

# Drug Removals for Clients with Advanced Control Specialty Formulary<sup>®</sup>

Below is a list of medicines by drug class that have been removed from your plan's formulary. If you continue using one of the drugs listed below and identified as a Formulary Drug Removal, you may be required to pay the full cost.

If you are currently using one of the formulary drug removals, ask your doctor to choose one of the generic or brand formulary options listed below.

Category Drug Class	Formulary Drug Removals	Formulary Options
<i>Acromegaly</i>	SANDOSTATIN LAR <sup>1</sup> SIGNIFOR LAR <sup>1</sup> SOMAVERT <sup>1</sup>	SOMATULINE DEPOT
<i>Allergies</i> Antihistamines	<i>dexchlorpheniramine</i> Diphen Elixir RyClora CARBINOXAMINE TABLET 6 MG	<i>levocetirizine</i>
<i>Allergies</i> Nasal Steroids / Combinations	BECONASE AQ OMNARIS QNASL ZETONNA	<i>flunisolide spray, fluticasone spray, mometasone spray, DYMISTA</i>
<i>Anticonvulsants</i>	<i>topiramate ext-rel capsule</i> (generics for QUDEXY XR only)	<i>carbamazepine, carbamazepine ext-rel, clobazam, divalproex sodium, divalproex sodium ext-rel, gabapentin, lamotrigine, lamotrigine ext-rel, levetiracetam, levetiracetam ext-rel, oxcarbazepine, phenobarbital, phenytoin, phenytoin sodium extended, primidone, rufinamide, tiagabine, topiramate, valproic acid, zonisamide, FYCOMPA, OXTELLAR XR, TROKENDI XR, VIMPAT, XCOPRI</i>
	BANZEL SUSPENSION ONFI	<i>clobazam, lamotrigine, rufinamide, topiramate, TROKENDI XR</i>
	SABRIL <sup>1</sup>	<i>vigabatrin</i>
	ZONEGRAN	<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, primidone, tiagabine, topiramate, valproic acid, zonisamide, FYCOMPA, OXTELLAR XR, TROKENDI XR, VIMPAT, XCOPRI</i>
<i>Anti-infectives, Antibacterials</i> Erythromycins / Macrolides	E.E.S. GRANULES ERYPED	<i>erythromycins</i>
<i>Anti-infectives, Antibacterials</i> Tetracyclines	<i>doxycycline hyclate delayed-rel tablet 50 mg</i> <i>doxycycline hyclate delayed-rel tablet 200 mg</i> <i>doxycycline hyclate tablet 50 mg</i> (NDC <sup>^</sup> 72143021160 only) <i>doxycycline hyclate tablet 75 mg</i> <i>doxycycline hyclate tablet 150 mg</i> <i>doxycycline monohydrate capsule 75 mg</i> <i>doxycycline monohydrate capsule 150 mg</i> <i>minocycline ext-rel</i> CoreMino Mondoxyne NL capsule 75 mg ACTICLATE DORYX DORYX MPC MINOCIN TARGADOX	<i>doxycycline hyclate 20 mg, doxycycline hyclate capsule, minocycline, tetracycline</i>
<i>Anti-infectives, Antibacterials</i> Miscellaneous	<i>nitrofurantoin</i> (NDC <sup>^</sup> 70408023932 only) MACRODANTIN	<i>nitrofurantoin</i> (except NDC <sup>^</sup> 70408023932)

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Anti-infectives, Antifungals	flucytosine capsule 500 mg	fluconazole
	posaconazole delayed-rel tablet NOXAFIL	fluconazole, itraconazole
	CRESEMBA	itraconazole
Anti-infectives, Antiretroviral Agents Protease Inhibitors	APTIVUS <sup>1</sup>	Consult doctor
	INVIRASE <sup>1</sup> LEXIVA <sup>1</sup> VIRACEPT <sup>1</sup>	atazanavir, lopinavir-ritonavir solution, EVOTAZ, PREZCOBIX, PREZISTA
Anti-infectives, Antivirals Cytomegalovirus *	VALCYTE	valganciclovir
Anti-infectives, Antivirals Hepatitis B *	BARACLUDE TABLET <sup>1</sup> EPIVIR HBV <sup>1</sup> HEPSERA <sup>1</sup>	entecavir, lamivudine, tenofovir disoproxil fumarate, BARACLUDE SOLUTION, VEMLIDY
Anti-infectives, Antivirals Hepatitis C *	MAVYRET <sup>1</sup>	EPCLUSA (genotypes 1, 2, 3, 4, 5, 6), HARVONI (genotypes 1, 4, 5, 6), VOSEVI <sup>2</sup>
	VIEKIRA PAK <sup>1</sup> ZEPATIER <sup>1</sup>	EPCLUSA (genotypes 1, 2, 3, 4, 5, 6), HARVONI (genotypes 1, 4, 5, 6)
Anti-infectives, Antivirals Herpes *	acyclovir cream VALTREX	acyclovir capsule, acyclovir tablet, valacyclovir
Anti-infectives, Antivirals HIV	COMPLERA <sup>1</sup> STRIBILD <sup>1</sup>	efavirenz-emtricitabine-tenofovir disoproxil fumarate, efavirenz-lamivudine-tenofovir disoproxil fumarate, BIKTARVY, DOVATO, GENVOYA, ODEFSEY, SYMTUZA, TRIUMEQ
Anti-infectives Miscellaneous	DARAPRIM	pyrimethamine
Antiobesity	CONTRAVE XENICAL	QSYMIA, SAXENDA
Anxiety * Benzodiazepines	ATIVAN XANAX XANAX XR	alprazolam, clonazepam, diazepam, lorazepam, oxazepam
Asthma * Beta Agonists, Short-Acting	PROAIR HFA PROAIR RESPICLICK PROVENTIL HFA VENTOLIN HFA XOPENEX HFA	albuterol sulfate CFC-free aerosol, levalbuterol tartrate CFC-free aerosol
Asthma * Leukotriene Modulators	zileuton ext-rel SINGULAIR	montelukast, zafirlukast
Asthma * Steroid Inhalants	ALVESCO ASMANEX ASMANEX HFA	ARNUITY ELLIPTA, FLOVENT DISKUS, FLOVENT HFA, PULMICORT FLEXHALER, QVAR REDIHALER
Asthma * or Chronic Obstructive Pulmonary Disease (COPD) * Steroid / Beta Agonist Combinations	DULERA	ADV AIR DISKUS, ADV AIR HFA <sup>†</sup> , BREO ELLIPTA <sup>†</sup> , SYMBICORT

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Attention Deficit Hyperactivity Disorder *	ADDERALL EVEKEO	amphetamine-dextroamphetamine mixed salts, methylphenidate
	ADZENYS ER ADZENYS XR-ODT APTENSIO XR DAYTRANA FOCALIN XR	amphetamine-dextroamphetamine mixed salts ext-rel †, dexamethylphenidate ext-rel, methylphenidate ext-rel †, MYDAYIS, VYVANSE
	INTUNIV	amphetamine-dextroamphetamine mixed salts ext-rel †, atomoxetine, dexamethylphenidate ext-rel, guanfacine ext-rel, methylphenidate ext-rel †, MYDAYIS, VYVANSE
Autoimmune Agents Physician-Administered Agents	ACTEMRA INTRAVENOUS 1 ORENCIA INTRAVENOUS 1	REMICADE, SIMPONI ARIA
	AVSOLA 1 CIMZIA LYOPHILIZED POWDER 1 INFLECTRA 1 RENFLEXIS 1	REMICADE, SIMPONI ARIA, STELARA INTRAVENOUS
	ENTYVIO (For Crohn's Disease Only) 1	REMICADE, STELARA INTRAVENOUS
	ILUMYA 1	REMICADE
Autoimmune Agents Self-Administered Agents Ankylosing Spondylitis *	CIMZIA PREFILLED SYRINGE 1 SIMPONI 1 TALTZ 1	COSENTYX, ENBREL, HUMIRA
Autoimmune Agents Self-Administered Agents Crohn's Disease *	CIMZIA PREFILLED SYRINGE 1	HUMIRA, STELARA SUBCUTANEOUS # # After failure of HUMIRA
Autoimmune Agents Self-Administered Agents Psoriasis *	CIMZIA PREFILLED SYRINGE 1 COSENTYX 1 ENBREL 1	HUMIRA, OTEZLA, SKYRIZI, STELARA SUBCUTANEOUS, TALTZ, TREMFYA
Autoimmune Agents Self-Administered Agents Psoriatic Arthritis *	CIMZIA PREFILLED SYRINGE 1 ORENCIA CLICKJECT 1 ORENCIA SUBCUTANEOUS 1 SIMPONI 1 STELARA SUBCUTANEOUS 1 TALTZ 1 TREMFYA 1 XELJANZ 1 XELJANZ XR 1	COSENTYX, ENBREL, HUMIRA, OTEZLA
Autoimmune Agents Self-Administered Agents Rheumatoid Arthritis *	ACTEMRA ACTPEN 1 ACTEMRA SUBCUTANEOUS 1 CIMZIA PREFILLED SYRINGE 1 KINERET 1 SIMPONI 1	ENBREL, HUMIRA, KEVZARA, ORENCIA CLICKJECT, ORENCIA SUBCUTANEOUS, RINVOQ, XELJANZ, XELJANZ XR
Autoimmune Agents Self-Administered Agents Ulcerative Colitis *	SIMPONI 1	HUMIRA, STELARA SUBCUTANEOUS #, XELJANZ #, XELJANZ XR # # After failure of HUMIRA
Autoimmune Agents Self-Administered Agents All Other Conditions *	ACTEMRA ACTPEN 1 ACTEMRA SUBCUTANEOUS 1 KINERET 1 ORENCIA CLICKJECT 1 ORENCIA SUBCUTANEOUS 1	ENBREL, HUMIRA
Cancer Biosimilars	RIABNI 1 TRUXIMA 1	RUXIENCE
Cancer Chronic Myelogenous Leukemia *	GLEEVEC 1 TASIGNA 1	imatinib mesylate, BOSULIF, SPRYCEL

