

# Drug Removals for Clients with Advanced Control Specialty Formulary<sup>®</sup> - State of West Virginia PEIA

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

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

Category Drug Class	Formulary Drug Removals	Formulary Options
<i>Acromegaly</i>	SANDOSTATIN LAR <sup>1</sup> SIGNIFOR LAR <sup>1</sup> SOMAVERT <sup>1</sup>	SOMATULINE DEPOT
<i>Allergies</i> Antihistamines	<i>dexchlorpheniramine</i> Diphen Elixir RyClora CARBINOXAMINE TABLET 6 MG	<i>levocetirizine</i>
<i>Allergies</i> Nasal Steroids / Combinations	BECONASE AQ DYMISTA OMNARIS QNASL ZETONNA	<i>azelastine-fluticasone, flunisolide, fluticasone, mometasone</i>
<i>Anticonvulsants</i>	<i>topiramate ext-rel capsule</i> (generics for QUDEXY XR only)	<i>carbamazepine, carbamazepine ext-rel, clobazam, divalproex sodium, divalproex sodium ext-rel, gabapentin, lamotrigine, lamotrigine ext-rel, levetiracetam, levetiracetam ext-rel, oxcarbazepine, phenobarbital, phenytoin, phenytoin sodium extended, primidone, rufinamide, tiagabine, topiramate, valproic acid, zonisamide, FYCOMPA, OXTELLAR XR, TROKENDI XR, VIMPAT, XCOPRI</i>
	BANZEL SUSPENSION ONFI	<i>clobazam, lamotrigine, rufinamide, topiramate, TROKENDI XR</i>
	SABRIL <sup>1</sup>	<i>vigabatrin</i>
	ZONEGRAN	<i>carbamazepine, carbamazepine ext-rel, divalproex sodium, divalproex sodium ext-rel, gabapentin, lamotrigine, lamotrigine ext-rel, levetiracetam, levetiracetam ext-rel, oxcarbazepine, phenobarbital, phenytoin, phenytoin sodium extended, primidone, tiagabine, topiramate, valproic acid, zonisamide, FYCOMPA, OXTELLAR XR, TROKENDI XR, VIMPAT, XCOPRI</i>
<i>Anti-infectives, Antibacterials</i> Erythromycins / Macrolides	E.E.S. GRANULES ERYPED	<i>erythromycins</i>
<i>Anti-infectives, Antibacterials</i> Tetracyclines	<i>doxycycline hyclate delayed-rel tablet</i> <i>doxycycline hyclate tablet 50 mg</i> (NDC* 72143021160 only) <i>doxycycline hyclate tablet 75 mg</i> <i>doxycycline hyclate tablet 150 mg</i> <i>doxycycline monohydrate capsule 75 mg</i> <i>doxycycline monohydrate capsule 150 mg</i> <i>minocycline ext-rel</i> CoreMino Mondoxyne NL capsule 75 mg Targadox ACTICLATE DORYX DORYX MPC	<i>doxycycline hyclate 20 mg, doxycycline hyclate capsule, minocycline, tetracycline</i>
<i>Anti-infectives, Antibacterials</i> Miscellaneous	<i>nitrofurantoin</i> (NDCs* 16571074024, 70408023932 only) MACRODANTIN	<i>nitrofurantoin</i> (except NDCs* 16571074024, 70408023932)

<b>Category Drug Class</b>	<b>Formulary Drug Removals</b>	<b>Formulary Options</b>
<b>Anti-infectives, Antifungals</b>	<i>flucytosine capsule 500 mg</i>	<i>fluconazole</i>
	<i>posaconazole delayed-rel tablet NOXAFIL</i>	<i>fluconazole, itraconazole</i>
	CRESEMBA	<i>itraconazole</i>
	<i>tavaborole</i>	<i>terbinafine tablet</i>
<b>Anti-infectives, Antiretroviral Agents Combination Agents</b>	ATRIPLA <sup>1</sup> COMPLERA <sup>1</sup> STRIBILD <sup>1</sup>	<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate, efavirenz-lamivudine-tenofovir disoproxil fumarate, BIKTARVY, DOVATO, GENVOYA, ODEFSEY, SYMTUZA, TRIUMEQ</i>
	TRUVADA <sup>1</sup>	<i>abacavir-lamivudine, emtricitabine-tenofovir disoproxil fumarate, lamivudine-zidovudine, CIMDUO, DESCOVY, TEMIXYS</i>
<b>Anti-infectives, Antiretroviral Agents Protease Inhibitors</b>	APTIVUS <sup>1</sup>	Consult doctor
	INVIRASE <sup>1</sup> LEXIVA <sup>1</sup> VIRACEPT <sup>1</sup>	<i>atazanavir, lopinavir-ritonavir, EVOTAZ, PREZCOBIX, PREZISTA</i>
<b>Anti-infectives, Antivirals Cytomegalovirus †</b>	VALCYTE	<i>valganciclovir</i>
<b>Anti-infectives, Antivirals Hepatitis B †</b>	BARACLUDE TABLET <sup>1</sup> EPIVIR HBV <sup>1</sup> HEPSERA <sup>1</sup>	<i>entecavir, lamivudine, tenofovir disoproxil fumarate, BARACLUDE SOLUTION, VEMLIDY</i>
<b>Anti-infectives, Antivirals Hepatitis C †</b>	MAVYRET <sup>1</sup>	EPCLUSA (genotypes 1, 2, 3, 4, 5, 6), HARVONI (genotypes 1, 4, 5, 6), VOSEVI <sup>2</sup>
	VIEKIRA PAK <sup>1</sup> ZEPATIER <sup>1</sup>	EPCLUSA (genotypes 1, 2, 3, 4, 5, 6), HARVONI (genotypes 1, 4, 5, 6)
<b>Anti-infectives, Antivirals Herpes †</b>	<i>acyclovir cream VALTRES</i>	<i>acyclovir capsule, acyclovir tablet, valacyclovir</i>
<b>Anti-infectives Miscellaneous</b>	DARAPRIM	<i>pyrimethamine</i>
<b>Anxiety † Benzodiazepines</b>	ATIVAN XANAX XANAX XR	<i>alprazolam, clonazepam, diazepam, lorazepam, oxazepam</i>
<b>Asthma † Beta Agonists, Short-Acting</b>	<i>albuterol sulfate CFC-free aerosol (NDC* 66993001968 only)</i> PROAIR HFA PROAIR RESPICLICK PROVENTIL HFA VENTOLIN HFA XOPENEX HFA	<i>albuterol sulfate CFC-free aerosol (except NDC* 66993001968), levalbuterol tartrate CFC-free aerosol</i>
<b>Asthma † Leukotriene Modulators</b>	<i>zileuton ext-rel SINGULAIR</i>	<i>montelukast, zafirlukast</i>
<b>Asthma † Steroid Inhalants</b>	ALVESCO ASMANEX ASMANEX HFA	ARNUITY ELLIPTA, FLOVENT DISKUS, FLOVENT HFA, PULMICORT FLEXHALER, QVAR REDIHALER
<b>Asthma † or Chronic Obstructive Pulmonary Disease (COPD) † Steroid / Beta Agonist Combinations</b>	DULERA	ADVAIR DISKUS, ADVAIR HFA**, BREO ELLIPTA**, SYMBICORT

