



2023 Express Scripts National Preferred Formulary

KEY
[INJ] - Injectable Drug
Brand-name drugs are listed
in CAPITAL letters.
Generic drugs are listed
in lower case letters.

A

ABILIFY MAINTENA [INJ]
acetaminophen/codeine
ACTEMRA [INJ]
acyclovir
ADBRV [INJ]
ADEMPAS
ADVAIR HFA
ADVATE [INJ]
ADYNOVATE [INJ]
AFSTYLA [INJ]
AIMOVIG [INJ]
AJOVY [INJ]
albuterol nebulization solution
albuterol sulfate hfa
(by Cipla, Civica, Exelan,
Lupin, Perrigo, Sandoz,
Teva & West-Ward)

ALECENSA
alendronate
allopurinol
alprazolam
ALUNBRIG
amiodarone
amitriptyline
AMJEVITA (NDCs starting
with 55513) [INJ]
amlodipine
amlodipine/benazepril
amlodipine/valsartan
amoxicillin
amoxicillin/potassium
clavulanate
anastrozole
ANDRODERM
ANORO ELLIPTA
ARALAST NP [INJ]
ARIKAYCE
aripiprazole
ARISTADA [INJ]
ARMOUR THYROID
ARNUITY ELLIPTA
ASMANEX HFA
ASMANEX TWISTHALER
atenolol
atomoxetine
atorvastatin
AUBAGIO
AUSTEDO
AVONEX [INJ]
AZASITE
azelastine nasal spray
azithromycin

B

baclofen
BAFIERTAM
BAQSIMI
BARACLUDE SOLUTION

BAXDELA
BD DIABETES PEN NEEDLES
BD DIABETES SYRINGES
BELBUCA
benazepril
benzonatate
betaine anhydrous
BETASERON [INJ]
BEVESPI AEROSPHERE
BIKTARVY
bisoprolol/hctz
BOSULIF
BREGO ELLIPTA
BRETTRI AEROSPHERE
BRILINTA
budesonide nebulization
suspension
buprenorphine/naloxone
bupropion
bupropion ext-release
buspirone
butalbital/acetaminophen/
caffeine
BYDUREON BCISE [INJ]
BYETTA [INJ]
BYOOVIZ [INJ]

C

CABOMETYX
CALQUENCE
carbidopa/levodopa
carvedilol
cefdinir
cefuroxime axetil
celecoxib
cephalexin
CEQR SIMPLICITY
CERDELGA
CEREZYME [INJ]
CETROTIDE [INJ]
chlorhexidine gluconate
chlorthalidone
CIBINQO
CIMDUO
CIMERLI [INJ]
ciprofloxacin
citalopram
clarithromycin
clindamycin hcl
clindamycin phosphate
topical
clindamycin phosphate/
benzoyl peroxide
clobetasol propionate
clomiphene citrate
clonazepam
clonidine
clopidogrel
clotrimazole/betamethasone
dipropionate
colchicine tablets
COMBIPATCH
COMBIVENT RESPIMAT
COMETRIQ
CREON
cyanocobalamin [INJ]
cyclobenzaprine

cyclosporine eye solution

D

DAYTRANA
deferiprone
DESCOVY
desloratadine
desvenlafaxine succinate
ext-release
dexamethasone
DEXCOM G6: RECEIVER,
SENSOR, TRANSMITTER
DEXCOM G7:
RECEIVER, SENSOR
dexlansoprazole
dexmethylphenidate
ext-release
dextroamphetamine/
amphetamine
dextroamphetamine/
amphetamine ext-release
diazepam
diclofenac sodium
delayed-release
dicyclomine
digoxin
diltiazem ext-release
dimethyl fumarate
diphenoxylate/atropine
divalproex delayed-release
divalproex ext-release
donepezil
DOPTLET
DOVATO
doxazosin
doxycycline hyclate
doxycycline monohydrate
DUAVEE
DULERA
duloxetine delayed-release
DUPIXENT [INJ]
DYANAVAL XR

E

ELIQUIS
ELOCTATE [INJ]
EMGALITY [INJ]
EMPAVELI [INJ]
emtricitabine/tenofovir
disoproxil fumarate
EMVERM
enalapril
ENBREL [INJ]
ENDOMETRIN
enoxaparin [INJ]
ENSTILAR
ENTRESTO
ENTYVIO [INJ]
EPLUSA
EPIDIOLEX
epinephrine auto-injector
(by Mylan, Teva) [INJ]
EPIPEN, EPIPEN JR [INJ]
ergocalciferol
ERIVEDGE
ERLEADA

erythromycin eye ointment
escitalopram
esomeprazole magnesium
delayed-release
ESPEROCT [INJ]
estradiol
estradiol patches
estradiol vaginal inserts
estradiol/norethindrone
acetate
eszopiclone
ethinyl estradiol/desogestrel
ethinyl estradiol/drospirenone
ethinyl estradiol/
drospirenone/levomefolate
ethinyl estradiol/ethynodiol
ethinyl estradiol/etonogestrel
vaginal ring
ethinyl estradiol/
levonorgestrel
ethinyl estradiol/
norelgestromin patches
ethinyl estradiol/
norethindrone
ethinyl estradiol/
norethindrone acetate
ethinyl estradiol/
norethindrone/iron
ethinyl estradiol/norgestimate
ethinyl estradiol/norgestrel
EUFLEXXA [INJ]
ezetimibe
ezetimibe/simvastatin

F

famotidine
FARXIGA
FASENRA [INJ]
fenofibrate
fenofibric acid
delayed-release
fentanyl patches
FETZIMA
FINACEA FOAM
finasteride
fingolimod
FLECTOR
FLOVENT DISKUS
FLOVENT HFA
fluconazole
fluocinonide
fluoxetine
fluticasone nasal spray
folic acid
FORTEO [INJ]
FRAGMIN [INJ]
FREESTYLE KITS/METERS:
FREESTYLE FREEDOM,
FREESTYLE FREEDOM LITE,
FREESTYLE INSULINX,
FREESTYLE LITE
FREESTYLE LIBRE:
READER, SENSOR
FREESTYLE TEST STRIPS:
FREESTYLE,
FREESTYLE INSULINX,
FREESTYLE LITE

FULPHILA [INJ]
furosemide
FYCOMPA
fyremadel [INJ]

G

gabapentin
GAMMACORE
GELNIQUE
gemfibrozil
GENOTROPIN [INJ]
GENVOYA
GLASSIA [INJ]
glimepiride
glipizide
glipizide ext-release
glucagon emergency kit
(by Amphastar) [INJ]
glyburide
GLYXAMBI
GONAL-F, GONAL-F RFF,
GONAL-F RFF
REDI-JECT [INJ]
GRASTEK
guanfacine ext-release
GVOKE [INJ]

H

halcinonide
HARVONI
HUMALOG [INJ]
HUMIRA [INJ]
HUMULIN [INJ]
hydralazine
hydrochlorothiazide
hydrocodone/acetaminophen
hydrocodone/
chlorpheniramine polistirex
ext-release
hydrocortisone topical
hydromorphone
hydroxychloroquine
hydroxyzine hcl
hydroxyzine pamoate
HYSINGLA ER

I

ibandronate
IBRANCE
ibuprofen
IMBRUVICA
INBRIJA
indomethacin
INFLECTRA [INJ]
INLYTA
irbesartan
isosorbide mononitrate
ext-release
isotretinoin

J

JAKAFI
JANUMET, JANUMET XR
JANUVIA

(continued)

Go to express-scripts.com/2023drugs for a full list of formulary exclusions with their covered alternatives or log on to compare drug prices. Costs for covered alternatives may vary.
THIS DOCUMENT LIST IS EFFECTIVE JANUARY 1, 2023 THROUGH DECEMBER 31, 2023. THIS LIST IS SUBJECT TO CHANGE. You can find more information at express-scripts.com.

JARDIANCE
JIVI [INJ]
JULUCA

K

KANJINTI [INJ]
KERENDIA
KESIMPTA [INJ]
ketoconazole topical
ketorolac
KITABIS PAK
KLOXXADO
KOGENATE FS [INJ]
KOALTRY [INJ]
KYLEENA
KYNMOBI

L

labetalol
lamotrigine
lansoprazole delayed-release
latanoprost eye solution
LATUDA
LEVEMIR [INJ]
levetiracetam
levocetirizine
levofloxacin
levothyroxine sodium
levoxyl
LICART
lidocaine patches
LINZESS
liothyronine
lisinopril
lisinopril/hctz
LIVALO
LOKELMA
lorazepam
LORBRENA
losartan
losartan/hctz
loteprednol eye suspension
lovastatin
LUPRON DEPOT
3.75 MG, 11.25 MG [INJ]
LUPRON DEPOT-PED [INJ]
LYNPARZA
LYUMJEV [INJ]

M

MAYZENT
meclizine
medroxyprogesterone
meloxicam
metaxalone
metformin
metformin ext-release
methimazole
methocarbamol
methotrexate
methylphenidate
methylphenidate ext-release
methylprednisolone
metoclopramide
metoprolol succinate
ext-release
metoprolol tartrate
metronidazole
metronidazole topical
metronidazole vaginal
minocycline
MIRENA
mirtazapine
MIRVASO
MITIGARE
mometasone
MONOVISC [INJ]
montelukast
morphine sulfate ext-release
MOUNJARO [INJ]

