

Drug List Exclusions for Blue Cross Blue Shield of Michigan and Blue Care Network Preferred Drug List

The drugs shown below aren't covered on the *Preferred Drug List*. In most cases, if you fill a prescription for one of these drugs, you'll pay the full retail price. Most brand-name drugs with a generic equivalent aren't covered. Certain brand-name drugs on the *Preferred Drug List* will be covered at a generic (Tier 1) copayment and the generic equivalent won't be covered. These drugs are listed in this table:

Generic equivalent not covered	Brand-name drug covered at generic copay	Additional covered alternatives*
dextroamphetamine/ amphetamine ER capsule	Adderall® XR	Focalin®/XR, Metadate CD®, Ritalin®/LA/SR, Strattera®
fluticasone propionate/salmeterol Diskus, Wixela® Inhub®	Advair® Diskus®	Atrovent® HFA, Breo® Ellipta®, Incruse® Ellipta®, Serevent® Diskus®, Symbicort®, Yupelri®
mesalamine 0.375 g ER capsule	Apriso®	Asacol HD®, Azulfidine®/En-Tab, Colazal®, Delzicol®, Lialda®, Pentasa®
sucralfate	Carafate® suspension	Aciphex®, Nexium® (Rx only), Pepcid® (Rx only), Prevacid® (Rx only), Prilosec® (Rx only), Protonix®, Tagamet® (Rx only),
colchicine tablet	Colcrys®	Colbenemid®, Mitigare®, Probenecid®, Uloric®, Zylprim®
doxylamine succinate/ pyroxidine ER tablet	Diclegis®	Zofran®, Zofran® ODT
calcipotriene-betamethasone dipropionate suspension	Taclonex® suspension	Enstilar®
budesonide tablet	Uceris® tablet	Entocort® EC

* If available, the generic equivalent will be dispensed when you fill a prescription. This list is intended as a reference guide and doesn't dictate coverage.

The list that follows contains the class, subclass and suggested preferred alternatives for excluded drugs. Unless otherwise listed as an alternative, the generic equivalents of the excluded brand-name drugs are also excluded.

If you're currently using one of the excluded drugs, ask your doctor if one of the preferred alternatives on the list, which has similar effectiveness and safety, is right for you. Our exclusions criteria are based on current medical information and have been approved by Blue Cross' Pharmacy and Therapeutics Committee. If coverage of a drug is approved as medically necessary, quantity limits may apply.

The following list isn't comprehensive. If you have a question about a drug that isn't covered and doesn't appear on this list, call the Customer Service number on the back of your Blue Cross member ID card.

Preferred alternatives for excluded drugs

The brand names for the preferred alternatives are provided for reference. If available, the generic equivalent will be dispensed when you fill a prescription. This list is intended as a reference guide and doesn't dictate coverage. Refer to your drug benefit information for a full list of covered drugs and requirements. Find full drug lists and coverage requirements at bcbsm.com/pharmacy.

Drug Class: Anti-infectives		
Drug Subclass	Excluded Drug	Preferred Alternatives
Antifungals	Tolsura [®]	Gris-PEG [®] , Grifulvin V [®] , Lamisil [®] oral, Sporanox [®]
Antivirals	ledipasvir/sofosbuvir ¹ (authorized generic for Harvoni [®]), Mavyret [®] , sofosbuvir/velpatasvir ¹ (authorized generic for Epclusa [®]), Sovaldi [®]	Epclusa [®] , Harvoni [®] tablet, Vosevi [®] , Zepatier [®]
	Sitavig [®]	generic oral antivirals (Famvir [®] , Valtrex [®] , Zovirax [®])
	Viekira Pak [®]	Epclusa [®] , Zepatier [®]
Antiretrovirals	Crixivan [®] , Trizivir [®] , Videx [®] /EC, Viracept [®] , Zerit [®]	Go to bcbsm.com for a complete list of covered alternatives. Members should discuss treatment options with their doctors.
	Delstrigo [®]	Biktarvy [®] , Genvoya [®] , Odefsey [®] , Symfi [®] , Symfi Lo [®] , Symtuza [®] , Triumeq [®]
	Complera [®]	Odefsey [®]
	Pifeltro [®]	Edurant [®] , Intelence [®] , Sustiva [®] , Viamune [®] /XR
	Prezcobix [®]	Kaletra [®] , Norvir [®] , Reyataz [®] , Prezista [®]
	Striblid [®]	Biktarvy [®] , Genvoya [®]
Miscellaneous anti-infectives	Firvanq [®] (brand only)	Firvanq [®] (generic), Vancocin [®]
Tetracyclines	Acticlate [®] , Coremino [®] , Doryx 80 mg [®] , doxycycline hyclate 80mg ¹ (authorized generic for Doryx [®]), doxycycline IR-DR ¹ (authorized generic for Oracea [®]), minocycline ER ¹ (authorized generic for Ximino [®]), Solodyn [®] , Targadox [®] , Ximino [®]	Minocin [®] , Monodox [®] , tetracycline, Vibramycin [®]
Drug Class: Antineoplastics and immunosuppresants		
Drug Subclass	Excluded Drug	Preferred Alternatives

