



## 2024 Value Managed Formulary List

The 2024 Value Managed Formulary drug list is shown below. The formulary is the list of drugs included in your prescription plan. Inclusion does not guarantee coverage. The following list is not a complete list of products that are on the formulary.

**PLEASE NOTE: Brand-name drugs may move to non-preferred status if a generic version becomes available during the year. Not all the drugs listed are covered by all prescription plans; check your benefit materials for the specific drugs covered and the copayments for your prescription plan. For specific questions about your coverage, please call the phone number printed on your ID card. Patients can log into [www.kpp-rx.com](http://www.kpp-rx.com) to view real time formulary and benefit information with their provider.**

### KEY

[PA] – Prior Authorization Requirement

[ST] – Step Therapy Requirement

Brand-name drugs are listed in CAPITAL letters. Example: ABILIFY MAINTENA.

Generic drugs are listed in lower-case letters. Example: ibuprofen.

**For the member:** FDA-approved generic medications meet strict standards and contain the same active ingredients as their corresponding brand-name medications, although they may have a different appearance.

**For the physician:** Please prescribe preferred products and allow generic substitutions when medically appropriate.

<p><b>1</b></p> <p>1ST TIER UNIFINE PENTIPS</p> <p>1ST TIER UNIFINE PENTIPS PLUS</p> <p><b>A</b></p> <p>ABILIFY ASIMTUFII ABILIFY MAINTENA ABILIFY MYCITE ABSORICA ABSORICA LD ACCU-CHEK FASTCLIX LANCET DRUM ACCU-CHEK FASTCLIX LANCING DEV ACCU-CHEK SOFTCLIX acetaminophen-codeine ACTEMRA [PA] ACTEMRA ACTPEN [PA] acyclovir ADBRY [PA] ADEMPAS [PA] ADVAIR HFA ADVATE ADYNOVATE AEMCOLO</p>	<p>AFSTYLA AIMOVIG AUTOINJECTOR [PA] AJOVY AUTOINJECTOR [PA] AJOVY SYRINGE [PA] AKLIEF albuterol sulfate albuterol sulfate hfa ALECENSA [PA] alendronate sodium allopurinol ALPHAGAN P alprazolam ALPROLIX ALUNBRIG [PA] amitriptyline hcl amlodipine besylate amlodipine besylate- benazepril amoxicillin amoxicillin-clavulanate potass AMZEEQ anastrozole ANDRODERM [PA]</p>	<p>ANORO ELLIPTA APLENZIN APRISO APTIOM ARALAST NP ARANESP [PA] ARIKAYCE [PA] aripiprazole ARISTADA ARISTADA INITIO ARMONAIR DIGIHALER ARMOUR THYROID ARNUITY ELLIPTA ASMANEX ASMANEX HFA atenolol atomoxetine hcl ATORVALIQ [ST] atorvastatin calcium AURYXIA AUVI-Q AVONEX [PA] AVONEX PEN [PA] AZASITE azelastine hcl</p>	<p>azithromycin</p> <p><b>B</b></p> <p>baclofen BAFIERTAM [PA] BAQSIMI BARACLUDGE BAXDELA [PA] BELBUCA BENEFIX benzonatate benztropine mesylate BEPREVE BESIVANCE BETASERON [PA] BETHKIS BETOPTIC S BIJUVA BIKTARVY BINOSTO BOSULIF [PA] BREO ELLIPTA BREXAFEMME brompheniramine- pseudoephed-dm BROMSITE</p>
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Cost for covered alternatives may vary.

BRONCHITOL [PA]  
BRUKINSA [PA]  
budesonide-formoterol  
fumarate  
buprenorphine hcl  
buprenorphine-  
naloxone  
bupropion hcl  
bupropion hcl sr  
bupropion xl  
buspirone hcl  
butalbital-  
acetaminophen-caffe  
BYOOVIZ [PA]

