

# Value Formulary

## Brand-Name Medicines Not Listed on Value Formulary

Below is a list of select brand-name medicines that are in the most commonly used categories and are not listed on Value Formulary plans. These medicines may not be covered at your plan's preferred brand-name medicine copay† or coinsurance without an authorization for medical necessity, depending on your plan. If you continue using one of these medicines without authorization, you may need to pay up to the full cost of the medicine.

If you are currently using one of the medicines not listed on your plan, ask your doctor to consider one of the generic or brand-name options listed below.

<b>Category* Drug Class</b>	<b>Brand-Name Medicines Not Listed on Value Formulary Plans</b>	<b>Listed Medicines to Consider</b>
<b>Acne*</b>	ABSORICA ABSORICA LD ACANYA ALTRENO ACZONE 7.5% AKLIEF AMZEEQ ARAZLO AZELEX EPIDUO FORTE FABIOR ONEXTON TAZORAC Twyneo VELTIN WINLEVI	<i>isotretinoin, benzoyl peroxide, clindamycin gel (except NDC^68682046275) (QL, PA), clindamycin lotion (QL, PA), clindamycin soln (QL, PA), erythromycin gel 2% (QL, PA), erythromycin soln (QL, PA), erythromycin/benzoyl peroxide (QL, PA), sulfacetamide, tretinoin</i>
<b>Allergies* Nasal Steroids/ Combinations'</b>	BECONASE AQ OMNARIS QNASL XHANCE ZETONNA	<i>flunisolide spray, fluticasone spray, mometasone spray</i>
	DYMISTA RYALTRIS	<i>flunisolide spray or fluticasone spray <b>WITH</b> azelastine spray</i>
<b>Allergies* Ophthalmic (Eye)</b>	ALOCRIAL ALOMIDE ALREX BEPREVE LASTACAFT ZERVIAE	<i>azelastine, cromolyn sodium, olopatadine</i>
<b>Anti-infectives Antibacterials*</b>	AEMCOLO DORYX MPC SOLODYN NUZYRA XIMINO	<i>doxycycline hyclate tabs 20 mg, 100 mg; doxycycline hyclate capsule; doxycycline monohydrate susp; minocycline; tetracycline (QL, PA)</i>
	BAXDELA SIVEXTRO	<i>ciprofloxacin, levofloxacin, moxifloxacin linezolid (PA)</i>

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<b>Anti-fungals Oral *</b>	TOLSURA	<i>itraconazole, voriconazole (PA)</i>
<b>Anti-infectives Ophthalmic (Eye) Agents*</b>	AZASITE BESIVANCE CILOXAN OIN 0.3% OP	<i>bacitracin, ciprofloxacin, erythromycin, gentamicin (QL, PA), moxifloxacin, neomycin/polymyxin B/gramicidin, ofloxacin, polymyxin B/bacitracin, polymyxin B/trimethoprim, sulfacetamide, tobramycin</i>
<b>Anti-infectives Topical Antifungals*</b>	JUBLIA	<i>griseofulvin microsize, itraconazole, terbinafine tablets</i>
	XOLEGEL	<i>ketoconazole cream 2% (QL, PA), selenium sulfide</i>
<b>Anti-infectives Vaginal Agents*</b>	CLEOCIN suppository CLINDESSE NUVESSA VANDAZOLE XACIATO	<i>clindamycin vaginal cream, metronidazole vaginal gel,</i>
<b>Anti-infectives Topical Antivirals*</b>	DENAVIR SITAVIG XERESE ZOVIRAX cream	<i>acyclovir (except acyclovir cream), valacyclovir, famciclovir</i>
<b>Asthma* Beta Agonists, Short- Acting</b>	PROAIR DIGIHALER PROAIR HFA PROAIR RESPI AER PROVENTIL HFA VENTOLIN HFA XOPENEX HFA	<i>albuterol inhalation solution (QL), albuterol sulfate CFC-free aerosol (except NDC* 66993001968) (QL), levalbuterol tartrate CFC-free aerosol (QL)</i>
<b>Asthma* Steroid Inhalants</b>	ALVESCO ASMANEX PULMICORT	<i>budesonide inhalation suspension (QL, PA), ARNUITY ELLIPTA (QL), FLOVENT (QL)^, QVAR REDIHALER (QL)</i>
<b>Asthma* or Chronic Obstructive Pulmonary Disease (COPD)* Steroid/Beta Agonist Combinations</b>	AIRDUO DULERA	<i>ADVAIR DISKUS (QL), ADVAIR HFA** (QL), BREO ELLIPTA** (QL), SYMBICORT (QL)</i>
<b>Attention Deficit Hyperactivity Disorder Agents*</b>	ADHANSIA XR ADZENYS XR APTENSIO XR AZSTARYS COTEMPLA-XR DAYTRANA DYANAVEL XR EVEKEO EVEKEO ODT JORNAY PM MYDAYIS QELBREE QUILLICHEW ER QUILLIVANT XR VYVANSE XELSTRYM	<i>amphetamine-dextroamphetamine (QL, PA), amphetamine-dextroamphetamine ext-rel** (QL, PA), atomoxetine (QL), dexamethylphenidate (QL, PA), dextroamphetamine (QL, PA), dextroamphetamine ext-rel (QL, PA), methylphenidate (QL, PA), methylphenidate ext-rel** (QL, PA)</i>

