

# GEHA Drug List

The **GEHA Drug List** is a guide within select therapeutic categories for clients, plan members and health care providers. **Generics should be considered the first line of prescribing.** If there is no generic available, there may be more than one brand-name medicine to treat a condition. These preferred brand-name medicines are listed to help identify products that are clinically appropriate and cost-effective. Generics listed in therapeutic categories are for representational purposes only. This is not an all-inclusive list. This list represents brand products in CAPS, branded generics in upper- and lowercase *Italics*, and generic products in lowercase *italics*.

## PLAN MEMBER

Your benefit plan provides you with a prescription benefit program administered by CVS Caremark®. Ask your physician to consider prescribing, when medically appropriate, a preferred medicine from this list. Take this list along when you or a covered family member sees a physician.

### Please note:

- Your specific prescription benefit plan design may not cover certain products or categories, regardless of their appearance in this document. Products recently approved by the U.S. Food and Drug Administration (FDA) may not be covered upon release to the market.
- For specific information regarding your prescription benefit coverage and copay<sup>1</sup> information, please visit [Caremark.com](http://Caremark.com) or contact a CVS Caremark Customer Care representative.
- CVS Caremark may contact your physician after receiving your prescription to request consideration of a drug list product or generic equivalent. This may result in your physician prescribing, when medically appropriate, a different brand-name product or generic equivalent in place of your original prescription.
- In most instances, a brand-name drug for which a generic product becomes available will be designated as a non-preferred option upon release of the generic product to the market.

## HEALTH CARE PROVIDER

Your patient is covered under a prescription benefit plan administered by CVS Caremark. As a way to help manage health care costs, authorize generic substitution whenever possible. If you believe a brand-name product is necessary, consider prescribing a brand name on this list.

### Please note:

- Generics should be considered the first line of prescribing.
- This drug list represents a summary of prescription coverage. It is not all-inclusive and does not guarantee coverage. The member's specific prescription benefit plan design may not cover certain products or categories, regardless of their appearance in this document. Products recently approved by the FDA may not be covered upon release to the market.
- The member's prescription benefit plan may have a different copay<sup>1</sup> for specific products on the list.
- Unless specifically indicated, drug list products will include all dosage forms.
- Log in to [Caremark.com](http://Caremark.com) to check coverage and copay<sup>1</sup> information for a specific medicine.

### ANALGESICS

#### § NSAIDs

*diclofenac sodium*  
*meloxicam*  
*naproxen*

#### § NSAIDs, COMBINATIONS

*diclofenac sodium-misoprostol*

#### § NSAIDs, TOPICAL

*diclofenac sodium gel 1%*  
(except NDC<sup>®</sup> 69499031866)  
*diclofenac sodium solution*

#### § COX-2 INHIBITORS

*celecoxib*

#### § GOUT

*allopurinol*  
*colchicine tablet*  
*probenecid*  
COLCRYS  
ULORIC

### § OPIOID ANALGESICS

*codeine-acetaminophen*  
*fentanyl transdermal*  
*fentanyl transmucosal*  
*lozenge*  
*hydrocodone-acetaminophen*  
*hydromorphone*  
*hydromorphone ext-rel*  
*methadone*  
*morphine*  
*morphine ext-rel*  
*morphine suppository*  
*oxycodone*  
*oxycodone-acetaminophen*  
*tramadol*  
*tramadol ext-rel*  
ABSTRAL  
BELBUCA  
BUTRANS  
EMBEDA  
HYSINGLA ER  
NUCYNTA  
NUCYNTA ER  
OXYCONTIN

### SUBSYS

### ANTI-INFECTIVES

#### ANTIBACTERIALS

#### § CEPHALOSPORINS

*cefdinir*  
*cefprozil*  
*cefuroxime axetil*  
*cephalexin*  
SUPRAX

#### § ERYTHROMYCINS / MACROLIDES

*azithromycin*  
*clarithromycin*  
*clarithromycin ext-rel*  
*erythromycins*  
DIFICID

#### § FLUOROQUINOLONES

*ciprofloxacin*  
*ciprofloxacin ext-rel*  
*levofloxacin*  
*moxifloxacin*

### § PENICILLINS

*amoxicillin*  
*amoxicillin-clavulanate*  
*dicloxacillin*  
*penicillin VK*

### § TETRACYCLINES

*doxycycline hyclate*  
*minocycline*  
*tetracycline*

### § ANTIFUNGALS

*fluconazole*  
*itraconazole*  
*terbinafine tablet*

### ANTIVIRALS

#### § CYTOMEGALOVIRUS AGENTS

*valganciclovir*

#### § HERPES AGENTS

*acyclovir*  
*valacyclovir*

### § INFLUENZA AGENTS

*oseltamivir*  
RELENZA

### § MISCELLANEOUS

*clindamycin*  
*ivermectin*  
*linezolid*  
*metronidazole*  
*nitrofurantoin*  
*sulfamethoxazole-trimethoprim*  
EMVERM  
XIFAXAN 550 MG

### ANTINEOPLASTIC AGENTS

#### HORMONAL ANTINEOPLASTIC AGENTS

§ ANTIANDROGENS  
*bicalutamide*

§ MISCELLANEOUS  
VISTOGARD

**CARDIOVASCULAR****§ ACE INHIBITORS**

*fosinopril*  
*lisinopril*  
*quinapril*  
*ramipril*

**§ ACE INHIBITOR / DIURETIC COMBINATIONS**

*fosinopril-hydrochlorothiazide*  
*lisinopril-hydrochlorothiazide*  
*quinapril-hydrochlorothiazide*

**§ ANGIOTENSIN II RECEPTOR ANTAGONISTS / DIURETIC COMBINATIONS**

*candesartan / candesartan-hydrochlorothiazide*  
*eprosartan*  
*irbesartan / irbesartan-hydrochlorothiazide*  
*losartan / losartan-hydrochlorothiazide*  
*olmesartan / olmesartan-hydrochlorothiazide*  
*telmisartan / telmisartan-hydrochlorothiazide*  
*valsartan / valsartan-hydrochlorothiazide*

**§ ANGIOTENSIN II RECEPTOR ANTAGONIST / CALCIUM CHANNEL BLOCKER COMBINATIONS**

*amlodipine-olmesartan*  
*amlodipine-telmisartan*  
*amlodipine-valsartan*

**§ ANGIOTENSIN II RECEPTOR ANTAGONIST / CALCIUM CHANNEL BLOCKER / DIURETIC COMBINATIONS**

*amlodipine-valsartan-hydrochlorothiazide*  
*olmesartan-amlodipine-hydrochlorothiazide*

**§ ANTIARRHYTHMICS**

*sotalol*  
MULTAQ

**ANTILIPEMICS****§ BILE ACID RESINS**

*cholestyramine*  
*colesevelam*

**§ CHOLESTEROL ABSORPTION INHIBITORS**

*ezetimibe*

**§ FIBRATES**

*fenofibrate*  
*fenofibric acid*

**§ HMG-CoA REDUCTASE INHIBITORS / COMBINATIONS**

*atorvastatin*  
*ezetimibe-simvastatin*  
*fluvastatin*  
*lovastatin*  
*pravastatin*  
*rosuvastatin*  
*simvastatin*

**§ NIACINS**

*niacin ext-rel*

**§ OMEGA-3 FATTY ACIDS**

*omega-3 acid ethyl esters*  
VASCEPA

**§ BETA-BLOCKERS**

*atenolol*  
*carvedilol*  
*carvedilol phosphate ext-rel*  
*metoprolol succinate ext-rel*  
*metoprolol tartrate*  
*nadolol*  
*pindolol*  
*propranolol*  
*propranolol ext-rel*  
BYSTOLIC

**§ CALCIUM CHANNEL BLOCKERS**

*amlodipine*  
*diltiazem ext-rel*<sup>2</sup>  
*nifedipine ext-rel*  
*verapamil ext-rel*

**§ CALCIUM CHANNEL BLOCKER / ANTILIPEMIC COMBINATIONS**

*amlodipine-atorvastatin*

**§ DIGITALIS GLYCOSIDES**

*digoxin*

**DIRECT RENIN INHIBITORS / DIURETIC COMBINATIONS**

TEKTURNA /  
TEKTURNA HCT

**§ DIURETICS**

*amiloride*  
*furosemide*  
*hydrochlorothiazide*  
*metolazone*  
*spironolactone-hydrochlorothiazide*  
*torseamide*  
*triamterene-hydrochlorothiazide*