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Attention Deficit Hyperactivity Disorder †	ADDERALL EVEKEO	amphetamine-dextroamphetamine mixed salts, methylphenidate
	ADZENYS ER ADZENYS XR-ODT APTENSIO XR DAYTRANA FOCALIN XR	amphetamine-dextroamphetamine mixed salts ext-re <sup>†</sup> **, dexamethylphenidate ext-rel, methylphenidate ext-re <sup>†</sup> **, MYDAYIS, VYVANSE
	INTUNIV	amphetamine-dextroamphetamine mixed salts ext-re <sup>†</sup> **, atomoxetine, dexamethylphenidate ext-rel, guanfacine ext-rel, methylphenidate ext-re <sup>†</sup> **, MYDAYIS, QELBREE, VYVANSE
Autoimmune Agents Physician-Administered Agents	ACTEMRA INTRAVENOUS † ORENCIA INTRAVENOUS †	REMICADE, SIMPONI ARIA
	AVSOLA † CIMZIA LYOPHILIZED POWDER † INFLECTRA † RENFLEXIS †	REMICADE, SIMPONI ARIA, STELARA INTRAVENOUS
	ENTYVIO (For Crohn's Disease Only) †	REMICADE, STELARA INTRAVENOUS
	ILUMYA †	REMICADE
Autoimmune Agents Self-Administered Agents Ankylosing Spondylitis †	SIMPONI † TALTZ †	COSENTYX, ENBREL, HUMIRA
Autoimmune Agents Self-Administered Agents Crohn's Disease †	None	HUMIRA, STELARA SUBCUTANEOUS
Autoimmune Agents Self-Administered Agents Non-Radiographic Axial Spondyloarthritis †	TALTZ †	CIMZIA PREFILLED SYRINGE, COSENTYX
Autoimmune Agents Self-Administered Agents Psoriasis †	COSENTYX † ENBREL †	HUMIRA, OTEZLA, SKYRIZI, STELARA SUBCUTANEOUS, TALTZ, TREMFYA
Autoimmune Agents Self-Administered Agents Psoriatic Arthritis †	ORENCIA CLICKJECT † ORENCIA SUBCUTANEOUS † SIMPONI † TALTZ † XELJANZ † XELJANZ XR †	COSENTYX, ENBREL, HUMIRA, OTEZLA, RINVOQ, STELARA SUBCUTANEOUS, TREMFYA
Autoimmune Agents Self-Administered Agents Rheumatoid Arthritis †	ACTEMRA ACTPEN † ACTEMRA SUBCUTANEOUS † KINERET † SIMPONI †	ENBREL, HUMIRA, KEVZARA, ORENCIA CLICKJECT, ORENCIA SUBCUTANEOUS, RINVOQ, XELJANZ, XELJANZ XR
Autoimmune Agents Self-Administered Agents Ulcerative Colitis †	SIMPONI †	HUMIRA, STELARA SUBCUTANEOUS #, XELJANZ #, XELJANZ XR #, ZEPOSIA #  # After failure of HUMIRA
Autoimmune Agents Self-Administered Agents All Other Conditions †	ACTEMRA ACTPEN † ACTEMRA SUBCUTANEOUS † KINERET † ORENCIA CLICKJECT † ORENCIA SUBCUTANEOUS †	ENBREL, HUMIRA
Botulinum Toxins	BOTOX †	Consult doctor
Cancer Biosimilars	RIABNI † TRUXIMA †	RUXIENCE

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<b>Cancer</b> Chronic Myelogenous Leukemia † Kinase Inhibitors	GLEEVEC <sup>1</sup> ICLUSIG <sup>1</sup> TASIGNA <sup>1</sup>	<i>imatinib mesylate</i> , BOSULIF, SPRYCEL
<b>Cancer</b> Follicular Lymphoma † PI3K Inhibitors	ALIQUOPA <sup>1</sup> ZYDELIG <sup>1</sup>	COPIKTRA
<b>Cancer</b> Monoclonal Antibodies	AVASTIN <sup>1</sup>	ZIRABEV
	HERCEPTIN <sup>1</sup> HERCEPTIN HYLECTA <sup>1</sup>	KANJINTI, TRAZIMERA
	RITUXAN <sup>1</sup>	RUXIENCE
<b>Cancer</b> mTOR Inhibitors	AFINITOR <sup>1</sup>	<i>everolimus</i> , AFINITOR DISPERZ
<b>Cancer</b> Multiple Myeloma † Proteasome Inhibitors	BORTEZOMIB <sup>1</sup> KYPROLIS <sup>1</sup>	NINLARO, VELCADE
<b>Cancer</b> Non-Small Cell Lung Cancer † ALK Inhibitors	XALKORI <sup>1</sup>	ALECENSA, ALUNBRIG, ZYKADIA
<b>Cancer</b> Prostate † Antiandrogens	NILANDRON ZYTIGA <sup>1</sup>	<i>abiraterone, bicalutamide</i> , ERLEADA, XTANDI, YONSA
<b>Cancer</b> Prostate † Luteinizing Hormone-Releasing Hormone (LHRH) Agonists	LUPRON DEPOT <sup>1</sup> TRELSTAR MIXJECT <sup>1</sup> ZOLADEX <sup>1</sup>	ELIGARD, FIRMAGON
<b>Cardiovascular</b> Antiarrhythmics	BETAPACE BETAPACE AF	<i>sotalol</i>
	NORPACE	<i>disopyramide</i>
<b>Cardiovascular</b> Antilipemics Cholesterol Absorption Inhibitors	ZETIA	<i>ezetimibe</i>
<b>Cardiovascular</b> Antilipemics Fibrates	<i>fenofibrate capsule 50 mg</i> <i>fenofibrate capsule 130 mg</i> <i>fenofibrate tablet 40 mg</i> <i>fenofibrate tablet 120 mg</i> FENOGLIDE TABLET 120 MG TRICOR	<i>fenofibrate (except fenofibrate capsule 50 mg, 130 mg; fenofibrate tablet 40 mg, 120 mg), fenofibric acid delayed-rel</i>
<b>Cardiovascular</b> Antilipemics HMG-CoA Reductase Inhibitors (HMGs or Statins) / Combinations <sup>3</sup>	ALTOPREV CRESTOR LESCOL XL LIPITOR LIVALO	<i>atorvastatin, ezetimibe-simvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin</i>
<b>Cardiovascular</b> Antilipemics Niacins	<i>niacin tablet 500 mg</i> <i>Niacor</i>	<i>niacin ext-rel</i>
<b>Cardiovascular</b> Antilipemics Omega-3 Fatty Acids	<i>icosapent ethyl</i>	<i>omega-3 acid ethyl esters</i> , VASCEPA

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<b>Cardiovascular Antilipemics PCSK9 Inhibitors</b>	REPATHA <sup>1</sup>	PRALUENT
<b>Cardiovascular Digitalis Glycosides</b>	LANOXIN TABLET (125 MCG and 250 MCG only)	<i>digoxin</i>
<b>Cardiovascular Diuretics</b>	DYRENIUM	<i>amiloride, triamterene</i>
<b>Cardiovascular Nitrates</b>	<i>isosorbide dinitrate 40 mg</i>	<i>isosorbide dinitrate (except isosorbide dinitrate 40 mg), isosorbide mononitrate</i>
<b>Cardiovascular Pulmonary Arterial Hypertension Endothelin Receptor Antagonists</b>	LETAIRIS <sup>1</sup> TRACLEER <sup>1</sup>	<i>ambrisentan, bosentan, OPSUMIT</i>
<b>Cardiovascular Pulmonary Arterial Hypertension Phosphodiesterase Inhibitors</b>	ADCIRCA <sup>1</sup> REVATIO <sup>1</sup>	<i>sildenafil, tadalafil</i>
<b>Cardiovascular Pulmonary Arterial Hypertension Prostaglandin Vasodilators</b>	REMODULIN <sup>1</sup>	<i>treprostinil</i>
<b>Carnitine Deficiency</b>	CARNITOR CARNITOR SF	<i>levocarnitine</i>
<b>Chronic Obstructive Pulmonary Disease (COPD) † Anticholinergics</b>	INCRUSE ELLIPTA TUDORZA	SPIRIVA, YUPELRI
<b>Chronic Obstructive Pulmonary Disease (COPD) † Anticholinergic / Beta Agonist Combinations Long Acting</b>	BEVESPI AEROSPHERE	ANORO ELLIPTA, STIOLTO RESPIMAT
<b>Contraceptives Oral</b>	BALCOLTRA BEYAZ MINASTRIN 24 FE SEASONIQUE TAYTULLA YASMIN YAZ	<i>ethinyl estradiol-drospirenone, ethinyl estradiol-drospirenone-levomefolate, ethinyl estradiol-levonorgestrel, ethinyl estradiol-norethindrone acetate, ethinyl estradiol-norethindrone acetate-iron, ethinyl estradiol-norgestimate, LO LOESTRIN FE, NATAZIA</i>
<b>Contraceptives Progestin Intrauterine Devices</b>	LILETTA <sup>1</sup>	KYLEENA, MIRENA, SKYLA
<b>Contraceptives Vaginal</b>	NUVARING	<i>ethinyl estradiol-etonogestrel, ANNOVERA</i>
<b>Cystic Fibrosis † Inhaled Antibiotics</b>	TOBI <sup>1</sup> TOBI PODHALER <sup>1</sup>	<i>tobramycin inhalation solution, BETHKIS</i>
<b>Dental Cavity/Caries Prevention</b>	PREVIDENT	Consult doctor

