



Meritain Health®
Pharmacy Solutions



AGM Container Controls, Inc.

A Guide to Your Pharmacy Coverage

www.meritain.com

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Meritain Health®
an  **aetna** company

Welcome

Welcome to your new prescription benefit plan. We will be working with AGM Container Controls, Inc. to administer the prescription benefit portion of your health plan.

Your prescription plan offers two ways to get your medications:

- For medications taken for a short time (like an antibiotic), fill anywhere in our network of more than 68,000 pharmacies nationwide, including chain pharmacies, 20,000 independent pharmacies and 9,600 CVS Pharmacy locations (including those inside Target stores).
- For medications taken regularly (such as for high blood pressure or diabetes), get them delivered to your door. To sign up for mail service, choose either option below:
 - Register at [Caremark.com/startnow](https://www.caremark.com/startnow) and follow the instructions to request a new 90-day prescription.
 - Call the Customer Care number on the back of your prescription ID card.

Here are some additional services we offer:

- CVS Specialty™ is designed for individuals with rare, complex or genetic conditions. Our specialty pharmacy offers convenient delivery of specialty medications or pickup at CVS Pharmacy*, personalized service and educational support for your specific treatment. CVS Specialty also offers access to a clinical pharmacist anytime for any questions that may come up.
- Specialty Guideline Management (SGM) promotes the appropriate use of biotech/specialty medications and monitors patient safety.

Caremark.com is an easy way to make the most of your prescription benefits:

- Find network pharmacies
- Refill medication and check order status
- Check drug costs
- See your prescription history

Welcome to Meritain Health® Pharmacy Solutions (MPS)

MPS is nationwide pharmacy benefit manager (PBM). Our job is simple: we help take care of you. Your employer has partnered with us for your prescription benefits.

It's important for you to understand how your prescription benefits work—we get that. That's why we're here to give you the information, tools and services you need to make the most of your benefits program.

Find participating pharmacies

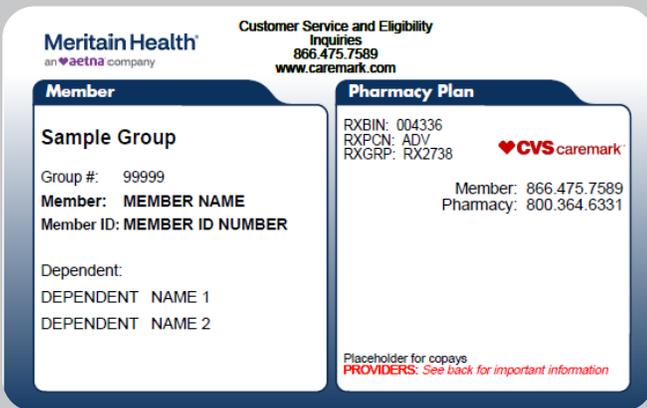
You can find a participating pharmacy by visiting www.Caremark.com. Log in to or create your member account and search for nearby pharmacies, convenient to you.

We're here when you need us

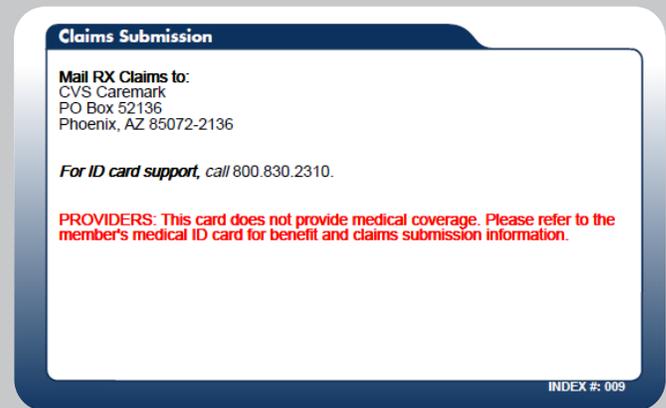
Still have questions? We can help. Just give us a call at the number on your ID card.

Sample ID card

Card front



Card back



Your prescription for a healthier budget

Your prescription drug benefit—available when you need prescriptions filled—is administered by Meritain Health® Pharmacy Solutions (MPS), powered by CVS Caremark. You can visit more than 65,000 retail pharmacies nationwide to fill your prescriptions. You also have access to clinical pharmacists for information and support.

Controlling your prescription copay

To get the most from your benefits plan, it pays to be a wise consumer. In many cases, you can control how much your share of costs will be when you fill a prescription. How? Generic drugs cost less to manufacture and they're just as effective as the name brands. You'll save money when you request them because generics have a lower copay than preferred or non-preferred drugs.

The Performance Drug List

Also called a formulary, the Performance Drug List is created by pharmacy experts and lists FDA-approved, safe, effective and economical drugs.

How the Performance Drug List works:

- Drugs are added to the list on a quarterly basis.
- Brand-name drugs can be removed at the end of the calendar year.
- Every January, the list is updated and available.
- If a generic becomes available, the brand-name drug will become a non-preferred drug, and may only be available for a higher copay.
- When a generic drug becomes available, you'll pay the lowest copay if you choose the generic.

Why generics make sense

Because companies that develop new drugs have long-term patent protection for their products, other drug companies are prevented by law from manufacturing those drugs—even if they can produce them less expensively.

When patents expire, other companies can make equivalent drugs, usually at a much lower price. Generic equivalents go through rigorous FDA testing regularly to assure that they are just as effective as the brand-name drugs.

Consider all of the compelling reasons to protect your pocketbook with the lower-price generic drugs:

- Generics can cost up to 75 percent less than their brand-name equivalents.
- FDA testing is exactly the same for generic and brand-name drugs.
- Generics contain the same active ingredients as the original, brand-name drug, in the same amounts and dosages.
- Generic drugs sometimes look different from the original brand-name drug in color or shape, but only because they may have different inactive ingredients that won't change how the drug works.
- Nearly half of all brand-name drugs have generic equivalents—but you may have to ask for them.
- Generics have the lowest copay under this plan, so you save on every prescription.



Note: to see whether a prescription drug is generic, preferred or non-preferred, check the list in the appendix of this packet.

Easy on your time—three ways to get your prescription drugs

Your plan is designed with your time in mind. Use any of these three prescription options.

At your local pharmacy

When you need a prescription for 30 days or less, have it filled at a participating pharmacy. Just show the pharmacist your Meritain Health ID card and pay your copay at the time of your purchase. If the pharmacy you choose is not in-network and your plan allows reimbursement for out-of-network pharmacies, you'll pay the entire cost at the time of purchase, then submit a claim for reimbursement. You'll receive the same amount that a participating pharmacy would receive, minus your copay.

By mail order

If you have a chronic condition and you take medication for it for long periods of time, you may fill a larger quantity prescription all at once. With CVS Caremark, you can request to receive your medication by mail or may pick it up at a local CVS pharmacy. Ask your doctor to write two prescriptions—one for 30 days, and one for 90 days. Fill the 30-day prescription at a network pharmacy. Then complete a mail order form and send it, along with the original 90-day prescription signed by your doctor and your copay, to the address on the form.

Online

You can also fill 90-day prescriptions by logging into www.Caremark.com. Again, ask your doctor for two prescriptions. Before you request your prescription online, fill the 30-day order at a network drug store, and send (or ask your doctor to send) the 90-day prescription to the address shown on the website. Simply use a credit card to pay your copay.

Prescriptions and Caremark.com

By logging in to www.Caremark.com, you can:

- Order new prescriptions.
- Check the status of your online order.
- Find a nearby network pharmacy.
- Check on the price of a drug.
- Research drugs, supplements and vitamins.
- Learn more about your coverage.

Not every drug is covered

The plan does not include benefits for over-the-counter medications or drugs used for cosmetic purposes. There may be other exclusions. Meritain Health Pharmacy Solutions Customer Service can help you if you have questions, or refer to your more complete SPD.

Certain drugs must be approved

If your prescription is for a very expensive drug, or one that can be easily abused, prior authorization may be required. Trained professionals review these prescriptions for your protection. You may need a new written prescription from your doctor for each refill. For more information, see your SPD or contact Meritain Health Pharmacy Solutions Customer Service at **1.866.475.7589**.

Pharmacist support

When you have questions or concerns about your medication, it helps to consult a pharmacist. CVS Caremark pharmacists are available, in person or by phone, to provide all the information you need for a positive health care experience.

Helpful tip

Be sure to bring your Meritain Health ID card with you to the pharmacy when filling prescriptions. This will ensure that you receive your full benefits.



Specialty medications plus support just for you

Making it simpler for you

A specialty medication is used to treat complex and chronic conditions like rheumatoid arthritis, psoriasis, rare genetic disorders, fertility and cancer. Most specialty medications require prior authorization. This just means we need to make sure you meet all the requirements in order for your plan to cover certain medications before they are filled. We'll work to get you your medication as quickly as possible.



Personalized support to stay on track

You have access to a team led by pharmacists and nurses who are specially trained in conditions like yours. Your CareTeam can:

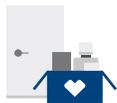
- Remind you when it's time to refill
- Help you manage symptoms and side effects
- Check dosage and medication schedules, and give advice on taking your medication correctly
- Track how well your medication manages your condition



Managing your Rx's anytime, anywhere

Register for an account at [CVSpecialty.com](https://www.cvspecialty.com) or download our mobile app to:

- Refill your prescription
- Check order status and track refills
- Chat with your CareTeam



Convenient delivery

You can have your medication delivered anywhere nationwide, even if you're on vacation. Or you can pick it up at any CVS Pharmacy® location.*

How to get started

Register on [CVSpecialty.com](https://www.cvspecialty.com)

Existing prescriptions?

Call 1-800-237-2767 (TTY: 711) to transfer your prescription

New prescriptions?

Your doctor can:

- e-Prescribe to CVS Specialty
- Call our CareTeam at 1-800-237-2767 (TTY: 711), Monday through Friday, 7:30 AM to 7:30 PM (local time)
- Fax the prescription to 1-800-323-2445

*Specialty delivery options are available where allowed by law. In-store pickup is currently not available in Oklahoma. Puerto Rico requires first-fill prescriptions to be transmitted directly to the dispensing specialty pharmacy. Products are dispensed by CVS Specialty and certain services are only accessed by calling CVS Specialty directly. Certain specialty medication may not qualify. Services are also available at Long's Drugs locations.

Prior Authorization

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Some medications need special approval.



Prior authorization (PA) is an extra level of approval that benefit plans require for certain medications.

A PA makes sure that you're getting the right medication for your condition. It may also help keep costs down so you don't overpay.

When is a PA required?

It depends on your benefit plan. Here are common reasons a PA is needed:

- There may be a lower cost option that's just as effective.
- The medication has potential for misuse or abuse.
- The medication is for certain conditions or diagnoses.

How does a PA get started?

You or your pharmacy can ask your doctor to start a PA. Then, your doctor sends us a PA by phone, fax or electronically. (We offer electronic PA submission that often provides a decision instantly.)

How does it work?

We gather additional information from your doctor that's required by your benefit plan. This information helps determine if the prescription is covered. We notify you and your doctor whether your PA is approved or denied as soon as possible – usually within a few days.



Prior authorization may help keep your medication affordable.

Do I need a PA for refills?

Sometimes. A PA is valid for a limited amount of time, so you may need a new PA for refills.

What can I do if my PA is denied?

You have several options:

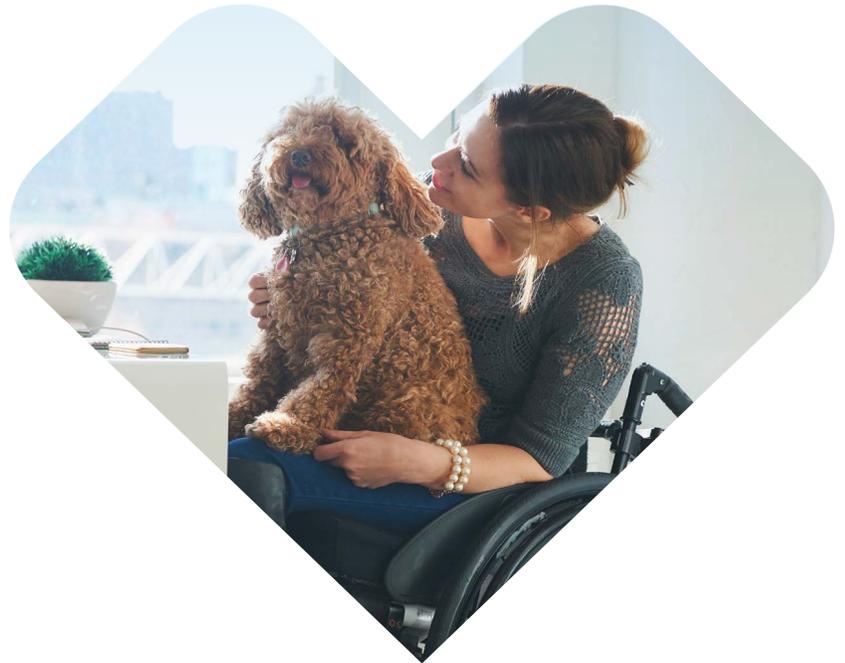
- Ask your doctor if there's another medication that's just as effective.
- Choose to pay for the medication yourself.
- Submit an appeal by following the steps in your denial letter.

To check your PA status, sign in at **Caremark.com**. Select Plan and Benefits, then click Prior Authorization from the pull-down menu.

All timeframes and processes contained in this document refer to CVS Caremark® standard protocols based on federal laws and regulations. Timeframes and processes may vary based on client requirements or state regulations. Your privacy is important to us. Our employees are trained regarding the appropriate way to handle your private health information.

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Rx Delivery by Mail

Convenience, savings and safety

Why get your Rx delivered by mail? Not only is delivery by mail a safe and secure way to get the medications you take regularly (like medication for asthma or high blood pressure) — you may save money, too.

Convenience

CVS Caremark® Mail Service Pharmacy can deliver 90-day supplies of medications you take regularly to your door. For even more convenience, start automatic refills, too.

Savings

Filling your Rx in 90-day supplies may come with savings. Plus, there's no extra cost for shipping.

Safety

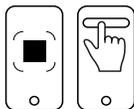
Our secure, nondescript packaging protects your privacy.



**90-day supplies
could cost less
than 30-day
supplies.**



Learn more at [Caremark.com/Rxdelivery](https://www.caremark.com/Rxdelivery) or scan the code.



To scan the QR code:
Open the camera on your smart phone
Focus on the QR code
Tap the link that appears

Your CVS Caremark Mail Service Pharmacy

How would you like to have your long-term medicine conveniently delivered to your home or office? Not only will it save you time and trips to a participating retail pharmacy, you may also save money! With mail service, you can receive up to a 90-day supply of your medicine for a copay* that may be significantly less than you would pay at a participating retail pharmacy.

With the CVS Caremark Mail Service Pharmacy you can:

- Receive an extended supply of medicine.
- Enjoy the convenience of having your medicine delivered to a location of your choice—home, office or vacation spot.
- Speak to a registered pharmacist 24 hours a day, seven days a week.
- Order prescriptions and get health information online at www.caremark.com.

Getting started

If you need your prescription filled right away, ask your doctor to write two prescriptions for your long-term medicines:

- The first for a short-term supply (e.g., 30 days) to be filled right away at a participating retail pharmacy.
- The second for the maximum days supply allowed (up to a 90-day supply) with as many as three refills (if appropriate) to be mailed to CVS Caremark Mail Service Pharmacy.

If you're not in a hurry, just mail your prescription for a 90-day supply (with any appropriate refills) to CVS Caremark.

Filling out the mail service order form

Follow these five steps to fill out the mail service order form:

Step 1—Benefit ID number

Fill in your ID number from your member ID card. (On your next order, your ID number will be pre-printed on your order form.)

Meritain Health

Step 2—Address

Fill in your complete address. Be sure to fill in the oval if the address listed is a one-time only address.

Mail this form to:
 CVSCAREMARK
 PO BOX 94467
 PALATINE, IL 60094-4467

Enter ID # below if not shown or if different from: **1**

Prescription Plan Sponsor or Company Name

Please use **blue or black ink, capital letters**, and fill in **both sides** of this form.

New Prescriptions - Mail your new prescriptions with this form. Number of **New** prescriptions:

Refills - Order by Web, phone, or write in Rx number(s) below. Number of **Refill** prescriptions:

FOR FASTEST SERVICE, order refills at www.caremark.com or call the number on your prescription benefit ID Card.

A Shipping Address. To ship to an address different from the one printed above, please make changes here.

Last Name First Name MI Suffix (JR, SR)

Street Name Apt./Suite # **Use this address for this order only.**

City State ZIP Code

Step 3—Prescription information

Provide the requested information for the first person for whom a prescription(s) is being submitted.

- Indicate if you would like your order to include easy-open caps. All orders are normally shipped with safety caps or dual-purpose caps (which can be converted from child safe to easy open).
- Be sure to completely fill out your doctor's first name, last name and phone number.
- Fill in the ovals under Allergies if you are allergic to any drugs or foods. If you do not see the allergy listed, fill in the Other oval and write in the allergy.
- Fill in the ovals under Conditions if you have any health conditions. If you do not see your health condition listed, fill in the Other oval and write in the health condition.

C Tell us about the people getting prescriptions. If there are more than two people, please complete another form.

1st person with a refill or new prescription. This person needs: Easy open caps Spanish forms and labels

Last Name First Name MI Suffix (JR, SR)

Nickname Gender: M F Birth:

Your E-Mail: Date new prescription written:

Doctor's Last Name Docto. Doctor's Phone #

Tell us about **new** allergies or health information for this person. Only tell us about **new** information.

Allergies: None Aspirin Cephalosporin Codeine Erythromycin Peanuts Penicillin Sulfa Other:

Health Information: Arthritis Asthma Diabetes Acid Reflux Glaucoma Heart Problem High Blood Pressure High Cholesterol Migraine Osteoporosis Prostate Issues Thyroid Other:

2nd person with a refill or new prescription. This person needs: Easy open caps Spanish forms and labels

Find an estimate of your medication cost with the Check Drug Cost tool from CVS Caremark®

With the Check Drug Cost tool from CVS Caremark, you can find out if you're able to save money on your medications. Quickly check drug costs and see lower-cost options with the Check Drug Cost tool. All results are specific to you, your plan and where you are with your deductible. With Meritain Health® Pharmacy Solutions, powered by CVS Caremark, you have access to this drug cost tool at no additional cost.

Use the Check Drug Cost tool today at [Caremark.com](https://www.caremark.com) or the CVS Caremark mobile app to see if you can save money.

To get started, just type in a prescription name and in a few seconds you can:



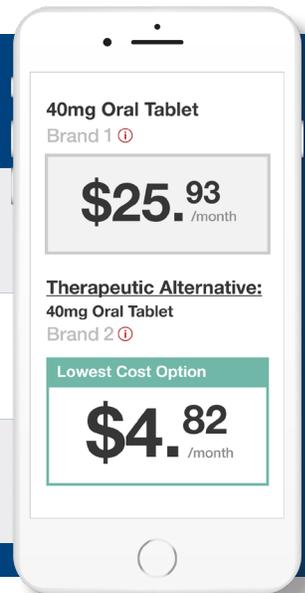
Find out what you'll pay out of pocket (you may pay the full cost of your prescription if you haven't yet met your deductible).



See a list of lower-cost options you can ask your doctor about.



See how much you can save by moving your prescription to a 90-day supply.





Cost Avoidance Research Effort (CARE) Program

Speak to a specialist about patient assistance research



Have you ever been surprised by the cost of your medication?