## C

CABOMETYX [PA]  
CAMBIA  
CAPLYTA  
CARAFATE  
CARBAGLU [PA]  
carbamazepine  
CAROSPIR [ST]  
carvedilol  
cefazolin sodium  
cefdinir  
celecoxib  
cephalexin  
CEQUA  
CERDELGA [PA]  
CEREFOLIN NAC  
CEREZYME [PA]  
CETRALAX  
CETROTIDE  
chlorhexidine gluconate  
chlorthalidone  
CIBINQO [PA]  
CIMDUO  
CIMERLI [PA]  
ciprofloxacin hcl  
citalopram hbr  
CLENPIQ  
clindamycin hcl  
clindamycin phosphate  
clobetasol propionate  
clonazepam  
clonidine hcl  
clopidogrel

COMBIGAN  
COMBIPATCH  
COMBIVENT RESPIMAT  
COMETRIQ [PA]  
CONSENSI  
CORLANOR  
CORTROPHIN [PA]  
COTELLIC [PA]  
COTEMPLA XR-ODT  
CREON  
CRINONE  
cyclobenzaprine hcl  
CYCLOSET

## D

DAYTRANA  
DAYVIGO [ST]  
DENAVER  
DEPLIN-ALGAL OIL  
DESCOVY  
desvenlafaxine succinate  
er  
dexamethasone  
DEXCOM G6 RECEIVER  
DEXCOM G6 SENSOR  
DEXCOM G6  
TRANSMITTER  
DEXCOM G7 RECEIVER  
DEXCOM G7 SENSOR  
dexmethylphenidate hcl  
er  
dextroamphetamine-  
amphet er  
dextroamphetamine-  
amphetamine  
diazepam  
DICLEGIS  
diclofenac sodium  
dicyclomine hcl  
DILANTIN  
diltiazem 24hr er (cd)  
divalproex sodium  
DIVIGEL  
DOPTELET [PA]  
DORYX MPC [ST]  
DOVATO  
doxycycline hyclate

doxycycline  
monohydrate  
DROPLET GENTEEL  
LANCING DEVICE  
DROPLET LANCETS  
drospirenone-ethinyl  
estradiol  
DUAVEE  
DUEXIS  
DULERA  
duloxetine hcl  
DUOBRII  
DUPIXENT PEN [PA]  
DUPIXENT SYRINGE [PA]  
DYANAVAL XR  
DYMISTA  
DYSPORE [PA]

## E

EDARBI  
EDARBYCLOR  
ELEPSIA XR [ST]  
ELIQUIS  
ELOCTATE  
ELYXYB [ST]  
EMGALITY PEN [PA]  
EMGALITY SYRINGE [PA]  
EMPAVELI [PA]  
EMVERM [PA]  
ENBREL [PA]  
ENBREL MINI [PA]  
ENBREL SURECLICK [PA]  
ENDOMETRIN  
enoxaparin sodium  
ENSTILAR  
ENTRESTO  
ENTYVIO [PA]  
EPIDIOLEX [PA]  
epinephrine  
EPIPEN 2-PAK  
EPIPEN JR 2-PAK  
ERIVEDGE [PA]  
erythromycin  
escitalopram oxalate  
esomeprazole  
magnesium  
ESPEROCT  
estradiol

estradiol (twice weekly)  
ESTRING  
eszopiclone  
EUCRISA [ST]  
EUFLEXXA [PA]  
EYSUVIS  
ezetimibe

## F

FABIOR [ST]  
famotidine  
fenofibrate  
FETZIMA  
finasteride  
FLECTOR [PA]  
fluconazole  
fluoxetine hcl  
fluticasone propionate  
fluticasone-salmeterol  
folic acid  
FOLTX  
FORFIVO XL  
FORTEO [PA]  
FRAGMIN  
FREESTYLE FREEDOM  
LITE  
FREESTYLE INSULINX  
FREESTYLE LIBRE 14 DAY  
READER  
FREESTYLE LIBRE 14 DAY  
SENSOR  
FREESTYLE LIBRE 2  
READER  
FREESTYLE LIBRE 2  
SENSOR  
FREESTYLE LIBRE 3  
SENSOR  
FREESTYLE LITE METER  
FULPHILA [PA]  
FUROSCIX [ST]  
furosemide  
FYCOMPA

## G

gabapentin  
GELNIQUE [ST]  
GEMTESA  
GENOTROPIN [PA]  
GENVOYA

Cost for covered alternatives may vary.

