

Drug Removals for Clients with Advanced Control Specialty Formulary[®]

Below is a list of medicines by drug class that have been removed from your plan's formulary. If you continue using one of the drugs listed below and identified as a Formulary Drug Removal, you may be required to pay the full cost.

If you are currently using one of the formulary drug removals, ask your doctor to choose one of the generic or brand formulary options listed below.

| Category Drug Class | Formulary Drug Removals | Formulary Options |
|--|---|--|
| <i>Acromegaly</i> | SANDOSTATIN LAR ¹ SIGNIFOR LAR ¹ SOMAVERT ¹ | SOMATULINE DEPOT |
| <i>Allergies</i> Antihistamines | <i>dexchlorpheniramine</i> Diphen Elixir RyClora CARBINOXAMINE TABLET 6 MG | <i>levocetirizine</i> |
| <i>Allergies</i> Nasal Steroids / Combinations | BECONASE AQ DYMISTA OMNARIS QNASL ZETONNA | <i>azelastine-fluticasone, flunisolide, fluticasone, mometasone</i> |
| <i>Anti-infectives, Antibacterials</i> Erythromycins / Macrolides | E.E.S. GRANULES ERYPED | <i>erythromycins</i> |
| <i>Anti-infectives, Antibacterials</i> Tetracyclines | <i>doxycycline hyclate delayed-rel tablet</i> <i>doxycycline hyclate tablet 50 mg</i> <i>doxycycline hyclate tablet 75 mg</i> <i>doxycycline hyclate tablet 150 mg</i> <i>doxycycline monohydrate capsule 75 mg</i> <i>doxycycline monohydrate capsule 150 mg</i> <i>minocycline ext-rel</i> CoreMino Mondoxyne NL capsule 75 mg Targadox ACTICLATE DORYX DORYX MPC | <i>doxycycline hyclate 20 mg, doxycycline hyclate capsule, minocycline, tetracycline</i> |
| <i>Anti-infectives, Antibacterials</i> Miscellaneous | <i>nitrofurantoin (NDC* 16571074024 only)</i> MACRODANTIN | <i>nitrofurantoin (except NDC* 16571074024)</i> |
| <i>Anti-infectives, Antifungals</i> | <i>flucytosine capsule 500 mg</i> | <i>fluconazole</i> |
| | <i>posaconazole delayed-rel tablet</i> NOXAFIL | <i>fluconazole, itraconazole</i> |
| | CRESEMBA | <i>itraconazole</i> |
| | <i>tavorole</i> | <i>terbinafine tablet</i> |
| <i>Anti-infectives, Antiretroviral Agents</i> Combination Agents | COMPLERA ¹ STRIBILD ¹ | <i>efavirenz-emtricitabine-tenofovir disoproxil fumarate, efavirenz-lamivudine-tenofovir disoproxil fumarate, BIKTARVY, DOVATO, GENVOYA, ODEFSEY, SYMTUZA, TRIUMEQ</i> |
| | TRUVADA ¹ | <i>abacavir-lamivudine, emtricitabine-tenofovir disoproxil fumarate, lamivudine-zidovudine, CIMDUO, DESCOVY</i> |
| <i>Anti-infectives, Antiretroviral Agents</i> Fusion Inhibitors | SELZENTRY ¹ | <i>maraviroc</i> |

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|--|--|--|
| Anti-infectives, Antiretroviral Agents Protease Inhibitors | APTIVUS ¹ | Talk to your doctor |
| | LEXIVA ¹ VIRACEPT ¹ | atazanavir, lopinavir-ritonavir, EVOTAZ, PREZCOBIX, PREZISTA |
| Anti-infectives, Antivirals Cytomegalovirus [†] | VALCYTE | valganciclovir |
| Anti-infectives, Antivirals Hepatitis B [†] | BARACLUDGE TABLET ¹ EPIVIR HBV ¹ VELMIDY ¹ | entecavir, lamivudine, tenofovir disoproxil fumarate |
| Anti-infectives, Antivirals Hepatitis C [†] | MAVYRET ¹ | EPCLUSA (genotypes 1, 2, 3, 4, 5, 6), HARVONI (genotypes 1, 4, 5, 6), VOSEVI ² |
| | VIEKIRA PAK ¹ ZEPATIER ¹ | EPCLUSA (genotypes 1, 2, 3, 4, 5, 6), HARVONI (genotypes 1, 4, 5, 6) |
| Anti-infectives, Antivirals Herpes [†] | acyclovir cream VALTREX | acyclovir capsule, acyclovir tablet, valacyclovir |
| Anti-infectives Miscellaneous | DARAPRIM | pyrimethamine |
| Antiobesity | CONTRAVE XENICAL | QSYMIA, SAXENDA, WEGOVY |
| Antiseizure Agents | topiramate ext-rel capsule (generics for QUDEXY XR only) LAMICTAL LAMICTAL ODT | carbamazepine, carbamazepine ext-rel, clobazam, clonazepam, divalproex sodium, divalproex sodium ext-rel, gabapentin, lacosamide, lamotrigine, lamotrigine ext-rel, levetiracetam, levetiracetam ext-rel, oxcarbazepine, phenobarbital, phenytoin, phenytoin sodium extended, primidone, rufinamide, tiagabine, topiramate, valproic acid, zonisamide, APTIOM, FYCOMPA, OXTELLAR XR, TROKENDI XR, XCOPRI |
| | BANZEL FINTEPLA ¹ ONFI | clobazam, clonazepam, lamotrigine, rufinamide, topiramate, TROKENDI XR |
| | SABRIL ¹ | vigabatrin |
| | DEPAKOTE DEPAKOTE ER DEPAKOTE SPRINKLE | carbamazepine, carbamazepine ext-rel, clonazepam, divalproex sodium, divalproex sodium ext-rel, ethosuximide, gabapentin, lacosamide, lamotrigine, lamotrigine ext-rel, levetiracetam, levetiracetam ext-rel, oxcarbazepine, phenobarbital, phenytoin, phenytoin sodium extended, primidone, tiagabine, topiramate, valproic acid, zonisamide, APTIOM, FYCOMPA, OXTELLAR XR, TROKENDI XR, XCOPRI |
| | DILANTIN KEPPRA KEPPRA XR LAMICTAL XR TEGRETOL TEGRETOL XR TRILEPTAL VIMPAT ZONEGRAN | carbamazepine, carbamazepine ext-rel, divalproex sodium, divalproex sodium ext-rel, gabapentin, lacosamide, lamotrigine, lamotrigine ext-rel, levetiracetam, levetiracetam ext-rel, oxcarbazepine, phenobarbital, phenytoin, phenytoin sodium extended, primidone, tiagabine, topiramate, valproic acid, zonisamide, APTIOM, FYCOMPA, OXTELLAR XR, TROKENDI XR, XCOPRI |
| | DIACOMIT ¹ | Talk to your doctor |
| | Anxiety [†] Benzodiazepines | ATIVAN XANAX XANAX XR |
| Asthma [†] Beta Agonists, Short-Acting | albuterol sulfate CFC-free aerosol (NDC* 66993001968 only) PROAIR HFA PROAIR RESPICLICK PROVENTIL HFA VENTOLIN HFA XOPENEX HFA | albuterol sulfate CFC-free aerosol (except NDC* 66993001968), levalbuterol tartrate CFC-free aerosol |

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| <i>Asthma</i> † Leukotriene Modulators | <i>zileuton ext-rel</i> SINGULAIR | <i>montelukast, zafirlukast</i> |
| <i>Asthma</i> † Steroid Inhalants | ALVESCO ARNUIITY ELLIPTA ASMANEX ASMANEX HFA FLOVENT DISKUS FLOVENT HFA QVAR REDIHALER ³ | PULMICORT FLEXHALER |
| <i>Asthma</i> † or <i>Chronic Obstructive Pulmonary Disease (COPD)</i> † Steroid / Beta Agonist Combinations | DULERA | ADVAIR DISKUS, ADVAIR HFA**, BREO ELLIPTA**, SYMBICORT |
| <i>Asthma</i> † Severe Asthma | NUCALA LYOPHILIZED POWDER ¹ | DUPIXENT, FASENRA, NUCALA (except lyophilized powder), TEZSPIRE, XOLAIR |
| <i>Attention Deficit Hyperactivity Disorder</i> † | ADDERALL EVEKEO | <i>amphetamine-dextroamphetamine mixed salts, methylphenidate</i> |
| | ADDERALL XR ADZENYS XR-ODT APTENSIO XR CONCERTA DAYTRANA DYANAVEL XR FOCALIN XR JORNAY PM MYDAYIS QUILLICHEW ER QUILLIVANT XR | <i>amphetamine-dextroamphetamine mixed salts ext-rel, dexmethylphenidate ext-rel, methylphenidate ext-rel, AZSTARYS, VYVANSE</i> |
| <i>Autoimmune Agents</i> Physician-Administered Agents | ACTEMRA INTRAVENOUS ¹ ORENCIA INTRAVENOUS ¹ | REMICADE, SIMPONI ARIA |
| | AVSOLA ¹ CIMZIA LYOPHILIZED POWDER ¹ INFLECTRA ¹ RENFLIXIS ¹ | ILUMYA, REMICADE, SIMPONI ARIA, SKYRIZI INTRAVENOUS, STELARA INTRAVENOUS |
| | ENTYVIO (For Crohn's Disease Only) ¹ | REMICADE, SKYRIZI INTRAVENOUS, STELARA INTRAVENOUS |
| <i>Autoimmune Agents</i> Self-Administered Agents Ankylosing Spondylitis † | SIMPONI ¹ TALTZ ¹ XELJANZ ¹ XELJANZ XR ¹ | COSENTYX, ENBREL, HUMIRA, RINVOQ |
| <i>Autoimmune Agents</i> Self-Administered Agents Crohn's Disease † | None | HUMIRA, SKYRIZI SUBCUTANEOUS, STELARA SUBCUTANEOUS |
| <i>Autoimmune Agents</i> Self-Administered Agents Non-Radiographic Axial Spondyloarthritis † | TALTZ ¹ | CIMZIA PREFILLED SYRINGE, COSENTYX, RINVOQ |
| <i>Autoimmune Agents</i> Self-Administered Agents Psoriasis † | COSENTYX ¹ ENBREL ¹ | HUMIRA, OTEZLA, SKYRIZI SUBCUTANEOUS, STELARA SUBCUTANEOUS, TALTZ, TREMFYA |