MOVANTIK
moxifloxacin eye solution
mupirocin
MUSE
MYDAYIS
MYFEMBREE
MYRBETRIQ

N

nabumetone
NAMZARIC
naproxen, naproxen sodium
NARCAN NASAL SPRAY
NASCOBAL
NATESTO
NAYZILAM
nebivolol
neomycin/polymyxin/
hydrocortisone ear solution
NEXLETOL
NEXLIZET
niacin ext-release
nifedipine ext-release
NINLARO
nitrofurantoin macrocrystal
NITYR
NIVESTYM [INJ]
NORDITROPIN [INJ]
norethindrone
nortriptyline
NOVAREL [INJ]
NOVOEIGHT [INJ]
NUBEQA
NUCALA [INJ]
NUEDEXTA
NURTEC ODT
nystatin
nystatin topical

O

OCREVUS [INJ]
ODACTRA
ODEFSEY
ODOMZO
OFEV
ofloxacin
olanzapine
olmesartan
olmesartan/hctz
omega-3 acid ethyl esters
omeprazole delayed-release
OMNIPOD 5: KITS, PODS
OMNIPOD DASH: KITS, PODS
OMNITROPE [INJ]
ondansetron
ondansetron orally
disintegrating tablets
ONETOUCH KITS/METERS:
ULTRA 2, ULTRAMINI,
VERIO, VERIO FLEX
ONETOUCH TEST STRIPS:
ULTRA, VERIO,
VERIO REFLECT
ONEXTON
OPSUMIT
ORALAIR
ORIAHNN
ORLISSA
ORTHOVISC [INJ]
oseltamivir
OTEZLA
OVIDREL [INJ]
oxcarbazepine
oxybutynin ext-release
oxycodone
oxycodone/acetaminophen
OXYCONTIN
OZEMPIC [INJ]

P

PANCREAZE
pantoprazole delayed-release
paroxetine hcl
penicillin v potassium
PENTASA 250 MG CAPSULES
PHEBURANE
PHOSLYRA
pioglitazone
PLEGRIDY [INJ]
polymyxin/trimethoprim
eye solution
PONVORY
potassium chloride
ext-release
pramipexole
pravastatin
PRECISION XTRA:
METERS, TEST STRIPS,
B-KETONE STRIPS
prednisolone acetate
eye suspension
prednisolone sodium
phosphate
prednisone
pregabalin
PREMARIN CREAM
prenatal vitamins
PROCRIT [INJ]
progesterone micronized
PROLASTIN C [INJ]
promethazine
promethazine/
dextromethorphan
propranolol
propranolol ext-release

Q

quetiapine
QUILLICHEW ER
QUILLIVANT XR
quinapril
QULIPTA
QVAR REDIALER

R

rabeprazole delayed-release
RADICAVA ORS
RAGWITEK
raloxifene
ramipril
RASUVO [INJ]
REBIF [INJ]
RECTIV
RELISTOR [INJ]
RELISTOR TABLETS
REPATHA [INJ]
RESTASIS MULTIDOSE
RETACRIT [INJ]
REVLIMID
RINVOO ER
risperidone
rizatriptan
roflumilast
ropinirole
rosuvastatin
ROZLYTREK
RUBRACA
RUCONEST [INJ]
RUXIENCE [INJ]
RYBELSUS

S

SAVELLA
SEGLUROMET
SEMGLEE (YFGN) [INJ]
SEREVENT DISKUS
sertraline
SEVENFACT [INJ]

sildenafil
SIMPONI 100 MG (for
Ulcerative Colitis only) [INJ]
simvastatin
SKYLA
SKYRIZI [INJ]
SODIUM OXYBATE
SOLIQUA [INJ]
SOLIRIS [INJ]
SOLOSEC
SOMATULINE DEPOT [INJ]
SOMAVERT [INJ]
SPIRIVA HANDIHALER
SPIRIVA RESPIMAT
spironolactone
SPRYCEL
STEGLATRO
STEGLUJAN
STELARA SC [INJ]
STIOLTO RESPIMAT
STIVARGA
STRENSIQ [INJ]
SUBLOCADE [INJ]
sulfamethoxazole/
trimethoprim
sumatriptan
SUNOSI
SYMBICORT
SYMFI
SYMFI LO
SYMJEPI [INJ]
SYMLINPEN [INJ]
SYMPROIC
SYMTUZA
SYNJARDY, SYNJARDY XR

T

tacrolimus topical
tadalafil
TAGRISSO
TAKHZYRO [INJ]
TALICIA
TALTZ [INJ]
TALZENNA
tamoxifen
tamsulosin ext-release
TASIGNA
TAVALISSE
TEGSEDI [INJ]
TEKTURN HCT
telmisartan
TEMIXYS
terazosin
terconazole vaginal
testosterone cypionate [INJ]
TEZSPIRE [INJ]
thyroid
timolol maleate eye solution
tizanidine
TOBI PODHALER
tobramycin eye solution
tobramycin/dexamethasone
eye suspension
topiramate
topiramate ext-release
TOUJEO [INJ]
TRACLEER SUSPENSION
tramadol
travoprost eye solution
TRAZIMERA [INJ]
trazodone
TREGLEY ELLIPTA
TREMIFYA [INJ]
treprostinil [INJ]
TRESIBA [INJ]
tretinoin topical
triamcinolone topical
triamterene/hctz
TRIJARDY XR
TRIPTODUR [INJ]
TRIUMEQ
TRULANCE

TRULICITY [INJ]
TYMLOS [INJ]
TYVASO DPI

U

UBRELVY
UCERIS FOAM
UPTRAVI TABLETS

V

valacyclovir
valsartan
valsartan/hctz
varenicline
VARUBI
VASCEPA
VELPHORO
VELTASSA
VEMLIDY
venlafaxine
venlafaxine ext-release
verapamil ext-release
VERQUVO
VERZENIO
VGO
VIBERZI
vilazodone
VIOKACE
VITRAKVI
VIZIMPRO
VOSEVI
VUMERITY
VYVANSE

W

warfarin
WEGOVY [INJ]

X

XALKORI
XARELTO
XELJANZ, XELJANZ XR
XIFAXAN
XIGDUO XR
XIIDRA
XOLAIR [INJ]
XTANDI
XULTOPHY [INJ]
XYREM
XYWAV

Y

YONSA
YUPELRI

Z

ZARXIO [INJ]
ZEJULA
ZENPEP
ZEPATIER
ZEPOSIA
ZIEXTENZO [INJ]
ZIRABEV [INJ]
zolpidem
zolpidem ext-release
ZOMIG 2.5 MG NASAL
ZTLIDO
ZUBSOLV

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The excluded medications shown below are not covered on the Express Scripts drug list. In most cases, if you fill a prescription for one of these drugs, you will pay the full retail price.

Take action to avoid paying full price. If you're currently using one of the excluded medications, please ask your doctor to consider writing you a new prescription for one of the following preferred alternatives. Additional covered alternatives may be available. Costs for covered alternatives may vary. Log on to [express-scripts.com/covered](https://www.express-scripts.com/covered) to compare drug prices. Not all the drugs listed are covered by all prescription plans; check your benefit materials for the specific drugs covered and the copayments for your plan. For specific questions about your coverage, please call the number on your member ID card.

Express Scripts manages your prescription plan for your employer, plan sponsor, health plan or benefit fund. These excluded medications do not apply to Medicare plans.

| Drug Class | Excluded Medications | Preferred Alternatives |
|--|--|--|
| ANTIINFECTIVES Antibiotic Agents - Vancomycins (Oral) | FIRVANQ | vancomycin capsules, vancomycin oral solution |
| Antifungal Agents (Oral) | TOLSURA | itraconazole |
| Antivirals (Oral) | SITAVIG, XERESE | acyclovir oral or cream, famciclovir, valacyclovir |
| Chagas Disease Agents | LAMPIT | BENZNIDAZOLE |
| AUTONOMIC & CENTRAL NERVOUS SYSTEM Alpha-2 Adrenergic Agonists (for Opioid Withdrawal) | LUCEMYRA | clonidine |
| Alzheimer's Agents | ADUHELM, LEQEMBI | No alternatives recommended |
| Amiotrophic Lateral Sclerosis (ALS) Agents | RELYVRIO | No alternatives recommended |
| Anticonvulsants | EPRONTIA | topiramate sprinkle capsules |
| | FINTEPLA | DIACOMIT, EPIDIOLEX |
| | ZONISADE | zonisamide |
| Antimigraine Agents | ONZETRA XSAIL, ZOLMITRIPTAN NASAL SPRAY 2.5 MG | sumatriptan nasal spray, ZOMIG NASAL 2.5 MG |
| | VYEPTI | AIMOVIG, AJOVY, EMGALITY |
| Antiparkinsonism Agents | APOKYN | KYNMOBI |
| | DHIVY | carbidopa/levodopa |
| | GOCOVRI ER | amantadine capsules, amantadine tablets, amantadine oral solution |
| | ONGENTYS | entacapone |
| XADAGO, ZELAPAR | | rasagiline, selegiline |
| | | |
| Antipsychotics (Injectable) | INVEGA HAFYERA | ABILIFY MAINTENA, ARISTADA, RISPERDAL CONSTA |
| Antipsychotics (Oral) | LYBALVI | aripiprazole, asenapine, olanzapine, paliperidone er, quetiapine, quetiapine er, ziprasidone, LATUDA |
| | QUETIAPINE 150 MG TABLETS | quetiapine, quetiapine er |
| Antispasmodic Agents | BACLOFEN SOLUTION, FLEQSUVY, LYVISPAH, OZOBAX | baclofen tablets |
| Anxiolytic Agents | LOREEV XR | lorazepam tablets |
| Cataplexy Treatment | XYREM~ | SODIUM OXYBATE, XYWAV |
| Central Nervous System Stimulants | METHYLPHENIDATE ER 45 MG & 63 MG, METHYLPHENIDATE ER 72 MG~, RELEXII ER 45 MG & 63 MG, RELEXII ER 72 MG~ | dexamphetamine er, dextroamphetamine sulfate er, dextroamphetamine/amphetamine er, methylphenidate cd, methylphenidate er, methylphenidate la, DYANAVEL XR, MYDAYIS, QUILLICHEW ER, QUILLIVANT XR, VYVANSE |
| | XELSTRYM | dextroamphetamine/amphetamine er, dextroamphetamine er, DYANAVEL XR, MYDAYIS ER, VYVANSE |

~ Medications will be excluded beginning 07/01/2023.

