prochlorperazine	Antipsychotics	1st Generation/ Typical1	ANTIPSYCHOTICS/ ANTIMANIC AGENTS	Phenothiazines
Protriptyline Hydrochloride	Antidepressants	Tricyclics	ANTIDEPRESSANTS	Tricyclic Agents
Quazepam	Sleep Disorder Agents	Sleep Promoting Agents	HYPNOTICS/SEDATIVES/ SLEEP DISORDER AGENTS	Non-Barbiturate Hypnotics

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Quetiapine Fumarate	Antidepressants	Antidepressants, Other	ANTIPSYCHOTICS/ ANTIMANIC AGENTS	Dibenzapines
Quetiapine Fumarate	Antipsychotics	2nd Generation/ Atypical2	ANTIPSYCHOTICS/ ANTIMANIC AGENTS	Dibenzapines
Quetiapine Fumarate	Bipolar Agents	Bipolar Agents, Other	ANTIPSYCHOTICS/ ANTIMANIC AGENTS	Dibenzapines
Risperidone	Antipsychotics	2nd Generation/ Atypical2	ANTIPSYCHOTICS/ ANTIMANIC AGENTS	Benzisoxazoles
Risperidone	Bipolar Agents	Bipolar Agents, Other	ANTIPSYCHOTICS/ ANTIMANIC AGENTS	Benzisoxazoles
Selegiline	Antidepressants	Monoamine Oxidase Inhibitors	ANTIDEPRESSANTS	Monoamine Oxidase Inhibitors (MAOIs)
Sertraline Hydrochloride	Antidepressants	SSRIs/SNRIs (Selective Serotonin Reuptake Inhibitors/ Serotonin and Norepinephrine Reuptake Inhibitors)	ANTIDEPRESSANTS	Selective Serotonin Reuptake Inhibitors (SSRIs)
Sertraline Hydrochloride	Anxiolytics	SSRIs/SNRIs (Selective Serotonin Reuptake Inhibitors/ Serotonin and Norepinephrine Reuptake Inhibitors)	ANTIDEPRESSANTS	Selective Serotonin Reuptake Inhibitors (SSRIs)
Suvorexant	Sleep Disorder Agents	Sleep Promoting Agents	HYPNOTICS/SEDATIVES/ SLEEP DISORDER AGENTS	Orexin Receptor Antagonists
Temazepam	Sleep Disorder Agents	Sleep Promoting Agents	HYPNOTICS/SEDATIVES/ SLEEP DISORDER AGENTS	Non-Barbiturate Hypnotics
Thioridazine	Antipsychotics	1st Generation/ Typical1	ANTIPSYCHOTICS/ ANTIMANIC AGENTS	Phenothiazines
Thiothixene	Antipsychotics	1st Generation/ Typical1	ANTIPSYCHOTICS/ ANTIMANIC AGENTS	Thioxanthenes

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Topiramate	Anticonvulsants	Anticonvulsants, Other	ANTICONVULSANTS	Anticonvulsants - Misc.
Tranlycypromine Sulfate	Antidepressants	Monoamine Oxidase Inhibitors	ANTIDEPRESSANTS	Monoamine Oxidase Inhibitors (MAOIs)
Trazodone Hydrochloride	Antidepressants	SSRIs/SNRIs (Selective Serotonin Reuptake Inhibitors/ Serotonin and Norepinephrine Reuptake Inhibitors)	ANTIDEPRESSANTS	Serotonin Modulators
Triazolam	Sleep Disorder Agents	Sleep Promoting Agents	HYPNOTICS/SEDATIVES/ SLEEP DISORDER AGENTS	Non-Barbiturate Hypnotics
Trifluoperazine	Antipsychotics	1st Generation/ Typical1	ANTIPSYCHOTICS/ANTIM ANIC AGENTS	Phenothiazines
Trihexyphenidyl Hydrochloride	Antiparkinson Agents	Anticholinergics	ANTIPARKINSON AND RELATED THERAPY AGENTS	Antiparkinson Anticholinergics
Trimipramine Maleate	Antidepressants	Tricyclics	ANTIDEPRESSANTS	Tricyclic Agents
Valbenazine	Central Nervous System Agents	Central Nervous System Agents, Other	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.	Movement Disorder Drug Therapy
Valproic Acid	Anticonvulsants	Anticonvulsants, Other	ANTICONVULSANTS	Valproic Acid
Varenicline Tartrate	Anti-addiction/ Substance Abuse Treatment Agents	Smoking Cessation Agents	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.	Smoking Deterrents
Venlafaxine Hydrochloride	Antidepressants	SSRIs/SNRIs (Selective Serotonin Reuptake Inhibitors/ Serotonin and Norepinephrine Reuptake Inhibitors)	ANTIDEPRESSANTS	Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)

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Venlafaxine Hydrochloride	Anxiolytics	SSRIs/SNRIs (Selective Serotonin Reuptake Inhibitors/ Serotonin and Norepinephrine Reuptake Inhibitors)	ANTIDEPRESSANTS	Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)
Zaleplon	Sleep Disorder Agents	Sleep Promoting Agents	HYPNOTICS/SEDATIVES/ SLEEP DISORDER AGENTS	Non-Barbiturate Hypnotics
Ziprasidone	Antipsychotics	2nd Generation/ Atypical2	ANTIPSYCHOTICS/ ANTIMANIC AGENTS	Antipsychotics - Misc.
Ziprasidone Hydrochloride	Bipolar Agents	Bipolar Agents, Other	ANTIPSYCHOTICS/ ANTIMANIC AGENTS	Antipsychotics - Misc.
Zolpidem	Sleep Disorder Agents	Sleep Promoting Agents	HYPNOTICS/SEDATIVES/ SLEEP DISORDER AGENTS	Non-Barbiturate Hypnotics