**HEART FAILURE**

BIDIL  
CORLANOR  
ENTRESTO

**§ NITRATES**

*nitroglycerin lingual spray*  
*nitroglycerin sublingual*

**§ MISCELLANEOUS RANEXA****CENTRAL NERVOUS SYSTEM****§ ANTICONVULSANTS**

*carbamazepine*  
*carbamazepine ext-rel*  
*diazepam rectal gel*  
*divalproex sodium*  
*divalproex sodium ext-rel*  
*ethosuximide*  
*gabapentin*  
*lamotrigine*  
*lamotrigine ext-rel*  
*levetiracetam*  
*levetiracetam ext-rel*  
*oxcarbazepine*  
*phenobarbital*  
*phenytoin*  
*phenytoin sodium extended*  
*primidone*  
*tiagabine*  
*topiramate*  
*valproic acid*  
*zonisamide*  
FYCOMPA  
OXTELLAR XR  
TROKENDI XR  
VIMPAT

**§ ANTIDEMENTIA**

*donepezil*  
*galantamine*  
*galantamine ext-rel*  
*memantine*  
*rivastigmine*  
*rivastigmine transdermal*  
NAMZARIC

**ANTIDEPRESSANTS****§ SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIs)**

*citalopram*  
*escitalopram*  
*fluoxetine*  
*paroxetine HCl*  
*paroxetine HCl ext-rel*  
*sertraline*  
TRINTELLIX  
VIIBRYD

**§ SEROTONIN NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIs)**

*desvenlafaxine ext-rel*  
*duloxetine*  
*venlafaxine*  
*venlafaxine ext-rel capsule*

**§ MISCELLANEOUS AGENTS**

*bupropion*  
*bupropion ext-rel*  
*mirtazapine*  
*trazodone*

**§ ANTIPARKINSONIAN AGENTS**

*amantadine*  
*carbidopa-levodopa*  
*carbidopa-levodopa ext-rel*  
*carbidopa-levodopa-entacapone*  
*entacapone*  
*pramipexole*  
*pramipexole ext-rel*  
*rasagiline*  
*ropinirole*  
*ropinirole ext-rel*  
*selegiline*  
NEUPRO

**ANTIPSYCHOTICS****§ ATYPICALS**

*aripiprazole*  
*clozapine*  
*olanzapine*  
*quetiapine*  
*quetiapine ext-rel*  
*risperidone*  
*ziprasidone*  
ABILIFY MAINTENA  
ARISTADA  
LATUDA  
VRAYLAR

**§ ATTENTION DEFICIT HYPERACTIVITY DISORDER**

*amphetamine-dextroamphetamine mixed salts*  
*amphetamine-dextroamphetamine mixed salts ext-rel*  
*atomoxetine*  
*guanfacine ext-rel*  
*methylphenidate*  
*methylphenidate ext-rel*  
MYDAYIS  
VYVANSE

**FIBROMYALGIA**

LYRICA  
SAVELLA

**HYPNOTICS****§ NONBENZODIAZEPINES**

*eszopiclone*  
*zolpidem*  
*zolpidem ext-rel*  
*zolpidem sublingual*  
BELSOMRA

**TRICYCLICS**

SILENOR

**MIGRAINE****§ ERGOTAMINE DERIVATIVES**

*ergotamine-caffeine*

**MONOCLONAL ANTIBODIES**

AJOVY  
EMGALITY

**§ SELECTIVE SEROTONIN AGONISTS**

*eletriptan*  
*naratriptan*  
*rizatriptan*  
*sumatriptan*  
*zolmitriptan*  
ONZETRA XSAIL  
ZEMBRACE SYMTOUCH  
ZOMIG NASAL SPRAY

**SELECTIVE SEROTONIN AGONIST / NONSTEROIDAL ANTI-INFLAMMATORY DRUG (NSAID) COMBINATIONS**

TREXIMET

**§ MUSCULOSKELETAL THERAPY AGENTS**

*cyclobenzaprine*

**§ NARCOLEPSY**

*armodafinil*

**POSTHERPETIC NEURALGIA (PHN)**

GRALISE

**PSYCHOTHERAPEUTIC - MISCELLANEOUS****§ OPIOID ANTAGONISTS**

*naloxone injection*  
NARCAN NASAL SPRAY

**§ PARTIAL OPIOID AGONIST / OPIOID ANTAGONIST COMBINATIONS**

*buprenorphine-naloxone sublingual tablet*  
SUBOXONE FILM  
ZUBSOLV

**PSEUDOBULBAR AFFECT AGENTS**

NUDEXTA

**§ VASOMOTOR SYMPTOM AGENTS**

*paroxetine mesylate*

**ENDOCRINE AND METABOLIC****§ ANDROGENS**

*testosterone gel*  
*testosterone solution*  
ANDRODERM  
ANDROGEL 1.62%

**ANTIDIABETICS**

AMYLIN ANALOGS  
SYMLINPEN

**§ BIGUANIDES**

*metformin*  
*metformin ext-rel*

**§ BIGUANIDE /  
SULFONYLUREA  
COMBINATIONS**

*glipizide-metformin*

**DIPEPTIDYL PEPTIDASE-4  
(DPP-4) INHIBITORS**

JANUVIA

**DIPEPTIDYL PEPTIDASE-4  
(DPP-4) INHIBITOR /  
BIGUANIDE COMBINATIONS**

JANUMET  
JANUMET XR

**INCRETIN MIMETIC AGENTS**

OZEMPIC  
TRULICITY  
VICTOZA

**INCRETIN MIMETIC AGENT /  
INSULIN COMBINATIONS**

SOLIQUA

**INSULINS**

BASAGLAR  
FIASP  
HUMULIN R U-500  
LEVEMIR  
NOVOLIN 70/30  
NOVOLIN N  
NOVOLIN R  
NOVOLOG  
NOVOLOG MIX 70/30  
TRESIBA

**§ INSULIN SENSITIZERS**

*pioglitazone*

**§ INSULIN SENSITIZER /  
BIGUANIDE COMBINATIONS**

*pioglitazone-metformin*

**§ INSULIN SENSITIZER /  
SULFONYLUREA  
COMBINATIONS**

*pioglitazone-glimepiride*

**§ MEGLITINIDES**

*nateglinide  
repaglinide*

**SODIUM-GLUCOSE  
CO-TRANSPORTER 2  
(SGLT2) INHIBITORS**

FARXIGA  
JARDIANCE

**SODIUM-GLUCOSE  
CO-TRANSPORTER 2  
(SGLT2) INHIBITOR /  
BIGUANIDE COMBINATIONS**

SYNJARDY  
SYNJARDY XR  
XIGDUO XR

**SODIUM-GLUCOSE  
CO-TRANSPORTER 2  
(SGLT2) INHIBITOR /  
DIPEPTIDYL PEPTIDASE-4  
(DPP-4) INHIBITOR  
COMBINATIONS**

GLYXAMBI  
QTERN

**§ SULFONYLUREAS**

*glimepiride  
glipizide  
glipizide ext-rel*

**SUPPLIES**

ACCU-CHEK AVIVA PLUS  
STRIPS AND KITS<sup>3</sup>  
ACCU-CHEK COMPACT  
PLUS STRIPS AND KITS<sup>3</sup>  
ACCU-CHEK GUIDE  
STRIPS AND KITS<sup>3</sup>  
ACCU-CHEK SMARTVIEW  
STRIPS AND KITS<sup>3</sup>  
BD ULTRAFINE INSULIN  
SYRINGES AND  
NEEDLES

**CALCIUM REGULATORS**

**§ BISPHOSPHONATES**

*alendronate  
ibandronate  
risedronate*

**§ CALCITONINS**

*calcitonin-salmon*

**§ CARNITINE DEFICIENCY  
AGENTS**

*levocarnitine*

**CONTRACEPTIVES**

**§ MONOPHASIC**

*ethinyl estradiol-  
drospirenone  
ethinyl estradiol-  
drospirenone-levomefolate  
ethinyl estradiol-  
norethindrone acetate  
ethinyl estradiol-  
norethindrone acetate-iron  
SAFYRAL*

