

Covered and non-covered drugs

Drugs not covered – and their covered alternatives

2020 Advanced Control Plan – Aetna
Formulary Exclusions Drug List

Below is a list of medications that will not be covered without a prior authorization for medical necessity. If you continue using one of these drugs without prior approval, you may be required to pay the full cost. Ask your doctor to choose one of the generic or brand formulary options listed below.

| Key | |
|--------------------------|---------------------|
| UPPERCASE | Brand-name medicine |
| <i>lowercase italics</i> | Generic medicine |

Preferred Options For Excluded Medications⁷

| Excluded Drug Name(s) | Preferred Option(s) |
|---|--|
| ABILIFY | <i>aripiprazole, clozapine, olanzapine, quetiapine, quetiapine ext-rel, risperidone, ziprasidone, VRAYLAR</i> |
| ABSORICA | <i>oral isotretinoin</i> |
| ACANYA | <i>adapalene, benzoyl peroxide, clindamycin gel, clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, EPIDUO, TAZORAC</i> |
| ACIPHEX, ACIPHEX SPRINKLE | <i>esomeprazole, lansoprazole, omeprazole, pantoprazole, DEXILANT</i> |
| ACTICLATE | <i>doxycycline hyclate, minocycline, tetracycline</i> |
| ACTOS | <i>pioglitazone</i> |
| ACUVAIL | <i>bromfenac, diclofenac, ketorolac, PROLENSA</i> |
| ADCIRCA | <i>sildenafil, tadalafil</i> |
| ADZENYS XR-ODT | <i>amphetamine-dextroamphetamine mixed salts ext-rel, dexamethylphenidate ext-rel, dextroamphetamine ext-rel, methylphenidate ext-rel, MYDAYIS, VYVANSE</i> |
| ALA-QUIN | <i>desonide, hydrocortisone</i> |
| ALDARA | <i>imiquimod</i> |
| ALLISON MEDICAL INSULIN SYRINGES⁸ | BD ULTRAFINE INSULIN SYRINGES |
| ALORA | <i>estradiol, DIVIGEL, EVAMIST</i> |
| ALPROLIX | Consult doctor |
| ALREX | <i>azelastine, cromolyn sodium, olopatadine</i> |
| ALTOPREV | <i>atorvastatin, ezetimibe-simvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin</i> |
| ALVESCO | ARNUITY ELLIPTA, FLOVENT DISKUS, FLOVENT HFA, PULMICORT FLEXHALER, QVAR REDHALER |
| AMRIX | <i>cyclobenzaprine</i> |
| ANDROGEL 1% | <i>testosterone gel, testosterone solution, ANDRODERM</i> |
| ANGELIQ | <i>estradiol-norethindrone, PREMPHASE, PREMPRO</i> |
| APEXICON E | <i>desoximetasone, fluocinonide (except fluocinonide cream 0.1%)</i> |
| APIDRA | FIASP, NOVOLOG |
| APLENZIN | <i>bupropion, bupropion ER</i> |
| APTENSIO XR | <i>amphetamine-dextroamphetamine mixed salts ext-rel, dexamethylphenidate ext-rel, dextroamphetamine ext-rel, methylphenidate ext-rel, MYDAYIS, VYVANSE</i> |
| APTIOM | <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, FYCOMP, OXTELLAR XR, TROKENDI XR, VIMPAT</i> |

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| Excluded Drug Name(s) | Preferred Option(s) |
|---|---|
| ARCAPTA | STRIVERDI RESPIMAT |
| ARTHROTEC | <i>celecoxib; diclofenac sodium, ibuprofen, meloxicam or naproxen (except naproxen CR or naproxen suspension) WITH esomeprazole, lansoprazole, omeprazole, pantoprazole or DEXILANT</i> |
| ASACOL HD | <i>balsalazide, sulfasalazine, sulfasalazine delayed-rel, APRISO, PENTASA</i> |
| ASCENSIA STRIPS AND KITS ¹¹ | ACCU-CHEK AVIVA PLUS STRIPS AND KITS, ACCU-CHEK COMPACT PLUS STRIPS AND KITS, ACCU-CHEK GUIDE STRIPS AND KITS, ACCU-CHEK SMARTVIEW STRIPS AND KITS |
| ASMANEX, ASMANEX HFA | ARNUITY ELLIPTA, FLOVENT DISKUS, FLOVENT HFA, PULMICORT FLEXHALER, QVAR REDIHALER |
| ASTAGRAF XL | <i>cyclosporine; cyclosporine, modified; tacrolimus</i> |
| ATACAND, ATACAND HCT | <i>candesartan, candesartan-hydrochlorothiazide, eprosartan, irbesartan, irbesartan-hydrochlorothiazide, losartan, losartan-hydrochlorothiazide, olmesartan, olmesartan-hydrochlorothiazide, telmisartan, telmisartan-hydrochlorothiazide, valsartan, valsartan-hydrochlorothiazide</i> |
| ATIVAN | <i>alprazolam, clonazepam, diazepam, lorazepam, oxazepam</i> |
| ATRALIN | <i>adapalene, benzoyl peroxide, clindamycin gel, clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, EPIDUO, TAZORAC</i> |
| ATROVENT HFA | <i>ipratropium inhalation solution, INCRUSE ELLIPTA, SPIRIVA</i> |
| AUVI-Q | <i>epinephrine auto-injector, EPIPEN, EPIPEN JR</i> |
| AVENOVA | Consult doctor |
| AVONEX | <i>glatiramer, AUBAGIO, BETASERON, COPAXONE, GILENYA, MAYZENT, REBIF, TECFIDERA, TYSABRI</i> |
| AZASITE | <i>ciprofloxacin, erythromycin, gentamicin, levofloxacin, moxifloxacin, ofloxacin, sulfacetamide, tobramycin, BESIVANCE, MOXEZA</i> |
| AZELEX | <i>adapalene, benzoyl peroxide, clindamycin gel, clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, EPIDUO, TAZORAC</i> |
| BARACLUDE TABLET | <i>entecavir, lamivudine, tenofovir disoproxil fumarate, BARACLUDE SOLUTION, VEMLIDY</i> |
| BECONASE AQ | <i>flunisolide, fluticasone, mometasone, triamcinolone, DYMISTA</i> |
| BENICAR, BENICAR HCT | <i>candesartan, candesartan-hydrochlorothiazide, eprosartan, irbesartan, irbesartan-hydrochlorothiazide, losartan, losartan-hydrochlorothiazide, olmesartan, olmesartan-hydrochlorothiazide, telmisartan, telmisartan-hydrochlorothiazide, valsartan, valsartan-hydrochlorothiazide</i> |
| BENZACLIN | <i>adapalene, benzoyl peroxide, clindamycin gel, clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, EPIDUO, TAZORAC</i> |
| Benzonatate (NDCs[^] 69336012615, 69499032915 only) | <i>benzonatate (except NDCs[^] 69336012615, 69499032915)</i> |
| BEPREVE | <i>azelastine, cromolyn sodium, olopatadine</i> |
| BERINERT | FIRAZYR, RUCONEST |
| BETAPACE, BETAPACE AF | <i>sotalol</i> |
| BEYAZ | <i>ethinyl estradiol-drospirenone, ethinyl estradiol-drospirenone-levomefolate, ethinyl estradiol-norethindrone acetate-iron</i> |
| BREEZE 2 STRIPS AND KITS ⁹ | ACCU-CHEK AVIVA PLUS STRIPS AND KITS, ACCU-CHEK COMPACT PLUS STRIPS AND KITS, ACCU-CHEK GUIDE STRIPS AND KITS, ACCU-CHEK SMARTVIEW STRIPS AND KITS |
| BROVANA | PERFOROMIST |
| BUPHENYL | <i>sodium phenylbutyrate</i> |
| butalbital-acetaminophen (NDC[^] 69499034230 only) | <i>diclofenac sodium, ibuprofen, naproxen (except naproxen CR or naproxen suspension)</i> |
| butalbital-acetaminophen-caffeine capsule | <i>diclofenac sodium, ibuprofen, naproxen (except naproxen CR or naproxen suspension)</i> |
| BUTRANS | BELBUCA |
| BYDUREON | OZEMPIC, TRULICITY, VICTOZA |

