



2024 Base Impact Formulary List

The 2024 Base Impact 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 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.

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|--------------------------------|--------------------------------|----------------------|--------------------------------|
| 1 | AJOVY AUTOINJECTOR [PA] | ARISTADA INITIO | BETOPTIC S |
| 1ST TIER UNIFINE PENTIPS | AJOVY SYRINGE [PA] | ARMOUR THYROID | BIKTARVY |
| 1ST TIER UNIFINE PENTIPS PLUS | albuterol sulfate | ARNUITY ELLIPTA | BOSULIF [PA] |
| A | albuterol sulfate hfa | ASMANEX | BREO ELLIPTA |
| ABILIFY ASIMTUFII | ALECENSA [PA] | ASMANEX HFA | BREXAFEMME [ST] |
| ABILIFY MAINTENA | alendronate sodium | atenolol | BREZTRI AEROSPHERE |
| ABSORICA | allopurinol | atomoxetine hcl | BRILINTA |
| ACCU-CHEK FASTCLIX LANCET DRUM | ALPHAGAN P | atorvastatin calcium | BRIXADI |
| ACCU-CHEK FASTCLIX LANCING DEV | alprazolam | AURYXIA | brompheniramine-pseudoephed-dm |
| ACCU-CHEK SOFTCLIX | ALPROLIX | AUVI-Q | BROMSITE |
| acetaminophen-codeine | ALTUVIII | AVONEX [PA] | BRONCHITOL [PA] |
| ACTEMRA [PA] | amitriptyline hcl | AVONEX PEN [PA] | BRUKINSA [PA] |
| ACTEMRA ACTPEN [PA] | amlodipine besylate | AZASITE | budesonide |
| acyclovir | amoxicillin | azelastine hcl | budesonide-formoterol fumarate |
| ADBRY [PA] | amoxicillin-clavulanate potass | B | buprenorphine-naloxone |
| ADEMPAS [PA] | AMZEEQ | baclofen | bupropion hcl |
| ADVAIR HFA | ANDRODERM [PA] | BAQSIMI | bupropion hcl sr |
| ADVATE | ANORO ELLIPTA | BARACLUDE | bupropion xl |
| ADYNOVATE | APRETUDE [PA] | BAXDELA [PA] | buspirone hcl |
| AFSTYLA | APRISO | BELBUCA | BYDUREON BCISE [PA] |
| AIMOVIG AUTOINJECTOR [PA] | ARALAST NP | BENEFIX | BYETTA [PA] |
| AIRSUPRA [ST] | ARANESP [PA] | Benzonatate | BYOOVIZ [PA] |
| | ARIKAYCE [PA] | BESIVANCE | C |
| | aripiprazole | BETHKIS | CABENUVA [PA] |
| | ARISTADA | | |

Cost for covered alternatives may vary.

