

Covered and non-covered drugs

**Drugs not covered – and
their covered alternatives**

2021 Value Plus

Formulary Exclusions Drug List



Below is a list of medications that will not be covered without a prior authorization for medical necessity. If you continue using one of these drugs without prior approval, you may be required to pay the full cost. Ask your doctor to choose one of the generic or brand formulary options listed below.

Key	
UPPERCASE	Brand-name medicine
<i>lowercase italics</i>	Generic medicine

Preferred Options For Excluded Medications

Excluded drug name(s)	Preferred option(s)
ABILIFY	<i>aripiprazole, clozapine, olanzapine, quetiapine, quetiapine ext-rel, risperidone, ziprasidone, LATUDA, SAPHRIS, VRAYLAR</i>
ABSORICA	<i>isotretinoin</i>
ACANYA	<i>adapalene, benzoyl peroxide, clindamycin gel (except NDC ^ 68682046275), clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, EPIDUO, ONEXTON</i>
ACCU-CHEK AVIVA PLUS STRIPS AND KITS, ACCU-CHEK COMPACT PLUS STRIPS AND KITS, ACCU-CHEK GUIDE STRIPS AND KITS, ACCU-CHEK SMARTVIEW STRIPS AND KITS	ONETOUCH ULTRA STRIPS AND KITS, ONETOUCH VERIO STRIPS AND KITS
ACIPHEX, ACIPHEX SPRINKLE	<i>esomeprazole, lansoprazole, omeprazole, pantoprazole, DEXILANT</i>
ACTICLATE	<i>doxycycline hyclate capsule, doxycycline hyclate tablet (except doxycycline hyclate tablet 50 mg [NDC ^ 72143021160 only], 75 mg, 150 mg), minocycline, tetracycline</i>
ACTOS	<i>pioglitazone</i>
ACUVAIL	<i>bromfenac, diclofenac, ketorolac</i>
<i>acyclovir cream</i>	<i>acyclovir (except acyclovir cream), valacyclovir</i>
ADCIRCA	<i>sildenafil, tadalafil*</i>
ADZENYS ER, ADZENYS XR-ODT	<i>amphetamine-dextroamphetamine mixed salts ext-rel †, dexamethylphenidate ext-rel, dextroamphetamine ext-rel, methylphenidate ext-rel †, MYDAYIS, VYVANSE</i>
AKYNZEO	<i>aprepitant WITH granisetron, ondansetron or SANCUSO</i>
ALDARA	<i>imiquimod</i>
ALLISON MEDICAL INSULIN SYRINGES	BD ULTRAFINE INSULIN SYRINGES
ALORA	<i>estradiol, DIVIGEL, EVAMIST</i>
ALPROLIX	Consult doctor
ALREX	<i>azelastine, cromolyn sodium, olopatadine</i>
ALTOPREV	<i>atorvastatin, ezetimibe-simvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin</i>
ALVESCO	ARNUITY ELLIPTA, FLOVENT DISKUS, FLOVENT HFA, PULMICORT FLEXHALER, QVAR REDIHALER
AMITIZA	LINZESS, MOVANTI, SYMPROIC

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* Coverage may not apply in all plans. Refer to plan documents.

Excluded drug name(s)	Preferred option(s)
AMRIX	carisoprodol, chlorzoxazone 500 mg (except NDC [†] 73007001303), cyclobenzaprine (except cyclobenzaprine tablet 7.5 mg), metaxalone 800 mg, methocarbamol (except NDCs [†] 69036091010, 69036093090, 70868090190)
ANDROGEL 1%	testosterone gel (except authorized generics for TESTIM and VOGELXO), testosterone solution, ANDRODERM
ANGELIQ	estradiol-norethindrone, BIJUVA
ANZEMET	granisetron, ondansetron, SANCUSO
APEXICON E	desoximetasone, fluocinonide (except fluocinonide cream 0.1%), BRYHALI
APIDRA	FIASP, NOVOLOG
APLENZIN	bupropion, bupropion ext-rel (except bupropion ext-rel tablet 450 mg)
APTENSIO XR	amphetamine-dextroamphetamine mixed salts ext-rel †, dexamethylphenidate ext-rel, dextroamphetamine ext-rel, methylphenidate ext-rel †, MYDAYIS, VYVANSE
APTIOM	carbamazepine, carbamazepine ext-rel, divalproex sodium, divalproex sodium ext-rel, gabapentin, lamotrigine, lamotrigine ext-rel, levetiracetam, levetiracetam ext-rel, oxcarbazepine, phenobarbital, phenytoin, phenytoin sodium extended, primidone, tiagabine, topiramate, valproic acid, zonisamide, OXTELLAR XR, TROKENDI XR, VIMPAT, XCOPRI
ARALAST NP	PROLASTIN-C
ARCAPTA	STRIVERDI RESPIMAT
ARTHROTEC	celecoxib; diclofenac sodium, ibuprofen, meloxicam or naproxen (except naproxen CR or naproxen suspension) WITH esomeprazole, lansoprazole, omeprazole, pantoprazole or DEXILANT
ASACOL HD	balsalazide, mesalamine delayed-rel, mesalamine ext-rel, sulfasalazine, sulfasalazine delayed-rel, PENTASA
ASCENSIA STRIPS AND KITS	ONETOUCH ULTRA STRIPS AND KITS, ONETOUCH VERIO STRIPS AND KITS
ASMANEX, ASMANEX HFA	ARNUITY ELLIPTA, FLOVENT DISKUS, FLOVENT HFA, PULMICORT FLEXHALER, QVAR REDIHALER
ASTAGRAF XL	tacrolimus
ATACAND, ATACAND HCT	candesartan, candesartan-hydrochlorothiazide, irbesartan, irbesartan-hydrochlorothiazide, losartan, losartan-hydrochlorothiazide, olmesartan, olmesartan-hydrochlorothiazide, telmisartan, telmisartan-hydrochlorothiazide, valsartan, valsartan-hydrochlorothiazide
ATIVAN	alprazolam, clonazepam, diazepam, lorazepam, oxazepam
ATRALIN	adapalene, benzoyl peroxide, clindamycin gel (except NDC [†] 68682046275), clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, EPIDUO, ONEXTON
ATROVENT HFA	ipratropium inhalation solution, SPIRIVA, YUPELRI
AUVI-Q	epinephrine auto-injector, EPIPEN, EPIPEN JR, SYMJEPI
AVONEX	dimethyl fumarate delayed-rel, glatiramer, AUBAGIO, BETASERON, COPAXONE, GILENYA, KESIMPTA, MAYZENT, REBIF, TYSABRI, VUMERITY, ZEPOSIA
AZASITE	ciprofloxacin, erythromycin, gentamicin, levofloxacin, moxifloxacin, ofloxacin, sulfacetamide, tobramycin
AZELEX	adapalene, benzoyl peroxide, clindamycin gel (except NDC [†] 68682046275), clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, EPIDUO, ONEXTON
AZESCO	prenatal vitamins, CITRANATAL
AZOPT	dorzolamide
BARACLUDE TABLET	entecavir, lamivudine, tenofovir disoproxil fumarate, BARACLUDE SOLUTION, VEMLIDY
BECONASE AQ	flunisolide, fluticasone, mometasone, DYMISTA
BENICAR, BENICAR HCT	candesartan, candesartan-hydrochlorothiazide, irbesartan, irbesartan-hydrochlorothiazide, losartan, losartan-hydrochlorothiazide, olmesartan, olmesartan-hydrochlorothiazide, telmisartan, telmisartan-hydrochlorothiazide, valsartan, valsartan-hydrochlorothiazide

