



Value Formulary Quick Reference List

The **Value Formulary Quick Reference List** is not an all-inclusive list but represents a summary of prescribed medications within select therapeutic categories. This useful reference tool can assist medical providers in selecting therapeutically appropriate and cost-effective products for their patients. Preferred brand-name medications are listed to help identify product that are clinically appropriate and cost-effective. Generics listed in therapeutic categories are for representational purposes only.

This list represents brand products in CAPS and generic products in lowercase *italics*. Unless specifically indicated, drug list products will include all dosage forms, except for orally disintegrating formulations. Some prescription benefit plan designs may alter coverage of certain products or vary copay amounts based on the condition being treated. This document is subject to state-specific regulations and rules, including, but not limited to, those regarding generic substitution, preference for brands and mandatory generics whenever available.

This list is not an all-inclusive list and does not guarantee coverage. Please visit Caremark.com for a complete list.

ANALGESICS

NSAIDS

- diclofenac potassium* 50mg
- diclofenac sodium delayed-rel*
- diclofenac sodium ext-rel*
- diflunisal*
- etodolac*
- flurbiprofen*
- ibuprofen*
- ketoprofen* 50mg, 75mg
- ketorolac tromethamine*
- meloxicam* tabs
- nabumetone*
- naproxen* tabs
- oxaprozin*
- piroxicam*
- sulindac*

VISCOSUPPLEMENTS

- DUROLANE **SP, PA**
- EUFLEXXA **SP, PA**
- GELSYN-3 **SP, PA**
- SUPARTZ FX **SP, PA**

ANTI-INFECTIVES

ANTHELMINTICS

- ivermectin*

- praziquantel* **QL; PA***
- EMVERM **QL; PA***

ANTIFUNGALS

- clotrimazole troches* **QL; PA***
- fluconazole*
- griseofulvin microsize*
- itraconazole*
- nystatin*
- terbinafine hcl tabs*
- voriconazole* **PA**

ANTITUBERCULAR AGENTS

- rifabutin*

ANTIVIRALS

- acyclovir*
- famciclovir*
- oseltamivir phosphate* **QL; PA***
- valacyclovir hcl*

CEPHALOSPORINS

- cefadroxil*
- cefdinir*
- cefepodoxime proxetil*
- cefprozil*
- cefuroxime axetil*
- cephalexin*

ERYTHROMYCINS/MACROLIDES

- azithromycin*
- clarithromycin*

- clarithromycin ext-rel*
- erythromycin*
- erythromycin base*
- erythromycins*
- DIFICID **PA**

FLUOROQUINOLONES

- ciprofloxacin hcl*
- levofloxacin*
- moxifloxacin hcl*
- CIPRO

HEPATITIS C

- ribavirin* **SP, PA**
- EPCLUSA (genotypes 1, 2, 3, 4, 5, 6) **SP, PA, QL**
- HARVONI (genotypes 1, 4, 5, 6) **SP, PA, QL**
- VOSEVI **SP, PA, QL, ^**

MISCELLANEOUS

- atovaquone*
- clindamycin hcl*
- linezolid* **PA**
- linezolid inj* **PA**
- metronidazole*
- nitrofurantoin ext-rel*
- nitrofurantoin macrocrystals*
- sulfamethoxazole/trimethoprim*
- vancomycin hcl* **QL**

PENICILLINS

- amoxicillin*
- amoxicillin & pot clavulanate*
- amoxicillin & pot clavulanate ext-rel*
- ampicillin*
- dicloxacillin sodium*
- penicillin v potassium*

TETRACYCLINES

- doxycycline hyclate caps; tabs* 20mg, 100mg
- doxycycline monohydrate susp*
- minocycline hcl*
- tetracycline hcl* **QL; PA***

CARDIOVASCULAR

ACE INHIBITOR COMBINATIONS

- amlodipine besylate-benazepril hcl*
- enalapril maleate & hydrochlorothiazide*
- lisinopril & hydrochlorothiazide*

ACE INHIBITORS

- captopril*
- enalapril maleate*
- lisinopril*
- perindopril erbumine*
- ramipril*
- trandolapril*

