

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.**

# Clinical Focus (2021)

<p><b>A</b></p> <p>abiraterone<sup>QL, PA, †</sup>          acetaminophen-codeine          ACTEMRA<sup>PA, †</sup>          acyclovir          adapalene-benzoyl peroxide<sup>AE</sup>          ADEMPAS<sup>QL, PA, †</sup>          ADVAIR DISKUS<sup>QL</sup>          ADVAIR HFA<sup>QL</sup>          AFSTYLA<sup>†</sup>          AIMOVIG<sup>QL, PA, †</sup>          AJOVY<sup>QL, PA, †</sup>          AKYNZEO<sup>QL, PA</sup>          albuterol HFA<sup>QL</sup>          alendronate          alfuzosin ER          aliskiren fumarate<sup>QL</sup>          allopurinol          alprazolam          ambrisentan<sup>QL, PA, †</sup>          amiodarone          AMITIZA<sup>QL, PA</sup>          amitriptyline          amlodipine          amlodipine-benzepri<sup>ST</sup>          amlodipine-valsartan<sup>QL, ST</sup>          amoxicillin          amoxicillin-clavulanate          amphetamine          dextroamphetamine ER<sup>ST, AE</sup>          amphetamine sulfate<sup>QL, ST, AE</sup>          amphetamine-dextroamphetamine<sup>AE</sup>          anastrozole          ANORO ELLIPTA<sup>QL</sup>          aprepitant<sup>QL</sup>          APRISO<sup>QL</sup>          ARCAPTA NEOHALER<sup>QL</sup>          aripiprazole<sup>QL</sup>          ARISTADA<sup>QL, PA</sup>          armodafinil<sup>QL, PA</sup>          ARMOUR THYROID          ARNUITY ELLIPTA<sup>QL</sup>          ASMANEX HFA<sup>QL</sup>          atenolol          atenolol-chlorthalidone          atomoxetine<sup>QL, AE</sup>          atorvastatin          ATRIPLA<sup>QL, †</sup>          ATROVENT HFA<sup>QL</sup>          AUBAGIO<sup>QL, PA, †</sup>          AZASITE          azathioprine          azelaic acid<sup>AE</sup>          azelastine</p>	<p>azelastine-fluticasone<sup>QL</sup>          azithromycin</p> <p><b>B</b></p> <p>baclofen          benazepril          benazepril-HCTZ          BETASERON<sup>QL, PA, †</sup>          bimatoprost<sup>ST</sup>          bisoprolol-HCTZ          bosentan<sup>QL, PA, †</sup>          BREO ELLIPTA<sup>QL</sup>          BRILINTA<sup>QL</sup>          brimonidine drops          bromfenac drops          budesonide ER          budesonide<sup>QL</sup>          buprenorphine<sup>QL</sup>          bupropion          bupropion ER (smoking deterrent)<sup>QL</sup>          bupropion ER (SR)          bupropion ER (XL)          buspirone          butalbital-apap-cafeine<sup>QL</sup>          butalbital-asa-cafeine<sup>QL</sup>          BYSTOLIC<sup>QL, ST</sup></p> <p><b>C</b></p> <p>cabergoline          calcitriol          CANASA          carbamazepine          carbidopa-levodopa          carbidopa-levodopa ER          carvedilol          cefadroxil          cefdinir          cefuroxime          celecoxib<sup>QL</sup>          cephalixin          CETROTIDE<sup>PA, †</sup>          CHANTIX<sup>QL</sup>          chlorhexidine gluconate          ciclopirox          cinacalcet<sup>PA, †</sup>          ciprofloxacin          ciprofloxacin-dexamethasone drops          citalopram<sup>QL</sup>          clarithromycin          clindamycin          clindamycin-benzoyl peroxide<sup>AE</sup>          clobetasol propionate          clonazepam          clonidine</p>	<p>clopidogrel          clotrimazole          clotrimazole-betamethasone          COLCRYS<sup>QL</sup>          colestipol          COMBIPATCH<sup>QL</sup>          COMBIVENT RESPIMAT<sup>QL</sup>          CORLANOR<sup>QL, PA</sup>          COSENTYX<sup>PA, †</sup>          CREON          cromolyn drops          cyanocobalamin [INJ]          cyclobenzaprine          cyproheptadine</p> <p><b>D</b></p> <p>dalfampridine ER<sup>QL, PA, †</sup>          DALIRESP<sup>QL, PA</sup>          DAYTRANA<sup>QL, AE</sup>          deferasirox<sup>PA, †</sup>          DESCOVY<sup>QL, †</sup>          desloratadine<sup>QL</sup>          desonide<sup>ST</sup>          desvenlafaxine ER<sup>QL, ST</sup>          dexamethasone          