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Excluded drug name(s)	Preferred option(s)
BENZACLIN	<i>adapalene, benzoyl peroxide, clindamycin gel (except NDC^ 68682046275), clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, EPIDUO, ONEXTON</i>
<i>benzonatate</i> (NDCs^ 69336012615, 69499032915 only)	<i>benzonatate (except NDCs^ 69336012615, 69499032915)</i>
BEPREVE	<i>azelastine, cromolyn sodium, olopatadine</i>
BERINERT	FIRAZYR, RUCONEST
BESIVANCE	<i>ciprofloxacin, erythromycin, gentamicin, levofloxacin, moxifloxacin, ofloxacin, sulfacetamide, tobramycin</i>
BETAPACE, BETAPACE AF	<i>sotalol</i>
BETOPTIC-S	<i>timolol maleate solution, BETIMOL</i>
BEVESPI AEROSPHERE	ANORO ELLIPTA, STIOLTO RESPIMAT
BEYAZ	<i>ethinyl estradiol-drospirenone, ethinyl estradiol-drospirenone-levomefolate, ethinyl estradiol-norethindrone acetate-iron</i>
<i>bimatoprost solution 0.03%</i>	<i>latanoprost, travoprost, ZIOPTAN</i>
BREEZE 2 STRIPS AND KITS	ONETOUCH ULTRA STRIPS AND KITS, ONETOUCH VERIO STRIPS AND KITS
BROVANA	PERFOROMIST
<i>Bupap</i>	<i>diclofenac sodium, ibuprofen, naproxen (except naproxen CR or naproxen suspension)</i>
BUPHENYL	<i>sodium phenylbutyrate</i>
<i>bupropion ext-rel tablet 450 mg</i>	<i>bupropion, bupropion ext-rel (except bupropion ext-rel tablet 450 mg)</i>
<i>butalbital-acetaminophen tablet 50-300 mg, BUTALBITAL-ACETAMINOPHEN (NDC^ 69499034230 only)</i>	<i>diclofenac sodium, ibuprofen, naproxen (except naproxen CR or naproxen suspension)</i>
<i>butalbital-acetaminophen-caffeine capsule</i>	<i>diclofenac sodium, ibuprofen, naproxen (except naproxen CR or naproxen suspension)</i>
BUTRANS	<i>buprenorphine transdermal, BELBUCA</i>
BYDUREON	OZEMPIC, RYBELSUS, TRULICITY, VICTOZA
BYETTA	OZEMPIC, RYBELSUS, TRULICITY, VICTOZA
BYSTOLIC	<i>atenolol, carvedilol, carvedilol phosphate ext-rel, metoprolol succinate ext-rel, metoprolol tartrate, nadolol, propranolol, propranolol ext-rel</i>
CAFERGOT	<i>eletriptan, naratriptan, rizatriptan, sumatriptan, zolmitriptan, NURTEC ODT, REYVOW, UBRELVY, ZOMIG NASAL SPRAY</i>
<i>calcipotriene cream</i>	<i>calcipotriene ointment, calcipotriene solution</i>
<i>calcipotriene-betamethasone</i>	<i>calcipotriene ointment or calcipotriene solution WITH desoximetasone, fluocinonide (except fluocinonide cream 0.1%) or BRYHALI; DUOBRII, ENSTILAR, TACLONEX</i>
CAMBIA	<i>diclofenac sodium, ibuprofen, naproxen (except naproxen CR or naproxen suspension)</i>
CANASA	<i>hydrocortisone enema, mesalamine suppository, mesalamine suspension, CORTIFOAM</i>
CAPEX	<i>ketoconazole shampoo 2%, selenium sulfide lotion 2.5%</i>
CARAC	<i>fluorouracil cream 5%, fluorouracil solution, imiquimod, TOLAK</i>
CARAFATE	<i>sucralfate tablet</i>
CARBINOXAMINE TABLET 6 MG	<i>levocetirizine</i>

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Excluded drug name(s)	Preferred option(s)
CARDIZEM, CARDIZEM CD, CARDIZEM LA	<i>diltiazem ext-rel</i> (except generics for CARDIZEM LA)
CARNITOR, CARNITOR SF	<i>levocarnitine</i>
CELEBREX	<i>celecoxib, diclofenac sodium, ibuprofen, meloxicam, naproxen</i> (except <i>naproxen CR</i> or <i>naproxen suspension</i>)
CELLCEPT	<i>mycophenolate mofetil, mycophenolate sodium</i>
chlorzoxazone 375 mg, chlorzoxazone 500 mg (NDC^ 73007001303 only), chlorzoxazone 750 mg, CHLORZOAZONE 250 MG	<i>carisoprodol, chlorzoxazone 500 mg</i> (except NDC^ 73007001303), <i>cyclobenzaprine</i> (except <i>cyclobenzaprine tablet 7.5 mg</i>), <i>metaxalone 800 mg, methocarbamol</i> (except NDCs^ 69036091010, 69036093090, 70868090190)
CHORIONIC GONADOTROPIN	OVIDREL*
CIALIS	<i>sildenafil, tadalafil, vardenafil</i> *
CILOXAN	<i>ciprofloxacin, erythromycin, gentamicin, levofloxacin, moxifloxacin, ofloxacin, sulfacetamide, tobramycin</i>
CIPRO HC	<i>ciprofloxacin-dexamethasone, ofloxacin otic</i>
CIPRODEX	<i>ciprofloxacin-dexamethasone, ofloxacin otic</i>
CLINDAGEL	<i>adapalene, benzoyl peroxide, clindamycin gel</i> (except NDC^ 68682046275), <i>clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, EPIDUO, ONEXTON</i>
<i>clobetasol spray</i>	<i>clobetasol foam</i>
CLOBEX SPRAY	<i>clobetasol foam</i>
COLAZAL	<i>balsalazide</i>
COMBIPATCH	CLIMARA PRO
COMPLERA	ATRIPLA, BIKTARVY, GENVOYA, ODEFSEY, SYMFI, SYMFI LO, SYMTUZA, TRIUMEQ
CONSENSI	<i>amlodipine WITH celecoxib</i>
CONTOUR NEXT STRIPS AND KITS, CONTOUR STRIPS AND KITS	ONETOUCH ULTRA STRIPS AND KITS, ONETOUCH VERIO STRIPS AND KITS
CONTRACE	SAXENDA*
CORDRAN OINTMENT	<i>hydrocortisone butyrate cream, hydrocortisone butyrate lotion, hydrocortisone butyrate ointment, hydrocortisone butyrate solution, mometasone, triamcinolone cream, triamcinolone lotion, triamcinolone ointment</i>
CORDRAN TAPE	<i>clobetasol cream, clobetasol lotion, clobetasol ointment</i>
COREG CR	<i>atenolol, carvedilol, carvedilol phosphate ext-rel, metoprolol succinate ext-rel, metoprolol tartrate, nadolol, propranolol, propranolol ext-rel</i>
CoreMino	<i>doxycycline hyclate capsule, doxycycline hyclate tablet</i> (except <i>doxycycline hyclate tablet 50 mg [NDC^ 72143021160 only]</i> , 75 mg, 150 mg), <i>minocycline, tetracycline</i>
COSOPT PF	<i>dorzolamide-timolol</i>
CRESTOR	<i>atorvastatin, ezetimibe-simvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin</i>
CRINONE	ENDOMETRIN
CUPRIMINE	Consult doctor
cyclobenzaprine ext-rel capsule, cyclobenzaprine tablet 7.5 mg	<i>carisoprodol, chlorzoxazone 500 mg</i> (except NDC^ 73007001303), <i>cyclobenzaprine</i> (except <i>cyclobenzaprine tablet 7.5 mg</i>), <i>metaxalone 800 mg, methocarbamol</i> (except NDCs^ 69036091010, 69036093090, 70868090190)
CYCLOSET	Consult doctor
CYMBALTA	<i>desvenlafaxine ext-rel, duloxetine, venlafaxine, venlafaxine ext-rel capsule</i>

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Excluded drug name(s)	Preferred option(s)
DARAPRIM	pyrimethamine
DAYTRANA	amphetamine-dextroamphetamine mixed salts ext-rel †, dexamethylphenidate ext-rel, dextroamphetamine ext-rel, methylphenidate ext-rel †, MYDAYIS, VYVANSE
DELZICOL	balsalazide, mesalamine delayed-rel, mesalamine ext-rel, sulfasalazine, sulfasalazine delayed-rel, PENTASA
DENAVIR	acyclovir (except acyclovir cream), valacyclovir
DEPO-SUBQ PROVERA 104MG	medroxyprogesterone acetate 150 mg/mL
DESVENLAFAXINE ER	desvenlafaxine ext-rel, duloxetine, venlafaxine, venlafaxine ext-rel capsule
DETROL LA	darifenacin ext-rel, oxybutynin ext-rel, solifenacin, tolterodine, tolterodine ext-rel, trospium, trospium ext-rel, MYRBETRIQ, TOVIAZ
Dexifol	folic acid, folic acid-vitamin B6-vitamin B12
DIASTAT	diazepam rectal gel, NAYZILAM, VALTOCO
DIFFERIN LOTION	adapalene, benzoyl peroxide, clindamycin gel (except NDC ^ 68682046275), clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, EPIDUO, ONEXTON
diflorasone cream, diflorasone ointment	desoximetasone, fluocinonide (except fluocinonide cream 0.1%), BRYHALI
dihydroergotamine spray	eletriptan, naratriptan, rizatriptan, sumatriptan, zolmitriptan, NURTEC ODT, REYVOW, UBRELVY, ZOMIG NASAL SPRAY
DILANTIN	carbamazepine, carbamazepine ext-rel, divalproex sodium, divalproex sodium ext-rel, gabapentin, lamotrigine, lamotrigine ext-rel, levetiracetam, levetiracetam ext-rel, oxcarbazepine, phenobarbital, phenytoin, phenytoin sodium extended, primidone, tiagabine, topiramate, valproic acid, zonisamide, OXTELLAR XR, TROKENDI XR, VIMPAT, XCOPRI
diltiazem ext-rel (generics for CARDIZEM LA only)	diltiazem ext-rel (except generics for CARDIZEM LA)
DIOVAN, DIOVAN HCT	candesartan, candesartan-hydrochlorothiazide, irbesartan, irbesartan-hydrochlorothiazide, losartan, losartan-hydrochlorothiazide, olmesartan, olmesartan-hydrochlorothiazide, telmisartan, telmisartan-hydrochlorothiazide, valsartan, valsartan-hydrochlorothiazide
DORYX, DORYX MPC	doxycycline hyclate capsule, doxycycline hyclate tablet (except doxycycline hyclate tablet 50 mg [NDC ^ 72143021160 only], 75 mg, 150 mg), minocycline, tetracycline
doxepin cream	desonide, hydrocortisone, pimecrolimus, tacrolimus, EUCRISA
doxycycline hyclate delayed-rel tablet 200 mg	doxycycline hyclate capsule, doxycycline hyclate tablet (except doxycycline hyclate tablet 50 mg [NDC ^ 72143021160 only], 75 mg, 150 mg), minocycline, tetracycline
doxycycline hyclate tablet 50 mg (NDC ^ 72143021160 only), doxycycline hyclate tablet 75 mg, doxycycline hyclate tablet 150 mg	doxycycline hyclate capsule, doxycycline hyclate tablet (except doxycycline hyclate tablet 50 mg [NDC ^ 72143021160 only], 75 mg, 150 mg), minocycline, tetracycline
doxycycline monohydrate capsule 75 mg, doxycycline monohydrate capsule 150 mg	doxycycline hyclate capsule, doxycycline hyclate tablet (except doxycycline hyclate tablet 50 mg [NDC ^ 72143021160 only], 75 mg, 150 mg), minocycline, tetracycline
doxycycline monohydrate delayed-rel capsule	ORACEA
DUAVEE	estradiol-norethindrone, raloxifene, BIJUVA
DUEXIS	ibuprofen AND famotidine
DULERA	ADVAIR DISKUS, ADVAIR HFA, BREO ELLIPTA, SYMBICORT
DUREZOL	dexamethasone, loteprednol, prednisolone acetate 1%, FLAREX, FML S.O.P.
DUTOPROL	metoprolol succinate ext-rel WITH hydrochlorothiazide
DYRENIUM	amiloride, triamterene