Adjuvant therapy	Aranesp [®] , Epogen [®] , Mircera [®]	Procrit [®] , Retacrit [®]
	Granix [®] , Neupogen [®]	Nivestym [®] , Zarxio [®]
	Neulasta [®] , Udenyca [®]	Fulphila [®] , Ziextenzo [®]
Antimetabolites	Xatmep [®]	methotrexate
Hormonal agents	Zytiga [®] 500mg	Zytiga [®] 250mg
	Trelstar [®]	Eligard [®]
Kinase inhibitors and molecular target inhibitors	Calquence [®]	Imbruvica [®] , Venclexta [®]
	Kisqali [®] , Kisqali [®] Femara [®] Co-pack	Ibrance [®] , Verzenio [®]
	Inrebic [®]	Jakafi [®]
	Qinlock [®]	Gleevec [®] , Nexavar [®] , Sprycel [®] , Stivarga [®] , Sutent [®] , Tasisigna [®] , Votrient [®]
Miscellaneous antineoplastic agents	Xpovio [®]	Ninlaro [®] , Pomalyst [®] , Revlimid [®] , Thalomid [®]
Drug Class: Cardiovascular, hypertension, cholesterol		
Drug Subclass	Excluded Drug	Preferred Alternatives
ACE inhibitors and combinations	Epaned [®]	Vasotec [®]
	Qbrelis [®]	Prinivil [®] , Zestril [®]
Anticoagulants and hemostasis agents	Pradaxa [®] , Savaysa [®]	Eliquis [®] , Xarelto [®]
Beta-blockers and combinations	Kaspargo [®] Sprinkle	Toprol [®] /XL
	Inderal XL [®] , Innopran XL [®]	Inderal [®] /LA, Inderide [®]
	Dutoprol [®]	Lopressor [®] HCT, Toprol [®] XL plus hydrochlorothiazide
Calcium channel blockers and combinations	Katerzia [®]	Norvasc [®]
Lipid-lowering agents	Altoprev [®] , Ezallor [®] , Zypitamag [®]	Crestor [®] , Lescol [®] /XL, Lipitor [®] , Livalo [®] , Mevacor [®] , Pravachol [®] , Vytorin [®] , Zocor [®]
	Fibracor [®]	Antara [®] , Fenoglide [®] , Lofibra [®] , Lopid [®] , Tricor [®] , Trilipix [®]
	Niacor [®]	Niaspan [®]
	Praluent [®]	Repatha [®]
Nitrates and combinations	Nitro-Dur [®] (brand only)	generic nitroglycerin patch
Drug Class: Central nervous system		
Drug Subclass	Excluded Drug	Preferred Alternatives
Anticonvulsants	Aptiom [®] , topiramate ER capsule ¹ (authorized generic for Qudexy [®] XR)	Lyrica [®] , Qudexy XR [®] , Tegretol/XR [®] , Topamax [®] , Trileptal [®] , Vimpat [®]
	Lyrica [®] CR	Gralise [®] , Neurontin [®] , Lyrica [®]
	Fintepla [®]	Diacomit [®] , Epidiolex [®]