You may discover your insurance pays less

than you thought it would when filling your prescriptions. Patients who have difficulties paying their out-of-pocket costs can potentially find funding to cover what insurance doesn't. Your Meritain Health Pharmacy Solutions (MPS) CARE team is available to assist you in affording your high-cost specialty drugs.

After consulting with your physician, if you and your doctor decide to continue therapy with an excluded specialty medication, the CARE team can assist you with cost reduction research. Based on available programs open at the time, you can contact the CARE team to advocate on your behalf with drug procurement and cost reduction or elimination efforts. If funding cannot be secured for your medication, the CARE team can advocate on your behalf regarding potential coverage.

CARE Program

Helping you achieve better health at the lowest cost

The CARE Program through MPS can proactively guide you towards cost savings.

Our goal? Reduce your overall spending while helping you find the best quality health care services.

The MPS CARE Program can help you with navigating high-cost specialty medications. Please call **1.800.830.2310** and select *option two* to start a review with a CARE specialist. A secure voicemail box will be available for you to provide information to a CARE specialist so they can best assist you.

We recommend providing your name, member ID number, medication name and best phone number to reach you.

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A CARE specialist will contact you to initiate research into available programs. This may require you to provide your social security number, yearly family income and individual email address.

MPS understands it's important you're involved in health care decisions that affect you. The decision to continue with the requested medication is between you and your physician.



If you have more questions about your prescription drug benefit, please call the toll-free number on your prescription ID card to speak with a customer service representative.



Your new meter is waiting for you

If you have diabetes, you know how important it is to check your blood glucose levels regularly. We want to help – with a **no-cost blood glucose meter**. It's part of your prescription plan and ordering is easy.

Order your new meter today

- Visit **Caremark.com/ManagingDiabetes**
- Select a Meter
- Follow the instructions on the screen

While you're there, you can learn more about your new meter.



Have questions?

Visit **Caremark.com/ManagingDiabetes** for more information.



Participating National Network Retail Pharmacies

The network includes all major chains and most independent pharmacies. The following list shows the major chain pharmacies that accept your prescription ID card. In addition to the pharmacies listed below, many independent pharmacies also take part in the prescription program. To find out if a pharmacy not listed here accepts your card, call the pharmacy directly.

A

A & P Pharmacy
Accredo Health Group, Inc.
ACME Pharmacy
Albertson's Pharmacy
Aurora Pharmacy

B

Baker's Pharmacy
Bartell Drugs
Bel Air Pharmacy
Brookshire Brothers Pharmacy

C

CarePlus
Caremark Specialty Pharmacy
Carrs-Gottstein Foods Pharmacy
Cashwise Pharmacy
CenterWell Pharmacy
City Market Pharmacy
Coborn's Pharmacy
Copp's Food Center Pharmacy
Coram CVS Specialty Pharmacy
Costco Pharmacy

C

Cub Pharmacy
CVS Pharmacy
CVS Pharmacy in Target stores
CVS Specialty

D

Dillon Pharmacy
Discount Drug Mart
Doc's Pharmacy
Duane Reade

E

Eaton Apothecary
Essentia Health

F

Fairview Pharmacy
Food City Pharmacy
Food Lion Pharmacy
Fred Meyer Pharmacy
Fred's Pharmacy
Fresh Market Pharmacy
Fruth Pharmacy
Fry's Food and Drug

G

Gerbes Pharmacy
Giant Eagle Pharmacy
Giant Pharmacy
Group Health Pharmacy

H

Haggen Pharmacy
Hannaford Food & Drug
Harmons Pharmacy
Harps Pharmacy
Harris Teeter Pharmacy
Healthsmart Pharmacy
H-E-B Pharmacy
Hen House Pharmacy
Henry Ford Medical Center Pharmacy
Homeland Pharmacy
Hy-Vee Pharmacy

I

IHC Health Center
Ingles Pharmacy

Caremark.com

National Network Participating Retail Pharmacies (cont.)

J

Jewel-Osco Pharmacy

K

Kessel Pharmacy

King Soopers Pharmacy

Kinney Drugs

Klein's Pharmacy

Klingensmith's Drug Stores

Knight Drugs

Kroger Pharmacy

Kroger Sav-On Pharmacy

L

Longs Drug Store

M

Marianos Pharmacy

Martin's Pharmacy

Maxor Pharmacies

Med-Fast Pharmacy

Medicap Pharmacy

Medicine Shoppe Pharmacy

Meijer Pharmacy

Mercy Pharmacy

Metro Market Pharmacy

N

Navarro Discount Pharmacy

NCS Healthcare Pharmacy

Neighborcare Pharmacy

Nob Hill Pharmacy

North Florida Pharmacy

O

Omnicare Pharmacy

Oncology Pharmacy

Option Care Pharmacy

Osco Pharmacy

P

Pavilions Pharmacy

Pharmerica

Pick N Save Pharmacy

Price Chopper Pharmacy

Price Cutter Pharmacy

Publix Pharmacy

Q

QFC Pharmacy

R

Raley's Drug Center

Ralphs Pharmacy

Randall's Pharmacy

Rite Aid Pharmacy

S

Safeway Pharmacy

Sam's Club Pharmacy

Sav-Mor Pharmacy

Save Mart Pharmacy

Sav-On Pharmacy

Schnucks Pharmacy

Scott's Pharmacy

Shaw's Pharmacy

Shop 'n Save Pharmacy

Shoppers Pharmacy

S

ShopRite Pharmacy

Smith's Pharmacy

St. John Pharmacy

Stop & Shop Pharmacy

Super 1 Pharmacy

T

Texas Oncology Pharmacy

Thrifty White Pharmacy

Times Pharmacy

Tom Thumb Pharmacy

Tops Pharmacy

U

United Market Street Pharmacy

United Pharmacy

USA Drug

UW Health Pharmacy Services

V

Vons Pharmacy

W

Walgreens Pharmacy

Walmart

Wegman's Pharmacy

Weis Pharmacy

White Drug

[Caremark.com](https://www.caremark.com)

CVS Caremark® reserves the right to review and update the Participating National Network Retail Pharmacies List.
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Rx Smart Savings

Your employer has partnered with Meritain to make saving at the pharmacy counter easy.

How does Rx Smart Savings simplify savings?

Our dedicated Rx Smart Savings Team helps you navigate pharmacy care. This team of licensed pharmacists and pharmacy technicians are your advocates by providing:

- ✓ Personalized pharmacy education
- ✓ Hassle-free communication
- ✓ Proactive outreach
- ✓ Continued savings monitored

What is the savings process?



1 Low Cost Alternatives

Our team identifies safe, low-cost alternatives to the high-cost medications you are taking.



2 Physician Engagement

Our Rx Smart Savings Team communicates directly with your doctor about prescribing the alternative medication as part of your treatment plan.



3 Outreach & Education

An Rx Smart Savings Team member will contact you for final approval of the suggested alternative.



4 Pharmacy Coordination

Our team sends the new prescription directly to your preferred pharmacy for pick up.

Our commitment.

Rx Smart Savings is dedicated to offering hassle-free savings while providing optimal care.





Reduce out-of-pocket costs on your specialty medications

An innovative way to help you save money through PrudentRx

CVS Caremark® has collaborated with PrudentRx exclusively for a program that may help save you money when you fill eligible specialty medications.*

How it works

A PrudentRx trained member advocate will be able to assist you through a high-touch, proactive engagement process to facilitate enrollment and help you obtain non-need based manufacturer assistance where applicable.** Participating members will have a **\$0 out-of-pocket** cost on eligible specialty medications!†

How to get started

Your enrollment in the program will begin automatically, but additional steps may be needed.†† You can choose to opt-out at any time.‡

We'll send more information before we make this plan change. In the meantime, you can continue to fill your prescriptions as usual.



*Due to limitations that exist within various external pharmacy systems, implementing the PrudentRx solution on high-deductible health plans (HDHPs) with health savings accounts (HSAs) will be limited to only those medications included on the client's specialty drug list and dispensed by CVS Specialty® and will not include limited distribution drugs.

**Not all specialty prescriptions offer manufacturer assistance. Eligibility for third-party copay assistance program is dependent on the applicable terms and conditions required by that particular program and are subject to change. Copay assistance program may not be used with any Federal health care program.

†Participating members enrolled in an HDHP with HSA must fully satisfy their deductible before they are eligible for a final \$0 out-of-pocket cost, unless the member has been prescribed a medication that qualifies as "preventive care" under the Internal Revenue Code, which is administered and enforced by the Internal Revenue Service.

††Some manufacturers require you to sign up to obtain copay assistance that they provide for their medications – in that case, you must call PrudentRx to participate in the copay assistance for that medication. PrudentRx will also contact you if you are required to enroll in the copay assistance for any medication that you take.

‡If you choose to opt out of the program or if you do not affirmatively enroll in any copay assistance as required by a manufacturer, you will be responsible for 30 percent of the cost of your specialty medications.

Prescription Reimbursement Claim Form

Important!



- Always allow up to 30 days from the time you send this form until the time you receive the response to allow for mail time plus claims processing
- Keep a copy of all documents submitted for your records.
- Do not staple or tape receipts or attachments to this form.
- Reimbursement is not guaranteed and the contractor will review the claims subject to limitations, exclusions and provisions of the plan.

STEP 1

Card Holder/Patient Information

This section must be fully completed to ensure proper reimbursement of your claim.

Card Holder Information

Identification Number (refer to your prescription card)

Group No./Group Name

Name (Last Name)

(First Name)

(MI)

Address

Address 2

City

State

Zip

Country

Patient Information—Use a separate claim form for each patient.

Name (Last Name)

(First Name)

(MI)

Date of Birth

Male

Female

Phone Number

Relationship to Primary member

Member Spouse Child Other _____

Other Insurance Information

COB (Coordination of Benefits)

Are any of these medicines being taken for an on-the-job injury? Yes No

Is the medicine covered under any other group insurance? Yes No

If yes, is other coverage: Primary Secondary

If other coverage is Primary, include the explanation of benefits (EOB) with this form.

Name of Insurance Company _____ ID # _____

Important! A signature is REQUIRED

NOTICE

Any person who knowingly and with intent to defraud, injure, or deceive any insurance company, submits a claim or application containing any materially false, deceptive, incomplete or misleading information pertaining to such claim may be committing a fraudulent insurance act which is a crime and may subject such person to criminal or civil penalties, including fines, denial of benefits, and/or imprisonment.

I certify that I (or my eligible dependent) have received the medicine described herein. I certify that I have read and understood this form, and that all the information entered on this form is true and correct.

X

Signature of Member

Date

STEP 2**Submission Requirements:**

You **MUST** include all original "pharmacy" receipts in order for your claim to process. "Cash register" receipts will only be accepted for diabetic supplies. The minimum information that must be included on your pharmacy receipts is listed below:

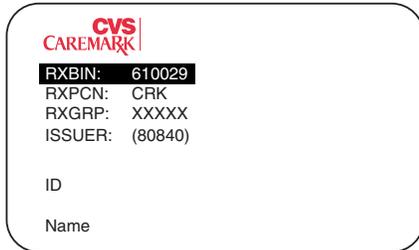
- Patient Name
- Prescription Number
- Medicine NDC number
- Date of Fill
- Metric Quantity
- Total Charge
- Days Supply for your prescription (you may need to ask your pharmacist for this "Days Supply" information)
- Pharmacy Name and Address or Pharmacy NABP Number

If the Prescribing Physician's NPI (National Provider Identification) number is available, please provide: _____

If this claim is from a foreign country, please fill in below:

Country: _____ Currency: _____ Amount: _____

Additional Comments

STEP 3**Mailing Instructions:**

The RXBIN # is located on front of your CVS Caremark Prescription ID card. Please see highlighted area to the left for reference. Match your RXBIN # to the addresses below.

RXBIN # 610415 mail to:

CVS Caremark
P.O. Box 52116
Phoenix, Arizona 85072-2116

RXBIN # 004336 , 012114 mail to:

CVS Caremark
P.O. Box 52136
Phoenix, Arizona 85072-2136

RXBIN # 610029 mail to:

CVS Caremark
P.O. Box 52196
Phoenix, Arizona 85072-2196

RXBIN # 610474 , 610468 , 004245 or 610449 mail to:

CVS Caremark
P.O. Box 52010
Phoenix, Arizona 85072-2010

RXBIN # 610473 , 610475 mail to:

CVS Caremark
P.O. Box 53992
Phoenix, Arizona 85072-3992

IMPORTANT REMINDER

To avoid having to submit a paper claim form:

- Always have your card available at time of purchase
- Always use pharmacies within your network
- Use medication from your formulary list.
- If problems are encountered at the pharmacy, call the number on the back of your card.



Performance Drug List - Standard Control for Clients with Advanced Control Specialty Formulary®

The **CVS Caremark® Performance Drug List - Standard Control for Clients with Advanced Control Specialty Formulary®** is a guide within select therapeutic categories for clients, plan members and health care providers. **Generics should be considered the first line of prescribing.** If there is no generic available, there may be more than one brand-name medicine to treat a condition. These preferred brand-name medicines are listed to help identify products that are clinically appropriate and cost-effective. Generics listed in therapeutic categories are for representational purposes only. This is not an all-inclusive list and does not guarantee coverage. This list represents brand products in CAPS, branded generics in upper- and lowercase *Italics*, and generic products in lowercase *italics*.

PLAN MEMBER

Your benefit plan provides you with prescription drug coverage that is administered by CVS Caremark. Ask your doctor to consider prescribing, when medically appropriate, a preferred medicine from this list. Take this list the next time you or a covered family member sees a doctor.

- Your specific prescription benefit plan design may not cover certain medications, products or categories, regardless of their appearance in this document. Medications and products recently approved by the U.S. Food and Drug Administration (FDA) may not be covered immediately upon release to the market.
- Your prescription benefit plan design may alter coverage of certain products or vary cost sharing amounts based on the condition being treated.
- You may be responsible for the full cost of medications and products that are removed from coverage.
- For specific information regarding your prescription benefit coverage and cost sharing, or if you have additional questions, please sign in or register on [Caremark.com](https://www.caremark.com) and click Plan Summary on the Plan & Benefits menu.
- When a generic medication that is equivalent to a brand-name drug is released to the market, in most instances, that brand-name drug will be designated as a non-preferred option.

HEALTH CARE PROVIDER

Your patient is covered under a prescription benefit plan administered by CVS Caremark. As a way to help manage health care costs, authorize generic substitution whenever possible. If you believe a brand-name product is medically necessary, consider prescribing a brand name on this list.

- The member's prescription benefit plan design may alter coverage of certain products or vary cost sharing amounts based on the condition being treated.
- This drug list represents a summary of prescription coverage. The member's specific prescription benefit plan design may not cover certain products or categories, regardless of their appearance in this document. Products recently approved by the FDA may not be covered immediately upon release to the market.
- The member's prescription benefit plan may have different cost sharing for specific products on the list.

- Unless specifically indicated, drug list products will include all dosage forms.
- Log in to [Caremark.com](https://www.caremark.com) to check coverage and cost sharing information for a specific medicine.

ANALGESICS

COX-2 INHIBITORS

celecoxib

GOUT

allopurinol
colchicine
probenecid

NSAIDS

diclofenac sodium
diclofenac sodium gel 1%
diclofenac sodium solution
1.5%
ibuprofen
meloxicam tablet
naproxen (except *naproxen*
CR or *naproxen suspension*)

NSAIDS, COMBINATIONS

diclofenac sodium-misoprostol
ibuprofen-famotidine

OPIOID ANALGESICS

codeine-acetaminophen
fentanyl transdermal
hydrocodone ext-rel
hydrocodone-acetaminophen
hydromorphone
hydromorphone ext-rel
methadone
morphine
morphine ext-rel
oxycodone
oxycodone-acetaminophen
tramadol (except *tramadol*
tablet 100 mg)
tramadol ext-rel tablet

OPIOID PARTIAL AGONISTS

buprenorphine transdermal
BELBUCA

ANTI-INFECTIVES

ANTHELMINTICS

ivermectin tablet
EMVERM

ANTIFUNGALS

fluconazole
itraconazole
terbinafine tablet

ANTIVIRALS

acyclovir capsule, tablet
oseltamivir
valacyclovir
valganciclovir
PAXLOVID
RELENZA

CEPHALOSPORINS

cefdinir
cefprozil
cefuroxime axetil
cephalexin

ERYTHROMYCINS/MACROLIDES

azithromycin
clarithromycin
clarithromycin ext-rel
erythromycins
DIFICID

FLUOROQUINOLONES

ciprofloxacin
levofloxacin
moxifloxacin

MISCELLANEOUS

clindamycin
linezolid
metronidazole
nitrofurantoin (except NDC
16571074024)
pyrimethamine
sulfamethoxazole-
trimethoprim
vancomycin capsule
XIFAXAN 550 MG

PENICILLINS

amoxicillin
amoxicillin-clavulanate
dicloxacillin
penicillin vk

TETRACYCLINES

doxycycline hyclate 20 mg

doxycycline hyclate capsule
minocycline
tetracycline

ANTINEOPLASTIC AGENTS

ANTIMETABOLITES

pemetrexed

HORMONAL

ANTINEOPLASTIC AGENTS

bicalutamide

CARDIOVASCULAR

ACE INHIBITOR COMBINATIONS

fosinopril-hydrochlorothiazide
lisinopril-hydrochlorothiazide
quinapril-hydrochlorothiazide

ACE INHIBITORS

enalapril
fosinopril
lisinopril
quinapril
ramipril

ALDOSTERONE RECEPTOR ANTAGONISTS

spironolactone
KERENDIA

ANGIOTENSIN II RECEPTOR ANTAGONIST COMBINATIONS

amlodipine-olmesartan
amlodipine-telmisartan
amlodipine-valsartan
amlodipine-valsartan-
hydrochlorothiazide
candesartan-
hydrochlorothiazide
irbesartan-hydrochlorothiazide
losartan-hydrochlorothiazide
olmesartan-amlodipine-
hydrochlorothiazide
olmesartan-
hydrochlorothiazide

telmisartan-
hydrochlorothiazide
valsartan-hydrochlorothiazide

ANGIOTENSIN II RECEPTOR ANTAGONISTS

candesartan
irbesartan
losartan
olmesartan
telmisartan
valsartan

ANTIARRHYTHMICS

amiodarone
disopyramide
sotalol
MULTAQ

ANTIPEPTICS, ACL INHIBITORS/COMBINATION S

NEXLETOL
NEXLIZET

ANTIPEPTICS, BILE ACID RESINS

cholestyramine
colesevelam

ANTIPEPTICS, CHOLESTEROL ABSORPTION INHIBITOR

ezetimibe

ANTIPEPTICS, FIBRATES

fenofibrate (except *fenofibrate*
capsule 30 mg, 50 mg, 90
mg, 130 mg; *fenofibrate*
tablet 40 mg, 120 mg)
fenofibric acid delayed-rel

ANTIPEPTICS, HMG-COA REDUCTASE INHIBITORS

atorvastatin
fluvastatin
lovastatin
pitavastatin
pravastatin
rosuvastatin
simvastatin

**ANTILIPEMICS, HMG-COA
REDUCTASE
INHIBITORS/COMBINATION
S**

ezetimibe-simvastatin

**ANTILIPEMICS,
MISCELLANEOUS**

niacin ext-rel

**ANTILIPEMICS, OMEGA-3
FATTY ACIDS**

omega-3 acid ethyl esters
VASCEPA

BETA-BLOCKERS

acebutolol
atenolol
carvedilol
carvedilol phosphate ext-rel
metoprolol succinate ext-rel
metoprolol tartrate
nadolol
nebivolol
pindolol
propranolol
propranolol ext-rel

