



# FOX VALLEY & VICINITY LABORERS

## HEALTH AND WELFARE AND PENSION FUNDS

DATE: June 13, 2022  
TO: Eligible Participants  
FROM: Board of Trustees

SUBJECT: CVS Caremark – Formulary Drug Lists  
Fox Valley Laborers Health and Welfare Fund

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CVS Caremark continually reviews medicines and products for the Plan. This helps the Plan make sure the medicines that work well and are cost effective become part of the drug benefit plan. As part of this effort, there are changes that could affect your current medicine choices. Enclosed are the July 2022 Performance Drug List – Standard Control for Clients with Advanced Control Specialty Formulary and the Advanced Control Specialty Formulary list for preferred specialty drugs.

It is important to keep in mind that the Plan does not cover drugs that are not on the contract pharmacy network formulary lists. If you are currently taking any drug not listed, you will be contacted by CVS Caremark with available drug options that are covered by the Plan. If you choose to continue to use a drug that is not on the network formulary lists, you will pay the full price for the drug. If your physician believes there are special circumstances with regard to the drug being removed, your physician can contact CVS Caremark.

Please note that not all of the drugs on the lists may be covered under the Plan, and the Plan does not cover Levitra, Cialis, Viagra, or similar drugs.

CVS Caremark may make future changes to the drug lists on a quarterly basis. You may contact CVS Caremark at (800) 824-6349 to check on the formulary status of a drug or view the current CVS Caremark Performance Drug Lists online at [www.caremark.com](http://www.caremark.com) or at [www.fvlab.com](http://www.fvlab.com). While at [www.caremark.com](http://www.caremark.com) you can request mail service orders and research drug information.

If you have any questions regarding these changes, please do not hesitate to contact the Fund Office at (847) 742-0900 or toll free at (866) 828-0900.



# FOX VALLEY & VICINITY LABORERS

English	ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-877-696-6775.
Arabic	ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-877-696-6775
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Gujarati	સાવધાન: જો તમે ઇંગલિશ બોલતા હો, ભાષા સહાય સેવાઓ, નિ:શુલ્ક, તમારા માટે ઉપલબ્ધ છે. 1-877-696-6775 પર કોલ કરો
Hindi	सावधानी: यदि आप अंग्रेजी बोलते हैं, तो भाषा सहायता सेवाएं नि:शुल्क, आपके लिए उपलब्ध हैं। 1-877-696-6775 पर कॉल करें।
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Korean	주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-877-696-6775 번으로 전화해 주십시오.
Polish	UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-877-696-6775.
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Spanish	ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-877-696-6775.
Tagalog	PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-877-696-6775.
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2371 Bowes Road, Suite 500, Elgin, Illinois 60123-5523

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# Performance Drug List - Standard Opt Out for Clients with Advanced Control Specialty Formulary<sup>®</sup>

The **CVS Caremark<sup>®</sup> Performance Drug List - Standard Opt Out for Clients with Advanced Control Specialty Formulary<sup>®</sup>** 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. 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 a prescription benefit program administered by CVS Caremark. Ask your doctor to consider prescribing, when medically appropriate, a preferred medicine from this list. Take this list along when you or a covered family member sees a doctor.

### Please note:

- Your specific prescription benefit plan design may not cover certain products or categories, regardless of their appearance in this document.
- You may be responsible for the full cost of non-formulary products that are removed from coverage.
- For specific information regarding your prescription benefit coverage and copay<sup>1</sup> information, please visit [Caremark.com](https://www.caremark.com) or contact a CVS Caremark Customer Care representative.
- CVS Caremark may contact your doctor after receiving your prescription to request consideration of a drug list product or generic equivalent. This may result in your doctor prescribing, when medically appropriate, a different brand-name product or generic equivalent in place of your original prescription.
- In most instances, a brand-name drug for which a generic product becomes available will be designated as a non-preferred option upon release of the generic product to the market.

## 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 necessary, consider prescribing a brand name on this list.

### Please note:

- Generics should be considered the first line of prescribing.
- This drug list represents a summary of prescription coverage. It is not all-inclusive and does not guarantee coverage. The member's specific prescription benefit plan design may not cover certain products or categories, regardless of their appearance in this document.
- The member's prescription benefit plan may have a different copay 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 copay information for a specific medicine.

## ANALGESICS

### § COX-2 INHIBITORS

*celecoxib*

### § GOUT

*allopurinol*  
*colchicine*  
*probenecid*

### § NSAIDs

*diclofenac sodium*  
*ibuprofen*  
*meloxicam*  
*naproxen*

### § NSAIDs, COMBINATIONS

*diclofenac sodium-*  
*misoprostol*

### § NSAIDs, TOPICAL

*diclofenac sodium gel 1%*  
*diclofenac sodium solution*

### § OPIOID ANALGESICS

*buprenorphine transdermal*  
*codeine-acetaminophen*  
*fentanyl transdermal*

*fentanyl transmucosal*  
*lozenge*

*hydrocodone ext-rel*  
*hydrocodone-acetaminophen*  
*hydromorphone*  
*hydromorphone ext-rel*  
*methadone*  
*morphine*  
*morphine ext-rel*  
*oxycodone*

*oxycodone-acetaminophen*  
*tramadol*  
*tramadol ext-rel*  
BELBUCA  
NUCYNTA  
NUCYNTA ER  
OXYCONTIN  
SUBSYS  
XTAMPZA ER

## ANTI-INFECTIVES

### ANTIBACTERIALS

### § CEPHALOSPORINS

*cefdinir*  
*cefprozil*  
*cefuroxime axetil*

*cephalexin*  
SUPRAX

### § ERYTHROMYCINS / MACROLIDES

*azithromycin*  
*clarithromycin*  
*clarithromycin ext-rel*  
*erythromycins*  
DIFICID

### § FLUOROQUINOLONES

*ciprofloxacin*  
*levofloxacin*  
*moxifloxacin*

### § PENICILLINS

*amoxicillin*  
*amoxicillin-clavulanate*  
*dicloxacillin*  
*penicillin VK*

### § TETRACYCLINES

*doxycycline hyclate*  
*minocycline*  
*tetracycline*

### § ANTIFUNGALS

*fluconazole*  
*itraconazole*  
*terbinafine tablet*

### ANTIVIRALS

§ CYTOMEGALOVIRUS AGENTS  
*valganciclovir*

### § HERPES AGENTS

*acyclovir capsule, tablet*  
*valacyclovir*

### § INFLUENZA AGENTS

*oseltamivir*  
RELENZA

### § MISCELLANEOUS

*clindamycin*  
*ivermectin*  
*linezolid*  
*metronidazole*  
*nitrofurantoin*  
*pyrimethamine*  
*sulfamethoxazole-*  
*trimethoprim*

*vancomycin capsule*  
EMVERM  
XIFAXAN 550 MG

## ANTINEOPLASTIC AGENTS

### HORMONAL ANTINEOPLASTIC AGENTS

### § ANTIANDROGENS

*bicalutamide*

## CARDIOVASCULAR

### § ACE INHIBITORS

*enalapril*  
*fosinopril*  
*lisinopril*  
*quinapril*  
*ramipril*

### § ACE INHIBITOR / DIURETIC COMBINATIONS

*fosinopril-hydrochlorothiazide*  
*lisinopril-hydrochlorothiazide*  
*quinapril-hydrochlorothiazide*

Your specific prescription benefit plan design may not cover certain products or categories, regardless of their appearance in this document. For specific information, visit [Caremark.com](https://www.caremark.com) or contact a CVS Caremark Customer Care representative.

**§ ALDOSTERONE RECEPTOR ANTAGONISTS**

*spironolactone*

**§ ANGIOTENSIN II RECEPTOR ANTAGONISTS / DIURETIC COMBINATIONS**

*candesartan / candesartan-hydrochlorothiazide*  
*irbesartan / irbesartan-hydrochlorothiazide*  
*losartan / losartan-hydrochlorothiazide*  
*olmesartan / olmesartan-hydrochlorothiazide*  
*telmisartan / telmisartan-hydrochlorothiazide*  
*valsartan / valsartan-hydrochlorothiazide*

**§ ANGIOTENSIN II RECEPTOR ANTAGONIST / CALCIUM CHANNEL BLOCKER COMBINATIONS**

*amlodipine-olmesartan*  
*amlodipine-telmisartan*  
*amlodipine-valsartan*

**§ ANGIOTENSIN II RECEPTOR ANTAGONIST / CALCIUM CHANNEL BLOCKER / DIURETIC COMBINATIONS**

*olmesartan-amlodipine-hydrochlorothiazide*

**§ ANTIARRHYTHMICS**

*disopyramide*  
*sotalol*  
MULTAQ

**ANTILPEMICS**

**ACL INHIBITORS / COMBINATIONS**  
NEXLETOL  
NEXLIZET

**§ BILE ACID RESINS**

*cholestyramine*  
*colesevelam*

**§ CHOLESTEROL ABSORPTION INHIBITORS**

*ezetimibe*

**§ FIBRATES**

*fenofibrate*  
*fenofibric acid delayed-rel*

**§ HMG-CoA REDUCTASE INHIBITORS / COMBINATIONS**

*atorvastatin*  
*ezetimibe-simvastatin*  
*fluvastatin*  
*lovastatin*  
*pravastatin*  
*rosuvastatin*  
*simvastatin*

**§ NIACINS**

*niacin ext-rel*

**§ OMEGA-3 FATTY ACIDS**

*omega-3 acid ethyl esters*  
VASCEPA

**§ BETA-BLOCKERS**

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

**§ CALCIUM CHANNEL BLOCKERS**

*amlodipine*  
*diltiazem ext-rel*  
*nifedipine ext-rel*  
*verapamil ext-rel*

**§ CALCIUM CHANNEL BLOCKER / ANTILPEMIC COMBINATIONS**

*amlodipine-atorvastatin*

**§ DIGITALIS GLYCOSIDES**

*digoxin*

**§ DIRECT RENIN INHIBITORS / DIURETIC COMBINATIONS**

*aliskiren*  
TEKTURNA HCT

**§ DIURETICS**

*amiloride*  
*furosemide*  
*hydrochlorothiazide*  
*metolazone*  
*spironolactone-hydrochlorothiazide*  
*toremide*  
*triamterene*  
*triamterene-hydrochlorothiazide*

**HEART FAILURE**

BIDIL  
CORLANOR  
ENTRESTO  
VERQUVO

**§ NITRATES**

*isosorbide dinitrate*  
*isosorbide mononitrate*  
*nitroglycerin lingual spray*  
*nitroglycerin sublingual*

**§ MISCELLANEOUS**

*ranolazine ext-rel*

**CENTRAL NERVOUS SYSTEM**

**ANTIANKXIETY**

**§ BENZODIAZEPINES**

*alprazolam*  
*clonazepam*  
*diazepam*  
*lorazepam*  
*oxazepam*

**§ ANTICONVULSANTS**

*carbamazepine*  
*carbamazepine ext-rel*  
*clobazam*  
*diazepam rectal gel*  
*divalproex sodium*  
*divalproex sodium ext-rel*  
*ethosuximide*  
*gabapentin*  
*lamotrigine*  
*lamotrigine ext-rel*  
*levetiracetam*  
*levetiracetam ext-rel*  
*oxcarbazepine*  
*phenobarbital*  
*phenytoin*  
*phenytoin sodium extended*  
*primidone*  
*rufinamide*  
*tiagabine*  
*topiramate*  
*valproic acid*  
*zonisamide*  
FYCOMPA  
OXTELLAR XR  
TROKENDI XR  
VIMPAT

**§ ANTIDEMENTIA**

*donepezil*  
*galantamine*  
*galantamine ext-rel*  
*memantine*  
*rivastigmine*  
*rivastigmine transdermal*  
NAMZARIC

**ANTIDEPRESSANTS**

**§ SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIs)**

*citalopram*  
*escitalopram*  
*fluoxetine*  
*paroxetine HCl*  
*paroxetine HCl ext-rel*  
*sertraline*  
TRINTELLIX  
VIIBRYD

**§ SEROTONIN NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIs)**

*desvenlafaxine ext-rel*  
*duloxetine*  
*venlafaxine*

*venlafaxine ext-rel capsule*  
FETZIMA

**§ MISCELLANEOUS AGENTS**

*bupropion*  
*bupropion ext-rel*  
*mirtazapine*  
*trazodone*

**§ ANTIPARKINSONIAN AGENTS**

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

**ANTIPSYCHOTICS**

**§ ATYPICALS**

*aripiprazole*  
*clozapine*  
*olanzapine*  
*quetiapine*  
*quetiapine ext-rel*  
*risperidone*  
*ziprasidone*  
ABILIFY MAINTENA  
ARISTADA  
ARISTADA INITIO  
LATUDA  
VRAYLAR

**§ ATTENTION DEFICIT HYPERACTIVITY DISORDER**

*amphetamine-dextroamphetamine mixed salts*  
*amphetamine-dextroamphetamine mixed salts ext-rel*  
*atomoxetine*  
*dexmethylphenidate ext-rel*  
*guanfacine ext-rel*  
*methylphenidate*  
*methylphenidate ext-rel*  
MYDAYIS  
QELBREE  
VYVANSE