Antidepressants	Drizalma® Sprinkle®	A generic SSRI/SNRI (such as Celexa®, Cymbalta®, Effexor®/XR, Pristiq®, Prozac®, Zoloft®, etc.), Fetzima®
Antipsychotics	Caplyta®	Abilify®, Geodon®, Latuda®, Risperdal®, Seroquel®/XR, Zyprexa®
CNS stimulants	amphetamine ER suspension ¹ (authorized generic for Adzenys ER®)	Adderall XR®*, AptensioXR®, Concerta®, Focalin®/XR, Dyanavel XR®, Metadate CD®*, Methylin®, Mydayis®, QuilliChew ER®, Quilivant XR®, Ritalin®/LA/SR, Strattera®, Vyvanse® *can be opened and sprinkled on applesauce
Migraine therapy	Allzital®, Bupap® (butalbital/acetaminophen 300mg), Vanatol LQ, Vanatol S	Esgic®, Fiorinal®, Phrenilin® (butalbital/acetaminophen 325mg)
	Dvorah®	Fioricet® w/codeine, Fiorinal® w/codeine
	Migergot®	Cafergot®, D.H.E. 45®, Imitrex® nasal spray/pen-injector, Maxalt® MLT®, Zomig® ZMT®
Miscellaneous CNS	Ingrezza®	Austedo®, Xenazine®
	Firdapse®	Ruzurgi®
Myasthenia gravis	pyridostigmine bromide 30mg	Mestinon® (generic pyridostigmine bromide 60mg)
Narcotics	Arymo® ER, Xtampza® ER	Belbuca®, Butrans®, Duragesic®, Exalgo®, methadone, MS Contin®, Opana ER®, Ultram® ER, Zohydro ER®
	fentanyl citrate buccal tablet ¹ (authorized generic for Fentora®), Fentora®, Lazanda®, Subsys®	Actiq®
	Nucynta®	Norco®, morphine sulfate immediate release, oxycodone immediate release, Percocet®, Ultracet®, Ultram
	Nucynta ER®	Butrans®, Duragesic®, Exalgo®, Hysingla ER® (nonpreferred brand copay applies), MS Contin®, Opana ER®, Oxycontin® (nonpreferred brand copay applies)

Narcotic antagonists and withdrawal management	Lucemyra®	clonidine
Narcotic and analgesic combinations	Apadaz® benzhydrocodone/acetaminophen ¹ (authorized generic for Apadaz®)	Norco®, Vicodin®, Vicoprofen®
	Nalocet, Primlev®	Percocet®, Percodan®
Narcotic mixed agonist and antagonist	Bunavail®	Suboxone®, Subutex®, Zubsolv®
	Conzip®, tramadol extended-release biphasic capsule ¹ (authorized generic for Conzip®)	Ultram® ER
Nonsteroidal anti-inflammatory drugs (NSAIDs)	diclofenac 35mg capsule ¹ (authorized generic for Zorvolex®), fenoprofen capsule 200mg, 400mg ¹ (authorized generics for Fenortho® and Nalfon®), Fenortho®, Indocin suspension®, indomethacin 20mg capsule ¹ (authorized generic for Tivorbex®), ketorolac nasal spray ¹ (authorized generic for Sprix®), Nalfon 400mg®, Tivorbex®, Vivlodex®, Zipsor®, Zorvolex®	A generic oral NSAID (such as Anaprox®, Indocin®, Lodine®, Mobic®, Motrin® (Rx only), Naprosyn®, Voltaren®/XR, etc.)
	Relafen DS®	Relafen (generic 500mg, 750mg tablet)
	Vimovo®	naproxen (Naprosyn® or Anaprox®) plus a generic proton pump inhibitor (such as Aciphex®, Nexium®, Prilosec®, Prevacid®, Protonix®)
Parkinsons disease and related disorders	Gocovri®	Symmetrel®
	Xadago®, Zelapar®	Azilect®, Eldepryl®
Salicylates	Durlaza®	Ecotrin® (generic aspirin)
	Yosprala®, aspirin/omeprazole tablet ¹ (authorized generic for Yosprala®)	Ecotrin® (generic aspirin) plus Prilosec®
Sedative and hypnotics	Doral®, quazepam ¹ (authorized generic for Doral®), Zolpimist®	Ambien®/CR, Lunesta®, Desyrel®, Restoril®, Sonata®
Skeletal muscle relaxants	chlorzoxazone 250mg, Lorzone® (chlorzoxazone 375mg, 750mg)	chlorzoxazone 500mg (Parafon Forte DSC®)
	Amrix®	Flexeril® (cyclobenzaprine 5mg, 7.5mg, 10mg tablet)
	Norgesic Forte®, Orphengesic Forte®	Generic muscle relaxant (such as Norflex®, Parafon Forte DSC®, Flexeril®, Robaxin®, Zanaflex®, etc.) plus Ecotrin® (generic aspirin)
	Ozobax®, Soma®, Soma® compound with aspirin, Soma® compound with codeine	Generic muscle relaxant (such as baclofen, Norflex®, Parafon Forte DSC®, Flexeril®, Robaxin®, Zanaflex®, etc.)