(continued)

| Drug Class | Excluded Medications | Preferred Alternatives |
|--|---|--|
| AUTONOMIC & CENTRAL NERVOUS SYSTEM <i>(continued)</i> Duchenne Muscular Dystrophy (DMD) Agents | AMONDYS 45, EXONDYS 51, VILTEPSO, VYONDYS 53 | No alternatives recommended |
| | EMFLAZA | prednisone solution, prednisone tablets |
| Multiple Sclerosis Agents | BRIUMVI | KESIMPTA, OCREVUS |
| | EXTAVIA | AVONEX, BETASERON, PLEGRIDY, REBIF |
| | TASCENSO ODT | fingolimod, AUBAGIO, BAFIERTAM, MAYZENT, PONVORY, VUMERITY |
| Narcotic Analgesics & Combinations | APADAZ, BENZHYDROCODONE/ACETAMINOPHEN | hydrocodone/acetaminophen |
| | CONZIP, QDOLO, TRAMADOL 100 MG TABLETS, TRAMADOL ER CAPSULES, TRAMADOL SOLUTION | tramadol er tablets, tramadol tablets |
| | NUCYNTA | hydrocodone/acetaminophen, morphine sulfate, oxycodone, tramadol, tramadol/acetaminophen |
| | NUCYNTA ER, OXYCODONE ER, XTAMPZA ER | hydrocodone bitartrate er, hydromorphone er, morphine sulfate er, oxymorphone hcl er, HYSINGLA ER, OXYCONTIN |
| | PRIMLEV, PROLATE SOLUTION | oxycodone/acetaminophen |
| | ROXYBOND | oxycodone |
| | SEGLENTIS | tramadol tablets plus celecoxib |
| Narcotic Antagonists | ZIMHI | naloxone syringes |
| Sedative-Hypnotic Agents | DORAL, QUAZEPAM | estazolam, lorazepam |
| Selective Serotonin Reuptake Inhibitors (SSRIs) Antidepressants | CITALOPRAM CAPSULES, PEVEVA, SERTRALINE CAPSULES | citalopram, escitalopram, fluoxetine, fluvoxamine, paroxetine, sertraline |
| Serotonin/Norepinephrine Reuptake Inhibitor Antidepressants | DRIZALMA SPRINKLE, VENLAFAXINE BESYLATE ER | desvenlafaxine er, duloxetine, venlafaxine hcl er, FETZIMA |
| Transmucosal Fentanyl Analgesics | FENTANYL CITRATE BUCCAL TABLETS, FENTORA, LAZANDA, SUBSYS | fentanyl citrate lozenges |
| Miscellaneous Antidepressants | AUVELITY ER | bupropion, citalopram, duloxetine, paroxetine, sertraline, venlafaxine, FETZIMA |
| | BUPROPION XL 450 MG, FORFIVO XL | bupropion xl 150 mg or 300 mg |
| | SPRAVATO | olanzapine/fluoxetine, bupropion, desvenlafaxine er, duloxetine, escitalopram, mirtazapine, sertraline |
| CARDIOVASCULAR ACE Inhibitors | QBRELIS | lisinopril |
| Alpha-Adrenergic Agonists | CLONIDINE ER 0.17 MG, NEXICLON XR | clonidine patches, clonidine tablets |
| Angiotensin Receptor Blockers (ARBs) and Combinations | EDARBI | candesartan, irbesartan, losartan, olmesartan, telmisartan, valsartan |
| | EDARBYCLOR | candesartan/hydrochlorothiazide, irbesartan/hydrochlorothiazide, losartan/hydrochlorothiazide, olmesartan/hydrochlorothiazide, telmisartan/hydrochlorothiazide, valsartan/hydrochlorothiazide, chlorthalidone plus valsartan |
| | VALSARTAN SOLUTION | valsartan tablets |
| Anticoagulants | PRADAXA, SAVAYSA | ELIQUIS, XARELTO |
| Beta Blockers & Combinations | HEMANGEOL | propranolol solution |
| | INDERAL XL, INNOPRAN XL | propranolol er |
| | KAPSPARGO SPRINKLE | metoprolol succinate |

~ Medications will be excluded beginning 07/01/2023.

(continued)

| Drug Class | Excluded Medications | Preferred Alternatives |
|---|---|---|
| CARDIOVASCULAR (continued) Calcium Channel Blockers | CONJUPRI, LEVAMLODIPINE | amlodipine, felodipine er, nifedipine er, nisoldipine |
| | KATERZIA, NORLIQVA | amlodipine tablets |
| Diuretics | CAROSPIR | spironolactone |
| | FUROSCIX, SOAANZ | bumetanide, furosemide, torsemide |
| | THALITONE | chlorthalidone |
| Fenofibrates | ANTARA, FENOFIBRATE CAPSULES (30 MG, 50 MG, 90 MG, 150 MG), LIPOFEN | fenofibrate capsules (43 mg, 67 mg, 130 mg, 134 mg, 200 mg), fenofibrate tablets, fenofibric acid |
| HMG & Cholesterol Inhibitor Combinations | ALTOPREV, EZALLOR SPRINKLE | atorvastatin, fluvastatin er, lovastatin, pravastatin, rosuvastatin, simvastatin tablets, LIVALO |
| | ROSUVASTATIN/EZETIMIBE | ezetimibe plus atorvastatin or rosuvastatin |
| PCSK9 & siRNA Inhibitors | LEQVIO, PRALUENT | REPATHA |
| Miscellaneous Cardiovascular Agents | ASPRUZO SPRINKLE ER | ranolazine er |
| | CORLANOR | atenolol, bisoprolol, carvedilol, metoprolol succinate, metoprolol tartrate, propranolol |
| | NORPACE CR | amiodarone, quinidine sulfate, sotalol |
| DERMATOLOGICAL Agents for Hyperhidrosis | DRYSOL, QBREXZA | Over-the-Counter aluminum chloride containing products |
| Oral Agents for Acne | ABSORICA LD | isotretinoin capsules |
| | DORYX DR 80 MG, DORYX MPC, DOXYCYCLINE HYCLATE DR 80 MG | doxycycline hyclate, doxycycline monohydrate |
| | MINOCYCLINE BIPHASIC TABLETS, MINOCYCLINE ER CAPSULES, XIMINO | minocycline 24 hour er tablets |
| Rosacea Agents (Oral) | DOXYCYCLINE 40 MG CAPSULES, ORACEA | Oral: doxycycline hyclate, doxycycline monohydrate Topical: azelaic acid, ivermectin, metronidazole |
| Rosacea Agents (Topical) | NORITATE | metronidazole |
| | ZILXI | azelaic acid, ivermectin, metronidazole, sodium sulfacetamide/sulfur, FINACEA FOAM |
| Topical Agents for Acne | CLENIA PLUS, SULFACETAMIDE/SULFUR 9%-4.25% SUSPENSION | sodium sulfacetamide/sulfur 8%-4% suspension |
| | FABIOR, TAZAROTENE FOAM | tazarotene cream, tretinoin |
| | VELTIN | clindamycin/benzoyl peroxide, clindamycin/tretinoin, erythromycin/benzoyl peroxide, ONEXTON |
| Topical Agents for Actinic Keratosis | WINLEVI | azelaic acid, clindamycin phosphate gel, clindamycin/tretinoin, dapsone, erythromycin gel, tretinoin, ONEXTON |
| | CARAC, FLUOROURACIL 0.5% CREAM, KLISYRI, ZYCLARA | diclofenac 3% gel, fluorouracil 2% solution, fluorouracil 5% cream, imiquimod 5% cream |
| Topical Antifungals | ECOZA, ERTACZO, LULICONAZOLE, OXISTAT LOTION, SULCONAZOLE, XOLEGEL | ciclopirox, clotrimazole, econazole, ketoconazole, naftifine, oxiconazole |
| | MICONAZOLE/ZINC OXIDE/PETROLATUM, VUSION | clotrimazole, ketoconazole, miconazole, nystatin |
| Topical Corticosteroids | CLOCORTOLONE PUMP, IMPEKLO, HALOBETASOL 0.05% FOAM, IMPOYZ, LEXETTE, SERNIVO, ULTRAVATE, VERDESO FOAM | generic topical corticosteroids |
| Vitamin D Analogs (Topical) | CALCIPOTRIENE FOAM, SORILUX | calcipotriene, calcitriol |

~ Medications will be excluded beginning 07/01/2023.

