

Starting January 1, 2022, we'll change how we cover some drugs on the Preferred Drug List

Drugs on the Preferred Drug List that won't be covered

We'll no longer cover the following drugs. Unless noted, both the brand name and available generic equivalents won't be covered. If you fill a prescription for one of these drugs on or after January 1, 2022, you'll be responsible for the full cost.

The drugs that won't be covered are listed along with the covered preferred alternatives that have similar effectiveness, quality and safety. When pharmacies fill prescriptions with preferred alternatives, the generic equivalents are dispensed, if available. The example brand names of preferred alternatives are provided for reference. Additional coverage requirements may apply for preferred alternatives, such as prior authorization.

Drugs that won't be covered	Common use or drug class	Preferred alternatives
Alvesco [®] , Asmanex [®] /HFA, Qvar [®]	Asthma	Arnuity [®] Ellipta [®] , Flovent [®] HFA/Diskus [®] , Pulmicort [®] /Flexhaler [®]
Bevespi [®] Aerosphere [®]	Chronic obstructive pulmonary disease	Anoro [®] Ellipta [®] , Stiolto [®] Respimat [®]
Dulera [®]		Advair [®] HFA/Diskus [®] , Breo [®] Ellipta [®] , Symbicort [®]
Incruse [®] Ellipta [®]		Spiriva [®] /Respimat [®]
Extavia [®] , Plegridy [®]	Multiple Sclerosis	Avonex [®] , Bafiertam [®] , Betaseron [®] , Copaxone [®] , Kesimpta [®] , Ponvory [®] , Tecfidera [®] , Vumerity [®]
Invokana [®] , Invokamet [®] /XR, Segluromet [®] , Steglatro [®] , Steglujan [®]	Diabetes	Farxiga [®] , Glyxambi [®] , Jardiance [®] , Synjardy XR [®] , Trijardy XR [®] , Xigduo XR [®]
Oxycontin [®] , oxycodone ER ¹	Pain	Butrans [®] , Duragesic [®] , MS Contin [®] , Opana ER [®] , Ultram ER [®] , Xtampza ER [®] , Zohydro ER [®]
Relistor [®]	Constipation	Linzess [®] , Movantik [®] , Symproic [®]
Siliq [®]	Autoimmune conditions (such as plaque psoriasis and psoriatic arthritis)	Enbrel [®] , Humira [®] , Otezla [®] , Rinvoq [®] , Skyrizi [®] , Stelara [®] , Tremfya [®] , Xeljanz [®] /XR
Ztlido [®]	Topical anesthetics	Lidoderm [®]

¹ Authorized brand alternatives (i.e. authorized generics) are drugs that are considered brand-name drugs and don't have generic equivalents. These drugs are the same as the brand-name drugs but are not true generic drugs. The respective brand cost share will apply for these drugs.

Drugs on the Preferred Drug List that will have a higher copayment

The following brand-name drugs will have a higher copayment, starting January 1, 2022. We've listed each along with the preferred alternatives that have similar effectiveness, quality and safety, but lower copays. When pharmacies fill prescriptions with preferred alternatives, the generic equivalents are dispensed, if available. The example brand names of preferred alternatives are provided for reference. Additional coverage requirements may apply for preferred alternatives, such as prior authorization.