Drug Class: Dermatology		
Drug Subclass	Excluded Drug	Preferred Alternatives
Acne treatment	Acticlate [®] , Coremino [®] , Doryx 80 mg [®] , doxycycline hyclate 80mg ¹ (authorized generic for Doryx [®]), doxycycline IR-DR ¹ (authorized generic for Oracea [®]), minocycline ER ¹ (authorized generic for Ximino [®]), Solodyn [®] , Targadox [®] , Ximino [®]	Monodox [®] , Minocin [®] , tetracycline, Vibramycin [®]
	adapalene 0.1% medicated swab, solution	adapalene (Differin [®]) cream or gel
	Clindagel [®] , clindamycin phosphate 1% gel ¹ (NDC 68682046275, authorized generic for Clindagel [®]), Epiduo Forte [®] , Evoclin [®]	Amzeeq [®] , Cleocin-T [®] , clindamycin phosphate 1% gel (NDCs other than 68682046275), Epiduo [®] , erythromycin gel, Retin-A [®]
	Retin-A Micro [®] Pump 0.04%, 0.1%	Retin-A [®] , Retin-A Micro [®] Pump 0.06%, 0.08%
	sodium sulfacetamide, sodium sulfacetamide/sulfur, sodium sulfacetamide/sulfur/urea (such as: Avar LS [®] , Plexion [®] , SSS 10-5 [®] , Sulfacleanse 8-4 [®] , Sumadan [®] , Sumaxin [®] , Sumaxin TS [®])	Avar [®] , Avar-E [®] , Klaron [®] , Ovace [®] , Rosanil [®]
	Veltin [®] , Ziana [®]	Benzaclin [®] , Benzamycin [®] , Cleocin-T [®] plus Retin-A [®] , Duac [®] , Onexton [®]
Antipsoriatic and antiseborrheic	calcipotriene foam ¹ (authorized generic for Sorilux [®])	Dovonex [®] (calcipotriene cream, ointment, solution), Vectical [®]
	Cosentyx [®]	Enbrel [®] , Humira [®] , methotrexate, Otezla [®] , Skyrizi [®] , Stelara [®] 45mg, 90mg, Taltz [®] , Tremfya [®]
	sodium sulfacetamide, sodium sulfacetamide/sulfur, sodium sulfacetamide/sulfur/urea (such as: Avar LS [®] , Plexion [®] , SSS 10-5 [®] , Sulfacleanse 8-4 [®] , Sumadan [®] , Sumaxin [®] , Sumaxin TS [®])	Avar [®] , Avar-E [®] , Klaron [®] , Ovace [®] , Rosanil [®]
Corticosteroids – low potency	Verdeso [®]	A generic low potency topical steroid such as: Aclovate [®] , Dermacort [®] , Desowen [®] , Hytone [®] , Kenalog [®] 0.025% cream/lotion, Synalar [®] 0.01%, Valisone [®] cream/lotion, etc.
Corticosteroids – medium potency	clocortolone pivalate ¹ (authorized generic for Cloderm [®]), Locoid [®] Lipocream [®] (brand only), Pandel [®]	A generic medium potency topical steroid such as: Aristocort [®] , Cutivate [®] , Diprosone [®] , Elocon [®] , Kenalog [®] , Locoid [®] , Valisone [®] , etc.