**CALCIUM CHANNEL
BLOCKER/ANTILIPEMIC
COMBINATIONS**

amlodipine-atorvastatin

**CALCIUM CHANNEL
BLOCKERS**

amlodipine
diltiazem ext-rel (except
generics for CARDIZEM LA)
nifedipine ext-rel
verapamil ext-rel

DIGITALIS GLYCOSIDES

digoxin

**DIRECT RENIN
INHIBITORS/COMBINATION
S**

aliskiren

DIURETICS

amiloride
chlorthalidone
ethacrynic acid
furosemide
hydrochlorothiazide
metolazone
spironolactone-
hydrochlorothiazide
torseamide
triamterene

triamterene-
hydrochlorothiazide

HEART FAILURE

isosorbide dinitrate-
hydralazine
ivabradine
sacubitril-valsartan
VERQUVO

MISCELLANEOUS

midodrine
ranolazine ext-rel

NITRATES

isosorbide dinitrate (except
isosorbide dinitrate 40 mg)
isosorbide mononitrate
nitroglycerin lingual spray
nitroglycerin sublingual

**CENTRAL NERVOUS
SYSTEM**

ANTIANKXIETY

alprazolam
lorazepam
oxazepam

ANTIDEMENTIA

donepezil
galantamine
galantamine ext-rel
memantine
rivastigmine
rivastigmine transdermal
NAMZARIC

ANTIDEPRESSANTS

bupropion
bupropion ext-rel (except
bupropion ext-rel tablet 450
mg)
citalopram
desvenlafaxine ext-rel
duloxetine
escitalopram
fluoxetine (except *fluoxetine*
tablet 60 mg, fluoxetine
tablet [generics for
SARAFEM])
mirtazapine
paroxetine hcl
paroxetine hcl ext-rel (except
NDC 60505367503)
sertraline
trazodone
venlafaxine
venlafaxine ext-rel capsule

vilazodone
AUVELITY
TRINTELLIX

**ANTIPARKINSONIAN
AGENTS**

amantadine
carbidopa-levodopa
carbidopa-levodopa ext-rel
carbidopa-levodopa-
entacapone
entacapone
pramipexole
pramipexole ext-rel
rasagiline
ropinirole
ropinirole ext-rel
selegiline
CREXONT
NEUPRO
RYTARY

ANTIPSYCHOTICS

aripiprazole
clozapine
lurasidone
olanzapine
quetiapine
quetiapine ext-rel
risperidone
ziprasidone
ABILIFY ASIMTUFII
ABILIFY MAINTENA
PERSERIS
VRAYLAR

ANTISEIZURE AGENTS

carbamazepine
carbamazepine ext-rel
clobazam
clonazepam
diazepam
diazepam rectal gel
divalproex sodium
divalproex sodium ext-rel
eslicarbazepine
ethosuximide
gabapentin
lacosamide
lamotrigine
lamotrigine ext-rel
levetiracetam
levetiracetam ext-rel
oxcarbazepine
phenobarbital
phenytoin
phenytoin sodium extended
pregabalin
primidone

rufinamide
tiagabine
topiramate
topiramate ext-rel
valproic acid
zonisamide
BRIVIACT
NAYZILAM
OXTELLAR XR
VALTOCO
XCOPRI

**ATTENTION DEFICIT
HYPERACTIVITY DISORDER**

amphetamine-
dextroamphetamine mixed
salts
amphetamine-
dextroamphetamine mixed
salts ext-rel
atomoxetine
dexmethylphenidate ext-rel
guanfacine ext-rel
lisdexamfetamine
methylphenidate
methylphenidate ext-rel
AZSTARYS
QELBREE

HYPNOTICS

doxepin
eszopiclone
ramelteon
zolpidem
zolpidem ext-rel
BELSOMRA
QUVIVIQ

**MIGRAINE -
MISCELLANEOUS**

NURTEC ODT
QULIPTA
UBRELVY

**MIGRAINE - MONOCLONAL
ANTIBODIES**

AJOVY
EMGALITY

**MIGRAINE - TRIPTANS AND
COMBINATIONS**

eletriptan
naratriptan
rizatriptan
sumatriptan
zolmitriptan
TOSYMRA
ZEMBRACE SYMTOUCH

**MUSCULOSKELETAL
THERAPY AGENTS**

cyclobenzaprine (except
cyclobenzaprine tablet 7.5
mg)

LYVISPAP

NARCOLEPSY/CATAPLEXY

armodafinil

modafinil

SUNOSI

OPIOID

AGONIST/ANTAGONIST

buprenorphine-naloxone

sublingual

ZUBSOLV

OPIOID ANTAGONIST

naloxone

**POSTHERPETIC NEURALGIA
(PHN)**

pregabalin ext-rel

GRALISE

**ENDOCRINE AND
METABOLIC**

ANDROGENS

testosterone gel (except
authorized generics for
TESTIM and VOGELXO)

testosterone solution

NATESTO

**ANTIDIABETICS, AMYLIN
ANALOGS**

SYMLINPEN

ANTIDIABETICS, BIGUANIDE

metformin

metformin ext-rel (except
generics for FORTAMET and
GLUMETZA)

**ANTIDIABETICS,
BIGUANIDE/
SULFONYLUREA
COMBINATIONS**

glipizide-metformin

**ANTIDIABETICS,
DIPEPTIDYL PEPTIDASE-4
(DPP-4) INHIBITOR
COMBINATIONS**

saxagliptin-metformin ext-rel

TRIJARDY XR

ZITUVIMET

ZITUVIMET XR

**ANTIDIABETICS,
DIPEPTIDYL PEPTIDASE-4
(DPP-4) INHIBITORS**

saxagliptin

ZITUVIO

**ANTIDIABETICS, INCRETIN
MIMETIC AGENTS**

liraglutide

MOUNJARO

OZEMPIC

RYBELSUS

TRULICITY

**ANTIDIABETICS, INCRETIN
MIMETIC COMBINATION
AGENTS**

SOLIQUA

XULTOPHY

ANTIDIABETICS, INSULIN

FIASP

HUMULIN R U-500

INSULIN GLARGINE-YFGN

LANTUS

NOVOLIN 70/30

NOVOLIN N

NOVOLIN R

NOVOLOG

NOVOLOG MIX 70/30

TOUJEO

TRESIBA

**ANTIDIABETICS, INSULIN
SENSITIZER**

pioglitazone

**ANTIDIABETICS, INSULIN
SENSITIZER/BIGUANIDE
COMBINATION**

pioglitazone-metformin

**ANTIDIABETICS, INSULIN
SENSITIZER/SULFONYLUREA
COMBINATION**

pioglitazone-glimepiride

**ANTIDIABETICS,
MEGLITINIDE**

nateglinide

repaglinide

**ANTIDIABETICS, SODIUM-
GLUCOSE
COTRANSPORTER-2 (SGLT2)
INHIBITOR COMBINATIONS**

SYNJARDY

SYNJARDY XR

XIGDUO XR

**ANTIDIABETICS, SODIUM-
GLUCOSE
COTRANSPORTER-2 (SGLT2)
INHIBITOR/DPP-4
INHIBITOR COMBINATIONS**

GLYXAMBI

**ANTIDIABETICS, SODIUM-
GLUCOSE
COTRANSPORTER-2 (SGLT2)
INHIBITORS**

FARXIGA

JARDIANCE

**ANTIDIABETICS,
SULFONYLUREA**

glimepiride

glipizide

glipizide ext-rel

ANTIOBESITY

orlistat

QSYMIA

SAXENDA

WEGOVY

**CALCIUM REGULATORS,
BISPHOSPHONATES**

alendronate

ibandronate

risedronate

**CALCIUM REGULATORS,
MISCELLANEOUS**

calcitonin-salmon

**CARNITINE DEFICIENCY
AGENTS**

levocarnitine

CONTRACEPTIVES

ethinyl estradiol-drospirenone

ethinyl estradiol-drospirenone-

levomefolate

ethinyl estradiol-etonogestrel

ethinyl estradiol-levonorgestrel

ethinyl estradiol-

levonorgestrel-iron

ethinyl estradiol-

norelgestromin

ethinyl estradiol-norethindrone

acetate

ethinyl estradiol-norethindrone

acetate-iron

ethinyl estradiol-norgestimate

ANNOVERA

LO LOESTRIN FE

NATAZIA

DIABETIC SUPPLIES

ACCU-CHEK AVIVA PLUS

STRIPS AND KITS

ACCU-CHEK GUIDE STRIPS

AND KITS

ACCU-CHEK LANCETS /

LANCING DEVICES

ACCU-CHEK SMARTVIEW

STRIPS AND KITS

BD ULTRAFINE INSULIN

SYRINGES

BD ULTRAFINE NEEDLES

DEXCOM CONTINUOUS

GLUCOSE MONITORING

SYSTEM

EMBECTA ULTRAFINE

INSULIN SYRINGES (except

certain NDCs)

EMBECTA ULTRAFINE

NEEDLES (except certain

NDCs)

OMNIPOD 5 INSULIN

INFUSION PUMP

OMNIPOD DASH INSULIN

INFUSION PUMP

OMNIPOD INSULIN INFUSION

PUMP

TRUE METRIX STRIPS AND

KITS

TWIIST INSULIN INFUSION

PUMP AND SUPPLIES

ENDOMETRIOSIS

ORLISSA

GLUCOCORTICOIDS

dexamethasone

fludrocortisone

hydrocortisone

methylprednisolone

prednisolone solution (except

prednisolone solution 10

mg/5 mL, 20 mg/5 mL)

prednisone

**GLUCOSE ELEVATING
AGENTS**

glucagon, human recombinant

BAQSIMI

GVOKE

ZEGALOGUE

**MENOPAUSAL SYMPTOM
AGENTS**

estradiol

estradiol vaginal cream

estradiol-norethindrone

COMBIPATCH

DUAVEE

IMVEXXY
PREMPHASE
PREMPRO
VAGIFEM

MISCELLANEOUS

raloxifene

PHOSPHATE BINDER AGENTS

calcium acetate
sevelamer carbonate
AURYXIA

POTASSIUM-REMOVING AGENTS

VELTASSA

PROGESTINS

medroxyprogesterone
megestrol acetate
progesterone, micronized
CRINONE

THYROID AGENTS

levothyroxine
liothyronine
SYNTHROID

UTERINE FIBROIDS

MYFEMBREE
ORIAHNN

GASTROINTESTINAL

ANTICHOLINERGICS

dicyclomine

ANTIDIARRHEALS

diphenoxylate-atropine
loperamide

ANTIEMETICS

aprepitant
doxylamine-pyridoxine
delayed-rel
dronabinol
granisetron
meclizine
metoclopramide
ondansetron
prochlorperazine
promethazine
scopolamine transdermal
trimethobenzamide
SANCUSO

H2-RECEPTOR

ANTAGONISTS

famotidine

INFLAMMATORY BOWEL DISEASE

balsalazide
budesonide delayed-rel
capsule
hydrocortisone enema
mesalamine delayed-rel
mesalamine enema
mesalamine ext-rel
mesalamine suppository
sulfasalazine
sulfasalazine delayed-rel
CORTIFOAM

IRRITABLE BOWEL SYNDROME WITH CONSTIPATION

lubiprostone
LINZESS

IRRITABLE BOWEL SYNDROME WITH DIARRHEA

alosetron
VIBERZI

LAXATIVES

lactulose solution
peg 3350-electrolytes (except
generics for MOVIPREP)
sodium sulfate-potassium
sulfate-magnesium sulfate
CLENPIQ

MISCELLANEOUS

prucalopride
sucralfate tablet
MOVANTIK
SYMPROIC

PANCREATIC ENZYMES

CREON
VIOKACE
ZENPEP

PROTON PUMP INHIBITORS

esomeprazole delayed-rel
lansoprazole delayed-rel
capsule
omeprazole delayed-rel
pantoprazole delayed-rel
tablet

RECTAL, CORTICOSTEROIDS

hydrocortisone
PROCTOFOAM-HC

ULCER THERAPY COMBINATIONS

bismuth-metronidazole-
tetracycline

TALICIA

GENITOURINARY

BENIGN PROSTATIC HYPERPLASIA

alfuzosin ext-rel
doxazosin
dutasteride
dutasteride-tamsulosin
finasteride
silodosin
tamsulosin
terazosin

ERECTILE DYSFUNCTION

avanafil
sildenafil
tadalafil

URINARY ANTISPASMODICS

darifenacin ext-rel
fesoterodine ext-rel
oxybutynin
oxybutynin ext-rel
solifenacin
tolterodine
tolterodine ext-rel
tropium
tropium ext-rel
GEMTESA

HEMATOLOGIC

ANTICOAGULANTS

dabigatran
enoxaparin
fondaparinux
warfarin
ELIQUIS
XARELTO

PLATELET AGGREGATION INHIBITORS

clopidogrel
dipyridamole ext-rel-aspirin
prasugrel
BRILINTA

SICKLE CELL DISEASE

SIKLOS

IMMUNOLOGIC AGENTS

ALLERGENIC EXTRACTS

GRASTEK
ODACTRA
RAGWITEK

DISEASE-MODIFYING ANTI-RHEUMATIC DRUGS (DMARDS)

methotrexate

NUTRITIONAL/SUPPLEMENTS

ELECTROLYTES

potassium chloride liquid

PRENATAL VITAMINS

prenatal vitamins

VITAMINS

folic acid
multivitamins

OPHTHALMIC

ANTI-INFECTIVE/ANTI-INFLAMMATORY

neomycin-polymyxin b-
bacitracin-hydrocortisone
neomycin-polymyxin b-
dexamethasone
tobramycin-dexamethasone
TOBRADEX OINTMENT

ANTI-INFECTIVES

ciprofloxacin
erythromycin
gentamicin
levofloxacin
moxifloxacin
ofloxacin
sulfacetamide
tobramycin
trifluridine
BESIVANCE
XDEMYV

ANTI-INFLAMMATORIES

bromfenac
dexamethasone
diclofenac
difluprednate
ketorolac
loteprednol
prednisolone acetate 1%
ILEVRO

ANTIALLERGICS

azelastine
bepotastine
cromolyn sodium
loteprednol
olopatadine

ANTIGLAUCOMA BETA-BLOCKERS

timolol maleate solution
BETOPTIC S

ANTIGLAUCOMA COMBINATION AGENTS

brimonidine-timolol
dorzolamide-timolol
SIMBRINZA

CARBONIC ANHYDRASE INHIBITORS

brinzolamide
dorzolamide

DRY EYE DISEASE

RESTASIS
VEVYE

PROSTAGLANDINS

bimatoprost
latanoprost
travoprost

SYMPATHOMIMETICS

brimonidine solution
ALPHAGAN P

RESPIRATORY**ANAPHYLAXIS TREATMENT AGENTS**

epinephrine (except NDCs
00093-XXXX-XX, 49502-
XXXX-XX)
AUVI-Q

ANTICHOLINERGIC/BETA AGONIST COMBINATIONS

ipratropium-albuterol
inhalation solution
ANORO ELLIPTA
STIOLTO RESPIMAT

ANTICHOLINERGIC/BETA AGONIST/STEROID COMBINATIONS

BREZTRI AEROSPHERE
TRELEGY ELLIPTA

ANTICHOLINERGICS

ipratropium inhalation solution
SPIRIVA
YUPELRI

ANTIHISTAMINE COMBINATIONS

azelastine-fluticasone

ANTIHISTAMINES

azelastine
levocetirizine
olopatadine

BETA AGONISTS

albuterol inhalation solution
albuterol sulfate cfc-free
aerosol (except NDCs
00093317431,
66993001968)

formoterol inhalation solution
levalbuterol tartrate cfc-free
aerosol

SEREVENT
STRIVERDI RESPIMAT

COLD/COUGH

benzonatate (except NDCs
69336012615,
69499032915)

LEUKOTRIENE RECEPTOR ANTAGONISTS

montelukast
zafirlukast

MISCELLANEOUS

roflumilast

NASAL STEROIDS

flunisolide
fluticasone
mometasone
XHANCE

STEROID INHALANTS

budesonide inhalation
suspension
ASMANEX HFA
PULMICORT FLEXHALER

STEROID/BETA-AGONIST COMBINATIONS

Breyna
budesonide-formoterol
fluticasone-salmeterol (except
certain NDCs)
Wixela Inhub
AIRSUPRA
BREO ELLIPTA (except certain
NDCs)

TOPICAL**DERMATOLOGY, ACNE**

adapalene (except adapalene
pad)

benzoyl peroxide
clindamycin gel (except NDC
68682046275)
clindamycin solution
clindamycin-benzoyl peroxide
dapsone
erythromycin solution
erythromycin-benzoyl
peroxide
isotretinoin capsule 10 mg, 20
mg, 30 mg, 40 mg
tazarotene
tretinoin
AKLIEF
EPIDUO
TWYNEO
WINLEVI

DERMATOLOGY, ACTINIC KERATOSIS

fluorouracil cream 5%
fluorouracil solution
imiquimod

DERMATOLOGY, ANTIBIOTICS

gentamicin
mupirocin ointment

DERMATOLOGY, ANTIFUNGALS

ciclopirox
clotrimazole
econazole
ketoconazole cream 2%
naftifine
nystatin

DERMATOLOGY, ANTIPSORIATICS

acitretin
calcipotriene ointment,
solution
methoxsalen
tazarotene
ENSTILAR
VTAMA
ZORYVE CREAM
ZORYVE FOAM

DERMATOLOGY, ANTISEBORRHEICS

ketoconazole shampoo 2%
selenium sulfide lotion 2.5%
ZORYVE FOAM

DERMATOLOGY, ATOPIC DERMATITIS

pimecrolimus

tacrolimus
EUCRISA
OPZELURA
VTAMA
ZORYVE CREAM

DERMATOLOGY, CORTICOSTEROIDS

clobetasol cream, foam, gel,
lotion, ointment, shampoo
(except clobetasol emollient
foam)

desonide (except desonide
gel)

desoximetasone (except
desoximetasone ointment
0.05%)

fluocinonide (except
fluocinonide cream 0.1%)
halobetasol cream, ointment

hydrocortisone
hydrocortisone butyrate
cream, ointment, solution

mometasone
triamcinolone cream, lotion,
ointment (except
triamcinolone ointment
0.05%)

BRYHALI

DERMATOLOGY, LOCAL ANESTHETICS

lidocaine patch
lidocaine-prilocaine

DERMATOLOGY, ROSACEA

azelaic acid gel
brimonidine gel
ivermectin cream
metronidazole
FINACEA FOAM
ORACEA

MOUTH/THROAT/DENTAL AGENTS

lidocaine viscous
EPISIL

OTIC

acetic acid
ciprofloxacin-dexamethasone
neomycin-polymyxin b-
hydrocortisone
ofloxacin otic