**§ BIPHASIC**

LO LOESTRIN FE

**§ TRIPHASIC**

*ethinyl estradiol-norgestimate*

**FOUR PHASE**

NATAZIA

**§ EXTENDED CYCLE**

*ethinyl estradiol-  
levonorgestrel*

**§ TRANSDERMAL**

*ethinyl estradiol-  
norelgestromin*

**VAGINAL  
NUVARING**

**ENDOMETRIOSIS**

ORILISSA

**ESTROGENS**

**§ ORAL**

*estradiol  
PREMARIN*

**§ TRANSDERMAL**

*estradiol  
DIVIGEL  
EVAMIST  
MINIVELLE*

**§ VAGINAL**

*estradiol  
ESTRING  
PREMARIN CREAM*

**ESTROGEN / PROGESTINS**

**§ ORAL**

*estradiol-norethindrone  
PREMPHASE  
PREMPRO*

**TRANSDERMAL**

CLIMARA PRO  
COMBIPATCH

**ESTROGEN / SELECTIVE  
ESTROGEN RECEPTOR  
MODULATOR  
COMBINATIONS**

DUAVEE

**§ GLUCOCORTICOIDS**

*dexamethasone  
fludrocortisone  
hydrocortisone  
methylprednisolone  
prednisolone solution  
prednisone*

**GLUCOSE ELEVATING  
AGENTS**

GLUCAGEN HYPOKIT  
GLUCAGON EMERGENCY  
KIT

**§ PHOSPHATE BINDER  
AGENTS**

*calcium acetate  
lanthanum carbonate  
sevelamer carbonate  
PHOSLYRA  
VELPHORO*

**POTASSIUM-REMOVING  
AGENTS**

LOKELMA  
VELTASSA

**PROGESTINS**

**§ ORAL**

*medroxyprogesterone  
megestrol acetate*

*progesterone, micronized*

**VAGINAL**

CRINONE

**§ SELECTIVE ESTROGEN  
RECEPTOR MODULATORS**

*raloxifene  
OSPHENA*

**§ THYROID SUPPLEMENTS**

*levothyroxine  
liothyronine  
SYNTHROID*

**GASTROINTESTINAL**

**§ ANTIEMETICS**

*dronabinol  
granisetron  
meclizine  
metoclopramide  
ondansetron  
prochlorperazine  
promethazine  
trimethobenzamide  
DICLEGIS  
SANCUSO  
VARUBI*

**§ H<sub>2</sub> RECEPTOR  
ANTAGONISTS**

*ranitidine*

**INFLAMMATORY BOWEL  
DISEASE**

**§ ORAL AGENTS**

*balsalazide  
budesonide capsule  
budesonide ext-rel  
sulfasalazine  
sulfasalazine delayed-rel  
APRISO  
LIALDA  
PENTASA*

**§ RECTAL AGENTS**

*hydrocortisone enema  
mesalamine rectal  
suspension  
CANASA  
CORTIFOAM*

**§ IRRITABLE BOWEL  
SYNDROME**

*alosetron  
AMITIZA  
LINZESS  
VIBERZI*

**§ LAXATIVES**

*lactulose  
peg 3350-electrolytes  
SUPREP*

**OPIOID-INDUCED  
CONSTIPATION**

MOVANTIK

**PANCREATIC ENZYMES**

CREON  
VIOKACE  
ZENPEP

**§ PROTON PUMP  
INHIBITORS**

*esomeprazole  
lansoprazole  
omeprazole  
pantoprazole  
DEXILANT*

**§ STEROIDS, RECTAL**

PROCTOFOAM-HC

**§ ULCER THERAPY  
COMBINATIONS**

PYLERA

**GENITOURINARY**

**§ BENIGN PROSTATIC  
HYPERPLASIA**

*alfuzosin ext-rel  
doxazosin  
dutasteride  
dutasteride-tamsulosin  
finasteride  
tamsulosin  
terazosin  
RAPAFLO*

**§ URINARY  
ANTISPASMODICS**

*darifenacin ext-rel  
oxybutynin  
oxybutynin ext-rel  
tolterodine  
tolterodine ext-rel  
trospium  
trospium ext-rel  
MYRBETRIQ  
TOVIAZ  
VESICARE*

**HEMATOLOGIC**

**§ ANTICOAGULANTS**

*warfarin  
ELIQUIS  
XARELTO*

**§ PLATELET AGGREGATION  
INHIBITORS**

*clopidogrel  
dipyridamole ext-rel-aspirin  
prasugrel  
BRILINTA*

**NUTRITIONAL /  
SUPPLEMENTS**

**§ ELECTROLYTES**

*potassium chloride liquid*

**VITAMINS AND MINERALS**

**§ PRENATAL VITAMINS**

*prenatal vitamins  
CITRANATAL*

## RESPIRATORY

### § ANAPHYLAXIS TREATMENT AGENTS

*epinephrine auto-injector*  
EPIPEN  
EPIPEN JR

### § ANTICHOLINERGICS

*ipratropium inhalation  
solution*  
INCRUSE ELLIPTA  
SPIRIVA

### ANTICHOLINERGIC / BETA AGONIST COMBINATIONS

#### § SHORT ACTING

*ipratropium-albuterol  
inhalation solution*  
COMBIVENT RESPIMAT

#### LONG ACTING

ANORO ELLIPTA  
BEVESPI AEROSPHERE  
STIOLTO RESPIMAT

### ANTICHOLINERGIC / BETA AGONIST / STEROID INHALANT COMBINATIONS

TRELEGY ELLIPTA

### BETA AGONISTS, INHALANTS

#### § SHORT ACTING

*albuterol inhalation solution*  
*levalbuterol tartrate CFC-free  
aerosol*  
PROAIR HFA  
PROAIR RESPICLICK

#### LONG ACTING

### Hand-held Active Inhalation

SEREVENT  
STRIVERDI RESPIMAT

### Nebulized Passive Inhalation

PERFORMOMIST

### § LEUKOTRIENE MODULATORS

*montelukast*  
*zafirlukast*  
*zileuton ext-rel*

### § NASAL ANTIHISTAMINES

*azelastine*  
*olopatadine*

### § NASAL STEROIDS / COMBINATIONS

*flunisolide*  
*fluticasone*  
*mometasone*  
*triamcinolone*  
DYMISTA

### PHOSPHODIESTERASE-4 INHIBITORS

DALIRESP

### STEROID / BETA AGONIST COMBINATIONS

ADVAIR  
BREO ELLIPTA  
SYMBICORT

### § STEROID INHALANTS

*budesonide inhalation  
suspension*  
ARNUITY ELLIPTA  
ASMANEX  
FLOVENT DISKUS  
FLOVENT HFA  
PULMICORT FLEXHALER  
QVAR  
QVAR REDHALER

## TOPICAL

### DERMATOLOGY

#### ACNE

#### § Topical

*adapalene*  
*benzoyl peroxide*  
*clindamycin solution*  
*clindamycin-benzoyl  
peroxide*  
*erythromycin solution*  
*erythromycin-benzoyl  
peroxide*  
*tretinoin*  
DIFFERIN  
EPIDUO  
RETIN-A MICRO  
TAZORAC

### § ACTINIC KERATOSIS

*fluorouracil cream 5%*  
*fluorouracil solution*  
*imiquimod*  
PICATO  
TOLAK  
ZYCLARA

### § ANTIFUNGALS

*ciclopirox*  
*clotrimazole*  
*econazole*  
*ketoconazole*  
*luliconazole*  
*nystatin*  
JUBLIA  
NAFTIN

### § ANTIPSORIATICS

*acitretin*  
*calcipotriene*  
*methoxsalen*

### § ATOPIC DERMATITIS

*tacrolimus*  
ELIDEL  
EUCRISA

### CORTICOSTEROIDS

#### § Low Potency

*dexamethasone*  
*hydrocortisone*

#### § Medium Potency

*clocortolone*  
*hydrocortisone butyrate*  
*mometasone*  
*triamcinolone*

#### § High Potency

*desoximetasone*  
*fluocinonide*

#### § Very High Potency

*clobetasol cream, foam, gel,  
lotion, ointment, shampoo*

### § ROSACEA

*metronidazole*  
FINACEA  
ORACEA  
SOOLANTRA

### MOUTH / THROAT / DENTAL AGENTS PROTECTANTS

EPISIL

### OPHTHALMIC

#### § ANTIALLERGICS

*azelastine*  
*cromolyn sodium*  
*olopatadine*  
LASTACAPT  
PAZEO

#### § ANTI-INFECTIVES

*cefprozil*  
*erythromycin*  
*gentamicin*  
*levofloxacin*  
*moxifloxacin*  
*ofloxacin*  
*sulfacetamide*  
*tobramycin*  
BESIVANCE  
CILOXAN OINTMENT  
MOXEZA