Nonpreferred drugs that will have a higher copayment	Common use or drug class	Preferred alternatives
Actemra [®] , Cimzia [®] , Taltz [®]	Autoimmune conditions (such as plaque psoriasis and psoriatic arthritis)	Enbrel [®] , Humira [®] , Otezla [®] , Rinvoq [®] , Skyrizi [®] , Stelara [®] , Tremfya [®] , Xeljanz [®] /XR
Ajovy [®]	Migraine prevention	Aimovig [®] , Emgality [®]
Aubagio [®] , Gilenya [®] , Mayzent [®] , Rebif [®] , Zeposia [®]	Multiple sclerosis	Avonex [®] , Bafiertam [®] , Betaseron [®] , Copaxone [®] , Kesimpta [®] , Ponvory [®] , Tecfidera [®] , Vumerity [®]
Baxdela [®]	Antibiotics	Avelox [®] , Cipro/XR [®] , Floxin [®] , Levaquin [®]
Cayston [®]	Cystic fibrosis	Tobi [®]
Combipatch [®]	Menopause symptoms	Activella [®] , Climara [®] , Fem-HRT [®] , Minivelle [®] , Vagifem [®] , Vivelle-Dot [®]
Daytrana [®] , Dyanavel XR [®] , Quillichew ER, Quillivant XR [®]	Attention deficit hyperactivity disorder	Adderall [®] /XR*, Aptensio XR [®] , Concerta [®] , Focalin [®] /XR*, Metadate CD**, Methylin [®] , Mydayis [®] , Ritalin [®] LA/SR, Vyvanse [®] *can be opened and sprinkled on applesauce
Depo-estradiol [®]	Estrogens	Climara [®] , Estrace [®] , Minivelle [®] , Vagifem [®] , Vivelle-Dot [®]
Diacomit [®]	Anticonvulsants	Depakote [®] , Onfi [®] , Topamax [®]
Fetzima [®]	Antidepressants	A generic SSRI/SNRI (such as, Celexa [®] , Cymbalta [®] , Effexor/XR [®] , Pristiq [®] , Prozac [®] , Zoloft [®] , etc.), Wellbutrin/SR/XL [®]
Fragmin [®]	Anticoagulants	Lovenox [®]
Fulphila [®] , Ziextenzo [®]	Neutropenia	Neulasta [®] , Nyvepria [®]
Leukine [®]		Nivestym [®] , Zarxio [®]
Gelnique [®]	Urinary antispasmodics	Detrol/LA [®] , Ditropan/XL [®] , Enablex [®] , Sanctura/XR [®] , Vesicare [®]
K-PHOS Original [®]	Potassium replacement	Generic potassium replacement products (such as, K-Lor [®] , Klor-Con packet [®] , K-Sol [®] , Potassium Chloride [®] , K-Tab [®])
Latuda [®]	Antipsychotics	Abilify [®] , Clozaril [®] , Geodon [®] , Invega [®] , Risperdal [®] , Seroquel [®] /XR, Zyprexa [®]
Lipofen [®]	Lipid lowering	Antara [®] , Fenoglide [®] , Lofibra [®] , Lopid [®] , Tricor [®] , Trilipix [®]
Lupaneta [®] pack	Endometriosis	Lupron Depot [®] 3.75mg, 11.25mg plus Aygestin [®]

Nonpreferred drugs that will have a higher copayment	Common use or drug class	Preferred alternatives
Natesto®	Testosterone replacement	Androderm®, Androgel®, Android®, Axiron®, Delatestryl®, Depo-Testosterone®, Testim®, Testred®
Novarel®	Infertility	Cetrotide®, generic ganirelix acetate, Ovidrel®, Pregnyl®
Odactra®, Ragwitek®	Allergen-specific immunotherapy	Accolate®, Clarinex®, Flonase®, Nasalide®, Nasonex®, over-the-counter Claritin®, over-the-counter Nasacort®, over-the-counter Zyrtec®, Singulair®, Xyzal®
Pancreaze®, Viokace®	Pancreatic enzyme	Creon®, Zenpep®
Phoslyra®	Phosphate binder	Phoslo®, Renagel®, Renvela®
Prevymis®	Antiviral	Valcyte®
Purixan®	Immunosuppressant	generic mercaptopurine tablets
Rectiv®	Miscellaneous gastrointestinal agent	Nitro-Bid® ointment
Revlimid®	Immunomodulators	Thalomid®
Savella®	Fibromyalgia	Generic SSRI/SNRI (such as, Celexa®, Cymbalta®, Effexor/XR®, Pristiq®, Prozac®, Zoloft®, etc.), generic TCA (Aventyl®, Elavil®, Sinequan®, Tofranil®, etc.), Flexeril®, Neurontin®, Ultram®
Solu-cortef®	Corticosteroids	Hydrocortisone®, Decadron®, Deltasone®
Talicia®	H. pylori infection	Prevacid® plus Amoxil® plus Biaxin/XL®; tetracycline plus Flagyl® plus over-the-counter bismuth subsalicylate; Prilosec® plus Amoxil® plus Biaxin/XL®
Tracleer® suspension, Tyvaso®, Upravi®	Pulmonary hypertension	Adcirca®, Adempas®, Letairis®, Opsumit®, Revatio®, Tracleer® tablet
Trulance®	Constipation	Linzess®, Movantik®, Symproic®
Valchlor®	Immunosuppressant	8-Mop®, Zolinza®
Varubi®	Antiemetic	Emend®, Kytril®, Zofran/ODT®
Verquvo	Heart conditions	Entresto®
Vosevi®, Zepatier®	Hepatitis C	Epclusa®, Harvoni®
Xifaxan® 200mg	Anti-infective	Bactrim DS, Vibramycin, Zithromax
Xifaxan® 550mg	Miscellaneous gastrointestinal agent	For IBS-D: Bentyl®, Imodium®, Levbid®, Levsin®, generic SSRI (Celexa®, Paxil®, Zoloft®, etc.), generic TCA (Elavil®, Sinequan®, Tofranil®, etc.) For hepatic encephalopathy: lactulose solution
Yupelri®	Chronic obstructive pulmonary disease	Spiriva®/Respimat®