QUICK REFERENCE DRUG LIST

A

ABILIFY ASIMTUFII
 ABILIFY MAINTENA
 ACCU-CHEK AVIVA PLUS STRIPS AND KITS
 ACCU-CHEK GUIDE STRIPS AND KITS
 ACCU-CHEK LANCETS / LANCING DEVICES
 ACCU-CHEK SMARTVIEW STRIPS AND KITS
 acebutolol
 acetic acid
 acitretin
 acyclovir capsule, tablet
 adapalene (except adapalene pad)
 AIRSUPRA
 AJOVY
 AKLIEF
 albuterol inhalation solution
 albuterol sulfate cfc-free aerosol (except NDCs 00093317431, 66993001968)
 alendronate
 alfuzosin ext-rel
 aliskiren
 allopurinol
 alosetron
 ALPHAGAN P
 alprazolam
 amantadine
 amiloride
 amiodarone
 amlodipine
 amlodipine-atorvastatin
 amlodipine-olmesartan
 amlodipine-telmisartan
 amlodipine-valsartan
 amlodipine-valsartan-hydrochlorothiazide
 amoxicillin
 amoxicillin-clavulanate
 amphetamine-dextroamphetamine mixed salts
 amphetamine-dextroamphetamine mixed salts ext-rel
 ANNOVERA
 ANORO ELLIPTA
 aprepitant
 aripiprazole

armodafinil
 ASMANEX HFA
 atenolol
 atomoxetine
 atorvastatin
 AURYXIA
 AUVELITY
 AUVI-Q
 avanafil
 azelaic acid gel
 azelastine
 azelastine
 azelastine-fluticasone
 azithromycin
 AZSTARYS

B

balsalazide
 BAQSIMI
 BD ULTRAFINE INSULIN SYRINGES
 BD ULTRAFINE NEEDLES
 BELBUCA
 BELSOMRA
 benzonatate (except NDCs 69336012615, 69499032915)
 benzoyl peroxide
 bepotastine
 BESIVANCE
 BETOPTIC S
 bicalutamide
 bimatoprost
 bismuth-metronidazole-tetracycline
 BREO ELLIPTA (except certain NDCs)
 Breyna
 BREZTRI AEROSPHERE
 BRILINTA
 brimonidine gel
 brimonidine solution
 brimonidine-timolol
 brinzolamide
 BRIVIACT
 bromfenac
 BRYHALI
 budesonide delayed-rel capsule
 budesonide inhalation suspension
 budesonide-formoterol
 buprenorphine transdermal
 buprenorphine-naloxone sublingual

bupropion
 bupropion ext-rel (except bupropion ext-rel tablet 450 mg)

C

calcipotriene ointment, solution
 calcitonin-salmon
 calcium acetate
 candesartan
 candesartan-hydrochlorothiazide
 carbamazepine
 carbamazepine ext-rel
 carbidopa-levodopa
 carbidopa-levodopa ext-rel
 carbidopa-levodopa-entacapone
 carvedilol
 carvedilol phosphate ext-rel
 cefdinir
 cefprozil
 cefuroxime axetil
 celecoxib
 cephalexin
 chlorthalidone
 cholestyramine
 ciclopirox
 ciprofloxacin
 ciprofloxacin
 ciprofloxacin-dexamethasone
 citalopram
 clarithromycin
 clarithromycin ext-rel
 CLENPIQ
 clindamycin
 clindamycin gel (except NDC 68682046275)
 clindamycin solution
 clindamycin-benzoyl peroxide
 clobazam
 clobetasol cream, foam, gel, lotion, ointment, shampoo (except clobetasol emollient foam)
 clonazepam
 clopidogrel
 clotrimazole
 clozapine
 codeine-acetaminophen
 colchicine
 colesevelam
 COMBIPATCH

CORTIFOAM
 CREON
 CREXONT
 CRINONE
 cromolyn sodium
 cyclobenzaprine (except cyclobenzaprine tablet 7.5 mg)

D

dabigatran
 dapstone
 darifenacin ext-rel
 desonide (except desonide gel)
 desoximetasone (except desoximetasone ointment 0.05%)
 desvenlafaxine ext-rel
 dexamethasone
 dexamethasone
 DEXCOM CONTINUOUS GLUCOSE MONITORING SYSTEM
 dexmethylphenidate ext-rel
 diazepam
 diazepam rectal gel
 diclofenac
 diclofenac sodium
 diclofenac sodium gel 1%
 diclofenac sodium solution 1.5%
 diclofenac sodium-misoprostol
 dicloxacillin
 dicyclomine
 DIFICID
 difluprednate
 digoxin
 diltiazem ext-rel (except generics for CARDIZEM LA)
 diphenoxylate-atropine
 dipyridamole ext-rel-aspirin
 disopyramide
 divalproex sodium
 divalproex sodium ext-rel
 donepezil
 dorzolamide
 dorzolamide-timolol
 doxazosin
 doxepin
 doxycycline hyclate 20 mg
 doxycycline hyclate capsule

doxylamine-pyridoxine
delayed-rel
dronabinol
DUAVEE
duloxetine
dutasteride
dutasteride-tamsulosin

E

econazole
eletriptan
ELIQUIS
EMBECTA ULTRAFINE
INSULIN SYRINGES
(except certain NDCs)
EMBECTA ULTRAFINE
NEEDLES (except certain
NDCs)
EMGALITY
EMVERM
enalapril
enoxaparin
ENSTILAR
entacapone
EPIDUO
epinephrine (except NDCs
00093-XXXX-XX, 49502-
XXXX-XX)
EPISIL
erythromycin
erythromycin solution
erythromycin-benzoyl
peroxide
erythromycins
escitalopram
eslicarbazepine
esomeprazole delayed-rel
estradiol
estradiol vaginal cream
estradiol-norethindrone
eszopiclone
ethacrynic acid
ethinyl estradiol-
drospirenone
ethinyl estradiol-
drospirenone-levomefolate
ethinyl estradiol-etonogestrel
ethinyl estradiol-
levonorgestrel
ethinyl estradiol-
levonorgestrel-iron
ethinyl estradiol-
norelgestromin
ethinyl estradiol-
norethindrone acetate
ethinyl estradiol-
norethindrone acetate-iron

ethinyl estradiol-
norgestimate
ethosuximide
EUCRISA
ezetimibe
ezetimibe-simvastatin

F

famotidine
FARXIGA
fenofibrate (except
fenofibrate capsule 30 mg,
50 mg, 90 mg, 130 mg;
fenofibrate tablet 40 mg,
120 mg)
fenofibric acid delayed-rel
fentanyl transdermal
fesoterodine ext-rel
FIASP
FINACEA FOAM
finasteride
fluconazole
fludrocortisone
flunisolide
fluocinonide (except
fluocinonide cream 0.1%)
fluorouracil cream 5%
fluorouracil solution
fluoxetine (except fluoxetine
tablet 60 mg, fluoxetine
tablet [generics for
SARAFEM])
fluticasone
fluticasone-salmeterol
(except certain NDCs)
fluvastatin
folic acid
fondaparinux
formoterol inhalation solution
fosinopril
fosinopril-
hydrochlorothiazide
furosemide

G

gabapentin
galantamine
galantamine ext-rel
GEMTESA
gentamicin
gentamicin
glimepiride
glipizide
glipizide ext-rel
glipizide-metformin
glucagon, human
recombinant
GLYXAMBI

GRALISE
granisetron
GRASTEK
guanfacine ext-rel
GVOKE

H

halobetasol cream, ointment
HUMULIN R U-500
hydrochlorothiazide
hydrocodone ext-rel
hydrocodone-acetaminophen
hydrocortisone
hydrocortisone
hydrocortisone
hydrocortisone butyrate
cream, ointment, solution
hydrocortisone enema
hydromorphone
hydromorphone ext-rel

I

ibandronate
ibuprofen
ibuprofen-famotidine
ILEVRO
imiquimod
IMVEXXY
INSULIN GLARGINE-YFGN
ipratropium inhalation
solution
ipratropium-albuterol
inhalation solution
irbesartan
irbesartan-
hydrochlorothiazide
isosorbide dinitrate (except
isosorbide dinitrate 40 mg)
isosorbide dinitrate-
hydralazine
isosorbide mononitrate
isotretinoin capsule 10 mg, 20
mg, 30 mg, 40 mg
itraconazole
ivabradine
ivermectin cream
ivermectin tablet

J

JARDIANCE

K

KERENDIA
ketoconazole cream 2%
ketoconazole shampoo 2%
ketorolac

L

lacosamide

lactulose solution
lamotrigine
lamotrigine ext-rel
lansoprazole delayed-rel
capsule
LANTUS
latanoprost
levabuterol tartrate cfc-free
aerosol
levetiracetam
levetiracetam ext-rel
levocarnitine
levocetirizine
levofloxacin
levofloxacin
levothyroxine
lidocaine patch
lidocaine viscous
lidocaine-prilocaine
linezolid
LINZESS
liothyronine
liraglutide
lisdexamfetamine
lisinopril
lisinopril-hydrochlorothiazide
LO LOESTRIN FE
loperamide
losartan
losartan-hydrochlorothiazide
loteprednol
loteprednol
lovastatin
lubiprostone
lurasidone
LYVISPAH

M

meclizine
medroxyprogesterone
megestrol acetate
meloxicam tablet
memantine
mesalamine delayed-rel
mesalamine enema
mesalamine ext-rel
mesalamine suppository
metformin
metformin ext-rel (except
generics for FORTAMET
and GLUMETZA)
methadone
methotrexate
methoxsalen
methylphenidate
methylphenidate ext-rel
methylprednisolone

metoclopramide
metolazone
metoprolol succinate ext-rel
metoprolol tartrate
metronidazole
metronidazole
midodrine
minocycline
mirtazapine
modafinil
mometasone
mometasone
montelukast
morphine
morphine ext-rel
MOUNJARO
MOVANTIK
moxifloxacin
moxifloxacin
MULTAQ
multivitamins
mupirocin ointment
MYFEMBREE

N

nadolol
naftifine
naloxone
NAMZARIC
naproxen (except naproxen
CR or naproxen
suspension)
natriptan
NATAZIA
nateglinide
NATESTO
NAYZILAM
neбивол
neomycin-polymyxin b-
bacitracin-hydrocortisone
neomycin-polymyxin b-
dexamethasone
neomycin-polymyxin b-
hydrocortisone
NEUPRO
NEXLETOL
NEXLIZET
niacin ext-rel
nifedipine ext-rel
nitrofurantoin (except NDC
16571074024)
nitroglycerin lingual spray
nitroglycerin sublingual
NOVOLIN 70/30
NOVOLIN N
NOVOLIN R
NOVOLOG
NOVOLOG MIX 70/30

NURTEC ODT
nystatin

O

ODACTRA
ofloxacin
ofloxacin otic
olanzapine
olmesartan
olmesartan-amlodipine-
hydrochlorothiazide
olmesartan-
hydrochlorothiazide
olopatadine
olopatadine
omega-3 acid ethyl esters
omeprazole delayed-rel
OMNIPOD 5 INSULIN
INFUSION PUMP
OMNIPOD DASH INSULIN
INFUSION PUMP
OMNIPOD INSULIN
INFUSION PUMP
ondansetron
OPZELURA
ORACEA
ORIAHNN
ORILISSA
orlistat
oseltamivir
oxazepam
oxcarbazepine
OXTELLAR XR
oxybutynin
oxybutynin ext-rel
oxycodone
oxycodone-acetaminophen
OZEMPIC

P

pantoprazole delayed-rel
tablet
paroxetine hcl
paroxetine hcl ext-rel (except
NDC 60505367503)
PAXLOVID
peg 3350-electrolytes
(except generics for
MOVIPREP)
pemetrexed
penicillin vk
PERSERIS
phenobarbital
phenytoin sodium extended
pimecrolimus
pindolol
pioglitazone

pioglitazone-glimepiride
pioglitazone-metformin
pitavastatin
potassium chloride liquid
pramipexole
pramipexole ext-rel
prasugrel
pravastatin
prednisolone acetate 1%
prednisolone solution (except
prednisolone solution 10
mg/5 mL, 20 mg/5 mL)
prednisone
pregabalin
pregabalin ext-rel
PREMPHASE
PREMPRO
prenatal vitamins
primidone
probenecid
prochlorperazine
PROCTOFOAM-HC
progesterone, micronized
promethazine
propranolol
propranolol ext-rel
prucalopride
PULMICORT FLEXHALER
pyrimethamine

Q

QELBREE
QSYMIA
quetiapine
quetiapine ext-rel
quinapril
quinapril-hydrochlorothiazide
QULIPTA
QUVIVIQ

R

RAGWITEK
raloxifene
ramelteon
ramipril
ranolazine ext-rel
rasagiline
RELENZA
repaglinide
RESTASIS
risedronate
risperidone
rivastigmine
rivastigmine transdermal
rizatriptan
roflumilast
ropinirole
ropinirole ext-rel

rosuvastatin
rufinamide
RYBELSUS
RYTARY

S

sacubitril-valsartan
SANCUSO
saxagliptin
saxagliptin-metformin ext-rel
SAXENDA
scopolamine transdermal
selegiline
selenium sulfide lotion 2.5%
SEREVENT
sertraline
sevelamer carbonate
SIKLOS
sildenafil
sildenafil
SIMBRINZA
simvastatin
sodium sulfate-potassium
sulfate-magnesium sulfate
solifenacin
SOLIQUA
sotalol
SPIRIVA
spironolactone
spironolactone-
hydrochlorothiazide
STIOLTO RESPIMAT
STRIVERDI RESPIMAT
sucralfate tablet
sulfacetamide
sulfamethoxazole-
trimethoprim
sulfasalazine
sulfasalazine delayed-rel
sumatriptan
SUNOSI
SYMLINPEN
SYMPROIC
SYNJARDY
SYNJARDY XR
SYNTHROID

T

tacrolimus
tadalafil
TALICIA
tamsulosin
tazarotene
telmisartan
telmisartan-
hydrochlorothiazide
terazosin
terbinafine tablet

testosterone gel (except authorized generics for TESTIM and VOGELXO)
 testosterone solution
 tetracycline
 tiagabine
 timolol maleate solution
 TOBRADEX OINTMENT
 tobramycin
 tobramycin-dexamethasone
 tolterodine
 tolterodine ext-rel
 topiramate
 topiramate ext-rel
 toseamide
 TOSYMRA
 TOUJEO
 tramadol (except tramadol tablet 100 mg)
 tramadol ext-rel tablet
 travoprost
 trazodone
 TRELEGY ELLIPTA
 TRESIBA
 tretinoin

triamcinolone cream, lotion, ointment (except triamcinolone ointment 0.05%)
 triamterene
 triamterene-hydrochlorothiazide
 trifluridine
 TRIJARDY XR
 trimethobenzamide
 TRINTELLIX
 trospium
 trospium ext-rel
 TRUE METRIX STRIPS AND KITS
 TRULICITY
 TWIIST INSULIN INFUSION PUMP AND SUPPLIES
 TWYNEO

U

UBRELVY

V

VAGIFEM
 valacyclovir
 valganciclovir

valproic acid
 valsartan
 valsartan-hydrochlorothiazide
 VALTOCO
 vancomycin capsule
 VASCEPA
 VELTASSA
 venlafaxine
 venlafaxine ext-rel capsule
 verapamil ext-rel
 VERQUVO
 VEVYE
 VIBERZI
 vilazodone
 VIOKACE
 VRAYLAR
 VTAMA

W

warfarin
 WEGOVY
 WINLEVI
 Wixela Inhub

X

XARELTO
 XCOPRI

XDEMVY
 XHANCE
 XIFAXAN 550 MG
 XIGDUO XR
 XULTOPHY

Y

YUPELRI

Z

zafirlukast
 ZEGALOGUE
 ZEMBRACE SYMTOUCH
 ZENPEP
 ziprasidone
 ZITUVIMET
 ZITUVIMET XR
 ZITUVIO
 zolmitriptan
 zolpidem
 zolpidem ext-rel
 zonisamide
 ZORYVE CREAM
 ZORYVE CREAM
 ZORYVE FOAM
 ZUBSOLV

PREFERRED OPTIONS LIST FOR FORMULARY DRUG REMOVALS AND DRUGS COVERED ONLY WHEN PREFERRED OPTIONS ARE NOT CLINICALLY APPROPRIATE

The preferred options listed below are a broad representation of available treatment options and do not necessarily represent clinical equivalency.

DRUG NAME(S)	PREFERRED OPTION(S)	DRUG NAME(S)	PREFERRED OPTION(S)
ABILIFY	aripiprazole, clozapine, lurasidone, olanzapine, quetiapine, quetiapine ext-rel, risperidone, ziprasidone, VRAYLAR	Activite	omeprazole delayed-rel, pantoprazole delayed-rel tablet
ACANYA	adapalene (except adapalene pad), benzoyl peroxide, clindamycin gel (except NDC 68682046275), clindamycin solution, clindamycin-benzoyl peroxide, dapsone, erythromycin solution, erythromycin-benzoyl peroxide, tazarotene, tretinoin, AKLIEF, EPIDUO, TWYNEO, WINLEVI	ACTOS	generic multivitamins
ACIPHEX, ACIPHEX SPRINKLE	esomeprazole delayed-rel, lansoprazole delayed-rel capsule,	ACUVAIL	pioglitazone
		acyclovir cream	bromfenac, diclofenac, ketorolac, ILEVRO
		ACZONE	acyclovir capsule, acyclovir tablet, valacyclovir
			adapalene (except adapalene pad), benzoyl peroxide, clindamycin gel (except NDC 68682046275), clindamycin solution, clindamycin-benzoyl peroxide, dapsone, erythromycin solution, erythromycin-benzoyl peroxide, tazarotene, tretinoin,

DRUG NAME(S)	PREFERRED OPTION(S)	DRUG NAME(S)	PREFERRED OPTION(S)
adapalene pad	AKLIEF, EPIDUO, TWYNEO, WINLEVI <i>adapalene (except adapalene pad), benzoyl peroxide, clindamycin gel (except NDC 68682046275), clindamycin solution, clindamycin-benzoyl peroxide, dapson, erythromycin solution, erythromycin-benzoyl peroxide, tazarotene, tretinoin, AKLIEF, EPIDUO, TWYNEO, WINLEVI</i>	AMITIZA AMRIX ANDROGEL	FLEXHALER <i>lubiprostone, prucalopride, LINZESS, MOVANTIK, SYMPROIC cyclobenzaprine (except cyclobenzaprine tablet 7.5 mg) testosterone gel (except authorized generics for TESTIM and VOGELXO), testosterone solution, NATESTO</i>
ADDERALL	<i>amphetamine-dextroamphetamine mixed salts, methylphenidate</i>	APIDRA APLENZIN	FIASP, NOVOLOG <i>bupropion, bupropion ext-rel (except bupropion ext-rel tablet 450 mg)</i>
ADDERALL XR	<i>amphetamine-dextroamphetamine mixed salts ext-rel, dexmethylphenidate ext-rel, lisdexamfetamine, methylphenidate ext-rel, AZSTARYS</i>	APTENSIO XR	<i>amphetamine-dextroamphetamine mixed salts ext-rel, dexmethylphenidate ext-rel, lisdexamfetamine, methylphenidate ext-rel, AZSTARYS</i>
ADRENALIN	<i>epinephrine (except NDCs 00093-XXXX-XX, 49502-XXXX-XX), AUVI-Q</i>	ARAZLO	<i>adapalene (except adapalene pad), benzoyl peroxide, clindamycin gel (except NDC 68682046275), clindamycin solution, clindamycin-benzoyl peroxide, dapson, erythromycin solution, erythromycin-benzoyl peroxide, tazarotene, tretinoin, AKLIEF, EPIDUO, TWYNEO, WINLEVI</i>
ADVAIR DISKUS, ADVAIR HFA	<i>budesonide-formoterol, fluticasone-salmeterol (except certain NDCs), Breyna, Wixela Inhub, BREO ELLIPTA (except certain NDCs)</i>	ARNUITY ELLIPTA ARTHROTEC	ASMANEX HFA, PULMICORT FLEXHALER <i>celecoxib; diclofenac sodium, ibuprofen, meloxicam tablet or naproxen (except naproxen CR or naproxen suspension) WITH esomeprazole delayed-rel, lansoprazole delayed-rel capsule, omeprazole delayed-rel, or pantoprazole delayed-rel tablet</i>
ADZENYS XR-ODT	<i>amphetamine-dextroamphetamine mixed salts ext-rel, dexmethylphenidate ext-rel, lisdexamfetamine, methylphenidate ext-rel, AZSTARYS</i>	ASCENSIA STRIPS AND KITS	ACCU-CHEK AVIVA PLUS STRIPS AND KITS, ACCU-CHEK GUIDE STRIPS AND KITS, ACCU-CHEK SMARTVIEW STRIPS AND KITS, TRUE METRIX STRIPS AND KITS
AIMOVIG	AJOVY, EMGALITY, QULIPTA <i>albuterol sulfate CFC-free aerosol (NDCs 00093317431, 66993001968 only)</i>	ASMANEX	ASMANEX HFA, PULMICORT FLEXHALER
ALEVICYN GEL, ALEVICYN SG, ALEVICYN SOLUTION	<i>desonide (except desonide gel), hydrocortisone</i>	ATACAND, ATACAND HCT	<i>candesartan, candesartan-hydrochlorothiazide, irbesartan, irbesartan-hydrochlorothiazide, losartan, losartan-hydrochlorothiazide, olmesartan, olmesartan-hydrochlorothiazide, telmisartan, telmisartan-</i>
ALIMTA	<i>pemetrexed</i>		
ALLISON MEDICAL INSULIN SYRINGES	BD ULTRAFINE INSULIN SYRINGES, EMBECTA ULTRAFINE INSULIN SYRINGES (except certain NDCs)		
ALREX	<i>azelastine, bepotastine, cromolyn sodium, loteprednol, olopatadine</i>		
ALTOPREV	<i>atorvastatin, ezetimibe-simvastatin, fluvastatin, lovastatin, pitavastatin, pravastatin, rosuvastatin, simvastatin</i>		
ALVESCO	ASMANEX HFA, PULMICORT		