GLASSIA  
glimepiride  
glipizide  
glipizide er  
GLUCAGON  
EMERGENCY KIT  
GONAL-F  
GONAL-F RFF  
GONAL-F RFF REDI-JECT  
GRALISE  
GRASTEK  
guanfacine hcl er  
GVOKE  
GVOKE HYPOPEN 1-  
PACK  
GVOKE HYPOPEN 2-  
PACK  
GVOKE PFS 1-PACK  
SYRINGE  
GVOKE PFS 2-PACK  
SYRINGE

## H

HADLIMA [PA]  
HADLIMA PUSHTOUCH  
[PA]  
HADLIMA(CF) [PA]  
HADLIMA(CF)  
PUSHTOUCH [PA]  
HAEGARDA [PA]  
haloperidol  
HEALTHY ACCENTS  
UNIFINE PENTIP  
heparin sodium-d5w  
HORIZANT [ST]  
HUMALOG  
HUMALOG JUNIOR  
KWIKPEN  
HUMALOG KWIKPEN U-  
100  
HUMALOG KWIKPEN U-  
200  
HUMALOG MIX 50-50  
HUMALOG MIX 50-50  
KWIKPEN  
HUMALOG MIX 75-25  
HUMALOG MIX 75-25  
KWIKPEN  
HUMALOG TEMPO PEN  
U-100

HUMIRA [PA]  
HUMIRA PEN [PA]  
HUMIRA PEN CROHN'S-  
UC-HS [PA]  
HUMIRA PEN PSOR-  
UVEITS-ADOL HS [PA]  
HUMIRA(CF) [PA]  
HUMIRA(CF) PEDIATRIC  
CROHN'S [PA]  
HUMIRA(CF) PEN [PA]  
HUMIRA(CF) PEN  
CROHN'S-UC-HS [PA]  
HUMIRA(CF) PEN  
PEDIATRIC UC [PA]  
HUMIRA(CF) PEN PSOR-  
UV-ADOL HS [PA]  
HUMULIN 70/30  
KWIKPEN  
HUMULIN 70-30  
HUMULIN N  
HUMULIN N KWIKPEN  
HUMULIN R  
HUMULIN R U-500  
HUMULIN R U-500  
KWIKPEN  
hydralazine hcl  
hydrochlorothiazide  
hydrocodone-  
acetaminophen  
hydrocortisone  
hydroxychloroquine  
sulfate  
hydroxyzine hcl  
hydroxyzine pamoate  
HYRIMOZ(CF) [PA]  
HYRIMOZ(CF) PEDIATRIC  
CROHN'S [PA]  
HYRIMOZ(CF) PEN [PA]  
HYRIMOZ(CF) PEN  
CROHN-UC START  
[PA]  
HYRIMOZ(CF) PEN  
PSORIASIS [PA]

## I

IBRANCE [PA]  
ibuprofen  
ILEVRO  
IMBRUVICA [PA]  
INBRIJA [PA]

INCONTROL PEN NEEDLE  
INCRUSE ELLIPTA  
INFLECTRA [PA]  
INLYTA [PA]  
insulin glargine  
insulin glargine solostar  
insulin lispro  
insulin lispro kwikpen u-  
100  
INSULIN SYRINGE  
INTRAROSA  
ipratropium-albuterol  
IXINITY

## J

JAKAFI [PA]  
JANUMET [ST]  
JANUMET XR [ST]  
JANUVIA [ST]  
JARDIANCE  
JIVI  
JUBLIA [PA]  
JULUCA  
JYNARQUE [PA]

## K

KANJINTI [PA]  
KERASTAT [PA]  
KERENDIA  
KESIMPTA PEN [PA]  
ketoconazole  
ketorolac tromethamine  
KISQALI [PA]  
KISQALI FEMARA CO-  
PACK [PA]  
KITABIS PAK  
KLOXXADO  
KOGENATE FS  
KOVALTRY  
KYLEENA  
KYNMOBI [PA]