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<b>Cardiovascular Antilipemics* HMG Co-A Reductase Inhibitors (HMGs or Statins)/Combinations</b>	ALTOPREV EZALLOR FLOLIPID LIVALO ROSZET ZYPITAMAG	<i>atorvastatin, pravastatin, rosuvastatin, simvastatin</i>
<b>Cardiovascular Beta Blockers</b>	BYSTOLIC INNOPRAN XL	<i>atenolol, bisoprolol, carvedilol, labetalol, metoprolol succinate ext-rel, metoprolol tartrate, nadolol, nebivolol, pindolol, propranolol, propranolol ext- rel</i>
<b>Cardiovascular Calcium Channel Blockers</b>	CONSENSI	<i>amlodipine <b>PLUS</b> celecoxib</i>
<b>Cardiovascular Heart Failure</b>	BIDIL VERQUVO	CORLANOR, ENTRESTO
<b>Chronic Obstructive Pulmonary Disease (COPD)* Anticholinergics, Long-Acting</b>	INCRUSE LONHALA MAGNAIR TUDORZA	SPIRIVA (QL), YUPELRI (QL)
<b>Chronic Obstructive Pulmonary Disease (COPD)* Anticholinergics, Short-Acting</b>	ATROVENT HFA COMBIVENT RESPIMAT	<i>ipratropium inhalation solution (QL) ipratropium/albuterol inhalation solution (QL)</i>
<b>Chronic Obstructive Pulmonary Disease (COPD)* Anticholinergic Combinations</b>	DUAKLIR PRESSAIR STIOLTO	ANORO (QL) BEVESPI (QL)
	BREZTRI TRELEGY	ADVAIR (QL) or SYMBICORT (QL) <b>WITH</b> SPIRIVA (QL), BREO ELLIPTA (QL)
<b>Chronic Obstructive Pulmonary Disease (COPD)* Beta Agonists, Long- Acting, Hand-held Active Inhalation</b>	SEREVENT	STRIVERDI RESPIMAT (QL)
<b>Chronic Obstructive Pulmonary Disease (COPD)* Beta Agonists, Long- Acting, Nebulized Passive Inhalation</b>	BROVANA PERFOROMIST	<i>formoterol inhalation soln (QL)</i>

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<b>Dementia*</b>	NAMZARIC	<i>donepezil, donepezil orally disintegrating, galantamine, galantamine ext-rel, memantine, rivastigmine</i>
<b>Depression* Antidepressants, Selective Serotonin Reuptake Inhibitors (SSRIs)</b>	PEXEVA TRINTELLIX VIIBRYD	<i>citalopram, escitalopram, fluoxetine (except fluoxetine 60 mg, fluoxetine tablet [generics for SARAFEM]), paroxetine, paroxetine ext-rel, sertraline</i>
<b>Depression* Antidepressants, Serotonin- Norepinephrine Reuptake Inhibitors (SNRIs)</b>	DESVENLAFAXINE ER DRIZALMA SPRINKLE FETZIMA	<i>desvenlafaxine succinate ext-rel, duloxetine, venlafaxine, venlafaxine ext-rel</i>
<b>Depression* Miscellaneous Antidepressants</b>	APLENZIN	<i>bupropion, bupropion ext-rel (except bupropion ext-rel 450 mg), mirtazapine, trazodone</i>
<b>Depression,* Schizophrenia* Antipsychotics, Atypicals</b>	ABILIFY MYCITE CAPLYTA FANAPT LATUDA LYBALVI REXULTI SAPHRIS SECUADO VERSACLOZ VRAYLAR	<i>aripiprazole, asenapine, clozapine, olanzapine, paliperidone ext-rel, quetiapine, risperidone, ziprasidone</i>
	ABILIFY MAINTENA INVEGA SUSTENNA INVEGA HAFYERA INVEGA TRINZA RISPERDAL CONSTA PERSERIS ZYPREXA RELPREVV	ARISTADA, ARISTADA INITIO
<b>Dermatology Actinic Keratosis*</b>	CARAC FLUOROPLEX KLISYRI LEVULAN KERASTICK ZYCLARA	<i>fluorouracil 5% cream, fluorouracil solution, imiquimod</i>
<b>Dermatology Rosacea*</b>	MIRVASO NORITATE RHOFADE ZILXI	<i>sulfacetamide/sulfur, metronidazole, EPSOLAY, ORACEA, SOOLANTRA</i>
<b>Dermatology Skin Inflammation and Hives* Corticosteroids</b>	APEXICON E HALOG PSORCON SERNIVO TOPICORT spray	<i>desoximetasone (except desoximetasone ointment 0.05%) (QL, PA), fluocinonide (except fluocinonide cream 0.1%) (QL, PA)</i>