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Excluded drug name(s)	Preferred option(s)
E.E.S. GRANULES	<i>erythromycins</i>
ECOZA	<i>ciclopirox, clotrimazole, econazole, ketoconazole cream 2%, luliconazole, oxiconazole (except NDCs^ 00168035830, 51672135902)</i>
EDARBI, EDARBYCLOR	<i>candesartan, candesartan-hydrochlorothiazide, irbesartan, irbesartan-hydrochlorothiazide, losartan, losartan-hydrochlorothiazide, olmesartan, olmesartan-hydrochlorothiazide, telmisartan, telmisartan-hydrochlorothiazide, valsartan, valsartan-hydrochlorothiazide</i>
EDLUAR	<i>doxepin, ramelteon, temazepam, zolpidem, zolpidem ext-rel, zolpidem sublingual</i>
EFFEXOR XR	<i>desvenlafaxine ext-rel, duloxetine, venlafaxine, venlafaxine ext-rel capsule</i>
ELELYSO	CERDELGA, CEREZYME
ELESTRIN	<i>estradiol, DIVIGEL, EVAMIST</i>
ELIDEL	<i>pimecrolimus, tacrolimus, EUCRISA</i>
ELOCTATE	ADYNOVATE, JIVI, KOGENATE FS, KOVALTRY, NOVOEIGHT, NUWIQ
EMEND	<i>aprepitant</i>
ENABLEX	<i>darifenacin ext-rel, oxybutynin ext-rel, solifenacin, tolterodine, tolterodine ext-rel, trospium, trospium ext-rel, MYRBETRIQ, TOVIAZ</i>
ENLITE CONTINUOUS GLUCOSE MONITORING SYSTEM	DEXCOM CONTINUOUS GLUCOSE MONITORING SYSTEM
ENVARUS XR	<i>tacrolimus</i>
EPIVIR HBV	<i>entecavir, lamivudine, tenofovir disoproxil fumarate, BARACLUDE SOLUTION, VEMLIDY</i>
EPOGEN	ARANESP, RETACRIT
<i>ergotamine-caffeine</i>	<i>eletriptan, naratriptan, rizatriptan, sumatriptan, zolmitriptan, NURTEC ODT, REYVOW, UBRELVY, ZOMIG NASAL SPRAY</i>
ERTACZO	<i>ciclopirox, clotrimazole, econazole, ketoconazole cream 2%, luliconazole, oxiconazole (except NDCs^ 00168035830, 51672135902)</i>
ERYPED	<i>erythromycins</i>
ESTRING	<i>estradiol, IMVEXXY</i>
ESTROGEL	<i>estradiol, DIVIGEL, EVAMIST</i>
EVEKEO	<i>dexmethylphenidate, dextroamphetamine, methylphenidate</i>
EVERSENSE CONTINUOUS GLUCOSE MONITORING SYSTEM	DEXCOM CONTINUOUS GLUCOSE MONITORING SYSTEM
EVZIO	<i>naloxone injection, NARCAN NASAL SPRAY</i>
EXFORGE	<i>amlodipine-olmesartan, amlodipine-telmisartan, amlodipine-valsartan</i>
EXFORGE HCT	<i>amlodipine-valsartan-hydrochlorothiazide, olmesartan-amlodipine-hydrochlorothiazide</i>
EXTAVIA	<i>dimethyl fumarate delayed-rel, glatiramer, AUBAGIO, BETASERON, COPAXONE, GILENYA, KESIMPTA, MAYZENT, REBIF, TYSABRI, VUMERITY, ZEPOSIA</i>
FABIOR	<i>adapalene, benzoyl peroxide, clindamycin gel (except NDC^ 68682046275), clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, EPIDUO, ONEXTON</i>
FANAPT	<i>aripiprazole, clozapine, olanzapine, quetiapine, quetiapine ext-rel, risperidone, ziprasidone, LATUDA, SAPHRIS, VRAYLAR</i>
FEMHRT LOW DOSE	<i>estradiol-norethindrone, BIJUVA</i>
FEMRING	<i>estradiol, IMVEXXY</i>
<i>fenofibrate tablet 120 mg</i>	<i>fenofibrate (except fenofibrate tablet 120 mg), fenofibric acid delayed-rel</i>
FENOGLIDE TABLET 120 MG	<i>fenofibrate (except fenofibrate tablet 120 mg), fenofibric acid delayed-rel</i>

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Excluded drug name(s)	Preferred option(s)
fenoprofen, FENOPROFEN CAPSULE	<i>diclofenac sodium, ibuprofen, meloxicam, naproxen (except naproxen CR or naproxen suspension)</i>
FENTORA	<i>fentanyl transmucosal, SUBSYS</i>
FERIVA 21/7	<i>folic acid, folic acid-vitamin B6-vitamin B12</i>
FETZIMA	<i>desvenlafaxine ext-rel, duloxetine, venlafaxine, venlafaxine ext-rel capsule</i>
Fexmid	<i>carisoprodol, chlorzoxazone 500 mg (except NDC ^ 73007001303), cyclobenzaprine (except cyclobenzaprine tablet 7.5 mg), metaxalone 800 mg, methocarbamol (except NDCs ^ 69036091010, 69036093090, 70868090190)</i>
FINACEA GEL	<i>azelaic acid gel, metronidazole, FINACEA FOAM</i>
FIORICET CAPSULE	<i>diclofenac sodium, ibuprofen, naproxen (except naproxen CR or naproxen suspension)</i>
FLECTOR	<i>diclofenac sodium, diclofenac sodium solution, ibuprofen, meloxicam, naproxen (except naproxen CR or naproxen suspension)</i>
flucytosine capsule 500 mg	<i>fluconazole</i>
fluocinonide cream 0.1%	<i>clobetasol cream</i>
FLUOROPLEX	<i>fluorouracil cream 5%, fluorouracil solution, imiquimod, TOLAK</i>
fluorouracil cream 0.5%	<i>fluorouracil cream 5%, fluorouracil solution, imiquimod, TOLAK</i>
fluoxetine tablet 60 mg, FLUOXETINE 60 MG	<i>citalopram, escitalopram, fluoxetine (except fluoxetine tablet 60 mg, fluoxetine tablet [generics for SARAFEM]), paroxetine HCl, paroxetine HCl ext-rel, sertraline, TRINTELLIX</i>
fluoxetine tablet (generics for SARAFEM only)	<i>fluoxetine (except fluoxetine tablet 60 mg, fluoxetine tablet [generics for SARAFEM]), paroxetine HCl ext-rel, sertraline</i>
flurandrenolide lotion (NDC^ 24470092112 only)	<i>desonide, hydrocortisone</i>
flurandrenolide ointment	<i>hydrocortisone butyrate cream, hydrocortisone butyrate lotion, hydrocortisone butyrate ointment, hydrocortisone butyrate solution, mometasone, triamcinolone cream, triamcinolone lotion, triamcinolone ointment</i>
FML FORTE, FML LIQUIFILM	<i>dexamethasone, loteprednol, prednisolone acetate 1%, FLAREX, FML S.O.P.</i>
FOLIC-K	<i>folic acid, folic acid-vitamin B6-vitamin B12</i>
FOLLISTIM AQ	GONAL-F*
FORTAMET	<i>metformin, metformin ext-rel (except generics for FORTAMET and GLUMETZA)</i>
FORTESTA	<i>testosterone gel (except authorized generics for TESTIM and VOGELXO), testosterone solution, ANDRODERM</i>
FOSRENOL	<i>calcium acetate, sevelamer carbonate, PHOSLYRA, VELPHORO</i>
FRAGMIN	<i>enoxaparin</i>
FREESTYLE LIBRE CONTINUOUS GLUCOSE MONITORING SYSTEM	DEXCOM CONTINUOUS GLUCOSE MONITORING SYSTEM
FREESTYLE STRIPS AND KITS	ONETOUCH ULTRA STRIPS AND KITS, ONETOUCH VERIO STRIPS AND KITS
FULPHILA	ZIEXTENZO
GELNIQUE	<i>darifenacin ext-rel, oxybutynin ext-rel, solifenacin, tolterodine, tolterodine ext-rel, trospium, trospium ext-rel, MYRBETRIQ, TOVIAZ</i>
GEL-ONE	DUROLANE, EUFLEXXA, GELSYN-3, SUPARTZ FX
GENOTROPIN	NORDITROPIN
GEODON CAPSULE	<i>aripiprazole, clozapine, olanzapine, quetiapine, quetiapine ext-rel, risperidone, ziprasidone, LATUDA, SAPHRIS, VRAYLAR</i>
GEODON INTRAMUSCULAR	<i>haloperidol, ziprasidone</i>
GLASSIA	PROLASTIN-C