## L

labetalol hcl  
lamotrigine  
LANTUS  
LANTUS SOLOSTAR  
latanoprost  
LENVIMA [PA]  
levetiracetam

levocetirizine  
dihydrochloride  
levofloxacin  
levothyroxine sodium  
lidocaine  
LINZESS  
liothyronine sodium  
lisdexamfetamine  
dimesylate  
lisinopril  
lisinopril-  
hydrochlorothiazide  
lithium carbonate  
LIVALO  
LO LOESTRIN FE  
lorazepam  
LORBRENA [PA]  
LOREEV XR  
losartan potassium  
losartan-  
hydrochlorothiazide  
LOTEMAX  
LOTEMAX SM  
LUCEMYRA  
LUMAKRAS [PA]  
LUMIGAN  
LUPRON DEPOT [PA]  
LUPRON DEPOT-PED  
[PA]  
LYBALVI  
LYNPARZA [PA]  
LYUMJEV  
LYUMJEV KWIKPEN U-  
100  
LYUMJEV KWIKPEN U-  
200  
LYUMJEV TEMPO PEN U-  
100

## M

MAKENA [PA]  
MAVENCLAD [PA]  
MAVYRET [PA]  
MAYZENT [PA]  
medroxyprogesterone  
acetate  
MEKINIST [PA]  
meloxicam  
METANX

Cost for covered alternatives may vary.

metformin hcl	NAYZILAM	OMNIPOD 5 G6 PODS (GEN 5)	oxycodone-acetaminophen
metformin hcl er	nebivolol hcl	OMNIPOD CLASSIC PODS (GEN 3)	OXYCONTIN
methocarbamol	NEEVODHA	OMNIPOD DASH INTRO KIT (GEN 4)	<b>P</b>
methotrexate	NEULASTA [PA]	OMNIPOD DASH PODS (GEN 4)	pantoprazole sodium
methylphenidate er	NEULASTA ONPRO [PA]	OMNIPOD GO PODS	PARADIGM
methylphenidate hcl	NEUPRO	OMNITROPE [PA]	paroxetine hcl
methylprednisolone	NEXAVAR [PA]	ondansetron hcl	PERFOROMIST
metoprolol succinate	NEXLETOL [PA]	ondansetron odt	PERSERIS
metoprolol tartrate	NEXLIZET [PA]	ONETOUCH DELICA PLUS LANCET	PHEBURANE [PA]
metronidazole	NEXTSTELLIS	ONETOUCH LANCETS	phentermine hcl
MICROLET	nifedipine er	ONETOUCH ULTRA TEST STRIP	phenylephrine hcl-0.9% nacl
MICROLET 2	nitrofurantoin mono-macro	ONETOUCH ULTRA2	PHESGO [PA]
MICROLET NEXT LANCING DEVICE	NITYR	ONETOUCH VERIO FLEX METER	PHOSLYRA
MINIMED 630G	NIVESTYM [PA]	ONETOUCH VERIO TEST STRIP	pioglitazone hcl
MINIMED 770G	NOC DURNA	ONEXTON	PIQRAY [PA]
MINIMED MIO ADVANCE	norethindrone	ORALAIR	PLEGRIDY [PA]
MINIMED QUICK SET	NORLIQVA [ST]	ORAPEUTIC	PLEGRIDY PEN [PA]
MINIMED SILHOUETTE	nortriptyline hcl	ORENITRAM ER [PA]	PONVORY [PA]
MINIMED SURE T	NOURIANZ	ORENITRAM MONTH 1 TITRATION KT [PA]	potassium chloride
MINOLIRA ER [ST]	NOVAREL	ORENITRAM MONTH 2 TITRATION KT [PA]	pravastatin sodium
MIRENA	NOVOEIGHT	ORENITRAM MONTH 3 TITRATION KT [PA]	prazosin hcl
mirtazapine	np thyroid	ORFADIN [PA]	PRECISION XTRA
MIRVASO	NUCALA [PA]	ORGOVYX [PA]	prednisolone acetate
MONOFERRIC	NUDEXTA [PA]	ORIAHNN [PA]	prednisone
MONOVISC [PA]	NURTEC ODT [PA]	ORLISSA [PA]	pregabalin
montelukast sodium	NUZYRA	ORLADEYO [PA]	PREMARIN
MORPHINE SULFATE	nystatin	ORTHOVISC [PA]	PREMPHASE
MOUNJARO [ST]	<b>O</b>	ORTIKOS	PREMPRO
MOVANTIK	OB COMPLETE	OSPHENA	PREZISTA
MUGARD	OB COMPLETE ONE	OTEZLA [PA]	PROAIR DIGIHALER
MULTAQ	OB COMPLETE PETITE	OTOVEL	PROAIR RESPICLICK
MULTI-LANCET	OB COMPLETE PREMIER	OVIDREL	PROCRIT [PA]
mupirocin	OB COMPLETE WITH DHA	oxcarbazepine	PROCTOFOAM-HC
MUSE	OCREVUS [PA]	OXTELLAR XR	progesterone
MVASI [PA]	ODACTRA	oxybutynin chloride er	PROLASTIN C
MYFEMBREE [PA]	ODEFSEY	oxycodone hcl	PROLENSA
MYRBETRIQ	ODOMZO [PA]		PROMACTA [PA]
<b>N</b>	ofloxacin		promethazine hcl
NAFTIN	olanzapine		promethazine-dm
naltrexone hcl	olmesartan medoxomil		propranolol hcl
NAMZARIC	OMECLAMOX-PAK		propranolol hcl er
naproxen	omeprazole		PYLERA
NASCOBAL	OMNIPOD 5 G6 INTRO KIT (GEN 5)		<b>Q</b>
NATAZIA			QBREXZA
NATESTO			QNASL