DRUG NAME(S)	PREFERRED OPTION(S)	DRUG NAME(S)	PREFERRED OPTION(S)
ATIVAN	hydrochlorothiazide, valsartan, valsartan-hydrochlorothiazide	BETAMETHASONE ACETATE- BETAMETHASONE SODIUM PHOSPHATE	olopatadine dexamethasone, hydrocortisone, methylprednisolone, prednisolone solution (except prednisolone solution 10 mg/5 mL, 20 mg/5 mL), prednisone
AVENOVA	alprazolam, clonazepam, diazepam, lorazepam, oxazepam		
AZASITE	Talk to your doctor	betamethasone dipropionate ointment 0.05%	desoximetasone (except desoximetasone ointment 0.05%), fluocinonide (except fluocinonide cream 0.1%), BRYHALI
AZELEX	ciprofloxacin, erythromycin, gentamicin, levofloxacin, moxifloxacin, ofloxacin, sulfacetamide, tobramycin, BESIVANCE	BETAPACE, BETAPACE AF BETIMOL	sotalol timolol maleate solution, BETOPTIC S
	adapalene (except adapalene pad), benzoyl peroxide, clindamycin gel (except NDC 68682046275), clindamycin solution, clindamycin-benzoyl peroxide, dapsone, erythromycin solution, erythromycin-benzoyl peroxide, tazarotene, tretinoin, AKLIEF, EPIDUO, TWYNEO, WINLEVI	BEVESPI AEROSPHERE BEYAZ	ANORO ELLIPTA, STIOLTO RESPIMAT ethinyl estradiol-drospirenone, ethinyl estradiol-drospirenone-levomefolate, ethinyl estradiol-levonorgestrel, ethinyl estradiol-levonorgestrel-iron, ethinyl estradiol-norethindrone acetate, ethinyl estradiol-norethindrone acetate-iron, ethinyl estradiol-norgestimate, LO LOESTRIN FE, NATAZIA
AZESCO	generic prenatal vitamins		
AZOR	amlodipine-olmesartan, amlodipine-telmisartan, amlodipine-valsartan	BREEZE 2 STRIPS AND KITS	ACCU-CHEK AVIVA PLUS STRIPS AND KITS, ACCU-CHEK GUIDE STRIPS AND KITS, ACCU-CHEK SMARTVIEW STRIPS AND KITS, TRUE METRIX STRIPS AND KITS
BALCOLTRA	ethinyl estradiol-drospirenone, ethinyl estradiol-drospirenone-levomefolate, ethinyl estradiol-levonorgestrel, ethinyl estradiol-levonorgestrel-iron, ethinyl estradiol-norethindrone acetate, ethinyl estradiol-norethindrone acetate-iron, ethinyl estradiol-norgestimate, LO LOESTRIN FE, NATAZIA	BROMSITE	bromfenac, diclofenac, ketorolac, ILEVRO
BANZEL	clobazam, clonazepam, lamotrigine, rufinamide, topiramate, topiramate ext-rel	budesonide ext-rel tablet	balsalazide, mesalamine delayed-rel, mesalamine ext-rel, sulfasalazine, sulfasalazine delayed-rel
BASAGLAR	INSULIN GLARGINE-YFGN, LANTUS	bupropion ext-rel tablet 450 mg	bupropion, bupropion ext-rel (except bupropion ext-rel tablet 450 mg)
BENICAR, BENICAR HCT	candesartan, candesartan-hydrochlorothiazide, irbesartan, irbesartan-hydrochlorothiazide, losartan, losartan-hydrochlorothiazide, olmesartan, olmesartan-hydrochlorothiazide, telmisartan, telmisartan-hydrochlorothiazide, valsartan, valsartan-hydrochlorothiazide	butalbital-acetaminophen capsule, butalbital-acetaminophen tablet 25-325 mg, butalbital-acetaminophen tablet 50-300 mg, BUTALBITAL-ACETAMINOPHEN (NDC 69499034230 only)	diclofenac sodium, ibuprofen, naproxen (except naproxen CR or naproxen suspension)
BENSAL HP	desonide (except desonide gel), hydrocortisone	butalbital-acetaminophen-caffeine capsule	diclofenac sodium, ibuprofen, naproxen (except naproxen CR or naproxen suspension)
benzonatate (NDCs 69336012615, 69499032915 only)	benzonatate (except NDCs 69336012615, 69499032915)	BUTRANS	buprenorphine transdermal, BELBUCA
BEPREVE	azelastine, bepotastine, cromolyn sodium, loteprednol,	BYDUREON BCISE	liraglutide, MOUNJARO,

DRUG NAME(S)	PREFERRED OPTION(S)	DRUG NAME(S)	PREFERRED OPTION(S)
BYETTA	OZEMPIC, RYBELSUS, TRULICITY <i>liraglutide</i> , MOUNJARO, OZEMPIC, RYBELSUS, TRULICITY	<i>chlorzoxazone 250 mg</i> , <i>chlorzoxazone 375 mg</i> , <i>chlorzoxazone 500 mg</i> (NDC 73007001303 only), <i>chlorzoxazone 750 mg</i>	<i>cyclobenzaprine</i> (except <i>cyclobenzaprine tablet 7.5 mg</i>)
BYSTOLIC	<i>acebutolol</i> , <i>atenolol</i> , <i>carvedilol</i> , <i>carvedilol phosphate ext-rel</i> , <i>metoprolol succinate ext-rel</i> , <i>metoprolol tartrate</i> , <i>nadolol</i> , <i>nebivolol</i> , <i>pindolol</i> , <i>propranolol</i> , <i>propranolol ext-rel</i>	CIALIS CICATRACE CILOXAN	<i>avanafil</i> , <i>sildenafil</i> , <i>tadalafil</i> Talk to your doctor <i>ciprofloxacin</i> , <i>erythromycin</i> , <i>gentamicin</i> , <i>levofloxacin</i> , <i>moxifloxacin</i> , <i>ofloxacin</i> , <i>sulfacetamide</i> , <i>tobramycin</i> , BESIVANCE
<i>calcipotriene cream</i> , CALCIPOTRIENE FOAM	<i>calcipotriene ointment</i> , <i>calcipotriene solution</i> , <i>tazarotene</i> , VTAMA, ZORYVE CREAM, ZORYVE FOAM	CIPRO HC OTIC	<i>ciprofloxacin-dexamethasone</i> , <i>ofloxacin otic</i>
<i>calcipotriene-betamethasone</i>	<i>calcipotriene ointment</i> or <i>calcipotriene solution WITH</i> <i>desoximetasone</i> (except <i>desoximetasone ointment</i> <i>0.05%</i>), <i>fluocinonide</i> (except <i>fluocinonide cream 0.1%</i>) or BRYHALI; <i>tazarotene</i> , ENSTILAR, VTAMA, ZORYVE CREAM, ZORYVE FOAM	<i>ciprofloxacin-fluocinolone</i>	<i>ciprofloxacin-dexamethasone</i> , <i>ofloxacin otic</i>
<i>calcitriol ointment</i>	<i>calcipotriene ointment</i> , <i>calcipotriene solution</i> , <i>tazarotene</i> , VTAMA, ZORYVE CREAM, ZORYVE FOAM	CITRANATAL CLIMARA CLIMARA PRO <i>clindamycin gel</i> (NDC 68682046275 only)	<i>generic prenatal vitamins</i> <i>estradiol</i> COMBIPATCH <i>adapalene</i> (except <i>adapalene</i> <i>pad</i>), <i>benzoyl peroxide</i> , <i>clindamycin gel</i> (except NDC 68682046275), <i>clindamycin</i> <i>solution</i> , <i>clindamycin-benzoyl</i> <i>peroxide</i> , <i>dapsone</i> , <i>erythromycin</i> <i>solution</i> , <i>erythromycin-benzoyl</i> <i>peroxide</i> , <i>tazarotene</i> , <i>tretinoin</i> , AKLIEF, EPIDUO, TWYNEO, WINLEVI
CAMBIA	<i>diclofenac sodium</i> , <i>ibuprofen</i> , <i>naproxen</i> (except <i>naproxen CR</i> or <i>naproxen suspension</i>)		
<i>Capsinac</i>	<i>diclofenac sodium</i> , <i>diclofenac</i> <i>sodium gel 1%</i> , <i>diclofenac sodium</i> <i>solution 1.5%</i> , <i>ibuprofen</i> , <i>meloxicam tablet</i> , <i>naproxen</i> (except <i>naproxen CR</i> or <i>naproxen</i> <i>suspension</i>)	<i>clobetasol emollient foam</i>	<i>clobetasol cream</i> , <i>clobetasol</i> <i>foam</i> (except <i>clobetasol emollient</i> <i>foam</i>), <i>clobetasol gel</i> , <i>clobetasol</i> <i>lotion</i> , <i>clobetasol ointment</i> , <i>halobetasol cream</i> , <i>halobetasol</i> <i>ointment</i>
CARAFATE	<i>sucralfate tablet</i>		
<i>carbinoxamine tablet 6 mg</i> (NDC 73684011060 only), CARBINOXAMINE TABLET 6 MG	<i>levocetirizine</i>	<i>clobetasol spray</i>	<i>clobetasol cream</i> , <i>clobetasol</i> <i>foam</i> (except <i>clobetasol emollient</i> <i>foam</i>), <i>clobetasol gel</i> , <i>clobetasol</i> <i>lotion</i> , <i>clobetasol ointment</i> , <i>halobetasol cream</i> , <i>halobetasol</i> <i>ointment</i>
CARDIZEM, CARDIZEM CD, CARDIZEM LA	<i>diltiazem ext-rel</i> (except generics for CARDIZEM LA), <i>verapamil ext-</i> <i>rel</i>		
<i>carisoprodol 250 mg</i>	<i>cyclobenzaprine</i> (except <i>cyclobenzaprine tablet 7.5 mg</i>)	CLOBEX SPRAY	<i>clobetasol cream</i> , <i>clobetasol</i> <i>foam</i> (except <i>clobetasol emollient</i> <i>foam</i>), <i>clobetasol gel</i> , <i>clobetasol</i> <i>lotion</i> , <i>clobetasol ointment</i> , <i>halobetasol cream</i> , <i>halobetasol</i> <i>ointment</i>
CARNITOR, CARNITOR SF	<i>levocarnitine</i>		
CELEBREX	<i>celecoxib</i> , <i>diclofenac sodium</i> , <i>ibuprofen</i> , <i>meloxicam tablet</i> , <i>naproxen</i> (except <i>naproxen CR</i> or <i>naproxen suspension</i>)	<i>clocortolone cream</i>	<i>hydrocortisone butyrate cream</i> , <i>hydrocortisone butyrate ointment</i> , <i>hydrocortisone butyrate solution</i> , <i>mometasone</i> , <i>triamcinolone</i> <i>cream</i> , <i>triamcinolone lotion</i> , <i>triamcinolone ointment</i> (except <i>triamcinolone ointment</i>)
<i>chlordiazepoxide-clidinium</i> (NDCs 11534019701, 42494040901, 51293069601, 51293069610, 67877073101, 70700018501 only)	<i>dicyclomine</i>		

DRUG NAME(S)	PREFERRED OPTION(S)	DRUG NAME(S)	PREFERRED OPTION(S)
COLAZAL	0.05%) balsalazide, mesalamine delayed-rel, mesalamine ext-rel, sulfasalazine, sulfasalazine delayed-rel	DALIRESP DARAPRIM DAYTRANA	roflumilast pyrimethamine amphetamine-dextroamphetamine mixed salts ext-rel, dexamethylphenidate ext-rel, lisdexamfetamine, methylphenidate ext-rel, AZSTARYS
COLCRYS	colchicine		
COMBIGAN	brimonidine-timolol		
CONCERTA	amphetamine-dextroamphetamine mixed salts ext-rel, dexamethylphenidate ext-rel, lisdexamfetamine, methylphenidate ext-rel, AZSTARYS	DAYVIGO	doxepin, eszopiclone, ramelteon, zolpidem, zolpidem ext-rel, BELSOMRA, QUVIVIQ
CONTOUR NEXT STRIPS AND KITS	ACCU-CHEK AVIVA PLUS STRIPS AND KITS, ACCU-CHEK GUIDE STRIPS AND KITS, ACCU-CHEK SMARTVIEW STRIPS AND KITS, TRUE METRIX STRIPS AND KITS	DEPAKOTE, DEPAKOTE ER, DEPAKOTE SPRINKLE	balsalazide, mesalamine delayed-rel, mesalamine ext-rel, sulfasalazine, sulfasalazine delayed-rel carbamazepine, carbamazepine ext-rel, clonazepam, divalproex sodium, divalproex sodium ext-rel, eslicarbazepine, ethosuximide, gabapentin, lacosamide, lamotrigine, lamotrigine ext-rel, levetiracetam, levetiracetam ext-rel, oxcarbazepine, phenobarbital, phenytoin, phenytoin sodium extended, pregabalin, primidone, tiagabine, topiramate, topiramate ext-rel, valproic acid, zonisamide, BRIVIACT, OXTELLAR XR, XCOPRI
CONTOUR STRIPS AND KITS	ACCU-CHEK AVIVA PLUS STRIPS AND KITS, ACCU-CHEK GUIDE STRIPS AND KITS, ACCU-CHEK SMARTVIEW STRIPS AND KITS, TRUE METRIX STRIPS AND KITS		desonide gel desoximetasone ointment 0.05%
CONTRAVE	orlistat, QSYMIA, SAXENDA, WEGOVY		hydrocortisone butyrate cream, hydrocortisone butyrate ointment, hydrocortisone butyrate solution, mometasone, triamcinolone cream, triamcinolone lotion, triamcinolone ointment (except triamcinolone ointment 0.05%)
CORDRAN TAPE	clobetasol cream, clobetasol foam (except clobetasol emollient foam), clobetasol gel, clobetasol lotion, clobetasol ointment, halobetasol cream, halobetasol ointment		
COREG CR	acebutolol, atenolol, carvedilol, carvedilol phosphate ext-rel, metoprolol succinate ext-rel, metoprolol tartrate, nadolol, nebivolol, pindolol, propranolol, propranolol ext-rel		
COZAAR	candesartan, irbesartan, losartan, olmesartan, telmisartan, valsartan	DETROL LA	darifenacin ext-rel, fesoterodine ext-rel, oxybutynin ext-rel, solifenacin, tolterodine, tolterodine ext-rel, trospium, trospium ext-rel, GEMTESA
CRESEMBA	itraconazole		
CRESTOR	atorvastatin, ezetimibe-simvastatin, fluvastatin, lovastatin, pitavastatin, pravastatin, rosuvastatin, simvastatin	dexchlorpheniramine Dexifol	levocetirizine generic multivitamins
cyclobenzaprine ext-rel capsule, cyclobenzaprine tablet 7.5 mg	cyclobenzaprine (except cyclobenzaprine tablet 7.5 mg)	DEXILANT	esomeprazole delayed-rel, lansoprazole delayed-rel capsule, omeprazole delayed-rel, pantoprazole delayed-rel tablet
CYMBALTA	desvenlafaxine ext-rel, duloxetine, venlafaxine, venlafaxine ext-rel capsule		
CYTOMEL	levothyroxine, liothyronine, SYNTHROID	dexlansoprazole delayed-rel	esomeprazole delayed-rel, lansoprazole delayed-rel capsule, omeprazole delayed-rel,