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	BRYHALI	<i>halobetasol propionate 0.05% cream, ointment (QL, PA)</i>
	CAPEX XOLEGEL DUO	<i>ketoconazole shampoo 2% (QL, PA), selenium sulfide lotion 2.5%</i>
	CORDRAN tape	<i>clobetasol cream (QL, PA), clobetasol lotion (QL, PA), clobetasol ointment (QL, PA)</i>
	EPIFOAM PRAMOSONE VERDESO	<i>desonide (except desonide gel) (QL, PA), hydrocortisone (QL, PA)</i>
	IMPOYZ ULTRAVATE lotion	<i>clobetasol propionate cream (QL, PA)</i>
	PANDEL TEXACORT TRIANEX	<i>hydrocortisone butyrate (QL, PA), mometasone (QL, PA), triamcinolone (QL, PA)</i>
<b>Dermatology Topical Antipsoriatics*</b>	DUOBRII SORILUX TAZORAC WYNZORA	<i>calcipotriene oint, soln 0.005%; tazarotene, ENSTILAR, TACLONEX</i>
<b>Diabetes* Dipeptidyl Peptidase-4 (DPP-4) Inhibitors</b>	NESINA ONGLYZA TRADJENTA	JANUVIA (ST, PA)
<b>Diabetes* Dipeptidyl Peptidase-4 (DPP-4) Inhibitor Combinations</b>	JENTADUETO JENTADUETO XR KAZANO KOMBIGLYZE XR OSENI	JANUMET (ST, PA), JANUMET XR (ST, PA)
<b>Diabetes* Injectable Incretin Mimetics</b>	ADLYXIN BYDUREON BYETTA MOUNJARO	OZEMPIC (ST, PA, QL), RYBELSUS (ST, PA, QL), TRULICITY (ST, PA, QL), VICTOZA (ST, PA, QL)
<b>Diabetes* Insulins</b>	ADMELOG APIDRA HUMALOG Lyumjev	FIASP, NOVOLOG
	HUMALOG MIX 50/50 HUMALOG MIX 75/25	NOVOLOG MIX 70/30
	HUMULIN 70/30 2	NOVOLIN 70/30 <sup>2</sup>
	HUMULIN N 2	NOVOLIN N <sup>2</sup>
	AFREZZA HUMULIN R U-100	NOVOLIN R <sup>2</sup>
	LANTUS REZVOGLAR TOUJEO TOUJEO MAX SOLOSTAR	BASAGLAR, LEVEMIR, TRESIBA

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	SEMGLEE	
	XULTOPHY	BASAGLAR or LEVEMIR or TRESIBA <b>WITH</b> TRULICITY (ST, PA) or VICTOZA injection (ST, PA) or SOLIQUA (ST, PA) or RYBELSUS (ST, PA, QL)
<b>Diabetes* Sodium-Glucose Co-transporter 2 (SGLT2) Inhibitors</b>	INVOKANA STEGLATRO	FARXIGA (ST, PA), JARDIANCE (ST, PA)
<b>Diabetes* Sodium-Glucose Co-transporter 2 (SGLT2) Inhibitor Combinations</b>	INVOKAMET INVOKAMET XR QTERN QTERNMET XR SEGLUROMET STEGLUJAN	<i>metformin</i> (generic of GLUCOPHAGE) <b>WITH</b> FARXIGA (ST, PA) or JARDIANCE (ST, PA) or XIGDUO XR (ST, PA) or GLYXAMBI (ST, PA), SYNJARDY (ST, PA) or SYNJARDY XR (ST, PA), TRIJARDY XR (ST, PA)
<b>Diabetes* Supplies<sup>1</sup></b>	BREEZE 2 STRIPS AND KITS CONTOUR STRIPS AND KITS CONTOUR NEXT STRIPS AND KITS FREESTYLE STRIPS AND KITS All other test strips that are not AccuChek & Onetouch brand	ACCU-CHEK STRIPS AND KITS <sup>1</sup> ONETOUCH STRIPS AND KITS <sup>1</sup>
	ENLITE CONTINUOUS GLUCOSE MONITORING SYSTEM EVERSENSE CONTINUOUS GLUCOSE MONITORING SYSTEM FREESTYLE LIBRE CONTINUOUS GLUCOSE MONITORING SYSTEM GUARDIAN CONNECT CONTINUOUS GLUCOSE MONITORING SYSTEM	DEXCOM CONTINUOUS GLUCOSE MONITORING SYSTEM
<b>Diabetes* Syringes and Needles</b>	NOVO NORDISK PEN NEEDLES All other syringes and pen needles that are not BECTON DICKINSON brand	BD syringes and pen needles
<b>Endocrine and Metabolic; Glucose Elevating Agents</b>	GLUCAGEN INJ HYPOKIT ZEGALOGUE	<i>glucagon, human recombinant</i> ; BAQSIMI; GVOKE
<b>Estrogen Replacement* Vaginal Estrogens</b>	ESTRING FEMRING INTRAROSA PREMARIN cream	<i>estradiol vaginal cream</i> , IMVEXXY, VAGIFEM

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<b>Gastrointestinal Agents* Anti-Nausea Agents</b>	AKYNZEO BARHEMSYS BONJESTA DICLEGIS SANCUSO SYNDROS VARUBI ZUPLENZ	<i>aprepitant (QL, PA), dronabinol, granisetron, meclizine, metoclopramide, ondansetron, prochlorperazine, promethazine, trimethobenzamide</i>
<b>Gastrointestinal Agents* Laxatives</b>	KRISTALOSE MOVIPREP OSMOPREP PLENVU SUPREP SUTAB	<i>lactulose soln, peg 3350-electrolytes (except generics for MOVIPREP), CLENPIQ</i>
<b>Gastrointestinal Agents* Irritable Bowel Syndrome</b>	IBSRELA TRULANCE	LINZESS
<b>Gastrointestinal Agents* Opioid Induced Constipation</b>	RELISTOR MOVANTIK	SYMPROIC
<b>Gastrointestinal Agents* Pancreatic Enzymes</b>	PANCREAZE PERTZYE ZENPEP	CREON, VIOKACE
<b>Gastrointestinal Agents* Proton Pump Inhibitors (PPIs)</b>	ACIPHEX SPRINKLE DEXILANT NEXIUM PRILOSEC GRANULES PROTONIX	<i>lansoprazole, omeprazole, pantoprazole delayed-rel tabs</i>
<b>Gastrointestinal Agents* Rectal Steroids</b>	CORTIFOAM PROCTOFOAM HC UCERIS (foam)	<i>hydrocortisone enema, mesalamine rectal suspension</i>
<b>Head Lice*</b>	XEGLYZE	<i>malathion, permethrin shampoo</i>
<b>Hematologic* Anticoagulants, Oral Agents</b>	PRADAXA SAVAYSA	<i>warfarin, ELIQUIS, XARELTO</i>
<b>Hematologic* Anticoagulants, Injectable Agents</b>	FRAGMIN	<i>enoxaparin, fondaparinux</i>
<b>Hematologic* Platelet Aggregation Inhibitors</b>	BRILINTA TABS	<i>clopidogrel, prasugrel</i>