AGE - Age Limit **OTC** - Over the counter **PA** - Prior Authorization **PA*** - If Quantity Limit is exceeded, Prior Authorization may apply **PA**** - If Step Therapy requirements are not met, Prior Authorization may apply **QL** - Quantity Limits **SP** - Specialty **ST** - Step Therapy

ANGIOTENSIN II RECEPTOR ANTAGONIST COMBINATIONS

irbesartan-hydrochlorothiazide
losartan potassium & hydrochlorothiazide
olmesartan medoxomil-hydrochlorothiazide
valsartan-hydrochlorothiazide

ANGIOTENSIN II RECEPTOR ANTAGONISTS

irbesartan
losartan potassium
olmesartan medoxomil
valsartan

ANTIARRHYTHMICS

amiodarone
disopyramide phosphate
dofetilide SP, PA
flecainide acetate
ibutilide fumarate
propafenone ext-rel
propafenone hcl
sotalol

ANTILIPEMICS, BILE ACID RESINS

cholestyramine
colestipol hcl

ANTILIPEMICS, FIBRATES

fenofibrate (except fenofibrate capsule 30 mg, 50 mg, 90 mg, 130 mg; fenofibrate tablet 40 mg, 120 mg)
gemfibrozil

ANTILIPEMICS, HMG-COA REDUCTASE INHIBITORS

atorvastatin calcium
pravastatin sodium
rosuvastatin calcium
simvastatin

ANTILIPEMICS, MISCELLANEOUS

niacin ext-rel

ANTILIPEMICS, OMEGA-3 FATTY ACIDS

VASCEPA

ANTILIPEMICS, PCSK9 INHIBITORS

REPATHA SP, PA, QL
REPATHA PUSHTRONEX SYSTEM SP, PA, QL
REPATHA SURECLICK SP, PA, QL

BETA-BLOCKER/DIURETIC COMBINATIONS

atenolol & chlorthalidone
bisoprolol & hydrochlorothiazide
metoprolol & hydrochlorothiazide

BETA-BLOCKERS

acebutolol hcl
atenolol
bisoprolol fumarate
carvedilol

labetalol hcl
metoprolol succinate ext-rel
metoprolol tartrate 25mg, 50mg, 100mg
nadolol
pindolol
propranolol ext-rel
propranolol hcl

CALCIUM CHANNEL BLOCKERS

amlodipine besylate
diltiazem ext-rel
felodipine ext-rel
isradipine
nicardipine hcl
nifedipine ext-rel
verapamil ext-rel

DIGITALIS GLYCOSIDES

digoxin
digoxin ped elixir

DIURETICS

amiloride & hydrochlorothiazide
amiloride hcl
bumetanide
chlorthalidone
ethacrynic acid
furosemide
hydrochlorothiazide
indapamide
metolazone
spironolactone & hydrochlorothiazide
torsemide
triamterene & hydrochlorothiazide

HEART FAILURE

isosorbide dinitrate-hydralazine hcl
CORLANOR
ENTRESTO

MISCELLANEOUS

hydralazine hcl
midodrine hcl
ranolazine ext-rel

NITRATES

isosorbide dinitrate 5mg, 10mg, 20mg, 30mg
isosorbide mononitrate
isosorbide mononitrate ext-rel
nitroglycerin sublingual
nitroglycerin transdermal

CENTRAL NERVOUS SYSTEM

ANTI-ANXIETY

alprazolam QL
alprazolam orally disintegrating tabs QL
buspirone hcl
fluvoxamine ext-rel
fluvoxamine maleate
lorazepam QL

oxazepam QL
ALPRAZOLAM INTENSOL QL

ANTIDEPRESSANTS

bupropion
bupropion hcl ext-rel
citalopram hydrobromide
desvenlafaxine succinate ext-rel
doxepin
duloxetine delayed-rel
escitalopram oxalate
fluoxetine hcl caps; soln
fluoxetine hcl tabs 10mg, 20mg
mirtazapine
mirtazapine orally disintegrating tabs
paroxetine hcl ext-rel²
paroxetine hcl tabs
sertraline hcl
trazodone hcl
venlafaxine hcl
venlafaxine hcl ext-rel