#### § ANTI-INFECTIVE / ANTI-INFLAMMATORY COMBINATIONS

*neomycin-polymyxin B-  
bacitracin-hydrocortisone*  
*neomycin-polymyxin B-  
dexamethasone*  
*tobramycin-dexamethasone*  
TOBRADEX OINTMENT  
TOBRADEX ST  
ZYLET

### ANTI-INFLAMMATORIES

#### § Nonsteroidal

*bromfenac*  
*diclofenac*  
*ketorolac*  
ACUVAIL  
ILEVRO  
NEVANAC

#### § Steroidal

*dexamethasone*  
*prednisolone acetate 1%*  
DUREZOL  
FLAREX  
FML FORTE

FML S.O.P.  
MAXIDEX  
PRED MILD

### BETA-BLOCKERS

#### § Nonselective

*timolol maleate solution*  
BETIMOL

#### Selective

BETOPTIC S

### § CARBONIC ANHYDRASE INHIBITORS

*dorzolamide*  
AZOPT

### § CARBONIC ANHYDRASE INHIBITOR / BETA- BLOCKER COMBINATIONS

*dorzolamide-timolol*

### CARBONIC ANHYDRASE INHIBITOR /

### SYMPATHOMIMETIC COMBINATIONS

SIMBRINZA

### DRY EYE DISEASE

RESTASIS  
XIIDRA

### § PROSTAGLANDINS

*latanoprost*  
LUMIGAN  
TRAVATAN Z

### RHO KINASE INHIBITORS

RHOPRESSA

### § SYMPATHOMIMETICS

*brimonidine*  
ALPHAGAN P

### SYMPATHOMIMETIC / BETA- BLOCKER COMBINATIONS

COMBIGAN

### OTIC

### § ANTI-INFECTIVE / ANTI-INFLAMMATORY COMBINATIONS

CIPRODEX

## QUICK REFERENCE DRUG LIST

### A

ABILIFY MAINTENA  
ABSTRAL  
ACCU-CHEK AVIVA PLUS  
STRIPS AND KITS<sup>3</sup>  
ACCU-CHEK COMPACT  
PLUS STRIPS AND KITS<sup>3</sup>  
ACCU-CHEK GUIDE  
STRIPS AND KITS<sup>3</sup>  
ACCU-CHEK SMARTVIEW  
STRIPS AND KITS<sup>3</sup>

*acitretin*  
ACUVAIL  
*acyclovir*  
*adapalene*  
ADVAIR  
AJOVY  
*albuterol inhalation solution*  
*alendronate*  
*alfuzosin ext-rel*  
*allopurinol*  
*alosetron*

ALPHAGAN P  
*amantadine*  
*amiloride*  
AMITIZA  
*amlodipine*  
*amlodipine-atorvastatin*  
*amlodipine-olmesartan*  
*amlodipine-telmisartan*  
*amlodipine-valsartan*  
*amlodipine-valsartan-  
hydrochlorothiazide*

*amoxicillin*  
*amoxicillin-clavulanate*  
*amphetamine-  
dextroamphetamine  
mixed salts*  
*amphetamine-  
dextroamphetamine  
mixed salts ext-rel*  
ANDRODERM  
ANDROGEL 1.62%  
ANORO ELLIPTA

APRISO  
*aripiprazole*  
ARISTADA  
*armodafinil*  
ARNUITY ELLIPTA  
ASMANEX  
*atenolol*  
*atomoxetine*  
*atorvastatin*  
*azelastine*  
*azithromycin*



neomycin-polymyxin B-dexamethasone  
 NEUPRO  
 NEVANAC  
 niacin ext-rel  
 nifedipine ext-rel  
 nitrofurantoin  
 nitroglycerin lingual spray  
 nitroglycerin sublingual  
 NOVOLIN 70/30  
 NOVOLIN N  
 NOVOLIN R  
 NOVOLOG  
 NOVOLOG MIX 70/30  
 NUCYNTA  
 NUCYNTA ER  
 NUEDEXTA  
 NUVARING  
 nystatin

**O**

ofloxacin  
 olanzapine  
 olmesartan  
 olmesartan-amlodipine-hydrochlorothiazide  
 olmesartan-hydrochlorothiazide  
 olopatadine  
 omega-3 acid ethyl esters  
 omeprazole  
 ondansetron  
 ONZETRA XSAIL  
 ORACEA  
 ORLISSA  
 oseltamivir  
 OSPHENA  
 oxcarbazepine  
 OXTELLAR XR  
 oxybutynin  
 oxybutynin ext-rel  
 oxycodone  
 oxycodone-acetaminophen  
 OXYCONTIN  
 OZEMPIC

**P**

pantoprazole  
 paroxetine HCl  
 paroxetine HCl ext-rel  
 paroxetine mesylate

PAZEO  
 peg 3350-electrolytes  
 penicillin VK  
 PENTASA  
 PERFORMIST  
 phenobarbital  
 phenytoin  
 phenytoin sodium extended  
 PHOSLYRA  
 PICATO  
 pindolol  
 pioglitazone  
 pioglitazone-glimepiride  
 pioglitazone-metformin  
 potassium chloride liquid  
 pramipexole  
 pramipexole ext-rel  
 prasugrel  
 pravastatin  
 PRED MILD  
 prednisolone acetate 1%  
 prednisolone solution  
 prednisone  
 PREMARIN  
 PREMARIN CREAM  
 PREMPHASE  
 PREMPRO  
 prenatal vitamins  
 primidone  
 PROAIR HFA  
 PROAIR RESPICLICK  
 probenecid  
 prochlorperazine  
 PROCTOFOAM-HC  
 progesterone, micronized  
 promethazine  
 propranolol  
 propranolol ext-rel  
 PULMICORT FLEXHALER  
 PYLERA

**Q**

QTERN  
 quetiapine  
 quetiapine ext-rel  
 quinapril  
 quinapril-hydrochlorothiazide  
 QVAR  
 QVAR REDIHALER

**R**

raloxifene  
 ramipril  
 RANEXA  
 ranitidine  
 RAPAFLO  
 rasagiline  
 RELENZA  
 repaglinide  
 RESTASIS  
 RETIN-A MICRO  
 RHOPRESSA  
 risedronate  
 risperidone  
 rivastigmine  
 rivastigmine transdermal  
 rizatriptan  
 ropinirole  
 ropinirole ext-rel  
 rosuvastatin

**S**

SAFYRAL  
 SANCUSO  
 SAVELLA  
 selegiline  
 SEREVENT  
 sertraline  
 sevelamer carbonate  
 SILENOR  
 SIMBRINZA  
 simvastatin  
 SOLIQUA  
 SOOLANTRA  
 sotalol  
 SPIRIVA  
 spironolactone-hydrochlorothiazide  
 STIOLTO RESPIMAT  
 STRIVERDI RESPIMAT  
 SUBOXONE FILM  
 SUBSYS  
 sulfacetamide  
 sulfamethoxazole-trimethoprim  
 sulfasalazine  
 sulfasalazine delayed-rel  
 sumatriptan  
 SUPRAX  
 SUPREP  
 SYMBICORT

SYMLINPEN  
 SYNJARDY  
 SYNJARDY XR  
 SYNTHROID

**T**

tacrolimus  
 tamsulosin  
 TAZORAC  
 TEKTRUNA  
 TEKTRUNA HCT  
 telmisartan  
 telmisartan-hydrochlorothiazide  
 terazosin  
 terbinafine tablet  
 testosterone gel  
 testosterone solution  
 tetracycline  
 tiagabine  
 timolol maleate solution  
 TOBRADEX OINTMENT  
 TOBRADEX ST  
 tobramycin  
 tobramycin-dexamethasone  
 TOLAK  
 tolterodine  
 tolterodine ext-rel  
 topiramate  
 torsemide  
 TOVIAZ  
 tramadol  
 tramadol ext-rel  
 TRAVATAN Z  
 trazodone  
 TRELEGY ELLIPTA  
 TRESIBA  
 tretinoin  
 TREXIMET  
 triamcinolone  
 triamterene-hydrochlorothiazide  
 trimethobenzamide  
 TRINTELLIX  
 TROKENDI XR  
 trospium  
 trospium ext-rel  
 TRULICITY