| Excluded Drug Name(s) | Preferred Option(s) |
|--|---|
| BYETTA | OZEMPIC, TRULICITY, VICTOZA |
| BYSTOLIC | <i>atenolol, carvedilol, carvedilol phosphate ext-rel, metoprolol succinate ext-rel, metoprolol tartrate, nadolol, propranolol, propranolol ext-rel</i> |
| CAFERGOT | <i>eletriptan, ergotamine-caffeine, naratriptan, rizatriptan, sumatriptan, zolmitriptan, ZOMIG NASAL SPRAY</i> |
| <i>calcipotriene cream</i> | <i>calcipotriene ointment, calcipotriene solution</i> |
| <i>calcitriol ointment</i> | <i>calcipotriene ointment, calcipotriene solution</i> |
| CAMBIA | <i>diclofenac sodium, ibuprofen, meloxicam, naproxen (except naproxen CR or naproxen suspension)</i> |
| CANASA | <i>hydrocortisone enema, mesalamine suppository, mesalamine suspension, CORTIFOAM</i> |
| CAPEX | <i>ketconazole shampoo 2%, selenium sulfide shampoo 2.5%</i> |
| CARAC | <i>fluorouracil cream 5%, fluorouracil solution, imiquimod, TOLAK</i> |
| CARAFATE | <i>sucralfate</i> |
| <i>carbinoxamine tablet 6 mg</i> | <i>levocetirizine</i> |
| CARDIZEM, CARDIZEM CD, CARDIZEM LA (and its generics) | <i>diltiazem ext-rel (except generic CARDIZEM LA)</i> |
| CARNITOR, CARNITOR SF | <i>levocarnitine</i> |
| CELEBREX | <i>celecoxib, diclofenac sodium, ibuprofen, meloxicam, naproxen (except naproxen CR or naproxen suspension)</i> |
| CELLCEPT | <i>mycophenolate mofetil, mycophenolate sodium</i> |
| CHLORZOXAZONE 250 MG (NDCs[^] 46672086046, 69499033060 only) | <i>carisoprodol, chlorzoxazone, cyclobenzaprine, metaxalone, methocarbamol, orphenadrine-aspirin-caffeine</i> |
| CHORIONIC GONADOTROPIN | OIDREL* |
| CIALIS | <i>sildenafil*, tadalafil*, vardenafil*</i> |
| CLENPIQ | <i>peg 3350-electrolytes, SUPREP</i> |
| CLINDAGEL | <i>adapalene, benzoyl peroxide, clindamycin gel, clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, EPIDUO, TAZORAC</i> |
| <i>clobetasol spray</i> | <i>clobetasol foam</i> |
| CLOBEX SPRAY | <i>clobetasol foam</i> |
| COLAZAL | <i>balsalazide</i> |
| COLCRYS | <i>colchicine tablet</i> |
| COMBIPATCH | CLIMARA PRO |
| COMBIVENT RESPIMAT | <i>ipratropium-albuterol inhalation solution, ANORO ELLIPTA, BEVESPI AEROSPHERE</i> |
| COMPLERA | ATRIPLA, BIKTARVY, GENVOYA, ODEFSEY, SYMFI, SYMFI LO, TRIUMEQ |
| CONTOUR NEXT STRIPS AND KITS⁹ | ACCU-CHEK AVIVA PLUS STRIPS AND KITS, ACCU-CHEK COMPACT PLUS STRIPS AND KITS, ACCU-CHEK GUIDE STRIPS AND KITS, ACCU-CHEK SMARTVIEW STRIPS AND KITS |
| CONTOUR STRIPS AND KITS⁹ | ACCU-CHEK AVIVA PLUS STRIPS AND KITS, ACCU-CHEK COMPACT PLUS STRIPS AND KITS, ACCU-CHEK GUIDE STRIPS AND KITS, ACCU-CHEK SMARTVIEW STRIPS AND KITS |
| CONTRACE[*] | BELVIQ*, BELVIQ XR*, SAXENDA* |
| CORDRAN OINTMENT | <i>hydrocortisone butyrate, mometasone, triamcinolone</i> |
| CORDRAN TAPE | <i>clobetasol cream, clobetasol lotion, clobetasol ointment</i> |

* Coverage may not apply in all plans. Refer to plan documents.