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| <i>Autoimmune Agents</i> Self-Administered Agents Psoriatic Arthritis † | ORENCIA CLICKJECT ¹ ORENCIA SUBCUTANEOUS ¹ SIMPONI ¹ TALTZ ¹ XELJANZ ¹ XELJANZ XR ¹ | COSENTYX, ENBREL, HUMIRA, OTEZLA, RINVOQ, SKYRIZI SUBCUTANEOUS, STELARA SUBCUTANEOUS, TREMFYA |
| <i>Autoimmune Agents</i> Self-Administered Agents Rheumatoid Arthritis † | ACTEMRA ACTPEN ¹ ACTEMRA SUBCUTANEOUS ¹ KINERET ¹ SIMPONI ¹ | ENBREL, HUMIRA, KEVZARA, ORENCIA CLICKJECT, ORENCIA SUBCUTANEOUS, RINVOQ, XELJANZ, XELJANZ XR |
| <i>Autoimmune Agents</i> Self-Administered Agents Ulcerative Colitis † | SIMPONI ¹ | HUMIRA, RINVOQ, STELARA SUBCUTANEOUS, XELJANZ, XELJANZ XR, ZEPOSIA |
| <i>Autoimmune Agents</i> Self-Administered Agents All Other Conditions † | ACTEMRA ACTPEN ¹ ACTEMRA SUBCUTANEOUS ¹ KINERET ¹ ORENCIA CLICKJECT ¹ ORENCIA SUBCUTANEOUS ¹ | ENBREL, HUMIRA |
| Botulinum Toxins | BOTOX ¹ | Talk to your doctor |
| <i>Cancer</i> Antimetabolites | ALIMTA | <i>pemetrexed</i> |
| <i>Cancer</i> Biosimilars | RIABNI ¹ TRUXIMA ¹ | RUXIENCE |
| <i>Cancer</i> Chronic Myelogenous Leukemia † Kinase Inhibitors | GLEEVEC ¹ ICLUSIG ¹ TASIGNA ¹ | <i>imatinib mesylate</i> , BOSULIF, SPRYCEL |
| <i>Cancer</i> Follicular Lymphoma † PI3K Inhibitors | ALIQUOPA ¹ | Talk to your doctor |
| <i>Cancer</i> Melanoma † BRAF/MEK Inhibitors | MEKINIST ¹ | COTELLIC, MEKTOVI |
| | TAFINLAR ¹ | BRAFTOVI, ZELBORAF |
| <i>Cancer</i> Monoclonal Antibodies | AVASTIN ¹ | ZIRABEV |
| | HERCEPTIN ¹ HERCEPTIN HYLECTA ¹ | KANJINTI, TRAZIMERA |
| | RITUXAN ¹ | RUXIENCE |
| <i>Cancer</i> mTOR Inhibitors | AFINITOR ¹ AFINITOR DISPERZ ¹ | <i>everolimus</i> |
| <i>Cancer</i> Multiple Myeloma † Proteasome Inhibitors | BORTEZOMIB ¹ KYPROLIS ¹ | <i>bortezomib</i> , NINLARO |
| <i>Cancer</i> Non-Small Cell Lung Cancer † ALK Inhibitors | XALKORI ¹ | ALECENSA, ALUNBRIG, ZYKADIA |
| <i>Cancer</i> PARP Inhibitor | RUBRACA ¹ | LYNPARZA, ZEJULA |

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| <i>Cancer</i> Prostate † Antiandrogens | NILANDRON ZYTIGA ¹ | <i>abiraterone, bicalutamide, ERLEADA, XTANDI, YONSA</i> |
| <i>Cancer</i> Prostate † Luteinizing Hormone-Releasing Hormone (LHRH) Agonists | FIRMAGON ¹ LUPRON DEPOT ¹ TRELSTAR MIXJECT ¹ ZOLADEX ¹ | ELIGARD |
| <i>Cancer</i> Renal Cell Carcinoma Kinase Inhibitors | SUTENT ¹ VOTRIENT ¹ | <i>sunitinib, CABOMETYX, INLYTA, LENVIMA, NEXAVAR</i> |
| <i>Cancer</i> Miscellaneous | TARGRETIN ¹ | <i>bexarotene</i> |
| <i>Cardiovascular</i> Antiarrhythmics | BETAPACE BETAPACE AF | <i>sotalol</i> |
| | MULTAQ NEXTERONE | <i>amiodarone</i> |
| | NORPACE | <i>disopyramide</i> |
| <i>Cardiovascular</i> Antilipemics Cholesterol Absorption Inhibitors | ZETIA | <i>ezetimibe</i> |
| <i>Cardiovascular</i> Antilipemics Fibrates | <i>fenofibrate capsule 30 mg fenofibrate capsule 50 mg fenofibrate capsule 90 mg fenofibrate capsule 130 mg fenofibrate tablet 40 mg fenofibrate tablet 120 mg FENOGLIDE TABLET 120 MG TRICOR</i> | <i>fenofibrate (except fenofibrate capsule 30 mg, 50 mg, 90 mg, 130 mg; fenofibrate tablet 40 mg, 120 mg), fenofibric acid delayed-rel</i> |
| <i>Cardiovascular</i> Antilipemics HMG-CoA Reductase Inhibitors (HMGs or Statins) / Combinations ⁴ | ALTOPREV CRESTOR LESCOL XL LIPITOR LIVALO | <i>atorvastatin, ezetimibe-simvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin</i> |
| <i>Cardiovascular</i> Antilipemics MTP Inhibitors | JUXTAPID ¹ | REPATHA |
| <i>Cardiovascular</i> Antilipemics Niacins | <i>niacin tablet 500 mg Niacor</i> | <i>niacin ext-rel</i> |
| <i>Cardiovascular</i> Antilipemics Omega-3 Fatty Acids | <i>icosapent ethyl LOVAZA</i> | <i>omega-3 acid ethyl esters, VASCEPA</i> |
| <i>Cardiovascular</i> Antilipemics PCSK9 Inhibitors | PRALUENT ¹ | REPATHA |
| <i>Cardiovascular</i> Digitalis Glycosides | LANOXIN TABLET (125 MCG and 250 MCG only) | <i>digoxin</i> |
| <i>Cardiovascular</i> Diuretics | DYRENIUM | <i>amiloride, triamterene</i> |

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|---|---|--|
| Cardiovascular Nitrates | <i>isosorbide dinitrate 40 mg</i> | <i>isosorbide dinitrate (except isosorbide dinitrate 40 mg), isosorbide mononitrate</i> |
| Cardiovascular Pulmonary Arterial Hypertension Endothelin Receptor Antagonists | LETAIRIS ¹ TRACLEER ¹ | <i>ambrisentan, bosentan, OPSUMIT</i> |
| Cardiovascular Pulmonary Arterial Hypertension Phosphodiesterase Inhibitors | ADCIRCA ¹ REVATIO ¹ | <i>sildenafil, tadalafil</i> |
| Cardiovascular Pulmonary Arterial Hypertension Prostaglandin Vasodilators | REMODULIN ¹ TYVASO DPI ¹ | <i>treprostinil</i> Talk to your doctor |
| Cardiovascular Miscellaneous | NORTHERA ¹ | <i>midodrine</i> |
| Carnitine Deficiency | CARNITOR CARNITOR SF | <i>levocarnitine</i> |
| Chronic Obstructive Pulmonary Disease (COPD) † Anticholinergics | INCRUSE ELLIPTA TUDORZA | SPIRIVA |
| Chronic Obstructive Pulmonary Disease (COPD) † Anticholinergic / Beta Agonist Combinations Long Acting | BEVESPI AEROSPHERE | ANORO ELLIPTA, STIOLTO RESPIMAT |
| Contraceptives Oral | BALCOLTRA BEYAZ MINASTRIN 24 FE SEASONIQUE TAYTULLA YASMIN YAZ | <i>ethinyl estradiol-drospirenone, ethinyl estradiol-drospirenone-levomefolate, ethinyl estradiol-levonorgestrel, ethinyl estradiol-norethindrone acetate, ethinyl estradiol-norethindrone acetate-iron, ethinyl estradiol-norgestimate, LO LOESTRIN FE, NATAZIA</i> |
| Contraceptives Progestin Intrauterine Devices | LILETTA ¹ | KYLEENA, MIRENA, SKYLA |
| Contraceptives Vaginal | <i>ethinyl estradiol-etonogestrel EluRyng</i> | ANNOVERA, NUVARING |
| Cushing's Syndrome | KORLYM ¹ | Talk to your doctor |
| Cystic Fibrosis † Inhaled Antibiotics | BETHKIS ¹ CAYSTON ¹ KITABIS PAK ¹ TOBI ¹ TOBI PODHALER ¹ | <i>tobramycin inhalation solution</i> |
| Dental Cavity/Caries Prevention | PREVIDENT | Talk to your doctor |