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<b>High Blood Pressure* Angiotensin II Receptor Antagonists/Direct Renin Inhibitors</b>	EDARBI TEKTURNA	<i>candesartan, irbesartan, losartan, olmesartan, valsartan</i>
<b>High Blood Pressure* Angiotensin II Receptor Antagonist/Direct Renin Inhibitor/Diuretic Combinations</b>	EDARBYCLOR TEKTURNA HCT	<i>candesartan-hydrochlorothiazide, irbesartan-hydrochlorothiazide, losartan-hydrochlorothiazide, olmesartan/hydrochlorothiazide, telmisartan-hydrochlorothiazide, valsartan-hydrochlorothiazide</i>
<b>Inflammatory Bowel Disease (IBD), Ulcerative Colitis* Oral Agents</b>	DELZICOL DIPENTUM PENTASA UCERIS	<i>balsalazide, budesonide, mesalamine, mesalamine ext-rel, sulfasalazine, sulfasalazine ext-rel, ASACOL HD</i>
<b>Inflammatory Bowel Disease (IBD), Ulcerative Colitis* Aminosalicylates Rectal Agents</b>	CANASA ROWASA SF	<i>mesalamine rectal suspension</i>
<b>Influenza Agents</b>	RELENZA RAPIVAB XOFLUZA	<i>oseltamivir (QL, PA)</i>
<b>Kidney Disease* Phosphorus Binders</b>	AURYXIA FOSRENOL PHOSLYRA RENAGEL VELPHORO	<i>calcium acetate, sevelamer carbonate</i>
<b>Menopausal Symptom Agents*, Oral</b>	ANGELIQ BIJUVA DUAVEE MENEST PREFEST PREMARIN PREMPHASE PREMPRO	<i>estradiol, estradiol/norethindrone, ethinyl estradiol/norethindrone acetate 0.5 mg/2.5 mcg, ethinyl estradiol/norethindrone acetate 1 mg/5 mcg (JINTELI tablets)</i>
<b>Menopausal Symptom Agents*, Transdermal</b>	ALORA COMBIPATCH DIVIGEL ELESTRIN ESTROGEL EVAMIST MENOSTAR MINIVELLE	<i>estradiol transdermal, CLIMARA PRO</i>
<b>Migraine*</b>	NURTEC ODT ONZETRA XSAIL REYVOW TOSYMRA	<i>naratriptan (QL, PA), rizatriptan (QL, PA), sumatriptan (QL, PA), zolmitriptan (QL, PA)</i>



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	TREXIMET 85-500 mg UBRELVY ZEMBRACE SYMTOUCH ZOMIG nasal spray	
	AIMOVIG NURTEC ODT QULIPTA VYEPTI	antidepressants (e.g., amitriptyline, venlafaxine), antiepileptic drugs (e.g., divalproex sodium, topiramate, valproate sodium), beta-adrenergic blocking agents (e.g., metoprolol, propranolol, timolol, atenolol, nadolol), AJOVY (ST, PA, QL), EMGALITY (ST, PA, QL)
<b>Ocular (Eye) High Blood Pressure*</b>	ALPHAGAN P	brimonidine
	AZOPT	dorzolamide
	BETIMOL BETOPTIC S TIMOPTIC OCUDOSE	timolol maleate
	COMBIGAN COSOPT PF SIMBRINZA	dorzolamide/timolol maleate
	DURYSTA LUMIGAN TRAVATAN Z VYZULTA XELPROS ZIOPTAN	latanoprost
<b>Opioid Dependence Agents*</b>	SUBLOCADE VIVITROL ZUBSOLV	buprenorphine (PA, QL), buprenorphine/naloxone (QL)
	KLOXXADO LIFEMS ZIMHI	naloxone injection, naloxone nasal spray (QL, PA)
<b>Osteoarthritis* Viscosupplements</b>	GEL-ONE GENVISC 850 HYALGAN HYMOVIS MONOVISC ORTHOVISC SYNVISC SYNVISC ONE TRILURON TRIVISC VISCO-3	DUROLANE (PA, SP), EUFLEXXA (PA, SP), GELSYN-3 (PA, SP), SUPARTZ FX (PA, SP)
<b>Osteoporosis*</b>	BINOSTO DUAVEE EVENITY FOSAMAX PLUS D	alendronate, calcitonin-salmon, ibandronate, risedronate, FORTEO (PA, SP, QL), PROLIA (PA, SP, QL), TYMLOS (PA, SP, QL)
<b>Overactive Bladder/ Incontinence* Urinary Antispasmodics</b>	GELNIQUE GEMTESA MYRBETRIQ OXYTROL	darifenacin ext-rel, oxybutynin ext-rel, tolterodine, tolterodine ext-rel, trospium, trospium ext-rel