| Excluded Drug Name(s) | Preferred Option(s) |
|---|---|
| COREG CR | <i>atenolol, carvedilol, carvedilol phosphate ext-rel, metoprolol succinate ext-rel, metoprolol tartrate, nadolol, propranolol, propranolol ext-rel</i> |
| COSOPT PF | <i>dorzolamide-timolol</i> |
| COUMADIN | <i>warfarin</i> |
| CRESTOR | <i>atorvastatin, ezetimibe-simvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin</i> |
| CRINONE | ENDOMETRIN |
| CUPRIMINE | Consult doctor |
| CYCLOSET | Consult doctor |
| CYMBALTA | <i>desvenlafaxine ext-rel, duloxetine, venlafaxine, venlafaxine ext-rel capsule</i> |
| DELZICOL | <i>balsalazide, sulfasalazine, sulfasalazine delayed-rel, APRISO, PENTASA</i> |
| DENAVIR | <i>acyclovir, valacyclovir</i> |
| DESVENLAFAXINE ER | <i>desvenlafaxine ext-rel, duloxetine, venlafaxine, venlafaxine ext-rel capsule</i> |
| DETROL LA | <i>darifenacin ext-rel, oxybutynin ext-rel, solifenacin, tolterodine, tolterodine ext-rel, trospium, trospium ext-rel, MYRBETRIQ, TOVIAZ</i> |
| Dexifol | <i>folic acid, folic acid-vitamin B6-vitamin B12</i> |
| Dexpak | <i>dexamethasone, hydrocortisone, methylprednisolone, prednisolone solution, prednisone</i> |
| DIASTAT | <i>diazepam rectal gel</i> |
| diclofenac sodium gel 1% (NDC^ 69499031866 only) | <i>diclofenac sodium, diclofenac sodium gel 1% (except NDC^ 69499031866), diclofenac sodium solution, ibuprofen, meloxicam, naproxen (except naproxen CR or naproxen suspension)</i> |
| Dicloflex DC (NDC^ 51021037201 only) | <i>diclofenac sodium, diclofenac sodium gel 1% (except NDC^ 69499031866), diclofenac sodium solution, ibuprofen, meloxicam, naproxen (except naproxen CR or naproxen suspension)</i> |
| Diclosaicin | <i>diclofenac sodium, diclofenac sodium gel 1% (except NDC^ 69499031866), diclofenac sodium solution, ibuprofen, meloxicam, naproxen (except naproxen CR or naproxen suspension)</i> |
| diflorasone cream, diflorasone ointment | <i>desoximetasone, fluocinonide (except fluocinonide cream 0.1%)</i> |
| dihydroergotamine spray | <i>eletriptan, ergotamine-caffeine, naratriptan, rizatriptan, sumatriptan, zolmitriptan, ZOMIG NASAL SPRAY</i> |
| DILANTIN | <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</i> |
| DIOVAN, DIOVAN HCT | <i>candesartan, candesartan-hydrochlorothiazide, eprosartan, irbesartan, irbesartan-hydrochlorothiazide, losartan, losartan-hydrochlorothiazide, olmesartan, olmesartan-hydrochlorothiazide, telmisartan, telmisartan-hydrochlorothiazide, valsartan, valsartan-hydrochlorothiazide</i> |
| DORYX, DORYX MPC | <i>doxycycline hyclate, minocycline, tetracycline</i> |
| doxepin cream | <i>desonide, hydrocortisone, pimecrolimus, tacrolimus, EUCRISA</i> |
| DUEXIS | <i>ibuprofen tabs WITH famotidine</i> |
| DULERA | ADVAIR DISKUS, ADVAIR HFA, BREO ELLIPTA, SYMBICORT |
| DUREZOL | <i>dexamethasone, loteprednol, prednisolone acetate 1%, FML S.O.P.</i> |
| DUROLANE | GEL-ONE, GELSYN-3, SUPARTZ FX, VISCO-3 |
| DUTOPROL | <i>metoprolol succinate ext-rel WITH hydrochlorothiazide</i> |
| DYRENIUM | <i>amiloride</i> |
| ECOZA | <i>clotrimazole, econazole, ketoconazole, luliconazole, oxiconazole</i> |
| EDARBI, EDARBYCLOR | <i>candesartan, candesartan-hydrochlorothiazide, eprosartan, irbesartan, irbesartan-hydrochlorothiazide, losartan, losartan-hydrochlorothiazide, olmesartan, olmesartan-hydrochlorothiazide, telmisartan, telmisartan-hydrochlorothiazide, valsartan, valsartan-hydrochlorothiazide</i> |

* Coverage may not apply in all plans. Refer to plan documents.

| Excluded Drug Name(s) | Preferred Option(s) |
|--|---|
| EDLUAR | <i>zolpidem, zolpidem ext-rel, zolpidem sublingual</i> |
| E.E.S. GRANULES | <i>erythromycins</i> |
| EFFEXOR XR | <i>desvenlafaxine ext-rel, duloxetine, venlafaxine, venlafaxine ext-rel capsule</i> |
| ELELYSO | CERDELGA, CEREZYME |
| ELESTRIN | <i>estradiol, DIVIGEL, EVAMIST</i> |
| ELIDEL | <i>pimecrolimus, tacrolimus, EUCRISA</i> |
| ELOCTATE | ADYNOVATE, JIVI, KOGENATE FS, KOVALTRY, NOVOEIGHT, NUWIQ |
| ENABLEX | <i>darifenacin ext-rel, oxybutynin ext-rel, solifenacin, tolterodine, tolterodine ext-rel, trospium, trospium ext-rel, MYRBETRIQ, TOVIAZ</i> |
| ENLITE CONTINUOUS GLUCOSE MONITORING SYSTEM | DEXCOM CONTINUOUS GLUCOSE MONITORING SYSTEM |
| ENVARUS XR | <i>cyclosporine; cyclosporine, modified; tacrolimus</i> |
| EPICERAM | <i>desonide, hydrocortisone</i> |
| EPIVIR HBV | <i>entecavir, lamivudine, tenofovir disoproxil fumarate, BARACLUDE SOLUTION, VEMPLIDY</i> |
| EPOGEN | ARANESP, RETACRIT |
| ERTACZO | <i>clotrimazole, econazole, ketoconazole, luliconazole, oxiconazole</i> |
| ERYPED | <i>erythromycins</i> |
| ESTRING | <i>estradiol, PREMARIN CREAM</i> |
| ESTROGEL | <i>estradiol, DIVIGEL, EVAMIST</i> |
| EUFLEXXA | GEL-ONE, GELSYN-3, SUPARTZ FX, VISCO-3 |
| EVEKEO | <i>dexmethylphenidate, dextroamphetamine, methylphenidate</i> |
| EVZIO | <i>naloxone injection, NARCAN NASAL SPRAY</i> |
| EXFORGE | <i>amlodipine-olmesartan, amlodipine-telmisartan, amlodipine-valsartan</i> |
| EXFORGE HCT | <i>amlodipine-valsartan-hydrochlorothiazide, olmesartan-amlodipine-hydrochlorothiazide</i> |
| EXTAVIA | <i>glatiramer, AUBAGIO, BETASERON, COPAXONE, GILENYA, MAYZENT, REBIF, TECFIDERA, TYSABRI</i> |
| FABIOR | <i>adapalene, benzoyl peroxide, clindamycin gel, clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, EPIDUO, TAZORAC</i> |
| FANAPT | <i>aripiprazole, clozapine, olanzapine, quetiapine, quetiapine ext-rel, risperidone, ziprasidone, VRAYLAR</i> |
| FAZACLO | <i>aripiprazole, clozapine, olanzapine, quetiapine, quetiapine ext-rel, risperidone, ziprasidone, VRAYLAR</i> |
| FEMHRT LOW DOSE | <i>estradiol-norethindrone, PREMPHASE, PREMPRO</i> |
| FEMRING | <i>estradiol, PREMARIN CREAM</i> |
| <i>fenofibrate tablet 120 mg</i> | <i>fenofibrate (except fenofibrate tablet 120 mg), fenofibric acid</i> |
| FENOGLIDE TABLET 120 MG | <i>fenofibrate (except fenofibrate tablet 120 mg), fenofibric acid</i> |
| <i>fenoprofen capsule</i> | <i>diclofenac sodium, ibuprofen, meloxicam, naproxen (except naproxen CR or naproxen suspension)</i> |
| FENOPROFEN CAPSULE | <i>diclofenac sodium, ibuprofen, meloxicam, naproxen (except naproxen CR or naproxen suspension)</i> |
| FENTORA | <i>fentanyl transmucosal lozenge, SUBSYS</i> |
| FETZIMA | <i>desvenlafaxine ext-rel, duloxetine, venlafaxine, venlafaxine ext-rel capsule</i> |
| FINACEA GEL | <i>azelaic acid gel, metronidazole, FINACEA FOAM</i> |
| FIORICET CAPSULE | <i>diclofenac sodium, ibuprofen, naproxen (except naproxen CR or naproxen suspension)</i> |
| FLAREX | <i>dexamethasone, loteprednol, prednisolone acetate 1%, FML S.O.P.</i> |

