



# ARIZONA DEPARTMENT OF HEALTH SERVICES

PREPAREDNESS

## AIDS DRUG ASSISTANCE PROGRAM (ADAP) FORMULARY - CLIENT VERSION

April 5, 2024

**(Alternate strengths and dose forms - with exclusion of injectable forms unless the medication is only available in such route - will be available upon provider's preference)**

1.1% Sodium Fluoride Toothpaste  
1.1% Sodium Fluoride Gel  
5% Efudex Cream (may prescribe with/without separate Rx for DoseRite Rectal Applicator)  
5% Lidocaine Ointment  
Abacavir (Ziagen)  
Acetaminophen/Codeine Acetaminophen/Hydrocodone Acetaminophen/Oxycodone  
Actos  
Acyclovir  
Adderall  
Advair Inhaler  
Albuterol Metered-Dose Inhaler (MDI)  
Alcohol Wipes\*  
Alendronate (Fosamax)  
Alinia  
Allopurinol  
Amaryl  
Amitriptyline  
Amlodipine  
Amoxicillin  
Amoxicillin/Clavulanate  
Anastrozole  
Androderm  
Aripiprazole  
Aspirin\*  
Astelin (Azelastine HCL)  
Atazanavir (Reyataz)  
Atazanavir/Cobicistat (Evotaz)  
Atenolol  
Atorvastatin (Lipitor)  
Atovaquone (Mepron)  
Atripla (Efavirenz/Emtricitabine/Tenofovir)  
Azithromycin (Zithromax)



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Beclomethasone (QVAR)  
Beconase AQ (Beclomethasone Dipropionate)  
Benazepril  
Benzonatate  
Bicalutamide  
Biktarvy  
Bisacodyl\*  
Bismuth Subsalicylate  
Bleph 10  
Brilinta  
Bumetanide  
Buprenorphine  
Bupropion (Wellbutrin)  
Buspirone  
Butalbital/APAP/Caffeine  
Cabenuva^^  
Calcium acetate  
Calcium carbonate  
Calcium carbonate /Vitamin D  
Calcium citrate  
Calcium citrate/Vitamin D  
Carbamazepine  
Carvedilol  
Cefadroxil  
Cefdinir  
Cefpodoxime  
Celecoxib  
Cephalexin  
Chantix  
Chloralphenazone/Isometheptene/Acetaminophen (For Migraine)  
Chlorhexidine Mouthwash  
Chlorpromazine  
Chlorthalidone  
Cimduo  
Cimetidine  
Ciprofloxacin  
Citalopram (Celexa)  
Clarithromycin (Biaxin)  
Clindamycin



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Clonazepam  
Clonidine  
Clopidogrel  
Clotrimazole Oral Troches  
Cobicistat (Tybost)  
Combivir (Lamivudine/Zidovudine)  
Complera (Rilpivirine/Tenofovir/Emtricitabine)  
Contraceptives (Oral-only)  
Cyclobenzaprine  
Dapsone  
Darunavir (Prezista)  
Delstrigo (Doravirine/Lamivudine)  
Descovy (emtricitabine 200mg, tenofovir alafenamide 25mg)  
Desipramine  
Diazepam  
Diclofenac Gel  
Dicloxacillin  
Dicyclomine  
Diltiazem Sustained Release  
Diphenhydramine  
Diphenoxylate/Atropine  
Divalproex (Valproic Acid)  
Docusate\*  
Dolutegravir (Tivicay)  
Dovato (dolutegravir/lamivudine)  
Doxazosin  
Doxepin (All strengths)  
Doxycycline  
Duloxetine (Cymbalta)  
Durezol  
Edurant (Rilpivirine)  
Efavirenz (Sustiva)  
Eliquis  
Emtricitabine (Emtriva)  
Enalapril  
Endometrin  
Enfuvirtide (Fuzeon)  
Entecavir (Baraclude)  
Enoxaparin