DRUG NAME(S)	PREFERRED OPTION(S)	DRUG NAME(S)	PREFERRED OPTION(S)
<i>diclofenac potassium capsule 25 mg, diclofenac potassium tablet 25 mg</i>	<i>pantoprazole delayed-rel tablet</i> <i>diclofenac sodium, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)</i>		<i>extended, pregabalin, primidone, tiagabine, topiramate, topiramate ext-rel, valproic acid, zonisamide, BRIVIACT, OXTELLAR XR, XCOPRI</i>
<i>diclofenac potassium powder</i>	<i>diclofenac sodium, ibuprofen, naproxen (except naproxen CR or naproxen suspension)</i>	<i>diltiazem ext-rel (generics for CARDIZEM LA only)</i>	<i>diltiazem ext-rel (except generics for CARDIZEM LA), verapamil ext-rel</i>
<i>diclofenac sodium solution 2%</i>	<i>diclofenac sodium, diclofenac sodium gel 1%, diclofenac sodium solution 1.5%, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)</i>	DIOVAN, DIOVAN HCT	<i>candesartan, candesartan-hydrochlorothiazide, irbesartan, irbesartan-hydrochlorothiazide, losartan, losartan-hydrochlorothiazide, olmesartan, olmesartan-hydrochlorothiazide, telmisartan, telmisartan-hydrochlorothiazide, valsartan, valsartan-hydrochlorothiazide</i>
<i>Diclofex DC</i>	<i>diclofenac sodium, diclofenac sodium gel 1%, diclofenac sodium solution 1.5%, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)</i>	<i>Diphen Elixir</i> DIVIGEL	<i>levocetirizine</i> <i>estradiol</i>
<i>Dicloisaicin</i>	<i>diclofenac sodium, diclofenac sodium gel 1%, diclofenac sodium solution 1.5%, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)</i>	DORYX MPC <i>doxepin cream</i>	<i>doxycycline hyclate 20 mg, doxycycline hyclate capsule, minocycline, tetracycline</i>
DIFFERIN LOTION	<i>adapalene (except adapalene pad), benzoyl peroxide, clindamycin gel (except NDC 68682046275), clindamycin solution, clindamycin-benzoyl peroxide, dapsone, erythromycin solution, erythromycin-benzoyl peroxide, tazarotene, tretinoin, AKLIEF, EPIDUO, TWYNEO, WINLEVI</i>	<i>doxycycline hyclate delayed-rel tablet</i> <i>doxycycline hyclate tablet 50 mg, doxycycline hyclate tablet 75 mg, doxycycline hyclate tablet 150 mg</i> <i>doxycycline monohydrate capsule 75 mg, doxycycline monohydrate capsule 150 mg</i> <i>doxycycline monohydrate delayed-rel capsule</i>	<i>doxycycline hyclate 20 mg, doxycycline hyclate capsule, minocycline, tetracycline</i> <i>doxycycline hyclate 20 mg, doxycycline hyclate capsule, minocycline, tetracycline</i> <i>doxycycline hyclate 20 mg, doxycycline hyclate capsule, minocycline, tetracycline</i>
<i>diflorasone cream, diflorasone ointment</i>	<i>desoximetasone (except desoximetasone ointment 0.05%), fluocinonide (except fluocinonide cream 0.1%), BRYHALI</i>	DULERA	ORACEA
<i>dihydroergotamine spray</i>	<i>eletriptan, naratriptan, rizatriptan, sumatriptan, zolmitriptan, NURTEC ODT, TOSYMRA, UBRELVY, ZEMBRACE SYMTOUCH</i>	DUOBRII	<i>budesonide-formoterol, fluticasone-salmeterol (except certain NDCs), Breyna, Wixela Inhub, BREO ELLIPTA (except certain NDCs)</i>
DILANTIN	<i>carbamazepine, carbamazepine ext-rel, divalproex sodium, divalproex sodium ext-rel, eslicarbazepine, gabapentin, lacosamide, lamotrigine, lamotrigine ext-rel, levetiracetam, levetiracetam ext-rel, oxcarbazepine, phenobarbital, phenytoin, phenytoin sodium</i>	DYANAVEL XR	<i>tazarotene WITH desoximetasone (except desoximetasone ointment 0.05%), fluocinonide (except fluocinonide cream 0.1%) or BRYHALI; calcipotriene ointment, calcipotriene solution, ENSTILAR, VTAMA, ZORYVE CREAM, ZORYVE FOAM</i> <i>amphetamine-dextroamphetamine mixed salts</i>

DRUG NAME(S)	PREFERRED OPTION(S)	DRUG NAME(S)	PREFERRED OPTION(S)
	<i>ext-rel, dexamethylphenidate ext-rel, lisdexamfetamine, methylphenidate ext-rel, AZSTARYS</i>	ESTRING	<i>estradiol vaginal cream, IMVEXXY, VAGIFEM</i>
DYMISTA	<i>azelastine-fluticasone, flunisolide, fluticasone, mometasone, XHANCE</i>	EVAMIST	<i>estradiol</i>
DYRENIUM	<i>amiloride, triamterene</i>	EVEKEO	<i>amphetamine-dextroamphetamine mixed salts, methylphenidate</i>
EDARBI, EDARBYCLOR	<i>candesartan, candesartan-hydrochlorothiazide, irbesartan, irbesartan-hydrochlorothiazide, losartan, losartan-hydrochlorothiazide, olmesartan, olmesartan-hydrochlorothiazide, telmisartan, telmisartan-hydrochlorothiazide, valsartan, valsartan-hydrochlorothiazide</i>	EVERSENSE CONTINUOUS GLUCOSE MONITORING SYSTEM	DEXCOM CONTINUOUS GLUCOSE MONITORING SYSTEM
EDLUAR	<i>doxepin, eszopiclone, ramelteon, zolpidem, zolpidem ext-rel, BELSOMRA, QUVIVIQ</i>	EXFORGE	<i>amlodipine-olmesartan, amlodipine-telmisartan, amlodipine-valsartan</i>
E.E.S. GRANULES	<i>erythromycins</i>	EXFORGE HCT	<i>amlodipine-valsartan-hydrochlorothiazide, olmesartan-amlodipine-hydrochlorothiazide</i>
EFFEXOR XR	<i>desvenlafaxine ext-rel, duloxetine, venlafaxine, venlafaxine ext-rel capsule</i>	FABIOR	<i>adapalene (except adapalene pad), benzoyl peroxide, clindamycin gel (except NDC 68682046275), clindamycin solution, clindamycin-benzoyl peroxide, dapsone, erythromycin solution, erythromycin-benzoyl peroxide, tazarotene, tretinoin, AKLIEF, EPIDUO, TWYNEO, WINLEVI</i>
ELESTRIN	<i>estradiol</i>	FANAPT	<i>aripiprazole, clozapine, lurasidone, olanzapine, quetiapine, quetiapine ext-rel, risperidone, ziprasidone, VRAYLAR</i>
ELIDEL	<i>pimecrolimus, tacrolimus, EUCRISA, OPZELURA, VTAMA, ZORYVE CREAM</i>	FEMRING	<i>estradiol vaginal cream, IMVEXXY, VAGIFEM</i>
ELMIRON	Talk to your doctor		
ENDOMETRIN	CRINONE		
ENLITE CONTINUOUS GLUCOSE MONITORING SYSTEM	DEXCOM CONTINUOUS GLUCOSE MONITORING SYSTEM	<i>fenofibrate capsule 30 mg, 50 mg, 90 mg, 130 mg; fenofibrate tablet 40 mg, 120 mg</i>	<i>fenofibrate (except fenofibrate capsule 30 mg, 50 mg, 90 mg, 130 mg; fenofibrate tablet 40 mg, 120 mg), fenofibric acid delayed-rel</i>
ENTERAGAM	<i>alosetron, VIBERZI, XIFAXAN 550 MG</i>		
EPANED	<i>enalapril, fosinopril, lisinopril, quinapril, ramipril</i>	<i>fenoprofen</i>	<i>diclofenac sodium, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)</i>
EPICERAM	<i>desonide (except desonide gel), hydrocortisone</i>	FERIVA 21/7	<i>generic multivitamins</i>
<i>epinephrine (NDCs 00093-XXXX-XX, 49502-XXXX-XX only)</i>	<i>epinephrine (except NDCs 00093-XXXX-XX, 49502-XXXX-XX), AUVI-Q</i>	<i>Fexmid</i>	<i>cyclobenzaprine (except cyclobenzaprine tablet 7.5 mg)</i>
EPIPEN, EPIPEN JR	<i>epinephrine (except NDCs 00093-XXXX-XX, 49502-XXXX-XX), AUVI-Q</i>	FIORICET CAPSULE	<i>diclofenac sodium, ibuprofen, naproxen (except naproxen CR or naproxen suspension)</i>
<i>ergotamine-caffeine</i>	<i>eletriptan, naratriptan, rizatriptan, sumatriptan, zolmitriptan, NURTEC ODT, TOSYMRA, UBRELVY, ZEMBRACE SYMTOUCH</i>	FLAREX	<i>dexamethasone, difluprednate, loteprednol, prednisolone acetate 1%</i>
ERYPED	<i>erythromycins</i>	FLORIVA, FLORIVA PLUS	<i>generic multivitamins</i>
<i>estradiol vaginal tablet</i>	<i>estradiol vaginal cream, IMVEXXY, VAGIFEM</i>	FLOVENT HFA	ASMANEX HFA, PULMICORT FLEXHALER

DRUG NAME(S)	PREFERRED OPTION(S)	DRUG NAME(S)	PREFERRED OPTION(S)
<i>flucytosine capsule 500 mg</i>	<i>fluconazole</i>		STRIPS AND KITS, ACCU-CHEK SMARTVIEW STRIPS AND KITS, TRUE METRIX STRIPS AND KITS
<i>fluocinonide cream 0.1%</i>	<i>clobetasol cream, clobetasol foam (except clobetasol emollient foam), clobetasol gel, clobetasol lotion, clobetasol ointment, halobetasol cream, halobetasol ointment</i>	GLUMETZA	<i>metformin, metformin ext-rel (except generics for FORTAMET and GLUMETZA)</i>
<i>fluorouracil cream 0.5%</i>	<i>fluorouracil cream 5%, fluorouracil solution, imiquimod</i>	GLYCOPYRROLATE TABLET 1.5 MG	<i>dicyclomine</i>
<i>fluoxetine tablet (generics for SARAFEM only)</i>	<i>fluoxetine (except fluoxetine tablet 60 mg, fluoxetine tablet [generics for SARAFEM]), paroxetine HCl ext-rel (except NDC 60505367503), sertraline</i>	GOLYTELY	<i>peg 3350-electrolytes (except generics for MOVIPREP), sodium sulfate-potassium sulfate-magnesium sulfate, CLENPIQ</i>
<i>fluoxetine tablet 60 mg, FLUOXETINE 60 MG</i>	<i>citalopram, escitalopram, fluoxetine (except fluoxetine tablet 60 mg, fluoxetine tablet [generics for SARAFEM]), paroxetine HCl, paroxetine HCl ext-rel (except NDC 60505367503), sertraline, vilazodone, AUVELITY, TRINTELLIX</i>	GUARDIAN CONNECT CONTINUOUS GLUCOSE MONITORING SYSTEM	DEXCOM CONTINUOUS GLUCOSE MONITORING SYSTEM
<i>flurandrenolide cream, flurandrenolide lotion</i>	<i>desonide (except desonide gel), hydrocortisone</i>	GUARDIAN REAL-TIME CONTINUOUS GLUCOSE MONITORING SYSTEM	DEXCOM CONTINUOUS GLUCOSE MONITORING SYSTEM
<i>flurandrenolide ointment</i>	<i>hydrocortisone butyrate cream, hydrocortisone butyrate ointment, hydrocortisone butyrate solution, mometasone, triamcinolone cream, triamcinolone lotion, triamcinolone ointment (except triamcinolone ointment 0.05%)</i>	<i>halcinonide cream</i>	<i>desoximetasone (except desoximetasone ointment 0.05%), fluocinonide (except fluocinonide cream 0.1%), BRYHALI</i>
<i>FML FORTE, FML LIQUIFILM</i>	<i>dexamethasone, difluprednate, loteprednol, prednisolone acetate 1%</i>	HALOG	<i>desoximetasone (except desoximetasone ointment 0.05%), fluocinonide (except fluocinonide cream 0.1%), BRYHALI</i>
<i>FOCALIN XR</i>	<i>amphetamine-dextroamphetamine mixed salts ext-rel, dexmethylphenidate ext-rel, lisdexamfetamine, methylphenidate ext-rel, AZSTARYS</i>	HEPARIN SODIUM IN 5% DEXTROSE	<i>enoxaparin, fondaparinux</i>
<i>FORTAMET</i>	<i>metformin, metformin ext-rel (except generics for FORTAMET and GLUMETZA)</i>	HORIZANT	<i>gabapentin, pregabalin, pregabalin ext-rel, GRALISE</i>
<i>FOSRENOL</i>	<i>calcium acetate, sevelamer carbonate, AURYXIA</i>	HUMALOG	FIASP, NOVOLOG
<i>FOSTEUM, FOSTEUM PLUS</i>	<i>alendronate, ibandronate, risedronate</i>	HUMALOG MIX 50/50	NOVOLOG MIX 70/30
<i>FREESTYLE LIBRE CONTINUOUS GLUCOSE MONITORING SYSTEM</i>	DEXCOM CONTINUOUS GLUCOSE MONITORING SYSTEM	HUMALOG MIX 75/25	NOVOLOG MIX 70/30
<i>FREESTYLE STRIPS AND KITS</i>	ACCU-CHEK AVIVA PLUS STRIPS AND KITS, ACCU-CHEK GUIDE	HUMULIN 70/30	NOVOLIN 70/30
		HUMULIN N	NOVOLIN N
		HUMULIN R	NOVOLIN R
		<i>hydrocortisone butyrate lotion</i>	<i>hydrocortisone butyrate cream, hydrocortisone butyrate ointment, hydrocortisone butyrate solution, mometasone, triamcinolone cream, triamcinolone lotion, triamcinolone ointment (except triamcinolone ointment 0.05%)</i>
		<i>HylaVite</i>	<i>generic multivitamins</i>
		<i>hyoscyamine sulfate ext-rel</i>	<i>dicyclomine</i>
		HYSINGLA ER	<i>fentanyl transdermal, hydrocodone ext-rel,</i>

DRUG NAME(S)	PREFERRED OPTION(S)	DRUG NAME(S)	PREFERRED OPTION(S)
HYZAAR	hydromorphone ext-rel, methadone, morphine ext-rel candesartan-hydrochlorothiazide, irbesartan-hydrochlorothiazide, losartan-hydrochlorothiazide, olmesartan-hydrochlorothiazide, telmisartan-hydrochlorothiazide, valsartan-hydrochlorothiazide	INVOKANA isosorbide dinitrate 40 mg isotretinoin capsule 25 mg, 35 mg	FARXIGA, JARDIANCE isosorbide dinitrate (except isosorbide dinitrate 40 mg), isosorbide mononitrate isotretinoin capsule 10 mg, 20 mg, 30 mg, 40 mg
Iclofenac CP	diclofenac sodium, diclofenac sodium gel 1%, diclofenac sodium solution 1.5%, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)	JANUMET, JANUMET XR JANUVIA JATENZO	saxagliptin-metformin ext-rel, ZITUVIMET, ZITUVIMET XR saxagliptin, ZITUVIO testosterone gel (except authorized generics for TESTIM and VOGELXO), testosterone solution, NATESTO
icosapent ethyl	omega-3 acid ethyl esters, VASCEPA	JENTADUETO, JENTADUETO XR	saxagliptin-metformin ext-rel, ZITUVIMET, ZITUVIMET XR
INCRUSE ELLIPTA	SPIRIVA	JORNAY PM	amphetamine- dextroamphetamine mixed salts ext-rel, dexmethylphenidate ext- rel, lisdexamfetamine, methylphenidate ext-rel, AZSTARYS
INDERAL LA, INDERAL XL	acebutolol, atenolol, carvedilol, carvedilol phosphate ext-rel, metoprolol succinate ext-rel, metoprolol tartrate, nadolol, nebivolol, pindolol, propranolol, propranolol ext-rel	KAMDOY Kapzin DC	desonide (except desonide gel), hydrocortisone diclofenac sodium, diclofenac sodium gel 1%, diclofenac sodium solution 1.5%, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)
Indocin, INDOCIN	diclofenac sodium, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)	KEPPRA, KEPPRA XR	carbamazepine, carbamazepine ext-rel, divalproex sodium, divalproex sodium ext-rel, eslicarbazepine, gabapentin, lacosamide, lamotrigine, lamotrigine ext-rel, levetiracetam, levetiracetam ext-rel, oxcarbazepine, phenobarbital, phenytoin, phenytoin sodium extended, pregabalin, primidone, tiagabine, topiramate, topiramate ext-rel, valproic acid, zonisamide, BRIVIACT, OXTELLAR XR, XCOPRI
Inflammacin	diclofenac sodium, diclofenac sodium gel 1%, diclofenac sodium solution 1.5%, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)		talk to your doctor ketoconazole shampoo 2%, selenium sulfide lotion 2.5%, ZORYVE FOAM ketoconazole shampoo 2%, selenium sulfide lotion 2.5%, ZORYVE FOAM
INNOPRAN XL	acebutolol, atenolol, carvedilol, carvedilol phosphate ext-rel, metoprolol succinate ext-rel, metoprolol tartrate, nadolol, nebivolol, pindolol, propranolol, propranolol ext-rel		
INTRAROSA	estradiol vaginal cream, IMVEXXY, VAGIFEM		
INTUNIV	amphetamine- dextroamphetamine mixed salts ext-rel, atomoxetine, dexmethylphenidate ext-rel, guanfacine ext-rel, lisdexamfetamine, methylphenidate ext-rel, AZSTARYS, QELBREE	KETO-DIASTIX ketoconazole foam 2%	
INVELTYS	dexamethasone, difluprednate, loteprednol, prednisolone acetate 1%	Ketodan ketoprofen capsule 25 mg	
INVOKAMET, INVOKAMET XR	SYNJARDY, SYNJARDY XR, XIGDUO XR		diclofenac sodium, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)

DRUG NAME(S)	PREFERRED OPTION(S)	DRUG NAME(S)	PREFERRED OPTION(S)
<i>ketoprofen ext-rel capsule</i>	<i>diclofenac sodium, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)</i>	<i>levorphanol</i>	<i>fentanyl transdermal, hydrocodone ext-rel, hydromorphone ext-rel, methadone, morphine ext-rel</i>
KETOSTIX <i>lactulose pak (NDCs 69067001015, 69067002015 only)</i>	Talk to your doctor <i>lactulose solution</i>	LEXAPRO	<i>citalopram, escitalopram, fluoxetine (except fluoxetine tablet 60 mg, fluoxetine tablet [generics for SARAFEM]), paroxetine HCl, paroxetine HCl ext-rel (except NDC 60505367503), sertraline, vilazodone, AUVELITY, TRINTELLIX</i>
LAMICTAL, LAMICTAL ODT	<i>carbamazepine, carbamazepine ext-rel, clobazam, clonazepam, divalproex sodium, divalproex sodium ext-rel, eslicarbazepine, gabapentin, lacosamide, lamotrigine, lamotrigine ext-rel, levetiracetam, levetiracetam ext-rel, oxcarbazepine, phenobarbital, phenytoin, phenytoin sodium extended, pregabalin, primidone, rufinamide, tiagabine, topiramate, topiramate ext-rel, valproic acid, zonisamide, BRIVIACT, OXTELLAR XR, XCOPRI</i>	LIALDA	<i>balsalazide, mesalamine delayed-rel, mesalamine ext-rel, sulfasalazine, sulfasalazine delayed-rel</i>
LAMICTAL XR	<i>carbamazepine, carbamazepine ext-rel, divalproex sodium, divalproex sodium ext-rel, eslicarbazepine, gabapentin, lacosamide, lamotrigine, lamotrigine ext-rel, levetiracetam, levetiracetam ext-rel, oxcarbazepine, phenobarbital, phenytoin, phenytoin sodium extended, pregabalin, primidone, tiagabine, topiramate, topiramate ext-rel, valproic acid, zonisamide, BRIVIACT, OXTELLAR XR, XCOPRI</i>	LIBRAX LIPITOR	<i>dicyclomine</i> <i>atorvastatin, ezetimibe-simvastatin, fluvastatin, lovastatin, pitavastatin, pravastatin, rosuvastatin, simvastatin</i>
LANOXIN TABLET (125 MCG and 250 MCG only)	<i>digoxin</i>	LITHOSTAT LIVALO	Talk to your doctor <i>atorvastatin, ezetimibe-simvastatin, fluvastatin, lovastatin, pitavastatin, pravastatin, rosuvastatin, simvastatin</i>
<i>lansoprazole delayed-rel orally disintegrating tablet</i>	<i>esomeprazole delayed-rel, lansoprazole delayed-rel capsule, omeprazole delayed-rel, pantoprazole delayed-rel tablet</i>	<i>Lofena</i>	<i>diclofenac sodium, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)</i>
<i>lanthanum carbonate</i>	<i>calcium acetate, sevelamer carbonate, AURYXIA</i>	LOKELMA <i>Lorzone</i>	VELTASSA <i>cyclobenzaprine (except cyclobenzaprine tablet 7.5 mg)</i>
LATUDA	<i>aripiprazole, clozapine, lurasidone, olanzapine, quetiapine, quetiapine ext-rel, risperidone, ziprasidone, VRAYLAR</i>	LOTEMAX, LOTE MAX SM	<i>dexamethasone, difluprednate, loteprednol, prednisolone acetate 1%</i>
LESCOL XL	<i>atorvastatin, ezetimibe-simvastatin, fluvastatin, lovastatin, pitavastatin, pravastatin, rosuvastatin, simvastatin</i>	LOVAZA	<i>omega-3 acid ethyl esters, VASCEPA</i>
LEVEMIR	INSULIN GLARGINE-YFGN, LANTUS	<i>luliconazole</i>	<i>ciclopirox, clotrimazole, econazole, ketoconazole cream 2%, naftifine</i>
		LUMIGAN	<i>bimatoprost, latanoprost, travoprost</i>
		LUNESTA	<i>doxepin, eszopiclone, ramelteon, zolpidem, zolpidem ext-rel, BELSOMRA, QUVIVIQ</i>
		LYRICA	<i>duloxetine, pregabalin, pregabalin ext-rel</i>
		MACRODANTIN	<i>nitrofurantoin (except NDC 16571074024)</i>
		<i>Matzim LA</i>	<i>diltiazem ext-rel (except generics for CARDIZEM LA), verapamil ext-</i>