dexmethylphenidate ER<sup>QL, AE</sup>          dexmethylphenidate<sup>QL, AE</sup>          diazepam          diclofenac          dicyclomine          digoxin          diltiazem ER          dimethyl fumarate<sup>QL, PA, †</sup>          diphenoxylate-atropine          divalproex          divalproex ER          DIVIGEL          donepezil<sup>QL</sup>          dorzolamide-timolol drops          doxazosin mesylate          doxepin          doxycycline hyclate          doxycycline monohydrate          DUAVEE<sup>QL</sup>          duloxetine<sup>QL</sup>          DUPIXENT<sup>QL, PA, †</sup>          dutasteride<sup>QL</sup></p> <p><b>E</b></p> <p>econazole nitrate          ELIQUIS<sup>QL</sup>          ELMIRON          EMGALITY<sup>QL, PA, †</sup>          enalapril maleate          enalapril-HCTZ</p>	<p>ENBREL<sup>QL, PA, †</sup>          Endometrin          ENJUVA          enoxaparin sodium          ENSTILAR<sup>QL</sup>          ENTRESTO<sup>QL, PA</sup>          EPIDUO FORTE<sup>AE</sup>          epinastine drops          epinephrine<sup>QL</sup> [INJ]          EPIPEN<sup>QL</sup>          ergocalciferol          erlotinib<sup>QL, PA, †</sup>          erythromycin          escitalopram oxalate          esomeprazole magnesium<sup>QL, ST</sup>          estradiol<sup>QL</sup>          eszopiclone<sup>QL, ST</sup>          etodolac          EUFLEXXA<sup>QL, PA, †</sup>          exemestane          ezetimibe<sup>QL, ST</sup>          ezetimibe-simvastatin<sup>QL, ST</sup></p> <p><b>F</b></p> <p>FARXIGA<sup>QL</sup>          febuxostat          fenofibrate micronized<sup>QL</sup>          fentanyl<sup>QL</sup>          FETZIMA<sup>QL</sup>          finasteride          FLOVENT DISKUS<sup>QL</sup>          FLOVENT HFA<sup>QL</sup>          fluconazole          fludrocortisone acetate          fluciclonide          fluorometholone          fluorouracil<sup>†</sup>          fluoxetine          fluvoxamine maleate          folic acid          FORTEO<sup>QL, PA, †</sup>          FRAGMIN<sup>QL</sup>          FULPHILA<sup>QL, PA, †</sup>          furosemide          FYCOMPA<sup>QL</sup></p> <p><b>G</b></p> <p>gabapentin          GAMMAGARD<sup>PA, †</sup>          GAMUNEX-C<sup>PA, †</sup>          GELNIQUE<sup>ST</sup>          gemfibrozil          GENOTROPIN<sup>PA, †</sup>          gentamicin sulfate          GENVOYA<sup>QL, †</sup>          GILENYA<sup>QL, PA, †</sup></p>	<p>GILOTRIF<sup>QL, PA, †</sup>          glatiramer acetate<sup>QL, PA, †</sup>          glatopa<sup>QL, PA, †</sup>          glimepiride          glipizide          glipizide ER          glipizide XL          GLUCAGON<sup>QL</sup> [INJ]          glyburide          GLYXAMBI<sup>QL</sup>          GONAL-F RFF<sup>†</sup>          GONAL-F<sup>†</sup> [INJ]          GRANIX<sup>PA, †</sup>          guanfacine          guanfacine ER<sup>QL</sup></p> <p><b>H</b></p> <p>HUMIRA<sup>PA, †</sup>          hydralazine          hydrochlorothiazide          hydrocodone-acetaminophen          hydrocodone-ibuprofen          hydrocortisone          hydromorphone          hydromorphone ER          hydroxychloroquine sulfate          hydroxyzine          hyoscyamine sulfate          HYSINGLA ER<sup>QL</sup></p> <p><b>I</b></p> <p>ibandronate<sup>QL, PA, †</sup>          ICLUSIG<sup>QL, PA, †</sup>          imatinib mesylate<sup>QL, PA, †</sup>          IMBRUVICA<sup>QL, PA, †</sup>          indomethacin          INLYTA<sup>QL, PA, †</sup>          ipratropium bromide          ipratropium-albuterol          irbesartan          irbesartan-HCTZ          IRESSA<sup>QL, PA, †</sup>          isosorbide dinitrate          isosorbide mononitrate ER          isotretinoin<sup>AE</sup></p> <p><b>J</b></p> <p>JANUMET XR<sup>QL</sup>          JANUMET<sup>QL</sup>          JANUVIA<sup>QL</sup>          JARDIANCE<sup>QL</sup></p> <p><b>K</b></p> <p>KALBITOR<sup>PA, †</sup>          ketoconazole          ketorolac drops          ketorolac tromethamine</p>
---	--	--	--	---