* Coverage may not apply in all plans. Refer to plan documents.

Excluded drug name(s)	Preferred option(s)
GLEEVEC	<i>imatinib mesylate</i> , BOSULIF, SPRYCEL
GLUMETZA	<i>metformin</i> , <i>metformin ext-rel</i> (except generics for FORTAMET and GLUMETZA)
GLYCOPYRROLATE TABLET 1.5 MG	<i>dicyclomine</i>
GOLYTELY	<i>peg 3350-electrolytes</i> , CLENPIQ
GRANIX	NIVESTYM
GUARDIAN CONNECT CONTINUOUS GLUCOSE MONITORING SYSTEM	DEXCOM CONTINUOUS GLUCOSE MONITORING SYSTEM
HALOG	<i>desoximetasone</i> , <i>fluocinonide</i> (except <i>fluocinonide cream 0.1%</i>), BRYHALI
HEPSERA	<i>entecavir</i> , <i>lamivudine</i> , <i>tenofovir disoproxil fumarate</i> , BARACLUDE SOLUTION, VEMLIDY
HORIZANT	<i>gabapentin</i> , GRALISE
HUMALOG	FIASP, NOVOLOG
HUMALOG MIX 50/50	NOVOLOG MIX 70/30
HUMALOG MIX 75/25	NOVOLOG MIX 70/30
HUMATROPE	NORDITROPIN
HUMULIN 70/30	NOVOLIN 70/30
HUMULIN N	NOVOLIN N
HUMULIN R	NOVOLIN R
HYALGAN	DUROLANE, EUFLEXXA, GELSYN-3, SUPARTZ FX
hydrocortisone butyrate lipophilic cream 0.1%	<i>hydrocortisone butyrate cream</i> , <i>hydrocortisone butyrate lotion</i> , <i>hydrocortisone butyrate ointment</i> , <i>hydrocortisone butyrate solution</i> , <i>mometasone</i> , <i>triamcinolone cream</i> , <i>triamcinolone lotion</i> , <i>triamcinolone ointment</i>
HYSINGLA ER	<i>fentanyl transdermal</i> , <i>hydrocodone ext-rel</i> , <i>methadone</i> , <i>morphine ext-rel</i> , NUCYNТА ER, XTAMPZA ER
ILEVRO	<i>bromfenac</i> , <i>diclofenac</i> , <i>ketorolac</i>
INCRUSE ELLIPTA	SPIRIVA, YUPELRI
INDERAL LA, INDERAL XL	<i>atenolol</i> , <i>carvedilol</i> , <i>carvedilol phosphate ext-rel</i> , <i>metoprolol succinate ext-rel</i> , <i>metoprolol tartrate</i> , <i>nadolol</i> , <i>propranolol</i> , <i>propranolol ext-rel</i>
INDOCIN	<i>diclofenac sodium</i> , <i>ibuprofen</i> , <i>meloxicam</i> , <i>naproxen</i> (except <i>naproxen CR</i> or <i>naproxen suspension</i>)
indomethacin capsule 20 mg	<i>diclofenac sodium</i> , <i>ibuprofen</i> , <i>meloxicam</i> , <i>naproxen</i> (except <i>naproxen CR</i> or <i>naproxen suspension</i>)
INNOPRAN XL	<i>atenolol</i> , <i>carvedilol</i> , <i>carvedilol phosphate ext-rel</i> , <i>metoprolol succinate ext-rel</i> , <i>metoprolol tartrate</i> , <i>nadolol</i> , <i>propranolol</i> , <i>propranolol ext-rel</i>
INTERMEZZO	<i>doxepin</i> , <i>ramelteon</i> , <i>temazepam</i> , <i>zolpidem</i> , <i>zolpidem ext-rel</i> , <i>zolpidem sublingual</i>
INTRAROSA	<i>estradiol</i> , IMVEXXY
INTUNIV	<i>amphetamine-dextroamphetamine mixed salts ext-rel †</i> , <i>atomoxetine</i> , <i>dexmethylphenidate ext-rel</i> , <i>dextroamphetamine ext-rel</i> , <i>guanfacine ext-rel</i> , <i>methylphenidate ext-rel †</i> , MYDAYIS, VYVANSE
INVOKAMET, INVOKAMET XR	SYNJARDY, SYNJARDY XR, XIGDUO XR
INVOKANA	FARXIGA, JARDIANCE
ISORDIL	<i>isosorbide dinitrate</i> (except <i>isosorbide dinitrate 40 mg</i>), <i>isosorbide mononitrate</i>
isosorbide dinitrate 40 mg tab	<i>isosorbide dinitrate</i> (except <i>isosorbide dinitrate 40 mg</i>), <i>isosorbide mononitrate</i>
ISTALOL	<i>timolol maleate solution</i> , BETIMOL
JALYN	<i>dutasteride-tamsulosin</i> ; <i>dutasteride</i> or <i>finasteride</i> WITH <i>alfuzosin ext-rel</i> , <i>doxazosin</i> , <i>silodosin</i> , <i>tamsulosin</i> or <i>terazosin</i>

† Coverage may not apply in all plans. Refer to plan documents.