(continued)

| Drug Class | Excluded Medications | Preferred Alternatives |
|--|--|--|
| DERMATOLOGICAL (continued) Miscellaneous Topical Dermatological Agents | ALCORTIN A | generic topical corticosteroids plus mupirocin |
| | CONDYLOX, VEREGEN | imiquimod 5% cream, podofilox solution |
| | LIDOCAINE/TETRACAINE, PLAGLIS | lidocaine cream, lidocaine/prilocaine cream |
| | TAZORAC 0.05% CREAM | tazarotene 0.1% cream |
| | TRI-LUMA | fluocinonone acetonide, hydroquinone, tretinoin |
| DIABETES Biguanidine Agents | METFORMIN 625 MG TABLETS | metformin 500 mg or 850 mg tablets |
| Blood Glucose Meters & Test Strips | ASCENSIA (CONTOUR) ONETOUCH SOLUTIONS STARTER KIT ROCHE (ACCU-CHEK) TEMPO (WELCOME KIT, REFILL KIT, SMART BUTTON) TRIVIDIA (TRUETEST, TRUETRACK) ALL OTHER METERS & TEST STRIPS THAT ARE NOT LISTED AS PREFERRED | FREESTYLE KITS/METERS (FREESTYLE FREEDOM, FREESTYLE FREEDOM LITE, FREESTYLE INSULINX, FREESTYLE LITE) FREESTYLE TEST STRIPS (FREESTYLE, FREESTYLE INSULINX, FREESTYLE LITE) ONETOUCH KITS/METERS (ULTRA2, ULTRAMINI, VERIO, VERIO FLEX) ONETOUCH TEST STRIPS (ULTRA, VERIO) PRECISION XTRA METERS, TEST STRIPS |
| Diabetic Pen Needles & Syringes | PEN NEEDLES & SYRINGES BY: ARKRAY HOME AIDE DIAGNOSTICS HTL-STREFA NOVO NORDISK OWEN MUMFORD PRODIGY DIABETES CARE SIMPLE DIAGNOSTICS TRIVIDIA (NIPRO DIAGNOSTICS) ULTIMED ALL OTHER DIABETIC PEN NEEDLES & SYRINGES THAT ARE NOT LISTED AS PREFERRED | BD DIABETES PEN NEEDLES BD DIABETES SYRINGES |
| Dipeptidyl Peptidase-4 (DPP-4) Inhibitors & Combinations | ALOGLIPTIN, NESINA, ONGLYZA, TRADJENTA | JANUVIA |
| | ALOGLIPTIN/METFORMIN, JENTADUETO, JENTADUETO XR, KAZANO, KOMBIGLYZE XR | JANUMET, JANUMET XR |
| | ALOGLIPTIN/PIOGLITAZONE | pioglitazone plus JANUVIA |
| Dipeptidyl Peptidase-4 (DPP-4) Inhibitors/Sodium Glucose Co-Transporter-2 (SGLT-2) Inhibitors Combinations | QTERN | GLYXAMBI, STEGLUJAN |
| Glucagon-Like Peptide-1 Agonists | ADLYXIN, VICTOZA | BYDUREON BCISE, BYETTA, OZEMPIC, TRULICITY |
| Glucose-Elevating Drugs | GLUCAGEN HYPOKIT, GLUCAGON EMERGENCY KIT (by Fresenius), ZEGALOGUE | glucagon emergency kit (by Amphastar), BAQSIMI, GVOKE |
| Insulins | ADMELOG, AFREZZA, APIDRA, FIASP, HUMALOG TEMPO, INSULIN ASPART, INSULIN LISPRO, LYUMJEV TEMPO, NOVLOG, RELION NOVLOG | HUMALOG, LYUMJEV |
| | BASAGLAR TEMPO, INSULIN DEGLUDEC, INSULIN GLARGINE (BY WINTHROP), INSULIN GLARGINE-YFGN, LANTUS | LEVEMIR, SEMGLEE (YFGN), TOUJEO, TRESIBA |
| | INSULIN ASPART PROTAMINE, NOVLOG 70/30 MIX, RELION NOVLOG 70/30 MIX | HUMALOG 75/25 MIX |
| | NOVOLIN, RELION NOVOLIN | HUMULIN |
| Sodium Glucose Co-Transporter-2 (SGLT-2) Inhibitors & Combinations | INVOKAMET, INVOKAMET XR | SEGLUROMET, SYNJARDY, SYNJARDY XR, XIGDUO XR |
| | INVOKANA | FARXIGA, JARDIANCE, STEGLATRO |
| EAR/NOSE Nasal Steroids | BECONASE AQ, OMNARIS, QNASL, ZETONNA | flunisolide, fluticasone, mometasone |

~ Medications will be excluded beginning 07/01/2023.

(continued)

| Drug Class | Excluded Medications | Preferred Alternatives |
|---|--|--|
| EAR/NOSE (continued) Otic Antibiotics & Combination Products | CETRAXAL | ciprofloxacin otic, ofloxacin otic |
| | CIPRO HC, CIPROFLOXACIN/FLUOCINOLONE OTIC | ciprofloxacin/dexamethasone otic |
| ENDOCRINE Cushing's Agents | ISTURISA | SIGNIFOR |
| | KORLYM | ketoconazole, LYSODREN, SIGNIFOR |
| | RECORLEV | ketoconazole, LYSODREN |
| Gonadotropin-Releasing Hormone (GnRH) Analogs (for Central Precocious Puberty) | FENSOLVI | LUPRON DEPOT-PED, TRIPTODUR |
| Growth Hormones | HUMATROPE, NUTROPIN AQ NUSPIN, SAIZEN, SAIZENPREP, SKYTROFA, ZOMACTON | GENOTROPIN, NORDITROPIN FLEXPRO, OMNITROPE |
| Somatostatin Analogs | LANREOTIDE, SANDOSTATIN LAR DEPOT | SOMATULINE DEPOT |
| | SIGNIFOR LAR | For Acromegaly: SOMATULINE DEPOT For Cushing's Disease: SIGNIFOR |
| Testosterone Products | AVEED | testosterone cypionate, testosterone enanthate |
| | KYZATREX, TLANDO | testosterone gel, testosterone solution, ANDRODERM PATCHES |
| Thyroid Replacement Therapy | LEVOTHYROXINE CAPSULES, THYQUIDITY, TIROSINT, TIROSINT-SOL | levothyroxine tablets |
| Miscellaneous Endocrine Agents | CORTROPHIN GEL | No alternatives recommended |
| GASTROINTESTINAL Antidiarrheal Agents | MYTESI | diphenoxylate/atropine, loperamide |
| Antiemetics (Oral) | AKYNZEO CAPSULES | granisetron, ondansetron, aprepitant, VARUBI TABLETS |
| | ANTIVERT | meclizine |
| | ANZEMET | granisetron, ondansetron |
| | BONJESTA | doxylamine/pyridoxine hcl |
| | EMEND POWDER PACKETS | aprepitant, VARUBI TABLETS |
| Bowel Evacuants | CLENPIQ, OSMOPREP, PLENVU, SUTAB | magnesium sulfate/potassium sulfate/sodium sulfate solution, peg 3350/ascorbic acid powder packets |
| Corticosteroids (Rectal Formulations) | CORTIFOAM | hydrocortisone enema, UCERIS FOAM |
| Fecal Microbiota Agents | REBYOTA | No alternatives recommended |
| Gallstone Dissolution Agents | RELTONE | ursodiol |
| Gastroparesis Agents | GIMOTI | No alternatives recommended |
| Helicobacter Pylori Agents | PYLERA | lansoprazole/amoxicillin/clarithromycin, TALICIA |
| Hemorrhoidal Preparations | HYDROCORTISONE/PRAMOXINE 25-18 MG SUPPOSITORIES | hydrocortisone ac suppositories, pramoxine/hydrocortisone cream |
| | PROCTOFOAM-HC | pramoxine/hydrocortisone cream |
| Inflammatory Bowel Agents | DIPENTUM | balsalazide disodium, mesalamine dr, mesalamine er, sulfasalazine, PENTASA 250 MG CAPSULES |
| Irritable Bowel Syndrome & Chronic Constipation Agents | IBSRELA, MOTEGRITY, ZELNORM | lubiprostone, LINZESS, TRULANCE |
| Pancreatic Enzymes | PERTZYE | CREON, PANCREAZE, ZENPEP |
| Proton Pump Inhibitors | ESOMEPRAZOLE STRONTIUM, NEXIUM PACKETS, PRILOSEC SUSPENSION, RABEPRAZOLE DR SPRINKLE | dexlansoprazole, esomeprazole magnesium, lansoprazole, omeprazole, pantoprazole, rabeprazole |
| Miscellaneous Gastrointestinal Agents | DARTISLA ODT | glycopyrrolate tablets |

~ Medications will be excluded beginning 07/01/2023.