**§ FIBROMYALGIA**

*pregabalin*  
SAVELLA

**HYPNOTICS**

**§ NONBENZODIAZEPINES**

*eszopiclone*  
*ramelteon*  
*zolpidem*  
*zolpidem ext-rel*

*zolpidem sublingual*  
BELSOMRA

**§ TRICYCLICS**

*doxepin*

**MIGRAINE**

**ACUTE MIGRAINE AGENTS**

**§ Ergotamine Derivatives**

*ergotamine-caffeine*

**§ Triptans**

*eletriptan*  
*naratriptan*  
*rizatriptan*  
*sumatriptan*  
*zolmitriptan*  
ONZETRA XSAIL  
ZEMBRACE SYMTOUCH  
ZOMIG NASAL SPRAY

**Miscellaneous**

NURTEC ODT  
UBRELVY

**PREVENTIVE MIGRAINE AGENTS**

**Monoclonal Antibodies**

AIMOVIG  
AJOVY  
EMGALITY

**§ MUSCULOSKELETAL THERAPY AGENTS**

*cyclobenzaprone*

**§ NARCOLEPSY**

*armodafinil*  
*modafinil*  
SUNOSI

**§ POSTHERPETIC NEURALGIA (PHN)**

*pregabalin ext-rel*  
GRALISE

**PSYCHOTHERAPEUTIC - MISCELLANEOUS**

**§ OPIOID ANTAGONISTS**

*naloxone injection*  
KLOXXADO  
NARCAN NASAL SPRAY

**§ PARTIAL OPIOID AGONIST / OPIOID ANTAGONIST COMBINATIONS**

*buprenorphine-naloxone sublingual*  
ZUBSOLV

**PSEUDOBULBAR AFFECT AGENTS**

NUDEXTA

**§ VASOMOTOR SYMPTOM AGENTS**

*paroxetine mesylate*

**ENDOCRINE AND METABOLIC****§ ANDROGENS**

*testosterone gel*  
*testosterone solution*  
 ANDRODERM  
 NATESTO

**ANTIDIABETICS**

AMYLIN ANALOGS  
 SYMLINPEN

**§ BIGUANIDES**

*metformin*  
*metformin ext-rel*

**§ BIGUANIDE / SULFONYLUREA COMBINATIONS**

*glipizide-metformin*

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

JANUVIA  
 TRADJENTA

**DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITOR / BIGUANIDE COMBINATIONS**

JANUMET  
 JANUMET XR  
 JENTADUETO  
 JENTADUETO XR

**INCRETIN MIMETIC AGENTS**

OZEMPIC  
 RYBELSUS  
 TRULICITY  
 VICTOZA

**INCRETIN MIMETIC AGENT / INSULIN COMBINATIONS**

SOLIQUA  
 XULTOPHY

**INSULINS**

BASAGLAR  
 FIASP  
 HUMALOG  
 HUMALOG MIX  
 HUMULIN 70/30  
 HUMULIN N  
 HUMULIN R  
 HUMULIN R U-500  
 INSULIN ASPART  
 INSULIN ASPART 70/30  
 INSULIN LISPRO  
 LANTUS  
 LEVEMIR  
 LYUMJEV  
 NOVOLIN 70/30  
 NOVOLIN N  
 NOVOLIN R  
 NOVOLOG  
 NOVOLOG MIX 70/30  
 TOUJEO  
 TRESIBA

**§ INSULIN SENSITIZERS**

*pioglitazone*

**§ INSULIN SENSITIZER / BIGUANIDE COMBINATIONS**

*pioglitazone-metformin*

**§ INSULIN SENSITIZER / SULFONYLUREA COMBINATIONS**

*pioglitazone-glimepiride*

**§ MEGLITINIDES**

*nateglinide*  
*repaglinide*

**SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS**

FARXIGA  
 INVOKANA  
 JARDIANCE

**SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITOR / BIGUANIDE COMBINATIONS**

INVOKAMET  
 INVOKAMET XR  
 SYNJARDY  
 SYNJARDY XR  
 XIGDUO XR

**SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITOR / DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITOR COMBINATIONS**

GLYXAMBI  
 QTERN

**SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITOR / DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITOR / BIGUANIDE COMBINATIONS**

TRIJARDY XR

**§ SULFONYLUREAS**

*glimepiride*  
*glipizide*  
*glipizide ext-rel*

**SUPPLIES**

ACCU-CHEK AVIVA PLUS STRIPS AND KITS <sup>2</sup>  
 ACCU-CHEK COMPACT PLUS STRIPS AND KITS <sup>2</sup>  
 ACCU-CHEK GUIDE STRIPS AND KITS <sup>2</sup>  
 ACCU-CHEK SMARTVIEW STRIPS AND KITS <sup>2</sup>  
 BD ULTRAFINE INSULIN SYRINGES AND NEEDLES

DEXCOM CONTINUOUS GLUCOSE MONITORING SYSTEM  
 FREESTYLE LIBRE CONTINUOUS GLUCOSE MONITORING SYSTEM  
 OMNIPOD DASH INSULIN INFUSION PUMP  
 OMNIPOD INSULIN INFUSION PUMP  
 ONETOUCH ULTRA STRIPS AND KITS <sup>2</sup>  
 ONETOUCH VERIO STRIPS AND KITS <sup>2</sup>  
 V-GO INSULIN INFUSION PUMP

**ANTI OBESITY**

INJECTABLE  
 SAXENDA  
 WEGOVY

**ORAL**

QSYMIA

**CALCIUM REGULATORS****§ BISPSPHONATES**

*alendronate*  
*ibandronate*  
*risedronate*

**§ CALCITONINS**

*calcitonin-salmon*

**§ CARNITINE DEFICIENCY AGENTS**

*levocarnitine*

**CONTRACEPTIVES****§ MONOPHASIC**

*ethinyl estradiol-drospirenone*  
*ethinyl estradiol-drospirenone-levomefolate*  
*ethinyl estradiol-norethindrone acetate*  
*ethinyl estradiol-norethindrone acetate-iron*

**§ BIPHASIC**

LO LOESTRIN FE

**§ TRIPHASIC**

*ethinyl estradiol-norgestimate*

**FOUR PHASE**

NATAZIA

**§ EXTENDED CYCLE**

*ethinyl estradiol-levonorgestrel*

**§ TRANSDERMAL**

*ethinyl estradiol-norelgestromin*

**§ VAGINAL**

*ethinyl estradiol-etonogestrel*  
 ANNOVERA

**DIABETIC KIDNEY DISEASE KERENDIA****ENDOMETRIOSIS**

ORLISSA

**§ GLUCOCORTICOIDS**

*dexamethasone*  
*fludrocortisone*  
*hydrocortisone*  
*methylprednisolone*  
*prednisolone solution*  
*prednisone*

**GLUCOSE ELEVATING AGENTS**

BAQSIMI  
 GLUCAGEN HYPOKIT  
 GLUCAGON EMERGENCY KIT  
 GVOKE  
 ZEGALOGUE

**MENOPAUSAL SYMPTOM AGENTS****§ ORAL**

*estradiol*  
*estradiol-norethindrone*  
 DUAVEE  
 PREMARIN  
 PREMPHASE  
 PREMPRO

**§ TRANSDERMAL**

*estradiol*  
 CLIMARA PRO  
 COMBIPATCH  
 DIVIGEL  
 EVAMIST

**§ VAGINAL**

*estradiol*  
 ESTRING  
 PREMARIN CREAM

**§ PHOSPHATE BINDER AGENTS**

*calcium acetate*  
*lanthanum carbonate*  
*sevelamer carbonate*  
 AURYXIA  
 PHOSLYRA  
 VELPHORO

**POTASSIUM-REMOVING AGENTS**

LOKELMA  
 VELTASSA

**PROGESTINS****§ ORAL**

*medroxyprogesterone*  
*megestrol acetate*  
*progesterone, micronized*

**VAGINAL**

CRINONE  
 ENDOMETRIN

**§ SELECTIVE ESTROGEN RECEPTOR MODULATORS**

*raloxifene*  
 OSPHENA

**§ THYROID SUPPLEMENTS**

*levothyroxine*  
*liothyronine*  
 SYNTHROID

**UTERINE FIBROIDS**

MYFEMBREE  
 ORIAHNN

**GASTROINTESTINAL****§ ANTIARRHEALS**

*diphenoxylate-atropine*  
*loperamide*

**§ ANTIEMETICS**

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

**§ ANTISPASMODICS**

*dicyclomine*

**§ H<sub>2</sub> RECEPTOR ANTAGONISTS**

*famotidine*

**INFLAMMATORY BOWEL DISEASE****§ ORAL AGENTS**

*balsalazide*  
*budesonide capsule*  
*budesonide ext-rel*  
*mesalamine delayed-rel*  
*mesalamine ext-rel*  
*sulfasalazine*  
*sulfasalazine delayed-rel*  
 PENTASA

**§ RECTAL AGENTS**

*hydrocortisone enema*  
*mesalamine suppository*  
*mesalamine suspension*  
 CORTIFOAM

**§ IRRITABLE BOWEL SYNDROME**

*alosetron*  
*lubiprostone*  
 LINZESS  
 VIBERZI

## § LAXATIVES

*lactulose solution*  
*peg 3350-electrolytes*  
SUPREP

## OPIOID-INDUCED CONSTIPATION

MOVANTIK  
SYMPROIC

## PANCREATIC ENZYMES

CREON  
VIOKACE  
ZENPEP

## § PROTON PUMP INHIBITORS

*esomeprazole delayed-rel*  
*lansoprazole delayed-rel*  
*omeprazole delayed-rel*  
*pantoprazole delayed-rel*

## § STEROIDS, RECTAL PROCTOFOAM-HC

## § ULCER THERAPY COMBINATIONS

PYLERA  
TALICIA

## § MISCELLANEOUS

*sucralfate*

## GENITOURINARY

## § BENIGN PROSTATIC HYPERPLASIA

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

## ERECTILE DYSFUNCTION

ALPROSTADIL AGENTS  
MUSE

## § PHOSPHODIESTERASE INHIBITORS

*sildenafil*  
*tadalafil*

## § URINARY ANTISPASMODICS

*darifenacin ext-rel*  
*oxybutynin*  
*oxybutynin ext-rel*  
*solifenacin*  
*tolterodine*  
*tolterodine ext-rel*  
*tropium*  
*tropium ext-rel*  
MYRBETRIQ  
TOVIAZ

## HEMATOLOGIC

### ANTICOAGULANTS

§ INJECTABLE  
*enoxaparin*

### § ORAL

*warfarin*  
ELIQUIS  
XARELTO

### § SYNTHETIC HEPARINOID- LIKE AGENTS

*fondaparinux*

### § PLATELET AGGREGATION INHIBITORS

*clopidogrel*  
*dipyridamole ext-rel-aspirin*  
*prasugrel*  
BRILINTA

## IMMUNOLOGIC AGENTS

### ALLERGENIC EXTRACTS

GRASTEK  
RAGWITEK

## NUTRITIONAL / SUPPLEMENTS

### § ELECTROLYTES

*potassium chloride liquid*

### VITAMINS AND MINERALS

§ PRENATAL VITAMINS  
*prenatal vitamins*

## RESPIRATORY

### § ANAPHYLAXIS TREATMENT AGENTS

*epinephrine auto-injector*  
AUVI-Q  
EPIPEN  
EPIPEN JR

### § ANTICHOLINERGICS

*ipratropium*  
*inhalation solution*  
ATROVENT HFA  
INCRUSE ELLIPTA  
SPIRIVA  
YUPELRI

### ANTICHOLINERGIC / BETA AGONIST COMBINATIONS

§ SHORT ACTING  
*ipratropium-albuterol*  
*inhalation solution*

### LONG ACTING

ANORO ELLIPTA  
BEVESPI AEROSPHERE  
STIOLTO RESPIMAT

ANTICHOLINERGIC / BETA  
AGONIST / STEROID  
INHALANT COMBINATIONS  
BREZTRI AEROSPHERE  
TRELEGY ELLIPTA

### BETA AGONISTS, INHALANTS

§ SHORT ACTING  
*albuterol inhalation solution*  
*albuterol sulfate*  
*CFC-free aerosol*  
*levalbuterol tartrate*  
*CFC-free aerosol*

### LONG ACTING

#### Hand-held Active Inhalation

SEREVENT  
STRIVERDI RESPIMAT

#### Nebulized Passive Inhalation

PERFOROMIST

### § LEUKOTRIENE MODULATORS

*montelukast*  
*zafirlukast*  
*zileuton ext-rel*

### § NASAL ANTIHISTAMINES

*azelastine*  
*olopatadine*

### § NASAL STEROIDS / COMBINATIONS

*azelastine-fluticasone*  
*flunisolide*  
*fluticasone*  
*mometasone*

### PHOSPHODIESTERASE-4 INHIBITORS

DALIRESP

### STEROID / BETA AGONIST COMBINATIONS

ADVAIR DISKUS  
ADVAIR HFA  
BREQ ELLIPTA  
SYMBICORT

### § STEROID INHALANTS

*budesonide*  
*inhalation suspension*  
ARNUIITY ELLIPTA  
ASMANEX  
FLOVENT DISKUS  
FLOVENT HFA  
PULMICORT FLEXHALER  
QVAR REDIHALER