(continued)

THIS DOCUMENT LIST IS EFFECTIVE 1/1/2021 THROUGH 12/31/2021. UPDATED ON 1/1/2021.  
 THIS LIST AND COVERAGES FOR THESE DRUGS ARE SUBJECT TO CHANGE AND TO EMHP PLAN DESIGN GUIDELINES..

KISQALI<sup>QL, PA, †</sup>  
 KITABIS PAK<sup>QL, PA, †</sup>  
 KOVALTRY<sup>†</sup>  
**L**  
 labetalol  
 lactulose  
 lamotrigine  
 lansoprazole  
 LANTUS  
 latanoprost  
 LATUDA<sup>QL, ST</sup>  
 LAZANDA<sup>QL, PA</sup>  
 leflunomide  
 letrozole  
 LEVEMIR  
 levetiracetam  
 levocetirizine  
 levofloxacin  
 levothyroxine sodium  
 lidocaine viscous  
 lidocaine<sup>QL</sup>  
 LINZESS<sup>QL, PA</sup>  
 liothyronine sodium  
 lisinopril  
 lithium  
 lithium ER  
 LIVALO<sup>QL, ST</sup>  
 LO LOESTRIN FE  
 lorazepam  
 losartan  
 losartan-HCTZ  
 loteprednol etabonate  
 lovastatin  
 LUMIGAN<sup>ST</sup>  
**M**  
 MAKENA<sup>QL, †</sup>  
 MAVYRET<sup>QL, PA, †</sup>  
 MAYZENT<sup>QL, LD, PA, †</sup>  
 meclizine  
 medroxyprogesterone  
 acetate<sup>QL</sup>  
 meloxicam  
 memantine ER<sup>QL, ST</sup>  
 memantine<sup>QL</sup>  
 mercaptopurine  
 mesalamine<sup>QL</sup>  
 metformin  
 metformin ER<sup>QL</sup>  
 methadone  
 methimazole  
 methocarbamol  
 methotrexate  
 methylphenidate ER<sup>QL, AE</sup>  
 methylphenidate<sup>QL, AE</sup>  
 methylprednisolone  
 metoclopramide  
 metoprolol succinate ER  
 metoprolol tartrate  
 metronidazole  
 minocycline  
 MIRENA  
 mirtazapine  
 MIRVASO<sup>QL, PA</sup>

misoprostol  
 modafinil<sup>QL, PA</sup>  
 mometasone furoate  
 MONOVISC<sup>QL, PA, †</sup>  
 montelukast sodium  
 morphine sulfate  
 morphine sulfate ER<sup>QL</sup>  
 MOVANTIK<sup>QL, PA</sup>  
 MOXEZA<sup>ST</sup>  
 moxifloxacin<sup>ST</sup>  
 mupirocin  
 mycophenolate mofetil  
 MYRBETRIQ<sup>QL, ST</sup>