| Excluded Drug Name(s) | Preferred Option(s) |
|--|--|
| FLECTOR | <i>diclofenac sodium, diclofenac sodium gel 1% (except NDC^ 69499031866), diclofenac sodium solution, ibuprofen, meloxicam, naproxen (except naproxen CR or naproxen suspension)</i> |
| fluocinonide cream 0.1% | <i>clobetasol cream</i> |
| FLUOROPLEX | <i>fluorouracil cream 5%, fluorouracil solution, imiquimod, TOLAK</i> |
| fluorouracil cream 0.5% | <i>fluorouracil cream 5%, fluorouracil solution, imiquimod, TOLAK</i> |
| FLUOXETINE 60 MG | <i>citalopram, escitalopram, fluoxetine, paroxetine HCl, paroxetine HCl ext-rel, sertraline, TRINTELLIX, VIIBRYD</i> |
| flurandrenolide ointment | <i>hydrocortisone butyrate, mometasone, triamcinolone</i> |
| FML FORTE, FML LIQUIFILM | <i>dexamethasone, loteprednol, prednisolone acetate 1%, FML S.O.P.</i> |
| FOLIC-K | <i>folic acid, folic acid-vitamin B6-vitamin B12</i> |
| Folika-T | <i>folic acid, folic acid-vitamin B6-vitamin B12</i> |
| FOLIKA-V | <i>folic acid, folic acid-vitamin B6-vitamin B12</i> |
| FOLLISTIM AQ | GONAL-F* |
| FORTAMET (and its generic) | <i>metformin, metformin ext-rel (except generic FORTAMET or GLUMETZA)</i> |
| FORTESTA | <i>testosterone gel, testosterone solution, ANDRODERM</i> |
| FOSRENOL | <i>calcium acetate, lanthanum carbonate, sevelamer carbonate, PHOSLYRA, VELPHORO</i> |
| FRAGMIN | <i>enoxaparin</i> |
| FREESTYLE LIBRE CONTINUOUS GLUCOSE MONITORING SYSTEM | DEXCOM CONTINUOUS GLUCOSE MONITORING SYSTEM |
| FREESTYLE STRIPS AND KITS⁹ | ACCU-CHEK AVIVA PLUS STRIPS AND KITS, ACCU-CHEK COMPACT PLUS STRIPS AND KITS, ACCU-CHEK GUIDE STRIPS AND KITS, ACCU-CHEK SMARTVIEW STRIPS AND KITS |
| FULPHILA | NEULASTA, UDENYCA |
| GELNIQUE | <i>darifenacin ext-rel, oxybutynin ext-rel, solifenacin, tolterodine, tolterodine ext-rel, trospium, trospium ext-rel, MYRBETRIQ, TOVIAZ</i> |
| Genicin Vita-S | <i>folic acid, folic acid-vitamin B6-vitamin B12</i> |
| GENOTROPIN | HUMATROPE |
| GEODON CAPSULE | <i>aripiprazole, clozapine, olanzapine, quetiapine, quetiapine ext-rel, risperidone, ziprasidone, VRAYLAR</i> |
| GEODON INTRAMUSCULAR | <i>haloperidol</i> |
| GLEEVEC | <i>imatinib mesylate, BOSULIF, SPRYCEL</i> |
| GLUMETZA (and its generic) | <i>metformin, metformin ext-rel (except generic FORTAMET or GLUMETZA)</i> |
| GLYCOPYRROLATE TABLET 1.5 MG | <i>dicyclomine</i> |
| GRANIX | NIVESTYM |
| GUARDIAN CONNECT CONTINUOUS GLUCOSE MONITORING SYSTEM | DEXCOM CONTINUOUS GLUCOSE MONITORING SYSTEM |
| HALOG | <i>desoximetasone, fluocinonide (except fluocinonide cream 0.1%)</i> |
| HELIXATE FS | ADYNOVATE, JIVI, KOGENATE FS, KOVALTRY, NOVOEIGHT, NUWIQ |
| HEPSERA | <i>entecavir, lamivudine, tenofovir disoproxil fumarate, BARACLUDE SOLUTION, VEMLIDY</i> |
| HORIZANT | <i>gabapentin, GRALISE</i> |
| HUMALOG | FIASP, NOVOLOG |

* Coverage may not apply in all plans. Refer to plan documents.

| Excluded Drug Name(s) | Preferred Option(s) |
|--|---|
| HUMALOG MIX 50/50 | NOVOLOG MIX 70/30 |
| HUMALOG MIX 75/25 | NOVOLOG MIX 70/30 |
| HUMULIN 70/30 | NOVOLIN 70/30 |
| HUMULIN N | NOVOLIN N |
| HUMULIN R | NOVOLIN R |
| HYALGAN | GEL-ONE, GELSYN-3, SUPARTZ FX, VISCO-3 |
| HylaVite | <i>folic acid, folic acid-vitamin B6-vitamin B12</i> |
| HYSINGLA ER | <i>fentanyl transdermal, methadone, morphine ext-rel, EMBEDA, NUCYNTA ER, XTAMPZA ER</i> |
| ILEVRO | <i>bromfenac, diclofenac, ketorolac, PROLENSA</i> |
| INDOCIN | <i>diclofenac sodium, ibuprofen, meloxicam, naproxen (except naproxen CR or naproxen suspension)</i> |
| INNOPRAN XL | <i>atenolol, carvedilol, carvedilol phosphate ext-rel, metoprolol succinate ext-rel, metoprolol tartrate, nadolol, propranolol, propranolol ext-rel</i> |
| INTERMEZZO | <i>zolpidem, zolpidem ext-rel, zolpidem sublingual</i> |
| INTUNIV | <i>amphetamine-dextroamphetamine mixed salts ext-rel, atomoxetine, dexamethylphenidate ext-rel, dextroamphetamine ext-rel, guanfacine ext-rel, methylphenidate ext-rel, MYDAYIS, VYVANSE</i> |
| INVOKAMET, INVOKAMET XR | SYNJARDY, SYNJARDY XR, XIGDUO XR |
| INVOKANA | FARXIGA, JARDIANCE |
| ISORDIL | <i>isosorbide dinitrate</i> |
| ISTALOL | <i>timolol maleate solution, BETIMOL, BETOPTIC S</i> |
| JALYN | <i>dutasteride-tamsulosin; dutasteride or finasteride WITH alfuzosin ext-rel, doxazosin, silodosin, tamsulosin or terazosin</i> |
| JENTADUETO, JENTADUETO XR | JANUMET, JANUMET XR |
| JUBLIA | <i>terbinafine tablet</i> |
| KADIAN | <i>fentanyl transdermal, methadone, morphine ext-rel, EMBEDA, NUCYNTA ER, XTAMPZA ER</i> |
| KAMDOY | <i>desonide, hydrocortisone</i> |
| KAPVAY | <i>amphetamine-dextroamphetamine mixed salts ext-rel, atomoxetine, dexamethylphenidate ext-rel, dextroamphetamine ext-rel, guanfacine ext-rel, methylphenidate ext-rel, MYDAYIS, VYVANSE</i> |
| KAZANO | JANUMET, JANUMET XR |
| KENALOG | <i>hydrocortisone butyrate, mometasone, triamcinolone</i> |
| KEPPRA, KEPPRA XR | <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</i> |
| KERYDIN | <i>terbinafine tablet</i> |
| KOMBIGLYZE XR | JANUMET, JANUMET XR |
| lactulose pak | <i>lactulose solution</i> |
| LAMICTAL, LAMICTAL ODT, LAMICTAL XR | <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</i> |
| LANOXIN TABLET (125 MCG and 250 MCG only) | <i>digoxin</i> |
| LANTUS | BASAGLAR, LEVEMIR |
| LASTACFT | <i>azelastine, cromolyn sodium, olopatadine</i> |
| LATUDA | <i>aripiprazole, clozapine, olanzapine, quetiapine, quetiapine ext-rel, risperidone, ziprasidone, VRAYLAR</i> |