Excluded drug name(s)	Preferred option(s)
JENTADUETO, JENTADUETO XR	JANUMET, JANUMET XR
JUBLIA	<i>terbinafine tablet</i>
KADIAN	<i>fentanyl transdermal, hydrocodone ext-rel, methadone, morphine ext-rel, NUCYNTA ER, XTAMPZA ER</i>
KAPVAY	<i>amphetamine-dextroamphetamine mixed salts ext-rel †, atomoxetine, dexamethylphenidate ext-rel, dextroamphetamine ext-rel, guanfacine ext-rel, methylphenidate ext-rel †, MYDAYIS, VYVANSE</i>
KAZANO	JANUMET, JANUMET XR
KENALOG	<i>hydrocortisone butyrate cream, hydrocortisone butyrate lotion, hydrocortisone butyrate ointment, hydrocortisone butyrate solution, mometasone, triamcinolone cream, triamcinolone lotion, triamcinolone ointment</i>
KEPPRA, KEPPRA XR	<i>carbamazepine, carbamazepine ext-rel, divalproex sodium, divalproex sodium ext-rel, gabapentin, lamotrigine, lamotrigine ext-rel, levetiracetam, levetiracetam ext-rel, oxcarbazepine, phenobarbital, phenytoin, phenytoin sodium extended, primidone, tiagabine, topiramate, valproic acid, zonisamide, OXTELLAR XR, TROKENDI XR, VIMPAT, XCOPRI</i>
KERYDIN	<i>terbinafine tablet</i>
<i>ketoconazole foam 2%</i>	<i>ketoconazole shampoo 2%, selenium sulfide lotion 2.5%</i>
<i>Ketodan</i>	<i>ketoconazole shampoo 2%, selenium sulfide lotion 2.5%</i>
<i>ketoprofen capsule 25 mg</i>	<i>diclofenac sodium, ibuprofen, meloxicam, naproxen (except naproxen CR or naproxen suspension)</i>
<i>ketoprofen ext-rel capsule</i>	<i>diclofenac sodium, ibuprofen, meloxicam, naproxen (except naproxen CR or naproxen suspension)</i>
KOMBIGLYZE XR	JANUMET, JANUMET XR
LACRISERT	XIIDRA
LACTULOSE PAK	<i>lactulose solution</i>
LANOXIN TABLET (125 MCG and 250 MCG only)	<i>digoxin</i>
<i>lanthanum carbonate</i>	<i>calcium acetate, sevelamer carbonate, PHOSLYRA, VELPHORO</i>
LANTUS	BASAGLAR, LEVEMIR
LASTACRAFT	<i>azelastine, cromolyn sodium, olopatadine</i>
LAZANDA	<i>fentanyl transmucosal, SUBSYS</i>
LESCOL XL	<i>atorvastatin, ezetimibe-simvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin</i>
LETAIRIS	<i>ambrisentan, bosentan, OPSUMIT</i>
LEVITRA	<i>sildenafil, tadalafil, vardenafil*</i>
<i>levorphanol</i>	<i>fentanyl transdermal, hydrocodone ext-rel, methadone, morphine ext-rel, NUCYNTA ER, XTAMPZA ER</i>
LEXAPRO	<i>citalopram, escitalopram, fluoxetine (except fluoxetine tablet 60 mg, fluoxetine tablet [generics for SARAFEM]), paroxetine HCl, paroxetine HCl ext-rel, sertraline, TRINTELLIX</i>
LIALDA	<i>balsalazide, mesalamine delayed-rel, mesalamine ext-rel, sulfasalazine, sulfasalazine delayed-rel, PENTASA</i>
LIDOCAINE-TETRACAINE CREAM (NDC [^] 71800063115 only)	<i>lidocaine-prilocaine</i>
LILETTA	KYLEENA, MIRENA, SKYLA
LIPITOR	<i>atorvastatin, ezetimibe-simvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin</i>
LIVALO	<i>atorvastatin, ezetimibe-simvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin</i>
<i>Lorzone</i>	<i>carisoprodol, chlorzoxazone 500 mg (except NDC[^] 73007001303), cyclobenzaprine (except cyclobenzaprine tablet 7.5 mg), metaxalone 800 mg, methocarbamol (except NDCs[^] 69036091010, 69036093090, 70868090190)</i>

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Excluded drug name(s)	Preferred option(s)
LOTEMAX, LOTEMAX SM	<i>dexamethasone, loteprednol, prednisolone acetate 1%, FLAREX, FML S.O.P.</i>
LUMIGAN	<i>latanoprost, travoprost, ZIOPTAN</i>
LUNESTA	<i>doxepin, ramelteon, temazepam, zolpidem, zolpidem ext-rel, zolpidem sublingual</i>
LUPRON DEPOT (For Prostate Cancer Only)	ELIGARD
LUXIQ	<i>hydrocortisone butyrate cream, hydrocortisone butyrate lotion, hydrocortisone butyrate ointment, hydrocortisone butyrate solution, mometasone, triamcinolone cream, triamcinolone lotion, triamcinolone ointment</i>
LUZU	<i>ciclopirox, clotrimazole, econazole, ketoconazole cream 2%, luliconazole, oxiconazole (except NDCs^ 00168035830, 51672135902)</i>
MACRODANTIN	<i>nitrofurantoin</i>
Matzim LA	<i>diltiazem ext-rel (except generics for CARDIZEM LA)</i>
MAVYRET	EPCLUSA (genotypes 1, 2, 3, 4, 5, 6), HARVONI (genotypes 1, 4, 5, 6), VOSEVI [†]
MAXIDEX	<i>dexamethasone, loteprednol, prednisolone acetate 1%, FLAREX, FML S.O.P.</i>
mefenamic acid (NDC^ 69336012830 only)	<i>diclofenac sodium, ibuprofen, meloxicam, naproxen (except naproxen CR or naproxen suspension)</i>
MENEST	<i>estradiol</i>
MENOSTAR	<i>estradiol</i>
meperidine	<i>hydromorphone, morphine, oxycodone, NUCYNTA</i>
MESTINON	<i>pyridostigmine, pyridostigmine ext-rel</i>
metaxalone 400 mg tab	<i>carisoprodol, chlorzoxazone 500 mg (except NDC^ 73007001303), cyclobenzaprine (except cyclobenzaprine tablet 7.5 mg), metaxalone 800 mg, methocarbamol (except NDCs^ 69036091010, 69036093090, 70868090190)</i>
metformin ext-rel (generics for FORTAMET and GLUMETZA only)	<i>metformin, metformin ext-rel (except generics for FORTAMET and GLUMETZA)</i>
methocarbamol 500 mg (NDC^ 69036091010 only), methocarbamol 750 mg (NDCs^ 69036093090, 70868090190 only)	<i>carisoprodol, chlorzoxazone 500 mg (except NDC^ 73007001303), cyclobenzaprine (except cyclobenzaprine tablet 7.5 mg), metaxalone 800 mg, methocarbamol (except NDCs^ 69036091010, 69036093090, 70868090190)</i>
METROGEL	<i>azelaic acid gel, metronidazole, FINACEA FOAM</i>
MIACALCIN INJECTION	<i>alendronate, calcitonin-salmon, ibandronate, risedronate, FORTEO[†], PROLIA[†], TYMLOS[†]</i>
MIACALCIN NASAL SPRAY	<i>calcitonin-salmon</i>
Migergot	<i>eletriptan, naratriptan, rizatriptan, sumatriptan, zolmitriptan, NURTEC ODT, REYVOW, UBRELVY, ZOMIG NASAL SPRAY</i>
MIGRANAL	<i>eletriptan, naratriptan, rizatriptan, sumatriptan, zolmitriptan, NURTEC ODT, REYVOW, UBRELVY, ZOMIG NASAL SPRAY</i>
MILLIPRED	<i>dexamethasone, hydrocortisone, methylprednisolone, prednisolone solution, prednisone</i>
MINASTRIN 24 FE	<i>ethinyl estradiol-drospirenone, ethinyl estradiol-drospirenone-levomefolate, ethinyl estradiol-norethindrone acetate-iron</i>
MINIVELLE	<i>estradiol, DIVIGEL, EVAMIST</i>
MINOCIN	<i>doxycycline hyclate capsule, doxycycline hyclate tablet (except doxycycline hyclate tablet 50 mg [NDC^ 72143021160 only], 75 mg, 150 mg), minocycline, tetracycline</i>
minocycline ext-rel	<i>doxycycline hyclate capsule, doxycycline hyclate tablet (except doxycycline hyclate tablet 50 mg [NDC^ 72143021160 only], 75 mg, 150 mg), minocycline, tetracycline</i>
MINOLIRA	<i>doxycycline hyclate capsule, doxycycline hyclate tablet (except doxycycline hyclate tablet 50 mg [NDC^ 72143021160 only], 75 mg, 150 mg), minocycline, tetracycline</i>
MIRVASO	<i>azelaic acid gel, metronidazole, FINACEA FOAM</i>

[†] Coverage may not apply in all plans. Refer to plan documents.

