



2019 Clinical Focus Formulary

The following is a list of the most commonly prescribed drugs. It represents an abbreviated version of the drug list (formulary) that is at the core of your prescription-drug benefit plan. The list is not all-inclusive and does not guarantee coverage. In addition to using this list, you are encouraged to ask your doctor to prescribe generic drugs whenever appropriate.

PLEASE NOTE: Brand-name drugs may move to nonformulary status if a generic version becomes available during the year. Not all the drugs listed are covered by all prescription-drug benefit programs; check your benefit materials for the specific drugs covered and the copayments for your prescription-drug benefit program. For specific questions about your coverage, please call the phone number printed on your member ID card.

| | | | | | |
|---------------------------------------|---|--|-----------------------------------|---|-------------------------------------|
| A | AZASITE | CIPRODEX | diazepam | ezetimibe-simvastatin ^{QL ST} | hydrochlorothiazide |
| acetaminophen-codeine | azelastine nasal spray ^{QL ST} | ciprofloxacin | diclofenac | F | hydrocodone-acetaminophen |
| ACTEMRA ^{† PA QL LD} [INJ] | azithromycin | citalopram ^{QL} | dicyclomine | famotidine | hydrocortisone |
| ACTHAR H.P. ^{† PA LD} [INJ] | B | clarithromycin | digoxin | FARXIGA ^{QL} | hydromorphone |
| acyclovir | baclofen | clindamycin hcl | diltiazem ER | fenofibrate ^{QL ST} | hydroxychloroquine |
| ADCIRCA ^{† PA QL} | benazepril | clindamycin-phosphate | divalproex DR | fenofibrate micronized ^{QL ST} | hydroxyzine hcl |
| ADEMPAS ^{† PA QL LD} | benzonatate | clindamycin-benzoyl peroxide ^{AE} | divalproex ER | fentanyl patch ^{QL} | hydroxyzine pamoate |
| ADVAIR DISKUS ^{QL} | BEPREVE | clobetasol propionate | DIVIGEL | FETZIMA ^{QL} | HYSINGLA ER^{QL} |
| ADVAIR HFA ^{QL} | BETHKIS ^{† PA QL LD} | clomiphene citrate | donepezil ^{QL} | FINACEA ^{AE PA} | I |
| AKYZEZO ^{PA QL} | bimatoprost eye soln ST | clonazepam | doxazosin | finasteride | ibandronate soln ^{† PA QL} |
| albuterol nebulizing soln | bisoprolol-hydrochlorothiazide | clonidine | doxycycline hyclate | FLOVENT DISKUS ^{QL} | ibandronate ^{QL} |
| alendronate | BREO ELLIPTA^{QL} | clopidogrel | doxycycline monohydrate | FLOVENT HFA ^{QL} | ibuprofen |
| allopurinol | BREVICON | clotrimazole-betamethasone | DUAVEE ^{QL} | fluconazole | ICLUSIG ^{† PA QL LD} |
| ALPHAGAN P 0.1% | BRILINTA ^{QL} | COLCRYST ^{QL} | duloxetine DR ^{QL ST} | fluocinonide | ILEVRO |
| alprazolam | budesonide ER | colesevelam ^{QL} | DYMISTA ^{QL ST} | floxetine | indapamide |
| ALREX | budesonide nebulizing soln ^{QL} | COMBIGAN | E | fluticasone nasal spray | indomethacin |