**U**

ULORIC

**V**

valacyclovir  
 valganciclovir  
 valproic acid  
 valsartan  
 valsartan-hydrochlorothiazide  
 VARUBI  
 VASCEPA  
 VELPHORO  
 VELTASSA  
 venlafaxine  
 venlafaxine ext-rel capsule  
 verapamil ext-rel  
 VESICARE  
 VIBERZI  
 VICTOZA  
 VIIBRYD  
 VIMPAT  
 VIOKACE  
 VISTOGARD  
 VRAYLAR  
 VYVANSE

**W**

warfarin

**X**

XARELTO  
 XIFAXAN 550 MG  
 XIGDUO XR  
 XIIDRA

**Z**

zafirlukast  
 ZEMBRACE SYMTOUCH  
 ZENPEP  
 zileuton ext-rel  
 ziprasidone  
 zolmitriptan  
 zolpidem  
 zolpidem ext-rel  
 zolpidem sublingual  
 ZOMIG NASAL SPRAY  
 zonisamide  
 ZUBSOLV  
 ZYCLARA  
 ZYLET

**PREFERRED OPTIONS LIST**

for medicines requiring prior authorization for medical necessity or non-preferred medicines

DRUG NAME(S) Bolded medicines require prior authorization for medical necessity.	PREFERRED OPTION(S)*	DRUG NAME(S) Bolded medicines require prior authorization for medical necessity.	PREFERRED OPTION(S)*
<b>ABILIFY</b>	aripiprazole, clozapine, olanzapine, quetiapine, quetiapine ext-rel, risperidone, ziprasidone, LATUDA, VRAYLAR	<b>ACTICLATE</b>	doxycycline hyclate
<b>ACANYA</b>	adapalene, benzoyl peroxide, clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, DIFFERIN, EPIDUO, RETIN-A MICRO, TAZORAC	<b>ACTOS</b>	pioglitazone
		<b>ADDERALL XR</b>	amphetamine-dextroamphetamine mixed salts ext-rel, methylphenidate ext-rel, MYDAYIS, VYVANSE
		<b>ALCORTIN A</b>	desonide, hydrocortisone

DRUG NAME(S) Bolded medicines require prior authorization for medical necessity.	PREFERRED OPTION(S)*	DRUG NAME(S) Bolded medicines require prior authorization for medical necessity.	PREFERRED OPTION(S)*
<b>ALEVICYN GEL, ALEVICYN KIT, ALEVICYN SG, Alevicyn solution</b>	<i>desonide, hydrocortisone</i>	<b>BENZAFLIN</b>	<i>adapalene, benzoyl peroxide, clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, DIFFERIN, EPIDUO, RETIN-A MICRO, TAZORAC</i>
<b>ALLISON MEDICAL INSULIN SYRINGES 5</b>	BD ULTRAFINE INSULIN SYRINGES	BENZIQU	<i>adapalene, benzoyl peroxide, clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, DIFFERIN, EPIDUO, RETIN-A MICRO, TAZORAC</i>
ALORA	<i>estradiol, DIVIGEL, EVAMIST, MINIVELLE</i>	<b>benzonatate (NDC^ 69499032915 only)</b>	Consult physician
<b>ALTOPREV</b>	<i>atorvastatin, ezetimibe-simvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin</i>	<b>BETAPACE, BETAPACE AF</b>	<i>sotalol</i>
<b>ALVESCO</b>	ARNUITY ELLIPTA, ASMANEX, FLOVENT DISKUS, FLOVENT HFA, PULMICORT FLEXHALER, QVAR, QVAR REDHALER	<b>BREEZE 2 STRIPS AND KITS 4</b>	ACCU-CHEK AVIVA PLUS STRIPS AND KITS 3, ACCU-CHEK COMPACT PLUS STRIPS AND KITS 3, ACCU-CHEK GUIDE STRIPS AND KITS 3, ACCU-CHEK SMARTVIEW STRIPS AND KITS 3
<b>AMRIX</b>	<i>cyclobenzaprine</i>	<b>butalbital-acetaminophen (NDC^ 69499034230 only)</b>	<i>diclofenac sodium, naproxen</i>
<b>ANDROGEL 1%</b>	<i>testosterone gel, testosterone solution, ANDRODERM, ANDROGEL 1.62%</i>	<b>butalbital-acetaminophen-caffeine capsule</b>	<i>diclofenac sodium, naproxen</i>
ANGELIQ	<i>estradiol-norethindrone, PREMPHASE, PREMPRO</i>	<b>BYDUREON</b>	OZEMPIC, TRULICITY, VICTOZA
ANTARA	<i>fenofibrate, fenofibric acid</i>	<b>BYETTA</b>	OZEMPIC, TRULICITY, VICTOZA
<b>APEXICON E</b>	<i>desoximetasone, fluocinonide</i>	<b>CAFERGOT</b>	<i>eletriptan, ergotamine-caffeine, naratriptan, rizatriptan, sumatriptan, zolmitriptan, ONZETRA XSAIL, ZEMBRACE SYMTOUCH, ZOMIG NASAL SPRAY</i>
<b>APIDRA</b>	FIASP, NOVOLOG	<b>CAMBIA</b>	<i>diclofenac sodium, meloxicam, naproxen</i>
ARMOUR THYROID	<i>levothyroxine, liothyronine, SYNTHROID</i>	<b>CARAC</b>	<i>fluorouracil cream 5%, fluorouracil solution, imiquimod, PICATO, TOLAK, ZYCLARA</i>
<b>ARTHROTEC</b>	<i>celecoxib; diclofenac sodium, meloxicam or naproxen WITH esomeprazole, lansoprazole, omeprazole, pantoprazole or DEXILANT</i>	<b>CARDIZEM</b>	<i>diltiazem ext-rel (except generic CARDIZEM LA)</i>
<b>ASACOL HD</b>	<i>balsalazide, sulfasalazine, sulfasalazine delayed-rel, APRISO, LIALDA, PENTASA</i>	<b>CARDIZEM CD</b>	<i>diltiazem ext-rel (except generic CARDIZEM LA)</i>
<b>ASCENSIA STRIPS AND KITS 4</b>	ACCU-CHEK AVIVA PLUS STRIPS AND KITS 3, ACCU-CHEK COMPACT PLUS STRIPS AND KITS 3, ACCU-CHEK GUIDE STRIPS AND KITS 3, ACCU-CHEK SMARTVIEW STRIPS AND KITS 3	<b>CARDIZEM LA (and its generics)</b>	<i>diltiazem ext-rel (except generic CARDIZEM LA)</i>
<b>ATACAND, ATACAND HCT</b>	<i>candesartan, candesartan-hydrochlorothiazide, eprosartan, irbesartan, irbesartan-hydrochlorothiazide, losartan, losartan-hydrochlorothiazide, olmesartan, olmesartan-hydrochlorothiazide, telmisartan, telmisartan-hydrochlorothiazide, valsartan, valsartan-hydrochlorothiazide</i>	<b>CARNITOR</b>	<i>levocarnitine</i>
ATROVENT HFA	<i>ipratropium inhalation solution, INCRUSE ELLIPTA, SPIRIVA</i>	<b>CARNITOR SF</b>	<i>levocarnitine</i>
<b>AVENOVA</b>	Consult physician	<b>chlorzoxazone 250 mg (NDC^ 69499033060 only)</b>	<i>cyclobenzaprine</i>
AZELEX	<i>adapalene, benzoyl peroxide, clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, DIFFERIN, EPIDUO, RETIN-A MICRO, TAZORAC</i>	CLINDAGEL	<i>erythromycin solution</i>
<b>BECONASE AQ</b>	<i>flunisolide, fluticasone, mometasone, triamcinolone, DYMISTA</i>	<b>clobetasol spray</b>	<i>clobetasol foam</i>
<b>BENICAR, BENICAR HCT</b>	<i>candesartan, candesartan-hydrochlorothiazide, eprosartan, irbesartan, irbesartan-hydrochlorothiazide, losartan, losartan-hydrochlorothiazide, olmesartan, olmesartan-hydrochlorothiazide, telmisartan, telmisartan-hydrochlorothiazide, valsartan, valsartan-hydrochlorothiazide</i>	<b>CLOBEX SPRAY</b>	<i>clobetasol foam</i>
<b>BENSAL HP</b>	<i>desonide, hydrocortisone</i>	<b>COLAZAL</b>	<i>balsalazide</i>
BENZAC AC	<i>adapalene, benzoyl peroxide, clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, DIFFERIN, EPIDUO, RETIN-A MICRO, TAZORAC</i>	<b>CONTOUR NEXT STRIPS AND KITS 4</b>	ACCU-CHEK AVIVA PLUS STRIPS AND KITS 3, ACCU-CHEK COMPACT PLUS STRIPS AND KITS 3, ACCU-CHEK GUIDE STRIPS AND KITS 3, ACCU-CHEK SMARTVIEW STRIPS AND KITS 3
		<b>CONTOUR STRIPS AND KITS 4</b>	ACCU-CHEK AVIVA PLUS STRIPS AND KITS 3, ACCU-CHEK COMPACT PLUS STRIPS AND KITS 3, ACCU-CHEK GUIDE STRIPS AND KITS 3, ACCU-CHEK SMARTVIEW STRIPS AND KITS 3
		<b>CRESTOR</b>	<i>atorvastatin, ezetimibe-simvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin</i>
		<b>CYMBALTA</b>	<i>desvenlafaxine ext-rel, duloxetine, venlafaxine, venlafaxine ext-rel capsule</i>
		<b>DELZICOL</b>	<i>balsalazide, sulfasalazine, sulfasalazine delayed-rel, APRISO, LIALDA, PENTASA</i>