DRUG NAME(S)	PREFERRED OPTION(S)	DRUG NAME(S)	PREFERRED OPTION(S)
MAXALT, MAXALT-MLT	<i>rel</i> <i>eletriptan, naratriptan, rizatriptan, sumatriptan, zolmitriptan, NURTEC ODT, TOSYMRA, UBRELVY, ZEMBRACE SYMTOUCH</i>	MITIGARE Mondoxyne NL capsule 75 mg	<i>colchicine</i> <i>doxycycline hyclate 20 mg, doxycycline hyclate capsule, minocycline, tetracycline</i>
MAXIDEX	<i>dexamethasone, difluprednate, loteprednol, prednisolone acetate 1%</i>	MOVIPREP MultiPro	<i>peg 3350-electrolytes (except generics for MOVIPREP), sodium sulfate-potassium sulfate-magnesium sulfate, CLENPIQ generic multivitamins</i>
<i>mefenamic acid (NDC 69336012830 only)</i>	<i>diclofenac sodium, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)</i>	<i>mupirocin cream</i> MYDAYIS	<i>gentamicin, mupirocin ointment</i> <i>amphetamine-dextroamphetamine mixed salts ext-rel, dexmethylphenidate ext-rel, lisdexamfetamine, methylphenidate ext-rel, AZSTARYS</i>
<i>meloxicam capsule</i>	<i>diclofenac sodium, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)</i>	MYRBETRIQ	<i>darifenacin ext-rel, fesoterodine ext-rel, oxybutynin ext-rel, solifenacin, tolterodine, tolterodine ext-rel, trospium, trospium ext-rel, GEMTESA</i>
MENEST	<i>estradiol</i>	MYTESI	<i>diphenoxylate-atropine, loperamide</i>
MENOSTAR	<i>estradiol</i>	NAPRELAN	<i>diclofenac sodium, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)</i>
<i>metaxalone 400 mg</i>	<i>cyclobenzaprine (except cyclobenzaprine tablet 7.5 mg)</i>	<i>naproxen CR</i>	<i>diclofenac sodium, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)</i>
<i>metformin ext-rel (generics for FORTAMET and GLUMETZA only)</i>	<i>metformin, metformin ext-rel (except generics for FORTAMET and GLUMETZA)</i>	<i>naproxen suspension</i>	<i>diclofenac sodium, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)</i>
<i>methocarbamol 500 mg (NDC 69036091010 only), methocarbamol 750 mg (NDCs 69036093090, 70868090190 only)</i>	<i>cyclobenzaprine (except cyclobenzaprine tablet 7.5 mg)</i>	<i>naproxen-esomeprazole</i>	<i>diclofenac sodium, ibuprofen, meloxicam tablet or naproxen (except naproxen CR or naproxen suspension) WITH esomeprazole delayed-rel, lansoprazole delayed-rel capsule, omeprazole delayed-rel, or pantoprazole delayed-rel tablet</i>
MIACALCIN INJECTION	<i>alendronate, calcitonin-salmon, ibandronate, risedronate, teriparatide, PROLIA, TYMLOS</i>	NEO-SYNALAR	<i>desonide (except desonide gel) or hydrocortisone WITH gentamicin</i>
MICARDIS, MICARDIS HCT	<i>candesartan, candesartan-hydrochlorothiazide, irbesartan, irbesartan-hydrochlorothiazide, losartan, losartan-hydrochlorothiazide, olmesartan, olmesartan-hydrochlorothiazide, telmisartan, telmisartan-hydrochlorothiazide, valsartan, valsartan-hydrochlorothiazide</i>	NEVANAC	<i>bromfenac, diclofenac, ketorolac, ILEVRO</i>
<i>Migergot</i>	<i>eletriptan, naratriptan, rizatriptan, sumatriptan, zolmitriptan, NURTEC ODT, TOSYMRA, UBRELVY, ZEMBRACE SYMTOUCH</i>	NEXIUM	<i>esomeprazole delayed-rel, lansoprazole delayed-rel capsule, omeprazole delayed-rel, pantoprazole delayed-rel tablet</i>
MINIVELLE	<i>estradiol</i>	NEXTERONE	<i>amiodarone</i>
<i>minocycline ext-rel</i>	<i>doxycycline hyclate 20 mg, doxycycline hyclate capsule, minocycline, tetracycline</i>	<i>niacin tablet 500 mg</i>	<i>niacin ext-rel</i>
MIRVASO	<i>azelaic acid gel, brimonidine gel, ivermectin cream, metronidazole, FINACEA FOAM</i>		

DRUG NAME(S)	PREFERRED OPTION(S)	DRUG NAME(S)	PREFERRED OPTION(S)
Niacor	niacin ext-rel	KITS, ONETOUCH VERIO STRIPS AND KITS	AND KITS, ACCU-CHEK GUIDE STRIPS AND KITS, ACCU-CHEK SMARTVIEW STRIPS AND KITS, TRUE METRIX STRIPS AND KITS
NICADAN	generic multivitamins		
NICAPRIN	generic multivitamins		
NICAZEL, NICAZEL FORTE	generic multivitamins	ONFI	clobazam, clonazepam, lamotrigine, rufinamide, topiramate, topiramate ext-rel
NICOMIDE	generic multivitamins		
NILANDRON	abiraterone, bicalutamide, ERLEADA, NUBEQA, XTANDI, YONSA	ONGLYZA ONZETRA XSAIL	saxagliptin, ZITUVIO eletriptan, naratriptan, rizatriptan, sumatriptan, zolmitriptan, NURTEC ODT, TOSYMRA, UBRELVY, ZEMBRACE SYMTOUCH
nitrofurantoin (NDC 16571074024 only)	nitrofurantoin (except NDC 16571074024)		
Norgesic Forte	cyclobenzaprine (except cyclobenzaprine tablet 7.5 mg)		
NORITATE	azelaic acid gel, brimonidine gel, ivermectin cream, metronidazole, FINACEA FOAM	orphenadrine-aspirin-caffeine Orphengesic Forte	cyclobenzaprine (except cyclobenzaprine tablet 7.5 mg) cyclobenzaprine (except cyclobenzaprine tablet 7.5 mg)
NORPACE	disopyramide		
NORVASC	amlodipine, nifedipine ext-rel	ORTHO D	folic acid, generic multivitamins
NOURIANZ	entacapone, pramipexole, pramipexole ext-rel, rasagiline, ropinirole, ropinirole ext-rel, selegiline, NEUPRO	ORTHO DF OSMOPREP	folic acid, generic multivitamins peg 3350-electrolytes (except generics for MOVIPREP), sodium sulfate-potassium sulfate-magnesium sulfate, CLENPIQ
NOVO NORDISK NEEDLES	BD ULTRAFINE NEEDLES, EMBECTA ULTRAFINE NEEDLES (except certain NDCs)	OSPHENA OWEN MUMFORD NEEDLES	estradiol BD ULTRAFINE NEEDLES, EMBECTA ULTRAFINE NEEDLES (except certain NDCs)
NOXAFIL	fluconazole, itraconazole		
NUCYNTA	hydromorphone, morphine, oxycodone	oxiconazole (NDCs 00168035830, 51672135902 only)	ciclopirox, clotrimazole, econazole, ketoconazole cream 2%, naftifine
NUCYNTA ER	fentanyl transdermal, hydrocodone ext-rel, hydromorphone ext-rel, methadone, morphine ext-rel	OXYCONTIN	fentanyl transdermal, hydrocodone ext-rel, hydromorphone ext-rel, methadone, morphine ext-rel
NuDiclo TabPak	diclofenac sodium, diclofenac sodium gel 1%, diclofenac sodium solution 1.5%, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)	oxymorphone ext-rel	fentanyl transdermal, hydrocodone ext-rel, hydromorphone ext-rel, methadone, morphine ext-rel
NUEDEXTA	Talk to your doctor	OXYTROL	darifenacin ext-rel, fesoterodine ext-rel, oxybutynin ext-rel, solifenacin, tolterodine, tolterodine ext-rel, trospium, trospium ext-rel, GEMTESA
NUVARING	ethinyl estradiol-etonogestrel, ANNOVERA		
NUVIGIL	armodafinil, modafinil, SUNOSI		
omeprazole-sodium bicarbonate	esomeprazole delayed-rel, lansoprazole delayed-rel capsule, omeprazole delayed-rel, pantoprazole delayed-rel tablet	pantoprazole delayed-rel suspension	esomeprazole delayed-rel, lansoprazole delayed-rel capsule, omeprazole delayed-rel, pantoprazole delayed-rel tablet
OMNARIS	azelastine-fluticasone, flunisolide, fluticasone, mometasone, XHANCE	paroxetine HCl ext-rel (NDC 60505367503 only)	citalopram, escitalopram, fluoxetine (except fluoxetine tablet 60 mg, fluoxetine tablet [generics for SARAFEM]), paroxetine HCl, paroxetine HCl ext-rel (except NDC
ONETOUCH LANCETS / LANCING DEVICES	ACCU-CHEK LANCETS / LANCING DEVICES		
ONETOUCH ULTRA STRIPS AND	ACCU-CHEK AVIVA PLUS STRIPS		

DRUG NAME(S)	PREFERRED OPTION(S)	DRUG NAME(S)	PREFERRED OPTION(S)
	60505367503), <i>sertraline</i> , <i>vilazodone</i> , AUVELITY, TRINTELLIX		<i>mL, 20 mg/5 mL</i>), <i>prednisone estradiol</i>
<i>paroxetine mesylate capsule 7.5 mg</i>	<i>paroxetine HCl</i>	PREMARIN	<i>estradiol vaginal cream</i> , IMVEXXY, VAGIFEM
PAXIL, PAXIL CR	<i>citalopram</i> , <i>escitalopram</i> , <i>fluoxetine</i> (except <i>fluoxetine tablet 60 mg</i> , <i>fluoxetine tablet</i> [generics for SARAFEM]), <i>paroxetine HCl</i> , <i>paroxetine HCl ext-rel</i> (except NDC 60505367503), <i>sertraline</i> , <i>vilazodone</i> , AUVELITY, TRINTELLIX	PREMARIN CREAM	<i>estradiol vaginal cream</i> , IMVEXXY, VAGIFEM
		PRENATAL PLUS	<i>generic prenatal vitamins</i>
		PREVACID	<i>esomeprazole delayed-rel</i> , <i>lansoprazole delayed-rel capsule</i> , <i>omeprazole delayed-rel</i> , <i>pantoprazole delayed-rel tablet</i>
		PREVIDENT	Talk to your doctor
		PRILOSEC	<i>esomeprazole delayed-rel</i> , <i>lansoprazole delayed-rel capsule</i> , <i>omeprazole delayed-rel</i> , <i>pantoprazole delayed-rel tablet</i>
<i>peg 3350-electrolytes</i> (generics for MOVIPREP only)	<i>peg 3350-electrolytes</i> (except generics for MOVIPREP), <i>sodium sulfate-potassium sulfate-magnesium sulfate</i> , CLENPIQ	PRISTIQ	<i>desvenlafaxine ext-rel</i> , <i>duloxetine</i> , <i>venlafaxine</i> , <i>venlafaxine ext-rel capsule</i>
PENNSAID	<i>diclofenac sodium</i> , <i>diclofenac sodium gel 1%</i> , <i>diclofenac sodium solution 1.5%</i> , <i>ibuprofen</i> , <i>meloxicam tablet</i> , <i>naproxen</i> (except <i>naproxen CR</i> or <i>naproxen suspension</i>)	PROAIR RESPICLICK	<i>albuterol sulfate CFC-free aerosol</i> (except NDCs 00093317431, 66993001968), <i>levalbuterol tartrate CFC-free aerosol</i>
		PROMETRIUM	<i>medroxyprogesterone</i> ; <i>progesterone</i> , <i>micronized</i>
PENTASA	<i>balsalazide</i> , <i>mesalamine delayed-rel</i> , <i>mesalamine ext-rel</i> , <i>sulfasalazine</i> , <i>sulfasalazine delayed-rel</i>	PROTONIX	<i>esomeprazole delayed-rel</i> , <i>lansoprazole delayed-rel capsule</i> , <i>omeprazole delayed-rel</i> , <i>pantoprazole delayed-rel tablet</i>
PERCOCET	<i>hydrocodone-acetaminophen</i> , <i>oxycodone-acetaminophen</i>	PROVIGIL	<i>armodafinil</i> , <i>modafinil</i> , SUNOSI
PERRIGO NEEDLES	BD ULTRAFINE NEEDLES, EMBECTA ULTRAFINE NEEDLES (except certain NDCs)	PROZAC	<i>citalopram</i> , <i>escitalopram</i> , <i>fluoxetine</i> (except <i>fluoxetine tablet 60 mg</i> , <i>fluoxetine tablet</i> [generics for SARAFEM]), <i>paroxetine HCl</i> , <i>paroxetine HCl ext-rel</i> (except NDC 60505367503), <i>sertraline</i> , <i>vilazodone</i> , AUVELITY, TRINTELLIX
PLAVIX	<i>clopidogrel</i> , <i>prasugrel</i> , BRILINTA	QNASL	<i>azelastine-fluticasone</i> , <i>flunisolide</i> , <i>fluticasone</i> , <i>mometasone</i> , XHANCE
POLYTOZA	Talk to your doctor		GLYXAMBI
POLY-VI-FLOR	<i>generic multivitamins</i>		<i>doxepin</i> , <i>eszopiclone</i> , <i>ramelteon</i> , <i>zolpidem</i> , <i>zolpidem ext-rel</i> , BELSOMRA, QUVIVIQ
POLY-VI-FLOR WITH IRON	<i>generic multivitamins</i>		<i>amphetamine-dextroamphetamine mixed salts ext-rel</i> , <i>dexmethylphenidate ext-rel</i> , <i>lisdexamfetamine</i> , <i>methylphenidate ext-rel</i> , AZSTARYS
<i>posaconazole delayed-rel tablet</i>	<i>fluconazole</i> , <i>itraconazole</i>	QUILLICHEW ER	<i>amphetamine-dextroamphetamine mixed salts ext-rel</i> , <i>dexmethylphenidate ext-rel</i> , <i>lisdexamfetamine</i> , <i>methylphenidate ext-rel</i> , AZSTARYS
PRADAXA	<i>dabigatran</i> , <i>warfarin</i> , ELIQUIS, XARELTO	QUILLIVANT XR	<i>amphetamine-dextroamphetamine mixed salts ext-rel</i> , <i>dexmethylphenidate ext-</i>
PRECISION XTRA STRIPS AND KITS	ACCU-CHEK AVIVA PLUS STRIPS AND KITS, ACCU-CHEK GUIDE STRIPS AND KITS, ACCU-CHEK SMARTVIEW STRIPS AND KITS, TRUE METRIX STRIPS AND KITS	QTERN	<i>doxepin</i> , <i>eszopiclone</i> , <i>ramelteon</i> , <i>zolpidem</i> , <i>zolpidem ext-rel</i> , BELSOMRA, QUVIVIQ
		<i>quazepam</i>	<i>amphetamine-dextroamphetamine mixed salts ext-rel</i> , <i>dexmethylphenidate ext-rel</i> , <i>lisdexamfetamine</i> , <i>methylphenidate ext-rel</i> , AZSTARYS
PRED FORTE, PRED MILD	<i>dexamethasone</i> , <i>difluprednate</i> , <i>loteprednol</i> , <i>prednisolone acetate 1%</i>		<i>amphetamine-dextroamphetamine mixed salts ext-rel</i> , <i>dexmethylphenidate ext-</i>
<i>prednisolone solution 10 mg/5 mL</i> , <i>prednisolone solution 20 mg/5 mL</i>	<i>dexamethasone</i> , <i>hydrocortisone</i> , <i>methylprednisolone</i> , <i>prednisolone solution</i> (except <i>prednisolone solution 10 mg/5</i>		<i>amphetamine-dextroamphetamine mixed salts ext-rel</i> , <i>dexmethylphenidate ext-</i>

DRUG NAME(S)	PREFERRED OPTION(S)	DRUG NAME(S)	PREFERRED OPTION(S)
	<i>rel, lisdexamfetamine, methylphenidate ext-rel, AZSTARYS</i>	RyClora	BELSOMRA, QUVIVIQ
QVAR REDIHALER	ASMANEX HFA, PULMICORT FLEXHALER	SCARSILK PAD	<i>levocetirizine</i>
RAPAFLO	<i>alfuzosin ext-rel, doxazosin, silodosin, tamsulosin, terazosin</i>	SEROQUEL XR	Talk to your doctor
RAYOS	<i>dexamethasone, hydrocortisone, methylprednisolone, prednisolone solution (except prednisolone solution 10 mg/5 mL, 20 mg/5 mL), prednisone</i>	SILENOR	<i>aripiprazole, clozapine, lurasidone, olanzapine, quetiapine, quetiapine ext-rel, risperidone, ziprasidone, VRAYLAR</i>
RECEDO	Talk to your doctor	SILIVEX	<i>doxepin, eszopiclone, ramelteon, zolpidem, zolpidem ext-rel, BELSOMRA, QUVIVIQ</i>
RELION INSULIN	NOVOLIN INSULIN	SILTREX	Talk to your doctor
RELISTOR	<i>lubiprostone, MOVANTIK, SYMPROIC</i>	SINGULAIR	<i>montelukast, zafirlukast</i>
REVELA	<i>calcium acetate, sevelamer carbonate, AURYXIA</i>	SOOLANTRA	<i>azelaic acid gel, brimonidine gel, ivermectin cream, metronidazole, FINACEA FOAM</i>
RETIN-A MICRO	<i>adapalene (except adapalene pad), benzoyl peroxide, clindamycin gel (except NDC 68682046275), clindamycin solution, clindamycin-benzoyl peroxide, dapsone, erythromycin solution, erythromycin-benzoyl peroxide, tazarotene, tretinoin, AKLIEF, EPIDUO, TWYNEO, WINLEVI</i>	SORILUX	<i>calcipotriene ointment, calcipotriene solution, tazarotene, VTAMA, ZORYVE CREAM, ZORYVE FOAM</i>
REZDIFFRA	Talk to your doctor	SPRIX	<i>diclofenac sodium, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)</i>
RHEUMATE	<i>generic multivitamins</i>	STENDRA	<i>avanafil, sildenafil, tadalafil</i>
RHOFADE	<i>azelaic acid gel, brimonidine gel, ivermectin cream, metronidazole, FINACEA FOAM</i>	SUBOXONE	<i>buprenorphine-naloxone sublingual, ZUBSOLV</i>
RHOPRESSA	<i>bimatoprost, brimonidine solution, brimonidine-timolol, brinzolamide, dorzolamide, dorzolamide-timolol, latanoprost, timolol maleate solution, travoprost, ALPHAGAN P, BETOPTIC S, SIMBRINZA</i>	sumatriptan-naproxen	<i>sucralfate suspension</i>
RIMSO-50	Talk to your doctor		<i>diclofenac sodium, ibuprofen or naproxen (except naproxen CR or naproxen suspension) WITH eletriptan, naratriptan, rizatriptan, sumatriptan, zolmitriptan, NURTEC ODT, TOSYMRA, UBRELVY, or ZEMBRACE SYMTOUCH</i>
RIOMET	<i>metformin, metformin ext-rel (except generics for FORTAMET and GLUMETZA)</i>	SUPREP	<i>peg 3350-electrolytes (except generics for MOVIPREP), sodium sulfate-potassium sulfate-magnesium sulfate, CLENPIQ</i>
ROCKLATAN	<i>bimatoprost, brimonidine solution, brimonidine-timolol, brinzolamide, dorzolamide, dorzolamide-timolol, latanoprost, timolol maleate solution, travoprost, ALPHAGAN P, BETOPTIC S, SIMBRINZA</i>	SURE-TEST STRIPS AND KITS	<i>diclofenac sodium, diclofenac sodium gel 1%, diclofenac sodium solution 1.5%, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)</i>
ROZEREM	<i>doxepin, eszopiclone, ramelteon, zolpidem, zolpidem ext-rel,</i>		<i>ACCU-CHEK AVIVA PLUS STRIPS AND KITS, ACCU-CHEK GUIDE STRIPS AND KITS, ACCU-CHEK SMARTVIEW STRIPS AND KITS, TRUE METRIX STRIPS AND KITS</i>