**N**  
 nabumetone  
 naltrexone<sup>QL</sup>  
 NAMZARIC<sup>QL, ST</sup>  
 naproxen  
 naratriptan<sup>QL</sup>  
 NARCAN  
 neomycin-polymyxin-  
 hydrocortisone  
 NEUPOGEN<sup>PA, †</sup> [INJ]  
 NEVANAC  
 nifedipine ER  
 nitrofurantoin  
 nitroglycerin  
 nortriptyline  
 NOVOEIGHT<sup>†</sup>  
 NOVOLIN 70/30  
 NOVOLIN N  
 NOVOLIN R [INJ]  
 NOVOLOG  
 NOVOLOG FLEXPEN  
 NOXAFIL<sup>PA</sup>  
 NUCALA<sup>PA, †</sup>  
 nystatin

**O**  
 OFEV<sup>QL, PA, †</sup>  
 olanzapine<sup>QL</sup>  
 olmesartan-amlodipine-  
 HCTZ<sup>QL, ST</sup>  
 olmesartan-HCTZ<sup>QL, ST</sup>  
 olmesartan<sup>QL, ST</sup>  
 olopatadine  
 omega-3-acid ethyl esters<sup>QL</sup>  
 ondansetron  
 ONETOUCH ULTRA  
 BLUE<sup>QL</sup>  
 ONETOUCH VERIO<sup>QL</sup>  
 OPDIVO<sup>PA, †</sup>  
 ORILISSA<sup>QL, PA, †</sup>  
 ORTHOVISC<sup>QL, PA, †</sup>  
 osetamivir<sup>QL</sup>  
 OTEZLA<sup>QL, PA, †</sup>  
 oxcarbazepine  
 oxybutynin  
 oxybutynin ER  
 oxycodone  
 OXYCONTIN<sup>QL</sup>  
 oxyycodone-  
 acetaminophen<sup>QL</sup>  
 OZEMPIC<sup>QL, PA</sup>

**P**  
 paliperidone ER<sup>QL, ST</sup>  
 pantoprazole  
 paroxetine  
 paroxetine ER<sup>ST</sup>  
 peg 3350 electrolyte soln  
 penicillin v potassium  
 PENTASA  
 PERFOROMIST  
 permethrin  
 phenazopyridine  
 phenytoin  
 pimecrolimus  
 pioglitazone  
 polymyxin b-trimethoprim  
 drops  
 posaconazole<sup>PA</sup>  
 potassium chloride ER  
 potassium citrate ER  
 pramipexole  
 prasugrel<sup>QL</sup>  
 pravastatin  
 prazosin  
 prednisolone  
 prednisone  
 pregabalin<sup>QL, ST</sup>  
 PREMARIN<sup>QL</sup>  
 PREMPRO<sup>QL</sup>  
 prochlorperazine  
 PROCRI<sup>PA, †</sup> [INJ]  
 progesterone  
 progesterone micronized  
 promethazine  
 promethazine-codeine  
 promethazine-DM  
 propranolol  
 propranolol ER  
 PULMICORT FLEXHALER<sup>QL</sup>  
 pyridostigmine

**Q**  
 QNASL<sup>QL</sup>  
 quetiapine ER<sup>QL, ST</sup>  
 quetiapine<sup>QL</sup>  
 quinapril  
 QVAR REDHALER<sup>QL</sup>

**R**  
 raloxifene<sup>QL</sup>  
 ramipril  
 ranolazine ER<sup>QL</sup>  
 rasagiline<sup>QL, ST</sup>  
 RASUVO<sup>QL, PA, †</sup>  
 REBIF<sup>QL, PA, †</sup>  
 RELISTOR<sup>QL, PA</sup>  
 REMICADE<sup>PA, †</sup>  
 REPATHA<sup>QL, PA, †</sup>  
 RESTASIS<sup>QL, PA</sup>  
 REVLMID<sup>QL, PA, †</sup>  
 RINVOQ<sup>QL, PA, †</sup>  
 risperidone  
 ritonavir<sup>QL, †</sup>  
 rizatriptan<sup>QL</sup>  
 ropinirole  
 ropinirole ER<sup>QL, ST</sup>