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<i>Depression</i> † Antidepressants, Selective Serotonin Reuptake Inhibitors (SSRIs)	<i>fluoxetine tablet 60 mg</i> <i>paroxetine HCl ext-rel</i> (NDC* 60505367503 only) LEXAPRO PAXIL PAXIL CR PEXEVA PROZAC VIIBRYD ZOLOFT	<i>citalopram, escitalopram, fluoxetine (except fluoxetine tablet 60 mg, fluoxetine tablet [generics for SARAFEM]), paroxetine HCl, paroxetine HCl ext-rel (except NDC* 60505367503), sertraline, TRINTELLIX</i>
<i>Depression</i> † Antidepressants, Serotonin Norepinephrine Reuptake Inhibitors (SNRIs)	<i>venlafaxine ext-rel tablet (except 225 mg)</i> CYMBALTA EFFEXOR XR PRISTIQ	<i>desvenlafaxine ext-rel, duloxetine, venlafaxine, venlafaxine ext-rel capsule</i>
<i>Depression</i> † Antidepressants, Miscellaneous Agents	<i>bupropion ext-rel tablet 450 mg</i>	<i>bupropion, bupropion ext-rel (except bupropion ext-rel tablet 450 mg)</i>
Depression and/or Schizophrenia † Antipsychotics, Atypicals	ABILIFY FANAPT SEROQUEL XR	<i>aripiprazole, clozapine, olanzapine, quetiapine, quetiapine ext-rel, risperidone, ziprasidone, LATUDA, VRAYLAR</i>
<i>Dermatology</i> Acne †	<i>adapalene pad</i> <i>clindamycin gel (NDC* 68682046275 only)</i> <i>Vanoxide-HC</i> ACANYA AZELEX BENZACLIN DIFFERIN LOTION FABIOR TAZORAC VELTIN ZIANA	<i>adapalene (except adapalene pad), benzoyl peroxide, clindamycin gel (except NDC* 68682046275), clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, EPIDUO, ONEXTON</i>
Dermatology Actinic Keratosis †	<i>fluorouracil cream 0.5%</i> CARAC	<i>fluorouracil cream 5%, fluorouracil solution, imiquimod, ZYCLARA</i>
<i>Dermatology</i> Anti-infective / Anti-inflammatory	NEO-SYNALAR	<i>desonide (except desonide gel) or hydrocortisone WITH gentamicin</i>
<i>Dermatology</i> Antibiotics	<i>mupirocin cream</i>	<i>gentamicin, mupirocin ointment</i>
<i>Dermatology</i> Antipsoriatics	<i>calcipotriene cream</i> <i>calcipotriene foam</i> <i>calcitriol ointment</i> CALCIPOTRIENE FOAM SORILUX TAZORAC VECTICAL	<i>calcipotriene ointment, calcipotriene solution</i>
	<i>calcipotriene-betamethasone</i>	<i>calcipotriene ointment or calcipotriene solution WITH desoximetasone (except desoximetasone ointment 0.05%), fluocinonide (except fluocinonide cream 0.1%) or BRYHALI</i>
<i>Dermatology</i> Atopic Dermatitis †	<i>doxepin cream</i>	<i>desonide (except desonide gel), hydrocortisone, pimecrolimus, tacrolimus, EUCRISA</i>
	ELIDEL	<i>pimecrolimus, tacrolimus, EUCRISA</i>
<i>Dermatology</i> Rosacea †	<i>doxycycline monohydrate delayed-rel capsule</i>	ORACEA
	<i>ivermectin cream</i> FINACEA GEL MIRVASO NORITATE	<i>azelaic acid gel, metronidazole, FINACEA FOAM, SOOLANTRA</i>

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<i>Dermatology</i> Scars	BEAU RX CICATRACE POLYTOZA RECEDO SCARSILK PAD SIL-K PAD SILVEX SILTREX	Consult doctor
<i>Dermatology</i> Seborrheic Dermatitis †	<i>ketoconazole foam 2%</i> Ketodan	<i>ketoconazole shampoo 2%, selenium sulfide lotion 2.5%</i>
	XOLEGEL	<i>ciclopirox, ketoconazole cream 2%</i>
<i>Dermatology</i> Skin Inflammation and Hives † Low Potency Corticosteroids	<i>desonide gel</i> DesRx <i>flurandrenolide cream</i> <i>flurandrenolide lotion</i> Nolix CORDRAN CREAM CORDRAN LOTION	<i>desonide (except desonide gel), hydrocortisone</i>
<i>Dermatology</i> Skin Inflammation and Hives † Medium Potency Corticosteroids	<i>clocortolone cream</i> <i>desoximetasone ointment 0.05%</i> <i>flurandrenolide ointment</i> <i>hydrocortisone butyrate lipophilic cream 0.1%</i> <i>hydrocortisone butyrate lotion</i> <i>triamcinolone aerosol 0.2%</i> <i>triamcinolone ointment 0.05%</i> Trianex CORDRAN OINTMENT	<i>hydrocortisone butyrate cream, hydrocortisone butyrate ointment, hydrocortisone butyrate solution, mometasone, triamcinolone cream, triamcinolone lotion, triamcinolone ointment (except triamcinolone ointment 0.05%)</i>
<i>Dermatology</i> Skin Inflammation and Hives † High Potency Corticosteroids	<i>diflorasone cream</i> <i>diflorasone ointment</i> <i>halcinonide cream</i> APEXICON E HALOG PSORCON	<i>desoximetasone (except desoximetasone ointment 0.05%), fluocinonide (except fluocinonide cream 0.1%), BRYHALI</i>
<i>Dermatology</i> Skin Inflammation and Hives † Very High Potency Corticosteroids	<i>clobetasol spray</i> CLOBEX SPRAY OLUX-E	<i>clobetasol foam</i>
	<i>fluocinonide cream 0.1%</i>	<i>clobetasol cream, halobetasol cream</i>
	CORDRAN TAPE ULTRAVATE	<i>clobetasol cream, clobetasol foam, clobetasol gel, clobetasol lotion, clobetasol ointment, halobetasol cream, halobetasol ointment</i>
<i>Dermatology</i> Warts	VEREGEN	<i>imiquimod</i>
<i>Dermatology</i> Wound Care Products	ALEVICYN GEL ALEVICYN SG ALEVICYN SOLUTION	<i>desonide (except desonide gel), hydrocortisone</i>
<i>Dermatology</i> Miscellaneous Skin Conditions	ATOPADERM BENSAL HP EPICERAM KAMDOY SYNERDERM	<i>desonide (except desonide gel), hydrocortisone</i>
	<i>luliconazole</i> <i>oxiconazole</i> (NDCs* 00168035830, 51672135902 only)	<i>ciclopirox, clotrimazole, econazole, ketoconazole cream 2%, NAFTIN</i>
<i>Diabetes †</i> Biguanides	<i>metformin ext-rel</i> (generics for FORTAMET and GLUMETZA only) FORTAMET GLUMETZA RIOMET	<i>metformin, metformin ext-rel (except generics for FORTAMET and GLUMETZA)</i>

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



Category Drug Class	Formulary Drug Removals	Formulary Options
Diabetes † Supplies, Test Strips and Kits 7,8	BREEZE 2 STRIPS AND KITS CONTOUR NEXT STRIPS AND KITS CONTOUR STRIPS AND KITS FREESTYLE STRIPS AND KITS All other test strips that are not ACCU-CHEK or ONETOUCH brand	ACCU-CHEK AVIVA PLUS STRIPS AND KITS 7, ACCU-CHEK COMPACT PLUS STRIPS AND KITS 7, ACCU-CHEK GUIDE STRIPS AND KITS 7, ACCU-CHEK SMARTVIEW STRIPS AND KITS 7, ONETOUCH ULTRA STRIPS AND KITS 7, ONETOUCH VERIO STRIPS AND KITS 7
	ENLITE CONTINUOUS GLUCOSE MONITORING SYSTEM EVERSENSE CONTINUOUS GLUCOSE MONITORING SYSTEM FREESTYLE LIBRE CONTINUOUS GLUCOSE MONITORING SYSTEM GUARDIAN CONNECT CONTINUOUS GLUCOSE MONITORING SYSTEM GUARDIAN REAL-TIME CONTINUOUS GLUCOSE MONITORING SYSTEM All other continuous glucose monitoring systems that are not DEXCOM brand	DEXCOM CONTINUOUS GLUCOSE MONITORING SYSTEM
Dietary Supplements	FOSTEUM FOSTEUM PLUS	<i>alendronate, ibandronate, risedronate</i>
	<i>Activite Dexifol Folvite-D Genicin Vita-S HylaVite Lorid TronVite Vitasure Xvite FERIVA 21/7 FOLIC-K NICADAN NICAPRIN NICAZEL NICAZEL FORTE NICOMIDE OMNIVEX ORTHO D ORTHO DF RHEUMATE RIBOZEL TALIVA XYZBAC ZVIT</i>	<i>folic acid</i>
	<i>MultiPro PRODIGEN VASCULERA</i>	Consult doctor
Endocrine and Metabolic Corticosteroids	<i>prednisolone solution 10 mg/5 mL prednisolone solution 20 mg/5 mL BETAMETHASONE ACETATE- BETAMETHASONE SODIUM PHOSPHATE MILLIPRED RAYOS</i>	<i>dexamethasone, hydrocortisone, methylprednisolone, prednisolone solution (except prednisolone solution 10 mg/5 mL, 20 mg/5 mL), prednisone</i>
Endocrine and Metabolic Progestins	PROMETRIUM	<i>medroxyprogesterone; progesterone, micronized</i>
Endometriosis †	LUPRON DEPOT 1 ZOLADEX 1	ORLISSA
Gastrointestinal Anticholinergics	<i>chlordiazepoxide-clidinium (NDCs* 11534019701, 42494040901, 51293069601, 51293069610, 67877073101, 70700018501 only)</i>	<i>dicyclomine</i>