| Excluded Drug Name(s) | Preferred Option(s) |
|--|--|
| LAZANDA | <i>fentanyl transmucosal lozenge, SUBSYS</i> |
| LESCOL XL | <i>atorvastatin, ezetimibe-simvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin</i> |
| LEVITRA | <i>sildenafil*, tadalafil*, vardenafil*</i> |
| Levorphanol | <i>fentanyl transdermal, methadone, morphine ext-rel, EMBEDA, NUCYNTA ER, XTAMPZA ER</i> |
| LEXAPRO | <i>citalopram, escitalopram, fluoxetine, paroxetine HCl, paroxetine HCl ext-rel, sertraline, TRINTELLIX, VIIBRYD</i> |
| LIALDA | <i>balsalazide, sulfasalazine, sulfasalazine delayed-rel, APRISO, PENTASA</i> |
| LIDOCAINE-TETRACAINE CREAM | <i>lidocaine-prilocaine</i> |
| LILETTA | KYLEENA, MIRENA, SKYLA |
| LIPITOR | <i>atorvastatin, ezetimibe-simvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin</i> |
| LIVALO | <i>atorvastatin, ezetimibe-simvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin</i> |
| LO LOESTRIN FE | <i>ethinyl estradiol-drospirenone, ethinyl estradiol-drospirenone-levomefolate, ethinyl estradiol-levonorgestrel, ethinyl estradiol-norethindrone acetate-iron, ethinyl estradiol-norgestimate</i> |
| LOMAIRA* | BELVIQ*, BELVIQ XR*, SAXENDA* |
| lorid | <i>folic acid, folic acid-vitamin B6-vitamin B12</i> |
| LOTEMAX, LOTEMAX SM | <i>dexamethasone, loteprednol, prednisolone acetate 1%, FML S.O.P.</i> |
| LUMIGAN | <i>latanoprost, TRAVATAN Z, ZIOPTAN</i> |
| LUNESTA | <i>zolpidem, zolpidem ext-rel, zolpidem sublingual</i> |
| LUPRON DEPOT (For Prostate Cancer Only) | ELIGARD |
| LUXIQ | <i>hydrocortisone butyrate, mometasone, triamcinolone</i> |
| LUZU | <i>ciclopirox, clotrimazole, econazole, ketoconazole, luliconazole, oxiconazole</i> |
| MACRODANTIN | <i>nitrofurantoin</i> |
| Matzim LA | <i>diltiazem ext-rel (except generic CARDIZEM LA)</i> |
| MAVYRET | EPCLUSA (genotypes 1, 2, 3, 4, 5, 6), HARVONI (genotypes 1, 4, 5, 6), VOSEVI ² |
| MENEST | <i>estradiol, PREMARIN</i> |
| MENOSTAR | <i>estradiol</i> |
| meperidine | <i>hydromorphone, morphine, oxycodone, NUCYNTA</i> |
| MESTINON | <i>pyridostigmine, pyridostigmine ext-rel</i> |
| METROGEL | <i>azelaic acid gel, metronidazole, FINACEA FOAM</i> |
| MIACALCIN INJECTION | <i>alendronate, calcitonin-salmon, ibandronate, risedronate, FORTEO*, PROLIA*, TYMLOS</i> |
| MIACALCIN NASAL SPRAY | <i>calcitonin-salmon</i> |
| MIGRANAL | <i>eletriptan, ergotamine-caffeine, naratriptan, rizatriptan, sumatriptan, zolmitriptan, ZOMIG NASAL SPRAY</i> |
| MILLIPRED | <i>dexamethasone, hydrocortisone, methylprednisolone, prednisolone solution, prednisone</i> |
| MINASTRIN 24 FE | <i>ethinyl estradiol-drospirenone, ethinyl estradiol-drospirenone-levomefolate, ethinyl estradiol-norethindrone acetate-iron</i> |
| MINIVELLE | <i>estradiol, DIVIGEL, EVAMIST</i> |
| MINOCIN | <i>doxycycline hyclate, minocycline, tetracycline</i> |
| MINOLIRA | <i>doxycycline hyclate, minocycline, tetracycline</i> |
| MONOVISC | GEL-ONE, GELSYN-3, SUPARTZ FX, VISCO-3 |
| MOVIPREP | <i>peg 3350-electrolytes, SUPREP</i> |

| Excluded Drug Name(s) | Preferred Option(s) |
|---|--|
| <i>mupirocin cream</i> | <i>gentamicin, mupirocin ointment</i> |
| MYFORTIC | <i>mycophenolate mofetil, mycophenolate sodium</i> |
| NAFTIN | <i>ciclopirox, clotrimazole, econazole, ketoconazole, luliconazole, oxiconazole</i> |
| NAMENDA XR | <i>memantine</i> |
| NAPRELAN | <i>diclofenac sodium, ibuprofen, meloxicam, naproxen (except naproxen CR or naproxen suspension)</i> |
| <i>naproxen CR</i> | <i>diclofenac sodium, ibuprofen, meloxicam, naproxen (except naproxen CR or naproxen suspension)</i> |
| <i>naproxen suspension</i> | <i>ibuprofen</i> |
| NASCOBAL | <i>cyanocobalamin inj</i> |
| NATAZIA | <i>ethinyl estradiol-drospirenone, ethinyl estradiol-drospirenone-levomefolate, ethinyl estradiol-levonorgestrel, ethinyl estradiol-norethindrone acetate-iron, ethinyl estradiol-norgestimate</i> |
| NATESTO | <i>testosterone gel, testosterone solution, ANDRODERM</i> |
| NESINA | JANUVIA |
| NEUPOGEN | NIVESTYM |
| NEVANAC | <i>bromfenac, diclofenac, ketorolac, PROLENSA</i> |
| NEXIUM | <i>esomeprazole, lansoprazole, omeprazole, pantoprazole, DEXILANT</i> |
| NICAZEL, NICAZEL FORTE | <i>folic acid, folic acid-vitamin B6-vitamin B12</i> |
| NILANDRON | <i>abiraterone, bicalutamide, XTANDI, YONSA</i> |
| NITROMIST | <i>nitroglycerin lingual spray, nitroglycerin sublingual</i> |
| NORDITROPIN | HUMATROPE |
| NORITATE | <i>azelaic acid gel, metronidazole, FINACEA FOAM</i> |
| NORVASC | <i>amlodipine</i> |
| NOVACORT | <i>desonide, hydrocortisone</i> |
| NOVAREL | OIDREL* |
| NOVO NORDISK NEEDLES[®] | BD ULTRAFINE NEEDLES |
| NOXAFIL | <i>fluconazole, itraconazole</i> |
| NUTROPIN AQ | HUMATROPE |
| NUVESSA | <i>clindamycin, metronidazole</i> |
| NUVIGIL | <i>armodafinil, modafinil, SUNOSI</i> |
| OLEPTRO | <i>trazodone</i> |
| OLUX-E | <i>clobetasol foam</i> |
| <i>omeprazole-sodium bicarbonate</i> | <i>esomeprazole, lansoprazole, omeprazole, pantoprazole, DEXILANT</i> |
| OMNARIS | <i>flunisolide, fluticasone, mometasone, triamcinolone, DYMISTA</i> |
| OMNITROPE | HUMATROPE |
| ONETOUCH ULTRA STRIPS AND KITS[®] | ACCU-CHEK AVIVA PLUS STRIPS AND KITS, ACCU-CHEK COMPACT PLUS STRIPS AND KITS, ACCU-CHEK GUIDE STRIPS AND KITS, ACCU-CHEK SMARTVIEW STRIPS AND KITS |
| ONETOUCH VERIO STRIPS AND KITS[®] | ACCU-CHEK AVIVA PLUS STRIPS AND KITS, ACCU-CHEK COMPACT PLUS STRIPS AND KITS, ACCU-CHEK GUIDE STRIPS AND KITS, ACCU-CHEK SMARTVIEW STRIPS AND KITS |
| ONFI | <i>clobazam, lamotrigine, topiramate, TROKENDI XR</i> |
| ONGLYZA | JANUVIA |
| ORTHO D | <i>folic acid</i> |