Cost for covered alternatives may vary.

QNASL CHILDREN	RUXIENCE [PA]	SYMFI	TOUJEO SOLOSTAR
QUDEXY XR [ST]	RYTARY	SYMFI LO	tramadol hcl
quetiapine fumarate	<b>S</b>	SYMPAZAN [PA]	TRAZIMERA [PA]
QUILLICHEW ER [ST]	SANCUSO	SYMPROIC	trazodone hcl
QUILLIVANT XR [ST]	SAVELLA	SYMTUZA	TRELEGY ELLIPTA
QULIPTA [PA]	SCEMBLIX [PA]	SYNJARDY	TREMFYA [PA]
QVAR REDIHALER	SECUADO	SYNJARDY XR	tretinoin
<b>R</b>	SEREVENT DISKUS	<b>T</b>	triamcinolone acetonide
RAGWITEK	sertraline hcl	TACLONEX	triamterene-
RASUVO [ST]	SEVENFACT	tacrolimus	hydrochlorothiazid
RAYALDEE	SEYSARA [ST]	TADLIQ [ST]	TRIPTODUR [PA]
REBIF [PA]	SFROWASA	TAFINLAR [PA]	TRIUMEQ
REBIF REBIDOSE [PA]	sildenafil citrate	TAKHZYRO [PA]	TRIUMEQ PD
REBINYN	SIMBRINZA	TALICIA	TROKENDI XR [ST]
RECTIV	SIMPONI ARIA [PA]	TALTZ AUTOINJECTOR (2	TRUE METRIX AIR
RELAFEN DS [ST]	simvastatin	PACK) [PA]	GLUCOSE METER
RELISTOR [PA]	SIVEXTRO	TALTZ AUTOINJECTOR (3	TRUE METRIX BLOOD
RENFLEXIS [PA]	SKYLA	PACK) [PA]	GLUCOSE MTR
REPATHA PUSHTRONEX	SKYRIZI [PA]	TALTZ AUTOINJECTOR	TRUE METRIX GLUCOSE
[PA]	SKYRIZI ON-BODY [PA]	[PA]	TEST STRIP
REPATHA SURECLICK	SKYRIZI PEN [PA]	TALTZ SYRINGE [PA]	TRUEPLUS INSULIN
[PA]	SKYTROFA [PA]	TALZENNA [PA]	SYRINGE
REPATHA SYRINGE [PA]	SOGROYA [PA]	tamsulosin hcl	TRUEPLUS PEN NEEDLE
RESET (SUD)	SOLIQUA 100-33 [ST]	TARGADOX [ST]	TRUETRACK TEST STRIP
RESET (SUD) (NON-	SOLIRIS [PA]	TASCENSO ODT [PA]	TRULANCE
MONETARY CM)	SOLOSEC	TASIGNA [PA]	TRULICITY [ST]
RESET-O (OUD)	SOMATULINE DEPOT	TAZORAC	TWIRLA
RESET-O (OUD)(NON-	[PA]	TECHLITE LANCETS	TYMLOS [PA]
MONETARY CM)	SOMAVERT [PA]	TEGSEDI [PA]	TYRVAYA [ST]
RESTASIS	SOOLANTRA	TEKTRUNA [ST]	TYSABRI [PA]
RESTASIS MULTIDOSE	spironolactone	TEKTRUNA HCT [ST]	<b>U</b>
RETIN-A MICRO PUMP	sprintec	TEMIXYS	UBRELVY [PA]
REVLIMID [PA]	SPRIX	TEMPO REFILL KIT	UCERIS
REXULTI	SPRYCEL [PA]	TEMPO SMART BUTTON	UDENYCA [PA]
RHOPRESSA	STEGLUJAN [ST]	TEMPO WELCOME KIT	UDENYCA
RINVOQ [PA]	STELARA [PA]	terbinafine hcl	AUTOINJECTOR [PA]
RISPERDAL CONSTA	STIVARGA [PA]	testosterone cypionate	ULTOMIRIS [PA]
risperidone	STRENSIQ [PA]	[pa]	UNIFINE PEN NEEDLE
RIXUBIS	SUBLOCADE [PA]	TEZSPIRE [PA]	UNIFINE PENTIPS
rizatriptan	sucralfate	tizanidine hcl	UNIFINE PENTIPS
ROCKLATAN [ST]	SUFLAVE	TOBI PODHALER	MAXFLOW
ropinirole hcl	sulfamethoxazole-	TOBRADEX	UNIFINE PENTIPS PLUS
rosuvastatin calcium	trimethoprim	TOBRADEX ST	UNIFINE PENTIPS PLUS
ROSZET [ST]	sumatriptan succinate	TOLSURA	MAXFLOW
ROZLYTREK [PA]	SUNOSI [PA]	topiramate	UNIFINE SAFECONTROL
RUBRACA [PA]	SUPREP	TOSYMRA [ST]	UNIFINE ULTRA PEN
RUCONEST [PA]	SUTAB	TOUJEO MAX SOLOSTAR	NEEDLE
			UPTRAVI [PA]