| amiodarone | buprenorphine-naloxone ^{QL} | COMBIPATCH ^{QL} | ELIDEL ^{PA} | FORTEO ^{† PA QL} [INJ] | INLYTA ^{† PA QL LD} |
| AMITIZA ^{PA QL} | buprenorphine patch ^{QL} | COMBIVENT RESPIMAT ^{QL} | ELIQUIS ^{QL} | FRAGMIN ^{QL} [INJ] | irbesartan |
| amitriptyline | bupropion | CORLANOR ^{PA QL} | enalapril | FUROSEMID ^{QL} | irbesartan-hydrochlorothiazide |
| amlodipine | bupropion ER | COSENTYX ^{† PA LD} [INJ] | ENBREL ^{† PA QL} [INJ] | FYCOMPA ^{QL} | IRESSA ^{† PA QL LD} |
| amlodipine-benazepril ST | buspirone | CREON | ENJUVA ^{QL} | G | isosorbide dinitrate |
| amlodipine-valsartan ^{QL ST} | butalbital-acetaminophen-caffeine ^{QL} | CRINONE | enoxaparin [INJ] | gabapentin | isosorbide mononitrate |
| amoxicillin | BYSTOLIC^{QL ST} | cyanocobalamin [INJ] | ENSTILAR ^{QL} | GELNIQUE ST | isotretinoin ^{PA} |
| amoxicillin-clavulanate | C | cyclobenzaprine | ENTRESTO ^{PA QL} | gemfibrozil | J |
| anastrozole | CANASA | D | EPIDUO FORTE ^{AE} | GENERESS FE | JANUMET ^{QL} |
| ANORO ELLIPTA ^{QL} | carbidopa-levodopa | dalfampridine ^{PA QL} | EPIPEN ^{QL} [INJ] | GENOTROPIN ^{† PA} [INJ] | JANUMET XR ^{QL} |
| APRISO ^{QL} | carvedilol | DALIRESP ^{PA QL} | EPIPEN JR ^{QL} [INJ] | GILENYA ^{† PA QL} | JANUVIA ^{QL} |
| ARCAPTA NEOHALER ^{QL} | cefdinir | DAYTRANA ^{AE QL} | ergocalciferol | GILOTIRIF ^{† PA QL LD} | JARDIANCE ^{QL} |
| aripiprazole ^{QL} | cefuroxime axetil | desloratadine ^{QL} | erythromycin eye ointment | glatiramer ^{† PA QL} [INJ] | JENTADUETO ^{QL} |
| ARISTADA ^{PA QL} [INJ] | celecoxib ^{QL ST} | desonide | escitalopram | glimepiride | JENTADUETO XR ^{QL} |
| ARNUITY ELLIPTA ^{QL} | cephalexin | desvenlafaxine ^{QL ST} | esomeprazole DR ^{QL ST} | glipizide | K |
| ASMANEX HFA ^{QL} | CETROTIDE ^{† PA} [INJ] | dexamethasone | estradiol | glipizide ER | KALBITOR ^{† PA LD} [INJ] |
| ASMANEX TWISTHALER ^{QL} | CHANTIX ^{QL} | DEXILANT ^{QL ST} | estradiol patch ^{QL} | GLUCAGON ^{QL} [INJ] | ketoconazole |
| atenolol | chlorhexidine gluconate | dexamethylphenidate ^{AE QL} | estradiol vaginal cream | glyburide | KISQALI ^{† PA QL} |
| atenolol-chlorthalidone | chorionic gonadotropin [†] [INJ] | dexamethylphenidate ER ^{AE QL} | ESTROSTEP FE | GONAL-F [†] | KITABIS PAK ^{† PA QL LD} |
| atomoxetine ^{AE QL} | CIALIS ^{QL} | dextroamphetamine-amphetamine ^{AE} | eszopiclone ^{QL ST} | GONAL-F RFF [†] | L |
| atorvastatin | | dextroamphetamine-amphetamine ER ^{AE} | etodolac | GRANIX ^{† PA} [INJ] | labetalol |
| AVONEX ^{† PA QL} [INJ] | | | EUFLEXXA ^{† PA QL} [INJ] | guanfacine ER ^{QL} | lamotrigine |
| | | | EVEKEO ^{AE QL} | H | |
| | | | EXTAVIA ^{† PA QL} [INJ] | HUMIRA ^{† PA LD} [INJ] | |
| | | | ezetimibe ^{QL ST} | hydralazine | |