ANTISEIZURE AGENTS

clorazepate dipotassium QL
diazepam QL

HYPNOTICS

*ramelteon QL; PA**
*zaleplon QL; PA**
*zolpidem tartrate QL; PA**
*zolpidem tartrate ext-rel QL; PA**

MIGRAINE

*naratriptan hcl QL; PA**
*rizatriptan benzoate QL; PA**
*rizatriptan orally disintegrating tabs QL; PA**
*sumatriptan succinate QL; PA**
*zolmitriptan QL; PA**
*zolmitriptan orally disintegrating tabs QL; PA**

*EMGALITY ST, QL; PA***
*QULIPTA ST, QL; PA***
*UBRELVY ST, QL; PA***

MULTIPLE SCLEROSIS AGENTS

dimethyl fumarate delayed-rel SP, PA, QL
 fingolimod hcl SP, PA, QL
glatiramer acetate SP, PA, QL
teriflunomide SP, PA, QL
AVONEX SP, PA, QL
BETASERON SP, PA, QL
COPAXONE INJ 40MG/ML SP, PA, QL
KESIMPTA SP, PA, QL
MAYZENT SP, PA, QL
MAYZENT STARTER PACK SP, PA, QL
OCREVUS SP, PA, QL
REBIF SP, PA, QL
TYSABRI SP, PA, QL
VUMERITY SP, PA, QL
ZEPOSIA SP, PA, QL
ZEPOSIA STARTER KIT SP, PA, QL

ENDOCRINE AND METABOLIC

ANTIDIABETICS, AMYLIN ANALOGS
*SYMLINPEN ST; PA***

ANTIDIABETICS, BIGUANIDE
metformin ext-rel (except generics for FORTAMET and GLUMETZA)
metformin hcl

ANTIDIABETICS, BIGUANIDE/SULFONYLUREA COMBINATIONS
glipizide-metformin hcl

ANTIDIABETICS, DIPEPTIDYL PEPTIDASE-4 INHIBITORS
*JANUVIA ST; PA***

ANTIDIABETICS, DPP-4 INHIBITOR COMBINATIONS
*JANUMET ST; PA***
*JANUMET XR ST; PA***

ANTIDIABETICS, INCRETIN MIMETIC AGENTS
*MOUNJARO ST, QL; PA***
*OZEMPIC ST, QL; PA***
*RYBELSUS ST, QL; PA***
*TRULICITY ST, QL; PA***
*VICTOZA ST, QL; PA***

ANTIDIABETICS, INCRETIN MIMETIC COMBINATION AGENTS
*SOLIQUA ST; PA***

ANTIDIABETICS, INSULIN
FIASP
HUMULIN R U-500
LANTUS
LANTUS SOLOSTAR
NOVOLIN OTC
NOVOLOG
NOVOLOG MIX
TRESIBA

ANTIDIABETICS, INSULIN SENSITIZER
pioglitazone hcl

ANTIDIABETICS, INSULIN SENSITIZER/BIGUANIDE COMBINATION
pioglitazone hcl-metformin hcl

ANTIDIABETICS, INSULIN SENSITIZER/SULFONYLUREA COMBINATION
pioglitazone hcl-glimepiride