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Cancer Follicular Lymphoma * PI3K Inhibitors	ALIQUOPA <sup>1</sup> ZYDELIG <sup>1</sup>	COPIKTRA
Cancer Monoclonal Antibodies	AVASTIN <sup>1</sup>	ZIRABEV
	HERCEPTIN <sup>1</sup> HERCEPTIN HYLECTA <sup>1</sup>	KANJINTI, TRAZIMERA
	RITUXAN <sup>1</sup>	RUXIENCE
Cancer Multiple Myeloma * Proteasome Inhibitors	BORTEZOMIB <sup>1</sup> KYPROLIS <sup>1</sup>	NINLARO, VELCADE
Cancer Prostate * Antiandrogens	NILANDRON ZYTIGA <sup>1</sup>	abiraterone, bicalutamide, XTANDI, YONSA
Cancer Prostate * Luteinizing Hormone-Releasing Hormone (LHRH) Agonists	LUPRON DEPOT <sup>1</sup> TRELSTAR MIXJECT <sup>1</sup> ZOLADEX <sup>1</sup>	ELIGARD, FIRMAGON
Cardiovascular Antiarrhythmics	BETAPACE BETAPACE AF	sotalol
	NORPACE	disopyramide
Cardiovascular Antilipemics Cholesterol Absorption Inhibitors	ZETIA	ezetimibe
Cardiovascular Antilipemics Fibrates	fenofibrate capsule 50 mg fenofibrate capsule 130 mg fenofibrate tablet 40 mg fenofibrate tablet 120 mg FENOGLIDE TABLET 120 MG TRICOR	fenofibrate (except fenofibrate capsule 50 mg, 130 mg; fenofibrate tablet 40 mg, 120 mg), fenofibric acid delayed-rel
Cardiovascular Antilipemics HMG-CoA Reductase Inhibitors (HMGs or Statins) / Combinations <sup>3</sup>	ALTOPREV CRESTOR LESCOL XL LIPITOR LIVALO	atorvastatin, ezetimibe-simvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin
Cardiovascular Antilipemics Niacins	niacin tablet 500 mg Niacor	niacin ext-rel
Cardiovascular Antilipemics Omega-3 Fatty Acids	icosapent ethyl	omega-3 acid ethyl esters, VASCEPA
Cardiovascular Antilipemics PCSK9 Inhibitors	REPATHA <sup>1</sup>	PRALUENT
Cardiovascular Digitalis Glycosides	LANOXIN TABLET (125 MCG and 250 MCG only)	digoxin
Cardiovascular Diuretics	DYRENIUM	amiloride, triamterene
Cardiovascular Nitrates	isosorbide dinitrate 40 mg	isosorbide dinitrate (except isosorbide dinitrate 40 mg), isosorbide mononitrate

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<i>Cardiovascular</i> Pulmonary Arterial Hypertension Endothelin Receptor Antagonists	LETAIRIS <sup>1</sup> TRACLEER <sup>1</sup>	<i>ambrisentan, bosentan, OPSUMIT</i>
<i>Cardiovascular</i> Pulmonary Arterial Hypertension Phosphodiesterase Inhibitors	ADCIRCA <sup>1</sup> REVATIO <sup>1</sup>	<i>sildenafil, tadalafil</i>
<i>Cardiovascular</i> Pulmonary Arterial Hypertension Prostaglandin Vasodilators	REMODULIN <sup>1</sup>	<i>treprostinil</i>
<i>Carnitine Deficiency</i>	CARNITOR CARNITOR SF	<i>levocarnitine</i>
<i>Central Precocious Puberty</i>	LUPRON DEPOT-PED <sup>1</sup>	SUPPRELIN LA, TRIPTODUR
<i>Chronic Obstructive Pulmonary Disease (COPD) *</i> Anticholinergics	INCRUSE ELLIPTA TUDORZA	SPIRIVA, YUPELRI
<i>Chronic Obstructive Pulmonary Disease (COPD) *</i> Anticholinergic / Beta Agonist Combinations Long Acting	BEVESPI AEROSPHERE	ANORO ELLIPTA, STIOLTO RESPIMAT
<i>Contraceptives</i> Monophasic	BEYAZ MINASTRIN 24 FE TAYTULLA YASMIN YAZ	<i>ethinyl estradiol-drospirenone, ethinyl estradiol-drospirenone-levomefolate, ethinyl estradiol-norethindrone acetate, ethinyl estradiol-norethindrone acetate-iron</i>
<i>Contraceptives</i> Four Phase	NATAZIA	<i>ethinyl estradiol-drospirenone, ethinyl estradiol-drospirenone-levomefolate, ethinyl estradiol-levonorgestrel, ethinyl estradiol-norethindrone acetate, ethinyl estradiol-norethindrone acetate-iron, ethinyl estradiol-norgestimate, LO LOESTRIN FE</i>
<i>Contraceptives</i> Extended Cycle	SEASONIQUE	<i>ethinyl estradiol-drospirenone, ethinyl estradiol-drospirenone-levomefolate, ethinyl estradiol-levonorgestrel, ethinyl estradiol-norethindrone acetate, ethinyl estradiol-norethindrone acetate-iron</i>
<i>Contraceptives</i> Progestin Intrauterine Devices	LILETTA <sup>1</sup>	KYLEENA, MIRENA, SKYLA
<i>Contraceptives</i> Vaginal	NUVARING	<i>ethinyl estradiol-etonogestrel, ANNOVERA</i>
<i>Cystic Fibrosis *</i> Inhaled Antibiotics	TOBI <sup>1</sup> TOBI PODHALER <sup>1</sup>	<i>tobramycin inhalation solution, BETHKIS</i>
<i>Dental</i> Cavity/Caries Prevention	PREVIDENT	Consult doctor
<i>Depression *</i> Antidepressants, Selective Serotonin Reuptake Inhibitors (SSRIs)	<i>fluoxetine tablet 60 mg</i> LEXAPRO PAXIL PAXIL CR PEXEVA PROZAC VIIBRYD ZOLOFT	<i>citalopram, escitalopram, fluoxetine (except fluoxetine tablet 60 mg, fluoxetine tablet [generics for SARAFEM]), paroxetine HCl, paroxetine HCl ext-rel, sertraline, TRINTELLIX</i>