| Category Drug Class | Formulary Drug Removals | Formulary Options |
|---|--|---|
| Depression † Antidepressants, Selective Serotonin Reuptake Inhibitors (SSRIs) | fluoxetine tablet 60 mg paroxetine HCl ext-rel (NDC* 60505367503 only) LEXAPRO PAXIL PAXIL CR PEXEVA PROZAC VIIBRYD ZOLOFT | citalopram, escitalopram, fluoxetine (except fluoxetine tablet 60 mg, fluoxetine tablet [generics for SARAFEM]), paroxetine HCl, paroxetine HCl ext-rel (except NDC* 60505367503), sertraline, TRINTELLIX |
| Depression † Antidepressants, Serotonin Norepinephrine Reuptake Inhibitors (SNRIs) | venlafaxine ext-rel tablet (except 225 mg) CYMBALTA EFFEXOR XR PRISTIQ | desvenlafaxine ext-rel, duloxetine, venlafaxine, venlafaxine ext-rel capsule |
| Depression † Antidepressants, Miscellaneous Agents | bupropion ext-rel tablet 450 mg | bupropion, bupropion ext-rel (except bupropion ext-rel tablet 450 mg) |
| Depression and/or Schizophrenia † Antipsychotics, Atypicals | ABILIFY FANAPT LATUDA SEROQUEL XR | aripiprazole, clozapine, lurasidone, olanzapine, quetiapine, quetiapine ext-rel, risperidone, ziprasidone, VRAYLAR |
| Dermatology Acne † | adapalene pad clindamycin gel (NDC* 68682046275 only) Vanoxide-HC ACANYA ACZONE AZELEX DIFFERIN LOTION FABIOR TAZORAC VELTIN ZIANA | adapalene (except adapalene pad), benzoyl peroxide, clindamycin gel (except NDC* 68682046275), clindamycin solution, clindamycin-benzoyl peroxide, dapsone, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, AKLIEF, ARAZLO, EPIDUO, ONEXTON, TWYNEO, WINLEVI |
| Dermatology Actinic Keratosis † | fluorouracil cream 0.5% CARAC | fluorouracil cream 5%, fluorouracil solution, imiquimod, ZYCLARA |
| Dermatology Anti-infective / Anti-inflammatory | NEO-SYNALAR | desonide (except desonide gel) or hydrocortisone WITH gentamicin |
| Dermatology Antibiotics | mupirocin cream | gentamicin, mupirocin ointment |
| Dermatology Antipsoriatics | calcipotriene cream calcipotriene foam calcitriol ointment CALCIPOTRIENE FOAM SORILUX TAZORAC VECTICAL | calcipotriene ointment, calcipotriene solution |
| | calcipotriene-betamethasone DUOBRII | calcipotriene ointment or calcipotriene solution WITH desoximetasone (except desoximetasone ointment 0.05%), fluocinonide (except fluocinonide cream 0.1%) or BRYHALI; ENSTILAR |
| Dermatology Atopic Dermatitis † | doxepin cream | desonide (except desonide gel), hydrocortisone, pimecrolimus, tacrolimus, EUCRISA |
| | ELIDEL | pimecrolimus, tacrolimus, EUCRISA |
| Dermatology Rosacea † | doxycycline monohydrate delayed-rel capsule | ORACEA |
| | ivermectin cream FINACEA GEL MIRVASO NORITATE | azelaic acid gel, metronidazole, FINACEA FOAM, RHOFADÉ, SOOLANTRA |

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| <i>Dermatology</i> Scars | CICATRACE POLYTOZA RECEDO SCARSILK PAD SILIVEX SILTREX | Talk to your doctor |
| <i>Dermatology</i> Seborrheic Dermatitis † | <i>ketoconazole foam 2%</i> Ketodan | <i>ketoconazole shampoo 2%, selenium sulfide lotion 2.5%</i> |
| | XOLEGEL | <i>ciclopirox, ketoconazole cream 2%</i> |
| <i>Dermatology</i> Skin Inflammation and Hives † Low Potency Corticosteroids | <i>desonide gel</i> DesRx <i>flurandrenolide cream</i> <i>flurandrenolide lotion</i> CORDRAN CREAM CORDRAN LOTION | <i>desonide (except desonide gel), hydrocortisone</i> |
| <i>Dermatology</i> Skin Inflammation and Hives † Medium Potency Corticosteroids | <i>clocortolone cream</i> <i>desoximetasone ointment 0.05%</i> <i>flurandrenolide ointment</i> <i>hydrocortisone butyrate lipophilic cream 0.1%</i> <i>hydrocortisone butyrate lotion</i> <i>triamcinolone aerosol 0.2%</i> <i>triamcinolone ointment 0.05%</i> Trianex CORDRAN OINTMENT | <i>hydrocortisone butyrate cream, hydrocortisone butyrate ointment, hydrocortisone butyrate solution, mometasone, triamcinolone cream, triamcinolone lotion, triamcinolone ointment (except triamcinolone ointment 0.05%)</i> |
| <i>Dermatology</i> Skin Inflammation and Hives † High Potency Corticosteroids | <i>betamethasone dipropionate ointment 0.05%</i> <i>diflorasone cream</i> <i>diflorasone ointment</i> <i>halcinonide cream</i> APEXICON E HALOG | <i>desoximetasone (except desoximetasone ointment 0.05%), fluocinonide (except fluocinonide cream 0.1%), BRYHALI</i> |
| <i>Dermatology</i> Skin Inflammation and Hives † Very High Potency Corticosteroids | <i>clobetasol emollient foam</i> <i>clobetasol spray</i> <i>fluocinonide cream 0.1%</i> Tovet CLOBEX SPRAY CORDRAN TAPE OLUX-E ULTRAVATE | <i>clobetasol cream, clobetasol foam (except clobetasol emollient foam), clobetasol gel, clobetasol lotion, clobetasol ointment, halobetasol cream, halobetasol ointment</i> |
| <i>Dermatology</i> Warts | VEREGEN | <i>imiquimod</i> |
| <i>Dermatology</i> Wound Care Products | ALEVICYN GEL ALEVICYN SG ALEVICYN SOLUTION | <i>desonide (except desonide gel), hydrocortisone</i> |
| <i>Dermatology</i> Miscellaneous Skin Conditions | ATOPADERM BENSAL HP EPICERAM KAMDOY SYNERDERM | <i>desonide (except desonide gel), hydrocortisone</i> |
| | <i>luliconazole</i> <i>oxiconazole</i> (NDCs* 00168035830, 51672135902 only) | <i>ciclopirox, clotrimazole, econazole, ketoconazole cream 2%, NAFTIN</i> |
| <i>Diabetes †</i> Biguanides | <i>metformin ext-rel</i> (generics for FORTAMET and GLUMETZA only) FORTAMET GLUMETZA RIOMET | <i>metformin, metformin ext-rel (except generics for FORTAMET and GLUMETZA)</i> |
| <i>Diabetes †</i> Dipeptidyl Peptidase-4 (DPP-4) Inhibitors | NESINA ONGLYZA TRADJENTA | JANUVIA |

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|---|--|--|
| <i>Diabetes</i> † Dipeptidyl Peptidase-4 (DPP-4) Inhibitor Combinations | JENTADUETO JENTADUETO XR KAZANO KOMBIGLYZE XR | JANUMET, JANUMET XR |
| | OSENI | JANUMET, JANUMET XR; JANUVIA WITH <i>pioglitazone</i> |
| <i>Diabetes</i> † Injectable Incretin Mimetics | BYDUREON BCISE BYETTA | OZEMPIC, RYBELSUS, TRULICITY, VICTOZA |
| <i>Diabetes</i> † Insulins | APIDRA HUMALOG | FIASP, NOVOLOG |
| | HUMALOG MIX 50/50 | NOVOLOG MIX 70/30 |
| | HUMALOG MIX 75/25 | NOVOLOG MIX 70/30 |
| | HUMULIN 70/30 ⁵ | NOVOLIN 70/30 ⁵ |
| | HUMULIN N ⁵ | NOVOLIN N ⁵ |
| | HUMULIN R ⁵ | NOVOLIN R ⁵ |
| | NOTE: <i>Humulin R U-500 concentrate will not be subject to removal and will continue to be covered.</i> | |
| <i>Diabetes</i> † Long Acting Insulins ⁶ | LANTUS | BASAGLAR, LEVEMIR |
| <i>Diabetes</i> † Insulin Sensitizers | ACTOS | <i>pioglitazone</i> |
| <i>Diabetes</i> † Sodium-Glucose Co-transporter 2 (SGLT2) Inhibitors | INVOKANA | FARXIGA, JARDIANCE |
| <i>Diabetes</i> † Sodium-Glucose Co-transporter 2 (SGLT2) Inhibitor / Biguanide Combinations | INVOKAMET INVOKAMET XR | SYNJARDY, SYNJARDY XR, XIGDUO XR |
| <i>Diabetes</i> † Sodium-Glucose Co-transporter 2 (SGLT2) Inhibitor / Dipeptidyl Peptidase-4 (DPP-4) Inhibitor Combinations | QTERN | GLYXAMBI |
| <i>Diabetes</i> † Supplies, Needles ⁷ | NOVO NORDISK NEEDLES OWEN MUMFORD NEEDLES PERRIGO NEEDLES ULTIMED NEEDLES All other insulin needles that are not BD ULTRAFINE brand | BD ULTRAFINE NEEDLES |
| <i>Diabetes</i> † Supplies, Syringes ⁷ | ALLISON MEDICAL INSULIN SYRINGES TRIVIDIA INSULIN SYRINGES ULTIMED INSULIN SYRINGES All other insulin syringes that are not BD ULTRAFINE brand | BD ULTRAFINE INSULIN SYRINGES |