(Continued)

| | | | | | |
|---------------------------------------|---|---------------------------------------|--|--|--------------------------------|
| lansoprazole DR | metronidazole vaginal gel | ondansetron ^{QL} | PULMICORT FLEXHALER ^{QL} | SUPREP ^{QL} | V |
| LANTUS [INJ] | MINASTRIN 24 FE | ONETOUCH ^{QL} | Q | SYNJARDY ^{QL} | valacyclovir |
| latanoprost eye soln | minocycline | OPSUMIT ^{† PA QL LD} | QNASL ^{QL ST} | SYNJARDY XR ^{QL} | valsartan |
| LATUDA ^{QL} | MIRENA ^{LD} | ORACEA ^{PA QL} | quetiapine ^{QL} | SYMBICORT ^{QL} | valsartan-hydrochlorothiazide |
| LAZANDA ^{PA QL} | MIRVASO ^{AE PA QL} | ORTHOVISC ^{† PA QL [INJ]} | quetiapine ER ^{QL} | SYMLINPEN ^{PA [INJ]} | VASCEPA ^{QL} |
| LETAIRIS ^{† PA QL LD} | mometasone | OTEZLA ^{† PA QL} | quinapril | T | VELTASSA ^{QL} |
| LEVEMIR [INJ] | MONOVISC ^{† PA QL [INJ]} | oxcarbazepine | QVAR REDIHALER ^{QL} | TACLONEX SUSPENSION | venlafaxine |
| LEVEMIR FLEXTOUCH [INJ] | montelukast | oxybutynin ER | R | tacrolimus ointment | venlafaxine ER ST |
| levetiracetam | morphine sulfate ER ^{QL} | oxycodone | rabeprazole ST | tamoxifen | VENTOLIN HFA ^{QL} |
| levocetirizine | MOVANTIK ^{PA QL} | oxycodone-acetaminophen ^{QL} | raloxifene ^{QL} | tamsulosin | verapamil ER |
| levofloxacin | MOXEZA ST | OXYCONTIN ^{QL} | ramipril | TARCEVA ^{† PA QL LD} | VESICARE ^{QL ST} |
| levofloxacin eye soln | moxifloxacin eye soln ST | OZEMPIC ^{PA QL [INJ]} | RANEXA ^{QL} | TAZORAC ^{AE} | VIBERZI ^{PA QL} |
| levothyroxine | mupirocin | P | ranitidine | TECFIDERA ^{† PA QL LD} | VICTOZA ^{PA QL [INJ]} |
| lidocaine patches ^{QL} | MUSE ^{QL} | paliperidone ER ^{QL} | RAPAFLO ^{QL} | TEKTURNAL ^{QL ST} | VIIBRYD ^{QL ST} |
| LINZESS ^{PA QL} | MYRBETRIQ ^{QL ST} | pantoprazole | rasagiline ^{QL} | TEKTURNAL HCT ^{QL ST} | VIMPAT ^{QL} |
| liothyronine | N | paroxetine | RASUVO ^{† PA QL [INJ]} | temazepam ST | VIOKACE |
| lisinopril | nabumetone | paroxetine ER ST | REBIF ^{† PA QL [INJ]} | terazosin | VYVANSE ^{AE QL} |
| lisinopril-hydrochlorothiazide | naltrexone ^{QL} | PAZEO | RECTIV | terconazole vaginal | W |
| LO LOESTRIN FE | NAMZARIC ^{QL ST} | penicillin v potassium | RELISTOR ^{PA QL [INJ]} | testosterone cypionate ^{PA [INJ]} | warfarin |
| lorazepam | naproxen | PENTASA | REMICADE ^{† PA [INJ]} | testosterone topical ^{PA} | X-Y |
| losartan | NARCAN | PERFOROMIST | RESTASIS ^{PA QL} | timolol eye soln | XARELTO ^{QL} |
| losartan-hydrochlorothiazide | neomycin-polymyxin-hydrocortisone otic soln | PICATO ^{PA} | rizatriptan ^{QL} | tizanidine ^{QL} | XELJANZ ^{† PA QL} |