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| CABOMETYX [PA] | DEPLIN-ALGAL OIL | EPIDIOLEX [PA] | G |
| calcitriol | DESCOVY | epinephrine | gabapentin |
| CALQUENCE [PA] | desvenlafaxine succinate er | EPIPEN 2-PAK | GAVRETO [PA] |
| CARAFATE | dexamethasone | EPIPEN JR 2-PAK | GELNIQUE [ST] |
| CARBAGLU [PA] | DEXCOM G6 RECEIVER | ERIVEDGE [PA] | GELSYN-3 [PA] |
| carvedilol | DEXCOM G6 SENSOR | ERLEADA [PA] | GEMTESA |
| cefazolin sodium | DEXCOM G6 TRANSMITTER | erythromycin | GENOTROPIN [PA] |
| cefdinir | DEXCOM G7 RECEIVER | escitalopram oxalate | gentamicin sulfate |
| celecoxib | DEXCOM G7 SENSOR | esomeprazole magnesium | GENVOYA |
| cephalexin | dexmethylphenidate hcl er | ESPEROCT | GLASSIA |
| CEQUA | dextroamphetamine- | estradiol | glimepiride |
| CERDELGA [PA] | amphet er | estradiol (twice weekly) | glipizide |
| CEREZYME [PA] | dextroamphetamine- | ESTRING | glipizide er |
| CETRAXAL [ST] | amphetamine | EUFLEXXA [PA] | GLUCAGEN |
| CETROTIDE | diazepam | EVAMIST [ST] | GLYXAMBI [ST] |
| chlorhexidine gluconate | DICLEGIS | ezetimibe | GONAL-F |
| chlorthalidone | diclofenac sodium | F | GONAL-F RFF |
| CIBINQO [PA] | dicyclomine hcl | FABHALTA [PA] | GONAL-F RFF REDI-JECT |
| CIMDUO | diltiazem 24hr er (cd) | famotidine | GRALISE [ST] |
| CIMERLI [PA] | divalproex sodium | FARXIGA | GRASTEK [PA] |
| cinacalcet hcl [pa] | DOPTelet [PA] | FASENRA [PA] | guanfacine hcl er |
| CINRYZE [PA] | DOVATO | FASENRA PEN [PA] | GUARDIAN CONNECT |
| CIPRO HC | doxycycline hyclate | fenofibrate | TRANSMITTER |
| ciprofloxacin hcl | doxycycline monohydrate | fentanyl [pa] | GUARDIAN SENSOR 3 |
| citalopram hbr | DROPLET LANCETS | FETZIMA | GVOKE |
| CLENPIQ | DUAVEE | finasteride | GVOKE HYPOPEN 1-PACK |
| clindamycin hcl | DULERA | FLAREX | GVOKE HYPOPEN 2-PACK |
| clindamycin phosphate | duloxetine hcl | FLECTOR [PA] | GVOKE PFS 1-PACK |
| clobetasol propionate | DUPIXENT PEN [PA] | fluconazole | SYRINGE |
| clonazepam | DUPIXENT SYRINGE [PA] | fluoxetine hcl | GVOKE PFS 2-PACK |
| clonidine hcl | DUROLANE [PA] | fluticasone propionate | SYRINGE |
| clopidogrel | DYANAVEL XR | fluticasone propionate hfa | H |
| COMBIGAN | DYSPORT [PA] | fluticasone-salmeterol | HADLIMA [PA] |
| COMBIPATCH | E | folic acid | HADLIMA PUSHTOUCH [PA] |
| COMBIVENT RESPIMAT | ELIGARD [PA] | FOLTX | HADLIMA(CF) [PA] |
| COMETRIQ [PA] | ELIQUIS | FORTEO [PA] | HADLIMA(CF) PUSHTOUCH |
| CORLANOR | ELOCTATE | FRAGMIN | [PA] |
| COTELLIC [PA] | ELYXYB [ST] | FREESTYLE LIBRE 14 DAY | HAEGARDA [PA] |
| COTEMPLA XR-ODT | EMGALITY PEN [PA] | READER | haloperidol |
| CREON | EMGALITY SYRINGE [PA] | FREESTYLE LIBRE 14 DAY | haloperidol lactate |
| CRINONE | EMPAVELI [PA] | SENSOR | HARVONI [PA] |
| cyclobenzaprine hcl | EMVERM [PA] | FREESTYLE LIBRE 2 READER | HEMANGEOL |
| CYSTADANE | ENBREL [PA] | FREESTYLE LIBRE 2 SENSOR | heparin sodium |
| D | ENBREL MINI [PA] | FREESTYLE LIBRE 3 READER | heparin sodium-d5w |
| DAYVIGO [ST] | ENBREL SURECLICK [PA] | FREESTYLE LIBRE 3 SENSOR | HUMALOG |
| DENAVIR | ENTRESTO | FUROSCIX [ST] | HUMALOG JUNIOR |
| | EPCLUSA [PA] | furosemide | KWIKPEN |
| | | | HUMALOG KWIKPEN U-100 |

Cost for covered alternatives may vary.