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<i>Depression</i> * Antidepressants, Serotonin Norepinephrine Reuptake Inhibitors (SNRIs)	venlafaxine ext-rel tablet (except 225 mg) CYMBALTA EFFEXOR XR PRISTIQ	desvenlafaxine ext-rel, duloxetine, venlafaxine, venlafaxine ext-rel capsule
<i>Depression</i> * Antidepressants, Miscellaneous Agents	bupropion ext-rel tablet 450 mg	bupropion, bupropion ext-rel (except bupropion ext-rel tablet 450 mg)
	OLEPTRO	trazodone
Depression and/or Schizophrenia * Antipsychotics, Atypicals	ABILIFY FANAPT SEROQUEL XR	aripiprazole, clozapine, olanzapine, quetiapine, quetiapine ext-rel, risperidone, ziprasidone, LATUDA, VRAYLAR
<i>Dermatology</i> Acne *	clindamycin gel (NDC <sup>^</sup> 68682046275 only) Vanoxide-HC ACANYA AZELEX BENZAFLIN DIFFERIN LOTION FABIOR TAZORAC VELTIN ZIANA	adapalene, benzoyl peroxide, clindamycin gel (except NDC <sup>^</sup> 68682046275), clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, EPIDUO, ONEXTON
Dermatology Actinic Keratosis *	fluorouracil cream 0.5% CARAC	fluorouracil cream 5%, fluorouracil solution, imiquimod, PICATO, TOLAK, ZYCLARA
<i>Dermatology</i> Anti-infective / Anti-inflammatory	NEO-SYNALAR	desonide or hydrocortisone <b>WITH</b> gentamicin
<i>Dermatology</i> Antibiotics	mupirocin cream	gentamicin, mupirocin ointment
<i>Dermatology</i> Antipsoriatics	calcipotriene cream calcitriol ointment SORILUX TAZORAC VECTICAL	calcipotriene ointment, calcipotriene solution
	calcipotriene-betamethasone	calcipotriene ointment or calcipotriene solution <b>WITH</b> desoximetasone (except desoximetasone ointment 0.05%), fluocinonide (except fluocinonide cream 0.1%) or BRYHALI
<i>Dermatology</i> Atopic Dermatitis *	doxepin cream	desonide, hydrocortisone, pimecrolimus, tacrolimus, EUCRISA
	ELIDEL	pimecrolimus, tacrolimus, EUCRISA
<i>Dermatology</i> Rosacea *	doxycycline monohydrate delayed-rel capsule	ORACEA
	FINACEA GEL MIRVASO NORITATE	azelaic acid gel, metronidazole, FINACEA FOAM, SOOLANTRA
<i>Dermatology</i> Scars	BEAU RX CICATRACE POLYTOZA RECEDO SCARSILK PAD SIL-K PAD SILIVEX SILTREX	Consult doctor
<i>Dermatology</i> Seborrheic Dermatitis *	ketoconazole foam 2% Ketodan	ketoconazole shampoo 2%, selenium sulfide lotion 2.5%
	XOLEGEL	ciclopirox, ketoconazole cream 2%

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<i>Dermatology</i> Skin Inflammation and Hives * Corticosteroids	<i>clobetasol spray</i> CLOBEX SPRAY OLUX-E	<i>clobetasol foam</i>
	<i>fluocinonide cream 0.1%</i>	<i>clobetasol cream</i>
	<i>flurandrenolide cream</i> <i>flurandrenolide lotion</i> Nolix	<i>desonide, hydrocortisone</i>
	<i>clocortolone cream</i> <i>desoximetasone ointment 0.05%</i> <i>flurandrenolide ointment</i> <i>hydrocortisone butyrate lipophilic cream 0.1%</i> <i>hydrocortisone butyrate lotion</i> <i>triamcinolone aerosol 0.2%</i> <i>triamcinolone ointment 0.05%</i> Trianex CORDRAN OINTMENT	<i>hydrocortisone butyrate cream, hydrocortisone butyrate ointment, hydrocortisone butyrate solution, mometasone, triamcinolone cream, triamcinolone lotion, triamcinolone ointment (except triamcinolone ointment 0.05%)</i>
	<i>diflorasone cream</i> <i>diflorasone ointment</i> <i>halcinonide cream</i> APEXICON E PSORCON	<i>desoximetasone (except desoximetasone ointment 0.05%), fluocinonide (except fluocinonide cream 0.1%), BRYHALI</i>
<i>Dermatology</i> Warts	VEREGEN	<i>imiquimod</i>
<i>Dermatology</i> Wound Care Products	ALEVICYN GEL ALEVICYN SG ALEVICYN SOLUTION	<i>desonide, hydrocortisone</i>
<i>Dermatology</i> Miscellaneous Skin Conditions	ALCORTIN A ATOPADERM BENSAL HP EPICERAM KAMDOY NOVACORT SYNERDERM	<i>desonide, hydrocortisone</i>
	<i>luliconazole</i> <i>oxiconazole</i> (NDCs^ 00168035830, 51672135902 only)	<i>ciclopirox, clotrimazole, econazole, ketoconazole cream 2%, NAFTIN</i>
<i>Diabetes *</i> Biguanides	<i>metformin ext-rel</i> (generics for FORTAMET and GLUMETZA only) FORTAMET GLUMETZA RIOMET	<i>metformin, metformin ext-rel (except generics for FORTAMET and GLUMETZA)</i>
<i>Diabetes *</i> Dipeptidyl Peptidase-4 (DPP-4) Inhibitors	NESINA ONGLYZA TRADJENTA	JANUVIA
<i>Diabetes *</i> Dipeptidyl Peptidase-4 (DPP-4) Inhibitor Combinations	JENTADUETO JENTADUETO XR KAZANO KOMBIGLYZE XR	JANUMET, JANUMET XR
	OSENI	JANUMET, JANUMET XR; JANUVIA <b>WITH</b> <i>pioglitazone</i>
<i>Diabetes *</i> Injectable Incretin Mimetics	BYDUREON BYETTA	OZEMPIC, RYBELSUS, TRULICITY, VICTOZA

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Diabetes * Insulins	APIDRA HUMALOG	FIASP, NOVOLOG
	HUMALOG MIX 50/50	NOVOLOG MIX 70/30
	HUMALOG MIX 75/25	NOVOLOG MIX 70/30
	HUMULIN 70/30 <sup>4</sup>	NOVOLIN 70/30 <sup>4</sup>
	HUMULIN N <sup>4</sup>	NOVOLIN N <sup>4</sup>
	HUMULIN R <sup>4</sup>	NOVOLIN R <sup>4</sup>
	NOTE: Humulin R U-500 concentrate will not be subject to removal and will continue to be covered.	
Diabetes * Long Acting Insulins <sup>5</sup>	LANTUS	BASAGLAR, LEVEMIR
Diabetes * Insulin Sensitizers	ACTOS	<i>pioglitazone</i>
Diabetes * Sodium-Glucose Co-transporter 2 (SGLT2) Inhibitors	INVOKANA	FARXIGA, JARDIANCE
Diabetes * Sodium-Glucose Co-transporter 2 (SGLT2) Inhibitor / Biguanide Combinations	INVOKAMET INVOKAMET XR	SYNJARDY, SYNJARDY XR, XIGDUO XR
Diabetes * Sodium-Glucose Co-transporter 2 (SGLT2) Inhibitor / Dipeptidyl Peptidase-4 (DPP-4) Inhibitor Combinations	QTERN	GLYXAMBI
Diabetes * Supplies, Needles <sup>6</sup>	NOVO NORDISK NEEDLES OWEN MUMFORD NEEDLES PERRIGO NEEDLES ULTIMED NEEDLES All other insulin needles that are not BD ULTRAFINE brand	BD ULTRAFINE NEEDLES
Diabetes * Supplies, Syringes <sup>6</sup>	ALLISON MEDICAL INSULIN SYRINGES TRIVIDIA INSULIN SYRINGES ULTIMED INSULIN SYRINGES All other insulin syringes that are not BD ULTRAFINE brand	BD ULTRAFINE INSULIN SYRINGES

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Diabetes * Supplies, Test Strips and Kits <sup>7, 8</sup>	BREEZE 2 STRIPS AND KITS CONTOUR NEXT STRIPS AND KITS CONTOUR STRIPS AND KITS FREESTYLE STRIPS AND KITS All other test strips that are not ACCU-CHEK or ONETOUCH brand	ACCU-CHEK AVIVA PLUS STRIPS AND KITS <sup>7</sup> , ACCU-CHEK COMPACT PLUS STRIPS AND KITS <sup>7</sup> , ACCU-CHEK GUIDE STRIPS AND KITS <sup>7</sup> , ACCU-CHEK SMARTVIEW STRIPS AND KITS <sup>7</sup> , ONETOUCH ULTRA STRIPS AND KITS <sup>7</sup> , ONETOUCH VERIO STRIPS AND KITS <sup>7</sup>
	ENLITE CONTINUOUS GLUCOSE MONITORING SYSTEM EVERSENSE CONTINUOUS GLUCOSE MONITORING SYSTEM FREESTYLE LIBRE CONTINUOUS GLUCOSE MONITORING SYSTEM GUARDIAN CONNECT CONTINUOUS GLUCOSE MONITORING SYSTEM GUARDIAN REAL-TIME CONTINUOUS GLUCOSE MONITORING SYSTEM All other continuous glucose monitoring systems that are not DEXCOM brand	DEXCOM CONTINUOUS GLUCOSE MONITORING SYSTEM
Dietary Supplements	FOSTEUM FOSTEUM PLUS	<i>alendronate, ibandronate, risedronate</i>
	<i>Activite Dexifol Folvite-D Genicin Vita-S HylaVite Lorid TronVite Vitasure Xvite FERIVA 21/7 FOLIC-K NICADAN NICAPRIN NICAZEL NICAZEL FORTE NICOMIDE OMNIVEX ORTHO D ORTHO DF RHEUMATE RIBOZEL TALIVA XYZBAC ZVIT</i>	<i>folic acid</i>
	<i>MultiPro PRODIGEN VASCULERA</i>	Consult doctor
Endocrine and Metabolic Progestins	PROMETRIUM	<i>medroxyprogesterone; progesterone, micronized</i>
Endometriosis *	LUPRON DEPOT <sup>1</sup> ZOLADEX <sup>1</sup>	ORLISSA
Erectile Dysfunction * Phosphodiesterase Inhibitors	CIALIS STENDRA VIAGRA	<i>sildenafil, tadalafil</i>
Fertility *	FOLLISTIM AQ <sup>1</sup>	GONAL-F
	CHORIONIC GONADOTROPIN <sup>1</sup> NOVAREL <sup>1</sup> PREGNYL <sup>1</sup>	OVIDREL