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Epclusa  
Epi-Pen  
Epoetin Alfa (Procrit)  
Epzicom (Lamivudine/Abacavir)  
Erythromycin Ophthalmic Ointment  
Escitalopram (Lexapro)  
Estradiol tablets  
Estradiol Cypionate Injectable  
Estradiol Valerate Injectable  
Estrogen Conjugated (Premarin)  
Ethambutol (Myambutol)  
Etravirine (Intelence)  
Evista  
Ezetimibe  
Famotidine  
Farxiga  
Fenofibrate  
Ferrous Sulfate  
Filgrastim (Neupogen)  
Finasteride  
Fluconazole  
Flunisolide  
Fluocinonide Cream/Ointment  
Fluoxetine  
Folic Acid  
Fosamprenavir Calcium (Lexiva)  
Free Style Libre Blood Glucose Monitoring System/Supplies\*  
Furosemide  
Gabapentin (Neurontin)  
Gemfibrozil  
Genvoya (Cobicistat, Elvitegravir, Emtricitabine and Tenofovir Alafenamide)  
Geodon  
Go-Lytely  
Glipizide  
Guaifenesin with Codeine cough syrup  
Haldol  
Harvoni\*\*\*\*\*  
Hctz  
Hctz/Triamterene



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Hydralazine  
Hydrocortisone Cream/Ointment Hydroxyzine  
Ibuprofen\*  
Imiquimod Cream (Aldara)  
Insulins - Long-Intermediate acting/Fast-Short acting/Mixes

- NPH/Regular 70/30
- NPH/Lispro 75/25 or 50/50
- NPH/Aspart 70/30

Ipratropium HFA  
Isoniazid (Inh)  
Isosorbide  
Itraconazole (Sporanox)  
Ivermectin  
Jardiance  
Juluca  
Ketoconazole Cream  
L-Methylfolate (7.5 and/or 15mg capsules only)  
Lactulose  
Lamictal  
Lamivudine (Epivir, 3TC)  
Lansoprazole  
Lantanoprost  
Latuda  
Leucovorin  
Levetiracetam (Keppra)  
Levofloxacin  
Levothyroxine (Levoxyl or Synthroid)  
Liothyronine  
Lisinopril  
Lithium Carbonate  
Loperamide  
Lopinavir/Ritonavir (Kaletra)  
Loratadine  
Lorazepam  
Losartan  
Loxapine  
Macrobid  
Magnesium Oxide  
Maraviroc (Selzentry)\*\*\*  
Mavyret\*\*\*\*\*



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Meclizine  
Medroxyprogesterone  
Megestrol (Megace) ES  
Meloxicam  
Metformin  
Methadone (For Pain, Not Addiction Rx)  
Methylphenidate  
Methylprednisolone  
Metoclopramide  
Metoprolol  
Metronidazole  
Miconazole Vaginal  
Midodrine  
Miralax  
Mirtazapine  
Montelukast  
Morphine Sulfate Immediate Release  
Morphine Sulfate Sustained Release  
Moxifloxacin  
Multivitamin with 1 mg Folate/Pre-Natal Vitamins  
Mupirocin Ointment  
Naloxone (Nasal Spray Only – No Injectable)  
Naltrexone (Tablets only)  
Naproxen  
Nasonex (Mometasone)  
Needles\*\*\*\*  
Nelfinavir (Viracept)  
Neomycin/polymyxin/dexamethasone  
Neomycin/polymyxin/hydrocortisone  
Nevirapine (Viramune)  
Niacin Sustained Release (Niaspan or Equivalent)  
Nipro Diagnostic Brand Blood Glucose Monitoring System/Supplies\*  
Nitrostat  
Nortriptyline  
Nu-Lytely  
Nystatin Suspension  
Odesfev (Emtricitabine 200 mg, Rilpivirine 25mg, Tenofovir Alafenamide 25 mg)  
Olanzapine  
Omega-3 Acid Ethyl Esters



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Omeprazole  
Opium Tincture  
Oseltamivir Phosphate (Tamiflu)  
Oxcarbazepine  
Oxybutynin ER  
Oxybutynin IR  
Oxycodone Immediate Release  
Pancrelipase Capsules (any manufacture)  
Pantoprazole  
Paroxetine  
Penicillin VK  
Pentamidine Isethionate (Nebupent)  
Permethrin Cream  
Phenytoin  
Pifeltro (Doravirine)  
Pitavastatin  
Podofilox Solution (Condylox)  
Potassium Chloride  
Posaconazole  
Pradaxa  
Pravastatin (Pravachol)  
Prazosin  
Prednisone  
Prednisolone 1% Ophthalmic Solution  
Pregabalin (Lyrica)  
Prezcobix (Cobicistat/Darunavir)  
Primaquine  
Prochlorperazine  
Prolia  
Promethazine  
Prometrium  
Propranolol  
Pseudoephedrine  
Pylera  
Pyrazinamide  
Pyridoxine (To Be Given With Inh)  
Pyrimethamine (Daraprim)  
Quetiapine (Seroquel)  
Raltegravir (Isentress)