Category Drug Class	Formulary Drug Removals	Formulary Options
	hyoscyamine sulfate ext-rel Oscimin SR Symax-SR GLYCOPYRROLATE TABLET 1.5 MG LIBRAX	
Gastrointestinal Antidiarrheals	ENTERAGAM	alosetron, VIBERZI, XIFAXAN 550 MG
	MYTESI	diphenoxylate-atropine, loperamide
Gastrointestinal Antiemetics	TRANSDERM SCOP	meclizine, scopolamine transdermal
	ZUPLENZ	granisetron, ondansetron, SANCUSO
Gastrointestinal Irritable Bowel Syndrome	AMITIZA	lubiprostone, LINZESS, MOVANTIK, SYMPROIC
Gastrointestinal Laxatives	LACTULOSE PAK	lactulose solution
	peg 3350-electrolytes (generics for MOVIPREP only) GOLYTELY MOVIPREP OSMOPREP SUPREP	peg 3350-electrolytes (except generics for MOVIPREP), CLENPIQ
Gastrointestinal Probiotics	PROVAD ZELAC	Consult doctor
Gastrointestinal Proton Pump Inhibitors (PPIs)	omeprazole-sodium bicarbonate pantoprazole delayed-rel suspension ACIPHEX ACIPHEX SPRINKLE NEXIUM PREVACID PRILOSEC PROTONIX ZEGERID	esomeprazole delayed-rel, lansoprazole delayed-rel, omeprazole delayed-rel, pantoprazole delayed-rel tablet, DEXILANT
Gastrointestinal Ulcer Treatment	sucralfate suspension CARAFATE	sucralfate tablet
Gaucher Disease	ELELYSO <sup>1</sup>	CERDELGA, CEREZYME
Genitourinary Interstitial Cystitis	ELMIRON RIMSO-50	Consult doctor
Genitourinary Miscellaneous	LITHOSTAT	Consult doctor
	THIOLA <sup>1</sup> THIOLA EC <sup>1</sup>	tiopronin
Gout †	colchicine capsule COLCRYS	colchicine tablet, MITIGARE
	ULORIC	allopurinol
Growth Hormones	GENOTROPIN <sup>1</sup> HUMATROPE <sup>1</sup> NUTROPIN AQ <sup>1</sup> OMNITROPE <sup>1</sup> SAIZEN <sup>1</sup>	NORDITROPIN
Hematologic Anticoagulants Injectable	heparin sodium in 5% dextrose HEPARIN SODIUM IN 5% DEXTROSE	enoxaparin, fondaparinux
Hematologic Anticoagulants Oral	ELIQUIS PRADAXA	warfarin, XARELTO

<b>Category Drug Class</b>	<b>Formulary Drug Removals</b>	<b>Formulary Options</b>
<i>Hematologic</i> Chelating Agents	CUPRIMINE <sup>1</sup>	<i>penicillamine</i>
	DESFERAL <sup>1</sup> EXJADE <sup>1</sup> FERRIPROX <sup>1</sup> JADENU <sup>1</sup>	<i>deferasirox, deferiprone, deferoxamine</i>
	SYPRINE <sup>1</sup>	<i>trientine</i>
<i>Hematologic</i> Erythropoiesis-Stimulating Agents	ARANESP <sup>1</sup> EPOGEN <sup>1</sup> PROCRIT <sup>1</sup>	RETACRIT
<i>Hematologic</i> Miscellaneous Bleeding Disorders Agents	FEIBA <sup>1</sup>	NOVOSEVEN RT, SEVENFACT
<i>Hematologic</i> Neutropenia Colony Stimulating Factors	FULPHILA <sup>1</sup> NEULASTA <sup>1</sup> NEULASTA ONPRO <sup>1</sup> UDENYCA <sup>1</sup>	ZIEXTENZO
	GRANIX <sup>1</sup> LEUKINE <sup>1</sup> NEUPOGEN <sup>1</sup> ZARXIO <sup>1</sup>	NIVESTYM
<i>Hematologic</i> Platelet Aggregation Inhibitors	PLAVIX	<i>clopidogrel, prasugrel, BRILINTA</i>
	ZONTIVITY	Consult doctor
<i>Hematologic</i> Thrombocytopenia Agents	MULPLETA <sup>1</sup>	Consult doctor
	NPLATE <sup>1</sup>	PROMACTA, TAVALLISSE
<i>High Blood Pressure</i> † ACE Inhibitors	EPANED	<i>enalapril, fosinopril, lisinopril, quinapril, ramipril</i>
<i>High Blood Pressure</i> † ACE Inhibitor / Diuretic Combinations	ZESTORETIC	<i>fosinopril-hydrochlorothiazide, lisinopril-hydrochlorothiazide, quinapril-hydrochlorothiazide</i>
<i>High Blood Pressure</i> † Angiotensin II Receptor Antagonists	ATACAND BENICAR COZAAR DIOVAN EDARBI MICARDIS	<i>candesartan, irbesartan, losartan, olmesartan, telmisartan, valsartan</i>
<i>High Blood Pressure</i> † Angiotensin II Receptor Antagonist / Diuretic Combinations	ATACAND HCT BENICAR HCT DIOVAN HCT EDARBYCLOR HYZAAR MICARDIS HCT	<i>candesartan-hydrochlorothiazide, irbesartan-hydrochlorothiazide, losartan-hydrochlorothiazide, olmesartan-hydrochlorothiazide, telmisartan-hydrochlorothiazide, valsartan-hydrochlorothiazide</i>
<i>High Blood Pressure</i> † Angiotensin II Receptor Antagonist / Calcium Channel Blocker Combinations	AZOR EXFORGE	<i>amlodipine-olmesartan, amlodipine-telmisartan, amlodipine-valsartan</i>
<i>High Blood Pressure</i> † Angiotensin II Receptor Antagonist / Calcium Channel Blocker / Diuretic Combinations	EXFORGE HCT	<i>amlodipine-valsartan-hydrochlorothiazide, olmesartan-amlodipine-hydrochlorothiazide</i>
<i>High Blood Pressure</i> † Beta-blockers	COREG CR INDERAL LA INDERAL XL	<i>atenolol, carvedilol, carvedilol phosphate ext-rel, metoprolol succinate ext-rel, metoprolol tartrate, nadolol, nebivolol, pindolol, propranolol, propranolol ext-rel</i>

Category Drug Class	Formulary Drug Removals	Formulary Options
	INNOPRAN XL TOPROL-XL	
High Blood Pressure † Beta-blocker Combinations	DUTOPROL	metoprolol succinate ext-rel <b>WITH</b> hydrochlorothiazide
High Blood Pressure † Calcium Channel Blockers	NORVASC	amlodipine
	diltiazem ext-rel (generics for CARDIZEM LA only) Matzim LA CARDIZEM CARDIZEM CD CARDIZEM LA	diltiazem ext-rel (except generics for CARDIZEM LA)
High Blood Pressure † Calcium Channel Blocker / Nonsteroidal Anti-inflammatory Drugs (NSAIDs) Combinations	CONSENSI	amlodipine <b>WITH</b> celecoxib
Huntington's Disease	XENAZINE <sup>1</sup>	tetrabenazine, AUSTEDO
Immunology Antimetabolites	CELLCEPT <sup>1</sup> MYFORTIC <sup>1</sup>	mycophenolate mofetil, mycophenolate sodium
Immunology Calcineurin Inhibitors	ASTAGRAF XL <sup>1</sup> ENVARUSUS XR <sup>1</sup>	tacrolimus
Immunology Disease Modifying Antirheumatic Agents	OTREXUP <sup>1</sup>	RASUVO
Immunology Hereditary Angioedema	BERINERT <sup>1</sup>	icatibant, RUCONEST
	CINRYZE <sup>1</sup>	ORLADEYO, TAKHZYRO
Immunology Rapamycin Derivatives	RAPAMUNE <sup>1</sup> ZORTRESS <sup>1</sup>	everolimus, sirolimus
Inflammatory Bowel Disease (IBD) Ulcerative Colitis †	budesonide ext-rel mesalamine delayed-rel tablet 800 mg COLAZAL DELZICOL LIALDA	balsalazide, mesalamine delayed-rel (except mesalamine delayed-rel tablet 800 mg), mesalamine ext-rel, sulfasalazine, sulfasalazine delayed-rel, ASACOL HD, PENTASA
Interferons †	PEGASYS <sup>1</sup>	Consult doctor
Kidney Disease † Phosphate Binders	lanthanum carbonate FOSRENOL	calcium acetate, sevelamer carbonate, PHOSLYRA, VELPHORO
Menopausal Symptom Agents Oral	paroxetine mesylate capsule 7.5 mg	paroxetine HCl
	MENEST OSPHENA PREMARIN	estradiol
Menopausal Symptom Agents Transdermal	MINIVELLE VIVELLE-DOT	estradiol, DIVIGEL, EVAMIST
Menopausal Symptom Agents Vaginal	estradiol vaginal tablet Yuvafem ESTRING FEMRING INTRAROSA PREMARIN CREAM	estradiol vaginal cream, IMVEXXY, VAGIFEM