(continued)

| Drug Class | Excluded Medications | Preferred Alternatives |
|---|---|--|
| HEMATOLOGICAL Antiplatelet Agents | ASPIRIN/OMEPRAZOLE DR, YOSPRALA DR | aspirin plus omeprazole, esomeprazole, lansoprazole, pantoprazole or rabeprazole |
| Erythropoiesis-Stimulating Agents | ARANESP, EPOGEN, MIRCERA | PROCRIT, RETACRIT |
| Factor Deficiency Agents & Related Products | NOVOSEVEN RT | SEVENFACT |
| | NUWIQ, RECOMBINATE, XYNTHA, XYNTHA SOLOFUSE | ADVATE, ADYNOVATE, AFSTYLA, ELOCTATE, ESPEROCT, JIVI, KOGENATE FS, KOVALTRY, NOVOEIGHT |
| Granulocyte Colony Stimulating Factors | FYLNETRA, NEULASTA, NYVEPRIA, ROLVEDON, STIMUFEND, UDENYCA | FULPHILA, ZIEXTENZO |
| | GRANIX, NEUPOGEN, RELEUKO | NIVESTYM, ZARXIO |
| Iron Replacement Agents | MONOFERRIC | sodium ferric gluconate complex, VENOFER |
| Sickle Cell Disease Agents | OXBRYTA | hydroxyurea, DROXIA |
| | SIKLOS | DROXIA |
| Thrombocytopenia Agents | MULPLETA | DOPTELET |
| HEPATITIS Hepatitis C | LEDIPASVIR/SOFOSBUVIR, MAVYRET, SOFOSBUVIR/VELPATASVIR, SOVALDI | EPCLUSA, HARVONI, VOSEVI, ZEPATIER |
| HIV Antiretrovirals Note: Current patients established on therapy are allowed to continue therapy. | CABENUVA | atazanavir plus lamivudine, darunavir plus lamivudine, lopinavir/ritonavir plus lamivudine, DOVATO, JULUCA, TIVICAY plus lamivudine, TIVICAY plus EDURANT |
| | COMPLERA | ODEFSEY |
| | DELSTRIGO | efavirenz/emtricitabine/tenofovir disoproxil fumarate, efavirenz/lamivudine/tenofovir disoproxil fumarate, BIKTARVY, GENVOYA, ODEFSEY, SYMFI, SYMFI LO, SYMTUZA, TRIUMEQ |
| | PIFELTRO | efavirenz, EDURANT |
| | PREZCOBIX | atazanavir, lopinavir/ritonavir, ritonavir, PREZISTA |
| | RUKOBIA ER | Coverage may be approved for the treatment of human immunodeficiency virus-1 infection in heavily treatment-experienced patients with multidrug-resistant infection. |
| | STRIBILD | BIKTARVY, GENVOYA |
| MUSCULOSKELETAL & RHEUMATOLOGY Gout Therapy | ALLOPURINOL 200 MG TABLETS | allopurinol 100 mg tablets |
| | COLCHICINE CAPSULES | colchicine tablets, MITIGARE |
| Muscle Relaxants & Antispasmodic Agents | METHOCARBAMOL 1,000 MG TABLETS | methocarbamol 500 mg tablets |
| Nonsteroidal Anti-Inflammatory Drugs (NSAIDs) | DICLOFENAC 35 MG CAPSULES, INDOMETHACIN 20 MG CAPSULES, KETOROLAC NASAL SPRAY, RELAFEN DS, TIVORBEX, ZIPSOR, ZORVOLEX | diclofenac, etodolac, flurbiprofen, ibuprofen, indomethacin, ketoprofen, meloxicam, nabumetone, naproxen, oxaprozin, piroxicam |
| | ELYXYB | celecoxib |
| | FENOPROFEN 200 MG CAPSULES, FENORTHO | fenopropfen calcium tablets, etodolac, flurbiprofen, ibuprofen, ketoprofen, meloxicam, nabumetone |
| | INDOCIN SUPPOSITORIES | etodolac, flurbiprofen, ibuprofen, indomethacin, ketoprofen, meloxicam, nabumetone, naproxen |
| | INDOCIN SUSPENSION, MELOXICAM SUSPENSION | ibuprofen suspension, naproxen suspension |
| Topical Nonsteroidal Anti-Inflammatory Drugs (NSAIDs) | DICLOFENAC EPOLAMINE PATCHES | FLECTOR PATCHES, LICART PATCHES |
| OBSTETRICAL & GYNECOLOGICAL Combination Patches | CLIMARA PRO | COMBIPATCH |

~ Medications will be excluded beginning 07/01/2023.

(continued)

| Drug Class | Excluded Medications | Preferred Alternatives |
|--|--|--|
| OBSTETRICAL & GYNECOLOGICAL (continued) Contraceptives | BALCOLTRA, LO LOESTRIN FE, NATAZIA, NEXTSTELLIS, TWIRLA, TYBLUME | generic oral, patch and ring contraceptives |
| | PHEXXI | Barrier methods of contraception, such as condoms, diaphragms, spermicides or sponges. |
| | SLYND | generic progestin-only oral contraceptives |
| Estrogen & Estrogen Modifiers for Vaginal Symptoms | ESTRING, IMVEXXY, INTRAROSA, OSPHENA | estradiol cream, estradiol vaginal inserts, PREMARIN CREAM |
| | FEMRING | estradiol cream, estradiol patches, estradiol tablets, estradiol vaginal inserts, PREMARIN CREAM |
| Estrogen/Progestin Combinations (Oral) | BIJUVA, PREMPHASE, PREMPRO | estradiol/norethindrone acetate, ethinyl estradiol/norethindrone acetate |
| Estrogens (Oral) | MENEST, PREMARIN TABLETS | estradiol tablets |
| Human Chorionic Gonadotropin‡ | PREGNYL | NOVAREL, OVIDREL |
| Ovulatory Stimulants (Follitropins) | FOLLISTIM AQ | GONAL-F, GONAL-F RFF, GONAL-F RFF REDI-JECT |
| Prenatal Vitamins | PREGENNA, TRINAZ | generic prenatal vitamins |
| Topical Estrogen Agents | ELESTRIN, ESTROGEL, EVAMIST | estradiol gel, estradiol patches |
| Vaginal Progesterones | CRINONE 4% | medroxyprogesterone, megestrol, norethindrone, progesterone |
| | CRINONE 8% | ENDOMETRIN |
| ONCOLOGY Acute Myeloid Leukemia (AML) Agents | ONUREG | No alternatives recommended |
| | REZLIDHIA | TIBSOVO |
| Bendamustine Agents | VIVIMUSTA | bendamustine, BENDEKA, TREANDA |
| Bevacizumab-Containing Agents | ALYMSYS, AVASTIN | ZIRABEV |
| Breast Cancer Agents | KISQALI, KISQALI FEMARA CO-PACK, PIQRAY | IBRANCE, VERZENIO |
| Interferons | BESREMI | hydroxyurea, PEGASYS |
| Multiple Myeloma Agents | BLENREP, XPOVIO | bortezomib, DARZALEX, KYPROLIS, NINLARO, POMALYST, REVLIMID, THALOMID |
| Myelodysplastic Syndrome Agents | INQOVI | decitabine |
| Myelofibrosis Agents | INREBIC | JAKAFI |
| Non-Small Cell Lung Cancer Agents | KRAZATI | Coverage may be approved for the treatment of KRAS G12C-mutated non-small cell lung cancer |
| | TEPMETKO | TABRECTA |
| Prostate Cancer Agents | CAMCEVI, LEUPROLIDE DEPOT, TRELSTAR | ELIGARD, FIRMAGON |
| Renal Cell Cancer Agents | FOTIVDA | CABOMETYX, INLYTA, LENVIMA |
| Rituximab-Containing Agents | RIABNI, RITUXAN, RITUXAN HYCELA, TRUXIMA | RUXIENCE |
| Trastuzumab-Containing Agents | HERCEPTIN, HERCEPTIN HYLECTA, HERZUMA, OGIVRI, ONTRUZANT | KANJINTI, TRAZIMERA |
| | PHESGO | PERJETA plus KANJINTI or TRAZIMERA |
| Tyrosine Kinase Inhibitors | QINLOCK | imatinib, sorafenib, sunitinib malate, SPRYCEL, STIVARGA, TASIGNA, VOTRIENT |
| | SCEMBLIX | imatinib, BOSULIF, ICLUSIG, SPRYCEL, TASIGNA |
| | TRUSELTIQ | PEMAZYRE |

‡ Please note that product placement is subject to change throughout the year based upon changes in market dynamics.

~ Medications will be excluded beginning 07/01/2023.

