

This is a comprehensive list of medications that may be required by individuals who have HIV or AIDS. To access these medications funded by the Ryan White Part A/MAI Program, eligible clients must also reside permanently in Miami-Dade County and have a gross household income below 400% of the most current Federal Poverty Level (FPL) guidelines used by the local Part A/MAI Program.

There may be special situations where medications are needed that are not on this list (i.e., HIV-related heart disease or HIV-related kidney failure) and there is a mechanism set up to deal with such extenuating circumstances. However, additions to the Formulary are currently restricted to life-saving or cost-saving medications.

**IMPORTANT NOTES:**

<sup>1</sup> Effective March 1, 2016, use local drug coding system (i.e., "RW Miami Pharma Code") as developed by Miami-Dade County Office of Management and Budget.

<sup>2</sup> Medications assigned a letter notation "A" are available through the Florida AIDS Drug Assistance Program (ADAP). These medications will only be covered by the County's Ryan White Part A or Minority AIDS Initiative Programs if the ADAP has a waitlist or the medications are not available through ADAP. In addition, if another letter notation is indicated, the specified criteria under the designated letter must be met. Refer to the accompanying Comments/Notations attachment for more details on each letter notation. Green shading is a new addition. Red shading is a new notation.

<sup>3</sup> Prescription Drug referrals will be good for the life of the prescription and may be written for one (1) initial (original) and no more than five (5) monthly refills for medications listed on this Formulary as deemed necessary by the client's physician and as allowable by State of Florida law; unless the client becomes ineligible for Ryan White Part A or MAI Program-funded services.

<sup>4</sup> Vaccines (Hep A, Hep B, Pneumovax, etc.) have been removed from the Ryan White Program Prescription Drug Formulary. Where applicable, vaccines may be provided and billed for under the Ryan White Program outpatient medical care services using the appropriate Current Procedural Terminology (CPT) or Healthcare Common Procedure Coding System (HCPCS) code, only if these vaccines are not available from any other funding source (e.g., Medicaid, ADAP, private insurance, etc.).

<sup>5</sup> All medications dispensed should be generic unless a generic is not available. However, Ryan White Part A/MAI Program-funded prescription drug service providers must use the most cost-effective product, either brand or generic, whichever is less expensive at the time of dispensing.

<sup>6</sup> There is no limitation on dosage or formulation unless otherwise noted specifically on this Formulary.

<sup>7</sup> The Ryan White Program must always be used as the payer of last resort.

<sup>8</sup> Effective August 19, 2019, all antiretrovirals will be automatically added to the Ryan White Program Part A Prescription Drug Formulary once they are added to the Florida ADAP Formulary, unless the Part A Recipient (i.e., Miami-Dade County) deems discussion with the Partnership necessary.

RYAN WHITE PART A PROGRAM PRESCRIPTION DRUG FORMULARY (Sorted by RW Miami Pharma-Code)

Therapeutic Classification	Pharmacologic Classification	Brand Name(s)	Generic Name(s)	RW Miami Pharma-Code	Notation	TTRA Med? Yes/No
Device	Other	ACE Aerosol Cloud Enhancer®	inhaler spacer (one time only)	A4627	A	No
Analgesic	Miscellaneous	Tylenol®	acetaminophen	RX0100	A,QQ	No
Analgesic	Opiate Agonist	Percocet® 5/325mg	oxycodone & acetaminophen 5/325mg	RX0102	Y	No
Analgesic	Opiate Agonist	Roxicodone®	oxycodone	RX0103	Y	No
Analgesic Combination	Opiate Agonist	Tylenol #3®, Tylenol #4®	acetaminophen and codeine	RX0105		No
Analgesic; Anti-inflammatory	Nonsteroidal Anti-inflammatory Drug (NSAID)	Advil®, Motrin®	ibuprofen	RX0106	A,RR	No
Analgesic; Anti-inflammatory	Nonsteroidal Anti-inflammatory Drug (NSAID)	Naprosyn®	naproxen	RX0107	A,RR	No
Analgesic; Antiplatelet Agent	Salicylate	Bayer®, Ecotrin®	aspirin	RX0108	A,QQ	No
Antidiabetic Agent	Biguanide	Glucophage®, Glucophage XR®	metformin, metformin ER	RX0200	A	No
Antidiabetic Agent	Sulfonylurea	Glucotrol®, Glucotrol XL®	glipizide, glipizide ER	RX0201	A	No
Antidiabetic Agent	Sulfonylurea	Diabeta®	glyburide	RX0202	A	No
Antidiabetic Agent, Insulin	Insulin 70/30	Humulin® 70/30 and Novolin® 70/30	insulin NPH and insulin regular	RX0203	A	No
Antidiabetic Agent, Insulin	Insulin, Intermediate-Acting	Humulin N® and Novolin N®	isophane insulin	RX0204	A	No
Antidiabetic Agent, Insulin	Insulin, Intermediate-to-Long-Acting	Levemir®	insulin detemir injection	RX0205	A,Z	No