Cost for covered alternatives may vary.

UZEDY

**V**

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valacyclovir

valsartan

VALTOCO

VARUBI

VASCEPA

VELPHORO

VELTASSA [PA]

VEMLIDY

venlafaxine hcl

venlafaxine hcl er

VENTOLIN HFA

VEREGEN [ST]

VERQUVO

V-GO 20

V-GO 30

V-GO 40

VIBERZI

VIOKACE

vitamin d2

VITRAKVI [PA]

VIZIMPRO [PA]

VRAYLAR

VYZULTA

**W**

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WAKIX [PA]

warfarin sodium

WELLBUTRIN XL

WYNZORA

**X**

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XACIATO

XADAGO [ST]

XALKORI [PA]

XCOPRI

XENLETA

XIFAXAN

XOFLUZA

XOLAIR [PA]

XTANDI [PA]

XYNTHA

XYWAV [PA]

**Y**

---

YUPELRI

**Z**

---

ZARXIO [PA]

ZEGALOGUE

AUTOINJECTOR

ZEGALOGUE SYRINGE

ZEJULA [PA]

ZELBORAF [PA]

ZEMBRACE SYMTOUCH

[ST]

ZENPEP

ZEPATIER [PA]

ZEPOSIA [PA]

ZERVIAE

ZIEXTENZO [PA]

ZILXI

ZIMHI

ZIRABEV [PA]

ZIRGAN

zolpidem tartrate

ZOLPIMIST

ZOMIG [ST]

ZTLIDO

ZUBSOLV

ZYLET

ZYPITAMAG [ST]