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	VESICARE LS	
<b>Pain and Inflammation* Corticosteroids</b>	MILLIPRED RAYOS	<i>dexamethasone, hydrocortisone, methylprednisolone, prednisolone, prednisone</i>
<b>Pain and Inflammation* Nonsteroidal Anti-inflammatory Drugs (NSAIDs)/Combinations</b>	CAMBIA INDOCIN NAPRELAN PENNSAID SPRIX TIVORBEX VIMOVO VIVLODEX ZIPSOR ZORVOLEX	<i>celecoxib, diclofenac sodium, diflunisal, etodolac, flurbiprofen, ibuprofen, ketoprofen, meloxicam tabs, nabumetone, naproxen (except CR and suspension), oxaprozin, piroxicam, sulindac, tolmetin</i>
<b>Pain and Inflammation* Ophthalmic (Eye) Nonsteroidal Anti- inflammatory Agents</b>	ACUVAIL BROMSITE ILEVRO NEVANAC PROLENSA	<i>bromfenac, diclofenac, ketorolac</i>
<b>Pain and Inflammation* Ophthalmic (Eye) Steroids</b>	DUREZOL FLAREX FML FORTE FML S.O.P. INVELTYS LOTEMAX 0.5% gel/ointment LOTEMAX SM MAXIDEX PRED MILD	<i>dexamethasone, difluprednate, prednisolone acetate 1%, prednisolone phosphate 1%</i>
<b>Pain and Inflammation* Opioid Agents, Long- Acting</b>	ARYMO ER HYSINGLA ER MORPHABOND ER NUCYNTA ER OXYCONTIN	<i>fentanyl transdermal (ST, QL, PA), morphine ext-rel (ST, QL, PA), XTAMPZA ER (ST, QL, PA)</i>
<b>Pain and Inflammation* Opioid Agents, Short- Acting</b>	APADAZ LORTAB NUCYNTA OXAYDO QDOLO SEGLENTIS	<i>codeine (QL, PA), codeine/acetaminophen (QL), hydrocodone/acetaminophen (QL), hydromorphone (QL, PA), methadone (QL, PA), morphine (QL, PA), oxycodone (QL, PA), oxycodone/acetaminophen (QL), tramadol 50 mg (QL, PA)</i>
<b>Pain and Inflammation* Postherpetic Neuralgia</b>	GRALISE HORIZANT LYRICA LYRICA CR QUTENZA	<i>gabapentin</i>
<b>Pain and Inflammation* Transmucosal Immediate-release Fentanyl</b>	FENTORA LAZANDA SUBSYS	<i>fentanyl lozenges (PA, QL)</i>
<b>Parkinson's Disease*</b>	APOKYN	<i>amantadine, carbidopa/levodopa, carbidopa/levodopa ext-rel, carbidopa/</i>

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	DHIVY DUOPA GOCOVRI NEUPRO NOURIANZ ONGENTYS OSMOLEX ER RYTARY XADAGO ZELAPAR	<i>levodopa orally disintegrating, carbidopa/levodopa/entacapone, entacapone, rasagiline, selegiline, INBRIJA (PA, SP, QL), KYNMOBI (PA, SP, QL)</i>
<b>Progestin Replacement* Vaginal Agents</b>	CRINONE	ENDOMETRIN
<b>Prostate Condition* Benign Prostatic Hyperplasia Agents/ Combinations</b>	CARDURA XL CIALIS 5 mg ENTADFI	<i>alfuzosin ext-rel, doxazosin, finasteride, tamsulosin, terazosin</i>
<b>Seizure* Anticonvulsants</b>	APTIOM BANZEL BRIVIACT CELONTIN ELEPSIA XR EPIDIOLEX EPRONTIA FINTEPLA FYCOMPA LYRICA NAYZILAM OXTELLAR XR SPRITAM SYMPAZAN TROKENDI XR VIMPAT XCOPRI	<i>carbamazepine, carbamazepine ext-rel, clobazam (PA), clonazepam (QL), divalproex sodium, divalproex sodium ext-rel, ethosuximide, felbamate, gabapentin, lamotrigine, lamotrigine ext-rel, levetiracetam, levetiracetam ext-rel, oxcarbazepine, phenobarbital, phenytoin, primidone, tiagabine, topiramate, valproic acid, zonisamide</i>
<b>Severe Dry Eyes* Ophthalmic (Eye) Agents</b>	CEQUA EYSUVIS TYRVAYA	XIIDRA (PA, QL), RESTASIS (PA, QL)
<b>Sleep* Hypnotics, Non-benzodiazepines</b>	BELSOMRA DAYVIGO EDLUAR QUVIVIG ROZEREM SILENOR ZOLPIMIST	<i>ramelteon (QL, PA), doxepin, temazepam (QL), zaleplon (QL, PA), zolpidem (QL, PA), zolpidem ext-rel (QL, PA)</i>
<b>Testosterone Replacement* Androgens</b>	ANDRODERM ANDROGEL 1.62% AVEED JATENZO METHITEST NATESTO	<i>testosterone gel (generic of ANDROGEL 1% and generic of FORTESTA 2%), testosterone solution</i>

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	TESTOPEL TLANDO XYOSTED	
<b>Thyroid Supplements*</b>	THYQUIDITY All other thyroid hormones that are not <i>levothyroxine</i>	<i>levothyroxine, liothyronine</i>
<b>Transplant* Immunosuppressants, Calcineurin Inhibitors</b>	ASTAGRAF XL ENVARUSUS XR PROGRAF GRANULES	<i>cyclosporine, cyclosporine modified, tacrolimus</i>