ANTIDIABETICS, SODIUM-GLUCO-TRANSPOR2 INHIB (SGLT2)/DPP-4 INHIBITOR/BIGUANIDE COMBINATIONS
*TRIJARDY XR ST; PA***

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

SYNJARDY **ST; PA****
SYNJARDY XR **ST; PA****
XIGDUO XR **ST; PA****

ANTIDIABETICS, SODIUM-GLUCOSE CO-TRANSPORTER 2(SGLT2) INHIBITOR/DPP-4 INHIBITOR COMBINATIONS

GLYXAMBI **ST; PA****

ANTIDIABETICS, SODIUM-GLUCOSE CO-TRANSPORTER 2(SGLT2) INHIBITORS

FARXIGA **ST; PA****
JARDIANCE **ST; PA****

ANTIDIABETICS, SULFONYLUREA

glimepiride
glipizide
glipizide ext-rel
glipizide xl

CALCIUM REGULATORS, BISPHOSPHONATES

alendronate sodium
ibandronate sodium
risedronate sodium

CALCIUM REGULATORS, MISCELLANEOUS

PROLIA **SP, PA, QL**

CALCIUM REGULATORS, PARATHYROID HORMONES

teriparatide (recombinant) **SP, PA, QL**
TYMLOS **SP, PA, QL**

CONTRACEPTIVES

desogestrel & ethinyl estradiol
desogestrel-ethinyl estradiol (biphasic)
desogestrel-ethinyl estradiol (triphasic)
drospirenone-ethinyl estradiol
ethynodiol diacet & eth estrad
levonorgestrel & eth estradiol
levonorgestrel-eth estradiol (triphasic)
levonorgestrel-ethinyl estradiol (91-day)
medroxyprogesterone acetate 150 mg/ml
norelgestromin/ethinyl estradiol - xulane
norethin acet & estrad-fe
norethindrone
norethindrone & eth estradiol
norethindrone & ethinyl estradiol-fe
norethindrone acet & eth estra
norethindrone-eth estradiol (triphasic)
norgestimate-ethinyl estradiol
norgestimate-ethinyl estradiol (triphasic)
norgestrel & ethinyl estradiol
ANNOVERA

ELLA
KYLEENA
LO LOESTRIN FE
MIRENA
NEXPLANON
NUVARING
PARAGARD INTRAUTERINE COP
PHEXXI
SKYLA

DIABETIC SUPPLIES

ACCU-CHEK AVIVA PLUS STRIPS AND KITS **1 OTC**
ACCU-CHEK GUIDE STRIPS AND KITS **1 OTC**
ACCU-CHEK SMARTVIEW STRIPS AND KITS **1 OTC**
BD INSULIN SYRINGES AND NEEDLES **OTC**
DEXCOM CONTINUOUS GLUCOSE MONITORING SYSTEM
OMNIPOD 5 INSULIN INFUSION PUMP
OMNIPOD DASH INSULIN INFUSION PUMP
OMNIPOD INSULIN INFUSION PUMP
ONETOUCH LANCETS / LANCING DEVICE **OTC**
ONETOUCH ULTRA STRIPS AND KITS **1 OTC**
ONETOUCH VERIO STRIPS AND KITS **1 OTC**
V-GO INSULIN INFUSION PUMP

ESTROGENS

estradiol
estradiol vaginal crm
estradiol/norethindrone
CLIMARA PRO
COMBIPATCH
IMVEXXY
VAGIFEM

HUMAN GROWTH HORMONES

HUMATROPE **SP, PA**
NORDITROPIN **SP, PA**
SOGROYA **SP, PA, QL**

PHOSPHATE BINDER AGENTS

calcium acetate caps
sevelamer carbonate

PROGESTINS

medroxyprogesterone acetate
norethindrone acetate
progesterone, micronized
ENDOMETRIN

SELECTIVE ESTROGEN RECEPTOR MODULATORS

rалoxifene hcl

THYROID AGENTS

levothyroxine sodium
liothyronine sodium

GASTROINTESTINAL

H2-RECEPTOR ANTAGONISTS

cimetidine
famotidine

PROTON PUMP INHIBITORS

lansoprazole delayed-rel
omeprazole delayed-rel
pantoprazole delayed-rel tabs

GENITOURINARY

BENIGN PROSTATIC HYPERPLASIA

alfuzosin ext-rel
doxazosin mesylate
finasteride
tamsulosin hcl
terazosin hcl

URINARY ANTISPASMODICS

oxybutynin chloride
oxybutynin ext-rel
tolterodine tartrate
trospium

VAGINAL ANTI-INFECTIVES

clindamycin cream
metronidazole vaginal gel
terconazole vaginal

HEMATOLOGIC

ANTICOAGULANTS

enoxaparin sodium
warfarin sodium
ELIQUIS
ELIQUIS STARTER PACK
XARELTO
XARELTO STARTER PACK