Category Drug Class	Formulary Drug Removals	Formulary Options
Multiple Sclerosis	EXTAVIA <sup>1</sup> TECFIDERA <sup>1</sup>	<i>dimethyl fumarate delayed-rel, glatiramer</i> , AUBAGIO, AVONEX, BETASERON, COPAXONE, GILENYA, KESIMPTA, MAYZENT, OCREVUS, REBIF, TYSABRI, VUMERITY, ZEPOSIA
Musculoskeletal	<i>carisoprodol 250 mg</i> <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 ext-rel capsule</i> <i>cyclobenzaprine tablet 7.5 mg</i> <i>metaxalone 400 mg</i> <i>methocarbamol 500 mg</i> (NDC* 69036091010 only) <i>methocarbamol 750 mg</i> (NDCs* 69036093090, 70868090190 only) <i>orphenadrine-aspirin-caffeine</i> <i>Fexmid</i> <i>Lorzone</i> <i>Orphengesic Forte</i> AMRIX NORGESIC FORTE	<i>cyclobenzaprine (except cyclobenzaprine tablet 7.5 mg)</i>
Narcolepsy Wakefulness Promoters	NUVIGIL PROVIGIL	<i>armodafinil, modafinil</i> , SUNOSI, WAKIX, XYWAV
Nephropathic Cystinosis	PROCYSBI <sup>1</sup>	CYSTAGON
Ophthalmic Allergies	ALREX BEPREVE LASTACAF ZERVIAE	<i>azelastine, bepotastine, cromolyn sodium, olopatadine</i>
Ophthalmic Anti-infectives	AZASITE CILOXAN	<i>ciprofloxacin, erythromycin, gentamicin, levofloxacin, moxifloxacin, ofloxacin, sulfacetamide, tobramycin</i> , BESIVANCE
Ophthalmic Anti-infective / Anti-inflammatory	TOBRADEX ST ZYLET	<i>neomycin-polymyxin B-bacitracin-hydrocortisone, neomycin-polymyxin B-dexamethasone, tobramycin-dexamethasone</i> , TOBRADEX OINTMENT
Ophthalmic Anti-inflammatory, Nonsteroidal	ACUVAIL BROMSITE NEVANAC	<i>bromfenac, diclofenac, ketorolac</i> , ILEVRO, PROLENSA
Ophthalmic Anti-inflammatory, Steroidal	FLAREX FML FORTE FML LIQUIFILM FML S.O.P. INVELTYS LOTEMAX LOTEMAX SM MAXIDEX PRED FORTE PRED MILD	<i>dexamethasone, difluprednate, loteprednol, prednisolone acetate 1%</i>
Ophthalmic Antivirals	ZIRGAN	<i>trifluridine</i>
Ophthalmic Artificial Tears	LACRISERT	RESTASIS, XIIDRA
Ophthalmic Glaucoma	<i>bimatoprost solution 0.03%</i> TRAVATAN Z	<i>latanoprost, travoprost</i> , LUMIGAN, ZIOPTAN
	BETIMOL TIMOPTIC OCUDOSE	<i>timolol maleate solution</i> , BETOPTIC S
Ophthalmic Miscellaneous	AVENOVA	Consult doctor

Category Drug Class	Formulary Drug Removals	Formulary Options
<i>Opioid Dependency</i>	SUBOXONE	<i>buprenorphine-naloxone sublingual, ZUBSOLV</i>
<i>Osteoporosis † Calcium Regulators</i>	MIACALCIN INJECTION	<i>alendronate, calcitonin-salmon, ibandronate, risedronate, FORTEO, PROLIA, TYMLOS</i>
<i>Otic Anti-infective / Anti-inflammatory</i>	<i>ciprofloxacin-fluocinolone</i> CIPRO HC CIPRODEX	<i>ciprofloxacin-dexamethasone, ofloxacin otic</i>
<i>Overactive Bladder / Incontinence † Urinary Antispasmodics</i>	DETROL LA MYRBETRIQ OXYTROL	<i>darifenacin ext-rel, oxybutynin ext-rel, solifenacin, tolterodine, tolterodine ext-rel, trospium, trospium ext-rel, GEMTESA, TOVIAZ</i>
<i>Pain Headache †</i>	<i>butalbital-acetaminophen capsule</i> <i>butalbital-acetaminophen tablet 25-325 mg</i> <i>butalbital-acetaminophen tablet 50-300 mg</i> <i>butalbital-acetaminophen-caffeine capsule</i> Bupap Vtol LQ BUTALBITAL-ACETAMINOPHEN (NDC* 69499034230 only) CAMBIA FIORICET CAPSULE	<i>diclofenac sodium, ibuprofen, naproxen (except naproxen CR or naproxen suspension)</i>
	<i>dihydroergotamine spray</i> <i>ergotamine-caffeine</i> Migergot CAFERGOT MAXALT MAXALT-MLT	<i>eletriptan, naratriptan, rizatriptan, sumatriptan, zolmitriptan, NURTEC ODT, ONZETRA XSAIL, UBRELVY, ZEMBRACE SYMTOUCH, ZOMIG NASAL SPRAY</i>
	<i>sumatriptan-naproxen</i> TREMIMET	<i>diclofenac sodium, ibuprofen or naproxen (except naproxen CR or naproxen suspension) WITH eletriptan, naratriptan, rizatriptan, sumatriptan, zolmitriptan, NURTEC ODT, ONZETRA XSAIL, UBRELVY, ZEMBRACE SYMTOUCH or ZOMIG NASAL SPRAY</i>
<i>Pain Migraine CGRP Inhibitors</i>	AIMOVIG	AJOVY, EMGALITY
<i>Pain Neuropathic Pain †</i>	LYRICA	<i>duloxetine, pregabalin, pregabalin ext-rel</i>
<i>Pain Opioid Analgesics</i>	BUTRANS	<i>buprenorphine transdermal, BELBUCA</i>
	LAZANDA	<i>fentanyl transmucosal lozenge, SUBSYS</i>
	<i>levorphanol</i> <i>oxymorphone ext-rel</i> HYSINGLA ER OXYCONTIN	<i>fentanyl transdermal, hydrocodone ext-rel, hydromorphone ext-rel, methadone, morphine ext-rel, NUCYNZA ER, XTAMPZA ER</i>
	PERCOCET	<i>hydrocodone-acetaminophen, hydromorphone, morphine, oxycodone-acetaminophen, NUCYNZA</i>
	<i>tramadol (NDC* 52817019610 only)</i> <i>tramadol ext-rel capsule</i>	<i>tramadol (except NDC* 52817019610), tramadol ext-rel tablet</i>
<i>Pain Topical Local Anesthetics</i>	LIDOCAINE-TETRACAINE CREAM (NDC* 71800063115 only) LIDOTREX	<i>lidocaine-prilocaine</i>
<i>Pain and Inflammation † Nonsteroidal Anti-inflammatory Drugs (NSAIDs) / Combinations</i>	ARTHROTEC	<i>celecoxib; diclofenac sodium, ibuprofen, meloxicam tablet or naproxen (except naproxen CR or naproxen suspension) WITH esomeprazole delayed-rel, lansoprazole delayed-rel, omeprazole delayed-rel, pantoprazole delayed-rel tablet or DEXILANT</i>
	CELEBREX	<i>celecoxib, diclofenac sodium, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)</i>