## TOPICAL

### DERMATOLOGY

#### ACNE

#### § Oral

ABSORICA

## § Topical

*adapalene*  
*benzoyl peroxide*  
*clindamycin gel, solution*  
*clindamycin-benzoyl*  
*peroxide*  
*erythromycin solution*  
*erythromycin-benzoyl*  
*peroxide*  
*tretinoin*  
EPIDUO  
ONEXTON  
TAZORAC

## § ACTINIC KERATOSIS

*fluorouracil cream 5%*  
*fluorouracil solution*  
*imiquimod*  
ZYCLARA

## § ANTIBIOTICS

*gentamicin*  
*mupirocin ointment*

## § ANTIFUNGALS

*ciclopirox*  
*clotrimazole*  
*econazole*  
*ketoconazole*  
*luliconazole*  
*nystatin*  
NAFTIN

## § ANTIPSORIATICS

*acitretin*  
*calcipotriene*  
*calcipotriene-betamethasone*  
*methoxsalen*  
DUOBRIL  
ENSTILAR

## § ANTISEBORRHEICS

*ketoconazole shampoo 2%*  
*selenium sulfide lotion 2.5%*

## § ATOPIC DERMATITIS

*pimecrolimus*  
*tacrolimus*  
EUCRISA

## CORTICOSTEROIDS

### § Low Potency

*desonide*  
*hydrocortisone*

### § Medium Potency

*hydrocortisone butyrate*  
*mometasone*  
*triamcinolone*

### § High Potency

*desoximetasone*  
*fluocinonide*  
BRYHALI

### § Very High Potency

*clobetasol cream, foam, gel,*  
*lotion, ointment, shampoo*  
*halobetasol cream, ointment*

## § LOCAL ANALGESICS

*lidocaine patch*

## § ROSACEA

*azelaic acid gel*  
*doxycycline monohydrate*  
*delayed-rel capsule*  
*metronidazole*  
FINACEA FOAM  
SOOLANTRA

## MOUTH / THROAT / DENTAL AGENTS PROTECTANTS

EPISIL

## OPHTHALMIC

### § ANTIALLERGICS

*azelastine*  
*bepotastine*  
*cromolyn sodium*  
*olopatadine*  
LASTACFT  
ZERVIAE

### § ANTI-INFECTIVES

*ciprofloxacin*  
*erythromycin*  
*gentamicin*  
*levofloxacin*  
*moxifloxacin*  
*ofloxacin*  
*sulfacetamide*  
*tobramycin*  
BESIVANCE  
CILOXAN OINTMENT

### § ANTI-INFECTIVE / ANTI-INFLAMMATORY COMBINATIONS

*neomycin-polymyxin B-*  
*bacitracin-hydrocortisone*  
*neomycin-polymyxin B-*  
*dexamethasone*  
*tobramycin-dexamethasone*  
TOBRADEX OINTMENT  
TOBRADEX ST

## ANTI-INFLAMMATORIES

### § Nonsteroidal

*bromfenac*  
*diclofenac*  
*ketorolac*  
ACUVAIL  
ILEVRO  
NEVANAC

### § Steroidal

*dexamethasone*  
*difluprednate*  
*loteprednol*  
*prednisolone acetate 1%*  
FML FORTE  
FML S.O.P.  
MAXIDEX  
PRED MILD

### § ANTIVIRALS

*trifluridine*

**BETA-BLOCKERS****§ Nonselective**

*timolol maleate solution*  
BETIMOL

**Selective**

BETOPTIC S

**§ CARBONIC ANHYDRASE INHIBITORS**

*brinzolamide*  
*dozolamide*

**§ CARBONIC ANHYDRASE INHIBITOR / BETA-BLOCKER COMBINATIONS**  
*dozolamide-timolol*

**CARBONIC ANHYDRASE INHIBITOR / SYMPATHOMIMETIC COMBINATIONS**  
SIMBRINZA

**DRY EYE DISEASE**

RESTASIS  
XIIDRA

**§ PROSTAGLANDINS**

*latanoprost*  
*travoprost*  
LUMIGAN  
ZIOPTAN

**RHO KINASE INHIBITORS**  
RHOPRESSA

**RHO KINASE INHIBITOR / PROSTAGLANDIN COMBINATIONS**  
ROCKLATAN

**§ SYMPATHOMIMETICS**

*brimonidine*  
ALPHAGAN P

**SYMPATHOMIMETIC / BETA-BLOCKER COMBINATIONS**  
COMBIGAN

**OTIC****§ ANTI-INFECTIVES**

*acetic acid*  
*ofloxacin otic*

**§ ANTI-INFECTIVE / ANTI-INFLAMMATORY COMBINATIONS**

*ciprofloxacin-dexamethasone*  
*neomycin-polymyxin B-hydrocortisone*

**QUICK REFERENCE DRUG LIST****A**

ABILIFY MAINTENA  
ABSORICA  
ACCU-CHEK AVIVA PLUS STRIPS AND KITS <sup>2</sup>  
ACCU-CHEK COMPACT PLUS STRIPS AND KITS <sup>2</sup>  
ACCU-CHEK GUIDE STRIPS AND KITS <sup>2</sup>  
ACCU-CHEK SMARTVIEW STRIPS AND KITS <sup>2</sup>  
*acetic acid*  
*acitretin*  
ACUVAIL  
*acyclovir capsule, tablet*  
*adapalene*  
ADVAIR DISKUS  
ADVAIR HFA  
AIMOVIG  
AJOVY  
*albuterol inhalation solution*  
*albuterol sulfate*  
*CFC-free aerosol*  
*alendronate*  
*alfuzosin ext-rel*  
*aliskiren*  
*allopurinol*  
*alosetron*  
ALPHAGAN P  
*alprazolam*  
*amantadine*  
*amiloride*  
*amlodipine*  
*amlodipine-atorvastatin*  
*amlodipine-olmesartan*  
*amlodipine-telmisartan*  
*amlodipine-valsartan*  
*amoxicillin*  
*amoxicillin-clavulanate*  
*amphetamine-dextroamphetamine mixed salts*  
*amphetamine-dextroamphetamine mixed salts ext-rel*  
ANDRODERM  
ANNOVERA  
ANORO ELLIPTA  
*aprepitant*  
*aripiprazole*  
ARISTADA  
ARISTADA INITIO

*armodafinil*  
ARNUITY ELLIPTA  
ASMANEX  
*atenolol*  
*atomoxetine*  
*atorvastatin*  
ATROVENT HFA  
AURYXIA  
AUVI-Q  
*azelaic acid gel*  
*azelastine*  
*azelastine-fluticasone*  
*azithromycin*

**B**

*balsalazide*  
BAQSIMI  
BASAGLAR  
BD ULTRAFINE  
INSULIN SYRINGES AND NEEDLES  
BELBUCA  
BELSOMRA  
*benzoyl peroxide*  
*bepotastine*  
BESIVANCE  
BETIMOL  
BETOPTIC S  
BEVESPI AEROSPHERE  
*bicalutamide*  
BIDIL  
BREO ELLIPTA  
BREZTRI AEROSPHERE  
BRILINTA  
*brimonidine*  
*brinzolamide*  
*bromfenac*  
BRYHALI  
*budesonide capsule*  
*budesonide ext-rel*  
*budesonide inhalation suspension*  
*buprenorphine transdermal*  
*buprenorphine-naloxone sublingual*  
*bupropion*  
*bupropion ext-rel*

**C**

*calcipotriene*  
*calcipotriene-betamethasone*  
*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*  
*cholestyramine*  
*ciclopirox*  
CILOXAN OINTMENT  
*ciprofloxacin*  
*ciprofloxacin-dexamethasone*  
*citalopram*  
*clarithromycin*  
*clarithromycin ext-rel*  
CLIMARA PRO  
*clindamycin*  
*clindamycin gel, solution*  
*clindamycin-benzoyl peroxide*  
*clobazam*  
*clobetasol cream, foam, gel, lotion, ointment, shampoo*  
*clonazepam*  
*clopidogrel*  
*clotrimazole*  
*clozapine*  
*codeine-acetaminophen*  
*colchicine*  
*colesevelam*  
COMBIGAN  
COMBIPATCH  
CORLANOR  
CORTIFOAM  
CREON  
CRINONE  
*cromolyn sodium*  
*cyclobenzaprine*

**D**

DALIRESP  
*darifenacin ext-rel*

*desonide*  
*desoximetasone*  
*desvenlafaxine ext-rel*  
*dexamethasone*  
DEXCOM CONTINUOUS GLUCOSE MONITORING SYSTEM  
*dexmethylphenidate ext-rel*  
*diazepam*  
*diazepam rectal gel*  
*diclofenac*  
*diclofenac sodium*  
*diclofenac sodium gel 1%*  
*diclofenac sodium solution*  
*diclofenac sodium-misoprostol*  
*dicloxacillin*  
*dicyclomine*  
DIFICID  
*difluprednate*  
*digoxin*  
*diltiazem ext-rel*  
*diphenoxylate-atropine*  
*dipyridamole ext-rel-aspirin*  
*disopyramide*  
*divalproex sodium*  
*divalproex sodium ext-rel*  
DIVIGEL  
*donepezil*  
*dozolamide*  
*dozolamide-timolol*  
*doxazosin*  
*doxepin*  
*doxycycline hyclate*  
*doxycycline monohydrate delayed-rel capsule*  
*doxylamine-pyridoxine delayed-rel*  
*dronabinol*  
DUAVEE  
*duoxetine*  
DUOBRII  
*dutasteride*  
*dutasteride-tamsulosin*

**E**

*econazole*  
*eletriptan*  
ELIQUIS  
EMGALITY  
EMVERM  
*enalapril*

ENDOMETRIN  
*enoxaparin*  
ENSTILAR  
*entacapone*  
ENTRESTO  
EPIDUO  
*epinephrine auto-injector*  
EPIPEN  
EPIPEN JR  
EPISIL  
*ergotamine-caffeine*  
*erythromycin*  
*erythromycin solution*  
*erythromycin-benzoyl peroxide*  
*erythromycin*  
*escitalopram*  
*esomeprazole delayed-rel*  
*estradiol*  
*estradiol-norethindrone*  
ESTRING  
*eszopiclone*  
*ethinyl estradiol-drospirenone*  
*ethinyl estradiol-drospirenone-levomefolate*  
*ethinyl estradiol-etonogestrel*  
*ethinyl estradiol-levonorgestrel*  
*ethinyl estradiol-norelgestromin*  
*ethinyl estradiol-norethindrone acetate*  
*ethinyl estradiol-norethindrone acetate-iron*  
*ethinyl estradiol-norgestimate*  
*ethosuximide*  
EUCRISA  
EVAMIST  
*ezetimibe*  
*ezetimibe-simvastatin*

**F**

*famotidine*  
FARXIGA  
*fenofibrate*  
*fenofibric acid delayed-rel*  
*fentanyl transdermal*  
*fentanyl transmucosal lozenge*  
FETZIMA  
FIASP

FINACEA FOAM  
*finasteride*  
FLOVENT DISKUS  
FLOVENT HFA  
*fluconazole*  
*fludrocortisone*  
*flunisolide*  
*fluocinonide*  
*fluorouracil cream 5%*  
*fluorouracil solution*  
*fluoxetine*  
*fluticasone*  
*fluvastatin*  
FML FORTE  
FML S.O.P.  
*fondaparinux*  
*fosinopril*  
*fosinopril-hydrochlorothiazide*  
FREESTYLE LIBRE  
CONTINUOUS GLUCOSE  
MONITORING SYSTEM  
*furosemide*  
FYCOMPA

## G

*gabapentin*  
*galantamine*  
*galantamine ext-rel*  
*gentamicin*  
*glimepiride*  
*glipizide*  
*glipizide ext-rel*  
*glipizide-metformin*  
GLUCAGEN HYPOKIT  
GLUCAGON  
EMERGENCY KIT  
GLYXAMBI  
GRALISE  
*granisetron*  
GRASTEK  
*guanfacine ext-rel*  
GVOKE

## H

*halobetasol cream, ointment*  
HUMALOG  
HUMALOG MIX  
HUMULIN 70/30  
HUMULIN N  
HUMULIN R  
HUMULIN R U-500  
*hydrochlorothiazide*  
*hydrocodone ext-rel*  
*hydrocodone-acetaminophen*  
*hydrocortisone*  
*hydrocortisone butyrate*  
*hydrocortisone enema*  
*hydromorphone*  
*hydromorphone ext-rel*

## I

*ibandronate*  
*ibuprofen*  
ILEVRO  
*imiquimod*  
INCRUSE ELLIPTA  
INSULIN ASPART  
INSULIN ASPART 70/30