PLATELET AGGREGATION INHIBITORS

clopidogrel bisulfate
dipyridamole
dipyridamole ext-rel/aspirin
prasugrel hcl

IMMUNOLOGIC AGENTS

AUTOIMMUNE AGENTS (PHYSICIAN-ADMINISTERED)

AVSOLA **SP, PA, QL**
ILUMYA **SP, PA, QL**
REMICADE **SP, PA, QL**
SIMPONI ARIA **SP, PA, QL**
SKYRIZI **SP, PA, QL**
STELARA INTRAVENOUS **SP, PA, QL**

AUTOIMMUNE AGENTS (SELF-ADMINISTERED), ALL OTHER CONDITIONS

ADALIMUMAB-ADAZ **SP, PA, QL**
ENBREL **SP, PA, QL**
HADLIMA **SP, PA, QL**
HADLIMA PUSHTOUCH **SP, PA, QL**
HYRIMOZ **SP, PA, QL**

AUTOIMMUNE AGENTS (SELF-ADMINISTERED), ANKYLOSING SPONDYLITIS

ADALIMUMAB-ADAZ **SP, PA, QL**
COSENTYX **SP, PA, QL**
ENBREL **SP, PA, QL**
HADLIMA **SP, PA, QL**
HADLIMA PUSHTOUCH **SP, PA, QL**
HYRIMOZ **SP, PA, QL**
RINVOQ **SP, PA, QL**

AUTOIMMUNE AGENTS (SELF-ADMINISTERED), CROHN'S DISEASE

ADALIMUMAB-ADAZ **SP, PA, QL**
HADLIMA **SP, PA, QL**
HADLIMA PUSHTOUCH **SP, PA, QL**
HYRIMOZ **SP, PA, QL**
RINVOQ **SP, PA, QL**
SKYRIZI **SP, PA, QL**
STELARA SUBCUTANEOUS **SP, PA, QL**

AUTOIMMUNE AGENTS (SELF-ADMINISTERED), NON-RADIOGRAPHIC AXIAL SPONDYLOARTHRITIS

CIMZIA **SP, PA, QL**
COSENTYX **SP, PA, QL**
RINVOQ **SP, PA, QL**

AUTOIMMUNE AGENTS (SELF-ADMINISTERED), PSORIASIS

ADALIMUMAB-ADAZ **SP, PA, QL**
HADLIMA **SP, PA, QL**
HADLIMA PUSHTOUCH **SP, PA, QL**
HYRIMOZ **SP, PA, QL**
OTEZLA **SP, PA, QL**
SKYRIZI **SP, PA, QL**
SOTYKTU **SP, PA, QL**
STELARA SUBCUTANEOUS **SP, PA, QL**

TALTZ **SP, PA, QL**
TREMIFYA **SP, PA, QL**

AUTOIMMUNE AGENTS (SELF-ADMINISTERED), PSORIATIC ARTHRITIS

ADALIMUMAB-ADAZ **SP, PA, QL**
COSENTYX **SP, PA, QL**
ENBREL **SP, PA, QL**
HADLIMA **SP, PA, QL**
HADLIMA PUSHTOUCH **SP, PA, QL**
HYRIMOZ **SP, PA, QL**
OTEZLA **SP, PA, QL**
RINVOQ **SP, PA, QL**
SKYRIZI **SP, PA, QL**

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STELARA SUBCUTANEOUS **SP, PA, QL**
TREMIFYA **SP, PA, QL**

AUTOIMMUNE AGENTS (SELF-ADMINISTERED), RHEUMATOID ARTHRITIS

ADALIMUMAB-ADAZ **SP, PA, QL**
ENBREL **SP, PA, QL**
HADLIMA **SP, PA, QL**
HADLIMA PUSHTOUCH **SP, PA, QL**
HYRIMOZ **SP, PA, QL**
KEVZARA **SP, PA, QL**
ORENCIA CLICKJECT **SP, PA, QL**
ORENCIA SUBCUTANEOUS **SP, PA, QL**