Category Drug Class	Formulary Drug Removals	Formulary Options
	<p>CapsFenac Pak Capsinac Diclofex DC DicloHeal-60 Iclofenac CP Inflammacin Kapzin DC NuDiclo SoluPak NuDiclo TabPak Pennaicin Sure Result DSS Premium Pack Ziclopro PENNSAID</p>	<p>diclofenac sodium, diclofenac sodium gel 1%, diclofenac sodium solution, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)</p>
	<p>fenoprofen indomethacin capsule 20 mg ketoprofen capsule 25 mg ketoprofen ext-rel capsule mefenamic acid (NDC* 69336012830 only) meloxicam capsule naproxen CR naproxen suspension FENOPROFEN CAPSULE INDOCIN NAPRELAN SPRIX ZORVOLEX</p>	<p>diclofenac sodium, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)</p>
	<p>naproxen-esomeprazole</p>	<p>diclofenac sodium, ibuprofen, meloxicam tablet or naproxen (except naproxen CR or naproxen suspension) <b>WITH</b> esomeprazole delayed-rel, lansoprazole delayed-rel, omeprazole delayed-rel, pantoprazole delayed-rel tablet or DEXILANT</p>
<b>Parkinson's Disease</b>	<p>APOKYN<sup>1</sup></p>	<p>INBRIJA, KYNMOBI</p>
	<p>NOURIANZ</p>	<p>amantadine, entacapone, pramipexole, pramipexole ext-rel, rasagiline, ropinirole, ropinirole ext-rel, selegiline, NEUPRO</p>
	<p>RYTARY</p>	<p>carbidopa-levodopa, carbidopa-levodopa ext-rel</p>
<b>Phenylketonuria</b>	<p>KUVAN<sup>1</sup></p>	<p>sapropterin</p>
<b>Postherpetic Neuralgia</b>	<p>HORIZANT</p>	<p>gabapentin, pregabalin, pregabalin ext-rel, GRALISE</p>
<b>Premenstrual Dysphoric Disorder (PMDD)</b>	<p>fluoxetine tablet (generics for SARAFEM only)</p>	<p>fluoxetine (except fluoxetine tablet 60 mg, fluoxetine tablet [generics for SARAFEM]), paroxetine HCl ext-rel (except NDC* 60505367503), sertraline</p>
<b>Prenatal Vitamins<sup>9</sup></b>	<p>AZESCO PRENATAL PLUS TRINAZ VITAFOL-ONE ZALVIT All other brand prenatal vitamins that are not CITRANATAL</p>	<p>prenatal vitamins, CITRANATAL</p>
<b>Prostate Condition Benign Prostatic Hyperplasia †</b>	<p>JALYN</p>	<p>dutasteride-tamsulosin; dutasteride or finasteride <b>WITH</b> alfuzosin ext-rel, doxazosin, silodosin, tamsulosin or terazosin</p>
	<p>RAPAFLO UROXATRAL</p>	<p>alfuzosin ext-rel, doxazosin, silodosin, tamsulosin, terazosin</p>
<b>Pseudobulbar Affect</b>	<p>NUEDEXTA</p>	<p>Consult doctor</p>
<b>Respiratory Alpha-1 Antitrypsin Deficiency</b>	<p>ARALAST NP<sup>1</sup> GLASSIA<sup>1</sup> ZEMAIRA<sup>1</sup></p>	<p>PROLASTIN-C</p>
<b>Respiratory Anaphylaxis Treatment Agents</b>	<p>ADRENALIN SYMJEPI</p>	<p>epinephrine auto-injector, AUVI-Q, EPIPEN, EPIPEN JR</p>
<b>Respiratory Cough</b>	<p>benzonatate (NDCs* 69336012615, 69499032915 only)</p>	<p>benzonatate (except NDCs* 69336012615, 69499032915)</p>

Category Drug Class	Formulary Drug Removals	Formulary Options
Respiratory Xanthines	THEO-24	<i>ipratropium inhalation solution</i> , PERFOROMIST, SEREVENT, SPIRIVA, STRIVERDI RESPIMAT, YUPELRI
Sleep Disorder Hypnotics, Non-benzodiazepines	<i>quazepam</i> <i>zolpidem sublingual</i> LUNESTA ROZEREM SILENOR ZOLPIMIST	<i>doxepin</i> , <i>eszopiclone</i> , <i>ramelteon</i> , <i>zolpidem</i> , <i>zolpidem ext-rel</i> , BELSOMRA
Testosterone Replacement † Androgens	<i>testosterone gel 1%</i> (authorized generics for TESTIM and VOGELXO only) ANDROGEL FORTESTA TESTIM VOGELXO	<i>testosterone gel</i> (except authorized generics for TESTIM and VOGELXO), <i>testosterone solution</i> , ANDRODERM, NATESTO
Thyroid Supplements	CYTOMEL NATURE-THROID WESTHROID WP THYROID	<i>levothyroxine</i> , <i>liothyronine</i> , SYNTHROID
	TIROSINT	<i>levothyroxine</i> , SYNTHROID
Transplant † Immunosuppressants, Calcineurin Inhibitors	PROGRAF †	<i>tacrolimus</i>
Urea Cycle Disorders	BUPHENYL † RAVICTI †	<i>sodium phenylbutyrate</i>
Uterine Fibroids †	LUPRON DEPOT †	ORIAHNN, MYFEMBREE

Category Drug Class	Other Considerations
All Drugs	On a quarterly basis, new and existing products - including limited source generics, products with significant cost inflation, and specialty and non-specialty products - may be re-evaluated to determine appropriate formulary placement. These evaluations will assess whether clinically appropriate and cost-effective options remain available on the formulary and may result in removal, addition or deletion of a product.
Autoimmune and Hepatitis C †	For some clients, an Indication-Based Formulary will be utilized for products in these classes and may result in additional removals for certain conditions only.
Drugs for Infusion Into Spaces Other Than the Blood	A drug that must be infused into a space other than the blood will generally not be covered under the prescription drug benefit.
New-to-Market Agents †	New-to-market products and new variations of products already in the marketplace will not be added to the formulary immediately. Each product will be evaluated for clinical appropriateness and cost-effectiveness. Recommended additions to the formulary will be presented to the CVS Caremark® National Pharmacy and Therapeutics Committee (or other appropriate reviewing body) for review and approval.

The listed formulary options are subject to change.

## List of Formulary Drug Removals

ABILIFY  
ACANYA  
ACIPHEX  
ACIPHEX SPRINKLE  
ACTEMRA ACTPEN †  
ACTEMRA INTRAVENOUS †  
ACTEMRA SUBCUTANEOUS †  
ACTICLATE  
*Activite*  
ACTOS  
ACUVAIL  
*acyclovir cream*

*adapalene pad*  
ADCIRCA †  
ADDERALL  
ADRENALIN  
ADZENYS ER  
ADZENYS XR-ODT  
AFINITOR †  
AIMOVIG  
*albuterol sulfate CFC-free aerosol*  
(NDC\* 66993001968 only)  
ALEVICYN GEL  
ALEVICYN SG

ALEVICYN SOLUTION  
ALIQOPA †  
ALLISON MEDICAL INSULIN SYRINGES †  
ALREX  
ALTOPREV  
ALVESCO  
AMITIZA  
AMRIX  
ANDROGEL  
APEXICON E  
APIDRA  
APOKYN †



APTENSIO XR  
APTIVUS<sup>1</sup>  
ARALAST NP<sup>1</sup>  
ARANESP<sup>1</sup>  
ARTHROTEC  
ASMANEX  
ASMANEX HFA  
ASTAGRAF XL<sup>1</sup>  
ATACAND  
ATACAND HCT  
ATIVAN  
ATOPADERM  
ATRIPLA<sup>1</sup>  
AVASTIN<sup>1</sup>  
AVENOVA  
AVSOLA<sup>1</sup>  
AZASITE  
AZELEX  
AZESCO  
AZOR  
BALCOLTRA  
BANZEL SUSPENSION  
BARACLUDE TABLET<sup>1</sup>  
BEAU RX  
BECONASE AQ  
BENICAR  
BENICAR HCT  
BENSAL HP  
BENZACLIN  
*benzonatate* (NDCs\* 69336012615, 69499032915 only)  
BEPREVE  
BERINERT<sup>1</sup>  
BETAMETHASONE ACETATE-  
BETAMETHASONE SODIUM PHOSPHATE  
BETAPACE  
BETAPACE AF  
BETIMOL  
BEVESPI AEROSPHERE  
BEYAZ  
*bimatoprost solution 0.03%*  
BORTEZOMIB<sup>1</sup>  
BOTOX<sup>1</sup>  
BREEZE 2 STRIPS AND KITS<sup>8</sup>  
BROMSITE  
*budesonide ext-rel*  
*Bupap*  
BUPHENYL<sup>1</sup>  
*bupropion ext-rel tablet 450 mg*  
*butalbital-acetaminophen capsule*  
*butalbital-acetaminophen tablet 25-325 mg*  
*butalbital-acetaminophen tablet 50-300 mg*  
BUTALBITAL-ACETAMINOPHEN  
(NDC\* 69499034230 only)  
*butalbital-acetaminophen-caffeine capsule*  
BUTRANS  
BYDUREON BCISE  
BYETTA  
CAFERGOT  
*calcipotriene cream*  
*calcipotriene foam*  
CALCIPOTRIENE FOAM  
*calcipotriene-betamethasone*  
*calcitriol ointment*  
CAMBIA  
*CapsFenac Pak*  
*Capsinac*  
CARAC  
CARAFATE  
CARBINOXAMINE TABLET 6 MG  
CARDIZEM  
CARDIZEM CD  
CARDIZEM LA  
*carisoprodol 250 mg*  
CARNITOR  
CARNITOR SF  
CELEBREX  
CELLCEPT<sup>1</sup>  
*chlordiazepoxide-clidinium* (NDCs\* 11534019701,