INSULIN LISPRO  
INVOKAMET  
INVOKAMET XR  
INVOKANA  
*ipratropium*  
*inhalation solution*  
*ipratropium-albuterol*  
*inhalation solution*  
*irbesartan*  
*irbesartan-*  
*hydrochlorothiazide*  
*isosorbide dinitrate*  
*isosorbide mononitrate*  
*itraconazole*  
*ivermectin*

## J

JANUMET  
JANUMET XR  
JANUVIA  
JARDIANCE  
JENTADUETO  
JENTADUETO XR

## K

KERENDIA  
*ketoconazole*  
*ketoconazole shampoo 2%*  
*ketorolac*  
KLOXXADO

## L

*lactulose solution*  
*lamotrigine*  
*lamotrigine ext-rel*  
*lansoprazole delayed-rel*  
*lanthanum carbonate*  
LANTUS  
LASTACAPT  
*latanoprost*  
LATUDA  
*levalbuterol tartrate*  
*CFC-free aerosol*  
LEVEMIR  
*levetiracetam*  
*levetiracetam ext-rel*  
*levocarnitine*  
*levofloxacin*  
*levothyroxine*  
*lidocaine patch*  
*linezolid*  
LINZESS  
*liothyronine*  
*lisinopril*  
*lisinopril-hydrochlorothiazide*  
LO LOESTRIN FE  
LOKELMA  
*loperamide*  
*lorazepam*  
*losartan*  
*losartan-hydrochlorothiazide*  
*loteprednol*  
*lovastatin*  
*lubiprostone*  
*luliconazole*  
LUMIGAN  
LYUMJEV

## M

MAXIDEX  
*meclizine*  
*medroxyprogesterone*  
*megestrol acetate*  
*meloxicam*  
*memantine*  
*mesalamine delayed-rel*  
*mesalamine ext-rel*  
*mesalamine suppository*  
*mesalamine suspension*  
*metformin*  
*metformin ext-rel*  
*methadone*  
*methoxsalen*  
*methylphenidate*  
*methylphenidate ext-rel*  
*methylprednisolone*  
*metoclopramide*  
*metolazone*  
*metoprolol succinate ext-rel*  
*metoprolol tartrate*  
*metronidazole*  
*minocycline*  
*mirtazapine*  
*modafinil*  
*mometasone*  
*montelukast*  
*morphine*  
*morphine ext-rel*  
MOVANTIK  
*moxifloxacin*  
MULTAQ  
*mupirocin ointment*  
MUSE  
MYDAYIS  
MYFEMBREE  
MYRBETRIQ

## N

*nadolol*  
NAFTIN  
*naloxone injection*  
NAMZARIC  
*naproxen*  
*naratriptan*  
NARCAN NASAL SPRAY  
NATAZIA  
*nateglinide*  
NATESTO  
*neбиволol*  
*neomycin-polymyxin B-*  
*bacitracin-hydrocortisone*  
*neomycin-polymyxin B-*  
*dexamethasone*  
*neomycin-polymyxin B-*  
*hydrocortisone*  
NEUPRO  
NEVANAC  
NEXLETOL  
NEXLIZET  
*niacin ext-rel*  
*nifedipine ext-rel*  
*nitrofurantoin*  
*nitroglycerin lingual spray*  
*nitroglycerin sublingual*  
NOVOLIN 70/30  
NOVOLIN N

NOVOLIN R  
NOVOLOG  
NOVOLOG MIX 70/30  
NUCYNTA  
NUCYNTA ER  
NUEDEXTA  
NURTEC ODT  
*nystatin*

## O

*ofloxacin*  
*ofloxacin otic*  
*olanzapine*  
*olmesartan*  
*olmesartan-amlodipine-*  
*hydrochlorothiazide*  
*olmesartan-*  
*hydrochlorothiazide*  
*olopatadine*  
*omega-3 acid ethyl esters*  
*omeprazole delayed-rel*  
OMNIPOD DASH INSULIN  
INFUSION PUMP  
OMNIPOD INSULIN  
INFUSION PUMP  
*ondansetron*  
ONETOUCH ULTRA  
STRIPS AND KITS<sup>2</sup>  
ONETOUCH VERIO  
STRIPS AND KITS<sup>2</sup>  
ONEXTON  
ONZETRA XSAIL  
ORIAHNN  
ORLISSA  
*oseltamivir*  
OSPHENA  
*oxazepam*  
*oxcarbazepine*  
OXTELLAR XR  
*oxybutynin*  
*oxybutynin ext-rel*  
*oxycodone*  
*oxycodone-acetaminophen*  
OXYCONTIN  
OZEMPIC

## P

*pantoprazole delayed-rel*  
*paroxetine HCl*  
*paroxetine HCl ext-rel*  
*paroxetine mesylate*  
*peg 3350-electrolytes*  
*penicillin VK*  
PENTASA  
PERFOROMIST  
*phenobarbital*  
*phenytoin*  
*phenytoin sodium extended*  
PHOSLYRA  
*pimecrolimus*  
*pindolol*  
*pioglitazone*  
*pioglitazone-glimepiride*  
*pioglitazone-metformin*  
*potassium chloride liquid*  
*pramipexole*  
*pramipexole ext-rel*  
*prasugrel*

*pravastatin*  
PRED MILD  
*prednisolone acetate 1%*  
*prednisolone solution*  
*prednisone*  
*pregabalin*  
*pregabalin ext-rel*  
PREMARIN  
PREMARIN CREAM  
PREMPHASE  
PREMPRO  
*prenatal vitamins*  
*primidone*  
*probenecid*  
*prochlorperazine*  
PROCTOFOAM-HC  
*progesterone, micronized*  
*promethazine*  
*propranolol*  
*propranolol ext-rel*  
PULMICORT FLEXHALER  
PYLERA  
*pyrimethamine*

## Q

QELBREE  
QSYMIA  
QTERN  
*quetiapine*  
*quetiapine ext-rel*  
*quinapril*  
*quinapril-hydrochlorothiazide*  
QVAR REDIHALER

## R

RAGWITEK  
*raloxifene*  
*ramelteon*  
*ramipril*  
*ranolazine ext-rel*  
*rasagiline*  
RELENZA  
*repaglinide*  
RESTASIS  
RHOPRESSA  
*risedronate*  
*risperidone*  
*rivastigmine*  
*rivastigmine transdermal*  
*rizatriptan*  
ROCKLATAN  
*ropinirole*  
*ropinirole ext-rel*  
*rosuvastatin*  
*rufinamide*  
RYBELSUS

## S

SANCUSO  
SAVELLA  
SAXENDA  
*scopolamine transdermal*  
*selegiline*  
*selenium sulfide lotion 2.5%*  
SEREVENT  
*sertraline*  
*sevelamer carbonate*  
*sildenafil*



*silodosin*  
 SIMBRINZA  
*simvastatin*  
*solifenacin*  
 SOLIQUA  
 SOOLANTRA  
*sotalol*  
 SPIRIVA  
*spironolactone*  
*spironolactone-hydrochlorothiazide*  
 STIOLTO RESPIMAT  
 STRIVERDI RESPIMAT  
 SUBSYS  
*sucralfate*  
*sulfacetamide*  
*sulfamethoxazole-trimethoprim*  
*sulfasalazine*  
*sulfasalazine delayed-rel*  
*sumatriptan*  
 SUNOSI  
 SUPRAX  
 SUPREP  
 SYMBICORT  
 SYMLINPEN  
 SYMPROIC  
 SYNJARDY

SYNJARDY XR  
 SYNTHROID

**T**

*tacrolimus*  
*tadalafil*  
 TALICIA  
*tamsulosin*  
 TAZORAC  
 TEKTURNA HCT  
*telmisartan*  
*telmisartan-hydrochlorothiazide*  
*terazosin*  
*terbinafine tablet*  
*testosterone gel*  
*testosterone solution*  
*tetracycline*  
*tiagabine*  
*timolol maleate solution*  
 TOBRADEX OINTMENT  
 TOBRADEX ST  
*tobramycin*  
*tobramycin-dexamethasone*  
*tolterodine*  
*tolterodine ext-rel*  
*topiramate*  
*toremide*  
 TOUJEO

TOVIAZ  
 TRADJENTA  
*tramadol*  
*tramadol ext-rel*  
*travoprost*  
*trazodone*  
 TRELEGY ELLIPTA  
 TRESIBA  
*tretinoin*  
*triamcinolone*  
*triamterene*  
*triamterene-hydrochlorothiazide*  
*trifluridine*  
 TRIJARDY XR  
*trimethobenzamide*  
 TRINTELLIX  
 TROKENDI XR  
*tropium*  
*tropium ext-rel*  
 TRULICITY

**U**

UBRELVY

**V**

*valacyclovir*  
*valganciclovir*  
*valproic acid*

*valsartan*  
*valsartan-hydrochlorothiazide*  
*vancomycin capsule*  
 VARUBI  
 VASCEPA  
 VELPHORO  
 VELTASSA  
*venlafaxine*  
*venlafaxine ext-rel capsule*  
*verapamil ext-rel*  
 VERQUVO  
 V-GO INSULIN  
 INFUSION PUMP  
 VIBERZI  
 VICTOZA  
 VIIBRYD  
 VIMPAT  
 VIOKACE  
 VRAYLAR  
 VYVANSE

**W**

*warfarin*  
 WEGOVY

**X**

XARELTO  
 XIFAXAN 550 MG  
 XIGDUO XR

XIIDRA  
 XTAMPZA ER  
 XULTOPHY

**Y**

YUPELRI

**Z**

*zafirlukast*  
 ZEGALOGUE  
 ZEMBRACE SYMTOUCH  
 ZENPEP  
 ZERVIAE  
*zileuton ext-rel*  
 ZIOPTAN  
*ziprasidone*  
*zolmitriptan*  
*zolpidem*  
*zolpidem ext-rel*  
*zolpidem sublingual*  
 ZOMIG NASAL SPRAY  
*zonisamide*  
 ZUBSOLV  
 ZYCLARA

**PREFERRED OPTIONS LIST**

DRUG NAME(S)	PREFERRED OPTION(S)†	DRUG NAME(S)	PREFERRED OPTION(S)†
ABILIFY	<i>aripiprazole</i> , <i>clozapine</i> , <i>olanzapine</i> , <i>quetiapine</i> , <i>quetiapine ext-rel</i> , <i>risperidone</i> , <i>ziprasidone</i> , LATUDA, VRAYLAR	ASACOL HD	<i>balsalazide</i> , <i>mesalamine delayed-rel</i> , <i>mesalamine ext-rel</i> , <i>sulfasalazine</i> , <i>sulfasalazine delayed-rel</i> , PENTASA
ACTOS	<i>pioglitazone</i>	ASCENSIA STRIPS AND KITS 4	ACCU-CHEK AVIVA PLUS STRIPS AND KITS 2, ACCU-CHEK COMPACT PLUS STRIPS AND KITS 2, ACCU-CHEK GUIDE STRIPS AND KITS 2, ACCU-CHEK SMARTVIEW STRIPS AND KITS 2, ONETOUCH ULTRA STRIPS AND KITS 2, ONETOUCH VERIO STRIPS AND KITS 2
ADDERALL XR	<i>amphetamine-dextroamphetamine mixed salts ext-rel</i> , <i>dexmethylphenidate ext-rel</i> , <i>methylphenidate ext-rel</i> , MYDAYIS, VYVANSE	ATACAND, ATACAND HCT	<i>candesartan</i> , <i>candesartan-hydrochlorothiazide</i> , <i>irbesartan</i> , <i>irbesartan-hydrochlorothiazide</i> , <i>losartan</i> , <i>losartan-hydrochlorothiazide</i> , <i>olmesartan</i> , <i>olmesartan-hydrochlorothiazide</i> , <i>telmisartan</i> , <i>telmisartan-hydrochlorothiazide</i> , <i>valsartan</i> , <i>valsartan-hydrochlorothiazide</i>
ALLISON MEDICAL INSULIN SYRINGES 3	BD ULTRAFINE INSULIN SYRINGES	AZELEX	<i>adapalene</i> , <i>benzoyl peroxide</i> , <i>clindamycin gel</i> , <i>clindamycin solution</i> , <i>clindamycin-benzoyl peroxide</i> , <i>erythromycin solution</i> , <i>erythromycin-benzoyl peroxide</i> , <i>tretinoin</i> , EPIDUO, ONEXTON, TAZORAC
ALORA	<i>estradiol</i> , DIVIGEL, EVAMIST	BECONASE AQ	<i>azelastine-fluticasone</i> , <i>flunisolide</i> , <i>fluticasone</i> , <i>mometasone</i>
ALTOPREV	<i>atorvastatin</i> , <i>ezetimibe-simvastatin</i> , <i>fluvastatin</i> , <i>lovastatin</i> , <i>pravastatin</i> , <i>rosuvastatin</i> , <i>simvastatin</i>	BENSAL HP	<i>desonide</i> , <i>hydrocortisone</i>
ALVESCO	ARNUITY ELLIPTA, ASMANEX, FLOVENT DISKUS, FLOVENT HFA, PULMICORT FLEXHALER, QVAR REDIHALER	BENZAC AC	<i>adapalene</i> , <i>benzoyl peroxide</i> , <i>clindamycin gel</i> , <i>clindamycin solution</i> , <i>clindamycin-benzoyl peroxide</i> , <i>erythromycin solution</i> , <i>erythromycin-benzoyl peroxide</i> , <i>tretinoin</i> , EPIDUO, ONEXTON, TAZORAC
AMRIX	<i>cyclobenzaprine</i>	BETAPACE, BETAPACE AF	<i>sotalol</i>
ANDROGEL 1%	<i>testosterone gel</i> , <i>testosterone solution</i> , ANDRODERM, NATESTO		
ANGELIQ	<i>estradiol-norethindrone</i> , PREMPHASE, PREMPRO		
APEXICON E	<i>desoximetasone</i> , <i>fluocinonide</i> , BRYHALI		
APIDRA	FIASP, HUMALOG, INSULIN LISPRO, NOVOLOG		
ARMOUR THYROID	<i>levothyroxine</i> , <i>liothyronine</i> , SYNTHROID		
ARTHROTEC	<i>celecoxib</i> ; <i>diclofenac sodium</i> , <i>ibuprofen</i> , <i>meloxicam</i> or <i>naproxen</i> WITH <i>esomeprazole delayed-rel</i> , <i>lansoprazole delayed-rel</i> , <i>omeprazole delayed-rel</i> , or <i>pantoprazole delayed-rel</i>		