rosuvastatin<sup>QL, ST</sup>  
 RUZURGI<sup>QL, PA, †</sup>  
**S**  
 SANCUSO<sup>QL, PA</sup>  
 SAVELLA<sup>QL</sup>  
 SEREVENT DISKUS<sup>QL</sup>  
 sertraline  
 sevelamer carbonate  
 SIGNIFOR LAR<sup>QL, PA, †</sup>  
 SIGNIFOR<sup>QL, PA, †</sup>  
 sildenafil citrate<sup>QL</sup>  
 silodosin  
 simvastatin  
 SKYRIZI<sup>QL, PA, †</sup>  
 sodium fluoride  
 sodium sulfacetamide  
 solifenacin succinate<sup>QL, ST</sup>  
 SOMATULINE DEPOT<sup>QL, PA, †</sup>  
 sotalol  
 SPIRIVA HANDIHALER<sup>QL</sup>  
 SPIRIVA RESPIMAT<sup>QL</sup>  
 spironolactone  
 SPRYCEL<sup>QL, PA, †</sup>  
 STELARA<sup>PA, †</sup>  
 STIOLTO RESPIMAT<sup>QL</sup>  
 STRIBILD<sup>QL, †</sup>  
 SUBOXONE<sup>QL</sup>  
 sucralfate  
 sulfamethoxazole-  
 trimethoprim  
 sulfasalazine  
 sumatriptan<sup>QL</sup>  
 SUPREP  
 SYMBICORT<sup>QL</sup>  
 SYNJARDY XR<sup>QL</sup>  
 SYNJARDY<sup>QL</sup>  
 SYNTHROID

**T**  
 tacrolimus  
 tadalafil<sup>QL, ST</sup>  
 tamoxifen  
 tamsulosin  
 temazepam  
 tenofovir disoproxil  
 fumarate<sup>QL, †</sup>  
 terazosin  
 terbinafine  
 terconazole  
 testosterone cypionate  
 testosterone<sup>PA</sup>  
 timolol maleate  
 TIVICAY<sup>QL, †</sup>  
 tizanidine<sup>QL, ST</sup>  
 TOBI PODHALER<sup>QL, PA, †</sup>  
 TOBRADEX ST  
 tobramycin  
 tobramycin inhalation  
 solution<sup>QL, PA, †</sup>  
 tobramycin-dexamethasone  
 tolterodine  
 tolterodine ER<sup>QL, ST</sup>  
 topiramate  
 TOUJEO

TOVIAZ<sup>QL, ST</sup>  
 tramadol  
 tramadol-acetaminophen  
 trazodone  
 TREMFYA<sup>QL, PA, †</sup>  
 TRESIBA  
 triamcinolone  
 triamterene-HCTZ  
 triazolam  
 TRIUMEQ<sup>QL, †</sup>  
 TRULICITY<sup>QL, PA</sup>  
 TRUVADA<sup>QL, †</sup>  
 TYMLOS<sup>QL, PA, †</sup>

**U**  
 UPTRAVI<sup>QL, PA, †</sup>  
**V**  
 valacyclovir  
 valsartan  
 valsartan-HCTZ  
 VENTASSA<sup>QL</sup>  
 VENCLEXTA<sup>QL, PA, †</sup>  
 venlafaxine  
 venlafaxine ER  
 verapamil ER  
 VIBERZI<sup>QL, PA</sup>  
 VICTOZA<sup>QL, PA</sup>  
 VIIBRYD<sup>QL, ST</sup>  
 VIMPAT<sup>QL</sup>  
 VIOKACE  
 VIOREAD<sup>QL, †</sup>  
 VIVITROL<sup>PA, †</sup>  
 VYVANSE<sup>QL, AE, ST</sup>

**W**  
 warfarin sodium

**X**  
 XARELTO<sup>QL</sup>  
 XELJANZ XR<sup>QL, PA, †</sup>  
 XELJANZ<sup>QL, PA, †</sup>  
 XEMBIFY<sup>PA, †</sup>  
 XIFAXAN<sup>QL, PA</sup>  
 XIGDUO XR<sup>QL</sup>  
 XIIDRA<sup>QL, PA</sup>  
 XOLAIR<sup>PA, †</sup>  
 XULTOPHY<sup>QL</sup>

**Y-Z**  
 zaleplon  
 ZENPEP  
 ZIEXTENZO<sup>QL, PA, †</sup>  
 zolmitriptan<sup>QL</sup>  
 zolpidem ER<sup>QL, ST</sup>  
 zolpidem<sup>QL</sup>  
 ZOMIG<sup>QL</sup>  
 zonisamide  
 ZONTIVITY<sup>QL</sup>  
 ZYLET

(continued)

THIS DOCUMENT LIST IS EFFECTIVE 1/1/2021 THROUGH 12/31/2021. UPDATED ON 1/1/2021.  
 THIS LIST AND COVERAGES FOR THESE DRUGS ARE SUBJECT TO CHANGE AND TO EMHP PLAN DESIGN GUIDELINES..