¹ Represents drugs that are considered brand drugs and don't have generic equivalents. These may be considered "authorized generics" which are the same as the brand drugs but are not true generic drugs.

Corticosteroids – high potency	Topicort® spray	A generic high potency topical steroid such as: Apexicon®, Cyclocort®, Diprosone®, Elocon®, Lidex®, Lidex E®, Topicort®, Valisone®, etc.
Topical anesthetics	lidocaine 5% ointment and 2% gel	Emla®
	diclofenac epolamine 1.3% patch ¹ (authorized generic for Flector®), Pennsaid® 2%	Licart®, Pennsaid® 1.5%, Voltaren® gel
	Dithol	A general oral NSAID (such as Mobic®, Motrin® (Rx only), Naprosyn®, Voltaren®, Voltaren XR®, etc.), Voltaren® topical gel
Topical antibacterials	Altabax®, Centany®, Bactroban® cream	Bactroban® ointment, gentamicin cream, ointment
Topical antifungals	Ecoza®, luliconazole cream ¹ (authorized generic for Luzu®), sulconazole nitrate cream and solution ¹ (authorized generic for Exelderm®), Xolegel®	Loprox®, Naftin® cream, Nizoral®, Oxistat®, Spectazole®,
Topical antineoplastic agents and immunomodulators	Carac®, fluorouracil 0.5% cream ¹ (authorized generic for Carac®, imiquimod 3.75% cream ¹ (authorized generic for Zyclara®), Zyclara®	Aldara®, Efudex®, Solaraze®, Picato®
Topical antivirals	Denavir®, Zovirax® cream	A generic oral antiviral (Famvir®, Valtrex®, Zovirax®); Zovirax® ointment
Drug Class: Diagnostic and other miscellaneous		
Drug Subclass	Excluded Drug	Preferred Alternatives
Chelating agents	Cuprimine®	Depen®
	Orfadin® (brand only)	Orfadin® (generic only), Nityr®
Drug Class: Endocrinology		
Drug Subclass	Excluded Drug	Preferred Alternatives
Androgens	Jatenzo®	Androderm®, Androgel®, Android®, Axiron®, Delatestryl®, Depo-Testosterone®, Testim®, Testred®
Corticosteroids	Dxevo®, Hidex®, TaperDex®, Zcort®	Decadron®, DexPak®, DexPak® Jr.
	Emflaza®	prednisone, prednisolone
Growth hormone and related products	Humatrope®, Nutropin AQ NuSpin®, Omnitrope®, Saizen®, Saizenprep®, Zomacton®	Genotropin®, Norditropin FlexPro®