## Index of Non-Listed Brand Medicines (Requiring Authorization for Medical Necessity)

ABILIFY MAINTENA, <b>5</b>	AZOPT, <b>11</b>	COTEMPLA-XR, <b>3</b>	MONITORING SYSTEM, <b>7</b>
ABILIFY MYCITE, <b>5</b>	AZSTARYS, <b>3</b>	CRINONE, <b>14</b>	EYSUVIS, <b>14</b>
ABSORICA, <b>1</b>	BANZEL, <b>14</b>	DAYTRANA, <b>3</b>	EZALLOR, <b>3</b>
ABSORICA LD, <b>1</b>	BARHEMSYS, <b>8</b>	DAYVIGO, <b>14</b>	FABIOR, <b>1</b>
ACANYA, <b>1</b>	BAXDELA, <b>2</b>	DELZICOL, <b>10</b>	FANAPT, <b>5</b>
ACIPHEX SPRINKLE, <b>9</b>	BECONASE AQ, <b>1</b>	DENAVIR, <b>2</b>	FEMRING, <b>8</b>
ACUVAIL, <b>12</b>	BELSOMRA, <b>14</b>	DESVENLAFAXINE ER, <b>4</b>	FENTORA, <b>13</b>
ADHANSIA XR, <b>3</b>	BEPREVE, <b>1</b>	DEXILANT, <b>9</b>	FETZIMA, <b>4</b>
ADLYXIN, <b>6</b>	BESIVANCE, <b>2</b>	DHIVY, <b>13</b>	FINTEPLA, <b>14</b>
ADMELOG, <b>6</b>	BETIMOL, <b>11</b>	DICLEGIS, <b>8</b>	FLAREX, <b>13</b>
ADZENYS XR, <b>3</b>	BETOPTIC S, <b>11</b>	DIPENTUM, <b>10</b>	FLOLIPID, <b>3</b>
AEMCOLO, <b>2</b>	BIDIL, <b>3</b>	DIVIGEL, <b>10</b>	FLUOROPLEX, <b>5</b>
AFREZZA, <b>7</b>	BIJUVA, <b>10</b>	DORYX MPC, <b>2</b>	FML FORTE, <b>13</b>
AIMOVIG, <b>11</b>	BINOSTO, <b>12</b>	DRIZALMA SPRINKLE, <b>4</b>	FML S.O.P., <b>13</b>
AIRDUO, <b>3</b>	BONJESTA, <b>8</b>	DUAKLIR PRESSAIR, <b>4</b>	FOSAMAX PLUS D, <b>12</b>
AKLIEF, <b>1</b>	BREEZE 2 STRIPS AND KITS, <b>7</b>	DUAVEE, <b>10, 12</b>	FOSRENOL, <b>10</b>
AKYNZEO, <b>8</b>	BREZTRI, <b>4</b>	DULERA, <b>3</b>	FRAGMIN, <b>9</b>
All other test strips that are not AccuChek & Onetouch brand, <b>7</b>	BRILINTA TABS, <b>9</b>	DUOBRII, <b>6</b>	FREESTYLE LIBRE CONTINUOUS GLUCOSE MONITORING SYSTEM, <b>7</b>
ALOCRI, <b>1</b>	BRIVIACT, <b>14</b>	DUOPA, <b>13</b>	FREESTYLE STRIPS AND KITS, <b>7</b>
ALOMIDE, <b>1</b>	BROMSITE, <b>12</b>	DUREZOL, <b>13</b>	FYCOMPA, <b>14</b>
ALORA, <b>10</b>	BROVANA, <b>4</b>	DURYSTA, <b>11</b>	GELNIQUE, <b>12</b>
ALPHAGAN P, <b>11</b>	BRYHALI, <b>5</b>	DYANAVEL XR, <b>3</b>	GEL-ONE, <b>12</b>
ALREX, <b>1</b>	BYDUREON, <b>6</b>	DYMISTA, <b>1</b>	GEMTESA, <b>12</b>
ALTOPREV, <b>3</b>	BYETTA, <b>6</b>	EDARBI, <b>9</b>	GENVISC 850, <b>12</b>
ALTRENO, <b>1</b>	BYSTOLIC, <b>3</b>	EDARBYCLOR, <b>10</b>	GLUCAGEN INJ HYPOKIT, <b>8</b>
ALVESCO, <b>2</b>	CAMBIA, <b>12</b>	EDLUAR, <b>14</b>	GOCOVRI, <b>13</b>
AMZEEQ, <b>1</b>	CANASA, <b>10</b>	ELEPSIA XR, <b>14</b>	GRALISE, <b>13</b>
ANDRODERM, <b>15</b>	CAPEX, <b>5</b>	ELESTRIN, <b>10</b>	GUARDIAN CONNECT CONTINUOUS GLUCOSE MONITORING SYSTEM, <b>7</b>
ANDROGEL 1.62%, <b>15</b>	CAPLYTA, <b>5</b>	ENLITE CONTINUOUS, <b>7</b>	HALOG, <b>5</b>
ANGELIQ, <b>10</b>	CARAC, <b>5</b>	ENLITE CONTINUOUS GLUCOSE MONITORING SYSTEM, <b>7</b>	HORIZANT, <b>13</b>
APADAZ, <b>13</b>	CARDURA XL, <b>14</b>	ENTADFI, <b>14</b>	HUMALOG, <b>6</b>
APEXICON E, <b>5</b>	CELONTIN, <b>14</b>	ENVARBUS XR, <b>15</b>	HUMALOG MIX 50/50, <b>6</b>
APIDRA, <b>6</b>	CEQUA, <b>14</b>	EPIDIOLEX, <b>14</b>	HUMALOG MIX 75/25, <b>6</b>
APLENZIN, <b>4</b>	CIALIS 5 mg, <b>14</b>	EPIDUO FORTE, <b>1</b>	HUMULIN 70/30, <b>6</b>
APOKYN, <b>13</b>	CILOXAN OIN 0.3% OP, <b>2</b>	EPIFOAM, <b>6</b>	HUMULIN N, <b>7</b>
APTENSIO XR, <b>3</b>	CLEOCIN suppository, <b>2</b>	EPRONTIA, <b>14</b>	HUMULIN R U-100, <b>7</b>
APTIOM, <b>14</b>	CLINDESSE, <b>2</b>	ESTRING, <b>8</b>	HYALGAN, <b>12</b>
ARAZLO, <b>1</b>	COMBIGAN, <b>11</b>	ESTROGEL, <b>10</b>	
ARYMO ER, <b>13</b>	COMBIPATCH, <b>10</b>	EVAMIST, <b>10</b>	
ASMANEX, <b>2</b>	COMBIVENT RESPIMAT, <b>4</b>	EVEKEO, <b>3</b>	
ASTAGRAF XL, <b>15</b>	CONSENSI, <b>3</b>	EVEKEO ODT, <b>3</b>	
ATROVENT HFA, <b>4</b>	CONTOUR STRIPS AND KITS, <b>7</b>	EVENITY, <b>12</b>	
AURYXIA, <b>10</b>	CORDRAN tape, <b>6</b>	EVERSENSE CONTINUOUS GLUCOSE	
AVEED, <b>15</b>	CORTIFOAM, <b>9</b>		
AZASITE, <b>2</b>	COSOPT PF, <b>11</b>		
AZELEX, <b>1</b>			