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Antidiabetic Agent, Insulin	Insulin, Long-Acting	Lantus®	insulin glargine injection	RX0206	A,Z	No
Antidiabetic Agent, Insulin	Insulin, Rapid-Acting	Humalog®	insulin lispro injection	RX0207	A,Z	No
Antidiabetic Agent, Insulin	Insulin, Rapid-Acting	NovoLog®	insulin aspart injection	RX0208	A,Z	No
Antidiabetic Agent, Insulin	Insulin, Short-Acting	Humulin R® and Novolin R®	insulin regular	RX0209	A	No
Anti-HIV Agent	Antiretroviral Agent-CCR5 Antagonist	Selzentry®	maraviroc (MVC)	RX0300	A,W,LL	No
Anti-HIV Agent	Antiretroviral Agent-Fusion Protein Inhibitor	Fuzeon®	enfuvirtide (ENF, T-20)	RX0301	A,U	No
Anti-HIV Agent	Antiretroviral Agent-Integrase Strand Transfer Inhibitor	ISENTRESS®, ISENTRESS HD®	raltegravir (RAL), raltegravir HD (RAL HD)	RX0302	A	Yes
Anti-HIV Agent	Antiretroviral Agent-Non-Nucleoside Reverse Transcriptase Inhibitor	Intelence®	etravirine	RX0303	A,X	No
Anti-HIV Agent	Antiretroviral Agent-Non-Nucleoside Reverse Transcriptase Inhibitor	Sustiva®	efavirenz (EFV)	RX0305	A	No
Anti-HIV Agent	Antiretroviral Agent-Non-Nucleoside Reverse Transcriptase Inhibitor	Viramune®, Viramune XR®	nevirapine (NVP), nevirapine XR (NVP)	RX0306	A	No
Anti-HIV Agent	Antiretroviral Agent-Nucleoside Reverse Transcriptase Inhibitor	Emtriva®	emtricitabine (FTC)	RX0307	A	No
Anti-HIV Agent	Antiretroviral Agent-Nucleoside Reverse Transcriptase Inhibitor	Epivir®	lamivudine (3TC)	RX0308	A	No
Anti-HIV Agent	Antiretroviral Agent-Nucleoside Reverse Transcriptase Inhibitor	Retrovir®	zidovudine (AZT)	RX0309	A	No
Anti-HIV Agent	Antiretroviral Agent-Nucleoside Reverse Transcriptase Inhibitor	Ziagen®	abacavir (ABC)	RX0312	A,UU	No

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Anti-HIV Agent	Antiretroviral Agent-Nucleotide Reverse Transcriptase Inhibitor	Viread®	tenofovir disoproxil fumarate (TDF)	RX0313	A	No
Anti-HIV Agent	Antiretroviral Agent-Protease Inhibitor	Aptivus®	tipranavir (TPV)	RX0314	A,V	No
Anti-HIV Agent	Antiretroviral Agent-Protease Inhibitor	Crixivan®	indinavir (IDV)	RX0315	A	No
Anti-HIV Agent	Antiretroviral Agent-Protease Inhibitor	Invirase®	saquinavir (SQV)	RX0316	A	No
Anti-HIV Agent	Antiretroviral Agent-Protease Inhibitor	Lexiva®	fosamprenavir calcium (FPV)	RX0317	A	No
Anti-HIV Agent	Antiretroviral Agent-Protease Inhibitor	Norvir®	ritonavir (RTV)	RX0318	A	No
Anti-HIV Agent	Antiretroviral Agent-Protease Inhibitor	Prezista®	darunavir (DRV)	RX0319	A	Yes
Anti-HIV Agent	Antiretroviral Agent-Protease Inhibitor	Reyataz®	atazanavir (ATV)	RX0320	A	No
Anti-HIV Agent	Antiretroviral Agent-Protease Inhibitor	Viracept®	nelfinavir (NFV)	RX0321	A	No
Anti-HIV Agent	Antiretroviral Agent-Integrase Strand Transfer Inhibitor	Tivicay®	dolutegravir (DTG)	RX0322	SS,A	Yes
Anti-HIV Agent	Antiretroviral Agent-Non-Nucleoside Reverse Transcriptase Inhibitors	Edurant®	rilpivirine (RPV)	RX0323	A,II	No
Anti-HIV Agent Combination	Antiretroviral Agent, Nucleos[t]ide Reverse Transcriptase Inhibitor	Truvada®	emtricitabine / tenofovir disoproxil fumarate (FTC / TDF)	RX0410	A	Yes
Anti-HIV Agent Combination	Antiretroviral Agent-Antiretroviral, Integrase strand transfer inhibitor, pharmacokinetic enhancer, nucleos(t)ide analog HIV-1 reverse transcriptase inhibitors	Stribild	cobicistat / elvitegravir / emtricitabine / tenofovir disoproxil fumarate (EVG / COBI / FTC / TDF)	RX0411	A,OO	No