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Gastrointestinal Anticholinergics	chlordiazepoxide-clidinium (NDCs^ 11534019701, 42494040901, 51293069601, 51293069610 only) hyoscyamine sulfate ext-rel Oscimin SR Symax-SR GLYCOPYRROLATE TABLET 1.5 MG LIBRAX	dicyclomine
Gastrointestinal Antidiarrheals	ENTERAGAM	alosetron, VIBERZI, XIFAXAN 550 MG
	MYTESI	diphenoxylate-atropine, loperamide
Gastrointestinal Antiemetics	TRANSDERM SCOP	meclizine, scopolamine transdermal
	ZUPLENZ	granisetron, ondansetron, SANCUSO
Gastrointestinal Irritable Bowel Syndrome	AMITIZA	LINZESS, MOVANTIK, SYMPROIC
Gastrointestinal Laxatives	LACTULOSE PAK	lactulose solution
	GOLYTELY MOVIPREP OSMOPREP SUPREP	peg 3350-electrolytes, CLENPIQ
Gastrointestinal Probiotics	LactoJen PROVAD ZELAC	Consult doctor
Gastrointestinal Proton Pump Inhibitors (PPIs)	omeprazole-sodium bicarbonate pantoprazole delayed-rel suspension ACIPHEX ACIPHEX SPRINKLE NEXIUM PREVACID PRILOSEC PROTONIX ZEGERID	esomeprazole delayed-rel, lansoprazole delayed-rel, omeprazole delayed-rel, pantoprazole delayed-rel tablet, DEXILANT
Gastrointestinal Ulcer Treatment	sucralfate suspension CARAFATE	sucralfate tablet
Gaucher Disease	ELELYSO <sup>1</sup>	CERDELGA, CEREZYME
Genitourinary Interstitial Cystitis	ELMIRON RIMSO-50	Consult doctor
Genitourinary Miscellaneous	LITHOSTAT THIOLA THIOLA EC	Consult doctor
Gout *	colchicine capsule COLCRYS	colchicine tablet, MITIGARE
	ULORIC	allopurinol
Growth Hormones	GENOTROPIN <sup>1</sup> HUMATROPE <sup>1</sup> NUTROPIN AQ <sup>1</sup> OMNITROPE <sup>1</sup> SAIZEN <sup>1</sup>	NORDITROPIN
Hematologic Anticoagulants (oral)	PRADAXA	warfarin, ELIQUIS, XARELTO

Category Drug Class	Formulary Drug Removals	Formulary Options
<i>Hematologic</i> Chelating Agents	CUPRIMINE	<i>penicillamine capsule</i>
	DESFERAL <sup>1</sup> EXJADE <sup>1</sup> FERRIPROX <sup>1</sup> JADENU <sup>1</sup>	<i>deferasirox, deferiprone, deferoxamine</i>
	SYPRINE	<i>trientine</i>
<i>Hematologic</i> Erythropoiesis-Stimulating Agents	EPOGEN <sup>1</sup> PROCRIT <sup>1</sup>	ARANESP, RETACRIT
<i>Hematologic</i> Hemophilia B	ALPROLIX <sup>1</sup>	Consult doctor
<i>Hematologic</i> Neutropenia Colony Stimulating Factors	FULPHILA <sup>1</sup> NEULASTA <sup>1</sup> NEULASTA ONPRO <sup>1</sup> UDENYCA <sup>1</sup>	ZIEXTENZO
	GRANIX <sup>1</sup> NEUPOGEN <sup>1</sup> ZARXIO <sup>1</sup>	NIVESTYM
<i>Hematologic</i> Platelet Aggregation Inhibitors	PLAVIX	<i>clopidogrel, prasugrel, BRILINTA</i>
	ZONTIVITY	Consult doctor
<i>High Blood Pressure</i> * ACE Inhibitor / Diuretic Combinations	ZESTORETIC	<i>fosinopril-hydrochlorothiazide, lisinopril-hydrochlorothiazide, quinapril-hydrochlorothiazide</i>
<i>High Blood Pressure</i> * Angiotensin II Receptor Antagonists	ATACAND BENICAR COZAAR DIOVAN EDARBI MICARDIS	<i>candesartan, irbesartan, losartan, olmesartan, telmisartan, valsartan</i>
<i>High Blood Pressure</i> * Angiotensin II Receptor Antagonist / Diuretic Combinations	ATACAND HCT BENICAR HCT DIOVAN HCT EDARBYCLOR HYZAAR MICARDIS HCT	<i>candesartan-hydrochlorothiazide, irbesartan-hydrochlorothiazide, losartan-hydrochlorothiazide, olmesartan-hydrochlorothiazide, telmisartan-hydrochlorothiazide, valsartan-hydrochlorothiazide</i>
<i>High Blood Pressure</i> * Angiotensin II Receptor Antagonist / Calcium Channel Blocker Combinations	AZOR EXFORGE	<i>amlodipine-olmesartan, amlodipine-telmisartan, amlodipine-valsartan</i>
<i>High Blood Pressure</i> * Angiotensin II Receptor Antagonist / Calcium Channel Blocker / Diuretic Combinations	EXFORGE HCT	<i>amlodipine-valsartan-hydrochlorothiazide, olmesartan-amlodipine-hydrochlorothiazide</i>
<i>High Blood Pressure</i> * Beta-blockers	COREG CR INDERAL LA INDERAL XL INNOPRAN XL TOPROL-XL	<i>atenolol, carvedilol, carvedilol phosphate ext-rel, metoprolol succinate ext-rel, metoprolol tartrate, nadolol, pindolol, propranolol, propranolol ext-rel, BYSTOLIC</i>
<i>High Blood Pressure</i> * Beta-blocker Combinations	DUTOPROL	<i>metoprolol succinate ext-rel WITH hydrochlorothiazide</i>

<b>Category Drug Class</b>	<b>Formulary Drug Removals</b>	<b>Formulary Options</b>
<b>High Blood Pressure *</b> Calcium Channel Blockers	NORVASC	<i>amlodipine</i>
	<i>diltiazem ext-rel</i> (generics for CARDIZEM LA only) <i>Matzim LA</i> CARDIZEM CARDIZEM CD CARDIZEM LA	<i>diltiazem ext-rel</i> (except generics for CARDIZEM LA)
<b>High Blood Pressure *</b> Calcium Channel Blocker / Nonsteroidal Anti-inflammatory Drugs (NSAIDs) Combinations	CONSENSI	<i>amlodipine WITH celecoxib</i>
<b>Huntington's Disease</b>	XENAZINE <sup>1</sup>	<i>tetrabenazine</i> , AUSTEDO
<b>Immunology</b> Antimetabolites	CELLCEPT <sup>1</sup> MYFORTIC <sup>1</sup>	<i>mycophenolate mofetil</i> , <i>mycophenolate sodium</i>
<b>Immunology</b> Calcineurin Inhibitors	ASTAGRAF XL <sup>1</sup> ENVARUS XR <sup>1</sup>	<i>tacrolimus</i>
<b>Immunology</b> Disease Modifying Antirheumatic Agents	OTREXUP <sup>1</sup>	RASUVO
<b>Immunology</b> Hereditary Angioedema *	BERINERT <sup>1</sup>	<i>icatibant</i> , RUCONEST
<b>Immunology</b> Rapamycin Derivatives	RAPAMUNE <sup>1</sup> ZORTRESS <sup>1</sup>	<i>everolimus</i> , <i>sirolimus</i>
<b>Inflammatory Bowel Disease (IBD)</b> Ulcerative Colitis * Aminosalicylates	<i>mesalamine delayed-rel tablet 800 mg</i> COLAZAL DELZICOL LIALDA	<i>balsalazide</i> , <i>mesalamine delayed-rel</i> (except <i>mesalamine delayed-rel tablet 800 mg</i> ), <i>mesalamine ext-rel</i> , <i>sulfasalazine</i> , <i>sulfasalazine delayed-rel</i> , ASACOL HD, PENTASA
<b>Interferons *</b>	PEGASYS <sup>1</sup>	Consult doctor
<b>Kidney Disease *</b> Phosphate Binders	<i>lanthanum carbonate</i> FOSRENOL	<i>calcium acetate</i> , <i>sevelamer carbonate</i> , PHOSLYRA, VELPHORO
<b>Menopausal Symptom Agents</b> Oral	<i>paroxetine mesylate capsule 7.5 mg</i>	<i>paroxetine HCl</i>
	MENEST OSPHENA PREMARIN	<i>estradiol</i>
<b>Menopausal Symptom Agents</b> Transdermal	MINIVELLE VIVELLE-DOT	<i>estradiol</i> , DIVIGEL, EVAMIST
<b>Menopausal Symptom Agents</b> Vaginal	<i>estradiol vaginal tablet</i> Yuva <span>fem</span> ESTRING FEMRING INTRAROSA PREMARIN CREAM	<i>estradiol vaginal cream</i> , IMVEXXY, VAGIFEM
<b>Multiple Sclerosis</b>	AVONEX <sup>1</sup> EXTAVIA <sup>1</sup> PLEGRIDY <sup>1</sup> TECFIDERA <sup>1</sup>	<i>dimethyl fumarate delayed-rel</i> , <i>glatiramer</i> , AUBAGIO, BETASERON, COPAXONE, GILENYA, KESIMPTA, MAYZENT, OCREVUS, REBIF, TYSABRI, VUMERITY, ZEPOSIA