HYMOVIS, **12**  
 HYSINGLA ER, **13**  
 IBSRELA, **9**  
 ILEVRO, **12**  
 IMPOYZ, **6**  
 INCRUSE, **4**  
 INDOCIN, **12**  
 INNOPRAN XL, **3**  
 INTRAROSA, **8**  
 INVEGA HAFYERA, **5**  
 INVEGA SUSTENNA, **5**  
 INVEGA TRINZA, **5**  
 INVELTYS, **13**  
 INVOKAMET, **7**  
 INVOKAMET XR, **7**  
 INVOKANA, **7**  
 JATENZO, **15**  
 JENTADUETO, **6**  
 JENTADUETO XR, **6**  
 JORNAY PM, **3**  
 JUBLIA, **2**  
 KAZANO, **6**  
 KLISYRI, **5**  
 KLOXXADO, **11**  
 KOMBIGLYZE XR, **6**  
 KRISTALOSE, **8**  
 LANTUS, **7**  
 LASTACAPT, **1**  
 LATUDA, **5**  
 LAZANDA, **13**  
 LEVULAN KERASTICK, **5**  
 LIFEMS, **11**  
 LIVALO, **3**  
 LONHALA MAGNAIR, **4**  
 LORTAB, **13**  
 LOTEMAX 0.5%  
     gel/ointment, **13**  
 LOTEMAX SM, **13**  
 LUMIGAN, **11**  
 LYBALVI, **5**  
 LYRICA, **13, 14**  
 LYRICA CR, **13**  
 Lyumjev, **6**  
 MAXIDEX, **13**  
 MENEST, **10**  
 MENOSTAR, **10**  
 METHITEST, **15**  
 MILLIPRED, **12**  
 MINIVELLE, **10**  
 MIRVASO, **5**  
 MONOVISC, **12**  
 MORPHABOND ER, **13**  
 MOUNJARO, **6**  
 MOVIPREP, **8**  
 MYDAYIS, **3**  
 MYRBETRIQ, **12**  
 NAMZARIC, **4**  
 NAPRELAN, **12**  
 NATESTO, **15**  
 NAYZILAM, **14**  
 NESINA, **6**  
 NEUPRO, **13**  
 NEVANAC, **12**  
 NEXIUM, **9**  
 NORITATE, **5**  
 NOURIANZ, **13**  
 NOVO NORDISK PEN  
     NEEDLES, **8**  
 NUCYNTA, **13**  
 NUCYNTA ER, **13**  
 NURTEC ODT, **11**  
 NUVESSA, **2**  
 NUZYRA, **2**  
 OMNARIS, **1**  
 ONEXTON, **1**  
 ONGENTYS, **13**  
 ONGLYZA, **6**  
 ONZETRA XSAIL, **11**  
 ORTHOVISC, **12**  
 OSENI, **6**  
 OSMOLEX ER, **13**  
 OSMOPREP, **8**  
 OXAYDO, **13**  
 OXTELLAR XR, **14**  
 OXYCONTIN, **13**  
 OXYTROL, **12**  
 PANCREAZE, **9**  
 PANDEL, **6**  
 PENNSAID, **12**  
 PENTASA, **10**  
 PERFOROMIST, **4**  
 PERSERIS, **5**  
 PERTZYE, **9**  
 PEXEVA, **4**  
 PHOSLYRA, **10**  
 PLENVU, **8**  
 PRADAXA, **9**  
 PRAMOSONE, **6**  
 PRED MILD, **13**  
 PREFEST, **10**  
 PREMARIN, **10**  
 PREMARIN cream, **8**  
 PREMPHASE, **10**  
 PREMPRO, **10**  
 PRILOSEC GRANULES, **9**  
 PROAIR DIGIHALER, **2**  
 PROAIR HFA, **2**  
 PROAIR RESPI AER, **2**  
 PROCTOFOAM HC, **9**  
 PROGRAF GRANULES, **15**  
 PROLENSA, **12**  
 PROTONIX, **9**  
 PROVENTIL HFA, **2**  
 PSORCON, **5**  
 PULMICORT, **2**  
 QDOLO, **13**  
 QELBREE, **3**  
 QNASL, **1**  
 QTERN, **7**  
 QTERNMET XR, **7**  
 QUILLICHEW ER, **3**  
 QUILLIVANT XR, **3**  
 QULIPTA, **11**  
 QUTENZA, **13**  
 QUVIVIG, **14**  
 RAPIVAB, **10**  
 RAYOS, **12**  
 RELENZA, **10**  
 RELISTOR, **9**  
 RENAGEL, **10**  
 REXULTI, **5**  
 REYVOW, **11**  
 REZVOGLAR, **7**  
 RHOFADE, **5**  
 RISPERDAL CONSTA, **5**  
 ROSZET, **3**  
 ROWASA SF, **10**  
 ROZEREM, **14**  
 RYALTRIS, **1**  
 RYTARY, **13**  
 SANCUSO, **8**  
 SAPHRIS, **5**  
 SAVAYSA, **9**  
 SECUADO, **5**  
 SEGLENTIS, **13**  
 SEGLUROMET, **7**  
 SEMGLEE, **7**  
 SEREVENT, **4**  
 SERNIVO, **5**  
 SILENOR, **14**  
 SIMBRINZA, **11**  
 SITAVIG, **2**  
 SIVEXTRO, **2**  
 SOLODYN, **2**  
 SORILUX, **6**  
 SPRITAM, **14**  
 SPRIX, **12**  
 STEGLATRO, **7**  
 STEGLUJAN, **7**  
 STIOLTO, **4**  
 SUBLOCADE, **11**  
 SUBSYS, **13**  
 SUPREP, **8**  
 SUTAB, **8**  
 SYMPAZAN, **14**  
 SYMPROIC, **9**  
 SYNDROS, **8**  
 SYNVISC, **12**  
 SYNVISC ONE, **12**  
 TAZORAC, **1, 6**  
 TEKTURN, **9**  
 TEKTURN HCT, **10**  
 TESTOPEL, **15**  
 TEXACORT, **6**  
 THYQUIDITY, **15**  
 TIMOPTIC OCULOSE, **11**  
 TIVORBEX, **12**  
 TLANDO, **15**  
 TOLSURA, **2**  
 TOPICORT spray, **5**  
 TOSYMRA, **11**  
 TOUJEO, **7**  
 TOUJEO MAX  
     SOLOSTAR, **7**  
 TRADJENTA, **6**  
 TRAVATAN Z, **11**  
 TRELEGY, **4**  
 TREXIMET 85-500 mg, **11**  
 TRIANEX, **6**  
 TRILURON, **12**  
 TRINTELLIX, **4**  
 TRIVISC, **12**  
 TROKENDI XR, **14**  
 TRULANCE, **9**  
 TUDORZA, **4**  
 TWYNEO, **1**  
 TYRVAYA, **14**  
 UBRELVY, **11**  
 UCERIS, **10**  
 UCERIS (foam), **9**  
 ULTRAVATE lotion, **6**  
 VANDAZOLE, **2**  
 VARUBI, **8**  
 VELPHORO, **10**