| Category Drug Class | Formulary Drug Removals | Formulary Options |
|--|--|--|
| Diabetes † Supplies, Test Strips and Kits 8, 9 | BREEZE 2 STRIPS AND KITS CONTOUR NEXT STRIPS AND KITS CONTOUR STRIPS AND KITS FREESTYLE STRIPS AND KITS All other test strips that are not ACCU-CHEK or ONETOUGH brand | ACCU-CHEK AVIVA PLUS STRIPS AND KITS 8, ACCU-CHEK GUIDE STRIPS AND KITS 8, ACCU-CHEK SMARTVIEW STRIPS AND KITS 8, ONETOUGH ULTRA STRIPS AND KITS 8, ONETOUGH VERIO STRIPS AND KITS 8 |
| | ENLITE CONTINUOUS GLUCOSE MONITORING SYSTEM EVERSENSE CONTINUOUS GLUCOSE MONITORING SYSTEM FREESTYLE LIBRE CONTINUOUS GLUCOSE MONITORING SYSTEM GUARDIAN CONNECT CONTINUOUS GLUCOSE MONITORING SYSTEM GUARDIAN REAL-TIME CONTINUOUS GLUCOSE MONITORING SYSTEM All other continuous glucose monitoring systems that are not DEXCOM brand | DEXCOM CONTINUOUS GLUCOSE MONITORING SYSTEM |
| Dietary Supplements | FOSTEUM FOSTEUM PLUS | <i>alendronate, ibandronate, risedronate</i> |
| | <i>Activite</i> 10 <i>Dexifol</i> 10 <i>Genicin Vita-S</i> 10 <i>HylaVite</i> 10 <i>MultiPro</i> 10 <i>TronVite</i> 10 <i>Vitasure</i> 10 <i>Xvite</i> 10 FERIVA 21/7 10 FLORIVA 10 FLORIVA PLUS 10 NICADAN 10 NICAPRIN 10 NICAZEL 10 NICAZEL FORTE 10 NICOMIDE 10 POLY-VI-FLOR 10 POLY-VI-FLOR WITH IRON 10 RHEUMATE 10 TALIVA 10 TRI-VI-FLOR 10 XYZBAC 10 All other brand multivitamins 10 | <i>generic multivitamins</i> |
| | <i>Folvite-D</i> 10 ORTHO D 10 ORTHO DF 10 | <i>folic acid, generic multivitamins</i> |
| | VASCULERA | Talk to your doctor |
| Endocrine and Metabolic Corticosteroids | <i>prednisolone solution 10 mg/5 mL</i> <i>prednisolone solution 20 mg/5 mL</i> <i>Millipred</i> BETAMETHASONE ACETATE- BETAMETHASONE SODIUM PHOSPHATE RAYOS | <i>dexamethasone, hydrocortisone, methylprednisolone, prednisolone solution (except prednisolone solution 10 mg/5 mL, 20 mg/5 mL), prednisone</i> |
| Endocrine and Metabolic Hereditary Tyrosinemia Type 1 Agents | NITYR 1 | ORFADIN |
| Endocrine and Metabolic Potassium-Removing Agents | LOKELMA | VELTASSA |
| Endocrine and Metabolic Progestins | PROMETRIUM | <i>medroxyprogesterone; progesterone, micronized</i> |

| Category Drug Class | Formulary Drug Removals | Formulary Options |
|--|---|---|
| Endocrine and Metabolic Severe Hypoglycemia | GLUCAGEN HYPOKIT GLUCAGON EMERGENCY KIT | glucagon, human recombinant; BAQSIMI; GVOKE; ZEGALOGUE |
| Endocrine and Metabolic Vasopressin Receptor Antagonists | JYNARQUE ¹ | Talk to your doctor |
| Endocrine and Metabolic Miscellaneous | CARBAGLU ¹ | carglumic acid |
| | CYSTADANE ¹ | betaine |
| Endometriosis † | ZOLADEX ¹ | MYFEMBREE, ORLISSA |
| Erectile Dysfunction † Phosphodiesterase Inhibitors | CIALIS STENDRA VIAGRA | sildenafil, tadalafil |
| Fertility Regulators Follicle-Stimulating Hormones | FOLLISTIM AQ ¹ | GONAL-F |
| | CHORIONIC GONADOTROPIN ¹ NOVAREL ¹ PREGNYL ¹ | OVIDREL |
| Gastrointestinal Anticholinergics | chlordiazepoxide-clidinium (NDCs* 11534019701, 42494040901, 51293069601, 51293069610, 67877073101, 70700018501 only) hyoscyamine sulfate ext-rel GLYCOPYRROLATE TABLET 1.5 MG LIBRAX | dicyclomine |
| Gastrointestinal Antidiarrheals | ENTERAGAM | alosetron, VIBERZI, XIFAXAN 550 MG |
| | MYTESI | diphenoxylate-atropine, loperamide |
| Gastrointestinal Antiemetics | TRANSDERM SCOP | meclizine, scopolamine transdermal |
| Gastrointestinal Irritable Bowel Syndrome † | AMITIZA | lubiprostone, LINZESS, SYMPROIC |
| Gastrointestinal Laxatives | LACTULOSE PAK | lactulose solution |
| | peg 3350-electrolytes (generics for MOVIPREP only) GOLYTELY MOVIPREP OSMOPREP SUPREP | peg 3350-electrolytes (except generics for MOVIPREP), CLENPIQ |
| Gastrointestinal Opioid-Induced Constipation | MOVANTIK | lubiprostone, SYMPROIC |
| Gastrointestinal Probiotics | ZELAC | Talk to your doctor |
| Gastrointestinal Proton Pump Inhibitors (PPIs) | dexlansoprazole delayed-rel lansoprazole delayed-rel orally disintegrating tablet omeprazole-sodium bicarbonate pantoprazole delayed-rel suspension ACIPHEX ACIPHEX SPRINKLE DEXILANT NEXIUM PREVACID PRILOSEC PROTONIX ZEGERID | esomeprazole delayed-rel, lansoprazole delayed-rel capsule, omeprazole delayed-rel, pantoprazole delayed-rel tablet |

| Category Drug Class | Formulary Drug Removals | Formulary Options |
|---|---|--|
| Gastrointestinal Ulcer Treatment | sucralfate suspension CARAFATE | sucralfate tablet |
| Gaucher Disease | ELELYSO ¹ | CERDELGA, CEREZYME |
| Genitourinary Interstitial Cystitis | ELMIRON RIMSO-50 | Talk to your doctor |
| Genitourinary Miscellaneous | LITHOSTAT | Talk to your doctor |
| | THIOLA ¹ THIOLA EC ¹ | tiopronin |
| Gout † | colchicine capsule COLCRYS | colchicine tablet, MITIGARE |
| | ULORIC | allopurinol |
| Growth Hormones | HUMATROPE ¹ NUTROPIN AQ ¹ OMNITROPE ¹ SAIZEN ¹ | GENOTROPIN, NORDITROPIN |
| Hematologic Anticoagulants Injectable | HEPARIN SODIUM IN 5% DEXTROSE | enoxaparin, fondaparinux |
| Hematologic Anticoagulants Oral | PRADAXA | warfarin, ELIQUIS, XARELTO |
| Hematologic Chelating Agents | CUPRIMINE ¹ | penicillamine |
| | DESFERAL ¹ EXJADE ¹ FERRIPROX ¹ JADENU ¹ | deferasirox, deferiprone, deferoxamine |
| | SYPRINE ¹ | trientine |
| Hematologic Erythropoiesis-Stimulating Agents | EPOGEN ¹ | ARANESP, PROCRIT, RETACRIT |
| Hematologic Hemophilia B | BENEFIX ¹ IXINITY ¹ RIXUBIS ¹ | ALPROLIX, REBINYN |
| Hematologic Miscellaneous Bleeding Disorders Agents | FEIBA ¹ | NOVOSEVEN RT, SEVENFACT |
| Hematologic Neutropenia Colony Stimulating Factors | FULPHILA ¹ NEULASTA ¹ NEULASTA ONPRO ¹ UDENYCA ¹ | ZIEXTENZO |
| | GRANIX ¹ LEUKINE ¹ NEUPOGEN ¹ ZARXIO ¹ | NIVESTYM |
| Hematologic Platelet Aggregation Inhibitors | PLAVIX | clopidogrel, prasugrel, BRILINTA |
| | ZONTIVITY | Talk to your doctor |
| | NPLATE ¹ | DOPTELET, PROMACTA, TAVALISSE |
| High Blood Pressure † ACE Inhibitors | EPANED | enalapril, fosinopril, lisinopril, quinapril, ramipril |