Category Drug Class	Formulary Drug Removals	Formulary Options
<i>Musculoskeletal</i>	carisoprodol 250 mg chlorzoxazone 375 mg chlorzoxazone 500 mg (NDC^ 73007001303 only) chlorzoxazone 750 mg cyclobenzaprine ext-rel capsule cyclobenzaprine tablet 7.5 mg metaxalone 400 mg methocarbamol 500 mg (NDC^ 69036091010 only) methocarbamol 750 mg (NDCs^ 69036093090, 70868090190 only) orphenadrine-aspirin-caffeine Fexmid Lorzone Orphengesic Forte AMRIX CHLORZOXAZONE 250 MG NORGESIC FORTE	cyclobenzaprine (except cyclobenzaprine tablet 7.5 mg)
<i>Narcolepsy Wakefulness Promoters</i>	NUVIGIL PROVIGIL	armodafinil, modafinil, SUNOSI
<i>Nephropathic Cystinosis</i>	PROCYSBI <sup>1</sup>	CYSTAGON
<i>Ophthalmic Allergies</i>	ALREX BEPREVE LASTACAFT ZERVIAE	azelastine, cromolyn sodium, olopatadine
<i>Ophthalmic Anti-infectives</i>	AZASITE CILOXAN	ciprofloxacin, erythromycin, gentamicin, levofloxacin, moxifloxacin, ofloxacin, sulfacetamide, tobramycin, BESIVANCE
<i>Ophthalmic Anti-infective / Anti-inflammatory</i>	TOBRADEX ST ZYLET	neomycin-polymyxin B-bacitracin-hydrocortisone, neomycin-polymyxin B-dexamethasone, tobramycin-dexamethasone, TOBRADEX OINTMENT
<i>Ophthalmic Anti-inflammatory, Nonsteroidal</i>	ACUVAIL BROMSITE NEVANAC	bromfenac, diclofenac, ketorolac, ILEVRO, PROLENSA
<i>Ophthalmic Anti-inflammatory, Steroidal</i>	FLAREX FML FORTE FML LIQUIFILM FML S.O.P. INVELTYS LOTEMAX LOTEMAX SM MAXIDEX PRED FORTE PRED MILD	dexamethasone, loteprednol, prednisolone acetate 1%, DUREZOL
<i>Ophthalmic Antivirals</i>	ZIRGAN	trifluridine
<i>Ophthalmic Artificial Tears</i>	LACRISERT	RESTASIS, XIIDRA
<i>Ophthalmic Glaucoma</i>	bimatoprost solution 0.03% TRAVATAN Z	latanoprost, travoprost, LUMIGAN, ZIOPTAN
	BETIMOL TIMOPTIC OCUDOSE	timolol maleate solution, BETOPTIC S
<i>Ophthalmic Miscellaneous</i>	AVENOVA	Consult doctor
<i>Opioid Dependency</i>	SUBOXONE	buprenorphine-naloxone sublingual, ZUBSOLV

Category Drug Class	Formulary Drug Removals	Formulary Options
<i>Osteoarthritis</i> * Viscosupplements	GEL-ONE <sup>1</sup> HYALGAN <sup>1</sup> MONOVISC <sup>1</sup> ORTHOVISC <sup>1</sup> SYNVISC <sup>1</sup> SYNVISC-ONE <sup>1</sup> VISCO-3 <sup>1</sup>	DUROLANE, EUFLEXXA, GELSYN-3, SUPARTZ FX
<i>Osteoporosis</i> * Calcium Regulators	MIACALCIN INJECTION	<i>alendronate, calcitonin-salmon, ibandronate, risedronate</i> , FORTEO, PROLIA, TYMLOS
	MIACALCIN NASAL SPRAY	<i>calcitonin-salmon</i>
<i>Otic</i> Anti-infective / Anti-inflammatory	CIPRO HC CIPRODEX	<i>ciprofloxacin-dexamethasone, ofloxacin otic</i>
<i>Overactive Bladder / Incontinence</i> * Urinary Antispasmodics	DETROL LA ENABLEX OXYTROL	<i>darifenacin ext-rel, oxybutynin ext-rel, solifenacin, tolterodine, tolterodine ext-rel, trospium, trospium ext-rel, MYRBETRIQ, TOVIAZ</i>
<i>Pain</i> Headache *	<i>butalbital-acetaminophen tablet 50-300 mg</i> <i>butalbital-acetaminophen-caffeine capsule</i> Bupap BUTALBITAL-ACETAMINOPHEN (NDC <sup>^</sup> 69499034230 only) CAMBIA FIORICET CAPSULE	<i>diclofenac sodium, ibuprofen, naproxen (except naproxen CR or naproxen suspension)</i>
	<i>dihydroergotamine spray</i> <i>ergotamine-caffeine</i> Migergot CAFERGOT MAXALT MAXALT-MLT	<i>eletriptan, naratriptan, rizatriptan, sumatriptan, zolmitriptan</i> , NURTEC ODT, ONZETRA XSAIL, REYVOW, UBRELVY, ZEMBRACE SYMTOUCH, ZOMIG NASAL SPRAY
	<i>sumatriptan-naproxen</i> TREXIMET	<i>diclofenac sodium, ibuprofen or naproxen (except naproxen CR or naproxen suspension) WITH eletriptan, naratriptan, rizatriptan, sumatriptan, zolmitriptan</i> , NURTEC ODT, ONZETRA XSAIL, REYVOW, UBRELVY, ZEMBRACE SYMTOUCH or ZOMIG NASAL SPRAY
<i>Pain</i> Neuropathic Pain *	LYRICA	<i>duloxetine, pregabalin</i>
<i>Pain</i> Opioid Analgesics	BUTRANS	<i>buprenorphine transdermal</i> , BELBUCA
	LAZANDA	<i>fentanyl transmucosal lozenge</i> , SUBSYS
	<i>levorphanol</i> <i>oxymorphone ext-rel</i> HYSINGLA ER OXYCONTIN ZOHYDRO ER	<i>fentanyl transdermal, hydrocodone ext-rel, hydromorphone ext-rel, methadone, morphine ext-rel</i> , NUCYNZA ER, XTAMPZA ER
	PERCOCET	<i>hydrocodone-acetaminophen, hydromorphone, morphine, oxycodone-acetaminophen</i> , NUCYNZA
	<i>tramadol (NDC<sup>^</sup> 52817019610 only)</i> <i>tramadol ext-rel capsule</i>	<i>tramadol (except NDC<sup>^</sup> 52817019610), tramadol ext-rel tablet</i>
<i>Pain</i> Topical Local Anesthetics	LIDOCAINE-TETRACAINE CREAM (NDC <sup>^</sup> 71800063115 only) LIDOTREX	<i>lidocaine-prilocaine</i>
<i>Pain and Inflammation</i> * Corticosteroids	MILLIPRED RAYOS	<i>dexamethasone, hydrocortisone, methylprednisolone, prednisolone solution, prednisone</i>