RYAN WHITE PART A PROGRAM PRESCRIPTION DRUG FORMULARY (Sorted by RW Miami Pharma-Code)

Therapeutic Classification	Pharmacologic Classification	Brand Name(s)	Generic Name(s)	RW Miami Pharma-Code	Notation	TTRA Med? Yes/No
Anti-HIV Agent Combination	Antiretroviral Agent-Non-nucleoside reverse transcriptase inhibitor (NNRTI) and nucleos [t]ide reverse transcriptase inhibitors (NRTIs)	Complera®	emtricitabine / rilpivirine / tenofovir disoproxil fumarate (FTC / RPV / TDF)	RX0412	A, KK	No
Anti-HIV Agent Combination	Antiretroviral Agent-Nucleoside Reverse Transcriptase Inhibitor	Trizivir®	abacavir / lamivudine / zidovudine (ABC / 3TC / AZT)	RX0413	A, UU	No
Anti-HIV Agent Combination	Antiretroviral Agent-Nucleoside Reverse Transcriptase Inhibitor	Combivir®	lamivudine / zidovudine (3TC / AZT)	RX0414	A	No
Anti-HIV Agent Combination	Antiretroviral Agent-Nucleoside Reverse Transcriptase Inhibitor	Epzicom®	abacavir / lamivudine (ABC / 3TC)	RX0415	A, UU	No
Anti-HIV Agent Combination	Antiretroviral Agent-Nucleoside Reverse Transcriptase Inhibitors Plus Integrase Strand Transfer Inhibitor	Triumeq®	abacavir / dolutegravir / lamivudine (DTG / ABC / 3TC)	RX0416	A, UU, VV	No
Anti-HIV Agent Combination	Anti-Retroviral Agent-Nucleoside Reverse Transcriptase Inhibitors, Non-Nucleoside Reverse Transcriptase Inhibitors Combination	Atripla®	efavirenz / emtricitabine / tenofovir (EFV / FTC / TDF)	RX0417	A	No
Anti-HIV Agent Combination	Antiretroviral Agent-Protease Inhibitor	Kaletra®	lopinavir / ritonavir (LPV / RTV)	RX0418	A	No
Anti-HIV Agent Combination	Antiretroviral Agent-Protease Inhibitor and Pharmacokinetic Enhancer Combination	Evotaz®	atazanavir / cobicistat (ATV / COBI)	RX0419	A, WW	No
Anti-HIV Agent Combination	Antiretroviral Agent-Protease Inhibitor and Pharmacokinetic Enhancer Combination	Prezcobix®	darunavir / cobicistat (DRV / COBI)	RX0420	A, XX	Yes
Anti-HIV Agent Combination	Integrase Inhibitor, CYP3A Inhibitor, Nucleoside Analog Reverse Transcriptase Inhibitors (NRTIs)	Genvoya®	elvitegravir / cobicistat / emtricitabine / tenofovir alafenamide (EVG / COBI / FTC / TAF)	RX0421	A, ZZ	No
Anti-HIV Agent Combination	Antiretroviral Agent, Non-nucleoside reverse transcriptase inhibitor (NNRTI) and nucleoside reverse transcriptase inhibitors (NRTIs)	Odefsey®	emtricitabine / rilpivirine / tenofovir alafenamide (RPV / FTC / TAF)	RX0422	A, BBB	No