42494040901, 51293069601, 51293069610,  
67877073101, 70700018501 only)  
*chlorzoxazone 250 mg*  
*chlorzoxazone 375 mg*  
*chlorzoxazone 500 mg* (NDC\* 73007001303 only)  
*chlorzoxazone 750 mg*  
CICATRACE  
CILOXAN  
CIMZIA LYOPHILIZED POWDER<sup>1</sup>  
CINRYZE<sup>1</sup>  
CIPRO HC  
CIPRODEX  
*ciprofloxacin-fluocinolone*  
*clindamycin gel* (NDC\* 68682046275 only)  
*clobetasol spray*  
CLOBEX SPRAY  
*clocortolone cream*  
COLAZAL  
*colchicine capsule*  
COLCRY  
COMPLERA<sup>1</sup>  
CONSENSI  
CONTOUR NEXT STRIPS AND KITS<sup>8</sup>  
CONTOUR STRIPS AND KITS<sup>8</sup>  
CORDRAN CREAM  
CORDRAN LOTION  
CORDRAN OINTMENT  
CORDRAN TAPE  
COREG CR  
*CoreMino*  
COZAAR  
CRESEMBA  
CRESTOR  
CUPRIMINE<sup>1</sup>  
*cyclobenzaprine ext-rel capsule*  
*cyclobenzaprine tablet 7.5 mg*  
CYMBALTA  
CYTOMEL  
DARAPRIM  
DAYTRANA  
DELZICOL  
DEFERAL<sup>1</sup>  
*desonide gel*  
*desoximetasone ointment 0.05%*  
*DesRx*  
DETROL LA  
*dexchlorpheniramine*  
*Dexifol*  
*Diclofex DC*  
*DicloHeal-60*  
DIFFERIN LOTION  
*difforasone cream*  
*difforasone ointment*  
*dihydroergotamine spray*  
*diltiazem ext-rel* (generics for CARDIZEM LA only)  
DIOVAN  
DIOVAN HCT  
*Diphen Elixir*  
DORYX  
DORYX MPC  
*doxepin cream*  
*doxycycline hyclate delayed-rel tablet*  
*doxycycline hyclate tablet 50 mg*  
(NDC\* 72143021160 only)  
*doxycycline hyclate tablet 75 mg*  
*doxycycline hyclate tablet 150 mg*  
*doxycycline monohydrate capsule 75 mg*  
*doxycycline monohydrate capsule 150 mg*  
*doxycycline monohydrate delayed-rel capsule*  
DULERA  
DUTOPROL  
DYMISTA  
DYRENIUM  
EDARBI  
EDARBYCLOR  
E.E.S. GRANULES  
EFFEXOR XR  
ELELYSO<sup>1</sup>

ELIDEL  
ELIQUIS  
ELMIRON  
ENLITE CONTINUOUS  
GLUCOSE MONITORING SYSTEM  
ENTERAGAM  
ENTYVIO (For Crohn's Disease Only)<sup>1</sup>  
ENVARUS XR<sup>1</sup>  
EPANED  
EPICERAM  
EPIVIR HBV<sup>1</sup>  
EPOGEN<sup>1</sup>  
*ergotamine-caffeine*  
ERYPED  
*estradiol vaginal tablet*  
ESTRING  
EVEKEO  
EVERSENSE CONTINUOUS  
GLUCOSE MONITORING SYSTEM  
EXFORGE  
EXFORGE HCT  
EXJADE<sup>1</sup>  
EXTAVIA<sup>1</sup>  
FABIOR  
FANAPT  
FEIBA<sup>1</sup>  
FEMRING  
*fenofibrate capsule 50 mg*  
*fenofibrate capsule 130 mg*  
*fenofibrate tablet 40 mg*  
*fenofibrate tablet 120 mg*  
FENOGLIDE TABLET 120 MG  
*fenoprofen*  
FENOPROFEN CAPSULE  
FERIVA 21/7  
FERRIPROX<sup>1</sup>  
*Fexmid*  
FINACEA GEL  
FIORICET CAPSULE  
FLAREX  
*flucytosine capsule 500 mg*  
*fluocinonide cream 0.1%*  
*fluorouracil cream 0.5%*  
*fluoxetine tablet* (generics for SARAFEM only)  
*fluoxetine tablet 60 mg*  
*flurandrenolide cream*  
*flurandrenolide lotion*  
*flurandrenolide ointment*  
FML FORTE  
FML LIQUIFILM  
FML S.O.P.  
FOCALIN XR  
FOLIC-K  
*Folvite-D*  
FORTAMET  
FORTESTA  
FOSRENOL  
FOSTEUM  
FOSTEUM PLUS  
FREESTYLE LIBRE CONTINUOUS  
GLUCOSE MONITORING SYSTEM  
FREESTYLE STRIPS AND KITS<sup>8</sup>  
FULPHILA<sup>1</sup>  
*Genicin Vita-S*  
GENOTROPIN<sup>1</sup>  
GLASSIA<sup>1</sup>  
GLEEVEC<sup>1</sup>  
GLUMETZA  
GLYCOPYRROLATE TABLET 1.5 MG  
GOLYTELY  
GRANIX<sup>1</sup>  
GUARDIAN CONNECT CONTINUOUS  
GLUCOSE MONITORING SYSTEM  
GUARDIAN REAL-TIME CONTINUOUS  
GLUCOSE MONITORING SYSTEM  
*halcinonide cream*  
HALOG  
*heparin sodium in 5% dextrose*

HEPARIN SODIUM IN 5% DEXTROSE  
HEPSERA<sup>1</sup>  
HERCEPTIN<sup>1</sup>  
HERCEPTIN HYLECTA<sup>1</sup>  
HORIZANT  
HUMALOG  
HUMALOG MIX 50/50  
HUMALOG MIX 75/25  
HUMATROPE<sup>1</sup>  
HUMULIN 70/30<sup>4</sup>  
HUMULIN N<sup>4</sup>  
HUMULIN R<sup>4</sup>  
*hydrocortisone butyrate lipophilic cream 0.1%*  
*hydrocortisone butyrate lotion*  
*HylaVite*  
*hyoscyamine sulfate ext-rel*  
HYSINGLA ER  
HYZAAR  
*Iclofenac CP*  
ICLUSIG<sup>1</sup>  
*icosapent ethyl*  
ILUMYA<sup>1</sup>  
INCRUSE ELLIPTA  
INDERAL LA  
INDERAL XL  
INDOCIN  
*indomethacin capsule 20 mg*  
*Inflammacin*  
INFLECTRA<sup>1</sup>  
INNOPRAN XL  
INTRAROSA  
INTUNIV  
INVELTYS  
INVIRASE<sup>1</sup>  
INVOKAMET  
INVOKAMET XR  
INVOKANA  
*isosorbide dinitrate 40 mg*  
*ivermectin cream*  
JADENU<sup>1</sup>  
JALYN  
JENTADUETO  
JENTADUETO XR  
KAMDOY  
*Kapzin DC*  
KAZANO  
*ketoconazole foam 2%*  
*Ketodan*  
*ketoprofen capsule 25 mg*  
*ketoprofen ext-rel capsule*  
KINERET<sup>1</sup>  
KOMBIGLYZE XR  
KUVAN<sup>1</sup>  
KYPROLIS<sup>1</sup>  
LACRISERT  
LACTULOSE PAK  
LANOXIN TABLET (125 MCG and 250 MCG only)  
*lanthanum carbonate*  
LANTUS  
LASTACFT  
LAZANDA  
LESCOL XL  
LETAIRIS<sup>1</sup>  
LEUKINE<sup>1</sup>  
*levorphanol*  
LEXAPRO  
LEXIVA<sup>1</sup>  
LIALDA  
LIBRAX  
LIDOCAINE-TETRACAINE CREAM  
(NDC\* 71800063115 only)  
LIDOTREX  
LILETTA<sup>1</sup>  
LIPITOR  
LITHOSTAT  
LIVALO  
*Lorid*  
*Lorzone*