* Coverage may not apply in all plans. Refer to plan documents.

| Excluded Drug Name(s) | Preferred Option(s) |
|--|--|
| ORTHO DF | <i>folic acid</i> |
| ORTHO TRI-CYCLEN LO | <i>ethinyl estradiol-norgestimate</i> |
| ORTHOVISC | GEL-ONE, GELSYN-3, SUPARTZ FX, VISCO-3 |
| OSENI | JANUMET, JANUMET XR; JANUVIA WITH pioglitazone |
| OSMOPREP | <i>peg 3350-electrolytes</i> , SUPREP |
| OTOVEL | <i>ofloxacin otic</i> , CIPRODEX |
| OTREXUP | RASUVO |
| OWEN MUMFORD NEEDLES ¹⁰ | BD ULTRAFINE NEEDLES |
| OXISTAT | <i>clotrimazole, econazole, ketoconazole, luliconazole, oxiconazole</i> |
| OXSORALEN-ULTRA | <i>acitretin, methoxsalen</i> |
| OXYCONTIN | <i>fentanyl transdermal, methadone, morphine ext-rel</i> , EMBEDA, NUCYNTA ER, XTAMPZA ER |
| OXYTROL | <i>darifenacin ext-rel, oxybutynin ext-rel, solifenacin, tolterodine, tolterodine ext-rel, trospium, trospium ext-rel, MYRBETRIQ, TOVIAZ</i> |
| PANCREAZE | CREON, VIOKACE, ZENPEP |
| PAXIL, PAXIL CR | <i>citalopram, escitalopram, fluoxetine, paroxetine HCl, paroxetine HCl ext-rel, sertraline</i> , TRINTELLIX, VIIBRYD |
| PAZEO | <i>azelastine, cromolyn sodium, olopatadine</i> |
| PEGASYS | Consult doctor |
| PENNSAID | <i>diclofenac sodium, diclofenac sodium gel 1% (except NDC^ 69499031866), diclofenac sodium solution, ibuprofen, meloxicam, naproxen (except naproxen CR or naproxen suspension)</i> |
| PERCOCET | <i>hydrocodone-acetaminophen, hydromorphone, morphine, oxycodone-acetaminophen</i> , NUCYNTA |
| PERRIGO NEEDLES ¹⁰ | BD ULTRAFINE NEEDLES |
| PERTZYE | CREON, VIOKACE, ZENPEP |
| PEXEVA | <i>citalopram, escitalopram, fluoxetine, paroxetine HCl, paroxetine HCl ext-rel, sertraline</i> , TRINTELLIX, VIIBRYD |
| PICATO | <i>fluorouracil cream 5%, fluorouracil solution, imiquimod</i> , TOLAK |
| PLAVIX | <i>clopidogrel, dipyridamole ext-rel-aspirin, prasugrel</i> , BRILINTA |
| PLEGRIDY | <i>glatiramer</i> , AUBAGIO, BETASERON, COPAXONE, GILENYA, MAYZENT, REBIF, TECFIDERA, TYSABRI |
| PLENVU | <i>peg 3350-electrolytes</i> , SUPREP |
| PRADAXA | <i>warfarin</i> , ELIQUIS, XARELTO |
| PRALUENT | REPATHA |
| PRECISION XTRA STRIPS AND KITS ⁹ | ACCU-CHEK AVIVA PLUS STRIPS AND KITS, ACCU-CHEK COMPACT PLUS STRIPS AND KITS, ACCU-CHEK GUIDE STRIPS AND KITS, ACCU-CHEK SMARTVIEW STRIPS AND KITS |
| PRED FORTE, PRED MILD | <i>dexamethasone, loteprednol, prednisolone acetate 1%</i> , FML S.O.P. |
| PREFEST | <i>estradiol-norethindrone</i> , PREMPHASE, PREMPRO |
| PREGNYL | OIDREL* |
| PREPOPIK | <i>peg 3350-electrolytes</i> , SUPREP |
| PREVACID | <i>esomeprazole, lansoprazole, omeprazole, pantoprazole</i> , DEXILANT |
| PREVIDENT | Consult doctor |
| PRIMLEV | <i>hydrocodone-acetaminophen, hydromorphone, morphine, oxycodone-acetaminophen</i> , NUCYNTA |
| PRISTIQ | <i>desvenlafaxine ext-rel, duloxetine, venlafaxine, venlafaxine ext-rel capsule</i> |

| Excluded Drug Name(s) | Preferred Option(s) |
|--------------------------------------|--|
| PROAIR HFA, PROAIR RESPICLICK | <i>albuterol sulfate CFC-free aerosol, levalbuterol tartrate CFC-free aerosol</i> |
| PROCRIT | ARANESP, RETACRIT |
| PROCTOCORT | <i>hydrocortisone enema, mesalamine suppository, mesalamine suspension, CORTIFOAM</i> |
| PROCYSBI | CYSTAGON |
| PROGRAF | <i>tacrolimus</i> |
| PROTONIX | <i>esomeprazole, lansoprazole, omeprazole, pantoprazole, DEXILANT</i> |
| PROVENTIL HFA | <i>albuterol sulfate CFC-free aerosol, levalbuterol tartrate CFC-free aerosol</i> |
| PROVIGIL | <i>armodafinil, modafinil, SUNOSI</i> |
| PROZAC | <i>citalopram, escitalopram, fluoxetine, paroxetine HCl, paroxetine HCl ext-rel, sertraline, TRINTELLIX, VIIBRYD</i> |
| PSORCON | <i>desoximetasone, fluocinonide (except fluocinonide cream 0.1%)</i> |
| PULMICORT RESPULES | <i>budesonide inhalation suspension, ARNUITY ELLIPTA, FLOVENT DISKUS, FLOVENT HFA, PULMICORT FLEXHALER, QVAR REDIHALER</i> |
| QNASL | <i>flunisolide, fluticasone, mometasone, triamcinolone, DYMISTA</i> |
| QSYMIA* | BELVIQ*, BELVIQ XR*, SAXENDA* |
| QTERN | GLYXAMBI |
| QUARTETTE | <i>ethinyl estradiol-levonorgestrel</i> |
| RAPAFLO | <i>alfuzosin ext-rel, doxazosin, silodosin, tamsulosin, terazosin</i> |
| RAPAMUNE | <i>sirolimus</i> |
| RAVICTI | <i>sodium phenylbutyrate</i> |
| RAYOS | <i>dexamethasone, hydrocortisone, methylprednisolone, prednisolone solution, prednisone</i> |
| RELION INSULIN | NOVOLIN INSULIN |
| RESTASIS | XIIDRA |
| REVATIO | <i>sildenafil, tadalafil</i> |
| RIMSO-50 | Consult doctor |
| RIOMET | <i>metformin, metformin ext-rel (except generic FORTAMET or GLUMETZA)</i> |
| ROZEREM | <i>zolpidem, zolpidem ext-rel, zolpidem sublingual</i> |
| SABRIL | <i>vigabatrin</i> |
| SAIZEN | HUMATROPE |
| SANCUSO | <i>granisetron, ondansetron</i> |
| SANDOSTATIN LAR | SOMATULINE DEPOT, SOMAVERT |
| SEREVENT | STRIVERDI RESPIMAT |
| SEROQUEL XR | <i>aripiprazole, clozapine, olanzapine, quetiapine, quetiapine ext-rel, risperidone, ziprasidone, VRAYLAR</i> |
| SEYSARA | <i>doxycycline hyclate, minocycline, tetracycline</i> |
| SFROWASA | <i>mesalamine suspension</i> |
| SILENOR | <i>zolpidem, zolpidem ext-rel, zolpidem sublingual</i> |
| SIL-K PAD | <i>Imiquimod</i> |
| SINGULAIR | <i>montelukast, zafirlukast</i> |
| SITAVIG | <i>oral acyclovir, valacyclovir</i> |