Category Drug Class	Formulary Drug Removals	Formulary Options
Pain and Inflammation * Nonsteroidal Anti-inflammatory Drugs (NSAIDs) / Combinations	ARTHROTEC	celecoxib; diclofenac sodium, ibuprofen, meloxicam or naproxen (except naproxen CR or naproxen suspension) <b>WITH</b> esomeprazole delayed-rel, lansoprazole delayed-rel, omeprazole delayed-rel, pantoprazole delayed-rel tablet or DEXILANT
	CELEBREX	celecoxib, diclofenac sodium, ibuprofen, meloxicam, naproxen (except naproxen CR or naproxen suspension)
	Diclofex DC (NDC^ 51021037201 only) Diclosaicin Inflammacin NuDiclo SoluPak NuDiclo TabPak PENNSAID	diclofenac sodium, diclofenac sodium gel 1%, diclofenac sodium solution, ibuprofen, meloxicam, naproxen (except naproxen CR or naproxen suspension)
	fenoprofen indomethacin capsule 20 mg ketoprofen capsule 25 mg ketoprofen ext-rel capsule mefenamic acid (NDC^ 69336012830 only) naproxen CR naproxen suspension FENOPROFEN CAPSULE INDOCIN NAPRELAN SPRIX ZORVOLEX	diclofenac sodium, ibuprofen, meloxicam, naproxen (except naproxen CR or naproxen suspension)
	naproxen-esomeprazole	diclofenac sodium, ibuprofen, meloxicam or naproxen (except naproxen CR or naproxen suspension) <b>WITH</b> esomeprazole delayed-rel, lansoprazole delayed-rel, omeprazole delayed-rel, pantoprazole delayed-rel tablet or DEXILANT
Parkinson's Disease	APOKYN <sup>1</sup>	INBRIJA, KYNMOBI
	NOURIANZ	amantadine, entacapone, pramipexole, pramipexole ext-rel, rasagiline, ropinirole, ropinirole ext-rel, selegiline, NEUPRO
	RYTARY	carbidopa-levodopa, carbidopa-levodopa ext-rel
Phenylketonuria	KUVAN <sup>1</sup>	sapropterin
Postherpetic Neuralgia	HORIZANT	gabapentin, GRALISE
Premenstrual Dysphoric Disorder (PMDD)	fluoxetine tablet (generics for SARAFEM only)	fluoxetine (except fluoxetine tablet 60 mg, fluoxetine tablet [generics for SARAFEM]), paroxetine HCl ext-rel, sertraline
Prenatal Vitamins <sup>9</sup>	AZESCO PRENATAL PLUS TRINAZ VITAFOL-ONE ZALVIT All other brand prenatal vitamins that are not CITRANATAL	prenatal vitamins, CITRANATAL
Prostate Condition Benign Prostatic Hyperplasia *	JALYN	dutasteride-tamsulosin; dutasteride or finasteride <b>WITH</b> alfuzosin ext-rel, doxazosin, silodosin, tamsulosin or terazosin
	RAPAFLO UROXATRAL	alfuzosin ext-rel, doxazosin, silodosin, tamsulosin, terazosin
Respiratory Alpha-1 Antitrypsin Deficiency	ARALAST NP <sup>1</sup> GLASSIA <sup>1</sup> ZEMAIRA <sup>1</sup>	PROLASTIN-C
Respiratory Cough	benzonatate (NDCs^ 69336012615, 69499032915 only)	benzonatate (except NDCs^ 69336012615, 69499032915)
Respiratory Xanthines	THEO-24	ipratropium inhalation solution, PERFOROMIST, SEREVENT, SPIRIVA, STRIVERDI RESPIMAT, YUPELRI

Category Drug Class	Formulary Drug Removals	Formulary Options
Sleep Disorder Hypnotics, Non-benzodiazepines	quazepam zolpidem sublingual LUNESTA ROZEREM SILENOR ZOLPIMIST	doxepin, eszopiclone, ramelteon, zolpidem, zolpidem ext-rel, BELSOMRA
Testosterone Replacement * Androgens	testosterone gel 1% (authorized generics for TESTIM and VOGELXO only) ANDROGEL FORTESTA TESTIM VOGELXO	testosterone gel (except authorized generics for TESTIM and VOGELXO), testosterone solution, ANDRODERM, NATESTO
Thyroid Supplements	CYTOMEL NATURE-THROID WESTHROID WP THYROID	levothyroxine, liothyronine, SYNTHROID
	TIROSINT	levothyroxine, SYNTHROID
Transplant * Immunosuppressants, Calcineurin Inhibitors	PROGRAF <sup>1</sup>	tacrolimus
Urea Cycle Disorders	BUPHENYL <sup>1</sup> RAVICTI <sup>1</sup>	sodium phenylbutyrate
Uterine Fibroids *	LUPRON DEPOT <sup>1</sup>	ORIAHNN

Category Drug Class	Other Considerations
All Drugs	On a quarterly basis, new and existing products - including limited source generics, products with significant cost inflation, and specialty and non-specialty products - may be re-evaluated to determine appropriate formulary placement. These evaluations will assess whether clinically appropriate and cost-effective options remain available on the formulary and may result in removal, addition or deletion of a product.
Autoimmune and Hepatitis C *	For some clients, an Indication-Based Formulary will be utilized for products in these classes and may result in additional removals for certain conditions only.
Drugs for Infusion Into Spaces Other Than the Blood	A drug that must be infused into a space other than the blood will generally not be covered under the prescription drug benefit.
New-to-Market Agents <sup>1</sup>	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.

The listed formulary options are subject to change.

## List of Formulary Drug Removals

ABILIFY  
ACANYA  
ACIPHEX  
ACIPHEX SPRINKLE  
ACTEMRA ACTPEN<sup>1</sup>  
ACTEMRA INTRAVENOUS<sup>1</sup>  
ACTEMRA SUBCUTANEOUS<sup>1</sup>  
ACTICLATE  
Activite  
ACTOS  
ACUVAIL  
acyclovir cream  
ADCIRCA<sup>1</sup>  
ADDERALL  
ADZENYS ER

ADZENYS XR-ODT  
ALCORTIN A  
ALEVICYN GEL  
ALEVICYN SG  
ALEVICYN SOLUTION  
ALIQOPA<sup>1</sup>  
ALLISON MEDICAL INSULIN SYRINGES<sup>6</sup>  
ALPROLIX<sup>1</sup>  
ALREX  
ALTOPREV  
ALVESCO  
AMITIZA  
AMRIX  
ANDROGEL  
APEXICON E

APIDRA  
APOKYN<sup>1</sup>  
APTENSIO XR  
APTIVUS<sup>1</sup>  
ARALAST NP<sup>1</sup>  
ARTHROTEC  
ASMANEX  
ASMANEX HFA  
ASTAGRAF XL<sup>1</sup>  
ATACAND  
ATACAND HCT  
ATIVAN  
ATOPADERM  
AVASTIN<sup>1</sup>  
AVENOVA

AVONEX <sup>1</sup>  
AVSOLA <sup>1</sup>  
AZASITE  
AZELEX  
AZESCO  
AZOR  
BANZEL SUSPENSION  
BARACLUDE TABLET <sup>1</sup>  
BEAU RX  
BECONASE AQ  
BENICAR  
BENICAR HCT  
BENSAL HP  
BENZACLIN  
*benzonatate* (NDCs<sup>^</sup> 69336012615, 69499032915 only)  
BEPREVE  
BERINERT <sup>1</sup>  
BETAPACE  
BETAPACE AF  
BETIMOL  
BEVESPI AEROSPHERE  
BEYAZ  
*bimatoprost solution 0.03%*  
BORTEZOMIB <sup>1</sup>  
BREEZE 2 STRIPS AND KITS <sup>8</sup>  
BROMSITE  
*Bupap*  
BUPHENYL <sup>1</sup>  
*bupropion ext-rel tablet 450 mg*  
*butalbital-acetaminophen tablet 50-300 mg*  
BUTALBITAL-ACETAMINOPHEN  
(NDC<sup>^</sup> 69499034230 only)  
*butalbital-acetaminophen-caffeine capsule*  
BUTRANS  
BYDUREON  
BYETTA  
CAFERGOT  
*calcipotriene cream*  
*calcipotriene-betamethasone*  
*calcitriol ointment*  
CAMBIA  
CARAC  
CARAFATE  
CARBINOXAMINE TABLET 6 MG  
CARDIZEM  
CARDIZEM CD  
CARDIZEM LA  
*carisoprodol 250 mg*  
CARNITOR  
CARNITOR SF  
CELEBREX  
CELLCEPT <sup>1</sup>  
*chlordiazepoxide-clidinium* (NDCs<sup>^</sup> 11534019701,  
42494040901, 51293069601, 51293069610 only)  
CHLORZOXAZONE 250 MG  
*chlorzoxazone 375 mg*  
*chlorzoxazone 500 mg* (NDC<sup>^</sup> 73007001303 only)  
*chlorzoxazone 750 mg*  
CHORIONIC GONADOTROPIN <sup>1</sup>  
CIALIS  
CICATRACE  
CILOXAN  
CIMZIA LYOPHILIZED POWDER <sup>1</sup>  
CIMZIA PREFILLED SYRINGE <sup>1</sup>  
CIPRO HC  
CIPRODEX  
*clindamycin gel* (NDC<sup>^</sup> 68682046275 only)  
*clobetasol spray*  
CLOBEX SPRAY  
*clocortolone cream*  
COLAZAL  
*colchicine capsule*  
COLCRYS  
COMPLERA <sup>1</sup>  
CONSENSI  
CONTOUR NEXT STRIPS AND KITS <sup>8</sup>  
CONTOUR STRIPS AND KITS <sup>8</sup>  
CONTRAVE