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BREEZE 2 STRIPS AND KITS 4	ACCU-CHEK AVIVA PLUS STRIPS AND KITS 2, ACCU-CHEK COMPACT PLUS STRIPS AND KITS 2, ACCU-CHEK GUIDE STRIPS AND KITS 2, ACCU-CHEK SMARTVIEW STRIPS AND KITS 2, ONETOUCH ULTRA STRIPS AND KITS 2, ONETOUCH VERIO STRIPS AND KITS 2	EDARBI, EDARBYCLO	candesartan, candesartan-hydrochlorothiazide, irbesartan, irbesartan-hydrochlorothiazide, losartan, losartan-hydrochlorothiazide, olmesartan, olmesartan-hydrochlorothiazide, telmisartan, telmisartan-hydrochlorothiazide, valsartan, valsartan-hydrochlorothiazide
BYDUREON BCISE	OZEMPIC, RYBELSUS, TRULICITY, VICTOZA	EDLUAR	doxepin, eszopiclone, ramelteon, zolpidem, zolpidem ext-rel, zolpidem sublingual, BELSOMRA
BYETTA	OZEMPIC, RYBELSUS, TRULICITY, VICTOZA	E.E.S. GRANULES	erythromycins
CAFERGOT	eletriptan, ergotamine-caffeine, naratriptan, rizatriptan, sumatriptan, zolmitriptan, NURTEC ODT, ONZETRA XSAIL, UBRELVY, ZEMBRACE SYMTOUCH, ZOMIG NASAL SPRAY	ERYPED	erythromycins
CARAC	fluorouracil cream 5%, fluorouracil solution, imiquimod, ZYCLARA	EXFORGE	amlodipine-olmesartan, amlodipine-telmisartan, amlodipine-valsartan
CARDIZEM, CARDIZEM CD, CARDIZEM LA	diltiazem ext-rel	EXFORGE HCT	olmesartan-amlodipine-hydrochlorothiazide
CARNITOR, CARNITOR SF	levocarnitine	FANAPT	aripiprazole, clozapine, olanzapine, quetiapine, quetiapine ext-rel, risperidone, ziprasidone, LATUDA, VRAYLAR
CLINDAGEL	adapalene, benzoyl peroxide, clindamycin gel, clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, EPIDUO, ONEXTON, TAZORAC	FEMRING	estradiol, ESTRING, PREMARIN CREAM
CLOBEX SPRAY	clobetazol foam	FIORICET CAPSULE	diclofenac sodium, ibuprofen, naproxen
COLAZAL	balsalazide, mesalamine delayed-rel, mesalamine ext-rel, sulfasalazine, sulfasalazine delayed-rel, PENTASA	FML LIQUIFILM	dexamethasone, difluprednate, loteprednol, prednisolone acetate 1%, FML FORTE, FML S.O.P., MAXIDEX, PRED MILD
CONTOUR NEXT STRIPS AND KITS 4	ACCU-CHEK AVIVA PLUS STRIPS AND KITS 2, ACCU-CHEK COMPACT PLUS STRIPS AND KITS 2, ACCU-CHEK GUIDE STRIPS AND KITS 2, ACCU-CHEK SMARTVIEW STRIPS AND KITS 2, ONETOUCH ULTRA STRIPS AND KITS 2, ONETOUCH VERIO STRIPS AND KITS 2	FORTAMET	metformin, metformin ext-rel
CONTOUR STRIPS AND KITS 4	ACCU-CHEK AVIVA PLUS STRIPS AND KITS 2, ACCU-CHEK COMPACT PLUS STRIPS AND KITS 2, ACCU-CHEK GUIDE STRIPS AND KITS 2, ACCU-CHEK SMARTVIEW STRIPS AND KITS 2, ONETOUCH ULTRA STRIPS AND KITS 2, ONETOUCH VERIO STRIPS AND KITS 2	FORTESTA	testosterone gel, testosterone solution, ANDRODERM, NATESTO
CRESTOR	atorvastatin, ezetimibe-simvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin	FOSAMAX PLUS D	alendronate, ibandronate, risedronate
CYMBALTA	desvenlafaxine ext-rel, duloxetine, venlafaxine, venlafaxine ext-rel capsule, FETZIMA	FOSRENOL	calcium acetate, lanthanum carbonate, sevelamer carbonate, AURYXIA, PHOSLYRA, VELPHORO
DELZICOL	balsalazide, mesalamine delayed-rel, mesalamine ext-rel, sulfasalazine, sulfasalazine delayed-rel, PENTASA	FREESTYLE STRIPS AND KITS 4	ACCU-CHEK AVIVA PLUS STRIPS AND KITS 2, ACCU-CHEK COMPACT PLUS STRIPS AND KITS 2, ACCU-CHEK GUIDE STRIPS AND KITS 2, ACCU-CHEK SMARTVIEW STRIPS AND KITS 2, ONETOUCH ULTRA STRIPS AND KITS 2, ONETOUCH VERIO STRIPS AND KITS 2
DETROL LA	darifenacin ext-rel, oxybutynin ext-rel, solifenacin, tolterodine, tolterodine ext-rel, trospium, trospium ext-rel, MYRBETRIQ, TOVIAZ	FROVA	eletriptan, naratriptan, rizatriptan, sumatriptan, zolmitriptan, NURTEC ODT, ONZETRA XSAIL, UBRELVY, ZEMBRACE SYMTOUCH, ZOMIG NASAL SPRAY
DIOVAN, DIOVAN HCT	candesartan, candesartan-hydrochlorothiazide, irbesartan, irbesartan-hydrochlorothiazide, losartan, losartan-hydrochlorothiazide, olmesartan, olmesartan-hydrochlorothiazide, telmisartan, telmisartan-hydrochlorothiazide, valsartan, valsartan-hydrochlorothiazide	GELNIQUE	darifenacin ext-rel, oxybutynin ext-rel, solifenacin, tolterodine, tolterodine ext-rel, trospium, trospium ext-rel, MYRBETRIQ, TOVIAZ
DORAL	doxepin, eszopiclone, ramelteon, zolpidem, zolpidem ext-rel, zolpidem sublingual, BELSOMRA	GLUMETZA	metformin, metformin ext-rel
DUTOPROL	metoprolol succinate ext-rel <b>WITH</b> hydrochlorothiazide	INDOCIN	diclofenac sodium, ibuprofen, meloxicam, naproxen
DYRENIUM	amiloride, triamterene	INNOPRAN XL	atenolol, carvedilol, carvedilol phosphate ext-rel, metoprolol succinate ext-rel, metoprolol tartrate, nadolol, nebivolol, pindolol, propranolol, propranolol ext-rel
		INTUNIV	amphetamine-dextroamphetamine mixed salts ext-rel, atomoxetine, dexmethylphenidate ext-rel, guanfacine ext-rel, methylphenidate ext-rel, MYDAYIS, QELBREE, VYVANSE
		ISTALOL	timolol maleate solution, BETIMOL, BETOPTIC S
		JALYN	dutasteride-tamsulosin; dutasteride or finasteride <b>WITH</b> alfuzosin ext-rel, doxazosin, silodosin, tamsulosin or terazosin

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DRUG NAME(S)	PREFERRED OPTION(S)†	DRUG NAME(S)	PREFERRED OPTION(S)†
KAZANO	JANUMET, JANUMET XR, JENTADUETO, JENTADUETO XR	PENNSAID	<i>diclofenac sodium, diclofenac sodium gel 1%, diclofenac sodium solution, ibuprofen, meloxicam, naproxen</i>
KOMBIGLYZE XR	JANUMET, JANUMET XR, JENTADUETO, JENTADUETO XR	PERRIGO NEEDLES <sup>3</sup>	BD ULTRAFINE NEEDLES
LANOXIN TABLET (125 MCG and 250 MCG only)	<i>digoxin</i>	PERTZYE	CREON, VIOKACE, ZENPEP
LESCOL XL	<i>atorvastatin, ezetimibe-simvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin</i>	PEXEVA	<i>citalopram, escitalopram, fluoxetine, paroxetine HCl, paroxetine HCl ext-rel, sertraline, TRINTELLIX, VIIBRYD</i>
LIPITOR	<i>atorvastatin, ezetimibe-simvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin</i>	PLAVIX	<i>clopidogrel, prasugrel, BRILINTA</i>
LIVALO	<i>atorvastatin, ezetimibe-simvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin</i>	PRADAXA	<i>warfarin, ELIQUIS, XARELTO</i>
LUNESTA	<i>doxepin, eszopiclone, ramelteon, zolpidem, zolpidem ext-rel, zolpidem sublingual, BELSOMRA</i>	PRECISION XTRA STRIPS AND KITS <sup>4</sup>	ACCU-CHEK AVIVA PLUS STRIPS AND KITS <sup>2</sup> , ACCU-CHEK COMPACT PLUS STRIPS AND KITS <sup>2</sup> , ACCU-CHEK GUIDE STRIPS AND KITS <sup>2</sup> , ACCU-CHEK SMARTVIEW STRIPS AND KITS <sup>2</sup> , ONETOUCH ULTRA STRIPS AND KITS <sup>2</sup> , ONETOUCH VERIO STRIPS AND KITS <sup>2</sup>
MACRODANTIN	<i>nitrofurantoin</i>	PRED FORTE	<i>dexamethasone, difluprednate, loteprednol, prednisolone acetate 1%, FML FORTE, FML S.O.P., MAXIDEX, PRED MILD</i>
MENEST	<i>estradiol, PREMARIN</i>	PREFEST	<i>estradiol-norethindrone, PREMPHASE, PREMPRO</i>
MENOSTAR	<i>estradiol</i>	PRENATAL PLUS	<i>prenatal vitamins</i>
MIACALCIN INJECTION	<i>alendronate, calcitonin-salmon, ibandronate, risedronate, FORTEO</i>	PREVACID	<i>esomeprazole delayed-rel, lansoprazole delayed-rel, omeprazole delayed-rel, pantoprazole delayed-rel</i>
MICARDIS, MICARDIS HCT	<i>candesartan, candesartan-hydrochlorothiazide, irbesartan, irbesartan-hydrochlorothiazide, losartan, losartan-hydrochlorothiazide, olmesartan, olmesartan-hydrochlorothiazide, telmisartan, telmisartan-hydrochlorothiazide, valsartan, valsartan-hydrochlorothiazide</i>	PROTONIX	<i>esomeprazole delayed-rel, lansoprazole delayed-rel, omeprazole delayed-rel, pantoprazole delayed-rel</i>
MILLIPRED	<i>dexamethasone, hydrocortisone, methylprednisolone, prednisolone solution, prednisone</i>	PROTOPIC	<i>pimecrolimus, tacrolimus, EUCRISA</i>
NAPRELAN	<i>diclofenac sodium, ibuprofen, meloxicam, naproxen</i>	PROVENTIL HFA	<i>albuterol sulfate CFC-free aerosol, levalbuterol tartrate CFC-free aerosol</i>
NESINA	JANUVIA, TRADJENTA	QNASL	<i>azelastine-fluticasone, flunisolide, fluticasone, mometasone</i>
NEXIUM	<i>esomeprazole delayed-rel, lansoprazole delayed-rel, omeprazole delayed-rel, pantoprazole delayed-rel</i>	RAYOS	<i>dexamethasone, hydrocortisone, methylprednisolone, prednisolone solution, prednisone</i>
NILANDRON	<i>abiraterone, bicalutamide, ERLEADA, XTANDI, YONSA</i>	RELION INSULIN	HUMULIN INSULIN, NOVOLIN INSULIN
NITROMIST	<i>nitroglycerin lingual spray, nitroglycerin sublingual</i>	RELISTOR	<i>lubiprostone, MOVANTIK, SYMPROIC</i>
NORITATE	<i>azelaic acid gel, metronidazole, FINACEA FOAM, SOOLANTRA</i>	RIMSO-50	Consult doctor
NORVASC	<i>amlodipine</i>	RIOMET	<i>metformin, metformin ext-rel</i>
NOVO NORDISK NEEDLES <sup>3</sup>	BD ULTRAFINE NEEDLES	ROZEREM	<i>doxepin, eszopiclone, ramelteon, zolpidem, zolpidem ext-rel, zolpidem sublingual, BELSOMRA</i>
OLUX-E	<i>clobetazol foam</i>	SURE-TEST STRIPS AND KITS <sup>4</sup>	ACCU-CHEK AVIVA PLUS STRIPS AND KITS <sup>2</sup> , ACCU-CHEK COMPACT PLUS STRIPS AND KITS <sup>2</sup> , ACCU-CHEK GUIDE STRIPS AND KITS <sup>2</sup> , ACCU-CHEK SMARTVIEW STRIPS AND KITS <sup>2</sup> , ONETOUCH ULTRA STRIPS AND KITS <sup>2</sup> , ONETOUCH VERIO STRIPS AND KITS <sup>2</sup>
OMNARIS	<i>azelastine-fluticasone, flunisolide, fluticasone, mometasone</i>	TESTIM	<i>testosterone gel, testosterone solution, ANDRODERM, NATESTO</i>
ONGLYZA	JANUVIA, TRADJENTA	TRICOR	<i>fenofibrate, fenofibric acid delayed-rel</i>
OSENI	JANUMET, JANUMET XR, JENTADUETO, JENTADUETO XR; JANUVIA or TRADJENTA <b>WITH pioglitazone</b>	TRILIPIX	<i>fenofibrate, fenofibric acid delayed-rel</i>
OWEN MUMFORD NEEDLES <sup>3</sup>	BD ULTRAFINE NEEDLES	TRIVIDIA INSULIN SYRINGES <sup>3</sup>	BD ULTRAFINE INSULIN SYRINGES
OXYTROL	<i>darifenacin ext-rel, oxybutynin ext-rel, solifenacin, tolterodine, tolterodine ext-rel, trospium, trospium ext-rel, MYRBETRIQ, TOVIAZ</i>		
PANCREAZE	CREON, VIOKACE, ZENPEP		