* Coverage may not apply in all plans. Refer to plan documents.

| Excluded Drug Name(s) | Preferred Option(s) |
|---|---|
| SOLODYN | <i>doxycycline hyclate, minocycline, tetracycline</i> |
| SOLOSEC | <i>clindamycin, metronidazole</i> |
| SORILUX | <i>calcipotriene ointment, calcipotriene solution</i> |
| SPORANOX CAPSULE | <i>itraconazole, terbinafine tablet</i> |
| SPORANOX SOLUTION | <i>fluconazole</i> |
| SPRIX | <i>diclofenac sodium, ibuprofen, meloxicam, naproxen (except naproxen CR or naproxen suspension)</i> |
| STAXYN | <i>sildenafil*, tadalafil*, vardenafil*</i> |
| STENDRA | <i>sildenafil*, tadalafil*, vardenafil*</i> |
| STRIBILD | ATRIPLA, BIKTARVY, GENVOYA, ODEFSEY, SYMFI, SYMFI LO, TRIUMEQ |
| SUBOXONE | <i>buprenorphine-naloxone sublingual, ZUBSOLV</i> |
| SYNDROS | <i>dronabinol</i> |
| SYNVISC, SYNVISC-ONE | GEL-ONE, GELSYN-3, SUPARTZ FX, VISCO-3 |
| SYPRINE | Consult doctor |
| TARGADOX | <i>doxycycline hyclate, minocycline, tetracycline</i> |
| TASIGNA | <i>imatinib mesylate, BOSULIF, SPRYCEL</i> |
| TAYTULLA | <i>ethinyl estradiol-drospirenone, ethinyl estradiol-drospirenone-levomefolate, ethinyl estradiol-norethindrone acetate-iron</i> |
| TESTIM | <i>testosterone gel, testosterone solution, ANDRODERM</i> |
| testosterone gel 1% ¹⁰ | <i>testosterone gel, testosterone solution, ANDRODERM</i> |
| TIMOPTIC OCUDOSE | <i>timolol maleate solution, BETIMOL, BETOPTIC S</i> |
| TIROSINT | <i>levothyroxine</i> |
| TIVORBEX | <i>celecoxib, diclofenac sodium, ibuprofen, meloxicam, naproxen (except naproxen CR or naproxen suspension)</i> |
| TOBI, TOBI PODHALER | <i>tobramycin inhalation solution, BETHKIS</i> |
| TOPROL-XL | <i>atenolol, carvedilol, carvedilol phosphate ext-rel, metoprolol succinate ext-rel, metoprolol tartrate, nadolol, propranolol, propranolol ext-rel</i> |
| TOUJEO | TRESIBA |
| TRADJENTA | JANUVIA |
| TRANSDERM SCOP | <i>meclizine, scopolamine transdermal</i> |
| TREXIMET | <i>diclofenac sodium, ibuprofen or naproxen (except naproxen CR or naproxen suspension) WITH eletriptan, naratriptan, rizatriptan, sumatriptan, zolmitriptan or ZOMIG NASAL SPRAY</i> |
| TRICOR | <i>fenofibrate (except fenofibrate tablet 120 mg), fenofibric acid</i> |
| TRIVIDIA INSULIN SYRINGES ⁹ | BD ULTRAFINE INSULIN SYRINGES |
| TronVite | <i>folic acid, folic acid-vitamin B6-vitamin B12</i> |
| TUDORZA | INCRUSE ELLIPTA, SPIRIVA |
| UCERIS FOAM | <i>hydrocortisone enema, mesalamine suppository, mesalamine suspension, CORTIFOAM</i> |
| UCERIS TABLET | <i>balsalazide, sulfasalazine, sulfasalazine delayed-rel, APRISO, PENTASA</i> |
| ULORIC | <i>allopurinol</i> |
| ULTIMED INSULIN SYRINGES ⁹ | BD ULTRAFINE INSULIN SYRINGES |
| ULTIMED NEEDLES ⁹ | BD ULTRAFINE NEEDLES |

| Excluded Drug Name(s) | Preferred Option(s) |
|---|---|
| UROXATRAL | <i>alfuzosin ext-rel, doxazosin, silodosin, tamsulosin, terazosin</i> |
| VALCYTE | <i>valganciclovir</i> |
| VALTRES | <i>acyclovir, valacyclovir</i> |
| VANATOL LQ, VANATOL S | <i>diclofenac sodium, ibuprofen, naproxen (except naproxen CR or naproxen suspension)</i> |
| VANOS | <i>clobetasol cream</i> |
| Vanoxide-HC | <i>adapalene, benzoyl peroxide, clindamycin gel, clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, EPIDUO, TAZORAC</i> |
| VASCEPA | <i>omega-3 acid ethyl esters</i> |
| VECTICAL | <i>calcipotriene ointment, calcipotriene solution</i> |
| VELTIN | <i>adapalene, benzoyl peroxide, clindamycin gel, clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, EPIDUO, TAZORAC</i> |
| venlafaxine ext-rel tablet (except 225 mg) | <i>desvenlafaxine ext-rel, duloxetine, venlafaxine, venlafaxine ext-rel capsule</i> |
| VENTOLIN HFA | <i>albuterol sulfate CFC-free aerosol, levalbuterol tartrate CFC-free aerosol</i> |
| VERDESO | <i>desonide, hydrocortisone</i> |
| VEREGEN | <i>imiquimod, podofilox</i> |
| VERZENIO | IBRANCE, KISQALI |
| VESICARE | <i>darifenacin ext-rel, oxybutynin ext-rel, solifenacin, tolterodine, tolterodine ext-rel, trospium, trospium ext-rel, MYRBETRIQ, TOVIAZ</i> |
| VIAGRA | <i>sildenafil*, tadalafil*, vardenafil*</i> |
| VIEKIRA PAK | EPCLUSA (genotypes 1, 2, 3, 4, 5, 6), HARVONI (genotypes 1, 4, 5, 6) |
| VIMOVO | <i>naproxen tabs WITH esomeprazole</i> |
| VIVELLE-DOT | <i>estradiol, DIVIGEL, EVAMIST</i> |
| VIVLODEX | <i>celecoxib, diclofenac sodium, ibuprofen, meloxicam, naproxen (except naproxen CR or naproxen suspension)</i> |
| VOGELXO | <i>testosterone gel, testosterone solution, ANDRODERM</i> |
| VUSION | <i>nystatin</i> |
| WELLBUTRIN XL | <i>bupropion ext-rel</i> |
| XANAX, XANAX XR | <i>alprazolam, clonazepam, diazepam, lorazepam, oxazepam</i> |
| XENAZINE | <i>tetrabenazine, AUSTEDO</i> |
| XENICAL* | BELVIQ*, BELVIQ XR*, SAXENDA* |
| XERESE | <i>acyclovir (except acyclovir ointment), valacyclovir</i> |
| XIFAXAN 200 MG | <i>sulfamethoxazole-trimethoprim</i> |
| XIMINO | <i>doxycycline hyclate, minocycline, tetracycline</i> |
| XOLEGEL | <i>ciclopirox, ketoconazole</i> |
| XOPENEX HFA | <i>albuterol sulfate CFC-free aerosol, levalbuterol tartrate CFC-free aerosol</i> |
| Xvite | <i>folic acid, folic acid-vitamin B6-vitamin B12</i> |
| YAZ | <i>ethinyl estradiol-drospirenone, ethinyl estradiol-drospirenone-levomefolate, ethinyl estradiol-norethindrone acetate-iron</i> |
| ZARXIO | NIVESTYM |
| ZEGERID | <i>esomeprazole, lansoprazole, omeprazole, pantoprazole, DEXILANT</i> |
| ZELAPAR | <i>rasagiline, selegiline</i> |