RINVOQ **SP, PA, QL**
XELJANZ **SP, PA, QL**
XELJANZ XR **SP, PA, QL**

AUTOIMMUNE AGENTS (SELF-ADMINISTERED), ULCERATIVE COLITIS

ADALIMUMAB-ADAZ **SP, PA, QL**
HADLIMA **SP, PA, QL**
HADLIMA PUSHTOUCH **SP, PA, QL**
HYRIMOZ **SP, PA, QL**
RINVOQ **SP, PA, QL**
STELARA SUBCUTANEOUS **SP, PA, QL**

XELJANZ **SP, PA, QL**
XELJANZ XR **SP, PA, QL**
ZEPOSIA **SP, PA, QL**
ZEPOSIA STARTER KIT **SP, PA, QL**

OPHTHALMIC

ANTIGLAUCOMA

betaxolol hcl (ophth)
bimatoprost
brimonidine 0.15%, 0.2%
dorzolamide hcl
dorzolamide hcl-timolol maleate
latanoprost
timolol maleate (ophth)

DRY EYE DISEASE

RESTASIS **PA, QL**
XIIDRA **PA, QL**

RESPIRATORY

ANAPHYLAXIS TREATMENT AGENTS

*epinephrine (anaphylaxis)*² **QL; PA***
SYMJEPI **QL; PA***

ANTICHOLINERGIC/BETA AGONIST COMBINATIONS

ipratropium/albuterol inhalation soln **QL**
ANORO ELLIPTA **QL**
BEVESPI AEROSPHERE **QL**

ANTICHOLINERGICS

ipratropium inhalation solution **QL**
tiotropium bromide monohydrate **QL**
SPIRIVA **QL**
YUPELRI **QL**

BETA AGONISTS

albuterol inhalation soln **QL**
*albuterol sulfate, cfc-free aerosol*² **QL**
formoterol inhalation solution **QL**
levalbuterol nebulizer soln concentrate **QL**
levalbuterol, cfc-free aerosol **QL**
STRIVERDI RESPIMAT **QL**

LEUKOTRIENE RECEPTOR ANTAGONISTS

montelukast sodium

NASAL STEROIDS

flunisolide spray
fluticasone spray

STEROID INHALANTS

budesonide inh susp **QL; PA***

PULMICORT FLEXHALER³ **QL**

STEROID/BETA-AGONIST COMBINATIONS

*fluticasone-salmeterol*² **QL**
Wixela Inhub **QL**
AIRSUPRA **QL**
SYMBICORT **QL**

TOPICAL

DERMATOLOGY, ACNE

*clindamycin gel*² **QL; PA***
clindamycin lotion **QL; PA***
clindamycin solution **QL; PA***
erythromycin gel 2% **QL; PA***
erythromycin soln **QL; PA***
erythromycin/benzoyl peroxide **QL; PA***
sulfacetamide lotion 10%
tretinoin

DERMATOLOGY, ATOPIC DERMATITIS

pimecrolimus
tacrolimus (topical)
ADBRY **SP, PA, QL**
CIBINQO **SP, PA, QL**
DUPIXENT **SP, PA, QL**
RINVOQ **SP, PA, QL**

FOR YOUR INFORMATION: This drug list represents a summary of prescription coverage. It is not all-inclusive and does not guarantee coverage. In most instances, a brand-name drug for which a generic product becomes available will become non-formulary, with the generic product covered in its place, upon release of the generic product to the market. Unless specifically indicated, drug list products will include all oral dosage forms, except for orally disintegrating formulations. This list represents brand products in CAPS and generic products in lowercase *italics*. 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.

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

- [^] 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).
- ¹ 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.
- ² Listing does not include certain NDCs. 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.
- ³ Fluticasone HFA or QVAR REDHALER covered for members 6 years of age and under.

This document contains references to brand-name prescription drugs that are trademarks or registered trademarks of pharmaceutical manufacturers not affiliated with CVS Caremark®. 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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