CORDRAN OINTMENT  
COREG CR  
*CoreMino*  
COZAAR  
CRESEMBA  
CRESTOR  
CUPRIMINE  
*cyclobenzaprine ext-rel capsule*  
*cyclobenzaprine tablet 7.5 mg*  
CYMBALTA  
CYTOMEL  
DARAPRIM  
DAYTRANA  
DELZICOL  
DEFERAL <sup>1</sup>  
*desoximetasone ointment 0.05%*  
DETROL LA  
*dexchlorpheniramine*  
*Dexifol*  
*Diclofex DC* (NDC<sup>^</sup> 51021037201 only)  
*Diclosaicin*  
DIFFERIN LOTION  
*difflorasone cream*  
*difflorasone ointment*  
*dihydroergotamine spray*  
*diltiazem ext-rel* (generics for CARDIZEM LA only)  
DIOVAN  
DIOVAN HCT  
*Diphen Elixir*  
DORYX  
DORYX MPC  
*doxepin cream*  
*doxycycline hyclate delayed-rel tablet 50 mg*  
*doxycycline hyclate delayed-rel tablet 200 mg*  
*doxycycline hyclate tablet 50 mg*  
(NDC<sup>^</sup> 72143021160 only)  
*doxycycline hyclate tablet 75 mg*  
*doxycycline hyclate tablet 150 mg*  
*doxycycline monohydrate capsule 75 mg*  
*doxycycline monohydrate capsule 150 mg*  
*doxycycline monohydrate delayed-rel capsule*  
DULERA  
DUTOPROL  
DYRENIUM  
EDARBI  
EDARBYCLOR  
E.E.S. GRANULES  
EFFEXOR XR  
ELELYSO <sup>1</sup>  
ELIDEL  
ELMIRON  
ENABLEX  
ENLITE CONTINUOUS  
GLUCOSE MONITORING SYSTEM  
ENTERAGAM  
ENTYVIO (For Crohn's Disease Only) <sup>1</sup>  
ENVARUS XR <sup>1</sup>  
EPICERAM  
EPIVIR HBV <sup>1</sup>  
EPOGEN <sup>1</sup>  
*ergotamine-caffeine*  
ERYPED  
*estradiol vaginal tablet*  
ESTRING  
EVEKEO  
EVERSENSE CONTINUOUS  
GLUCOSE MONITORING SYSTEM  
EXFORGE  
EXFORGE HCT  
EXJADE <sup>1</sup>  
EXTAVIA <sup>1</sup>  
FABIOR  
FANAPT  
FEMRING  
*fenofibrate capsule 50 mg*  
*fenofibrate capsule 130 mg*  
*fenofibrate tablet 40 mg*  
*fenofibrate tablet 120 mg*

FENOGLIDE TABLET 120 MG  
*fenoprofen*  
FENOPROFEN CAPSULE  
FERIVA 21/7  
FERRIPROX <sup>1</sup>  
*Fexmid*  
FINACEA GEL  
FIORICET CAPSULE  
FLAREX  
*flucytosine capsule 500 mg*  
*fluocinonide cream 0.1%*  
*fluorouracil cream 0.5%*  
*fluoxetine tablet* (generics for SARAFEM only)  
*fluoxetine tablet 60 mg*  
*flurandrenolide cream*  
*flurandrenolide lotion*  
*flurandrenolide ointment*  
FML FORTE  
FML LIQUIFILM  
FML S.O.P.  
FOCALIN XR  
FOLIC-K  
FOLLISTIM AQ <sup>1</sup>  
*Folvite-D*  
FORTAMET  
FORTESTA  
FOSRENOL  
FOSTEUM  
FOSTEUM PLUS  
FREESTYLE LIBRE CONTINUOUS  
GLUCOSE MONITORING SYSTEM  
FREESTYLE STRIPS AND KITS <sup>8</sup>  
FULPHILA <sup>1</sup>  
GEL-ONE <sup>1</sup>  
*Genicin Vita-S*  
GENOTROPIN <sup>1</sup>  
GLASSIA <sup>1</sup>  
GLEEEVC <sup>1</sup>  
GLUMETZA  
GLYCOPYRROLATE TABLET 1.5 MG  
GOLYTELY  
GRANIX <sup>1</sup>  
GUARDIAN CONNECT CONTINUOUS  
GLUCOSE MONITORING SYSTEM  
GUARDIAN REAL-TIME CONTINUOUS  
GLUCOSE MONITORING SYSTEM  
*halcinonide cream*  
HEPSERA <sup>1</sup>  
HERCEPTIN <sup>1</sup>  
HERCEPTIN HYLECTA <sup>1</sup>  
HORIZANT  
HUMALOG  
HUMALOG MIX 50/50  
HUMALOG MIX 75/25  
HUMATROPE <sup>1</sup>  
HUMULIN 70/30 <sup>4</sup>  
HUMULIN N <sup>4</sup>  
HUMULIN R <sup>4</sup>  
HYALGAN <sup>1</sup>  
*hydrocortisone butyrate lipophilic cream 0.1%*  
*hydrocortisone butyrate lotion*  
*HylaVite*  
*hyoscyamine sulfate ext-rel*  
HYSINGLA ER  
HYZAAR  
*icosapent ethyl*  
ILUMYA <sup>1</sup>  
INCRUSE ELLIPTA  
INDERAL LA  
INDERAL XL  
INDOCIN  
*indomethacin capsule 20 mg*  
*Inflammacin*  
INFLECTRA <sup>1</sup>  
INNOPRAN XL  
INTRAROSA  
INTUNIV  
INVELTYS

INVIRASE<sup>1</sup>  
INVOKAMET  
INVOKAMET XR  
INVOKANA  
*isosorbide dinitrate 40 mg*  
JADENU<sup>1</sup>  
JALYN  
JENTADUETO  
JENTADUETO XR  
KAMDOY  
KAZANO  
*ketoconazole foam 2%*  
*Ketodan*  
*ketoprofen capsule 25 mg*  
*ketoprofen ext-rel capsule*  
KINERET<sup>1</sup>  
KOMBIGLYZE XR  
KUVAN<sup>1</sup>  
KYPROLIS<sup>1</sup>  
LACRISERT  
*Lactojen*  
LACTULOSE PAK  
LANOXIN TABLET (125 MCG and 250 MCG only)  
*lanthanum carbonate*  
LANTUS  
LASTACAF  
LAZANDA  
LESCOL XL  
LETAIRIS<sup>1</sup>  
*levorphanol*  
LEXAPRO  
LEXIVA<sup>1</sup>  
LIALDA  
LIBRAX  
LIDOCAINE-TETRACAINE CREAM  
(NDC<sup>^</sup> 71800063115 only)  
LIDOTREX  
LILETTA<sup>1</sup>  
LIPITOR  
LITHOSTAT  
LIVALO  
*Lorid*  
*Lorzone*  
LOTEMAX  
LOTEMAX SM  
*luliconazole*  
LUNESTA  
LUPRON DEPOT<sup>1</sup>  
LUPRON DEPOT-PED<sup>1</sup>  
LYRICA  
MACRODANTIN  
*Matzim LA*  
MAVYRET<sup>1</sup>  
MAXALT  
MAXALT-MLT  
MAXIDEX  
*mefenamic acid (NDC<sup>^</sup> 69336012830 only)*  
MENEST  
*mesalamine delayed-rel tablet 800 mg*  
*metaxalone 400 mg*  
*metformin ext-rel*  
(generics for FORTAMET and GLUMETZA only)  
*methocarbamol 500 mg (NDC<sup>^</sup> 69036091010 only)*  
*methocarbamol 750 mg*  
(NDCs<sup>^</sup> 69036093090, 70868090190 only)  
MIACALCIN INJECTION  
MIACALCIN NASAL SPRAY  
MICARDIS  
MICARDIS HCT  
*Migergot*  
MILLIPRED  
MINASTRIN 24 FE  
MINIVELLE  
MINOCIN  
*minocycline ext-rel*  
MIRVASO  
*Mondoxine NL capsule 75 mg*  
MONOVISC<sup>1</sup>