DRUG NAME(S)	PREFERRED OPTION(S)†	DRUG NAME(S)	PREFERRED OPTION(S)†
TRUETEST STRIPS AND KITS <sup>4</sup>	ACCU-CHEK AVIVA PLUS STRIPS AND KITS <sup>2</sup> , ACCU-CHEK COMPACT PLUS STRIPS AND KITS <sup>2</sup> , ACCU-CHEK GUIDE STRIPS AND KITS <sup>2</sup> , ACCU-CHEK SMARTVIEW STRIPS AND KITS <sup>2</sup> , ONETOUCH ULTRA STRIPS AND KITS <sup>2</sup> , ONETOUCH VERIO STRIPS AND KITS <sup>2</sup>	VITAFOL-ONE VOGELXO XOPENEX HFA	<i>prenatal vitamins</i> <i>testosterone gel, testosterone solution,</i> <i>ANDRODERM, NATESTO</i> <i>albuterol sulfate CFC-free aerosol,</i> <i>levalbuterol tartrate CFC-free aerosol</i>
TRUETRACK STRIPS AND KITS <sup>4</sup>	ACCU-CHEK AVIVA PLUS STRIPS AND KITS <sup>2</sup> , ACCU-CHEK COMPACT PLUS STRIPS AND KITS <sup>2</sup> , ACCU-CHEK GUIDE STRIPS AND KITS <sup>2</sup> , ACCU-CHEK SMARTVIEW STRIPS AND KITS <sup>2</sup> , ONETOUCH ULTRA STRIPS AND KITS <sup>2</sup> , ONETOUCH VERIO STRIPS AND KITS <sup>2</sup>	ZEGERID ZETONNA	<i>esomeprazole delayed-rel, lansoprazole</i> <i>delayed-rel, omeprazole delayed-rel,</i> <i>pantoprazole delayed-rel</i> <i>azelastine-fluticasone, flunisolide, fluticasone,</i> <i>момetasone</i>
TUDORZA	ATROVENT HFA, INCRUSE ELLIPTA, SPIRIVA, YUPELRI	ZONEGRAN	<i>carbamazepine, carbamazepine ext-rel,</i> <i>divalproex sodium, divalproex sodium ext-rel,</i> <i>gabapentin, lamotrigine, lamotrigine ext-rel,</i> <i>levetiracetam, levetiracetam ext-rel,</i> <i>oxcarbazepine, phenobarbital, phenytoin,</i> <i>phenytoin sodium extended, primidone,</i> <i>tiagabine, topiramate, valproic acid,</i> <i>zonisamide, FYCOMPA, OXTELLAR XR,</i> <i>TROKENDI XR, VIMPAT</i>
ULTIMED INSULIN SYRINGES <sup>3</sup>	BD ULTRAFINE INSULIN SYRINGES		
ULTIMED NEEDLES <sup>3</sup>	BD ULTRAFINE NEEDLES		
UROXATRAL	<i>alfuzosin ext-rel, doxazosin, silodosin,</i> <i>tamsulosin, terazosin</i>		
VALCYTE	<i>valganciclovir</i>		
VALTREX	<i>acyclovir capsule, acyclovir tablet, valacyclovir</i>	ZYFLO	<i>montelukast, zafirlukast, zileuton ext-rel</i>
VENTOLIN HFA	<i>albuterol sulfate CFC-free aerosol,</i> <i>levalbuterol tartrate CFC-free aerosol</i>		
VIAGRA	<i>sildenafil, tadalafil</i>		

You may be responsible for the full cost of certain non-formulary products that are removed from coverage. Please check with your plan sponsor for more information.

**FOR YOUR INFORMATION: Generics should be considered the first line of prescribing.** This drug list represents a summary of prescription coverage. It is not all-inclusive and does not guarantee coverage. In most instances, a brand-name drug for which a generic product becomes available will be designated as a non-preferred option upon release of the generic product to the market. Specific prescription benefit plan design may not cover certain products or categories, regardless of their appearance in this document. The member's prescription benefit plan may have a different copay for specific products on the list. Unless specifically indicated, drug list products will include all dosage forms. This list represents brand products in CAPS, branded generics in upper- and lowercase *Italics*, and generic products in lowercase *italics*. Generics listed in therapeutic categories are for representational purposes only. 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. Log in to [Caremark.com](https://www.caremark.com) to check coverage and copay information for a specific medicine.

An exception process may exist for specific clinical or regulatory circumstances that may require coverage of an excluded medication.

§ Generics are available in this class and should be considered the first line of prescribing.

<sup>†</sup> The preferred options in this list are a broad representation within therapeutic categories of available treatment options and do not necessarily represent clinical equivalency.

<sup>1</sup> Copayment, copay or coinsurance means the amount a member is required to pay for a prescription in accordance with a Plan, which may be a deductible, a percentage of the prescription price, a fixed amount or other charge, with the balance, if any, paid by a Plan.

<sup>2</sup> An ACCU-CHEK or ONETOUGH blood glucose meter may be provided at no charge by the manufacturer to those individuals currently using a meter other than ACCU-CHEK or ONETOUGH. For more information on how to obtain a blood glucose meter, call: 1-877-418-4746.

<sup>3</sup> BD ULTRAFINE syringes and needles are the only preferred options.

<sup>4</sup> ACCU-CHEK or ONETOUGH brand test strips are the only preferred options.

This document contains references to brand-name prescription drugs that are trademarks or registered trademarks of pharmaceutical manufacturers not affiliated with CVS Caremark. Listed products are for informational purposes only and are not intended to replace the clinical judgment of the prescriber. The document is subject to state-specific regulations and rules, including, but not limited to, those regarding generic substitution, controlled substance schedules, preference for brands and mandatory generics whenever applicable.

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

# Advanced Control Specialty Formulary®

The **CVS Caremark® 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. 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 a prescription benefit program administered by CVS Caremark. Ask your doctor to consider prescribing, when medically appropriate, a preferred medicine from this list. Take this list along when you or a covered family member sees a doctor.

### Please note:

- Your specific prescription benefit plan design may not cover certain products or categories, regardless of their appearance in this document. Products recently approved by the U.S. Food and Drug Administration (FDA) may not be covered upon release to the market.
- Your prescription benefit plan design may alter coverage of certain products or vary copay<sup>1</sup> amounts based on the condition being treated.
- You may be responsible for the full cost of non-formulary products that are removed from coverage.
- For specific information regarding your prescription benefit coverage and copay information, please visit [Caremark.com](https://www.caremark.com) or contact a CVS Caremark Customer Care representative.
- CVS Caremark may contact your doctor after receiving your prescription to request consideration of a drug list product or generic equivalent. This may result in your doctor prescribing, when medically appropriate, a different brand-name product or generic equivalent in place of your original prescription.
- In most instances, a brand-name drug for which a generic product becomes available will be designated as a non-preferred option upon release of the generic product to the market.

## 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 necessary, consider prescribing a brand name on this list.

### Please note:

- Generics should be considered the first line of prescribing.
- The member's prescription benefit plan design may alter coverage of certain products or vary copay amounts based on the condition being treated.
- This drug list represents a summary of prescription coverage. It is not all-inclusive and does not guarantee coverage. The member's specific prescription benefit plan design may not cover certain products or categories, regardless of their appearance in this document. Products recently approved by the FDA may not be covered upon release to the market.
- The member's prescription benefit plan may have a different copay 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 copay information for a specific medicine.

### ANALGESICS

#### VISCOSUPPLEMENTS

DUROLANE  
EUFLEXXA  
GELSYN-3  
SUPARTZ FX

EVOTAZ  
GENVOYA  
ODEFSEY  
PREZCOBIX  
SYMTUZA  
TEMIXYS  
TRIUMEQ

#### § NUCLEOSIDE REVERSE TRANSCRIPTASE INHIBITORS

*abacavir*  
*lamivudine*  
*stavudine*  
*zidovudine*  
EMTRIVA

BARACLUDE SOLUTION  
VELMIDY

#### § HEPATITIS C AGENTS

*ribavirin*  
EPCLUSA (genotypes 1, 2, 3, 4, 5, 6)  
HARVONI (genotypes 1, 4, 5, 6)  
VOSEVI<sup>2</sup>

#### HORMONAL ANTINEOPLASTIC AGENTS

##### § ANTIANDROGENS

*abiraterone*  
ERLEADA  
NUBEQA  
XTANDI  
YONSA

### ANTI-INFECTIVES

#### ANTIRETROVIRAL AGENTS

##### § ANTIRETROVIRAL COMBINATIONS

*abacavir-lamivudine*  
*efavirenz-emtricitabine-tenofovir disoproxil fumarate*  
*efavirenz-lamivudine-tenofovir disoproxil fumarate*  
*emtricitabine-tenofovir disoproxil fumarate*  
*lamivudine-zidovudine*  
BIKTARVY  
CIMDUO  
DESCOVI  
DOVATO

#### FUSION INHIBITORS

FUZEON

#### INTEGRASE INHIBITORS

ISENTRESS  
TIVICAY

#### § NON-NUCLEOSIDE REVERSE TRANSCRIPTASE INHIBITORS

*efavirenz*  
*nevirapine*  
*nevirapine ext-rel*  
EDURANT  
INTELENCE

#### § NUCLEOTIDE REVERSE TRANSCRIPTASE INHIBITORS

*tenofovir disoproxil fumarate*

#### § PROTEASE INHIBITORS

*atazanavir*  
*lopinavir-ritonavir*  
NORVIR  
PREZISTA

#### ANTIVIRALS

#### § HEPATITIS B AGENTS

*entecavir*  
*lamivudine*  
*tenofovir disoproxil fumarate*

### ANTINEOPLASTIC AGENTS

#### § ALKYLATING AGENTS

*temozolomide*

#### § ANTIMETABOLITES

*capecitabine*  
LONSURF

#### BIOSIMILARS

KANJINTI  
RUXIENCE  
TRAZIMERA  
ZIRABEV

#### § KINASE INHIBITORS

*erlotinib*  
*everolimus*  
*imatinib mesylate*  
*lapatinib*  
*sunitinib*  
ALECENSA  
ALUNBRIG  
BOSULIF  
BRAFTOVI  
BRUKINSA  
CABOMETYX  
CALQUENCE  
COPIKTRA  
COTELLIC  
IBRANCE

Your specific prescription benefit plan design may not cover certain products or categories, regardless of their appearance in this document. For specific information, visit [Caremark.com](https://www.caremark.com) or contact a CVS Caremark Customer Care representative.