Insulins	Admelog [®] , Apidra [®] , Apidra [®] Solostar [®] , Humulin [®] (all forms except U-500), Humulin [®] Mix, Humalog [®] , Humalog [®] Mix, insulin aspart ¹ (all forms; authorized generic for Novolog [®]), insulin lispro 100mg/mL vial and Kwikpen ¹ (authorized generic for Humalog [®]), insulin lispro protamine ¹ (authorized generic for Humalog [®] Mix 75-25), ReliOn [®] Novolin [®] (NDCs <u>not</u> ending in 00, 01, 11, or 15), Lyumjev [®]	Fiasp [®] (all forms), Novolin [®] (NDCs ending in 00, 01, 11, or 15), Novolog [®] (all forms)
	Humalog Jr Kwikpen [®] (brand)	insulin lispro junior ¹ (authorized generic for Humalog Jr Kwikpen [®] , nonpreferred brand copay applies)
	Semglee [®]	Lantus [®] (all forms), Levemir [®] (all forms), Toujeo [®] (all forms), Tresiba [®] (all forms)
Miscellaneous endocrine	Korlym [®]	ketoconazole, Lysodren [®] , Signifor [®]
Non-insulin hypoglycemic agents	Adlyxin [®] , Victoza [®]	Bydureon [®] , Byetta [®] , Ozempic [®] , Trulicity [®]
	Glumetza [®]	Glucophage [®] /XR
	alogliptin ¹ (authorized generic for Nesina [®]), Nesina [®] , Onglyza [®] , Tradjenta [®]	Januvia [®]
	alogliptin/metformin ¹ (authorized generic for Kazano [®]), Jentaduet [®] /XR, Kazano [®] , Kombiglyze [®]	metformin (Glucophage [®] /XR) plus a DPP-4 inhibitor (Januvia [®]); Janumet [®] /XR
	alogliptin/pioglitazone ¹ (authorized generic for Oseni [®])	A DPP-4 inhibitor (Januvia [®]) plus pioglitazone (Actos [®])
	Qtern [®]	Glyxambi [®] , Steglujan [®]
Somatostatin analogues	Sandostatin LAR [®] Depot	Somatuline [®] Depot
	Isturisa [®]	Signifor [®]
Drug Class: Gastrointestinal		
Drug Subclass	Excluded Drug	Preferred Alternatives
5-Aminosalicylic Acid (5-ASA) agents	Dipentum [®]	Apriso [®] , Asacol HD [®] , Azulfidine [®] /ENTab [®] , Canasa [®] , Colazol [®] , Lialda [®] , Pentasa [®]
Antidiarrheals and antispasmodics	Donnatal [®] , Mytesi [®] , Phenohydro [®]	Bentyl [®] , Imodium [®] , Levbid [®] , Librax [®] , Lomotil [®]
Anti-emetics	Akynzeo [®] , Zuplenz [®]	Emend [®] capsule, Kytril [®] , Varubi [®] tablet, Zofran [®] /ODT
	Emend [®] suspension	Emend [®] capsule, Varubi [®] tablet
	generic Kristalose [®] (lactulose) 10g packet	lactulose solution

Bowel preparation and cleansing agents	Osmoprep®	Clenpiq®, Colyte®, Golytely®, Nulytely®, Peg-Prep®, Suprep®
Miscellaneous gastrointestinal agents	Amitiza®	Linzess®, Trulance®
Pancreatic enzymes	Pertzye®	Creon®, Pancreaze®, Zenpep®
Proton Pump Inhibitors (PPIs)	Aciphex® Sprinkle®, esomeprazole strontium 49.3mg ¹ , rabeprazole sodium capsule 10mg ¹ (authorized generic for Aciphex® Sprinkle®), Prilosec® suspension; Nexium® DR packets (brand only); Zegerid®	A generic PPI (such as Aciphex®, Nexium®, Prilosec®, Prevacid®, Protonix®)
Topical anti-inflammatory agents	Cortifoam®	Cortenema®, Uceris® foam
	Proctofoam-HC®	Analpram-HC®, Cortenema®, Pramosome®, Proctocort®
Ulcer therapy	Glycate® (glycopyrrolate 1.5mg)	Robinul®, Robinul Forte® (glycopyrrolate 1mg, 2mg)
	Pylera®	tetracycline plus Flagyl® plus OTC bismuth subsalicylate; PrevPac®, Talicia®
Drug Class: Immunology and hematology		
Drug Subclass	Excluded Drug	Preferred Alternatives
Hematopoietic agents	Mulpleta®	Doptelet®
	Tavalisse®	Doptelet®, Promacta®
Immunoglobulins	Cutaquig®, Gammaked®, Hizentra®	Gammagard liquid®, Gamunex-C®, Xembify®
Interferons and MS therapy	Extavia®	Avonex®, Betaseron®, Rebif®/Rebidose®, Plegridy®
Miscellaneous immunology and hematology	Oxbryta®, Siklos®	Droxia®, Hydrea®
Drug Class: Obstetrics and gynecology		
Drug Subclass	Excluded Drug	Preferred Alternatives
Contraceptives – Misc.	Phexxi®	OTC spermicides
	Twirla®	Ortho Evra®, Lo Loestrin FE®, Taytulla®
Estrogen and progestin combinations	Climara Pro®	Activella®, Combipatch®, FemHRT®, Prempro®, Premphase®
Estrogens	Elestrin®, Estrogel®, Femring®	Climara®, Divigel®, Estrace®, Estring®, Minivelle®, Vivelle-Dot®, Premarin®, Vagifem®
Infertility treatment	Crinone® 8%	Endometrin®