DRUG NAME(S)	PREFERRED OPTION(S)	DRUG NAME(S)	PREFERRED OPTION(S)
SYMBICORT	<i>budesonide-formoterol, fluticasone-salmeterol (except certain NDCs), Breyna, Wixela Inhub, BREO ELLIPTA (except certain NDCs)</i>	THEO-24	<i>solution, NATESTO formoterol inhalation solution, ipratropium inhalation solution, SEREVENT, SPIRIVA, STRIVERDI RESPIMAT, YUPELRI</i>
SYNERDERM	<i>desonide (except desonide gel), hydrocortisone</i>	TIMOPTIC OCUDOSE	<i>timolol maleate solution, BETOPTIC S</i>
TALIVA	<i>generic multivitamins</i>	<i>tiotropium bromide</i>	SPIRIVA
<i>Targadox</i>	<i>doxycycline hyclate 20 mg, doxycycline hyclate capsule, minocycline, tetracycline</i>	TIROSINT	<i>levothyroxine, SYNTHROID</i>
<i>tavaborole</i>	<i>terbinafine tablet</i>	TOBRADEX ST	<i>neomycin-polymyxin B-bacitracin-hydrocortisone, neomycin-polymyxin B-dexamethasone, tobramycin-dexamethasone, TOBRADEX OINTMENT</i>
TAYTULLA	<i>ethinyl estradiol-drospirenone, ethinyl estradiol-drospirenone-levomefolate, ethinyl estradiol-levonorgestrel, ethinyl estradiol-levonorgestrel-iron, ethinyl estradiol-norethindrone acetate, ethinyl estradiol-norethindrone acetate-iron, ethinyl estradiol-norgestimate, LO LOESTRIN FE, NATAZIA</i>	<i>topiramate ext-rel capsule (generics for QUDEXY XR only)</i>	<i>carbamazepine, carbamazepine ext-rel, clobazam, clonazepam, divalproex sodium, divalproex sodium ext-rel, eslicarbazepine, gabapentin, lacosamide, lamotrigine, lamotrigine ext-rel, levetiracetam, levetiracetam ext-rel, oxcarbazepine, phenobarbital, phenytoin, phenytoin sodium extended, pregabalin, primidone, rufinamide, tiagabine, topiramate, topiramate ext-rel, valproic acid, zonisamide, BRIVIACT, OXTELLAR XR, XCOPRI</i>
TAZORAC	<i>adapalene (except adapalene pad), benzoyl peroxide, clindamycin gel (except NDC 68682046275), clindamycin solution, clindamycin-benzoyl peroxide, dapsons, erythromycin solution, erythromycin-benzoyl peroxide, tazarotene, tretinoin, AKLIEF, EPIDUO, TWYNEO, WINLEVI; calcipotriene ointment, calcipotriene solution, VTAMA, ZORYVE CREAM, ZORYVE FOAM</i>	TOPROL-XL	<i>acebutolol, atenolol, carvedilol, carvedilol phosphate ext-rel, metoprolol succinate ext-rel, metoprolol tartrate, nadolol, nebivolol, pindolol, propranolol, propranolol ext-rel</i>
TEGRETOL, TEGRETOL XR	<i>carbamazepine, carbamazepine ext-rel, divalproex sodium, divalproex sodium ext-rel, eslicarbazepine, gabapentin, lacosamide, lamotrigine, lamotrigine ext-rel, levetiracetam, levetiracetam ext-rel, oxcarbazepine, phenobarbital, phenytoin, phenytoin sodium extended, pregabalin, primidone, tiagabine, topiramate, topiramate ext-rel, valproic acid, zonisamide, BRIVIACT, OXTELLAR XR, XCOPRI</i>	<i>Tovet</i>	<i>clobetasol cream, clobetasol foam (except clobetasol emollient foam), clobetasol gel, clobetasol lotion, clobetasol ointment, halobetasol cream, halobetasol ointment</i>
TESTIM	<i>testosterone gel (except authorized generics for TESTIM and VOGELXO), testosterone solution, NATESTO</i>	TOVIAZ	<i>darifenacin ext-rel, fesoterodine ext-rel, oxybutynin ext-rel, solifenacin, tolterodine, tolterodine ext-rel, trospium, trospium ext-rel, GEMTESA</i>
<i>testosterone gel 1% (authorized generics for TESTIM and VOGELXO only)</i>	<i>testosterone gel (except authorized generics for TESTIM and VOGELXO), testosterone</i>	TRADJENTA	<i>saxagliptin, ZITUVIO</i>
		<i>tramadol tablet 100 mg, tramadol ext-rel capsule</i>	<i>tramadol (except tramadol tablet 100 mg), tramadol ext-rel tablet</i>
		TRAVATAN Z	<i>bimatoprost, latanoprost, travoprost</i>
		TREXIMET	<i>diclofenac sodium, ibuprofen or naproxen (except naproxen CR or naproxen suspension) WITH</i>

DRUG NAME(S)	PREFERRED OPTION(S)	DRUG NAME(S)	PREFERRED OPTION(S)
	<i>eletriptan, naratriptan, rizatriptan, sumatriptan, zolmitriptan, NURTEC ODT, TOSYMRA, UBRELVY or ZEMBRACE SYMTOUCH</i>	TRUETRACK STRIPS AND KITS	TRUE METRIX STRIPS AND KITS
<i>triamcinolone aerosol 0.2%</i>	<i>hydrocortisone butyrate cream, hydrocortisone butyrate ointment, hydrocortisone butyrate solution, mometasone, triamcinolone cream, triamcinolone lotion, triamcinolone ointment (except triamcinolone ointment 0.05%)</i>	TUDORZA ULORIC ULTIMED INSULIN SYRINGES	ACCU-CHEK AVIVA PLUS STRIPS AND KITS, ACCU-CHEK GUIDE STRIPS AND KITS, ACCU-CHEK SMARTVIEW STRIPS AND KITS, TRUE METRIX STRIPS AND KITS SPIRIVA <i>allopurinol</i>
<i>triamcinolone ointment 0.05%</i>	<i>hydrocortisone butyrate cream, hydrocortisone butyrate ointment, hydrocortisone butyrate solution, mometasone, triamcinolone cream, triamcinolone lotion, triamcinolone ointment (except triamcinolone ointment 0.05%)</i>	ULTIMED NEEDLES ULTRAVATE	BD ULTRAFINE INSULIN SYRINGES, EMBECTA ULTRAFINE INSULIN SYRINGES (except certain NDCs) BD ULTRAFINE NEEDLES, EMBECTA ULTRAFINE NEEDLES (except certain NDCs) <i>clobetasol cream, clobetasol foam (except clobetasol emollient foam), clobetasol gel, clobetasol lotion, clobetasol ointment, halobetasol cream, halobetasol ointment</i>
TRICOR	<i>fenofibrate (except fenofibrate capsule 30 mg, 50 mg, 90 mg, 130 mg; fenofibrate tablet 40 mg, 120 mg), fenofibric acid delayed-rel</i>	<i>umeclidinium-vilanterol</i> UROXATRAL	ANORO ELLIPTA, STIOLTO RESPIMAT <i>alfuzosin ext-rel, doxazosin, silodosin, tamsulosin, terazosin</i>
TRILEPTAL	<i>carbamazepine, carbamazepine ext-rel, divalproex sodium, divalproex sodium ext-rel, eslicarbazepine, gabapentin, lacosamide, lamotrigine, lamotrigine ext-rel, levetiracetam, levetiracetam ext-rel, oxcarbazepine, phenobarbital, phenytoin, phenytoin sodium extended, pregabalin, primidone, tiagabine, topiramate, topiramate ext-rel, valproic acid, zonisamide, BRIVIACT, OXTELLAR XR, XCOPRI</i>	V-GO INSULIN INFUSION PUMP VALCYTE VALTrex Vanoxide-HC	OMNIPOD 5 INSULIN INFUSION PUMP, OMNIPOD DASH INSULIN INFUSION PUMP, OMNIPOD INSULIN INFUSION PUMP, TWIIST INSULIN INFUSION PUMP AND SUPPLIES <i>valganciclovir</i> <i>acyclovir capsule, acyclovir tablet, valacyclovir</i> <i>adapalene (except adapalene pad), benzoyl peroxide, clindamycin gel (except NDC 68682046275), clindamycin solution, clindamycin-benzoyl peroxide, dapsone, erythromycin solution, erythromycin-benzoyl peroxide, tazarotene, tretinoin, AKLIEF, EPIDUO, TWYNEO, WINLEVI</i>
TRI-VI-FLOR	<i>generic multivitamins</i>		
TRIVIDIA INSULIN SYRINGES	BD ULTRAFINE INSULIN SYRINGES, EMBECTA ULTRAFINE INSULIN SYRINGES (except certain NDCs)		<i>dapsone, erythromycin solution, erythromycin-benzoyl peroxide, tazarotene, tretinoin, AKLIEF, EPIDUO, TWYNEO, WINLEVI</i>
TronVite	<i>generic multivitamins</i>		
TRUDHESA	<i>eletriptan, naratriptan, rizatriptan, sumatriptan, zolmitriptan, NURTEC ODT, TOSYMRA, UBRELVY, ZEMBRACE SYMTOUCH</i>	VASCULERA VECTICAL	Talk to your doctor <i>calcipotriene ointment, calcipotriene solution, tazarotene, VTAMA, ZORYVE CREAM, ZORYVE FOAM</i>
TRUETEST STRIPS AND KITS	ACCU-CHEK AVIVA PLUS STRIPS AND KITS, ACCU-CHEK GUIDE STRIPS AND KITS, ACCU-CHEK SMARTVIEW STRIPS AND KITS,	VELPHORO <i>venlafaxine ext-rel tablet (except 225 mg)</i>	<i>calcium acetate, sevelamer carbonate, AURYXIA</i> <i>desvenlafaxine ext-rel, duloxetine, venlafaxine,</i>

DRUG NAME(S)	PREFERRED OPTION(S)	DRUG NAME(S)	PREFERRED OPTION(S)
VENTOLIN HFA	<i>venlafaxine ext-rel capsule</i> <i>albuterol sulfate CFC-free aerosol</i> (except NDCs 00093317431, 66993001968), <i>levalbuterol tartrate CFC-free aerosol</i>	XERESE XIIDRA XOPENEX HFA	WEGOVY <i>acyclovir capsule, acyclovir tablet, valacyclovir</i> RESTASIS, VEVYE
VEREGEN	<i>imiquimod</i>		<i>albuterol sulfate CFC-free aerosol</i> (except NDCs 00093317431, 66993001968), <i>levalbuterol tartrate CFC-free aerosol</i>
VIAGRA	<i>avanafil, sildenafil, tadalafil</i>		
VICTOZA	<i>liraglutide</i> , MOUNJARO, OZEMPIC, RYBELSUS, TRULICITY	XTAMPZA ER	<i>fentanyl transdermal, hydrocodone ext-rel, hydromorphone ext-rel, methadone, morphine ext-rel</i>
VIIBRYD	<i>citalopram, escitalopram, fluoxetine</i> (except <i>fluoxetine tablet 60 mg, fluoxetine tablet [generics for SARAFEM]</i>), <i>paroxetine HCl, paroxetine HCl ext-rel</i> (except NDC 60505367503), <i>sertraline, vilazodone</i> , AUVELITY, TRINTELLIX	XYOSTED XYZBAC YASMIN	<i>testosterone gel</i> (except authorized generics for TESTIM and VOGELXO), <i>testosterone solution</i> , NATESTO <i>generic multivitamins</i>
VIMPAT	<i>carbamazepine, carbamazepine ext-rel, divalproex sodium, divalproex sodium ext-rel, eslicarbazepine, gabapentin, lacosamide, lamotrigine, lamotrigine ext-rel, levetiracetam, levetiracetam ext-rel, oxcarbazepine, phenobarbital, phenytoin, phenytoin sodium extended, pregabalin, primidone, tiagabine, topiramate, topiramate ext-rel, valproic acid, zonisamide</i> , BRIVIACT, OXTELLAR XR, XCOPRI	YAZ	<i>ethinyl estradiol-drospirenone, ethinyl estradiol-drospirenone-levomefolate, ethinyl estradiol-levonorgestrel, ethinyl estradiol-levonorgestrel-iron, ethinyl estradiol-norethindrone acetate, ethinyl estradiol-norethindrone acetate-iron, ethinyl estradiol-norgestimate</i> , LO LOESTRIN FE, NATAZIA
VITAFOL-ONE	<i>generic prenatal vitamins</i>		<i>ethinyl estradiol-drospirenone, ethinyl estradiol-drospirenone-levomefolate, ethinyl estradiol-levonorgestrel, ethinyl estradiol-levonorgestrel-iron, ethinyl estradiol-norethindrone acetate, ethinyl estradiol-norethindrone acetate-iron, ethinyl estradiol-norgestimate</i> , LO LOESTRIN FE, NATAZIA
Vitasure	<i>generic multivitamins</i>		
VIVELLE-DOT	<i>estradiol</i>		<i>estradiol vaginal cream, IMVEXXY, VAGIFEM</i>
VOGELXO	<i>testosterone gel</i> (except authorized generics for TESTIM and VOGELXO), <i>testosterone solution</i> , NATESTO	Yuvafem	<i>generic prenatal vitamins</i>
VYVANSE	<i>amphetamine-dextroamphetamine mixed salts ext-rel, dexamfetamine, methylphenidate ext-rel, methylphenidate ext-rel</i> , AZSTARYS	ZALVIT ZELAC ZEPBOUND ZERVIAE	Talk to your doctor <i>orlistat</i> , QSYMIA, SAXENDA, WEGOVY
VYZULTA	<i>bimatoprost, latanoprost, travoprost</i>	ZESTORETIC	<i>azelastine, bepotastine, cromolyn sodium, loteprednol, olopatadine</i>
WELLBUTRIN XL	<i>bupropion, bupropion ext-rel</i> (except <i>bupropion ext-rel tablet 450 mg</i>)	ZETIA ZIANA	<i>fosinopril-hydrochlorothiazide, lisinopril-hydrochlorothiazide, quinapril-hydrochlorothiazide</i> <i>ezetimibe</i>
XANAX, XANAX XR	<i>alprazolam, clonazepam, diazepam, lorazepam, oxazepam</i>		<i>adapalene</i> (except <i>adapalene pad</i>), <i>benzoyl peroxide, clindamycin gel</i> (except NDC 68682046275), <i>clindamycin</i>
XENICAL	<i>orlistat</i> , QSYMIA, SAXENDA,		

DRUG NAME(S)	PREFERRED OPTION(S)	DRUG NAME(S)	PREFERRED OPTION(S)
	<i>solution, clindamycin-benzoyl peroxide, dapson, erythromycin solution, erythromycin- benzoyl peroxide, tazarotene, tretinoin,</i>	<i>zolpidem sublingual</i>	<i>doxepin, eszopiclone, ramelteon, zolpidem, zolpidem ext-rel, BELSOMRA, QUVIVIQ</i>
Ziclopro	<i>AKLIEF, EPIDUO, TWYNEO, WINLEVI</i>	ZONEGRAN	<i>carbamazepine, carbamazepine ext-rel, divalproex sodium, divalproex sodium ext-rel, eslicarbazepine, gabapentin, lacosamide, lamotrigine, lamotrigine ext-rel, levetiracetam, levetiracetam ext-rel, oxcarbazepine, phenobarbital, phenytoin, phenytoin sodium extended, pregabalin, primidone, tiagabine, topiramate, topiramate ext-rel, valproic acid, zonisamide, BRIVIACT, OXTELLAR XR, XCOPRI</i>
<i>zileuton ext-rel</i>	<i>diclofenac sodium, diclofenac sodium gel 1%, diclofenac sodium solution 1.5%, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)</i>		Talk to your doctor
ZIRGAN	<i>montelukast, zafirlukast</i>	ZONTIVITY	<i>neomycin-polymyxin B-bacitracin-hydrocortisone, neomycin-polymyxin B-dexamethasone, tobramycin-dexamethasone, TOBRADEX OINTMENT</i>
ZOLOFT	<i>trifluridine</i>	ZYLET	
	<i>citalopram, escitalopram, fluoxetine (except fluoxetine tablet 60 mg, fluoxetine tablet [generics for SARAFEM]), paroxetine HCl, paroxetine HCl ext-rel (except NDC 60505367503), sertraline, vilazodone, AUVELITY, TRINTELLIX</i>		

FOR YOUR INFORMATION: 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. Listed products may be available generically in certain strengths or dosage forms. Dosage forms on this list will be consistent with the category and use where listed.

Formulary removals/drugs not included on the preferred options list may be covered by the plan when preferred options are not clinically appropriate. For more information, please sign in or register on [Caremark.com](https://www.caremark.com) and click Plan Summary on the Plan & Benefits menu.

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.

Some listings do not include certain NDCs as noted above.

An ACCU-CHEK or TRUE METRIX blood glucose meter may be provided at no charge by the manufacturer to those individuals currently using a meter other than ACCU-CHEK or TRUE METRIX. For more information on how to obtain a blood glucose meter, call: 1-877-418-4746.

BD ULTRAFINE or EMBECTA ULTRAFINE (except certain NDCs) syringes and needles are the only preferred options.

ACCU-CHEK or TRUE METRIX (Trividia manufactured NDCs) brand test strips are the only preferred options.

ACCU-CHEK lancets and lancing devices are the only preferred options.

Generic multivitamins (except Activite, Dexifol, HylaVite, Multipro, TronVite, Vitasure) are the only preferred options.

Generic prenatal vitamins are the only preferred options.

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