## Indication Based Management

Indication	Non-Preferred Medications	Preferred Alternatives
Spinal Conditions	<i>Excluded: COSENTYX</i>	CIMZIA, RINVOQ, TALTZ
Rheumatoid Arthritis	CIMZIA <sup>§</sup> , ORENCIA <sup>§</sup> , OLUMIANT <sup>§</sup> , SIMPONI <sup>§</sup> , KEVZARA <sup>§</sup> , KINERET <sup>§</sup> <i>Excluded: XELJANZ/XELJANZ XR</i>	ENBREL, HUMIRA, HYRIMOZ, HADLIMA, ADALIMUMAB-ADAZ, RINVOQ (Preferred after step through HUMIRA, HYRIMOZ, HADLIMA, ADALIMUMAB-ADAZ: ACTEMRA)
Juvenile Idiopathic Arthritis	ORENCIA <sup>§</sup> , SIMPONI <sup>§</sup> <i>Excluded: XELJANZ/XELJANZ XR</i>	ENBREL, HUMIRA, HYRIMOZ, HADLIMA, ADALIMUMAB-ADAZ (Preferred after step through HUMIRA, HYRIMOZ, HADLIMA, ADALIMUMAB-ADAZ: ACTEMRA)
Psoriatic Arthritis	CIMZIA <sup>§</sup> , ORENCIA <sup>§</sup> , SIMPONI <sup>§</sup> <i>Excluded: COSENTYX, XELJANZ/XELJANZ XR</i>	ENBREL, HUMIRA, HYRIMOZ, HADLIMA, ADALIMUMAB-ADAZ, OTEZLA, RINVOQ, SKYRIZI, STELARA SC, TALTZ, TREMFYA
Ankylosing Spondylitis	CIMZIA <sup>§</sup> , SIMPONI <sup>§</sup> <i>Excluded: COSENTYX, XELJANZ/XELJANZ XR</i>	ENBREL, HUMIRA, HYRIMOZ, HADLIMA, ADALIMUMAB-ADAZ, RINVOQ, TALTZ
Psoriasis	CIMZIA <sup>§</sup> , ILUMYA <sup>§</sup> , SILIQ <sup>§</sup> <i>Excluded: COSENTYX</i>	ENBREL, HUMIRA, HYRIMOZ, HADLIMA, ADALIMUMAB-ADAZ, OTEZLA, SKYRIZI, STELARA SC, TALTZ, TREMFYA
Ulcerative Colitis	<i>Excluded: XELJANZ/XELJANZ XR</i>	HUMIRA, HYRIMOZ, HADLIMA, ADALIMUMAB-ADAZ, STELARA SC, RINVOQ (Preferred after step through HUMIRA, HYRIMOZ, HADLIMA, ADALIMUMAB-ADAZ: SIMPONI 100MG, ZEPOSIA)
Crohn's Disease	CIMZIA <sup>§</sup>	HUMIRA, HYRIMOZ, HADLIMA, ADALIMUMAB-ADAZ, STELARA SC, SKYRIZI

\*Please note that product placement for this class is under consideration and changes may occur based upon changes in market dynamics and new product launches.

<sup>§</sup>These products require either a single- or double-step prior to approval

Cost for covered alternatives may vary.