| LOTEMAX | NEUPOGEN ^{† PA [INJ]} | pioglitazone | ropinirole | TOBI PODHALER ^{† PA QL LD} | XELJANZ XR ^{† PA QL} |
| lovastatin | NEVANAC | PLEGRIDY ^{† PA QL LD [INJ]} | rosuvastatin ^{QL ST} | TOBRADEX OINTMENT | XIFAXAN ^{PA QL} |
| LYRICA ^{QL ST} | niacin ER ^{QL} | polymyxin-trimethoprim eye soln | S | TOBRADEX ST | XIGDUO XR ^{QL} |
| M | nifedipine ER | potassium chloride ER | SANCUSO ^{PA QL} | tobramycin eye soln | XULTOPHY ^{QL [INJ]} |
| MAKENA ^{† PA QL LD [INJ]} | nitrofurantoin | POTIGA ^{QL} | SAVELLA ^{QL} | tobramycin-dexamethasone | Z |
| MAVYRET ^{† PA QL} | NORDITROPIN ^{† PA [INJ]} | pramipexole | SEGLUROMET ^{QL} | tolterodine ER ^{QL ST} | ZENPEP |
| meclizine | nortriptyline | prasugrel ^{QL} | SEREVENT DISKUS ^{QL} | topiramate | ZEPATIER ^{† PA QL} |
| medroxyprogesterone | NOVOLIN [INJ] | pravastatin | sertraline | TOUJEO SOLOSTAR [INJ] | zolmitriptan ^{QL} |
| meloxicam | NOVOLOG [INJ] | prednisolone | sevelamer | TOVIAZ ^{QL ST} | zolpidem ^{QL} |
| memantine ER ^{QL ST} | NUCYNTA ^{QL} | prednisone | SIGNIFOR ^{† PA QL} | TRACLEER ^{† PA QL LD} | zolpidem ER ^{QL ST} |
| mesalamine DR | NUCYNTA ER ^{QL} | PREMARIN TABS ^{QL} | SIGNIFOR LAR ^{† PA QL} | TRADJENTA ^{QL} | ZOMIG NASAL ^{QL} |
| metaxalone | NUVARING ^{QL} | PREMARIN VAGINAL CREAM | sildenafil ^{QL} | tramadol | ZONTIVITY ^{QL} |
| metformin | nystatin | PREMPRO ^{QL} | simvastatin | TRAVATAN Z ST | ZYLET |
| methimazole | nystatin oral suspension | PREPOPIK ^{QL} | SOMATULINE DEPOT ^{† PA QL LD [INJ]} | trazodone | ZYTIGA ^{† PA QL LD} |
| methocarbamol | O | PROAIR HFA ^{QL} | SPIRIVA HANDIHALER ^{QL} | TRESIBA FLEXTOUCH [INJ] | |
| methotrexate | OFEV ^{† PA QL LD} | PROAIR RESPICLICK ^{QL} | SPIRIVA RESPIMAT ^{QL} | triamcinolone | |
| methylphenidate ^{AE QL} | olanzapine ^{QL} | PROCITR ^{† PA [INJ]} | spironolactone | triamterene-hydrochlorothiazide | |
| methylphenidate ER ^{AE QL} | olmesartan ^{QL ST} | progesterone micronized | SPRYCEL ^{† PA QL} | TRULICITY ^{PA QL [INJ]} | |
| methylprednisolone | olmesartan-amlodipine ^{QL ST} | PROLENSA | STEGLATRO ^{QL} | TYMLOS ^{† PA QL [INJ]} | |
| metoclopramide | olmesartan-hydrochlorothiazide ^{QL ST} | promethazine | STEGLUJAN ^{QL} | U | |
| metoprolol succinate ER ST | olopatadine eye soln | promethazine-dextromethorphan | STELARA ^{† PA QL [INJ]} | ULORIC ^{QL} | |
| metoprolol tartrate | omeprazole DR | propranolol | STIOLTO RESPIMAT ^{QL} | UPTRAVI ^{† PA QL LD} | |
| metronidazole | | propranolol ER | SUBOXONE SL FILM ^{QL} | | |
| metronidazole topical | | | sulfamethoxazole-trimethoprim | | |
| | | | sumatriptan ^{QL} | | |