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<b>DETROL LA</b>	<i>darifenacin ext-rel, oxybutynin ext-rel, tolterodine, tolterodine ext-rel, trospium, trospium ext-rel, MYRBETRIQ, TOVIAZ, VESICARE</i>	<b>FOSRENOL</b>	<i>calcium acetate, lanthanum carbonate, sevelamer carbonate, PHOSLYRA, VELPHORO</i>
<b>DEXPAK</b>	<i>dexamethasone, hydrocortisone, methylprednisolone, prednisolone solution, prednisone</i>	<b>FREESTYLE STRIPS AND KITS 4</b>	ACCU-CHEK AVIVA PLUS STRIPS AND KITS 3, ACCU-CHEK COMPACT PLUS STRIPS AND KITS 3, ACCU-CHEK GUIDE STRIPS AND KITS 3, ACCU-CHEK SMARTVIEW STRIPS AND KITS 3
<b>diclofenac sodium gel 1% (NDC^ 69499031866 only)</b>	<i>diclofenac sodium, diclofenac sodium gel 1% (except NDC^ 69499031866), diclofenac sodium solution, meloxicam, naproxen</i>	FROVA	<i>eletriptan, naratriptan, rizatriptan, sumatriptan, zolmitriptan, ONZETRA XSAIL, ZEMBRACE SYMTOUCH, ZOMIG NASAL SPRAY</i>
<b>DIOVAN, DIOVAN HCT</b>	<i>candesartan, candesartan-hydrochlorothiazide, eprosartan, irbesartan, irbesartan-hydrochlorothiazide, losartan, losartan-hydrochlorothiazide, olmesartan, olmesartan-hydrochlorothiazide, telmisartan, telmisartan-hydrochlorothiazide, valsartan, valsartan-hydrochlorothiazide</i>	<b>GLUMETZA</b>	<i>metformin, metformin ext-rel</i>
DORAL	<i>eszopiclone, zolpidem, zolpidem ext-rel, zolpidem sublingual, BELSOMRA, SILENOR</i>	<b>HORIZANT</b>	<i>gabapentin, GRALISE</i>
<b>DORYX</b>	<i>doxycycline hyclate</i>	<b>HUMALOG</b>	FIASP, NOVOLOG
<b>DORYX MPC</b>	<i>doxycycline hyclate</i>	<b>HUMALOG MIX 50/50</b>	NOVOLOG MIX 70/30
<b>DULERA</b>	ADVAIR, BREO ELLIPTA, SYMBICORT	<b>HUMALOG MIX 75/25</b>	NOVOLOG MIX 70/30
<b>DUTOPROL</b>	<i>metoprolol succinate ext-rel WITH hydrochlorothiazide</i>	<b>HUMULIN 70/30</b>	NOVOLIN 70/30
<b>DYRENIUM</b>	<i>amiloride</i>	<b>HUMULIN N</b>	NOVOLIN N
<b>EDARBI, EDARBYCLOR</b>	<i>candesartan, candesartan-hydrochlorothiazide, eprosartan, irbesartan, irbesartan-hydrochlorothiazide, losartan, losartan-hydrochlorothiazide, olmesartan, olmesartan-hydrochlorothiazide, telmisartan, telmisartan-hydrochlorothiazide, valsartan, valsartan-hydrochlorothiazide</i>	<b>HUMULIN R</b>	NOVOLIN R
EDLUAR	<i>eszopiclone, zolpidem, zolpidem ext-rel, zolpidem sublingual, BELSOMRA, SILENOR</i>	<b>hydrocortisone 1% in absorbase (NDCs^ 69499032210, 69499034325 only)</b>	<i>desonide, hydrocortisone</i>
<b>E.E.S. GRANULES</b>	<i>erythromycins</i>	<b>INDOCIN</b>	<i>diclofenac sodium, meloxicam, naproxen</i>
<b>EFFEXOR XR</b>	<i>desvenlafaxine ext-rel, duloxetine, venlafaxine, venlafaxine ext-rel capsule</i>	INNOPRAN XL	<i>atenolol, carvedilol, carvedilol phosphate ext-rel, metoprolol succinate ext-rel, metoprolol tartrate, nadolol, pindolol, propranolol, propranolol ext-rel, BYSTOLIC</i>
<b>ENABLEX</b>	<i>darifenacin ext-rel, oxybutynin ext-rel, tolterodine, tolterodine ext-rel, trospium, trospium ext-rel, MYRBETRIQ, TOVIAZ, VESICARE</i>	<b>INTERMEZZO</b>	<i>eszopiclone, zolpidem, zolpidem ext-rel, zolpidem sublingual, BELSOMRA, SILENOR</i>
<b>ERYPED</b>	<i>erythromycins</i>	<b>INTUNIV</b>	<i>amphetamine-dextroamphetamine mixed salts ext-rel, atomoxetine, guanfacine ext-rel, methylphenidate ext-rel, MYDAYIS, VYVANSE</i>
<b>EVZIO</b>	<i>naloxone injection, NARCAN NASAL SPRAY</i>	<b>INVOKAMET</b>	SYNJARDY, SYNJARDY XR, XIGDUO XR
<b>EXFORGE</b>	<i>amlodipine-olmesartan, amlodipine-telmisartan, amlodipine-valsartan</i>	<b>INVOKAMET XR</b>	SYNJARDY, SYNJARDY XR, XIGDUO XR
<b>EXFORGE HCT</b>	<i>amlodipine-valsartan-hydrochlorothiazide, olmesartan-amlodipine-hydrochlorothiazide</i>	<b>INVOKANA</b>	FARXIGA, JARDIANCE
<b>FANAPT</b>	<i>aripiprazole, clozapine, olanzapine, quetiapine, quetiapine ext-rel, risperidone, ziprasidone, LATUDA, VRAYLAR</i>	ISTALOL	<i>timolol maleate solution, BETIMOL</i>
FEMRING	<i>estradiol, ESTRING, PREMARIN CREAM</i>	<b>JALYN</b>	<i>dutasteride-tamsulosin; dutasteride or finasteride WITH alfuzosin ext-rel, doxazosin, tamsulosin, terazosin, RAPAFLO</i>
FETZIMA	<i>desvenlafaxine ext-rel, duloxetine, venlafaxine, venlafaxine ext-rel capsule</i>	<b>JENTADUETO</b>	JANUMET, JANUMET XR
<b>FIORICET CAPSULE</b>	<i>diclofenac sodium, naproxen</i>	<b>JENTADUETO XR</b>	JANUMET, JANUMET XR
<b>fluorouracil cream 0.5%</b>	<i>fluorouracil cream 5%, fluorouracil solution, imiquimod, PICATO, TOLAK, ZYCLARA</i>	<b>KAZANO</b>	JANUMET, JANUMET XR
<b>FORTAMET</b>	<i>metformin, metformin ext-rel</i>	<b>KOMBIGLYZE XR</b>	JANUMET, JANUMET XR
<b>FORTESTA</b>	<i>testosterone gel, testosterone solution, ANDRODERM, ANDROGEL 1.62%</i>	<b>LANOXIN TABLET (125 MCG and 250 MCG only)</b>	<i>digoxin</i>
FOSAMAX PLUS D	<i>alendronate, ibandronate, risedronate</i>	<b>LANTUS</b>	BASAGLAR, LEVEMIR, TRESIBA
		<b>LAZANDA</b>	<i>fentanyl transmucosal lozenge, ABSTRAL, SUBSYS</i>
		<b>LESCOL XL</b>	<i>atorvastatin, ezetimibe-simvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin</i>
		<b>levorphanol</b>	<i>fentanyl transdermal, hydromorphone ext-rel, methadone, morphine ext-rel, EMBEDA, HYSINGLA ER, NUCYNTA ER, OXYCONTIN</i>

Your specific prescription benefit plan design may not cover certain products or categories, regardless of their appearance in this document. For specific information, visit [Caremark.com](http://Caremark.com) or contact a CVS Caremark Customer Care representative.