(continued)

| Drug Class | Excluded Medications | Preferred Alternatives |
|---|---|--|
| OPHTHALMIC Antiglaucoma Agents (Beta-Adrenergic Blockers) | BETIMOL | timolol drops, betaxolol drops, carteolol drops, levobunolol drops |
| Antiglaucoma Agents (Ophthalmic Prostaglandins) | DURYSTA, XELPROS | bimatoprost drops, latanoprost drops, tafluprost drops, travoprost drops |
| Antiglaucoma Agents (Other) | RHOPRESSA, ROCKLATAN | betaxolol drops, bimatoprost drops, dorzolamide/timolol drops, latanoprost drops, levobunolol drops, tafluprost drops, timolol drops, travoprost drops |
| Blepharoptosis Agents | UPNEEQ | No alternatives recommended |
| Ophthalmic Agents - Vascular Endothelial Growth Inhibitors | LUCENTIS~ | BYOOVIZ, CIMERLI |
| | SUSVIMO | No alternatives recommended |
| | VABYSMO | EYLEA |
| Ophthalmic Agents - Other | CYSTADROPS | CYSTARAN |
| | VERKAZIA | azelastine drops, bepotastine drops, cromolyn drops, epinastine drops, olopatadine drops |
| | VUITY | No alternatives recommended |
| Ophthalmic Anti-Allergic | ALOCRIL, ALOMIDE, ALREX, LASTACAPT, ZERVIATE | azelastine drops, bepotastine drops, cromolyn drops, epinastine drops, olopatadine drops |
| Ophthalmic Anti-Inflammatory | FLAREX, FML FORTE, FML S.O.P., MAXIDEX, PRED MILD | dexamethasone drops, fluorometholone drops, loteprednol drops, prednisolone drops |
| Ophthalmic Combinations | TOBRADEX ST, ZYLET | tobramycin/dexamethasone drops |
| Ophthalmic Non-Steroidal Anti-Inflammatory Drugs (NSAIDs) | ACUVAIL, BROMSITE, NEVANAC | bromfenac drops, diclofenac drops, ketorolac drops |
| Ophthalmic Quinolone Antibiotics | BESIVANCE, CILOXAN OINTMENT | ciprofloxacin drops, gatifloxacin drops, levofloxacin drops, moxifloxacin drops, ofloxacin drops |
| OSTEOARTHRITIS Hyaluronic Acid Derivatives | DUROLANE, GEL-ONE, GELSYN-3, GENVISC 850, HYALGAN, HYMOVIS, SUPARTZ FX, SYNOJOYNT, SYNVISIC, SYNVISIC-ONE, TRILURON, TRIVISC, VISCO-3 | EUFLEXXA, MONOVISC, ORTHOVISC |
| RENAL Nephropathic Cystinosis Agents | PROCYSBI | CYSTAGON |
| Nocturnal Polyuria Agents | NOCTIVA | desmopressin tablets |
| Overactive Bladder Agents | VESICARE LS | oxybutynin, oxybutynin er, MYRBETRIQ ER SUSPENSION |
| Phosphate Binders | FOSRENOL POWDER PACKETS | lanthanum, sevelamer carbonate, sevelamer hcl, PHOSLYRA, VELPHORO |
| RESPIRATORY Epinephrine Auto-Injector Systems | EPINEPHRINE AUTO-INJECTOR (BY A-S MEDICATION, AMNEAL PHARMA, AVKARE) | epinephrine auto-injector (by Mylan, Teva), EPIPEN, EPIPEN JR |
| Idiopathic Pulmonary Fibrosis Agents | PIRFENIDONE 534 MG TABLETS | pirfenidone, OFEV |
| Immunological Agents for Asthma | CINQAIR | DUPIXENT, FASENRA, NUCALA, TEZSPIRE, XOLAIR |
| Long-Acting Beta Agonist Inhalers | STRIVERDI RESPIMAT | SEREVENT DISKUS |
| Long-Acting Muscarinic Antagonist Inhalers | INCRUSE ELLIPTA, TUDORZA PRESSAIR | SPIRIVA HANDIHALER, SPIRIVA RESPIMAT |
| Long-Acting Muscarinic Antagonist/ Long-Acting Beta-Agonist Combination Inhalers | DUAKLIR PRESSAIR | ANORO ELLIPTA, BEVESPI AEROSPHERE, STIOLTO RESPIMAT |
| Pulmonary Anti-Inflammatory Inhalers | ALVESCO~, ARMONAIR DIGIHALER, FLOVENT DISKUS~, FLOVENT HFA~, FLUTICASONE PROPIONATE HFA, PULMICORT FLEXHALER | ARNUITY ELLIPTA, ASMANEX HFA, ASMANEX TWISTHALER, QVAR REDIHALER |

~ Medications will be excluded beginning 07/01/2023.

(continued)

| Drug Class | Excluded Medications | Preferred Alternatives |
|---|---|--|
| RESPIRATORY (continued) Pulmonary Anti-Inflammatory/ Beta-Agonist Combination Inhalers | AIRDUO RESPICLICK, BUDESONIDE/FORMOTEROL, FLUTICASONE/SALMETEROL (BY A-S MEDICATION, TEVA), FLUTICASONE/VILANTEROL | fluticasone/salmeterol (by Hikma, Prasco, Proficient Rx), ADVAIR HFA, BREO ELLIPTA, DULERA, SYMBICORT |
| Pulmonary Arterial Hypertension (PAH) Agents | TADLIQ | sildenafil 20 mg tablets, sildenafil oral suspension, tadalafil 20 mg tablets |
| Short-Acting Beta ₂ -Agonist Inhalers | ALBUTEROL SULFATE HFA (BY A-S MEDICATION, PRASCO), LEVALBUTEROL HFA, PROAIR DIGIHALER, PROAIR RESPICLICK, VENTOLIN HFA, XOPENEX HFA | albuterol sulfate hfa (by Cipla, Civica, Exelan, Lupin, Perrigo, Sandoz, Teva & West-Ward) |
| MISCELLANEOUS AGENTS Allergen Immunotherapy | PALFORZIA | No alternatives recommended |
| Benign Prostatic Hyperplasia Agents | ENTADFI | finasteride 5 mg plus tadalafil 5 mg |
| Gaucher Disease Agents | ELELYSO, VPRIV | CEREZYME |
| Glucocorticoids | ALKINDI SPRINKLE | hydrocortisone tablets |
| | HEMADY | dexamethasone tablets |
| Hereditary Angioedema | BERINERT | CINRYZE, RUCONEST |
| Immune Globulins | CUTAQUIG | SC: GAMMAGARD LIQUID, GAMUNEX-C, XEMBIFY |
| | GAMMAKED | IV: GAMMAGARD LIQUID, GAMMAGARD S-D, GAMUNEX-C SC: GAMMAGARD LIQUID, GAMUNEX-C, XEMBIFY |
| Immunosuppressant Agents | ENVARUSUS XR | tacrolimus |
| | LUPKYNIS | mycophenolate mofetil plus systemic corticosteroid |
| | OTREXUP, REDITREX | RASUVO |
| | XATMEP | methotrexate |
| Infused TNF Antagonists | AVSOLA, INFlixIMAB, REMICADE, RENFLEXIS | INFLECTRA |
| Metabolic Agents | RAVICTI~ | sodium phenylbutyrate, PHEBURANE |
| Neuromyelitis Optica Spectrum Disorder Agents | UPLIZNA | ENSPRYNG |
| Osteoporosis - Bone Modifiers | EVENITY, PROLIA | alendronate, ibandronate, risedronate, zoledronic acid, FORTEO, TYMLOS |
| Polyneuropathy of Hereditary Transthyretin-Mediated Amyloidosis | AMVUTTRA, ONPATTRO | No alternatives recommended |
| Vasculitis Agents | TAVNEOS | azathioprine, methotrexate, mycophenolate, RUXIENCE |

~ Medications will be excluded beginning 07/01/2023.

(continued)

Indication Based Management

| Drug Class | Excluded Medications | Preferred Alternatives |
|---|--|---|
| Spinal Conditions (nr-axSpA) | COSENTYX | Preferred: TALTZ, CIMZIA Preferred after Step through CIMZIA: RINVOQ ER |
| Inflammatory Conditions‡ where AMJEVITA (NDCs starting with 72511) is indicated | AMJEVITA (NDCs starting with 72511) | See Below for Preferred Alternatives |
| Inflammatory Conditions‡ where COSENTYX is indicated | COSENTYX | See Below for Preferred Alternatives |
| Drug Class | Nonpreferred Medications | Preferred Alternatives |
| Inflammatory Conditions‡ | All other Brand Name medications for Inflammatory Conditions are Nonpreferred. Approval may be granted following a coverage review. A trial of one or more Preferred medications is required prior to initiating therapy with a Nonpreferred medication. A formulary exception may be granted for a patient already established on therapy with a Nonpreferred medication. | Preferred: AMJEVITA (NDCs starting with 55513), ENBREL, HUMIRA, OTEZLA, SKYRIZI, STELARA SC, TALTZ, TREMFYA Preferred after Step through AMJEVITA (NDCs starting with 55513) or HUMIRA: ACTEMRA SC Preferred after Step through AMJEVITA (NDCs starting with 55513), ENBREL or HUMIRA: RINVOQ ER, XELJANZ, XELJANZ XR ULCERATIVE COLITIS ONLY Preferred after Step through AMJEVITA (NDCs starting with 55513) or HUMIRA: SIMPONI 100 MG, XELJANZ, XELJANZ XR ULCERATIVE COLITIS ONLY Preferred after Step through AMJEVITA (NDCs starting with 55513), HUMIRA or STELARA SC: ZEPOSIA |

‡ Please note that product placement for treatment of Inflammatory Conditions in the Inflammatory Conditions Care Value (ICCV) Program are subject to change throughout the year based upon changes in market dynamics, new indications for existing products, biosimilar and new product launches.