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Anti-HIV Agent Combination	Antiretroviral Agent, Non-nucleoside Reverse Transcriptase Inhibitor (NNRTI) and Nucleoside Reverse Transcriptase Inhibitors (NRTIs)	Descovy®	emtricitabine / tenofovir alafenamide (FTC / TAF)	RX0423	A,CCC	Yes
Anti-HIV Agent Combination	Integrase Strand Transfer Inhibitors / Nucleoside Reverse Transcriptase Inhibitors (INSTI / NRTI combo)	Juluca®	dolutegravir 50 mg / rilpivirine 25 mg	RX0424	A	No
Anti-HIV Agent Combination	Antiretroviral Agent - Integrase Strand Transfer Inhibitors / Nucleoside Reverse Transcriptase Inhibitors (INSTI / NRTI combo)	Biktarvy®	bictegravir / emtricitabine / tenofovir alafenamide (BIC / TAF / FTC)	RX0425	A, GGG	Yes
Anti-HIV Agent Combination	Protease Inhibitor / Nucleoside Reverse Transcriptase Inhibitor (PI / NRTI Combo)	Symtuza®	darunavir / cobicistat / emtricitabine / and tenofovir alafenamide	RX0426	A	No
Anti-HIV Agent Combination	Integrase Strand Transfer Inhibitor / Nucleoside Reverse Transcriptase Inhibitor (INSTI / NRTI Combo)	Dovato®	dolutegravir / lamivudine	RX0427	A	Yes
Anti-infective	Antibiotic-Antimalarial	Daraprim®	pyrimethamine	RX0500	A	No
Anti-infective	Antibiotic-Cephalosporin (1st Gen)	Keflex®	cephalexin	RX0501		No
Anti-infective	Antibiotic-Lincosamide	Cleocin®	clindamycin capsules	RX0502		No
Anti-infective	Antibiotic-Macrolide	Biaxin®	clarithromycin	RX0503	A,DD	No
Anti-infective	Antibiotic-Macrolide	Zithromax®	azithromycin	RX0504	A	No
Anti-infective	Antibiotic-Penicillin	Amoxil®	amoxicillin	RX0505		No

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Anti-infective	Antibiotic-Penicillin	Augmentin®	amoxicillin / clavulanate	RX0506		No
Anti-infective	Antibiotic-Penicillin	Penicillin VK®, Bicillin L-A®, Penicillin G®, Benzathine Penicillin G®, Penicillin G Potassium®	penicillin (VK, benzathine, aqueous)	RX0507		No
Anti-infective	Antibiotic-Quinolone	Cipro®	ciprofloxacin	RX0508		No
Anti-infective	Antibiotic-Quinolone	Levaquin®	levofloxacin	RX0509	A	No
Anti-infective	Antibiotic-Sulfonamide	Septra®, Septra DS®, Bactrim®, Bactrim DS®	sulfamethoxazole / trimethoprim (SMX / TMP), sulfamethoxazole / trimethoprim DS (SMX / TMP DS)	RX0510	A	No
Anti-infective	Antibiotic-Sulfonamide Derivative	Dapsone®	dapsone	RX0511	A	No
Anti-infective	Antibiotic-Sulfonamide Derivative	Sulfadiazine	sulfadiazine	RX0512	A	No
Anti-infective	Antibiotic-Tetracycline	Tetracycline	tetracycline	RX0513		No
Anti-infective	Antibiotic-Tetracycline	Vibra-Tabs®, Vibramycin®	doxycycline (oral)	RX0514		No
Anti-infective	Antiviral	Tamiflu®	oseltamivir	RX0516	A	No
Anti-infective, Amebicide	Amebicide	Paromycin®, Humatin®	paromomycin	RX0517		No
Anti-infective, Amebicide	Amebicide, Trichomonaside	Flagyl®	metronidazole	RX0518	A	No
Anti-infective, Antifungal	Antibiotic-Azole Antifungal	Diflucan®	fluconazole	RX0519	A	No

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Anti-infective, Antifungal	Antibiotic-Azole Antifungal	Mycelex® Troche	clotrimazole troches	RX0521	A	No
Anti-infective, Antifungal	Antibiotic-Azole Antifungal	Nizoral®	ketoconazole	RX0522	A	No
Anti-infective, Antifungal	Antibiotic-Azole Antifungal	Sporanox® (solution)	itraconazole (oral solution)	RX0523	A,B	No
Anti-infective, Antifungal	Antibiotic-Azole Antifungal	Terazol®	terconazole topical	RX0524	A	No
Anti-infective, Antifungal	Antibiotic-Azole Antifungal	Nizoral® (topical)	ketoconazole topical (cream or shampoo)	RX0526	A	No
Anti-infective, Antifungal	Antibiotic-Polyene Antifungals	Bio-Statin® (suspension), Mycostatin® (suspension), nystatin suspension	nystatin suspension	RX0527		No
Anti-infective, Antifungal Combination	Antibiotic-Azole Antifungal	Lotrisone®	clotrimazole / betamethasone (cream, lotion & gel)	RX0528		No
Anti-infective, Antimalarial	Antimalarial	Primaquine®	primaquine	RX0529	A	No
Anti-infective, Antiprotozoal	Antiprotozoal	Mepron®	atovaquone	RX0530	A	No
Anti-infective, Antitubercular	Antitubercular	Isoniazid®, Nydrazid®	isoniazid (INH)	RX0531	A	No
Anti-infective, Antitubercular	Antitubercular	Myambutol®	ethambutol	RX0532	A	No
Anti-infective, Antitubercular	Antitubercular	Mycobutin®	rifabutin	RX0533	A	No
Anti-infective, Antitubercular	Antitubercular	Pyrazinamide®	pyrazinamide	RX0534	A	No
Anti-infective, Antitubercular	Antitubercular	Rifadin®, Rimactane®	rifampin	RX0535	A	No