| Category Drug Class | Formulary Drug Removals | Formulary Options |
|--|--|--|
| <i>High Blood Pressure</i> † ACE Inhibitor / Diuretic Combinations | ZESTORETIC | <i>fosinopril-hydrochlorothiazide, lisinopril-hydrochlorothiazide, quinapril-hydrochlorothiazide</i> |
| <i>High Blood Pressure</i> † Angiotensin II Receptor Antagonists | ATACAND BENICAR COZAAR DIOVAN EDARBI MICARDIS | <i>candesartan, irbesartan, losartan, olmesartan, telmisartan, valsartan</i> |
| <i>High Blood Pressure</i> † Angiotensin II Receptor Antagonist / Diuretic Combinations | ATACAND HCT BENICAR HCT DIOVAN HCT EDARBYCLOR HYZAAR MICARDIS HCT | <i>candesartan-hydrochlorothiazide, irbesartan-hydrochlorothiazide, losartan-hydrochlorothiazide, olmesartan-hydrochlorothiazide, telmisartan-hydrochlorothiazide, valsartan-hydrochlorothiazide</i> |
| <i>High Blood Pressure</i> † Angiotensin II Receptor Antagonist / Calcium Channel Blocker Combinations | AZOR EXFORGE | <i>amlodipine-olmesartan, amlodipine-telmisartan, amlodipine-valsartan</i> |
| <i>High Blood Pressure</i> † Angiotensin II Receptor Antagonist / Calcium Channel Blocker / Diuretic Combinations | EXFORGE HCT | <i>amlodipine-valsartan-hydrochlorothiazide, olmesartan-amlodipine- hydrochlorothiazide</i> |
| <i>High Blood Pressure</i> † Beta-blockers | BYSTOLIC COREG CR INDERAL LA INDERAL XL INNOPRAN XL TOPROL-XL | <i>atenolol, carvedilol, carvedilol phosphate ext-rel, metoprolol succinate ext-rel, metoprolol tartrate, nadolol, nebivolol, pindolol, propranolol, propranolol ext-rel</i> |
| <i>High Blood Pressure</i> † Calcium Channel Blockers | NORVASC | <i>amlodipine</i> |
| | <i>diltiazem ext-rel</i> (generics for CARDIZEM LA only) Matzim LA CARDIZEM CARDIZEM CD CARDIZEM LA | <i>diltiazem ext-rel (except generics for CARDIZEM LA)</i> |
| <i>Huntington's Disease</i> | XENAZINE ¹ | <i>tetrabenazine, AUSTEDO</i> |
| <i>Immunology</i> Disease Modifying Antirheumatic Agents | OTREXUP ¹ | RASUVO |
| <i>Immunology</i> Hereditary Angioedema | BERINERT ¹ FIRAZYR ¹ | <i>icatibant, RUCONEST</i> |
| | CINRYZE ¹ | ORLADEYO, TAKHZYRO |
| <i>Immunology</i> Miscellaneous | ARCALYST ¹ | ILARIS |
| <i>Inflammatory Bowel Disease (IBD)</i> Ulcerative Colitis † | <i>budesonide ext-rel tablet</i> ASACOL HD COLAZAL DELZICOL LIALDA PENTASA | <i>balsalazide, mesalamine delayed-rel, mesalamine ext-rel, sulfasalazine, sulfasalazine delayed-rel</i> |
| <i>Interferons</i> † | PEGASYS ¹ | Talk to your doctor |

| Category Drug Class | Formulary Drug Removals | Formulary Options |
|--|---|--|
| Kidney Disease † Phosphate Binders | lanthanum carbonate FOSRENOL RENVELA | calcium acetate, sevelamer carbonate, AURYXIA, VELPHORO |
| Menopausal Symptom Agents Oral | paroxetine mesylate capsule 7.5 mg | paroxetine HCl |
| | MENEST OSPHENA PREMARIN | estradiol |
| Menopausal Symptom Agents Transdermal | CLIMARA (except CLIMARA PRO) MINIVELLE VIVELLE-DOT | estradiol, DIVIGEL, EVAMIST |
| Menopausal Symptom Agents Vaginal | estradiol vaginal tablet Yuvafem ESTRING FEMRING INTRAROSA PREMARIN CREAM | estradiol vaginal cream, IMVEXXY, VAGIFEM |
| Multiple Sclerosis | AUBAGIO † EXTAVIA † GILENYA † LEMRADA † TECFIDERA † | dimethyl fumarate delayed-rel, fingolimod, glatiramer, teriflunomide, AVONEX, BETASERON, COPAXONE, KESIMPTA, MAYZENT, OCREVUS, REBIF, TYSABRI, VUMERITY, ZEPOSIA |
| Musculoskeletal | carisoprodol 250 mg chlorzoxazone 250 mg chlorzoxazone 375 mg chlorzoxazone 500 mg (NDC* 73007001303 only) chlorzoxazone 750 mg cyclobenzaprine ext-rel capsule cyclobenzaprine tablet 7.5 mg metaxalone 400 mg methocarbamol 500 mg (NDC* 69036091010 only) methocarbamol 750 mg (NDCs* 69036093090, 70868090190 only) orphenadrine-aspirin-caffeine Fexmid Lorzone Orphengesic Forte AMRIX NORGESIC FORTE | cyclobenzaprine (except cyclobenzaprine tablet 7.5 mg) |
| Narcolepsy Wakefulness Promoters | NUVIGIL PROVIGIL | armodafinil, modafinil, SUNOSI, WAKIX, XYWAV |
| Nephropathic Cystinosis | PROCYSBI † | CYSTAGON |
| Ophthalmic Allergies | ALREX BEPREVE LASTACAFT ZERVIAE | azelastine, bepotastine, cromolyn sodium, olopatadine |
| Ophthalmic Anti-infectives | AZASITE CILOXAN | ciprofloxacin, erythromycin, gentamicin, levofloxacin, moxifloxacin, ofloxacin, sulfacetamide, tobramycin, BESIVANCE |
| Ophthalmic Anti-infective / Anti-inflammatory | TOBRADEX ST ZYLET | neomycin-polymyxin B-bacitracin-hydrocortisone, neomycin-polymyxin B-dexamethasone, tobramycin-dexamethasone, TOBRADEX OINTMENT |
| Ophthalmic Anti-inflammatory, Nonsteroidal | ACUVAIL BROMSITE NEVANAC | bromfenac, diclofenac, ketorolac, ILEVRO, PROLENSA |

| Category Drug Class | Formulary Drug Removals | Formulary Options |
|--|---|--|
| <i>Ophthalmic</i> Anti-inflammatory, Steroidal | FLAREX FML FORTE FML LIQUIFILM FML S.O.P. INVELTYS LOTEMAX LOTEMAX SM MAXIDEX PRED FORTE PRED MILD | <i>dexamethasone, difluprednate, loteprednol, prednisolone acetate 1%</i> |
| <i>Ophthalmic</i> Antivirals | ZIRGAN | <i>trifluridine</i> |
| <i>Ophthalmic</i> Artificial Tears | LACRISERT | RESTASIS, XIIDRA |
| <i>Ophthalmic</i> Glaucoma | LUMIGAN RHOPRESSA ROCKLATAN TRAVATAN Z VYZULTA | <i>bimatoprost, latanoprost, travoprost, ZIOPTAN</i> |
| | BETIMOL TIMOPTIC OCUDOSE | <i>timolol maleate solution, BETOPTIC S</i> |
| | COMBIGAN | <i>brimonidine-timolol</i> |
| <i>Ophthalmic</i> Miscellaneous | AVENOVA | Talk to your doctor |
| <i>Opioid Dependency</i> | SUBOXONE | <i>buprenorphine-naloxone sublingual, ZUBSOLV</i> |
| <i>Osteoarthritis †</i> Viscosupplements | GEL-ONE ¹ HYALGAN ¹ MONOVISC ¹ ORTHOVISC ¹ SYNVISC ¹ SYNVISC-ONE ¹ VISCO-3 ¹ | DUROLANE, EUFLEXXA, GELSYN-3, SUPARTZ FX |
| <i>Osteoporosis †</i> Calcium Regulators | MIACALCIN INJECTION | <i>alendronate, calcitonin-salmon, ibandronate, risedronate, FORTEO, PROLIA, TYMLOS</i> |
| <i>Otic</i> Anti-infective / Anti-inflammatory | <i>ciprofloxacin-fluocinolone</i> CIPRO HC CIPRODEX | <i>ciprofloxacin-dexamethasone, ofloxacin otic</i> |
| <i>Overactive Bladder / Incontinence †</i> Urinary Antispasmodics | DETROL LA MYRBETRIQ OXYTROL TOVIAZ | <i>darifenacin ext-rel, fesoterodine ext-rel, oxybutynin ext-rel, solifenacin, tolterodine, tolterodine ext-rel, trospium, trospium ext-rel, GEMTESA</i> |