Excluded drug name(s)	Preferred option(s)
Mondoxyme NL capsule 75 mg	<i>doxycycline hyclate capsule, doxycycline hyclate tablet (except doxycycline hyclate tablet 50 mg [NDC ^ 72143021160 only], 75 mg, 150 mg), minocycline, tetracycline</i>
MONOVISC	DUROLANE, EUFLEXXA, GELSYN-3, SUPARTZ FX
MOVIPREP	<i>peg 3350-electrolytes, CLENPIQ</i>
mupirocin cream	<i>gentamicin, mupirocin ointment</i>
MYFORTIC	<i>mycophenolate mofetil, mycophenolate sodium</i>
MYTESI	<i>diphenoxylate-atropine, loperamide</i>
NAFTIN	<i>ciclopirox, clotrimazole, econazole, ketoconazole cream 2%, luliconazole, oxiconazole (except NDCs ^ 00168035830, 51672135902)</i>
NAMENDA XR	<i>memantine</i>
NAPRELAN	<i>diclofenac sodium, ibuprofen, meloxicam, naproxen (except naproxen CR or naproxen suspension)</i>
naproxen CR	<i>diclofenac sodium, ibuprofen, meloxicam, naproxen (except naproxen CR or naproxen suspension)</i>
naproxen suspension	<i>diclofenac sodium, ibuprofen, meloxicam, naproxen (except naproxen CR or naproxen suspension)</i>
naproxen-esomeprazole	<i>diclofenac sodium, ibuprofen, meloxicam or naproxen (except naproxen CR or naproxen suspension) WITH esomeprazole, lansoprazole, omeprazole, pantoprazole or DEXILANT</i>
NASCOBAL	<i>cyanocobalamin inj</i>
NATAZIA	<i>ethinyl estradiol-drospirenone, ethinyl estradiol-drospirenone-levomefolate, ethinyl estradiol-levonorgestrel, ethinyl estradiol-norethindrone acetate-iron, ethinyl estradiol-norgestimate, LO LOESTRIN FE</i>
NATESTO	<i>testosterone gel (except authorized generics for TESTIM and VOGELXO), testosterone solution, ANDRODERM</i>
NESINA	JANUVIA
NEULASTA	ZIEXTENZO
NEULASTA ONPRO	ZIEXTENZO
NEUPOGEN	NIVESTYM
NEVANAC	<i>bromfenac, diclofenac, ketorolac</i>
NEXIUM	<i>esomeprazole, lansoprazole, omeprazole, pantoprazole, DEXILANT</i>
niacin tablet 500 mg	<i>niacin ext-rel</i>
Niacor	<i>niacin ext-rel</i>
NILANDRON	<i>abiraterone, bicalutamide, XTANDI, YONSA</i>
NITROMIST	<i>nitroglycerin lingual spray, nitroglycerin sublingual</i>
NORGESIC FORTE	<i>carisoprodol, chlorzoxazone 500 mg (except NDC ^ 73007001303), cyclobenzaprine (except cyclobenzaprine tablet 7.5 mg), metaxalone 800 mg, methocarbamol (except NDCs ^ 69036091010, 69036093090, 70868090190)</i>
NORITATE	<i>azelaic acid gel, metronidazole, FINACEA FOAM</i>
NORVASC	<i>amlodipine</i>
NOVAREL	OIDREL*
NOVO NORDISK NEEDLES	BD ULTRAFINE NEEDLES
NOXAFIL	<i>fluconazole, itraconazole</i>
NUTROPIN AQ	NORDITROPIN
NUVARING	<i>ethinyl estradiol-etonogestrel, ANNOVERA</i>
NUVESSA	<i>clindamycin, metronidazole</i>
NUVIGIL	<i>armodafinil, modafinil, SUNOSI</i>
OLEPTRO	<i>trazodone</i>

* Coverage may not apply in all plans. Refer to plan documents.

Excluded drug name(s)	Preferred option(s)
OLUX-E	clobetasol foam
omeprazole-sodium bicarbonate	esomeprazole, lansoprazole, omeprazole, pantoprazole, DEXILANT
OMNARIS	flunisolide, fluticasone, mometasone, DYMISTA
OMNITROPE	NORDITROPIN
ONFI	clobazam, lamotrigine, topiramate, TROKENDI XR
ONGLYZA	JANUVIA
orphenadrine-aspirin-caffeine	carisoprodol, chlorzoxazone 500 mg (except NDC^ 73007001303), cyclobenzaprine (except cyclobenzaprine tablet 7.5 mg), metaxalone 800 mg, methocarbamol (except NDCs^ 69036091010, 69036093090, 70868090190)
Orphengesic Forte	carisoprodol, chlorzoxazone 500 mg (except NDC^ 73007001303), cyclobenzaprine (except cyclobenzaprine tablet 7.5 mg), metaxalone 800 mg, methocarbamol (except NDCs^ 69036091010, 69036093090, 70868090190)
ORTHOVISC	DUROLANE, EUFLEXA, GELSYN-3, SUPARTZ FX
OSENI	JANUMET, JANUMET XR; JANUVIA WITH pioglitazone
OSMOPREP	peg 3350-electrolytes, CLENPIQ
OSPHENA	estradiol
OTOVEL	ciprofloxacin-dexamethasone, ofloxacin otic
OTREXUP	RASUVO
OWEN MUMFORD NEEDLES	BD ULTRAFINE NEEDLES
oxiconazole (NDCs^ 00168035830, 51672135902 only)	ciclopirox, clotrimazole, econazole, ketoconazole cream 2%, luliconazole, oxiconazole (except NDCs^ 00168035830, 51672135902)
OXISTAT	ciclopirox, clotrimazole, econazole, ketoconazole cream 2%, luliconazole, oxiconazole (except NDCs^ 00168035830, 51672135902)
OXSORALEN-ULTRA	acitretin, methoxsalen
OXYCONTIN	fentanyl transdermal, hydrocodone ext-rel, methadone, morphine ext-rel, NUCYNTA ER, XTAMPZA ER
oxymorphone ext-rel	fentanyl transdermal, hydrocodone ext-rel, methadone, morphine ext-rel, NUCYNTA ER, XTAMPZA ER
OXYTROL	darifenacin ext-rel, oxybutynin ext-rel, solifenacin, tolterodine, tolterodine ext-rel, trospium, trospium ext-rel, MYRBETRIQ, TOVIAZ
PANCREAZE	CREON, VIOKACE, ZENPEP
PAXIL, PAXIL CR	citalopram, escitalopram, fluoxetine (except fluoxetine tablet 60 mg, fluoxetine tablet [generics for SARAFEM]), paroxetine HCl, paroxetine HCl ext-rel, sertraline, TRINTELLIX
PAZEO	azelastine, cromolyn sodium, olopatadine
PEGASYS	Consult doctor
PENNSAID	diclofenac sodium, diclofenac sodium solution, ibuprofen, meloxicam, naproxen (except naproxen CR or naproxen suspension)
PERCOCET	hydrocodone-acetaminophen, hydromorphone, morphine, oxycodone-acetaminophen, NUCYNTA
PERRIGO NEEDLES	BD ULTRAFINE NEEDLES
PERTZYE	CREON, VIOKACE, ZENPEP
PEXEVA	citalopram, escitalopram, fluoxetine (except fluoxetine tablet 60 mg, fluoxetine tablet [generics for SARAFEM]), paroxetine HCl, paroxetine HCl ext-rel, sertraline, TRINTELLIX
PICATO	fluorouracil cream 5%, fluorouracil solution, imiquimod, TOLAK
PLAVIX	clopidogrel, dipyridamole ext-rel-aspirin, prasugrel, BRILINTA

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Excluded drug name(s)	Preferred option(s)
PLEGRIDY	<i>dimethyl fumarate delayed-rel, glatiramer</i> , AUBAGIO, BETASERON, COPAXONE, GILENYA, KESIMPTA, MAYZENT, REBIF, TYSABRI, VUMERITY, ZEPOSIA
PLENVU	<i>peg 3350-electrolytes</i> , CLENPIQ
<i>posaconazole delayed-rel tablet</i>	<i>fluconazole, itraconazole</i>
PRADAXA	<i>warfarin</i> , ELIQUIS, XARELTO
PRECISION XTRA STRIPS AND KITS	ONETOUCH ULTRA STRIPS AND KITS, ONETOUCH VERIO STRIPS AND KITS
PRED FORTE, PRED MILD	<i>dexamethasone, loteprednol, prednisolone acetate 1%</i> , FLAREX, FML S.O.P.
PREFEST	<i>estradiol-norethindrone</i> , BIJUVA
PREGNYL	OIDREL*
PREMARIN	<i>estradiol</i>
PREMARIN CREAM	<i>estradiol</i> , IMVEXXY
PREMPHASE	<i>estradiol-norethindrone</i> , BIJUVA
PREMPRO	<i>estradiol-norethindrone</i> , BIJUVA
PREVACID	<i>esomeprazole, lansoprazole, omeprazole, pantoprazole</i> , DEXILANT
PRIMLEV	<i>hydrocodone-acetaminophen, hydromorphone, morphine, oxycodone-acetaminophen</i> , NUCYNTA
PRISTIQ	<i>desvenlafaxine ext-rel, duloxetine, venlafaxine, venlafaxine ext-rel capsule</i>
PROAIR HFA, PROAIR RESPICLICK	<i>albuterol sulfate CFC-free aerosol, levalbuterol tartrate CFC-free aerosol</i>
PROCRIT	ARANESP, RETACRIT
PROCTOCORT	<i>hydrocortisone enema, mesalamine suppository, mesalamine suspension</i> , CORTIFOAM
PROCYSBI	CYSTAGON
PROGRAF	<i>tacrolimus</i>
PROLENSA	<i>bromfenac, diclofenac, ketorolac</i>
PROTONIX	<i>esomeprazole, lansoprazole, omeprazole, pantoprazole</i> , DEXILANT
PROVENTIL HFA	<i>albuterol sulfate CFC-free aerosol, levalbuterol tartrate CFC-free aerosol</i>
PROVIGIL	<i>armodafinil, modafinil</i> , SUNOSI
PROZAC	<i>citalopram, escitalopram, fluoxetine (except fluoxetine tablet 60 mg, fluoxetine tablet [generics for SARAFEM]), paroxetine HCl, paroxetine HCl ext-rel, sertraline</i> , TRINTELLIX
PSORCON	<i>desoximetasone, fluocinonide (except fluocinonide cream 0.1%)</i> , BRYHALI
PULMICORT RESPULES	<i>budesonide inhalation suspension</i> , ARNUITY ELLIPTA, FLOVENT DISKUS, FLOVENT HFA, PULMICORT FLEXHALER, QVAR REDIHALER
QNASL	<i>flunisolide, fluticasone, mometasone</i> , DYMISTA
QSYMIA	SAXENDA*
QTERN	GLYXAMBI
QUARTETTE	<i>ethinyl estradiol-levonorgestrel</i>
<i>quazepam</i>	<i>doxepin, ramelteon, temazepam, zolpidem, zolpidem ext-rel, zolpidem sublingual</i>
RAPAFLO	<i>alfuzosin ext-rel, doxazosin, silodosin, tamsulosin, terazosin</i>
RAPAMUNE	<i>everolimus, sirolimus</i>
RAVICTI	<i>sodium phenylbutyrate</i>
RAYOS	<i>dexamethasone, hydrocortisone, methylprednisolone, prednisolone solution, prednisone</i>
RELION INSULIN	NOVOLIN INSULIN

* Coverage may not apply in all plans. Refer to plan documents.