## Examples of Excluded Medications with Selected Formulary Alternatives

The following is a list of some excluded medications with examples of selected covered formulary alternatives. This is not an all-inclusive list.

Excluded Medication(s)	Selected Preferred Alternative(s)
ACANYA and ONEXTON (clindamycin phosphate-benzoyl peroxide)	clindamycin and benzoyl peroxide (separate agents)
ACIPHEX (rabeprazole)	lansoprazole, omeprazole, pantoprazole
ADMELOG (insulin lispro)	NOVOLOG
AEROSPAN (flunisolide)	ARNUITY ELLIPTA <sup>QL</sup> , ASMANEX HFA <sup>QL</sup> , ASMANEX TWISTHALER <sup>QL</sup> , FLOVENT DISKUS <sup>QL</sup> , FLOVENT HFA <sup>QL</sup> , PULMICORT FLEXHALER <sup>QL</sup> , QVAR REDIHALER <sup>QL</sup>
AIRDUO (fluticasone-salmeterol)	ADVAIR DISKUS <sup>QL</sup> , ADVAIR HFA <sup>QL</sup> , BREO ELLIPTA <sup>QL</sup> , SYMBICORT <sup>QL</sup>
ALPHAGAN-P (brimonidine)	brimonidine 0.15%
ALVESCO (ciclesonide)	ARNUITY ELLIPTA <sup>QL</sup> , ASMANEX HFA <sup>QL</sup> , ASMANEX TWISTHALER <sup>QL</sup> , FLOVENT DISKUS <sup>QL</sup> , FLOVENT HFA <sup>QL</sup> , PULMICORT FLEXHALER <sup>QL</sup> , QVAR REDIHALER <sup>QL</sup>
ANDROGEL 1.62% (testosterone gel)	testosterone cypionate, testosterone enanthate, testosterone gel
APIDRA, APIDRA SOLOSTAR (insulin glulisine)	NOVOLOG
AUVI-Q (epinephrine solution)	epinephrine 0.15 mg <sup>QL</sup> , epinephrine 0.3 mg <sup>QL</sup> , EIPEN <sup>QL</sup> , EIPEN JR <sup>QL</sup>
BASAGLAR (insulin glargine)	LANTUS, LEVEMIR, TOUJEO, TRESIBA
BELSOMRA (suvorexant)	zolpidem IR <sup>QL</sup> , zaleplon
BONJESTA and DICLEGIS (doxylamine-pyridoxine)	OTC doxylamine and OTC pyridoxine
BRAVELLE (urofollitropin)	GONAL-F <sup>†</sup> , GONAL-F RFF <sup>†</sup>
BYETTA (exenatide)	OZEMPIC <sup>PA QL</sup> , TRULICITY <sup>PA QL</sup> , VICTOZA <sup>PA QL</sup>
BYDUREON (exenatide extended-release)	OZEMPIC <sup>PA QL</sup> , TRULICITY <sup>PA QL</sup> , VICTOZA <sup>PA QL</sup>
CALQUENCE (acalabrutinib)	IMBRUVICA <sup>QL, PA, †</sup> , VENCLEXTA <sup>QL, PA, †</sup>
CAMBIA (diclofenac)	diclofenac sodium DR
chlorzoxazone	cyclobenzaprine
COMBIGAN (brimonidine-timolol)	brimonidine 0.2% and timolol 0.5% (separate agents)
CONCERTA ER (methylphenidate extended-release)	amphetamine-dextroamphetamine ER <sup>QL</sup> , methylphenidate ER <sup>QL</sup>
DENAVIR (penciclovir)	acyclovir ointment
DEXILANT (dexlansoprazole)	lansoprazole, omeprazole, pantoprazole
DIABETES TEST STRIPS (e.g., Accu-Chek, Ascensia, Breeze, Contour, Freestyle, etc.)	ONETOUCH <sup>QL</sup>
DORYX (doxycycline hyclate DR)	doxycycline hyclate