DRUG NAME(S) Bolded medicines require prior authorization for medical necessity.	PREFERRED OPTION(S)*	DRUG NAME(S) Bolded medicines require prior authorization for medical necessity.	PREFERRED OPTION(S)*
LIPITOR	atorvastatin, ezetimibe-simvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin	OSENI	JANUMET, JANUMET XR
LIVALO	atorvastatin, ezetimibe-simvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin	OWEN MUMFORD NEEDLES <sup>5</sup>	BD ULTRAFINE NEEDLES
LUNESTA	eszopiclone, zolpidem, zolpidem ext-rel, zolpidem sublingual, BELSOMRA, SILENOR	OXYTROL	darifenacin ext-rel, oxybutynin ext-rel, tolterodine, tolterodine ext-rel, trospium, trospium ext-rel, MYRBETRIQ, TOVIAZ, VESICARE
MACRODANTIN	nitrofurantoin	PANCREAZE	CREON, VIOKACE, ZENPEP
<b>Matzim LA</b>	diltiazem ext-rel (except generic CARDIZEM LA)	PENNSAID	diclofenac sodium, diclofenac sodium gel 1% (except NDC <sup>A</sup> 69499031866), diclofenac sodium solution, meloxicam, naproxen
MENEST	estradiol, PREMARIN	PERRIGO NEEDLES <sup>5</sup>	BD ULTRAFINE NEEDLES
MENOSTAR	estradiol	PERTZYE	CREON, VIOKACE, ZENPEP
MIACALCIN INJECTION	alendronate, calcitonin-salmon, ibandronate, risedronate, FORTEO, PROLIA, TYMLOS	PEXEVA	citalopram, escitalopram, fluoxetine, paroxetine HCl, paroxetine HCl ext-rel, sertraline, TRINTELLIX, VIIBRYD
MIACALCIN NASAL SPRAY	calcitonin-salmon	PLAVIX	clopidogrel, prasugrel, BRILINTA
MICARDIS, MICARDIS HCT	candesartan, candesartan-hydrochlorothiazide, eprosartan, irbesartan, irbesartan-hydrochlorothiazide, losartan, losartan-hydrochlorothiazide, olmesartan, olmesartan-hydrochlorothiazide, telmisartan, telmisartan-hydrochlorothiazide, valsartan, valsartan-hydrochlorothiazide	PRADAXA	warfarin, ELIQUIS, XARELTO
MILLIPRED	dexamethasone, hydrocortisone, methylprednisolone, prednisolone solution, prednisone	PRECISION XTRA STRIPS AND KITS <sup>4</sup>	ACCU-CHEK AVIVA PLUS STRIPS AND KITS <sup>3</sup> , ACCU-CHEK COMPACT PLUS STRIPS AND KITS <sup>3</sup> , ACCU-CHEK GUIDE STRIPS AND KITS <sup>3</sup> , ACCU-CHEK SMARTVIEW STRIPS AND KITS <sup>3</sup>
MINOCIN	minocycline	PRED FORTE	dexamethasone, prednisolone acetate 1%, DUREZOL, FLAREX, FML FORTE, FML S.O.P., MAXIDEX, PRED MILD
NAPRELAN	diclofenac sodium, meloxicam, naproxen	PREFERAOB	generic prenatal vitamins, CITRANATAL
NATESTO	testosterone gel, testosterone solution, ANDRODERM, ANDROGEL 1.62%	PREFEST	estradiol-norethindrone, PREMPHASE, PREMPRO
NESINA	JANUVIA	PRENATAL PLUS	generic prenatal vitamins, CITRANATAL
NEXIUM	esomeprazole, lansoprazole, omeprazole, pantoprazole, DEXILANT	PREVACID	esomeprazole, lansoprazole, omeprazole, pantoprazole, DEXILANT
NILANDRON	abiraterone, bicalutamide, XTANDI	PRIMLEV	hydrocodone-acetaminophen, hydromorphone, morphine, oxycodone-acetaminophen, NUCYNTA
NITROMIST	nitroglycerin lingual spray, nitroglycerin sublingual	PROTONIX	esomeprazole, lansoprazole, omeprazole, pantoprazole, DEXILANT
NORITATE	metronidazole, FINACEA, SOOLANTRA	PROTOPIC	tacrolimus, ELIDEL, EUCRISA
NORVASC	amlodipine	PROVENTIL HFA	levalbuterol tartrate CFC-free aerosol, PROAIR HFA, PROAIR RESPICLICK
NOVACORT	desonide, hydrocortisone	QNASL	flunisolide, fluticasone, mometasone, triamcinolone, DYMISTA
NOVO NORDISK NEEDLES <sup>5</sup>	BD ULTRAFINE NEEDLES	RAYOS	dexamethasone, hydrocortisone, methylprednisolone, prednisolone solution, prednisone
NUVIGIL	armodafinil	RELION INSULIN	NOVOLIN INSULIN
OLEPTRO	trazodone	RELISTOR	MOVANTIK
OLUX-E	clobetasol foam	RIMSO-50	Consult physician
OMNARIS	flunisolide, fluticasone, mometasone, triamcinolone, DYMISTA	RIOMET	metformin, metformin ext-rel
ONETOUGH ULTRA STRIPS AND KITS <sup>4</sup>	ACCU-CHEK AVIVA PLUS STRIPS AND KITS <sup>3</sup> , ACCU-CHEK COMPACT PLUS STRIPS AND KITS <sup>3</sup> , ACCU-CHEK GUIDE STRIPS AND KITS <sup>3</sup> , ACCU-CHEK SMARTVIEW STRIPS AND KITS <sup>3</sup>	ROZEREM	eszopiclone, zolpidem, zolpidem ext-rel, zolpidem sublingual, BELSOMRA, SILENOR
ONETOUGH VERIO STRIPS AND KITS <sup>4</sup>	ACCU-CHEK AVIVA PLUS STRIPS AND KITS <sup>3</sup> , ACCU-CHEK COMPACT PLUS STRIPS AND KITS <sup>3</sup> , ACCU-CHEK GUIDE STRIPS AND KITS <sup>3</sup> , ACCU-CHEK SMARTVIEW STRIPS AND KITS <sup>3</sup>	SEROQUEL XR	aripiprazole, clozapine, olanzapine, quetiapine, quetiapine ext-rel, risperidone, ziprasidone, LATUDA, VRAYLAR
ONEXTON	adapalene, benzoyl peroxide, clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, DIFFERIN, EPIDUO, RETIN-A MICRO, TAZORAC	SORILUX	calcipotriene
ONGLYZA	JANUVIA	SPRIX	diclofenac sodium, meloxicam, naproxen
		STRIANT	testosterone gel, testosterone solution, ANDRODERM, ANDROGEL 1.62%

Your specific prescription benefit plan design may not cover certain products or categories, regardless of their appearance in this document. For specific information, visit [Caremark.com](http://Caremark.com) or contact a CVS Caremark Customer Care representative.