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Anti-infective, Antiviral	Antiviral	Valcyte®	valganciclovir hydrochloride	RX0536	A	No
Anti-infective, Antiviral	Antiviral	Valtrex®	valacyclovir hydrochloride	RX0537	A	No
Anti-infective, Antiviral	Antiviral	Zovirax®	acyclovir	RX0538	A	No
Blood Formation and Coagulation	Erythropoiesis-Stimulating Agent	Epogen®, Procrit®	erythropoietin (epoetin alpha)	RX0700	A,R	No
Blood Formation and Coagulation	Granulocyte-Stimulating Agent	Neupogen®	filgrastim	RX0701	A,Q	No
Blood Formation and Coagulation	Vitamin K Antagonist	Coumadin®	warfarin	RX0702	A	No
Blood Formation and Coagulation, Anemia	Iron Salt	ferrous sulfate, Feosol®, FeroSul®, FerrouSul®	ferrous sulfate (iron)	RX0703	A,RR	No
Cardiovascular Agent	Angiotension Converting Enzyme Inhibitor	Lotensin®	benazepril	RX0801	A	No
Cardiovascular Agent	Angiotension Converting Enzyme Inhibitor	Vasotec®	enalapril	RX0802	A	No
Cardiovascular Agent	Angiotension II Receptor Blocker	Teveten®	eprosartan	RX0803	L	No
Cardiovascular Agent	Beta-Blocker	Lopressor® (tartrate), Toprol XL® (succinate)	metoprolol (tartrate and succinate)	RX0804	A	No
Cardiovascular Agent	Beta-Blocker	Tenormin®	atenolol	RX0805	A	No
Cardiovascular Agent	Calcium Channel Blocker	Adalat CC®, Procardia XL®	nifedipine	RX0806	A	No
Cardiovascular Agent	Calcium Channel Blocker	Calan®, Calan SR®	verapamil	RX0807	A	No

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Cardiovascular Agent	Calcium Channel Blocker	Cardizem CD®	diltiazem	RX0808	A	No
Cardiovascular Agent	Cardiac Glycoside	Lanoxin®	digoxin	RX0809	A	No
Cardiovascular Agent	Electrolyte Replacement	Klor-Con®, potassium chloride	potassium chloride	RX0810	A	No
Cardiovascular Agent	Loop Diuretic	Lasix®	furosemide	RX0811	A	No
Cardiovascular Agent	Thiazide Diuretic	Microzide®	hydrochlorothiazide (HCTZ)	RX0812	A	No
Cardiovascular Agent	Vasodilating Agent	Nitroglycerin® (capsules)	nitroglycerin capsules	RX0813	A	No
Cardiovascular Agent	Vasodilating Agent	Nitro-stat® (sublingual)	nitroglycerin sublingual	RX0814	A	No
Cardiovascular Agent; Antilipemic	Fibric Acid	Lopid®	gemfibrozil	RX0815	A	No
Cardiovascular Agent; Antilipemic	HMG-CoA Reductase Inhibitor	Crestor®	rosuvastatin [5 mg, 10 mg & 20 mg (maximum of 30 tablets)]	RX0816	A	No
Cardiovascular Agent; Antilipemic	HMG-CoA Reductase Inhibitor	Lipitor®	atorvastatin	RX0817	A	No
Cardiovascular Agent; Antilipemic	HMG-CoA Reductase Inhibitor	Pravachol®	pravastatin	RX0818	A	No
Cardiovascular Agent; Antilipemic	Water Soluble Vitamin	Niaspan®	niacin	RX0819	A	No
<b>Cardiovascular, Antihyperlipidemic</b>	<b>Cholesterol absorption inhibitor</b>	<b>Zetia®</b>	<b>ezetimibe</b>	<b>RX0820</b>	<b>A</b>	<b>No</b>
Central Nervous System, ADHD	Norepinephrine Reuptake Inhibitor	Strattera®	atomoxetine	RX0900	AA	No