IMBRUVICA  
IRESSA  
KISQALI  
KISQALI FEMARA  
CO-PACK  
KOSELUGO  
MEKTOVI  
ROZLYTREK  
RYDAPT  
SPRYCEL  
STIVARGA  
TAGRISSO  
VITRAKVI  
VOTRIENT  
XOSPATA  
ZELBORAF  
ZYKADIA

**MONOCLONAL ANTIBODIES**

PERJETA  
PHESGO

**MULTIPLE MYELOMA  
IMMUNOMODULATORS**

REVLIMID  
THALOMID

**PROTEASOME INHIBITORS**

NINLARO  
VELCADE

**PROSTATE CANCER**

**§ LUTEINIZING HORMONE-  
RELEASING HORMONE  
(LHRH) AGONISTS**

*leuprolide acetate*  
ELIGARD

**LUTEINIZING HORMONE-  
RELEASING HORMONE  
(LHRH) ANTAGONISTS**

FIRMAGON

**§ MISCELLANEOUS**

*bexarotene capsule*  
ERIVEDGE  
LYNPARZA  
LYSODREN  
MATULANE  
ODOMZO  
RUBRACA  
VISTOGARD  
ZEJULA  
ZOLINZA

**CARDIOVASCULAR**

ANTILIPEMICS  
PCSK9 INHIBITORS  
PRALUENT

**PULMONARY ARTERIAL  
HYPERTENSION**

**§ ENDOTHELIN RECEPTOR  
ANTAGONISTS**

*ambrisentan*  
*bosentan*  
OPSUMIT

**§ PHOSPHODIESTERASE  
INHIBITORS**

*sildenafil*  
*tadalafil*

**PROSTACYCLIN RECEPTOR  
AGONISTS**

UPTRAVI

**§ PROSTAGLANDIN  
VASODILATORS**

*treprostinil*  
ORENITRAM

**SOLUBLE GUANYLATE  
CYCLASE STIMULATORS**

ADEMPAS

**CENTRAL NERVOUS  
SYSTEM**

**§ ANTICONVULSANTS**

*vigabatrin*

**ANTIPARKINSONIAN  
AGENTS**

INBRIJA  
KYNMOBI

**§ MOVEMENT DISORDERS**

*tetrabenazine*  
AUSTEDO  
INGREZZA

**§ MULTIPLE SCLEROSIS  
AGENTS**

*dimethyl fumarate*  
*delayed-rel*

*glatiramer*  
AUBAGIO  
AVONEX  
BETASERON  
COPAXONE  
GILENYA  
KESIMPTA  
MAYZENT  
OCREVUS  
REBIF  
TYSABRI  
VUMERITY  
ZEPOSIA

**NARCOLEPSY**

WAKIX  
XYWAV

**ENDOCRINE AND  
METABOLIC**

ACROMEGALY  
SOMATULINE DEPOT

**§ CALCIUM RECEPTOR  
AGONISTS**

*cinacalcet*

**CALCIUM REGULATORS  
PARATHYROID HORMONES**

FORTEO  
TYMLOS

**MISCELLANEOUS  
PROLIA**

**CENTRAL PRECOCIOUS  
PUBERTY**

LUPRON DEPOT-PED  
SUPPRELIN LA  
TRIPTODUR

**CONTRACEPTIVES**

**PROGESTIN INTRAUTERINE  
DEVICES**

KYLEENA  
MIRENA  
SKYLA

**FERTILITY REGULATORS**

GNRH / LHRH  
ANTAGONISTS  
CETROTIDE

**OVULATION STIMULANTS,  
GONADOTROPINS**

GONAL-F  
OVIDREL

**GAUCHER DISEASE**

CERDELGA  
CEREZYME

**HEREDITARY TYROSINEMIA  
TYPE 1 AGENTS**

ORFADIN

**HUMAN GROWTH  
HORMONES**

NORDITROPIN

**§ PHENYLKETONURIA  
TREATMENT AGENTS**

*sapropterin*

**POLYNEUROPATHY**

TEGSEDI

**§ UREA CYCLE DISORDERS**

*sodium phenylbutyrate*

**MISCELLANEOUS  
CYSTAGON**

**GENITOURINARY**

**§ MISCELLANEOUS**

*tiopronin*

**HEMATOLOGIC**

**§ CHELATING AGENTS**

*deferasirox*  
*deferiprone*  
*deferoxamine*  
*penicillamine*  
*trientine*

**HEMATOPOIETIC GROWTH  
FACTORS**

NIVESTYM  
RETACRIT  
ZIENTENZO

**HEMOPHILIA A AGENTS**

ADVATE  
ADYNOVATE  
AFSTYLA  
ELOCTATE  
ESPEROCT  
JIVI  
KOGENATE FS  
KOVALTRY  
NOVOEIGHT  
NUWIQ

**HEMOPHILIA B AGENTS**

REBINYN

**MISCELLANEOUS  
BLEEDING DISORDERS**

AGENTS  
NOVOSEVEN RT  
SEVENFACT

**PAROXYSMAL NOCTURNAL  
HEMOGLOBINURIA (PNH)**

AGENTS

EMPAVELI

**THROMBOCYTOPENIA  
AGENTS**

PROMACTA  
TAVALISSE

**IMMUNOLOGIC  
AGENTS**

**ALLERGENIC EXTRACTS**

ORALAIR

**AUTOIMMUNE AGENTS  
(PHYSICIAN-  
ADMINISTERED)**

REMICADE  
SIMPONI ARIA  
STELARA INTRAVENOUS

**AUTOIMMUNE AGENTS  
(SELF-ADMINISTERED)**

See Table 1 for Indication Based  
Coverage Details

**ANKYLOSING SPONDYLITIS**

COSENTYX  
ENBREL  
HUMIRA

**CROHN'S DISEASE**

HUMIRA  
STELARA  
SUBCUTANEOUS

**NON-RADIOGRAPHIC AXIAL  
SPONDYLOARTHRITIS**

CIMZIA  
PREFILLED SYRINGE  
COSENTYX

**PSORIASIS**

HUMIRA  
OTEZLA  
SKYRIZI

STELARA  
SUBCUTANEOUS  
TALTZ  
TREMIFYA

**PSORIATIC ARTHRITIS**

COSENTYX  
ENBREL  
HUMIRA  
OTEZLA  
RINVOQ  
SKYRIZI  
STELARA  
SUBCUTANEOUS  
TREMIFYA

**RHEUMATOID ARTHRITIS**

ENBREL  
HUMIRA  
KEVZARA  
ORENCIA CLICKJECT  
ORENCIA  
SUBCUTANEOUS  
RINVOQ  
XELJANZ  
XELJANZ XR

**ULCERATIVE COLITIS**

HUMIRA  
RINVOQ #  
STELARA  
SUBCUTANEOUS #  
XELJANZ #  
XELJANZ XR #  
ZEPOSIA #

# After failure of HUMIRA

**ALL OTHER CONDITIONS**

ENBREL  
HUMIRA

**DISEASE-MODIFYING  
ANTIRHEUMATIC DRUGS  
(DMARDs)**

RASUVO

**§ HEREDITARY  
ANGIOEDEMA**

*icatibant*  
ORLADEYO  
RUCONEST  
TAKHZYRO

**IMMUNOMODULATORS**

IMMUNE GLOBULINS  
CUTAQUIG

**IMMUNOSUPPRESSANTS**

**§ ANTIMETABOLITES**  
*mycophenolate mofetil*  
*mycophenolate sodium*

**§ CALCINEURIN INHIBITORS**

*cyclosporine*  
*cyclosporine, modified*  
*tacrolimus*

**MONOCLONAL ANTIBODIES**

ENSPRYNG

§ RAPAMYCIN DERIVATIVES

everolimus  
sirolimus

**RESPIRATORY**

ALPHA-1 ANTITRYPSIN DEFICIENCY AGENTS  
PROLASTIN-C

§ CYSTIC FIBROSIS

tobramycin  
inhalation solution  
BETHKIS

PULMONARY FIBROSIS AGENTS  
ESBRIET  
OFEV

SEVERE ASTHMA AGENTS

DUPIXENT  
FASENRA  
NUCALA  
XOLAIR

**TOPICAL**

DERMATOLOGY  
ATOPIC DERMATITIS

Injectable  
DUPIXENT

Oral  
RINVOQ

MOUTH / THROAT / DENTAL AGENTS

PROTECTANTS  
MUGARD

OPHTHALMIC  
RETINAL DISORDERS  
EYLEA  
LUCENTIS

**QUICK REFERENCE DRUG LIST**

**A**

abacavir  
abacavir-lamivudine  
abiraterone  
ADEMPAS  
ADVATE  
ADYNOVATE  
AFSTYLA  
ALECENSA  
ALUNBRIG  
ambrisentan  
atazanavir  
AUBAGIO  
AUSTEDO  
AVONEX

**B**

BARACLUDE SOLUTION  
BETASERON  
BETHKIS  
bexarotene capsule  
BIKTARVY  
bosentan  
BOSULIF  
BRAFTOVI  
BRUKINSA

**C**

CABOMETYX  
CALQUENCE  
capecitabine  
CERDELGA  
CEREZYME  
CETROTIDE  
CIMDUO  
CIMZIA  
PREFILLED SYRINGE  
cinacalcet  
COPAXONE  
COPIKTRA  
COSENTYX  
COTELLIC  
CUTAQUIG  
cyclosporine  
cyclosporine, modified  
CYSTAGON

**D**

deferasirox  
deferiprone  
deferoxamine  
DESCOVY  
dimethyl fumarate  
delayed-rel  
DOVATO

DUPIXENT  
DUROLANE

**E**

EDURANT  
efavirenz  
efavirenz-emtricitabine-tenofovir disoproxil fumarate  
efavirenz-lamivudine-tenofovir disoproxil fumarate  
ELIGARD  
ELOCTATE  
EMPAVELI  
emtricitabine-tenofovir disoproxil fumarate  
EMTRIVA  
ENBREL  
ENSPRYNG  
entecavir  
EPCLUSA  
ERIVEDGE  
ERLEADA  
erlotinib  
ESBRIET  
ESPEROCT  
EUFLEXXA  
everolimus  
EVOTAZ  
EYLEA

**F**

FASENRA  
FIRMAGON  
FORTEO  
FUZEON

**G**

GELSYN-3  
GENVOYA  
GILENYA  
glatiramer  
GONAL-F

**H**

HARVONI  
HUMIRA

**I**

IBRANCE  
icatibant  
imatinib mesylate  
IMBRUVICA  
INBRIJA  
INGREZZA  
INTELENCE

IRESSA  
ISENTRESS

**J**

JIVI

**K**

KANJINTI  
KESIMPTA  
KEVZARA  
KISQALI  
KISQALI FEMARA CO-PACK  
KOGENATE FS  
KOSELUGO  
KOVALTRY  
KYLEENA  
KYNMOBI

**L**

lamivudine  
lamivudine-zidovudine  
lapatinib  
leuprolide acetate  
LONSURF  
lopinavir-ritonavir  
LUCENTIS  
LUPRON DEPOT-PED  
LYNPARZA  
LYSODREN

**M**

MATULANE  
MAYZENT  
MEKTOVI  
MIRENA  
MUGARD  
mycophenolate mofetil  
mycophenolate sodium

**N**

nevirapine  
nevirapine ext-rel  
NINLARO  
NIVESTYM  
NORDITROPIN  
NORVIR  
NOVOEIGHT  
NOVOSEVEN RT  
NUBEQA  
NUCALA  
NUWIQ

**O**

OCREVUS  
ODEFSEY  
ODOMZO  
OFEV  
OPSUMIT  
ORALAIR  
ORENCIA CLICKJECT  
ORENCIA  
SUBCUTANEOUS  
ORENITRAM  
ORFADIN  
ORLADEYO  
OTEZLA  
OVIDREL

**P**

penicillamine  
PERJETA  
PHESGO  
PRALUENT  
PREZCOBIX  
PREZISTA  
PROLASTIN-C  
PROLIA  
PROMACTA

**R**

RASUVO  
REBIF  
REBINYN  
REMICADE  
RETACRIT  
REVLIMID  
ribavirin  
RINVOQ  
ROZLYTREK  
RUBRACA  
RUCONEST  
RUXIENCE  
RYDAPT

**S**

sapropterin  
SEVENFACT  
sildenafil  
SIMPONI ARIA  
sirolimus  
SKYLA  
SKYRIZI  
sodium phenylbutyrate  
SOMATULINE DEPOT  
SPRYCEL  
stavudine  
STELARA INTRAVENOUS

STELARA  
SUBCUTANEOUS  
STIVARGA  
sunitinib  
SUPARTZ FX  
SUPPRELIN LA  
SYM TUZA

**T**

tacrolimus  
tadalafil  
TAGRISSO  
TAKHZYRO  
TALTZ  
TAVALISSE  
TEGSEDI  
TEMIXYS  
temozolomide  
tenofovir disoproxil fumarate  
tetrabenazine  
THALOMID  
tiopronin  
TIVICAY  
tobramycin  
inhalation solution  
TRAZIMERA  
TREMIFYA  
treprostinil  
trientine  
TRIPTODUR  
TRIUMEQ  
TYMLOS  
TYSABRI

**U**

UPTRAVI

**V**

VELCADE  
VEMLIDY  
vigabatrin  
VISTOGARD  
VITRAKVI  
VOSEVI<sup>2</sup>  
VOTRIENT  
VUMERITY