| Category Drug Class | Formulary Drug Removals | Formulary Options |
|----------------------------|--|---|
| Pain Headache † | <i>butalbital-acetaminophen capsule</i> <i>butalbital-acetaminophen tablet 25-325 mg</i> <i>butalbital-acetaminophen tablet 50-300 mg</i> <i>butalbital-acetaminophen-caffeine capsule</i> <i>Bupap</i> BUTALBITAL-ACETAMINOPHEN (NDC* 69499034230 only) CAMBIA FIORICET CAPSULE | <i>diclofenac sodium, ibuprofen,</i> <i>naproxen (except naproxen CR or naproxen suspension)</i> |
| | <i>dihydroergotamine spray</i> <i>ergotamine-caffeine</i> <i>Migergot</i> CAFERGOT MAXALT MAXALT-MLT | <i>eletriptan, naratriptan, rizatriptan, sumatriptan, zolmitriptan, NURTEC ODT,</i> <i>ONZETRA XSAIL, UBRELVY, ZEMBRACE SYMTOUCH</i> |
| | <i>sumatriptan-naproxen</i> TREXIMET | <i>diclofenac sodium, ibuprofen or naproxen (except naproxen CR or</i> <i>naproxen suspension) WITH eletriptan, naratriptan, rizatriptan, sumatriptan,</i> <i>zolmitriptan, NURTEC ODT, ONZETRA XSAIL, UBRELVY or</i> <i>ZEMBRACE SYMTOUCH</i> |
| Pain Neuropathic Pain † | LYRICA | <i>duloxetine, pregabalin, pregabalin ext-rel</i> |
| Pain Opioid Analgesics | BUTRANS | <i>buprenorphine transdermal, BELBUCA</i> |
| | LAZANDA SUBSYS | <i>fentanyl transmucosal lozenge</i> |
| | <i>levorphanol</i> <i>oxymorphone ext-rel</i> HYSINGLA ER NUCYNTA ER OXYCONTIN | <i>fentanyl transdermal, hydrocodone ext-rel, hydromorphone ext-rel, methadone,</i> <i>morphine ext-rel, XTAMPZA ER</i> |
| | NUCYNTA | <i>hydromorphone, morphine, oxycodone</i> |
| | PERCOCET | <i>hydrocodone-acetaminophen, oxycodone-acetaminophen</i> |
| | <i>tramadol (NDC* 52817019610 only)</i> <i>tramadol ext-rel capsule</i> | <i>tramadol (except NDC* 52817019610), tramadol ext-rel tablet</i> |

| Category Drug Class | Formulary Drug Removals | Formulary Options |
|--|--|--|
| Pain and Inflammation † Nonsteroidal Anti-inflammatory Drugs (NSAIDs) / Combinations | ARTHROTEC | celecoxib; diclofenac sodium, ibuprofen, meloxicam tablet or naproxen (except naproxen CR or naproxen suspension) WITH esomeprazole delayed-rel, lansoprazole delayed-rel capsule, omeprazole delayed-rel, or pantoprazole delayed-rel tablet |
| | CELEBREX | celecoxib, diclofenac sodium, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension) |
| | diclofenac sodium solution 2% Capsinac Diclofex DC Diclosaicin Iclofenac CP Inflammacin Kapzin DC NuDiclo SoluPak NuDiclo TabPak Pennsaicin Sure Result DSS Premium Pack Ziclocin Pak Ziclopro PENNSAID | diclofenac sodium, diclofenac sodium gel 1%, diclofenac sodium solution 1.5%, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension) |
| | diclofenac potassium capsule 25 mg diclofenac potassium tablet 25 mg fenoprofen indomethacin capsule 20 mg ketoprofen capsule 25 mg ketoprofen ext-rel capsule mefenamic acid (NDC* 69336012830 only) meloxicam capsule naproxen CR naproxen suspension Lofena FENOPROFEN CAPSULE INDOCIN NAPRELAN SPRIX ZORVOLEX | diclofenac sodium, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension) |
| | naproxen-esomeprazole | diclofenac sodium, ibuprofen, meloxicam tablet or naproxen (except naproxen CR or naproxen suspension) WITH esomeprazole delayed-rel, lansoprazole delayed-rel capsule, omeprazole delayed-rel, or pantoprazole delayed-rel tablet |
| Parkinson's Disease | APOKYN ¹ | INBRIJA, KYNMOBI |
| | NOURIANZ | entacapone, pramipexole, pramipexole ext-rel, rasagiline, ropinirole, ropinirole ext-rel, selegiline, NEUPRO |
| Phenylketonuria | KUVAN ¹ | sapropterin |
| Postherpetic Neuralgia | HORIZANT | gabapentin, pregabalin, pregabalin ext-rel, GRALISE |
| Premenstrual Dysphoric Disorder (PMDD) | fluoxetine tablet (generics for SARAFEM only) | fluoxetine (except fluoxetine tablet 60 mg, fluoxetine tablet [generics for SARAFEM]), paroxetine HCl ext-rel (except NDC* 60505367503), sertraline |
| Prenatal Vitamins ¹¹ | AZESCO CITRANATAL PRENATAL PLUS VITAFOL-ONE ZALVIT All other brand prenatal vitamins | generic prenatal vitamins |
| Prostate Condition Benign Prostatic Hyperplasia † | JALYN | dutasteride-tamsulosin; dutasteride or finasteride WITH alfuzosin ext-rel, doxazosin, silodosin, tamsulosin or terazosin |
| | RAPAFLO UROXATRAL | alfuzosin ext-rel, doxazosin, silodosin, tamsulosin, terazosin |
| Pseudobulbar Affect | NUEDEXTA | Talk to your doctor |

| Category Drug Class | Formulary Drug Removals | Formulary Options |
|---|--|---|
| <i>Respiratory</i> Alpha-1 Antitrypsin Deficiency | ARALAST NP ¹ GLASSIA ¹ | PROLASTIN-C, ZEMAIRA |
| <i>Respiratory</i> Anaphylaxis Treatment Agents | ADRENALIN SYMJEPI | <i>epinephrine auto-injector</i> , AUVI-Q, EPIPEN, EPIPEN JR |
| <i>Respiratory</i> Cough | <i>benzonatate</i> (NDCs* 69336012615, 69499032915 only) | <i>benzonatate</i> (except NDCs* 69336012615, 69499032915) |
| <i>Respiratory</i> Idiopathic Pulmonary Fibrosis | ESBRIET ¹ | <i>pirfenidone</i> , OFEV |
| <i>Respiratory</i> Phosphodiesterase-4 Inhibitors | DALIRESP | <i>roflumilast</i> |
| <i>Respiratory</i> Xanthines | THEO-24 | <i>formoterol inhalation solution, ipratropium inhalation solution</i> , SEREVENT, SPIRIVA, STRIVERDI RESPIMAT, YUPELRI |
| <i>Sleep Disorder</i> Hypnotics, Non-benzodiazepines | <i>quazepam</i> <i>zolpidem sublingual</i> EDLUAR LUNESTA ROZEREM SILENOR ZOLPIMIST | <i>doxepin, eszopiclone, ramelteon, zolpidem, zolpidem ext-rel</i> , BELSOMRA, DAYVIGO |
| <i>Testosterone Replacement</i> [†] Androgens | <i>testosterone gel 1%</i> (authorized generics for TESTIM and VOGELXO only) ANDROGEL FORTESTA TESTIM VOGELXO | <i>testosterone gel</i> (except authorized generics for TESTIM and VOGELXO), <i>testosterone solution</i> , NATESTO |
| <i>Thyroid Supplements</i> | CYTOMEL | <i>levothyroxine, liothyronine</i> , SYNTHROID |
| | TIROSINT | <i>levothyroxine</i> , SYNTHROID |
| <i>Urea Cycle Disorders</i> | BUPHENYL ¹ RAVICTI ¹ | <i>sodium phenylbutyrate</i> |

| Category Drug Class | Other Considerations |
|---|---|
| All Drugs | On a quarterly basis, new and existing products - including limited source generics, products with significant cost inflation, and specialty and non-specialty products - may be re-evaluated to determine appropriate formulary placement. These evaluations will assess whether clinically appropriate and cost-effective options remain available on the formulary and may result in removal, addition or deletion of a product. |
| Atopic Dermatitis † | As new atopic dermatitis products launch, all existing products in the class will be re-evaluated to determine appropriate formulary placement. These evaluations will assess whether clinically appropriate and cost-effective options are available on the formulary and may result in removal, addition or deletion of a product on the first day of any calendar month. |
| Autoimmune and Hepatitis C † | For some clients, an Indication-Based Formulary will be utilized for products in these classes and may result in additional removals for certain conditions only. |
| Drugs for Infusion Into Spaces Other Than the Blood | A drug that must be infused into a space other than the blood will generally not be covered under the prescription drug benefit. |
| New-to-Market Agents † | New-to-market products and new variations of products already in the marketplace will not be added to the formulary immediately. Each product will be evaluated for clinical appropriateness and cost-effectiveness. Recommended additions to the formulary will be presented to the CVS Caremark® National Pharmacy and Therapeutics Committee (or other appropriate reviewing body) for review and approval. |

The listed formulary options are subject to change.

List of Formulary Drug Removals

ABILIFY
 ACANYA
 ACIPHEX
 ACIPHEX SPRINKLE
 ACTEMRA ACTPEN †
 ACTEMRA INTRAVENOUS †
 ACTEMRA SUBCUTANEOUS †
 ACTICLATE
Activite †¹⁰
 ACTOS
 ACUVAIL
acyclovir cream
 ACZONE
adapalene pad
 ADCIRCA †
 ADDERALL
 ADDERALL XR
 ADRENALIN
 ADZENYS XR-ODT
 AFINITOR †
 AFINITOR DISPERZ †
albuterol sulfate CFC-free aerosol
 (NDC* 66993001968 only)
 ALEVICYN GEL
 ALEVICYN SG
 ALEVICYN SOLUTION
 ALIMTA
 ALIQOPA †
 ALLISON MEDICAL INSULIN SYRINGES †
 ALREX
 ALTOPREV
 ALVESCO
 AMITIZA
 AMRIX
 ANDROGEL
 APEXICON E
 APIDRA
 APOKYN †
 APTENSIO XR
 APTIVUS †
 ARALAST NP †
 ARCALYST †
 ARNUITY ELLIPTA
 ARTHROTEC
 ASACOL HD
 ASMANEX
 ASMANEX HFA