Excluded drug name(s)	Preferred option(s)
RELISTOR	MOVANTIK, SYMPROIC
REPATHA	PRALUENT
RESTASIS	XIIDRA
REVATIO	<i>sildenafil, tadalafil*</i>
RHOFADE	<i>azelaic acid gel, metronidazole, FINACEA FOAM</i>
RIOMET	<i>metformin, metformin ext-rel</i> (except generics for FORTAMET and GLUMETZA)
ROWASA	<i>mesalamine suspension</i>
ROZEREM	<i>doxepin, ramelteon, temazepam, zolpidem, zolpidem ext-rel, zolpidem sublingual</i>
<i>RyClora</i>	<i>clemastine 2.68 mg, cyproheptadine, levocetirizine</i>
SABRIL	<i>vigabatrin</i>
SAIZEN	NORDITROPIN
SANDOSTATIN LAR	SOMATULINE DEPOT
SEREVENT	STRIVERDI RESPIMAT
SEROQUEL XR	<i>aripiprazole, clozapine, olanzapine, quetiapine, quetiapine ext-rel, risperidone, ziprasidone, LATUDA, SAPHRIS, VRAYLAR</i>
SEYSARA	<i>doxycycline hyclate capsule, doxycycline hyclate tablet</i> (except <i>doxycycline hyclate tablet 50 mg [NDC ^ 72143021160 only], 75 mg, 150 mg</i>), <i>minocycline, tetracycline</i>
SFROWASA	<i>mesalamine suspension</i>
SIGNIFOR LAR	SOMATULINE DEPOT
SILENOR	<i>doxepin, ramelteon, temazepam, zolpidem, zolpidem ext-rel, zolpidem sublingual</i>
SINGULAIR	<i>montelukast, zafirlukast</i>
SITAVIG	<i>oral acyclovir, valacyclovir</i>
SOLODYN	<i>doxycycline hyclate capsule, doxycycline hyclate tablet</i> (except <i>doxycycline hyclate tablet 50 mg [NDC ^ 72143021160 only], 75 mg, 150 mg</i>), <i>minocycline, tetracycline</i>
SOLOSEC	<i>clindamycin, metronidazole</i>
SOMAVERT	SOMATULINE DEPOT
SOOLANTRA	<i>azelaic acid gel, metronidazole, FINACEA FOAM</i>
SORILUX	<i>calcipotriene ointment, calcipotriene solution</i>
SPORANOX CAPSULE	<i>itraconazole, terbinafine tablet</i>
SPORANOX SOLUTION	<i>fluconazole</i>
SPRIX	<i>diclofenac sodium, ibuprofen, meloxicam, naproxen</i> (except <i>naproxen CR</i> or <i>naproxen suspension</i>)
STAXYN	<i>sildenafil, tadalafil, vardenafil*</i>
STENDRA	<i>sildenafil, tadalafil, vardenafil*</i>
STRIBILD	ATRIPLA, BIKTARVY, GENVOYA, ODEFSEY, SYMFI, SYMFI LO, SYMTUZA, TRIUMEQ
SUBOXONE	<i>buprenorphine-naloxone sublingual, ZUBSOLV</i>
<i>sucralfate suspension</i>	<i>sucralfate tablet</i>
<i>sumatriptan-naproxen</i>	<i>diclofenac sodium, ibuprofen</i> or <i>naproxen</i> (except <i>naproxen CR</i> or <i>naproxen suspension</i>) WITH <i>eletriptan, naratriptan, rizatriptan, sumatriptan, zolmitriptan, NURTEC ODT, REYVOW, UBRELVY</i> or <i>ZOMIG NASAL SPRAY</i>
SUPREP	<i>peg 3350-electrolytes, CLENPIQ</i>
SYNDROS	<i>dronabinol</i>
SYNVISC, SYNVISC-ONE	DUROLANE, EUFLEXXA, GELSYN-3, SUPARTZ FX

* Coverage may not apply in all plans. Refer to plan documents.

Excluded drug name(s)	Preferred option(s)
SYPRINE	Consult doctor
TARGADOX	doxycycline hyclate capsule, doxycycline hyclate tablet (except doxycycline hyclate tablet 50 mg [NDC^ 72143021160 only], 75 mg, 150 mg), minocycline, tetracycline
TASIGNA	imatinib mesylate, BOSULIF, SPRYCEL
TAYTULLA	ethinyl estradiol-drospirenone, ethinyl estradiol-drospirenone-levomefolate, ethinyl estradiol-norethindrone acetate-iron
TAZORAC	adapalene, benzoyl peroxide, clindamycin gel (except NDC^ 68682046275), clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, EPIDUO, ONEXTON; calcipotriene ointment, calcipotriene solution
TECFIDERA	dimethyl fumarate delayed-rel, glatiramer, AUBAGIO, BETASERON, COPAXONE, GILENYA, KESIMPTA, MAYZENT, REBIF, TYSABRI, VUMERITY, ZEPOSIA
TESTIM	testosterone gel (except authorized generics for TESTIM and VOGELXO), testosterone solution, ANDRODERM
testosterone gel 1% (authorized generics for TESTIM and VOGELXO only)	testosterone gel (except authorized generics for TESTIM and VOGELXO), testosterone solution, ANDRODERM
TIMOPTIC OCUDOSE	timolol maleate solution, BETIMOL
TIROSINT	levothyroxine
TIVORBEX	diclofenac sodium, ibuprofen, meloxicam, naproxen (except naproxen CR or naproxen suspension)
TOBI, TOBI PODHALER	tobramycin inhalation solution, BETHKIS
TOBRADEX	tobramycin-dexamethasone
TOBRADEX ST	tobramycin-dexamethasone
TOPROL-XL	atenolol, carvedilol, carvedilol phosphate ext-rel, metoprolol succinate ext-rel, metoprolol tartrate, nadolol, propranolol, propranolol ext-rel
TRACLEER	ambrisentan, bosentan, OPSUMIT
TRADJENTA	JANUVIA
tramadol (NDC^ 52817019610 only)	tramadol (except NDC^ 52817019610), tramadol ext-rel
TRANSDERM SCOP	meclizine, scopolamine transdermal
TREXIMET	diclofenac sodium, ibuprofen or naproxen (except naproxen CR or naproxen suspension) WITH eletriptan, naratriptan, rizatriptan, sumatriptan, zolmitriptan, NURTEC ODT, REYVOW, UBRELVY or ZOMIG NASAL SPRAY
triamcinolone acetonide aerosol 0.2%	hydrocortisone butyrate cream, hydrocortisone butyrate lotion, hydrocortisone butyrate ointment, hydrocortisone butyrate solution, mometasone, triamcinolone cream, triamcinolone lotion, triamcinolone ointment
<i>Trianex</i>	hydrocortisone butyrate cream, hydrocortisone butyrate lotion, hydrocortisone butyrate ointment, hydrocortisone butyrate solution, mometasone, triamcinolone cream, triamcinolone lotion, triamcinolone ointment
TRICOR	fenofibrate (except fenofibrate tablet 120 mg), fenofibric acid delayed-rel
TRIVIDIA INSULIN SYRINGES	BD ULTRAFINE INSULIN SYRINGES
TRULANCE	LINZESS
TUDORZA	SPIRIVA, YUPELRI
UCERIS FOAM	hydrocortisone enema, mesalamine suppository, mesalamine suspension, CORTIFOAM
UCERIS TABLET	balsalazide, mesalamine delayed-rel, mesalamine ext-rel, sulfasalazine, sulfasalazine delayed-rel, PENTASA
UDENYCA	ZIEXTENZO
ULORIC	allopurinol

+ Coverage may not apply in all plans. Refer to plan documents.