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Central Nervous System, Anticonvulsant	Dibenzazepine Carboxamide	Tegretol®	carbamazepine	RX0902		No
Central Nervous System, Anticonvulsant	GABA Analog	Neurontin®	gabapentin	RX0903	A	No
Central Nervous System, Anticonvulsant	Histone Deacetylase Inhibitor	Depakene®	valproic acid	RX0904	A	No
Central Nervous System, Anticonvulsant	Histone Deacetylase Inhibitor	Depakote®	divalproex sodium	RX0905	A	No
Central Nervous System, Anticonvulsant	Hydantoin	Dilantin®	phenytoin	RX0906		No
Central Nervous System, Anticonvulsant	Phenyltriazine	Lamictal®	lamotrigine	RX0907	A	No
Central Nervous System, Antidepressants	Alpha-2 Antagonist	Remeron®	mirtazapine	RX0908	A	No
Central Nervous System, Antidepressants	Dopamine Reuptake Inhibitor	Wellbutrin®, Wellbutrin SR®	bupropion, bupropion SR	RX0909	A	No
Central Nervous System, Antidepressants	Selective Serotonin Reuptake Inhibitor	Celexa®	citalopram	RX0910	A	No
Central Nervous System, Antidepressants	Selective Serotonin Reuptake Inhibitor	Paxil®	paroxetine	RX0911	A	No
Central Nervous System, Antidepressants	Selective Serotonin Reuptake Inhibitor	Zoloft®	sertraline	RX0912	A	No
Central Nervous System, Antidepressants	Serotonin Reuptake Inhibitor	Desyrel®	trazodone	RX0913	A	No
Central Nervous System, Antidepressants	Serotonin/Norepinephrine Reuptake Inhibitor	Effexor®, Effexor XR®	venlafaxine	RX0914	A	No
Central Nervous System, Antidepressants	Tricyclic Antidepressant (Tertiary Amine)	Elavil®	amitriptyline	RX0915	A	No

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Central Nervous System, Antidepressants	Tricyclic Antidepressant (Tertiary Amine)	Silenor®	doxepin	RX0916	A	No
Central Nervous System, Antidepressants	Tricyclic Antidepressant (Tertiary Amine)	Pamelor®	nortriptyline	RX0917	A	No
Central Nervous System, Antimanic	Benzisoxazole	Risperdal®	risperidone	RX0919	A	No
Central Nervous System, Antimanic	Mood stabilizer	Lithobid®	lithium (lithium carbonate)	RX0920	A	No
Central Nervous System, Antimanic	Serotonin/Dopamin/Histamine/ Alpha-1 Antagonist	Zyprexa®	olanzapine	RX0921	A	No
Central Nervous System, Antipsychotic	Dibenzothiazepine	Seroquel®	quetiapine	RX0922	A,T	No
Central Nervous System, Antipsychotic, Antiemetic	Phenothiazine	Compazine®, Compro®	prochlorperazine	RX0923	FROM ADAP FORMU-LARY EFF.	No
Central Nervous System, Anxiolytic, Sedatives and Hypnotics	Benzodiazepine	Ativan®	lorazepam	RX0924		No
Central Nervous System, Anxiolytic, Sedatives and Hypnotics	Benzodiazepine	Klonopin®	clonazepam	RX0925		No
Central Nervous System, Anxiolytic, Sedatives and Hypnotics	Benzodiazepine	Restoril®	temazepam	RX0926		No
Dental, Anti-infective	Antibiotic	Peridex®	chlorhexidine gluconate (0.12%)	RX1000		No
Gastrointestinal Agent	H2 Histamine Receptor Antagonist	Zantac®	ranitidine (75mg, 150 mg, & 300mg)	RX1100	A,EE,RR	No
Gastrointestinal Agent	Proton Pump Inhibitor	Prilosec®	omeprazole	RX1101	A,EE,RR	No
Gastrointestinal Agent, Antidiarrheal	Other	Imodium®	loperamide	RX1103	QQ	No