DULERA (mometasone-formoterol)	ADVAIR DISKUS <sup>QL</sup> , ADVAIR HFA <sup>QL</sup> , BREO ELLIPTA <sup>QL</sup> , SYMBICORT <sup>QL</sup>
DUREZOL (difluprednate)	prednisolone acetate ophth solution
EXTAVIA (interferon beta-1b)	BETASERON <sup>† PA QL</sup> , REBIF <sup>† PA QL</sup>
fenoprofen	ibuprofen, meloxicam
FOLLISTIM AQ (follitropin beta)	GONAL-F <sup>†</sup> , GONAL-F RFF <sup>†</sup>
FOSTEUM, FOSTEUM PLUS	alendronate, ibandronate, risedronate
FORFIVO XL (bupropion ER)	bupropion ER
GAMMAKED (immune globulin)	GAMMAGARD <sup>PA, †</sup> , GAMUNEX-C <sup>PA, †</sup> , XEMBIFY <sup>PA, †</sup>
GLEEVEC (imatinib)	imatinib <sup>† PA, QL</sup>
GLUMETZA and FORTAMET (metformin ER modified/osmotic)	metformin ER (generic Glucophage XR)
GRALISE (gabapentin)	gabapentin
HIZENTRA (immune globulin)	GAMMAGARD <sup>PA, †</sup> , GAMUNEX-C <sup>PA, †</sup> , XEMBIFY <sup>PA, †</sup>
HORIZANT (gabapentin ER)	gabapentin
HUMALOG (insulin lispro)	NOVOLOG
HUMULIN N (insulin isophane), HUMULIN R (insulin regular), HUMULIN 70/30 (insulin NPH and regular)	NOVOLIN N, NOVOLIN R, NOVOLIN 70/30
INCRUSE ELLIPTA (umeclidinium)	SPIRIVA <sup>QL</sup>
INVOKANA (canagliflozin)	FARXIGA <sup>QL</sup> , JARDIANCE <sup>QL</sup>
INVOKAMET (canagliflozin-metformin), INVOKAMET XR (canagliflozin-metformin ER)	SYNJARDY <sup>QL</sup> , SYNJARDY XR <sup>QL</sup> , XIGDUO XR <sup>QL</sup>
JADENU <sup>† PA</sup> (deferiasirox)	deferiasirox <sup>† PA</sup>
JENTADUETO, JENTADUETO XR (linagliptin and metformin)	JANUMET <sup>QL</sup> , JANUMET XR <sup>QL</sup>
KAZANO (alogliptin-metformin)	JANUMET <sup>QL</sup> , JANUMET XR <sup>QL</sup>
ketoprofen	ibuprofen, meloxicam
KOMBIGLYZE XR (saxagliptin-metformin ER)	JANUMET <sup>QL</sup> , JANUMET XR <sup>QL</sup>
MINIVELLE (estradiol transdermal)	estradiol patch <sup>QL</sup>
MOVIPREP (polyethylene glycol electrolyte solution)	peg-3350 electrolyte solution <sup>QL</sup>
NASCOBAL (cyanocobalamin nasal)	OTC vitamin B12
NESINA (alogliptin)	JANUVIA <sup>QL</sup>
NEULASTA (pegfilgrastim)	FULPHILA <sup>PA, QL, †</sup> , ZIEXTENZO <sup>PA, QL, †</sup>
NORDITROPIN (somatropin)	GENOTROPIN <sup>†, PA</sup>
NORITATE (metronidazole)	azelaic acid gel, metronidazole
NUCYNTA (tapentadol)	hydrocodone-acetaminophen, morphine sulfate, oxycodone, tramadol
NUCYNTA ER (tapentadol ER)	hydromorphone ER <sup>QL</sup> , morphine sulfate ER <sup>QL</sup> , oxymorphone ER <sup>QL</sup>

(continued)

THIS DOCUMENT LIST IS EFFECTIVE 1/1/2021 THROUGH 12/31/2021. UPDATED ON 1/1/2021.  
THIS LIST AND COVERAGES FOR THESE DRUGS ARE SUBJECT TO CHANGE AND TO EMHP PLAN DESIGN GUIDELINES..