LOTEMAX  
LOTEMAX SM  
*luliconazole*  
LUNESTA  
LUPRON DEPOT<sup>1</sup>  
LYRICA  
MACRODANTIN  
*Matzim LA*  
MAVYRET<sup>1</sup>  
MAXALT  
MAXALT-MLT  
MAXIDEX  
*mefenamic acid (NDC\* 69336012830 only)*  
*meloxicam capsule*  
MENEST  
*mesalamine delayed-rel tablet 800 mg*  
*metaxalone 400 mg*  
*metformin ext-rel*  
(generics for FORTAMET and GLUMETZA only)  
*methocarbamol 500 mg (NDC\* 69036091010 only)*  
*methocarbamol 750 mg*  
(NDCs\* 69036093090, 70868090190 only)  
MIACALCIN INJECTION  
MICARDIS  
MICARDIS HCT  
*Migergot*  
MILLIPRED  
MINASTRIN 24 FE  
MINIVELLE  
*minocycline ext-rel*  
MIRVASO  
*Mondoxyne NL capsule 75 mg*  
MOVIPREP  
MULPLETA<sup>1</sup>  
*MultiPro*  
*mupirocin cream*  
MYFORTIC<sup>1</sup>  
MYRBETRIQ  
MYTESI  
NAPRELAN  
*naproxen CR*  
*naproxen suspension*  
*naproxen-esomeprazole*  
NATURE-THROID  
NEO-SYNALAR  
NESINA  
NEULASTA<sup>1</sup>  
NEULASTA ONPRO<sup>1</sup>  
NEUPOGEN<sup>1</sup>  
NEVANAC  
NEXIUM  
*niacin tablet 500 mg*  
*Niacor*  
NICADAN  
NICAPRIN  
NICAZEL  
NICAZEL FORTE  
NICOMIDE  
NILANDRON  
*nitrofurantoin (NDCs\* 16571074024, 70408023932 only)*  
*Nolix*  
NORGESIC FORTE  
NORITATE  
NORPACE  
NORVASC  
NOURIANZ  
NOVO NORDISK NEEDLES<sup>6</sup>  
NOXAFIL  
NPLATE<sup>1</sup>  
*NuDiclo SoluPak*  
*NuDiclo TabPak*  
NUDEXTA  
NUTROPIN AQ<sup>1</sup>  
NUVARING  
NUVIGIL  
OLUX-E  
*omeprazole-sodium bicarbonate*  
OMNARIS

OMNITROPE<sup>1</sup>  
OMNIVEX  
ONFI  
ONGLYZA  
ORENCIA INTRAVENOUS<sup>1</sup>  
*orphenadrine-aspirin-caffeine*  
*Orphengesic Forte*  
ORTHO D  
ORTHO DF  
*Oscimin SR*  
OSENI  
OSMOPREP  
OSPHENA  
OTREXUP<sup>1</sup>  
OWEN MUMFORD NEEDLES<sup>6</sup>  
*oxiconazole (NDCs\* 00168035830, 51672135902 only)*  
OXYCONTIN  
*oxymorphone ext-rel*  
OXYTROL  
*pantoprazole delayed-rel suspension*  
*paroxetine HCl ext-rel (NDC\* 60505367503 only)*  
*paroxetine mesylate capsule 7.5 mg*  
PAXIL  
PAXIL CR  
*peg 3350-electrolytes (generics for MOVIPREP only)*  
PEGASYS<sup>1</sup>  
*Pennaiclin*  
PENNSAID  
PERCOCET  
PERRIGO NEEDLES<sup>6</sup>  
PEXEVA  
PLAVIX  
POLYTOZA  
*posaconazole delayed-rel tablet*  
PRADAXA  
PRED FORTE  
PRED MILD  
*prednisolone solution 10 mg/5 mL*  
*prednisolone solution 20 mg/5 mL*  
PREMARIN  
PREMARIN CREAM  
PRENATAL PLUS  
PREVACID  
PREVIDENT  
PRILOSEC  
PRISTIQ  
PROAIR HFA  
PROAIR RESPICLICK  
PROCRIT<sup>1</sup>  
PROCYSBI<sup>1</sup>  
PRODIGEN  
PROGRAF<sup>1</sup>  
PROMETRIUM  
PROTONIX  
PROVAD  
PROVENTIL HFA  
PROVIGIL  
PROZAC  
PSORCON  
QNASL  
QTERN  
*quazepam*  
RAPAFLO  
RAPAMUNE<sup>1</sup>  
RAVICTI<sup>1</sup>  
RAYOS  
RECEDO  
REMODULIN<sup>1</sup>  
RENFLEXIS<sup>1</sup>  
REPATHA<sup>1</sup>  
REVATIO<sup>1</sup>  
RHEUMATE  
RIABNI<sup>1</sup>  
RIBOZEL  
RIMSO-50  
RIOMET  
RITUXAN<sup>1</sup>  
ROZEREM

RyClora  
RYTARY  
SABRIL<sup>1</sup>  
SAIZEN<sup>1</sup>  
SANDOSTATIN LAR<sup>1</sup>  
SCARSILK PAD  
SEASONIQUE  
SEROQUEL XR  
SIGNIFOR LAR<sup>1</sup>  
SIL-K PAD  
SILENOR  
SILIVEX  
SILTREX  
SIMPONI<sup>1</sup>  
SINGULAIR  
SOMAVERT<sup>1</sup>  
SORILUX  
SPRIX  
STRIBILD<sup>1</sup>  
SUBOXONE  
*sucralfate suspension*  
*sumatriptan-naproxen*  
SUPREP  
*Sure Result DSS Premium Pack*  
*Symax-SR*  
SYMJEPI  
SYNERDERM  
SYPRINE<sup>1</sup>  
TALIVA  
*Targadox*  
TASIGNA<sup>1</sup>  
*tavaborole*  
TAYTULLA  
TAZORAC  
TECFIDERA<sup>1</sup>  
TESTIM  
*testosterone gel 1%*  
(authorized generics for TESTIM and VOGELXO only)  
THEO-24  
THIOLA<sup>1</sup>  
THIOLA EC<sup>1</sup>  
TIMOPTIC OCUDOSE  
TIROSINT

TOBI<sup>1</sup>  
TOBI PODHALER<sup>1</sup>  
TOBRADEX ST  
*topiramate ext-rel capsule (generics for QUDEXY XR only)*  
TOPROL-XL  
TRACLEER<sup>1</sup>  
TRADJENTA  
*tramadol (NDC\* 52817019610 only)*  
*tramadol ext-rel capsule*  
TRANSDERM SCOP  
TRAVATAN Z  
TRELSTAR MIXJECT<sup>1</sup>  
TREXIMET  
*triamcinolone aerosol 0.2%*  
*triamcinolone ointment 0.05%*  
*Trianex*  
TRICOR  
TRINAZ  
TRIVIDIA INSULIN SYRINGES<sup>6</sup>  
*TronVite*  
TRUVADA<sup>1</sup>  
TRUXIMA<sup>1</sup>  
TUDORZA  
UDENYCA<sup>1</sup>  
ULORIC  
ULTIMED INSULIN SYRINGES<sup>6</sup>  
ULTIMED NEEDLES<sup>6</sup>  
ULTRAVATE  
UROXATRAL  
VALCYTE  
VALTREX  
*Vanoxide-HC*  
VASCULERA  
VECTICAL  
VELTIN  
*venlafaxine ext-rel tablet (except 225 mg)*  
VENTOLIN HFA  
VEREGEN  
VIEKIRA PAK<sup>1</sup>  
VIIBRYD  
VIRACEPT<sup>1</sup>  
VITAFOL-ONE  
*Vitasure*

VIVELLE-DOT  
VOGELXO  
*Vtol LQ*  
WESTHROID  
WP THYROID  
XALKORI<sup>1</sup>  
XANAX  
XANAX XR  
XENAZINE<sup>1</sup>  
XOLEGEL  
XOPENEX HFA  
*Xvite*  
XYZBAC  
YASMIN  
YAZ  
*Yuvafem*  
ZALVIT  
ZARXIO<sup>1</sup>  
ZEGERID  
ZELAC  
ZEMAIRA<sup>1</sup>  
ZEPATIER<sup>1</sup>  
ZERVIAE  
ZESTORETIC  
ZETIA  
ZETONNA  
ZIANA  
*Ziclopro*  
*zileuton ext-rel*  
ZIRGAN  
ZOLADEX<sup>1</sup>  
ZOLOFT  
*zolpidem sublingual*  
ZOLPIMIST  
ZONEGRAN  
ZONTIVITY  
ZORTRESS<sup>1</sup>  
ZORVOLEX  
ZUPLENZ  
ZYDELIG<sup>1</sup>  
ZYLET  
ZYTIGA<sup>1</sup>  
ZYVIT

This list represents brand products in CAPS, branded generics in upper- and lowercase *Italics*, and generic products in lowercase *italics*. This is not an all-inclusive list of available covered options. Log in to [Caremark.com](https://www.caremark.com) to check coverage and copay information for a specific drug. Discuss this information with your doctor or health care provider. This information is not a substitute for medical advice or treatment. Talk to your doctor or health care provider about this information and any health-related questions you have. CVS Caremark assumes no liability whatsoever for the information provided or for any diagnosis or treatment made as a result of this information. This list is subject to change. There may be additional plan restrictions. Please consult your plan for further information.

Subject to applicable laws and regulations.

<sup>†</sup> This list indicates the common uses for which the drug is prescribed. Some drugs are prescribed for more than one condition.

\* 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.

\*\* Listing does not include certain NDCs\*.

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

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

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

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

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

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

<sup>7</sup> An ACCU-CHEK or ONETOUCH blood glucose meter may be provided at no charge by the manufacturer to those individuals currently using a meter other than ACCU-CHEK or ONETOUCH. For more information on how to obtain a blood glucose meter, call: 1-877-418-4746.

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

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

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