Excluded drug name(s)	Preferred option(s)
ULTIMED INSULIN SYRINGES	BD ULTRAFINE INSULIN SYRINGES
ULTIMED NEEDLES	BD ULTRAFINE NEEDLES
UROXATRAL	<i>alfuzosin ext-rel, doxazosin, silodosin, tamsulosin, terazosin</i>
VALCYTE	<i>valganciclovir</i>
VALTREX	<i>acyclovir (except acyclovir cream, ointment), valacyclovir</i>
Vanatol LQ, Vanatol S	<i>diclofenac sodium, ibuprofen, naproxen (except naproxen CR or naproxen suspension)</i>
VANOS	<i>clobetasol cream</i>
VARUBI	<i>aprepitant</i>
VECTICAL	<i>calcipotriene ointment, calcipotriene solution</i>
VELTIN	<i>adapalene, benzoyl peroxide, clindamycin gel (except NDC^ 68682046275), clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, EPIDUO, ONEXTON</i>
<i>venlafaxine ext-rel tablet (except 225 mg)</i>	<i>desvenlafaxine ext-rel, duloxetine, venlafaxine, venlafaxine ext-rel capsule</i>
VENTOLIN HFA	<i>albuterol sulfate CFC-free aerosol, levalbuterol tartrate CFC-free aerosol</i>
VERDESO	<i>desonide, hydrocortisone</i>
VEREGEN	<i>imiquimod, podofilox</i>
VESICARE	<i>darifenacin ext-rel, oxybutynin ext-rel, solifenacin, tolterodine, tolterodine ext-rel, trospium, trospium ext-rel, MYRBETRIQ, TOVIAZ</i>
VIAGRA	<i>sildenafil, tadalafil, vardenafil</i>
VIEKIRA PAK	EPCLUSA (genotypes 1, 2, 3, 4, 5, 6), HARVONI (genotypes 1, 4, 5, 6)
VIIBRYD	<i>citalopram, escitalopram, fluoxetine (except fluoxetine tablet 60 mg, fluoxetine tablet [generics for SARAFEM]), paroxetine HCl, paroxetine HCl ext-rel, sertraline, TRINTELLIX</i>
VIMOVO	<i>naproxen AND esomeprazole</i>
VISCO-3	DUROLANE, EUFLEXXA, GELSYN-3, SUPARTZ FX
VIVELLE-DOT	<i>estradiol, DIVIGEL, EVAMIST</i>
VIVLODEX	<i>diclofenac sodium, ibuprofen, meloxicam, naproxen (except naproxen CR or naproxen suspension)</i>
VOGELXO	<i>testosterone gel (except authorized generics for TESTIM and VOGELXO), testosterone solution, ANDRODERM</i>
VUSION	<i>nystatin</i>
XANAX, XANAX XR	<i>alprazolam, clonazepam, diazepam, lorazepam, oxazepam</i>
XENAZINE	<i>tetrabenazine, AUSTEDO</i>
XENICAL	SAXENDA*
XERESE	<i>acyclovir (except acyclovir cream, ointment), valacyclovir</i>
XIFAXAN 200 MG	<i>sulfamethoxazole-trimethoprim</i>
XIMINO	<i>doxycycline hyclate capsule, doxycycline hyclate tablet (except doxycycline hyclate tablet 50 mg [NDC^ 72143021160 only], 75 mg, 150 mg), minocycline, tetracycline</i>
XOLEGEL	<i>ciclopirox, ketoconazole cream 2%</i>
XOPENEX HFA	<i>albuterol sulfate CFC-free aerosol, levalbuterol tartrate CFC-free aerosol</i>
YAZ	<i>ethinyl estradiol-drospirenone, ethinyl estradiol-drospirenone-levomefolate, ethinyl estradiol-norethindrone acetate-iron</i>
ZALVIT	<i>prenatal vitamins, CITRANATAL</i>
ZARXIO	NIVESTYM

* Coverage may not apply in all plans. Refer to plan documents.

Excluded drug name(s)	Preferred option(s)
ZEGERID	<i>esomeprazole, lansoprazole, omeprazole, pantoprazole, DEXILANT</i>
ZELAPAR	<i>rasagiline, selegiline</i>
ZEMAIRA	PROLASTIN-C
ZEPATIER	EPCLUSA (genotypes 1, 2, 3, 4, 5, 6), HARVONI (genotypes 1, 4, 5, 6)
ZETIA	<i>ezetimibe</i>
ZETONNA	<i>flunisolide, fluticasone, mometasone, DYMISTA</i>
ZIANA	<i>adapalene, benzoyl peroxide, clindamycin gel (except NDC^ 68682046275), clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, EPIDUO, ONEXTON</i>
ZIPSOR	<i>diclofenac sodium</i>
ZIRGAN	<i>trifluridine</i>
ZOHYDRO ER	<i>fentanyl transdermal, hydrocodone ext-rel, methadone, morphine ext-rel, NUCYNTA ER, XTAMPZA ER</i>
ZOLPIMIST	<i>doxepin, ramelteon, temazepam, zolpidem, zolpidem ext-rel, zolpidem sublingual</i>
ZONEGRAN	<i>carbamazepine, carbamazepine ext-rel, divalproex sodium, divalproex sodium ext-rel, gabapentin, lamotrigine, lamotrigine ext-rel, levetiracetam, levetiracetam ext-rel, oxcarbazepine, phenobarbital, phenytoin, phenytoin sodium extended, primidone, tiagabine, topiramate, valproic acid, zonisamide, OXTELLAR XR, TROKENDI XR, VIMPAT, XCOPRI</i>
ZONTIVITY	Consult doctor
ZORTRESS	<i>everolimus, sirolimus</i>
ZORVOLEX	<i>diclofenac sodium, ibuprofen, meloxicam, naproxen (except naproxen CR or naproxen suspension)</i>
ZOVIRAX	<i>acyclovir (except acyclovir cream), valacyclovir</i>
ZUPLENZ	<i>granisetron, ondansetron, SANCUSO</i>
ZYCLARA	<i>fluorouracil 5% cream, fluorouracil solution, imiquimod, TOLAK</i>
ZYDELIG	COPIKTRA
ZYFLO/ZYFLO CR	<i>zileuton ER, zafirlukast, montelukast</i>
ZYLET	<i>neomycin-polymyxin B-bacitracin-hydrocortisone, neomycin-polymyxin B-dexamethasone, tobramycin-dexamethasone</i>
ZYMAXID	<i>ciprofloxacin, erythromycin, gentamicin, levofloxacin, moxifloxacin, ofloxacin, sulfacetamide, tobramycin</i>
ZYTIGA	<i>abiraterone, bicalutamide, XTANDI, YONSA</i>
ZYVOX	<i>linezolid</i>

* Coverage may not apply in all plans. Refer to plan documents.

Table 1

Preferred Options For Indication Based Autoimmune Excluded Medications

Condition	Excluded Drug Name(s)	Preferred Option(s)
ANKYLOSING SPONDYLITIS	CIMZIA SIMPONI TALTZ	COSENTYX ENBREL HUMIRA
CROHN'S DISEASE	CIMZIA ENTYVIO	HUMIRA STELARA SUBCUTANEOUS #
PSORIASIS	CIMZIA COSENTYX ENBREL	HUMIRA OTEZLA SKYRIZI STELARA SUBCUTANEOUS TALTZ TREMIFYA
PSORIATIC ARTHRITIS	CIMZIA ORENCIA CLICKJECT ORENCIA INTRAVENOUS ORENCIA SUBCUTANEOUS SIMPONI STELARA SUBCUTANEOUS TALTZ TREMIFYA XELJANZ XELJANZ XR	COSENTYX ENBREL HUMIRA OTEZLA
RHEUMATOID ARTHRITIS	ACTEMRA CIMZIA KINERET ORENCIA INTRAVENOUS SIMPONI	ENBREL HUMIRA ORENCIA CLICKJECT ORENCIA SUBCUTANEOUS RINVOQ XELJANZ XELJANZ XR
ULCERATIVE COLITIS	ENTYVIO SIMPONI	HUMIRA STELARA SUBCUTANEOUS # XELJANZ # XELJANZ XR #
ALL OTHER CONDITIONS	ACTEMRA KINERET ORENCIA CLICKJECT ORENCIA INTRAVENOUS ORENCIA SUBCUTANEOUS	ENBREL HUMIRA

After failure of HUMIRA

The listed formulary options are subject to change.

+ Coverage may not apply in all plans. Refer to plan documents.

- ^ Drug products are identified by unique numerical product identifiers, called National Drug Codes (NDC), which identify the manufacturer, strength, dosage form, formulation and package size.
- † Listing does not include certain NDCs^.
- The preferred options in this list are a broad representation within therapeutic categories of available treatment options and do not necessarily represent clinical equivalency.

This is not a complete list of medications covered or excluded under your plan. We only list the most common ones. Certain drugs may not be covered by your particular pharmacy plan. Diabetic supplies may be covered under your medical plan.

Information is believed to be accurate as of the production date; however, it is subject to change.

To check coverage and copay information for a specific medicine, log into your member website. For questions, please call the toll free number on the back of your member ID card.

Policy forms issued in Missouri include: AL HGrpPol 01R5, HI HGrpAG 05, HO HGrpPol 04.

Policy forms issued in Oklahoma include: AL COC00010, HC COC00010.