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Gastrointestinal Agent, Antidiarrheal, Combination	Other	Lomotil®	atropine / diphenoxylate	RX1104	A	No
Gastrointestinal Agent, Antidiarrheal, Probiotic	Probiotic	Lactinex®	lactobacillus acidophilus (granules)	RX1105	QQ	No
Gastrointestinal Agent, Antiemetic	Dopamine Antagonist	Reglan®	metoclopramide	RX1106	A	No
Gastrointestinal Agent, Anti-inflammatory Agent	5-Aminosalicylic Acid Derivative	Canasa® (suppository)	mesalamine (suppository)	RX1107		No
Gastrointestinal Agent, Cathartic	Osmotic Laxative	GoLYTELY®, Colyte®, MoviPret®, NuLYTELY®, TriLyte®	PEG-3350 (polyethylene glycol) and electrolytes oral solution	RX1108	PP	No
Hormone	Anabolic Agent	Marinol®	dronabinol	RX1200	A	No
Hormone	Androgen	Depo®-Testosterone	testosterone cypionate injection (NOTE: testosterone gel / patch available through ADAP)	RX1201	H	No
Hormone	Progestin	Megace®	megestrol acetate	RX1202	A	No
Hormone	Androgen	Delatestryl®	testosterone enanthate injection (NOTE: testosterone gel / patch available through ADAP)	RX1204	H	No
Hormone, Corticosteroid	Corticosteroids	Prednisone®	prednisone	RX1205		No
Hormone	Androgen	Androderm®	testosterone patch	RX1206	A	No
Hormone	Androgen	Androgel®	testosterone gel	RX1207	A	No
Hormone	Estrogen Derivative	Estrace®, Femtrace®, Cenestin®, Enjuvia®, Gynodiol®	estradiol (oral, topical)	RX1208	A, LLL	No

RYAN WHITE PART A PROGRAM PRESCRIPTION DRUG FORMULARY (Sorted by RW Miami Pharma-Code)

Therapeutic Classification	Pharmacologic Classification	Brand Name(s)	Generic Name(s)	RW Miami Pharma-Code	Notation	TTRA Med? Yes/No
Hormone	Estrogen Derivative	Delestrogen®	estradiol valerate (injection)	RX1209	A, LLL	No
Hormone Therapy (Management of Edema; Antihypertensive; Diagnosis of Primary Hyperaldosteronism; Treatment of Diuretic-induced Hypokalemia)	Potassium-sparing Diuretic	Aldactone®	spironolactone	RX1210	A, LLL	No
Hormone Therapy (Genitourinary; Benign Prostatic Hypertrophy Agent)	5-Alpha Reductase Inhibitor	Proscar®, Propecia® (oral)	finasteride (oral)	RX1211	A, LLL	No
<b>Hormone</b>	<b>Progesterone</b>	<b>Provera®</b>	<b>medroxyprogesterone acetate</b>	<b>RX1212</b>	<b>A</b>	<b>No</b>
Ophthalmic Agent, Antiglaucoma	Beta-Blocker, Non-selective	Timoptic®	timolol ophthalmic	RX1400		No
Ophthalmic Agent, Antiglaucoma	Prostaglandin	Xalatan®	latanoprost ophthalmic	RX1401		No
Ophthalmic Agent; Antiglaucoma	Alpha 2 Agonist	Alphagan P®	brimonidine ophthalmic	RX1402		No
Ophthalmic Agent; Antiglaucoma	Carbonic Anhydrase Inhibitor	Trusopt®	dorzolamide ophthalmic	RX1404		No
Ophthalmic Agent; Anti-infective	Antibiotic-Aminoglycoside	Tobrex®	tobramycin ophthalmic (solution and ointment)	RX1406		No
Ophthalmic Agent; Anti-infective	Antibiotic-Quinolone	Ocuflox® (ophthalmic)	ofloxacin (ophthalmic)	RX1407	P	No
Ophthalmic Agent; Anti-infective	Antibiotic-Sulfonamide Derivative	Sulfacetamide Sodium® (ophthalmic eye drops)	sulfacetamide sodium (ophthalmic eye drops)	RX1408		No
Ophthalmic Agent; Anti-infective; Combination	Antibiotic-Corticosteroid	Maxitrol®	dexamethasone / neomycin / polymyxin B ophthalmic	RX1410		No
Ophthalmic Agent; Corticosteroid	Corticosteroid	Pred Forte® (ophthalmic)	prednisolone acetate (ophthalmic)	RX1411		No