2019 Clinical Focus Formulary

Examples of Non-Preferred Medications With Selected Formulary Alternatives

The following is a list of some non-preferred brand-name medications with examples of selected alternatives that are on the formulary. Column 1 lists examples of non-preferred medications. Column 2 lists some alternatives that can be prescribed.

| Non-Preferred Medications | Sample Preferred Alternative(s) |
|-----------------------------------|---|
| AEROSPAN (flunisolide) | ARNUITY ELLIPTA ^{QL} , ASMANEX HFA ^{QL} , ASMANEX TWISTHALER ^{QL} , FLOVENT DISKUS ^{QL} , FLOVENT HFA, ^{QL} PULMICORT FLEXHALER ^{QL} , QVAR ^{QL} |
| ALVESCO (ciclesonide) | ARNUITY ELLIPTA ^{QL} , ASMANEX HFA ^{QL} , ASMANEX TWISTHALER ^{QL} , FLOVENT DISKUS ^{QL} , FLOVENT HFA, ^{QL} PULMICORT FLEXHALER ^{QL} , QVAR ^{QL} |
| AUVI-Q (epinephrine solution) | EPIPEN ^{QL} , EPIPEN JR ^{QL} |
| BRAVELLE (urofollitropin) | GONAL-F [†] , GONAL-F RFF [†] |
| FOLLISTIM AQ (follitropin beta) | GONAL-F [†] , GONAL-F RFF [†] |
| INCRUSE ELLIPTA (umeclidinium) | SPIRIVA ^{QL} |
| PANCREAZE (pancrelipase DR) | CREON, ZENPEP |
| PERTZYE (pancrelipase DR) | CREON, ZENPEP |
| PROVENTIL HFA (albuterol) | PROAIR HFA ^{QL} , VENTOLIN HFA ^{QL} |
| QTERN (dapagliflozin-saxagliptin) | GLYXAMBI ^{QL} |
| TUDORZA PRESSAIR (aclidinium) | SPIRIVA ^{QL} |
| XOPENEX HFA (levalbuterol) | PROAIR HFA ^{QL} , VENTOLIN HFA ^{QL} |

| | |
|--|--|
| <p>KEY</p> <p>[INJ] = Injectable Drug</p> <p>ER = Extended-Release</p> <p>DR = Delayed Release</p> <p>AE = Age Edit</p> <p>LD= Limited Distribution</p> <p>PA = Prior Authorization</p> <p>QL = Quantity Limits</p> <p>ST = Step Therapy</p> <p>† Indicates specialty medications</p> | <p>For the member: 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 US Food and Drug Administration (FDA) may not be covered upon release to market.</p> <p>WellDyneRx may contact your provider after receiving a prescription to request consideration of a drug list product or generic equivalent. This may result in your provider prescribing, when medically appropriate, a different brand-name product or generic equivalent in place of the original prescription. Generic medications contain the same active ingredients as their corresponding brand-name medications, although they may look different in color or shape. They have been FDA-approved under strict standards.</p> <p>In most instances, a brand-name drug for which a generic product becomes available will be designated as a non-preferred or excluded option upon release of the generic product to the market.</p> <p>For the physician: Generics should be considered the first-line of prescribing. Please prescribe preferred products and allow generic substitutions when medically appropriate. Brand-name drugs are listed in CAPITAL letters; generic drugs are listed in lower case letters.</p> <p>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 market.</p> |
|--|--|