## Examples of Excluded Medications with Selected Formulary Alternatives

The following is a list of some excluded medications with examples of selected covered formulary alternatives. This is not an all-inclusive list.

Excluded Medication(s)	Selected Preferred Alternative(s)
ONGLYZA (saxagliptin)	JANUVIA <sup>QL</sup>
ORTHO DF (folic acid-vitamin D3)	OTC vitamins or folic acid
OSENI (alogliptin-pioglitazone)	JANUVIA <sup>QL</sup> and pioglitazone
PANCREAZE (pancrelipase DR)	CREON, ZENPEP
PERTZYE (pancrelipase DR)	CREON, ZENPEP
PROAIR, PROAIR RESPICLICK (albuterol sulfate)	albuterol HFA <sup>QL</sup>
PRODIGEN (lactobacillus-acidophilus)	OTC alternatives
PROVENTIL HFA (albuterol)	albuterol HFA <sup>QL</sup>
QTERN (dapagliflozin-saxagliptin)	GLYXAMBI <sup>QL</sup>
rabeprazole	lansoprazole, omeprazole, pantoprazole
SEGLUROMET (ertugliflozin-metformin)	SYNJARDY <sup>QL</sup> , SYNJARDY XR <sup>QL</sup> , XIGDUO XR <sup>QL</sup>
SITAVIG (acyclovir)	acyclovir , valacyclovir
SPRIX (ketorolac)	ibuprofen, meloxicam
STEGLATRO (ertugliflozin)	FARXIGA <sup>QL</sup> , JARDIANCE <sup>QL</sup>
STEGLUJAN (ertugliflozin-sitagliptin)	GLYXAMBI <sup>QL</sup>
SOLIQUA (insulin glargine-lixisenatide)	XULTOPHY <sup>PA QL</sup>
SOLODYN (minocycline ER)	minocycline
SOOLANTRA (ivermectin cream)	metronidazole cream
TECFIDERA (dimethyl fumarate)	dimethyl fumarate <sup>PA, QL, †</sup>
TEKTURNA (aliskiren)	enalapril, lisinopril, irbesartan, losartan, valsartan
TIROSINT (levothyroxine)	levothyroxine, SYNTHROID
TRADJENTA (linagliptin)	JANUVIA <sup>QL</sup>
TREXIMET (sumatriptan-naproxen)	sumatriptan <sup>QL</sup> and naproxen (separate agents)
TUDORZA PRESSAIR (aclidinium)	SPIRIVA <sup>QL</sup>
UDENYCA (pegfilgrastim-cbqv)	FULPHILA <sup>PA, QL, †</sup> , ZIEXTENZO <sup>PA, QL, †</sup>
VENTOLIN HFA (albuterol sulfate)	albuterol HFA <sup>QL</sup>
VIMOVO (esomeprazole-naproxen)	OTC esomeprazole and OTC naproxen
XOPENEX HFA (levalbuterol)	albuterol HFA <sup>QL</sup>
ZEGERID (omeprazole-sodium bicarbonate)	OTC omeprazole-sodium bicarbonate
ZELAC (lactobacillus-acidophilus)	OTC alternatives
ZIANA and VELTIN (clindamycin phosphate-tretinoin)	clindamycin and tretinoin <sup>AE</sup> (separate agents)
ZIOPTAN (tafluprost)	latanoprost
ZORVOLEX (diclofenac)	diclofenac sodium DR
ZOVIRAX CREAM	acyclovir ointment
ZYTIGA (abiraterone)	abiraterone <sup>† PA QL</sup>

### KEY

[INJ] = Injectable Drug

ER = Extended-Release

DR = Delayed Release

AE = Age Edit

LD= Limited Distribution

PA = Prior Authorization

QL = Quantity Limits

ST = Step Therapy

† Indicates specialty medications

**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.

WellDyne 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.

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.

**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.

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.

THIS DOCUMENT LIST IS EFFECTIVE 1/1/2021 THROUGH 12/31/2021. UPDATED ON 1/1/2021.  
THIS LIST AND COVERAGES FOR THESE DRUGS ARE SUBJECT TO CHANGE AND TO EMHP PLAN DESIGN GUIDELINES..