DRUG NAME(S) Bolded medicines require prior authorization for medical necessity.	PREFERRED OPTION(S)*	DRUG NAME(S) Bolded medicines require prior authorization for medical necessity.	PREFERRED OPTION(S)*
<b>SURE-TEST STRIPS AND KITS</b> <sup>4</sup>	ACCU-CHEK AVIVA PLUS STRIPS AND KITS <sup>3</sup> , ACCU-CHEK COMPACT PLUS STRIPS AND KITS <sup>3</sup> , ACCU-CHEK GUIDE STRIPS AND KITS <sup>3</sup> , ACCU-CHEK SMARTVIEW STRIPS AND KITS <sup>3</sup>	<b>Vanoxide-HC</b>	<i>adapalene, benzoyl peroxide, clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, DIFFERIN, EPIDUO, RETIN-A MICRO, TAZORAC</i>
<b>SYNERDERM</b>	<i>desonide, hydrocortisone</i>	<b>VELTIN</b>	<i>adapalene, benzoyl peroxide, clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, DIFFERIN, EPIDUO, RETIN-A MICRO, TAZORAC</i>
<b>TANZEUM</b>	OZEMPIC, TRULICITY, VICTOZA	<b>venlafaxine ext-rel tablet (except 225 mg)</b>	<i>desvenlafaxine ext-rel, duloxetine, venlafaxine, venlafaxine ext-rel capsule</i>
<b>TARGADOX</b>	<i>doxycycline hyclate</i>	<b>VENLAFAXINE EXT-REL TABLET (except 225 MG)</b>	<i>desvenlafaxine ext-rel, duloxetine, venlafaxine, venlafaxine ext-rel capsule</i>
<b>TESTIM</b>	<i>testosterone gel, testosterone solution, ANDRODERM, ANDROGEL 1.62%</i>	<b>VENTOLIN HFA</b>	<i>levalbuterol tartrate CFC-free aerosol, PROAIR HFA, PROAIR RESPICLICK</i>
<b>testosterone gel 1%</b> <sup>6</sup>	<i>testosterone gel, testosterone solution, ANDRODERM, ANDROGEL 1.62%</i>	<b>VITAFOL-ONE</b>	<i>generic prenatal vitamins, CITRANATAL</i>
<b>TIROSINT</b>	<i>levothyroxine, SYNTHROID</i>	<b>VOGELXO</b>	<i>testosterone gel, testosterone solution, ANDRODERM, ANDROGEL 1.62%</i>
<b>TOUJEO</b>	BASAGLAR, LEVEMIR, TRESIBA	<b>XOPENEX HFA</b>	<i>levalbuterol tartrate CFC-free aerosol, PROAIR HFA, PROAIR RESPICLICK</i>
<b>TRADJENTA</b>	JANUVIA	<b>ZEGERID</b>	<i>esomeprazole, lansoprazole, omeprazole, pantoprazole, DEXILANT</i>
<b>TRICOR</b>	<i>fenofibrate, fenofibric acid</i>	<b>ZETIA</b>	<i>ezetimibe</i>
<b>TRIGLIDE</b>	<i>fenofibrate, fenofibric acid</i>	<b>ZETONNA</b>	<i>flunisolide, fluticasone, mometasone, triamcinolone, DYMISTA</i>
<b>TRILIPIX</b>	<i>fenofibrate, fenofibric acid</i>	<b>ZIANA</b>	<i>adapalene, benzoyl peroxide, clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, DIFFERIN, EPIDUO, RETIN-A MICRO, TAZORAC</i>
<b>TRIVIDIA INSULIN SYRINGES</b> <sup>5</sup>	BD ULTRAFINE INSULIN SYRINGES	<b>ZOLPIMIST</b>	<i>eszopiclone, zolpidem, zolpidem ext-rel, zolpidem sublingual, BELSOMRA, SILENOR</i>
<b>TRUETEST STRIPS AND KITS</b> <sup>4</sup>	ACCU-CHEK AVIVA PLUS STRIPS AND KITS <sup>3</sup> , ACCU-CHEK COMPACT PLUS STRIPS AND KITS <sup>3</sup> , ACCU-CHEK GUIDE STRIPS AND KITS <sup>3</sup> , ACCU-CHEK SMARTVIEW STRIPS AND KITS <sup>3</sup>	<b>ZONEGRAN</b>	<i>carbamazepine, carbamazepine ext-rel, divalproex sodium, divalproex sodium ext-rel, gabapentin, lamotrigine, lamotrigine ext-rel, levetiracetam, levetiracetam ext-rel, oxcarbazepine, phenobarbital, phenytoin, phenytoin sodium extended, tiagabine, topiramate, valproic acid, zonisamide, FYCOMPA, OXTELLAR XR, TROKENDI XR, VIMPAT</i>
<b>TRUETRACK STRIPS AND KITS</b> <sup>4</sup>	ACCU-CHEK AVIVA PLUS STRIPS AND KITS <sup>3</sup> , ACCU-CHEK COMPACT PLUS STRIPS AND KITS <sup>3</sup> , ACCU-CHEK GUIDE STRIPS AND KITS <sup>3</sup> , ACCU-CHEK SMARTVIEW STRIPS AND KITS <sup>3</sup>	<b>ZUPLENZ</b>	<i>granisetron, ondansetron, SANCUSO</i>
<b>TUDORZA</b>	INCRUSE ELLIPTA, SPIRIVA	<b>ZYFLO, ZYFLO CR</b>	<i>montelukast, zafirlukast, zileuton ext-rel</i>
<b>ULTIMED INSULIN SYRINGES</b> <sup>5</sup>	BD ULTRAFINE INSULIN SYRINGES		
<b>ULTIMED NEEDLES</b> <sup>5</sup>	BD ULTRAFINE NEEDLES		
<b>UROXATRAL</b>	<i>alfuzosin ext-rel, doxazosin, tamsulosin, terazosin, RAPAFLO</i>		
<b>VALCYTE</b>	<i>valganciclovir</i>		
<b>VALTREX</b>	<i>acyclovir, valacyclovir</i>		
<b>VANATOL LQ</b>	<i>diclofenac sodium, naproxen</i>		
<b>VANATOL S</b>	<i>diclofenac sodium, naproxen</i>		

**FOR YOUR INFORMATION: Generics should be considered the first line of prescribing.** This drug list represents a summary of prescription coverage. It is not all-inclusive and does not guarantee coverage. 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. In most instances, a brand-name drug for which a generic product becomes available will be designated as a non-preferred option upon release of the generic product to the market. Specific prescription benefit plan design may not cover certain products or categories, regardless of their appearance in this document. The member's prescription benefit plan may have a different copay<sup>1</sup> for specific products on the list. Unless specifically indicated, drug list products will include all dosage forms. This list represents brand products in CAPS, branded generics in upper- and lowercase *Italics*, and generic products in lowercase *italics*. Generics listed in therapeutic categories are for representational purposes only. Listed products may be available generically in certain strengths or dosage forms. Dosage forms on this list will be consistent with the category and use where listed. Log in to [Caremark.com](https://www.caremark.com) to check coverage and copay<sup>1</sup> information for a specific medicine.

An exception process may exist for specific clinical or regulatory circumstances that may require coverage of an excluded medication.

<sup>A</sup> 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.

<sup>\*</sup> The preferred options in this list are a broad representation within therapeutic categories of available treatment options and do not necessarily represent clinical equivalency.

<sup>§</sup> Generics are available in this class and should be considered the first line of prescribing.

<sup>1</sup> Copayment, copay or coinsurance means the amount a member is required to pay for a prescription in accordance with a Plan, which may be a deductible, a percentage of the prescription price, a fixed amount or other charge, with the balance, if any, paid by a Plan.

<sup>2</sup> Listing does not include generic CARDIZEM LA.

<sup>3</sup> An ACCU-CHEK blood glucose meter may be provided at no charge by the manufacturer to those individuals currently using a meter other than ACCU-CHEK. For more information on how to obtain a blood glucose meter, call: (877) 418-4746.

<sup>4</sup> ACCU-CHEK brand test strips are the only preferred options.

<sup>5</sup> BD ULTRAFINE syringes and needles are the only preferred options.

<sup>6</sup> Listing reflects the authorized generics for TESTIM and VOGELXO.

**Plan member privacy is important to us. Our employees are trained regarding the appropriate way to handle members' private health information.**

This document contains references to brand-name prescription drugs that are trademarks or registered trademarks of pharmaceutical manufacturers. Listed products are for informational purposes only and are not intended to replace the clinical judgment of the prescriber. The document is subject to state-specific regulations and rules, including, but not limited to, those regarding generic substitution, controlled substance schedules, preference for brands and mandatory generics whenever applicable.

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