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Therapeutic Classification	Pharmacologic Classification	Brand Name(s)	Generic Name(s)	RW Miami Pharma-Code	Notation	TTRA Med? Yes/No
Osteoporosis	Bisphosponate	Fosamax®	alendronate sodium	RX1500	A,NN	No
Otic Preparation, Anti-infective	Antibiotic-Quinolone	Floxin otic®, Ocuflax®	ofloxacin otic	RX1600		No
Otic Preparation, Anti-infective Combination	Antibiotic-Corticosteroid	Cortisporin otic®	hydrocortisone / neomycin / polymyxin B otic	RX1601		No
Pharmacokinetic Enhancer (For use in combination with other antiretrovirals)	CYP3A4 Inhibitor	Tybst®	cobicistat (COBI)	RX1700	A,YY	No
Pulmonary, Allergy	H1 Receptor Antagonist (1st Gen)	Benadryl®	diphenhydramine	RX1800	A	No
Pulmonary, Allergy, Appetite Stimulant	Antihistamine	Periactin®	cyproheptadine	RX1801		No
Pulmonary, Bronchodilator	Beta2-Adrenergic Agonist	Proventil HFA®, Ventolin®, ProAir®, Combivent Respimat®	albuterol HFA, albuterol / ipratropium	RX1803	A	No
Pulmonary, Corticosteroids	Nasal Corticosteroid	Nasarel®	flunisolide nasal	RX1804	A	No
Pulmonary, Corticosteroids	Oral Corticosteroid	QVAR® (oral inhaler), Qnasi® (nasal spray)	beclomethasone (oral inhaler, nasal spray)	RX1805	A	No
Skin and Mucous Membrane Preparation, Acne	Antibiotic, Keratolytic	Benzoyl Peroxide topical	benzoyl peroxide topical	RX1900	A,RR	No
Skin and Mucous Membrane Preparation, Analgesic	Analgesia	Zostrix®	capsaicin topical	RX1901	A,QQ	No
Skin and Mucous Membrane Preparation, Anesthetic	Anesthetic	Xylocaine®	lidocaine viscous	RX1902		No
Skin and Mucous Membrane Preparation, Anti-infective	Antibiotic-Lincosamide	Cleocin T®	clindamycin topical (cream, lotion, gel)	RX1905	A	No
Skin and Mucous Membrane Preparation, Anti-infective	Antibiotic-Sulfonamide Derivative	Silvadene®	silver sulfadiazine topical	RX1907		No

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<b>Therapeutic Classification</b>	<b>Pharmacologic Classification</b>	<b>Brand Name(s)</b>	<b>Generic Name(s)</b>	<b>RW Miami Pharma-Code</b>	<b>Notation</b>	<b>TTRA Med? Yes/No</b>
Skin and Mucous Membrane Preparation, Anti-infective	Antiparasitic, Scabacidal	Elimite®	permethrin topical	RX1908		No
Skin and Mucous Membrane Preparation, Anti-infective	Immune Modular	Aldara Cream®	imiquimod 5%	RX1909	A	No
Skin and Mucous Membrane Preparation, Anti-infective, Keratolytic Agent	Antiviral	Podofilox topical®	podofilox topical	RX1910		No
Skin and Mucous Membrane Preparation, Antineoplastic	Pyrimidine Analog	Efudex®	fluorouracil topical	RX1911		No
Skin and Mucous Membrane Preparation, Corticosteroid	Corticosteroid	Betamethasone topical or Diprolene®	betamethasone (valerate or dipropionate)	RX1912	A	No
Skin and Mucous Membrane Preparation, Corticosteroid	Corticosteroid	Fluocinonide topical®	fluocinonide topical	RX1914		No
Skin and Mucous Membrane Preparation, Corticosteroid	Corticosteroid	Hydrocortisone topical®	hydrocortisone topical (cream and ointment)	RX1915	FFF	No
Skin and Mucous Membrane Preparation, Corticosteroid	Corticosteroid	Kenalog®	triamcinolone topical (cream and ointment)	RX1916		No
Skin and Mucous Membrane Preparation, Corticosteroid	Corticosteroid	Temovate®	clobetasol topical (ointment)	RX1917		No
Vitamin	Vitamin	Folic acid	folic acid	RX2000	A	No
Vitamin	Vitamin	Multivitamin (OTC)	multivitamin	RX2001	A,HH,QQ	No
Vitamin	Vitamin	Multivitamin B Complex	multivitamin B complex	RX2002	A,QQ	No
Vitamin	Vitamin	Multivitamin prenatal	multivitamin prenatal	RX2003	A,FF,HH,RR	No
Vitamin	Vitamin	Cyanocobalamin®, vitamin B12 (injection only)	cyanocobalamin, vitamin B12 (injection only)	RX2004	A,HH,TT	No



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Therapeutic Classification	Pharmacologic Classification	Brand Name(s)	Generic Name(s)	RW Miami Pharma-Code	Notation	TTRA Med? Yes/No
Vitamin	Vitamin	Pyridoxine®, vitamin B6	pyridoxine, vitamin B6	RX2005	A,GG,HH	No
Vitamin-Antidote	Vitamin	Leucovorin®	folinic acid, calcium folinate, leucovorin	RX2006	A,F	No
Opioid Dependency	Opioid Agonist / Antagonist	Suboxone®	buprenorphine and naloxone	RX2100	III	No
Opioid Dependency	Opioid Agonist / Antagonist	Subutex®, Buprenex®, Butrans®, Probuphine®	buprenorphine	RX2101	JJJ	No