Excluded Medications/Products at a Glance

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|---|---|---|---|--|---|
| ABILIFY [^] ABSORICA LD ACANYA [^] ACIPHEX [^] ACUVAIL ADCIRCA [^] ADDERALL [^] , ADDERALL XR [^] ADLYXIN ADMELOG ADUHELM AFINITOR [^] , AFINITOR DISPERZ [^] AFREZZA AIRDUO RESPICLICK AKYNZEO CAPSULES ALBUTEROL SULFATE HFA (BY A-S MEDICATION, PRASCO) ALCORTIN A ALINIA TABLETS [^] ALKINDI SPRINKLE ALLOPURINOL 200 MG TABLETS ALOCRIL ALOGLIPTIN ALOGLIPTIN/METFORMIN ALOGLIPTIN/PIOGLITAZONE ALOMIDE ALREX ALTOPREV ALVESCO~ ALYMSYS AMBIEN [^] , AMBIEN CR [^] AMITIZA [^] AMJEVITA (NDCs starting with 72511) AMONDYS 45 AMPYRA [^] AMRIX [^] AMVUTTRA ANDROGEL [^] | ANTARA ANTIVERT ANUSOL-HC [^] ANZEMET APADAZ APIDRA APOKYN APTENSIO XR [^] ~ ARANESP ARIMIDEX [^] ARKRAY PEN NEEDLES & SYRINGES ARMONAIR DIGIHALER ASACOL HD [^] ASCENSIA (CONTOUR) ASPIRIN/OMEPRAZOLE DR ASPRUZO SPRINKLE ER ATACAND [^] , ATACAND HCT [^] ATRALIN [^] ATRIPLA [^] AUVELITY ER AVALIDE [^] , AVAPRO [^] AVASTIN AVEED AVODART [^] AVSOLA AZOPT [^] AZOR [^] BACLOFEN SOLUTION BALCOLTRA BANZEL [^] BARACLUDE TABLETS [^] BASAGLAR TEMPO BECONASE AQ BENICAR [^] , BENICAR HCT [^] BENZHYDROCODONE/ ACETAMINOPHEN BEPREVE [^] BERINERT BESIVANCE | BESREMI BETIMOL BIJUVA BLENREP BONJESTA BRISDELLE [^] BRIUMVI BROMSITE BUDESONIDE/FORMOTEROL BUPAP [^] BUPROPION XL 450 MG BUTRANS [^] BYSTOLIC [^] CABENUVA CALCIPOTRIENE FOAM CAMCEVI CANASA [^] CARAC CAROSPIR CELEBREX [^] CELEXA [^] CETRAXAL CIALIS [^] CIOXAN OINTMENT CINQAIR CIPRO HC CIPROFLOXACIN/ FLUOCINOLONE OTIC CITALOPRAM CAPSULES CLENIA PLUS CLENPIQ CLIMARA PRO CLINDAGEL [^] CLOCORTOLONE PUMP CLONIDINE ER 0.17 MG COLCHICINE CAPSULES COLCRYS [^] COMPLERA CONCERTA [^] CONDYLOX | CONJUPRI CONZIP COREG [^] CORLANOR CORTIFOAM CORTROPHIN GEL COSENTYX COSOPT [^] , COSOPT PF [^] COZAAR [^] , HYZAAR [^] CRESTOR [^] CRINONE CUPRIMINE [^] CUTAQUIG CUVPOSA [^] CYMBALTA [^] CYSTADANE [^] CYSTADROPS CYTOMEL [^] DALIRES [^] DARTISLA ODT DELSTRIGO DELZICOL [^] DETROL [^] , DETROL LA [^] DEXILANT [^] DHIVY DICLOFENAC 35 MG CAPSULES DICLOFENAC EPOLAMINE PATCHES DIOVAN [^] , DIOVAN HCT [^] DIPENTUM DIVIGEL [^] DORAL DORYX DR 50 MG [^] & 200 MG [^] DORYX DR 80 MG, DORYX MPC, DOXYCYCLINE HYCLATE DR 80 MG DOXYCYCLINE 40 MG CAPSULES DRIZALMA SPRINKLE | DRYSOL DUAKLIR PRESSAIR DUREZOL [^] DUROLANE DURYSTA ECOZA EDARBI, EDARBYCLOR EFFEXOR XR [^] ELELYSO ELESTRIN ELIDEL [^] ELYXYB EMEND CAPSULES [^] , TRIFOLD PACK [^] EMEND POWDER PACKETS EMFLAZA ENTADFI ENVARSOR XR EPANED [^] EPINEPHRINE AUTO-INJECTOR (BY A-S MEDICATION, AMNEAL PHARMA, AVKARE) EPOGEN EPRONTIA ERTACZO ESBRIET [^] ESOMEPRAZOLE STRONTIUM ESTRACE CREAM [^] ESTRING ESTROGEL DIVIGEL [^] EVEKEO [^] EVENTY EXFORGE [^] , EXFORGE HCT [^] EXJADE [^] EXONDYS 51 EXTAVIA EZALLOR SPRINKLE FABIOR FEMRING | FENOFIBRATE CAPSULES (30 MG, 50 MG, 90 MG, 150 MG) FENOPROFEN 200 MG CAPSULES FENORTHO FENSOLVI FENTANYL CITRATE BUCCAL TABLETS FENTORA FERAHEME [^] FIASP FINTEPLA FIRAZIRY [^] FIRVANQ FLAREX FLEQSUVY FLOVENT DISKUS~, FLOVENT HFA~ FLUOROURACIL 0.5% CREAM FLUTICASONE PROPRIONATE HFA FLUTICASONE/SALMETEROL (BY A-S MEDICATION, TEVA) FLUTICASONE/VILANTEROL FML FORTE, FML S.O.P. FOCALIN [^] , FOCALIN XR [^] FOLLISTIM AQ FORFIVO XL FOSRENOL CHEWABLE TABLETS [^] FOSRENOL POWDER PACKETS FOTIVDA FUROSCIX FYLNETRA GAMMAKED GANIRELIX ACETATE [^] GEL-ONE GELSYN-3 GENERESS FE [^] |
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~ Medications will be excluded beginning 07/01/2023.

(continued)

Excluded Medications/Products at a Glance (continued)