	ganirelix acetate (brand only), chorionic gonadotropin ¹ , Pregnyl [®]	generic ganirelix acetate, Cetrotide [®] , Novarel [®] , Ovidrel [®]
	Follistim AQ [®]	Gonal-F [®] , Gonal-F [®] RFF, Gonal-F [®] RFF Redi-ject [®]
Miscellaneous OB-GYN	Intrarosa [®]	Climara [®] , Estrace [®] , Estring [®] , Premarin [®] cream, tablets, Vagifem [®]
Progestins	Crinone 4%	Aygestin [®] , Megace [®] , Prometrium [®] , Provera [®]
Drug Class: Ophthalmology		
Drug Subclass	Excluded Drug	Preferred Alternatives
Glaucoma agents	Xelpros [®]	Xalatan [®] , Lumigan [®] , Travatan Z [®] , Zioptan [®]
Ophthalmic anti-allergy agents	Alocril [®] , Alomide [®] , Lastacraft [®]	Elestat [®] , Opticrom [®] , Optivar [®] , Pataday [®] , Patanol [®] , Zerviate [®]
Ophthalmic anti-infectives	Ciloxan [®] 0.3% ointment	Ciloxan [®] drops, Garamycin [®] , Ocuflax [®] , Quixin [®] , Vigamox [®] , Zymaxid [®]
Ophthalmic anti-inflammatory agents	Acuvail [®] , Bromsite [®] , Nevanac [®]	Acular [®] , Bromday [®] , Ocufer [®] , Voltaren [®] ophthalmic solution, Xibrom [®]
Ophthalmic beta blockers	Timoptic [®] Ocudose [®] (brand only)	Alphagan P [®] 0.1%, Betagan [®] , Betoptic [®] , Combigan [®] , Ocupress [®] , Optipranolol [®] , Timoptic [®]
Ophthalmic steroids	FML Forte [®] , FML S.O.P. [®] , Maxidex [®] , Pred Mild [®]	Decadron [®] ophthalmic, FML [®] , Inflamase [®] /Forte [®] , Inveltys [®] , Lotemax [®] , Pred Forte [®]
Miscellaneous ophthalmic agents	Cystadrops [®]	Cystaran [®]
Drug Class: Otic and nasal preparations		
Drug Subclass	Excluded Drug	Preferred Alternatives
Nasal preparations	Beconase AQ [®] , Omnaris [®] , Zetonna [®]	Flonase [®] , Nasalide [®] , Nasonex [®] , Qnasl [®]
Otic preparations	Cetraxal [®] (single-source brand only), ciprofloxacin/fluocinolone vial ¹ (authorized generic for Otovel [®])	ciprofloxacin 0.2% dropperette, Ciprodex [®] , Floxin Otic [®] , Otovel [®]
Drug Class: Respiratory, cough and cold		
Drug Subclass	Excluded Drug	Preferred Alternatives
Antihistamines	Ryvent [®] , Ryclora [®]	Atarax [®] , Benadryl [®] (Rx only), Claritin [®] , Histex PD [®] , Tavist [®] , Vistaril [®] , Xyzal [®] , Zyrtec [®]