ATACAND
 ATACAND HCT
 ATIVAN
 ATOPADERM
 AUBAGIO †
 AVASTIN †
 AVENOVA
 AVSOLA †
 AZASITE
 AZELEX
 AZESCO †¹¹
 AZOR
 BALCOLTRA
 BANZEL
 BARACLUDE TABLET †
 BECONASE AQ
 BENEFIX †
 BENICAR
 BENICAR HCT
 BENSAL HP
benzonatate (NDCs* 69336012615, 69499032915 only)
 BEPREVE
 BERINERT †
 BETAMETHASONE ACETATE-
 BETAMETHASONE SODIUM PHOSPHATE
betamethasone dipropionate ointment 0.05%
 BETAPACE
 BETAPACE AF
 BETHKIS †
 BETIMOL
 BEVESPI AEROSPHERE
 BEYAZ
 BORTEZOMIB †
 BOTOX †
 BREEZE 2 STRIPS AND KITS †⁹
 BROMSITE
budesonide ext-rel tablet
Bupap
 BUPHENYL †
bupropion ext-rel tablet 450 mg
butalbital-acetaminophen capsule
butalbital-acetaminophen tablet 25-325 mg
butalbital-acetaminophen tablet 50-300 mg
 BUTALBITAL-ACETAMINOPHEN
 (NDC* 69499034230 only)
butalbital-acetaminophen-caffeine capsule
 BUTRANS

BYDUREON BCISE
 BYETTA
 BYSTOLIC
 CAFERGOT
calcipotriene cream
calcipotriene foam
 CALCIPOTRIENE FOAM
calcipotriene-betamethasone
calcitriol ointment
 CAMBIA
Capsinac
 CARAC
 CARAFATE
 CARBAGLU †
 CARBINOXAMINE TABLET 6 MG
 CARDIZEM
 CARDIZEM CD
 CARDIZEM LA
carisoprodol 250 mg
 CARNITOR
 CARNITOR SF
 CAYSTON †
 CELEBREX
chlordiazepoxide-clidinium (NDCs* 11534019701,
 42494040901, 51293069601, 51293069610,
 67877073101, 70700018501 only)
chlorzoxazone 250 mg
chlorzoxazone 375 mg
chlorzoxazone 500 mg (NDC* 73007001303 only)
chlorzoxazone 750 mg
 CHORIONIC GONADOTROPIN †
 CIALIS
 CICATRACE
 CILOXAN
 CIMZIA LYOPHILIZED POWDER †
 CINRYZE †
 CIPRO HC
 CIPRODEX
ciprofloxacin-fluocinolone
 CITRANATAL †¹¹
 CLIMARA (except CLIMARA PRO)
clindamycin gel (NDC* 68682046275 only)
clobetasol emollient foam
clobetasol spray
 CLOBEX SPRAY
clocortolone cream
 COLAZAL

colchicine capsule
COLCRYS
COMBIGAN
COMPLERA¹
CONCERTA
CONTOUR NEXT STRIPS AND KITS⁹
CONTOUR STRIPS AND KITS⁹
CONTRACE
CORDRAN CREAM
CORDRAN LOTION
CORDRAN OINTMENT
CORDRAN TAPE
COREG CR
CoreMino
COZAAR
CRESEMBA
CRESTOR
CUPRIMINE¹
cyclobenzaprine ext-rel capsule
cyclobenzaprine tablet 7.5 mg
CYMBALTA
CYSTADANE¹
CYTOMEL
DALIRESP
DARAPRIM
DAYTRANA
DELZICOL
DEPAKOTE
DEPAKOTE ER
DEPAKOTE SPRINKLE
DESFERAL¹
desonide gel
desoximetasone ointment 0.05%
DesRx
DETROL LA
dexchlorpheniramine
Dexifol¹⁰
DEXILANT
dexlansoprazole delayed-rel
DIACOMIT¹
diclofenac potassium capsule 25 mg
diclofenac potassium tablet 25 mg
diclofenac sodium solution 2%
Diclofex DC
Diclosaicin
DIFFERIN LOTION
difflorasonone cream
difflorasonone ointment
dihydroergotamine spray
DILANTIN
diltiazem ext-rel (generics for CARDIZEM LA only)
DIOVAN
DIOVAN HCT
Diphen Elixir
DORYX
DORYX MPC
doxepin cream
doxycycline hyclate delayed-rel tablet
doxycycline hyclate tablet 50 mg
doxycycline hyclate tablet 75 mg
doxycycline hyclate tablet 150 mg
doxycycline monohydrate capsule 75 mg
doxycycline monohydrate capsule 150 mg
doxycycline monohydrate delayed-rel capsule
DULERA
DUOBRII
DYANAVEL XR
DYMISTA
DYRENIUM
EDARBI
EDARBYCLOR
EDLUAR
E.E.S. GRANULES
EFFEXOR XR
ELELYSO¹
ELIDEL
ELMIRON
EluRyng

ENLITE CONTINUOUS
GLUCOSE MONITORING
SYSTEM
ENTERAGAM
ENTYVIO (For Crohn's Disease Only)¹
EPANED
EPICERAM
EPIVIR HBV¹
EPOGEN¹
ergotamine-caffeine
ERYPED
ESBRIET¹
estradiol vaginal tablet
ESTRING
ethinyl estradiol-etonogestrel
EVEKEO
EVERSENSE CONTINUOUS
GLUCOSE MONITORING SYSTEM
EXFORGE
EXFORGE HCT
EXJADE¹
EXTAVIA¹
FABIOR
FANAPT
FEIBA¹
FEMRING
fenofibrate capsule 30 mg
fenofibrate capsule 50 mg
fenofibrate capsule 90 mg
fenofibrate capsule 130 mg
fenofibrate tablet 40 mg
fenofibrate tablet 120 mg
FENOGLIDE TABLET 120 MG
fenoprofen
FENOPROFEN CAPSULE
FERIVA 21/7¹⁰
FERRIPROX¹
Fexmid
FINACEA GEL
FINTEPLA¹
FIORICET CAPSULE
FIRAZYR¹
FIRMAGON¹
FLAREX
FLORIVA¹⁰
FLORIVA PLUS¹⁰
FLOVENT DISKUS
FLOVENT HFA
flucytosine capsule 500 mg
fluocinonide cream 0.1%
fluorouracil cream 0.5%
fluoxetine tablet (generics for SARAFEM only)
fluoxetine tablet 60 mg
flurandrenolide cream
flurandrenolide lotion
flurandrenolide ointment
FML FORTE
FML LIQUIFILM
FML S.O.P.
FOCALIN XR
FOLLISTIM AQ¹
Folvite-D¹⁰
FORTAMET
FORTESTA
FOSRENOL
FOSTEUM
FOSTEUM PLUS
FREESTYLE LIBRE CONTINUOUS
GLUCOSE MONITORING SYSTEM
FREESTYLE STRIPS AND KITS⁹
FULPHILA¹
GEL-ONE¹
Genicin Vita-S¹⁰
GILENYA¹
GLASSIA¹
GLEEVEC¹
GLUCAGEN HYPOKIT
GLUCAGON EMERGENCY KIT

GLUMETZA
GLYCOPYRROLATE TABLET 1.5 MG
GOLYTELY
GRANIX¹
GUARDIAN CONNECT CONTINUOUS
GLUCOSE MONITORING SYSTEM
GUARDIAN REAL-TIME CONTINUOUS
GLUCOSE MONITORING SYSTEM
halcinonide cream
HALOG
HEPARIN SODIUM IN 5% DEXTROSE
HERCEPTIN¹
HERCEPTIN HYLECTA¹
HORIZANT
HUMALOG
HUMALOG MIX 50/50
HUMALOG MIX 75/25
HUMATROPE¹
HUMULIN 70/30⁵
HUMULIN N⁵
HUMULIN R⁵
HYALGAN¹
hydrocortisone butyrate lipophilic cream 0.1%
hydrocortisone butyrate lotion
HylaVite¹⁰
hyoscyamine sulfate ext-rel
HYSINGLA ER
HYZAAR
Iclofenac CP
ICLUSIG¹
icosapent ethyl
INCRUSE ELLIPTA
INDERAL LA
INDERAL XL
INDOCIN
indomethacin capsule 20 mg
Inflammacin
INFLECTRA¹
INNOPRAN XL
INTRAROSA
INTUNIV
INVELTYS
INVOKAMET
INVOKAMET XR
INVOKANA
isosorbide dinitrate 40 mg
ivermectin cream
IXINITY¹
JADENU¹
JALYN
JENTADUETO
JENTADUETO XR
JORNAY PM
JUXTAPID¹
JYNARQUE¹
KAMDOY
Kapzin DC
KAZANO
KEPPRA
KEPPRA XR
ketoconazole foam 2%
Ketodan
ketoprofen capsule 25 mg
ketoprofen ext-rel capsule
KINERET¹
KITABIS PAK¹
KOMBIGLYZE XR
KORLYM¹
KUVAN¹
KYPROLIS¹
LACRISERT
LACTULOSE PAK
LAMICTAL
LAMICTAL ODT
LAMICTAL XR
LANOXIN TABLET (125 MCG and 250 MCG only)
lansoprazole delayed-rel orally disintegrating tablet
lanthanum carbonate