VELTIN, <b>1</b>	VYEPTI, <b>11</b>	XOFLUZA, <b>10</b>	ZILXI, <b>5</b>
VENTOLIN HFA, <b>2</b>	VYVANSE, <b>3</b>	XOLEGEL, <b>2</b>	ZIMHI, <b>11</b>
VERDESO, <b>6</b>	VYZULTA, <b>11</b>	XOLEGEL DUO, <b>5</b>	ZIOPTAN, <b>11</b>
VERQUOVO, <b>3</b>	WINLEVI, <b>1</b>	XOPENEX HFA, <b>2</b>	ZIPSOR, <b>12</b>
VERSACLOZ, <b>5</b>	WYNZORA, <b>6</b>	XULTOPHY, <b>7</b>	ZOLPIMIST, <b>14</b>
VESICARE LS, <b>12</b>	XACIATO, <b>2</b>	XYOSTED, <b>15</b>	ZOMIG nasal spray, <b>11</b>
VIIBRYD, <b>4</b>	XADAGO, <b>13</b>	ZEGALOGUE, <b>8</b>	ZORVOLEX, <b>12</b>
VIMOVO, <b>12</b>	XEGLYZE, <b>9</b>	ZELAPAR, <b>13</b>	ZOVIRAX cream, <b>2</b>
VIMPAT, <b>14</b>	XELPROS, <b>11</b>	ZEMBRACE SYMTOUCH, <b>11</b>	ZUBSOLV, <b>11</b>
VISCO-3, <b>12</b>	XELSTRYM, <b>3</b>	ZENPEP, <b>9</b>	ZUPLENZ, <b>8</b>
VIVITROL, <b>11</b>	XERESE, <b>2</b>	ZERVIAPE, <b>1</b>	ZYCLARA, <b>5</b>
VIVLODEX, <b>12</b>	XHANCE, <b>1</b>	ZERTONNA, <b>1</b>	ZYPITAMAG, <b>3</b>
VRAYLAR, <b>5</b>	XIMINO, <b>2</b>		ZYPREXA RELPREVV, <b>5</b>

There may be additional drugs subject to prior authorization or other plan design restrictions. Please consult your plan for further information.

This list represents brand products in CAPS; branded generics in upper- and lowercase; and generic products in lowercase *italics*. This is not an all-inclusive list of available drug alternative considerations. 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.

Subject to applicable state law restrictions.

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

\*\* Listing does not include certain national drug codes (NDCs).

† 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>1</sup> An ACCU-CHEK or OneTouch blood glucose meter will 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 1-800-588-4456. Plan members must have CVS Caremark Mail Service Pharmacy benefits to qualify.

<sup>2</sup> Rebranded or private label formulations are not covered (i.e., RELION).

Key abbreviations: (PA) = prior authorization; (ST; PA) = step therapy with post-step prior authorization; (QL) = quantity limit; (QL; PA) = quantity limit with post-limit prior authorization; (OTC) = over-the-counter medicine, not covered by the pharmacy benefit plan.

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