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| GENVISC 850 | LAZANDA | NORPACE CR | PULMICORT FLEXHALER | SULCONAZOLE | VANOS [^] |
| GILENYA [^] ~ | LEDIPASVIR/SOFOSBUVIR | NORTHERA [^] | PULMICORT RESPULES [^] | SULFACETAMIDE/SULFUR | VELTIN |
| GIMOTI | LEQEMBI | NORVASC [^] | PYLERA | 9%-4.25% SUSPENSION | VENLAFAXINE BESYLATE ER |
| GLEEVEEC [^] | LEQVIO | NOVO NORDISK PEN NEEDLES | PYRIDIUM [^] | SUPARTZ FX | VENTOLIN HFA |
| GLUCAGEN HYPOKIT | LETAIRIS [^] | NOVOLIN, RELION NOVOLIN | QBRELIS | SUPREP [^] | VERDESO FOAM |
| GLUCAGON EMERGENCY KIT (by Fresenius) | LEUPROLIDE DEPOT | NOVOLOG, NOVOLOG MIX, | QBREXZA | SUSVIMO | VEREGEN |
| GLUMETZA [^] | LEVABUTEROL HFA | RELION NOVOLG, | QDOLO | SUTAB | VERKAZIA |
| GOCOVRI ER | LEVAMLODIPINE | RELION NOVOLG MIX | QINLOCK | SYNOJOYNT | VESICARE [^] |
| GRANIX | LEVOTHYROXINE CAPSULES | NOVOSEVEN RT | QNASL | SYNTHROID [^] | VESICARE LS |
| HALOBETASOL 0.05% FOAM | LEXAPRO [^] | NOXAFIL TABLETS [^] | QTERN | SYNVISC, SYNVISC-ONE | VIAGRA [^] |
| HEMADY | LEXETTE | NUCYNTA, NUCYNTA ER | QUARTETTE [^] | TADLIQ | VICTOZA |
| HEMANGEOL | LIALDA [^] | NUTROPIN AQ NUSPIN | QUAZEPAM | TARGRETIN CAPSULES [^] | VIIBRYD [^] |
| HERCEPTIN, | LIBRAX [^] | NUVARING [^] | QUAZEPAM | TASCENSO ODT | VILTEPSO |
| HERCEPTIN HYLECTA | LIDOCAINE/TETRACAINE | NUVIGIL [^] | RABEPRAZOLE DR SPRINKLE | TAVNEOS | VIMOVO [^] |
| HERZUMA | LIDODERM [^] | NUWIQ | RANEXA [^] | TAYTULLA [^] | VIMPAT [^] |
| HOME AIDE DIAGNOSTICS | LIPITOR [^] | NYVEPRIA | RAPAFL0 [^] | TAZAROTENE FOAM | VISCO-3 |
| PEN NEEDLES & SYRINGES | LIPOFEN | OGIVRI | RAVICTI~ | TAZORAC 0.05% CREAM | VIVELLE-DOT [^] |
| HTL-STREFA | LO LOESTRIN FE | OMNARIS | REBYOTA | TAZORAC 0.1% CREAM [^] , | VIVIMUSTA |
| PEN NEEDLES & SYRINGES | LOCOD [^] , | ONETOUCH SOLUTIONS | RECOMBINATE | TAZORAC GEL [^] | VIVLODEX [^] |
| HUMALOG TEMPO | LOCOD LIPOCREAM [^] | STARTER KIT | RECORLEV | TECFIDERA [^] | VPRIV |
| HUMATROPE | LOESTRIN [^] , LOESTRIN FE [^] | ONFI [^] | REDITREX | TEKTURN [^] | VUIITY |
| HYALGAN | LOREEV XR | ONGENTYS | RELAFEN DS | TEMPO (WELCOME KIT, | VUSION |
| HYDROCORTISONE/ PRAMOXINE | LOTREL [^] | ONGLYZA | RELEUKO | REFILL KIT, SMART BUTTON) | VYEPTI |
| 25-18 MG SUPPOSITORIES | LOTRONEX [^] | ONPATTRO | RELEXII ER | TEPMETKO | VYONDYS 53 |
| HYMOVIS | LOVAZA [^] | ONTRUZANT | 45 MG, 63 MG; 72 MG~ | TESTIM [^] | VYTORIN [^] |
| IBSRELA | LOVENOX [^] | ONUREG | RELPAAX [^] | THALITONE | WELCHOL [^] |
| IMITREX [^] | LUCEMYRA | ONZETRA XSAIL | RELTONE | THIOLA [^] | WELLBUTRIN SR [^] , |
| IMPEKLO | LUCENTIS~ | ORACEA | RELYVRIO | THYQUIDITY | WELLBUTRIN XL [^] |
| IMPOYZ | LULICONAZOLE | OSMOPREP | REMICADE | TIKOSYN [^] | WINLEVI |
| IMVEXXY | LUNESTA [^] | OSPHENA | RENAGEL [^] | TIMOPTIC OCUDOSE [^] | XADAGO |
| INCRUSE ELLIPTA | LUPKYNIS | OTREXUP | RENFLXIS | TIROSINT, TIROSINT-SOL | XALATAN [^] |
| INDERAL LA [^] | LYBALVI | OWEN MUMFORD | RETIN-A MICRO | TIVORBEX | XANAX [^] , XANAX XR [^] |
| INDERAL XL, INNOPRAN XL | LYRICA [^] , LYRICA CR [^] | PEN NEEDLES | 0.04% & 0.1% [^] | TLANDO | XATMEP |
| INDOCIN SUPPOSITORIES, | LYUMJUV TEMPO | OXBRYTA | REZLIDHIA | TOBI SOLUTION [^] | XELPROX |
| INDOCIN SUSPENSION | LYVISPAH | OXISTAT CREAM [^] | RHOPRESSA, ROCKLATAN | TOBRADEX ST | XELSTRYM |
| INDOMETHACIN | MAVYRET | OXISTAT LOTION | RIABNI | TOLSURA | XENAZINE [^] |
| 20 MG CAPSULES | MAXALT [^] , MAXALT MLT [^] | OXYCODONE ER | RITALIN [^] , RITALIN LA [^] | TOPAMAX [^] | XERESE |
| INFLIXIMAB | MAXIDEX | OZOBAX | RITUXAN, RITUXAN HYCELA | TOPICORT SPRAY [^] | XIMINO |
| INQOVI | MELOXICAM SUSPENSION | PALFOZIA | ROCHE (ACCU-CHEK) | TOPROL XL [^] | XOLEGEL |
| INREBIC | MENEST | PENNSAID [^] | ROLVEDON | TRADJENTA | XOPENEX HFA |
| INSULIN ASPART, | MESTINON [^] | PERCOCET [^] | ROSUVASTATIN/EZETIMIBE | TRAMADOL 100 MG TABLETS | XPOVIO |
| INSULIN ASPART PROTAMINE | METFORMIN 625 MG TABLETS | PERFORMIST [^] | ROXYBOND | TRAMADOL ER CAPSULES | XTAMPZA ER |
| INSULIN DEGLUDEC | METHOCARBAMOL | PERTZYE | ROZEREM [^] | TRAMADOL SOLUTION | XYNTHA, XYNTHA SOLOFUSE |
| INSULIN GLARGINE | 1,000 MG TABLETS | PEXEVA | RUKOBIA ER | TRANSDERM-SCOP [^] | XYREM~ |
| (BY WINTHROP) | METHYLPHENIDATE ER | PHEGO | SABRIL [^] | TRAVATAN Z [^] | YASMIN [^] |
| INSULIN GLARGINE-YFGN | 45 MG, 63 MG; 72 MG~ | PHEXI | SAFYRAL [^] | TRELSTAR | YOSPRALA DR |
| INSULIN LISPRO | MICARDIS [^] , MICARDIS HCT [^] | PIFELTRO | SAIZEN, SAIZENPREP | TREXIMET [^] | ZAVESCA [^] |
| INTRAROSA | MICONAZOLE/ZINC OXIDE/ PETROLATUM | PIQRAY | SAMSCA [^] | TRI-LUMA | ZEGALOGUE |
| INTUNIV [^] | MINASTRIN 24 FE [^] | PIRFENIDONE 534 MG TABLETS | SANDOSTATIN LAR DEPOT | TRIBENZOR [^] | ZEGERID [^] |
| INVEGA HAFYERA | MINIVELLE [^] | PLAQUENIL [^] | SAPHRIS [^] | TRICOR [^] | ZELAPAR |
| INVOKAMET, INVOKAMET XR, INVOKANA | MINOCYCLINE BIPHASIC TABLETS | PLAVIX [^] | SAVAYSA | TRILEPTAL [^] | ZELNORM |
| ISTALOL [^] | MINOCYCLINE ER CAPSULES | PLENVU | SCEMBLIX | TRILURON | ZERVIAE |
| ISTURISA | MIRCERA | PLIAGLIS | SEASONIQUE [^] , | TRINAZ | ZETIA [^] |
| JADENU [^] , JADENU SPRINKLE [^] | MIRCETTE [^] | PRADAXA | LOSEASONIQUE [^] | TRIVIDIA | ZETONNA |
| JENTADUETO, JENTADUETO XR | MONOFERRIC | PRALUENT | SEGLENTIS | (NIPRO DIAGNOSTICS) | ZILXI |
| KAPSPARGO SPRINKLE | MOTEFRRY | PRED MILD | SENSIPAR [^] | PEN NEEDLES & SYRINGES | ZIMHI |
| KATERZIA | MOVIPREP [^] | PREGENNA | SERNIVO | TRIVIDIA | ZIOPTAN [^] |
| KAZANO | MULPLETA | PREGNYL | SEROQUEL [^] , SEROQUEL XR [^] | (TRUETEST, TRUETRACK) | ZIPSOR |
| KEPPRA [^] , KEPPRA XR [^] | MYTESI | PREMARIN TABLETS, | SERTRALINE CAPSULES | TRIVISC | ZOCOR [^] |
| KERYDIN [^] | MALFON CAPSULES [^] | PREMPHASE, PREMPRO | SIGNIFOR LAR | TRUSELTIQ | ZOLMITRIPTAN NASAL SPRAY |
| KETOROLAC NASAL SPRAY | NAMENDA XR [^] | PREVACID [^] , | SIKLOS | TRUVADA [^] | 2.5 MG |
| KISQALI, | NATAZIA | PREVACID SOLUTAB [^] | SIMPLE DIAGNOSTICS | TRUXIMA | ZOLOFT [^] |
| KISQALI FEMARA CO-PACK | NATROBA [^] | PREZCOBIX | PEN NEEDLES & SYRINGES | TUDORZA PRESSAIR | ZOMACTON |
| KLISYRI | NESINA | PRIOSECC SUSPENSION | SINGULARIF [^] | TWIRLA | ZOMIG TABLETS [^] |
| KLONOPIN [^] | NEULASTA | PRIMLEV | SITAVIG | TYBLUME | ZONEGRAN [^] |
| KOMBIGLYZE XR | NEUPOGEN | PRISTIQ [^] | SKYTROFA | UDENYCA | ZONISADE |
| KORLYM | NEURONTIN [^] | PROAIR DIGIHALER, | SLYND | ULORIC [^] | ZORVOLEX |
| KRAZATI | NEVANAC | PROAIR RESPICLICK | SOAANZ | ULTIMED | ZOVIRAX OINTMENT [^] |
| KYZATREX | NEXICLON XR | PROCTOFOAM-HC | SOFOSBUVIR/VELPATASVIR | PEN NEEDLES & SYRINGES | ZYCLARA |
| LAMICTAL [^] , LAMICTAL ODT [^] , | NEXIUM CAPSULES [^] | PROCYRSBI | SORILUX | ULTRAVATE | ZYLET |
| LAMICTAL XR [^] | NEXIUM PACKETS | PRODIGY DIABETES CARE | SOVALDI | UPLIZNA | ZYTIGA [^] |
| LAMPIT | NEXTSTELLIS | PROLATE SOLUTION | SPRAVATO | UPNEEQ | |
| LANREOTIDE | NOCTIVA | PROLIA | STIMUFEND | UROXATRAL [^] | |
| LANTUS | NORITATE | PROTONIX [^] | STRATTERA [^] | VABYSMO | |
| LASTACRAFT | NORLIQVA | PROVENTIL HFA [^] | STRIBILD | VAGIFEM [^] | |
| | NORPACE [^] | PROVIGIL [^] | STRIVERDI RESPIMAT | VALIUM [^] | |
| | | PROZAC [^] | SUBOXONE [^] | VALSARTAN SOLUTION | |
| | | | SUBSYS | VALTRES [^] | |

[^] Multisource brand exclusion – The generic equivalent of this brand-name medication is covered under your plan. FDA-approved generic medications meet strict standards and contain the same active ingredients as their corresponding brand-name medications, although they may have a different appearance. As new generic medications become available, additional multisource brand products may become excluded.

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