LANTUS
LASTACAF
LATUDA
LAZANDA
LEMTRADA 1
LESCOL XL
LETAIRIS 1
LEUKINE 1
levorphanol
LEXAPRO
LEXIVA 1
LIALDA
LIBRAX
LILETTA 1
LIPITOR
LITHOSTAT
LIVALO
Lofena
LOKELMA
Lorzone
LOTEMAX
LOTEMAX SM
LOVAZA
luliconazole
LUMIGAN
LUNESTA
LUPRON DEPOT 1
LYRICA
MACRODANTIN
Matzim LA
MAVYRET 1
MAXALT
MAXALT-MLT
MAXIDEX
mefenamic acid (NDC* 69336012830 only)
MEKINIST 1
meloxicam capsule
MENEST
metaxalone 400 mg
metformin ext-rel
(generics for FORTAMET and GLUMETZA only)
methocarbamol 500 mg (NDC* 69036091010 only)
methocarbamol 750 mg
(NDCs* 69036093090, 70868090190 only)
MIACALCIN INJECTION
MICARDIS
MICARDIS HCT
Migergot
Millipred
MINASTRIN 24 FE
MINIVELLE
minocycline ext-rel
MIRVASO
Mondoxyne NL capsule 75 mg
MONOVISC 1
MOVANTI
MOVIPREP
MULTAQ
MultiPro 10
mupirocin cream
MYDAYIS
MYRBETRIQ
MYTESI
NAPRELAN
naproxen CR
naproxen suspension
naproxen-esomeprazole
NEO-SYNALAR
NESINA
NEULASTA 1
NEULASTA ONPRO 1
NEUPOGEN 1
NEVANAC
NEXIUM
NEXTERONE
niacin tablet 500 mg
Niacor
NICADAN 10

NICAPRIN 10
NICAZEL 10
NICAZEL FORTE 10
NICOMIDE 10
NILANDRON
nitrofurantoin (NDC* 16571074024 only)
NITYR 1
NORGESIC FORTE
NORITATE
NORPAC
NORTHERA 1
NORVASC
NOURIANZ
NOVAREL 1
NOVO NORDISK NEEDLES 7
NOXAFIL
NPLATE 1
NUCALA LYOPHILIZED POWDER 1
NUCYNTA
NUCYNTA ER
NuDiclo SoluPak
NuDiclo TabPak
NUEDEXTA
NUTROPIN AQ 1
NUVIGIL
OLUX-E
omeprazole-sodium bicarbonate
OMNARIS
OMNITROPE 1
ONFI
ONGLYZA
ORENCIA INTRAVENOUS 1
orphenadrine-aspirin-caffeine
Orphengesic Forte
ORTHO D 10
ORTHO DF 10
ORTHOVISC 1
OSENI
OSMOPREP
OSPHENA
OTREXUP 1
OWEN MUMFORD NEEDLES 7
oxiconazole (NDCs* 00168035830, 51672135902 only)
OXYCONTIN
oxymorphone ext-rel
OXYTROL
partoprazole delayed-rel suspension
paroxetine HCl ext-rel (NDC* 60505367503 only)
paroxetine mesylate capsule 7.5 mg
PAXIL
PAXIL CR
peg 3350-electrolytes (generics for MOVIPREP only)
PEGASYS 1
Pennaicain
PENNSAID
PENTASA
PERCOCET
PERRIGO NEEDLES 7
PEXEVA
PLAVIX
POLYTOZA
POLY-VI-FLOR 10
POLY-VI-FLOR WITH IRON 10
posaconazole delayed-rel tablet
PRADAXA
PRALUENT 1
PRED FORTE
PRED MILD
prednisolone solution 10 mg/5 mL
prednisolone solution 20 mg/5 mL
PREGNYL 1
PREMARIN
PREMARIN CREAM
PRENATAL PLUS 11
PREVACID
PREVIDENT
PRILOSEC
PRISTIQ

PROAIR HFA
PROAIR RESPICLICK
PROCYSBI 1
PROMETRIUM
PROTONIX
PROVENTIL HFA
PROVIGIL
PROZAC
QNASL
QTERN
quazepam
QUILLICHEW ER
QUILLIVANT XR
QVAR REDHALER 3
RAPAFLO
RAVICTI 1
RAYOS
RECEDO
REMODULIN 1
RENFLEXIS 1
REVELA
REVATIO 1
RHEUMATE 10
RHOPRESSA
RIABNI 1
RIMSO-50
RIOMET
RITUXAN 1
RIXUBIS 1
ROCKLATAN
ROZEREM
RUBRACA 1
RyClora
SABRIL 1
SAIZEN 1
SANDOSTATIN LAR 1
SCARSILK PAD
SEASONIQUE
SELZENTRY 1
SEROQUEL XR
SIGNIFOR LAR 1
SILENOR
SILIVEX
SILTREX
SIMPONI 1
SINGULAIR
SOMAVERT 1
SORILUX
SPRIX
STENDRA
STRIBILD 1
SUBOXONE
SUBSYS
sucralate suspension
sumatriptan-naproxen
SUPREP
Sure Result DSS Premium Pack
SUTENT 1
SYMJEPI
SYNERDERM
SYNVISC 1
SYNVISC-ONE 1
SYPRINE 1
TAFINLAR 1
TALIVA 10
Targadox
TARGRETIN 1
TASIGNA 1
tavorole
TAYTULLA
TAZORAC
TECFIDERA 1
TEGRETOL
TEGRETOL XR
TESTIM
testosterone gel 1%
(authorized generics for TESTIM and VOGELXO only)
THEO-24

THIOLA ¹
THIOLA EC ¹
TIMOPTIC OCUDOSE
TIROSINT
TOBI ¹
TOBI PODHALER ¹
TOBRADEX ST
topiramate ext-rel capsule (generics for QUDEXY XR only)
TOPROL-XL
Tovet
TOVIAZ
TRACLEER ¹
TRADJENTA
tramadol (NDC 52817019610 only)*
tramadol ext-rel capsule
TRANSDERM SCOP
TRAVATAN Z
TRELSTAR MIXJECT ¹
TREMIMET
triamcinolone aerosol 0.2%
triamcinolone ointment 0.05%
Trianex
TRICOR
TRILEPTAL
TRI-VI-FLOR ¹⁰
TRIVIDIA INSULIN SYRINGES ⁷
TronVite ¹⁰
TRUVADA ¹
TRUXIMA ¹
TUDORZA
TYVASO DPI ¹
UDENYCA ¹

ULORIC
ULTIMED INSULIN SYRINGES ⁷
ULTIMED NEEDLES ⁷
ULTRAVATE
UROXATRAL
VALCYTE
VALTRES
Vanoxide-HC
VASCULERA
VECTICAL
VELTIN
VEMLIDY ¹
venlafaxine ext-rel tablet (except 225 mg)
VENTOLIN HFA
VEREGEN
VIAGRA
VIEKIRA PAK ¹
VIIBRYD
VIMPAT
VIRACEPT ¹
VISCO-3 ¹
VITAFOL-ONE ¹¹
Vitasure ¹⁰
VIVELLE-DOT
VOGELXO
VOTRIENT ¹
VYZULTA
XALKORI ¹
XANAX
XANAX XR
XENAZINE ¹
XENICAL

XOLEGEL
XOPENEX HFA
Xvite ¹⁰
XYZBAC ¹⁰
YASMIN
YAZ
Yuvaferm
ZALVIT ¹¹
ZARXIO ¹
ZEGERID
ZELAC
ZEPATIER ¹
ZERVIAE
ZESTORETIC
ZETIA
ZETONNA
ZIANA
Ziclocin Pak
Ziclopro
zileuton ext-rel
ZIRGAN
ZOLADEX ¹
ZOLOFT
zolpidem sublingual
ZOLPIMIST
ZONEGRAN
ZONTIVITY
ZORVOLEX
ZYLET
ZYTIGA ¹

This list represents brand products in CAPS, branded generics in upper- and lowercase *Italics*, and generic products in lowercase *italics*. This is not an all-inclusive list of available covered options. Log in to [Caremark.com](https://www.caremark.com) to check coverage and copay information for a specific drug. Discuss this information with your doctor or health care provider. This information is not a substitute for medical advice or treatment. Talk to your doctor or health care provider about this information and any health-related questions you have. CVS Caremark assumes no liability whatsoever for the information provided or for any diagnosis or treatment made as a result of this information. This list is subject to change. There may be additional plan restrictions. Please consult your plan for further information.

Subject to applicable laws and regulations.

† This list indicates the common uses for which the drug is prescribed. Some drugs are prescribed for more than one condition.

* 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*.

¹ An exception process may exist for specific clinical or regulatory circumstances that may require coverage of a non-covered medication. If your doctor believes you have a specific clinical need for a non-covered product, they should fax an exception request to: 1-888-487-9257.

² For use in patients previously treated with an HCV regimen containing an NS5A inhibitor (for genotypes 1-6) or sofosbuvir without an NS5A inhibitor (for genotypes 1a or 3).

³ QVAR REDHALER covered for members 5 years of age and under.

⁴ If approved for coverage and prescribed for primary prevention of cardiovascular disease, may be covered without cost sharing through an exceptions process.

⁵ Rebranded or private label formulations are not covered (i.e., RELION).

⁶ Long Acting Insulins - First Generation.

⁷ BD ULTRAFINE syringes and needles are the only preferred options.

⁸ An ACCU-CHEK or ONETOUCH blood glucose meter may be provided at no charge by the manufacturer to those individuals currently using a meter other than ACCU-CHEK or ONETOUCH. For more information on how to obtain a blood glucose meter, call: 1-877-418-4746.

⁹ ACCU-CHEK or ONETOUCH brand test strips are the only preferred options.

¹⁰ Generic multivitamins (except *Activite*, *Dexifol*, *Folvite-D*, *Genicin Vita-S*, *HylaVite*, *Multipro*, *TronVite*, *Vitasure*, *Xvite*) are the only preferred options.

¹¹ Generic prenatal vitamins are the only preferred options.

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