MOVIPREP  
*MultiPro*  
*mupirocin cream*  
MYFORTIC<sup>1</sup>  
MYTESI  
NAPRELAN  
*naproxen-esomeprazole*  
*naproxen CR*  
*naproxen suspension*  
NATAZIA  
NATURE-THROID  
NEO-SYNALAR  
NESINA  
NEULASTA<sup>1</sup>  
NEULASTA ONPRO<sup>1</sup>  
NEUPOGEN<sup>1</sup>  
NEVANAC  
NEXIUM  
*niacin tablet 500 mg*  
*Niacor*  
NICADAN  
NICAPRIN  
NICAZEL  
NICAZEL FORTE  
NICOMIDE  
NILANDRON  
*nitrofurantoin (NDC<sup>^</sup> 70408023932 only)*  
*Nolix*  
NORGESIC FORTE  
NORITATE  
NORPACE  
NORVASC  
NOURIANZ  
NOVACORT  
NOVAREL<sup>1</sup>  
NOVO NORDISK NEEDLES<sup>6</sup>  
NOXAFIL  
*NuDiclo SoluPak*  
*NuDiclo TabPak*  
NUTROPIN AQ<sup>1</sup>  
NUVARING  
NUVIGIL  
OLEPTRO  
OLUX-E  
*omeprazole-sodium bicarbonate*  
OMNARIS  
OMNITROPE<sup>1</sup>  
OMNIVEX  
ONFI  
ONGLYZA  
ORENCIA INTRAVENOUS<sup>1</sup>  
*orphenadrine-aspirin-caffeine*  
*Orphengesic Forte*  
ORTHO D  
ORTHO DF  
ORTHOVISC<sup>1</sup>  
*Oscimin SR*  
OSENI  
OSMOPREP  
OSPHENA  
OTREXUP<sup>1</sup>  
OWEN MUMFORD NEEDLES<sup>6</sup>  
*oxiconazole (NDCs<sup>^</sup> 00168035830, 51672135902 only)*  
OXYCONTIN  
*oxymorphone ext-rel*  
OXYTROL  
*pantoprazole delayed-rel suspension*  
*paroxetine mesylate capsule 7.5 mg*  
PAXIL  
PAXIL CR  
PEGASYS<sup>1</sup>  
PENNSAID  
PERCOCET  
PERRIGO NEEDLES<sup>6</sup>  
PEXEVA  
PLAVIX  
PLEGRIDY<sup>1</sup>  
POLYTOZA

*posaconazole delayed-rel tablet*  
PRADAXA  
PRED FORTE  
PRED MILD  
PREGNYL<sup>1</sup>  
PREMARIN  
PREMARIN CREAM  
PRENATAL PLUS  
PREVACID  
PREVIDENT  
PRILOSEC  
PRISTIQ  
PROAIR HFA  
PROAIR RESPICLICK  
PROCRIT<sup>1</sup>  
PROCYSBI<sup>1</sup>  
PRODIGEN  
PROGRAF<sup>1</sup>  
PROMETRIUM  
PROTONIX  
PROVAD  
PROVENTIL HFA  
PROVIGIL  
PROZAC  
PSORCON  
QNASL  
QTERN  
*quazepam*  
RAPAFLO  
RAPAMUNE<sup>1</sup>  
RAVICTI<sup>1</sup>  
RAYOS  
RECEDO  
REMODULIN<sup>1</sup>  
RENFLEXIS<sup>1</sup>  
REPATHA<sup>1</sup>  
REVATIO<sup>1</sup>  
RHEUMATE  
RIABNI<sup>1</sup>  
RIBOZEL  
RIMSO-50  
RIOMET  
RITUXAN<sup>1</sup>  
ROZEREM  
*RyClora*  
RYTARY  
SABRIL<sup>1</sup>  
SAIZEN<sup>1</sup>  
SANDOSTATIN LAR<sup>1</sup>  
SCARSILK PAD  
SEASONIQUE  
SEROQUEL XR  
SIGNIFOR LAR<sup>1</sup>  
SIL-K PAD  
SILENOR  
SILIVEX  
SILTREX  
SIMPONI<sup>1</sup>  
SINGULAIR  
SOMAVERT<sup>1</sup>  
SORILUX  
SPRIX  
STENDRA  
STRIBILD<sup>1</sup>  
SUBOXONE  
*sucralfate suspension*  
*sumatriptan-naproxen*  
SUPREP  
*Symax-SR*  
SYNERDERM  
SYNVISC<sup>1</sup>  
SYNVISC-ONE<sup>1</sup>  
SYPRINE  
TALIVA  
TARGADOX  
TASIGNA<sup>1</sup>  
TAYTULLA  
TAZORAC

TECFIDERA <sup>1</sup>	ULORIC	YASMIN
TESTIM	ULTIMED INSULIN SYRINGES <sup>6</sup>	YAZ
<i>testosterone gel 1%</i>	ULTIMED NEEDLES <sup>6</sup>	<i>Yuvafem</i>
(authorized generics for TESTIM and VOGELXO only)	UROXATRAL	ZALVIT
THEO-24	VALCYTE	ZARXIO <sup>1</sup>
THIOLA	VALTREX	ZEGERID
THIOLA EC	<i>Vanoxide-HC</i>	ZELAC
TIMOPTIC OCUDOSE	VASCULERA	ZEMAIRA <sup>1</sup>
TIROSINT	VECTICAL	ZEPATIER <sup>1</sup>
TOBI <sup>1</sup>	VELTIN	ZERVIAE
TOBI PODHALER <sup>1</sup>	<i>venlafaxine ext-rel tablet (except 225 mg)</i>	ZESTORETIC
TOBRADEX ST	VENTOLIN HFA	ZETIA
<i>topiramate ext-rel capsule (generics for QUDEXY XR only)</i>	VEREGEN	ZETONNA
TOPROL-XL	VIAGRA	ZIANA
TRACLEER <sup>1</sup>	VIEKIRA PAK <sup>1</sup>	<i>zileuton ext-rel</i>
TRADJENTA	VIIBRYD	ZIRGAN
<i>tramadol (NDC<sup>^</sup> 52817019610 only)</i>	VIRACEPT <sup>1</sup>	ZOHYDRO ER
<i>tramadol ext-rel capsule</i>	VISCO-3 <sup>1</sup>	ZOLADEX <sup>1</sup>
TRANSDERM SCOP	VITAFOL-ONE	ZOLOFT
TRAVATAN Z	<i>Vitasure</i>	<i>zolpidem sublingual</i>
TRELSTAR MIXJECT <sup>1</sup>	VIVELLE-DOT	ZOLPIMIST
TREXIMET	VOGELXO	ZONEGRAN
<i>triamcinolone aerosol 0.2%</i>	WESTHROID	ZONTIVITY
<i>triamcinolone ointment 0.05%</i>	WP THYROID	ZORTRESS <sup>1</sup>
<i>Trianex</i>	XANAX	ZORVOLEX
TRICOR	XANAX XR	ZUPLENZ
TRINAZ	XENAZINE <sup>1</sup>	ZYDELIG <sup>1</sup>
TRIVIDIA INSULIN SYRINGES <sup>6</sup>	XENICAL	ZYLET
<i>TronVite</i>	XOLEGEL	ZYTIGA <sup>1</sup>
TRUXIMA <sup>1</sup>	XOPENEX HFA	ZYVIT
TUDORZA	<i>Xvite</i>	
UDENYCA <sup>1</sup>	XYZBAC	

This list represents brand products in CAPS, branded generics in upper- and lowercase *Italics*, and generic products in lowercase *italics*. This is not an all-inclusive list of available covered options. 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. There may be additional plan restrictions. Please consult your plan for further information.

Subject to applicable laws and regulations.

\* 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 NDCs<sup>^</sup>.

<sup>^</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>1</sup> An exception process may exist for specific clinical or regulatory circumstances that may require coverage of a non-covered medication. If your doctor believes you have a specific clinical need for a non-covered product, he or she should fax an exception request to: 1-888-487-9257.

<sup>2</sup> 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).

<sup>3</sup> If approved for coverage and prescribed for primary prevention of cardiovascular disease, may be covered without cost sharing through an exceptions process.

<sup>4</sup> Rebranded or private label formulations are not covered (i.e., RELION).

<sup>5</sup> Long Acting Insulins - First Generation.

<sup>6</sup> BD ULTRAFINE syringes and needles are the only preferred options.

<sup>7</sup> 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.

<sup>8</sup> ACCU-CHEK or ONETOUCH brand test strips are the only preferred options.

<sup>9</sup> Generic prenatal vitamins and CITRANATAL are the only preferred options.

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