## Excluded Medications / Products at a Glance

<b>A</b>	DEXILANT	LIBTAYO	PREVIDENT 5000 SENSITIVE	THEO-24
ADDERALL	DILANTIN	LIDODERM	PREZCOBIX	TIKOSYN
ADDERALL XR	DIOVAN	LIPITOR	PRISTIQ	TRADJENTA
ADMELOG	<b>E</b>	LOKELMA	PRIVIGEN	TRANSDERM-SCOP
ADMELOG SOLOSTAR	EFFER-K	LUPRON DEPOT	PROGRAF	TRELSTAR
AIRDUO DIGIHALER	EPOGEN	LYRICA	PROTONIX IV	TRESIBA
ALBUMIN (HUMAN)	ESTRACE	<b>M</b>	PROZAC	TRESIBA FLEXTOUCH U-100
AMITIZA	ESTROGEL	MELATONIN	PULMICORT FLEXHALER	TRESIBA FLEXTOUCH U-200
AMJEVITA(CF) AUTOINJECTOR	EVENITY	METHADOSE	<b>Q</b>	TRIJARDY XR
ATIVAN	EVENITY (2 SYRINGES)	MUCINEX	QSYMIA	TRINATAL RX 1
AUBAGIO	<b>F</b>	MYAMBUTOL	<b>R</b>	TRINTELLIX
ADVAIR DISKUS	FARXIGA	MYDAYIS	REGULOID	TRIPLE ANTIBIOTIC
ALVESCO	FASENRA	MIRALAX	RELEUKO	TRUVADA
<b>B</b>	FASENRA PEN	<b>N</b>	REMICADE	TUDORZA PRESSAIR
B-12	FERAHEME	NEORAL	RENAGEL	<b>U</b>
BETADINE	FIASP	NEUPOGEN	RENVELA	UNITHROID
BEVESPI AEROSPHERE	FIASP FLEXTOUCH	NEXIUM	RETACRIT	<b>V</b>
BREZTRI AEROSPHERE	FOCALIN XR	NIFEREX	REYVOW	VEOZAH
BRIDION	FUSION PLUS	NORDITROPIN FLEXPEN	REZVOGLAR KWIKPEN	VICTOZA 2-PAK
BRILINTA	FLOVENT HFA	NORMOSOL-R PH 7.4	RITUXAN	VICTOZA 3-PAK
BYDUREON BCISE	FLOVENT DISKUS	NOVOLIN 70-30	RITUXAN HYCELA	VIIBRYD
BYSTOLIC	<b>G</b>	NOVOLIN N FLEXPEN	ROLVEDON	VITAFOL ULTRA
<b>C</b>	GAMMAKED	NOVOLIN R	ROZEREM	VITAMIN D2
CALQUENCE	GILENYA	NOVOLIN R FLEXPEN	RYBELSUS	VITAMIN D3
CELEBREX	GLUCAGEN	NOVOLOG	<b>S</b>	VITRON-C
CELEXA	GLYXAMBI	NOVOLOG FLEXPEN	SAMSCA	VOLTAREN ARTHRITIS PAIN
CIPRO HC	GOLYTELY	NUCYNTA	SANDOSTATIN LAR DEPOT	VYEPTI
COLCRYS	<b>I</b>	NUVARING	SAVAYSA	VYVANSE
CONCEPT DHA	ICAR-C	<b>O</b>	SAXENDA	VERZENIO
CONCERTA	IMVEXXY	OCTAGAM	SEMGLEE (YFGN)	<b>W</b>
COPAXONE	INJECTAFER	OFEV	SEMGLEE (YFGN) PEN	WEGOVY
COREG	INVOKANA	OGIVRI	SENNA	<b>X</b>
CORTEF	<b>K</b>	ONTRUZANT	SEROQUEL	XALATAN
COSENTYX SENSOREADY (2 PENS)	KAPSPARGO SPRINKLE	OPSUMIT	SLOW-MAG	XANAX
COSENTYX SENSOREADY PEN	KATERZIA	OZEMPIC	SPIRIVA HANDIHALER	XARELTO
CRESTOR	KEYTRUDA	<b>P</b>	SPIRIVA RESPIMAT	XELJANZ
CYMBALTA	KLOR-CON	PANCREAZE	SPRAVATO	XELJANZ XR
CONTRAVE	KONVOMEK	PENTASA	STIOLTO RESPIMAT	XIGDUO XR
<b>D</b>	K-PHOS NEUTRAL	PERIDEX	SUBOXONE	XIIDRA
D3-50	K-TAB ER	PHEXXI	SUSTOL	XTAMPZA ER
DALIRESP	<b>L</b>	PRADAXA	SYMBICORT	<b>Z</b>
DEPO-PROVERA	LEQVIO	PRALUENT PEN	SYNTHROID	ZOLOFT
DEPO-TESTOSTERONE	LEVEMIR	PREGNYL	STEGLATRO	ZYPREXA
DETROL LA	LEVEMIR FLEXPEN	PREVIDENT	<b>T</b>	
	LEVOXYL	PREVIDENT 5000 PLUS	TAMIFLU	
	LEXAPRO			

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