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Raltegravir (Isentress HD)  
Ranexa  
Ribavirin\*\*  
Rifabutin (Mycobutin)  
Rifampin  
Risperidone  
Ritonavir (Norvir)  
Rosuvastatin (Crestor)  
Rukobia (Fostemsavir)  
Saphris  
Selenium Sulfide  
Sertraline (Zoloft)  
Silenor  
Silvadene Cream  
Sitagliptin (Januvia)  
Sodium Bicarbonate  
Sovaldi\*\*\*\*\*  
Spiriva  
Spironolactone  
Strattera  
Stribild (Elvitegravir, Cobicistat, Emtricitabine, Tenofovir)  
Sulfadiazine  
Sulfamethoxazole/Trimethoprim (SMZ/TMP)  
Sumatriptan Tablets  
Sunlenca (lenacapavir)^  
Symbicort  
Symfi  
Symfi Lo  
Symtuza  
Syringes\*\*\*\*  
Tamsulosin  
Temazepam  
Tenofovir (Viread)  
Testosterone (Androgel Pump)  
Testosterone Cypionate  
Testosterone Enanthate  
Testosterone Gel (Androgel)  
Testosterone Gel (Testim)  
Tetracycline





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Timolol Opth. Solution  
Tinidazole  
Tipranavir (Aptivus)  
Tobradex (tobramycin/dexamethasone)  
Tolterodine ER  
Tolterodine IR  
Tradjenta  
Trazodone  
Triamcinolone Cream/Ointment  
Trimethoprim  
Triumeq  
Trizivir (Abacavir/Lamivudine/Zidovudine)  
Trogarzo  
Trulicity  
Truvada (Tenofovir/Emtricitabine)  
Ultram (Tramadol HCL)  
Valacyclovir  
Valganciclovir (Valcyte)  
Vancomycin  
Vemlidy (tenofovir alafenamide)  
Venlafaxine (Effexor)  
Victoza  
Viibryd  
Voriconazole  
Vyvanse  
Warfarin  
Xarelto  
Xifaxan  
Zepatier\*\*\*\*\*  
Zidovudine (Retrovir, AZT)  
Zofran (Ondansetron)  
Zolpidem  
Zyvox

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\*A current prescription written by a medical provider must be presented for the medication(s) prior to these products being dispensed by the pharmacy.

\*\*For Ribavirin, Genentech currently has a patient assistance program for individuals with limited incomes. The



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physician may contact 1-888-941- 3331 directly.

\*\*\*For Maraviroc (Selzentry), VIIV Healthcare offers certificates that provide Tropism testing through Ryan White Part A and Ryan White Part B clinics. Providers may also request Tropism testing kits by calling either 602-339-4125 or 602-321-2554.

\*\*\*\*A current prescription written by a medical provider must be presented for all syringes and/or needles prior to these products being dispensed by the pharmacy. In addition, the patient must have a prescription order for a formulary approved injectable medication. ADAP is strictly prohibited from participating in “needle exchange” programs.

\*\*\*\*\*Please review and submit all data elements contained within the HCV patient registry to ADAP as indicated. The Arizona ADAP HCV patient registry can be obtained by contacting ADAP directly at 602-364-3610/toll free at 800-334-1540 or on the ADHS public website at <http://www.azdhs.gov/phs/hiv/adap/index.htm>.

\*\*\*\*\*Please contact Genoa 340B pharmacy (855-428-3552) at time of prescription order to arrange specialized medication delivery.

^ Prior Authorization (PA) Required: Please visit [azadap.com](http://azadap.com) under the FAQ tab where you can obtain the Sunlenca PA policy and PA form for completion and submission by a licensed Medical Provider only.

^^ Please read and follow the LAART Policy & Procedure at [azadap.com](http://azadap.com) for ordering and billing.

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