Epinephrine	Auvi-Q [®] , epinephrine auto-injector ¹ (Impax brand, authorized generic for Adrenaclick [®])	epinephrine 0.15mg and 0.3mg auto-injector (Mylan brand), EpiPen [®] , EpiPen Jr [®] .
Inhaled anticholinergics	Tudorza [®] Pressair [®]	Incruse [®] Ellipta [®] , Spiriva [®] /Respimat [®] , Yupelri [®]
Inhaled beta-agonists	albuterol sulfate HFA ¹ (authorized generic, for Ventolin [®] HFA by A-S Medication, Prasco), levalbuterol HFA ¹ (authorized generic for Xopenex [®] HFA), ProAir [®] Digihaler [®] /Respiclick [®] , Ventolin [®] HFA, Xopenex [®] HFA	albuterol sulfate HFA (by Cipla, Par, Perrigo, Proficient Rx, and Teva)
	Striverdi [®] Respimat [®]	Serevent [®] Diskus [®] , Spiriva [®] /Respimat [®]
Inhaled beta-agonist and anticholinergic combinations	Duaklir [®] Pressair [®]	Combination products: Anoro [®] Ellipta [®] , Bevespi [®] Aersosphere [®] , Breztri [®] Aerosphere [®] , Stiolto [®] Respimat [®] , Trelegy [®] Ellipta [®] Single ingredient products: Serevent [®] Diskus [®] , Spiriva [®] /Respimat [®]
Inhaled steroids	ArmonAir [®] Digihaler [®]	ArmonAir [®] Respiclick [®] , Arnuity [®] Ellipta [®] , Asmanex [®] /HFA, Flovent [®] HFA/Diskus, Pulmicort [®] Flexhaler [®] /solution, Qvar [®] Redihaler [®]
Inhaled steroid and beta agonist combinations	AirDuo [®] Digihaler/Respiclick, budesonide-formoterol fumarate HFA ¹ (authorized generic for Symbicort [®]), fluticasone-salmeterol ¹ (authorized generic for Airduo Respiclick [®] by A-S MEDICATION, TEVA)	Combination products: Advair [®] Diskus [®] (brand only), Advair [®] HFA, Breo [®] Ellipta [®] , Breztri [®] Aerosphere [®] , Dulera [®] , fluticasone/salmeterol (by Prasco, Proficient Rx), Symbicort [®] , Trelegy [®] Ellipta [®] Single ingredient products: ArmonAir [®] Respiclick [®] , Arnuity [®] Ellipta [®] , Asmanex [®] /HFA, Flovent [®] HFA/Diskus, Pulmicort [®] Flexhaler [®] /solution, Qvar [®] Redihaler [®] , Spiriva [®] /Respimat [®] , Serevent [®] Diskus [®]
Drug Class: Rheumatology and musculoskeletal		
Drug Subclass	Excluded Drug	Preferred Alternatives
Gout therapy	colchicine capsule ¹ (authorized generic for Mitigare [®])	Colcrys [®] (brand), Mitigare [®]

Miscellaneous rheumatologic agents	Otrexup®	Rasuvo®
Non-Tumor Necrosis Factor (TNF) blocking agents	Cosentyx®	Enbrel®, Humira®, methotrexate, Otezla®, Skyrizi®, Stelara® 45mg, 90mg, Taltz®, Tremfya®
Drug Class: Urology		
Drug Subclass	Excluded Drug	Preferred Alternatives
Ion-Removing Agents	Fosrenol® packet	Phoslo®, Phoslyra®, Renagel®, Renvela®, Velphoro®
	Veltassa®	Lokelma®
Miscellaneous Urologicals	Noctiva®	DDAVP®, Detrol®/LA, Ditropan®/XL, Enablex®, Sanctura®/XR, Vesicare®
	Procysbi®	Cystagon®
Urinary antispasmodics	Oxytrol®	Detrol®/LA, Ditropan/XL, Enablex®, Sanctura®/XR, Vesicare®
Drug Class: Vitamins and supplements		
Drug Subclass	Excluded Drug	Preferred Alternatives
Vitamins and minerals	All prenatal vitamins not listed as a covered alternative	<p>The following prenatal vitamins are covered:</p> <p>Generic products: Complete Natal DHA, M-Natal Plus, PNV 29-1, Prenatabs FA, Prenatatabs Rx, Prenatal Plus, Prenatal vitamin plus low iron, PrePLUS, PreTAB, Trinatal Rx 1</p> <p>Brand-name products: (nonpreferred brand copay applies): Prenata, Prenatal Plus-DHA, Thrivite Rx</p>