| Excluded Drug Name(s) | Preferred Option(s) |
|------------------------------|---|
| ZEMAIRA | PROLASTIN-C |
| ZEPATIER | EPCLUSA (genotypes 1, 2, 3, 4, 5, 6), HARVONI (genotypes 1, 4, 5, 6) |
| ZETIA | <i>ezetimibe</i> |
| ZETONNA | <i>flunisolide, fluticasone, mometasone, triamcinolone, DYMISTA</i> |
| ZIANA | <i>adapalene, benzoyl peroxide, clindamycin gel, clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, EPIDUO, TAZORAC</i> |
| ZIPSOR | <i>diclofenac sodium</i> |
| ZOXYDRO ER | <i>fentanyl transdermal, methadone, morphine ext-rel, EMBEDA, NUCYNTA ER, XTAMPZA ER</i> |
| ZOLPIMIST | <i>zolpidem, zolpidem ext-rel, zolpidem sublingual</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</i> |
| ZONTIVITY | Consult doctor |
| ZORTRESS | <i>sirolimus</i> |
| ZORVOLEX | <i>diclofenac sodium</i> |
| ZOVIRAX | <i>acyclovir, valacyclovir</i> |
| ZUPLENZ | <i>granisetron, ondansetron</i> |
| ZYCLARA | <i>fluorouracil 5% cream, fluorouracil solution, imiquimod, TOLAK</i> |
| ZYFLO, ZYFLO CR | <i>zileuton ER, zafirlukast, montelukast</i> |
| ZYLET | <i>neomycin-polymyxin B-bacitracin-hydrocortisone, neomycin-polymyxin B-dexamethasone, tobramycin-dexamethasone, TOBRADEX OINTMENT, TOBRADEX ST</i> |
| ZYMAXID | <i>ciprofloxacin, erythromycin, gentamicin, levofloxacin, moxifloxacin, ofloxacin, sulfacetamide, tobramycin, BESIVANCE, MOXEZA</i> |
| ZYTIGA | <i>abiraterone, bicalutamide, XTANDI, YONSA</i> |
| ZYVOX | <i>linezolid</i> |

Table 1

Preferred Options For Indication Based Autoimmune Excluded Medications

| Condition | Excluded Drug Name(s) | Preferred Option(s) |
|-------------------------------|---|--|
| ANKYLOSING SPONDYLITIS | CIMZIA SIMPONI TALTZ | COSENTYX ENBREL HUMIRA |
| CROHN'S DISEASE | CIMZIA ENTYVIO | HUMIRA STELARA SUBCUTANEOUS # |
| PSORIASIS | CIMZIA COSENTYX ENBREL | HUMIRA OTEZLA SKYRIZI STELARA SUBCUTANEOUS TALTZ TREMIFYA |
| PSORIATIC ARTHRITIS | CIMZIA ORENCIA CLICKJECT ORENCIA INTRAVENOUS ORENCIA SUBCUTANEOUS SIMPONI STELARA SUBCUTANEOUS TALTZ XELJANZ XELJANZ XR | COSENTYX ENBREL HUMIRA OTEZLA |
| RHEUMATOID ARTHRITIS | ACTEMRA CIMZIA KINERET ORENCIA INTRAVENOUS SIMPONI | ENBREL HUMIRA ORENCIA CLICKJECT ORENCIA SUBCUTANEOUS RINVOQ XELJANZ XELJANZ XR |
| ULCERATIVE COLITIS | ENTYVIO SIMPONI | HUMIRA XELJANZ # |
| ALL OTHER CONDITIONS | ACTEMRA KINERET ORENCIA CLICKJECT ORENCIA INTRAVENOUS ORENCIA SUBCUTANEOUS | ENBREL HUMIRA |

After failure of HUMIRA

The listed formulary options are subject to change.

Advanced Control Plan - Aetna Formulary Exclusions Drug List (01/2020)

[^] 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.

¹ Listing does not include *naproxen CR* or *naproxen suspension*.

² 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).

³ Listing does not include fenofibrate tablet 120 mg.

⁴ Listing does not include generic CARDIZEM LA.

⁵ Listing does not include generic FORTAMET or GLUMETZA.

⁶ Listing does not include fluocinonide cream 0.1%.

⁷ An exception process is in place for specific clinical or regulatory circumstances that may require coverage of an excluded medication.

⁸ BD ULTRAFINE syringes and needles are the only preferred options.

⁹ ACCU-CHEK brand test strips are the only preferred options.

¹⁰ Listing reflects the authorized generics for TESTIM and VOGELXO.

Please remember that this is not a complete list of drugs covered under your plan. Products may be subject to plan-specific copayment or coinsurance, additional charges or other restrictions. Certain drugs, such as those for infertility, erectile dysfunction, weight loss, smoking cessation or vitamins, may not be covered by your particular pharmacy plan. Diabetic supplies may be covered under your medical plan.

To check coverage and copay information for a specific drug, please visit [aetna.com](https://www.aetna.com) and log in to your secure member website. If you don't have access to our website, call the toll-free number on your member ID card.

Coverage for specialty drugs follows the CVS Caremark Advanced Control Specialty Formulary™ and is being used with permission from CVS Health and/or one of its affiliates.

Aetna may receive rebates from certain drug manufacturers. Generally, such rebates do not directly reduce the amount a member pays the pharmacy for covered prescriptions.

Information is believed to be accurate as of the production date; however, it is subject to change.

Policy forms issued in Missouri include: AL HGrpPol 01R5, HI HGrpAG 05, HO HGrpPol 04.

Policy forms issued in Oklahoma include: AL COC00010, HC COC00010.