**W**

WAKIX

**X**

XELJANZ  
XELJANZ XR  
XOLAIR  
XOSPATA



XTANDI  
XYWAV

**Y**  
YONSA

**Z**  
ZEJULA  
ZELBORAF

ZEPOSIA  
*zidovudine*  
ZIENTENZO  
ZIRABEV

ZOLINZA  
ZYKADIA

## PREFERRED OPTIONS FOR EXCLUDED SPECIALTY MEDICATIONS <sup>3</sup>

DRUG NAME(S)	PREFERRED OPTION(S) <sup>1</sup>	DRUG NAME(S)	PREFERRED OPTION(S) <sup>1</sup>
ACTEMRA INTRAVENOUS	REMICADE, SIMPONI ARIA	EXTAVIA	<i>dimethyl fumarate delayed-rel, glatiramer, AUBAGIO, AVONEX, BETASERON, COPAXONE, GILENYA, KESIMPTA, MAYZENT, OCREVUS, REBIF, TYSABRI, VUMERITY, ZEPOSIA</i>
ADCIRCA	<i>sildenafil, tadalafil</i>	FEIBA	NOVOSEVEN RT, SEVENFACT
AFINITOR, AFINITOR DISPERZ	<i>everolimus</i>	FERRIPROX	<i>deferasirox, deferiprone, deferoxamine</i>
ALIQOPA	COPIKTRA	FOLLISTIM AQ	GONAL-F
ALPROLIX	Consult doctor	FULPHILA	ZIENTENZO
APOKYN	INBRIJA, KYNMOBI	GEL-ONE	DUROLANE, EUFLEXXA, GELSYN-3, SUPARTZ FX
APTIVUS	Consult doctor	GENOTROPIN	NORDITROPIN
ARALAST NP	PROLASTIN-C	GLASSIA	PROLASTIN-C
ARANESP	RETACRIT	GLEEVEC	<i>imatinib mesylate, BOSULIF, SPRYCEL</i>
ASTAGRAF XL	<i>tacrolimus</i>	GRANIX	NIVESTYM
ATRIPLA	<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate, efavirenz-lamivudine-tenofovir disoproxil fumarate, BIKTARVY, DOVATO, GENVOYA, ODEFSEY, SYMTUZA, TRIUMEQ</i>	HEPSERA	<i>entecavir, lamivudine, tenofovir disoproxil fumarate, BARACLUDE SOLUTION, VEMLIDY</i>
AVASTIN	ZIRABEV	HERCEPTIN, HERCEPTIN HYLECTA	KANJINTI, TRAZIMERA
AVSOLA	REMICADE, SIMPONI ARIA, STELARA INTRAVENOUS	HUMATROPE	NORDITROPIN
BARACLUDE TABLET	<i>entecavir, lamivudine, tenofovir disoproxil fumarate, BARACLUDE SOLUTION, VEMLIDY</i>	HYALGAN	DUROLANE, EUFLEXXA, GELSYN-3, SUPARTZ FX
BERINERT	<i>icatibant, RUCONEST</i>	ICLUSIG	<i>imatinib mesylate, BOSULIF, SPRYCEL</i>
BORTEZOMIB	NINLARO, VELCADE	ILUMYA	REMICADE
BOTOX	Consult doctor	INFLECTRA	REMICADE, SIMPONI ARIA, STELARA INTRAVENOUS
BUPHENYL	<i>sodium phenylbutyrate</i>	INVIRASE	<i>atazanavir, lopinavir-ritonavir, EVOTAZ, PREZCOBIX, PREZISTA</i>
CAYSTON	<i>tobramycin inhalation solution, BETHKIS</i>	JADENU	<i>deferasirox, deferiprone, deferoxamine</i>
CELLCEPT	<i>mycophenolate mofetil, mycophenolate sodium</i>	JUXTAPID	PRALUENT
CHORIONIC GONADOTROPIN	OVIDREL	KORLYM	Consult doctor
CIMZIA LYOPHILIZED POWDER	REMICADE, SIMPONI ARIA, STELARA INTRAVENOUS	KUVAN	<i>sapropterin</i>
CINRYZE	ORLADEYO, TAKHZYRO	KYPROLIS	NINLARO, VELCADE
COMPLERA	<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate, efavirenz-lamivudine-tenofovir disoproxil fumarate, BIKTARVY, DOVATO, GENVOYA, ODEFSEY, SYMTUZA, TRIUMEQ</i>	LETAIRIS	<i>ambrisentan, bosentan, OPSUMIT</i>
CUPRIMINE	<i>penicillamine</i>	LEUKINE	NIVESTYM
DESFERAL	<i>deferasirox, deferiprone, deferoxamine</i>	LEXIVA	<i>atazanavir, lopinavir-ritonavir, EVOTAZ, PREZCOBIX, PREZISTA</i>
ELELYSO	CERDELGA, CEREZYME	LILETTA	KYLEENA, MIRENA, SKYLA
ENTYVIO (For Crohn's Disease Only)	REMICADE, STELARA INTRAVENOUS	LUPRON DEPOT	ELIGARD, FIRMAGON
ENVARUSUS XR	<i>tacrolimus</i>	MAVYRET	EPCLUSA (genotypes 1, 2, 3, 4, 5, 6), HARVONI (genotypes 1, 4, 5, 6), VOSEVI <sup>2</sup>
EPIVIR HBV	<i>entecavir, lamivudine, tenofovir disoproxil fumarate, BARACLUDE SOLUTION, VEMLIDY</i>	MEKINIST	COTELLIC, MEKTOVI
EPOGEN	RETACRIT	MONOVISC	DUROLANE, EUFLEXXA, GELSYN-3, SUPARTZ FX
EXJADE	<i>deferasirox, deferiprone, deferoxamine</i>	MULPLETA	Consult doctor
		MYFORTIC	<i>mycophenolate mofetil, mycophenolate sodium</i>

DRUG NAME(S)	PREFERRED OPTION(S)*	DRUG NAME(S)	PREFERRED OPTION(S)*
NEULASTA, NEULASTA ONPRO	ZIEXTENZO	SYNVISC, SYNVISC-ONE	DUROLANE, EUFLEXXA, GELSYN-3, SUPARTZ FX
NEUPOGEN	NIVESTYM	SYPRINE	<i>trientine</i>
NOVAREL	OVIDREL	TAFINLAR	BRAFTOVI, ZELBORAF
NPLATE	PROMACTA, TAVALISSE	TASIGNA	<i>imatinib mesylate</i> , BOSULIF, SPRYCEL
NUTROPIN AQ	NORDITROPIN	TECFIDERA	<i>dimethyl fumarate delayed-rel, glatiramer</i> , AUBAGIO, AVONEX, BETASERON, COPAXONE, GILENYA, KESIMPTA, MAYZENT, OCREVUS, REBIF, TYSABRI, VUMERITY, ZEPOSIA
OMNITROPE	NORDITROPIN	THIOLA, THIOLA EC	<i>tiopronin</i>
ORENCIA INTRAVENOUS	REMICADE, SIMPONI ARIA	TOBI, TOBI PODHALER	<i>tobramycin inhalation solution</i> , BETHKIS
ORTHOVISC	DUROLANE, EUFLEXXA, GELSYN-3, SUPARTZ FX	TRACLEER	<i>ambriesentan, bosentan</i> , OPSUMIT
OTREXUP	RASUVO	TRELSTAR MIXJECT	ELIGARD, FIRMAGON
PEGASYS	Consult doctor	TRUVADA	<i>abacavir-lamivudine, emtricitabine-tenofovir disoproxil fumarate, lamivudine-zidovudine</i> , CIMDUO, DESCOVY, TEMIXYS
PREGNYL	OVIDREL	TRUXIMA	RUXIENCE
PROCRIT	RETACRIT	UDENYCA	ZIEXTENZO
PROCYSBI	CYSTAGON	VIEKIRA PAK	EPCLUSA (genotypes 1, 2, 3, 4, 5, 6), HARVONI (genotypes 1, 4, 5, 6)
PROGRAF	<i>tacrolimus</i>	VIRACEPT	<i>atazanavir, lopinavir-ritonavir</i> , EVOTAZ, PREZCOBIX, PREZISTA
RAPAMUNE	<i>everolimus, sirolimus</i>	VISCO-3	DUROLANE, EUFLEXXA, GELSYN-3, SUPARTZ FX
RAVICTI	<i>sodium phenylbutyrate</i>	XALKORI	ALECENSA, ALUNBRIG, ZYKADIA
REMODULIN	<i>treprostinil</i>	XENAZINE	<i>tetrabenazine</i> , AUSTEDO
RENFLEXIS	REMICADE, SIMPONI ARIA, STELARA INTRAVENOUS	ZARXIO	NIVESTYM
REPATHA	PRALUENT	ZEMAIRA	PROLASTIN-C
REVATIO	<i>sildenafil, tadalafil</i>	ZEPATIER	EPCLUSA (genotypes 1, 2, 3, 4, 5, 6), HARVONI (genotypes 1, 4, 5, 6)
RIABNI	RUXIENCE	ZOLADEX	ELIGARD, FIRMAGON, ORLISSA
RITUXAN	RUXIENCE	ZORTRESS	<i>everolimus, sirolimus</i>
SABRIL	<i>vigabatrin</i>	ZYDELIG	COPIKTRA
SAIZEN	NORDITROPIN	ZYTIGA	<i>abiraterone, bicalutamide</i> , ERLEADA, XTANDI, YONSA
SANDOSTATIN LAR	SOMATULINE DEPOT		
SIGNIFOR LAR	SOMATULINE DEPOT		
SOMAVERT	SOMATULINE DEPOT		
STRIBILD	<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate, efavirenz-lamivudine-tenofovir disoproxil fumarate</i> , BIKTARVY, DOVATO, GENVOYA, ODEFSEY, SYMTUZA, TRIUMEQ		

**TABLE 1 - PREFERRED OPTIONS FOR INDICATION BASED SELF-ADMINISTERED AUTOIMMUNE EXCLUDED MEDICATIONS**

CONDITION	EXCLUDED DRUG NAME(S)	PREFERRED OPTION(S)
ANKYLOSING SPONDYLITIS	SIMPONI TALTZ XELJANZ XELJANZ XR	COSENTYX ENBREL HUMIRA
CROHN'S DISEASE	None	HUMIRA STELARA SUBCUTANEOUS
NON-RADIOGRAPHIC AXIAL SPONDYLOARTHRITIS	TALTZ	CIMZIA PREFILLED SYRINGE COSENTYX
PSORIASIS	COSENTYX ENBREL	HUMIRA OTEZLA SKYRIZI STELARA SUBCUTANEOUS TALTZ TREMIFYA
PSORIATIC ARTHRITIS	ORENCIA CLICKJECT ORENCIA SUBCUTANEOUS SIMPONI TALTZ XELJANZ XELJANZ XR	COSENTYX ENBREL HUMIRA OTEZLA RINVOQ SKYRIZI STELARA SUBCUTANEOUS TREMIFYA
RHEUMATOID ARTHRITIS	ACTEMRA ACTPEN ACTEMRA SUBCUTANEOUS KINERET SIMPONI	ENBREL HUMIRA KEVZARA ORENCIA CLICKJECT ORENCIA SUBCUTANEOUS RINVOQ XELJANZ XELJANZ XR
ULCERATIVE COLITIS	SIMPONI	HUMIRA RINVOQ # STELARA SUBCUTANEOUS # XELJANZ # XELJANZ XR # ZEPOSIA #
ALL OTHER CONDITIONS	ACTEMRA ACTPEN ACTEMRA SUBCUTANEOUS KINERET ORENCIA CLICKJECT ORENCIA SUBCUTANEOUS	ENBREL HUMIRA

# After failure of HUMIRA

You may be responsible for the full cost of certain non-formulary products that are removed from coverage. Please check with your plan sponsor for more information.

**FOR YOUR INFORMATION: Generics should be considered the first line of prescribing.** This drug list represents a summary of prescription coverage. It is not all-inclusive and does not guarantee coverage. 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. In most instances, a brand-name drug for which a generic product becomes available will be designated as a non-preferred option upon release of the generic product to the market. Specific prescription benefit plan design may not cover certain products or categories, regardless of their appearance in this document. The member's prescription benefit plan may have a different copay for specific products on the list. Unless specifically indicated, drug list products will include all dosage forms. This list represents brand products in CAPS, branded generics in upper- and lowercase *Italics*, and generic products in lowercase *italics*. Generics listed in therapeutic categories are for representational purposes only. 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. Log in to [Caremark.com](https://www.caremark.com) to check coverage and copay information for a specific medicine.

§ Generics are available in this class and should be considered the first line of prescribing.

<sup>†</sup> The preferred options in this list are a broad representation within therapeutic categories of available treatment options and do not necessarily represent clinical equivalency.

<sup>1</sup> Copayment, copay or coinsurance means the amount a member is required to pay for a prescription in accordance with a Plan, which may be a deductible, a percentage of the prescription price, a fixed amount or other charge, with the balance, if any, paid by a Plan.

<sup>2</sup> For use in patients previously treated with an HCV regimen containing an NS5A inhibitor (for genotypes 1-6) or sofosbuvir without an NS5A inhibitor (for genotypes 1a or 3).

<sup>3</sup> An exception process is in place for specific clinical or regulatory circumstances that may require coverage of an excluded medication.

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