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| HUMALOG KWIKPEN U-200 | ibuprofen | LEVEMIR | methylphenidate hcl |
| HUMALOG MIX 50-50 | ILET INFUSION KIT-INSET | LEVEMIR FLEXPEN | methylprednisolone |
| HUMALOG MIX 50-50 KWIKPEN | ILET INFUSION-CONTACT DETACH | levetiracetam | metoprolol succinate |
| HUMALOG MIX 75-25 | ILET INSULIN PUMP | levocetirizine dihydrochloride | metoprolol tartrate |
| HUMALOG MIX 75-25 KWIKPEN | IMBRUVICA [PA] | levofloxacin | metronidazole |
| HUMALOG TEMPO PEN U-100 | INCONTROL PEN NEEDLE | levothyroxine sodium | MICROLET |
| HUMATROPE [PA] | INCRUSE ELLIPTA | lidocaine | MICROLET 2 |
| HUMIRA [PA] | INFLECTRA [PA] | lidocaine-prilocaine | MICROLET NEXT LANCING DEVICE |
| HUMIRA PEN [PA] | INLYTA [PA] | LINZESS | MINIMED SILHOUETTE |
| HUMIRA PEN [PA] | insulin lispro | lisdexamfetamine dimesylate | MIRENA |
| HUMIRA(CF) [PA] | insulin lispro kwikpen u-100 | lisinopril | mirtazapine |
| HUMIRA(CF) PEDIATRIC CROHN'S [PA] | INTRAROSA | lisinopril-hydrochlorothiazide | MIRVASO [ST] |
| HUMIRA(CF) PEN [PA] | ipratropium bromide | LO LOESTRIN FE | montelukast sodium |
| HUMIRA(CF) PEN CROHN'S-UC-HS [PA] | ipratropium-albuterol | LOKELMA [PA] | MORPHINE SULFATE |
| HUMIRA(CF) PEN PEDIATRIC UC [PA] | IXINITY | lorazepam | morphine sulfate [pa] |
| HUMIRA(CF) PEN PSOR-UV-ADOL HS [PA] | J | LORBRENA [PA] | morphine sulfate er |
| HUMULIN 70/30 KWIKPEN | JAKAFI [PA] | losartan potassium | MOUNJARO [PA] |
| HUMULIN 70-30 | JANUMET [ST] | losartan-hydrochlorothiazide | MOVANTIK |
| HUMULIN N | JANUMET XR [ST] | LOTEMAX | mupirocin |
| HUMULIN N KWIKPEN | JANUVIA [ST] | LOTEMAX SM | MUSE |
| HUMULIN R | JARDIANCE | LUMAKRAS [PA] | MVASI [PA] |
| HUMULIN R U-500 | JENTADUETO [ST] | LUMIGAN | MYFEMBREE [PA] |
| HUMULIN R U-500 KWIKPEN | JENTADUETO XR [ST] | LUMRYZ [PA] | MYRBETRIQ |
| hydralazine hcl | JIVI | LUPRON DEPOT [PA] | N |
| hydrochlorothiazide | JULUCA | LUPRON DEPOT-PED [PA] | naltrexone hcl |
| hydrocodone-acetaminophen | K | LYNPARZA [PA] | naproxen |
| hydrocortisone | KANJINTI [PA] | LYUMJEV | NASCOBAL |
| hydromorphone hcl | KERASTAT [PA] | LYUMJEV KWIKPEN U-100 | NATAZIA |
| hydroxychloroquine sulfate | KESIMPTA PEN [PA] | LYUMJEV KWIKPEN U-200 | NATESTO |
| hydroxyzine hcl | ketoconazole | LYUMJEV TEMPO PEN U-100 | NAYZILAM |
| hydroxyzine pamoate | ketorolac tromethamine | M | NEEVODHA |
| hyoscyamine sulfate | KISQALI [PA] | MAVYRET [PA] | NEULASTA [PA] |
| HYRIMOZ(CF) [PA] | KISQALI FEMARA CO-PACK [PA] | medroxyprogesterone acetate | NEULASTA ONPRO [PA] |
| HYRIMOZ(CF) PEDIATRIC CROHN'S [PA] | KITABIS PAK | MEKINIST [PA] | NEUPRO |
| HYRIMOZ(CF) PEN [PA] | KLOXXADO | meloxicam | NEXIUM |
| HYRIMOZ(CF) PEN CROHN-UC START [PA] | KOGENATE FS | METANX | NEXLETOL [PA] |
| HYRIMOZ(CF) PEN PSORIASIS [PA] | KOVALTRY | metformin hcl | NEXLIZET [PA] |
| I | KYLEENA | metformin hcl er | nifedipine er |
| IBRANCE [PA] | L | methadone hcl | nitrofurantoin mono-macro |
| | labetalol hcl | methocarbamol | NIVESTYM [PA] |
| | lactulose | methotrexate | nortriptyline hcl |
| | lamotrigine | methylphenidate er | NOVAREL |
| | latanoprost | | NOVOEIGHT |
| | LENVIMA [PA] | | np thyroid |
| | | | NUCALA [PA] |

Cost for covered alternatives may vary.

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| NUDEXTA [PA] | ORILISSA [PA] | PROLASTIN C | S |
| NURTEC ODT [PA] | oseltamivir phosphate | PROLENSA | SANCUSO |
| nystatin | OTEZLA [PA] | PROMACTA [PA] | SAVELLA |
| O | OTOVEL | promethazine hcl | SAXENDA [PA] |
| OB COMPLETE | OVIDREL | promethazine-dm | SCEMBLIX [PA] |
| OB COMPLETE ONE | oxcarbazepine | propranolol hcl | SECUADO |
| OB COMPLETE PETITE | oxybutynin chloride er | PYLERA | SEMGLEE (YFGN) |
| OB COMPLETE PREMIER | oxycodone hcl | Q | SEMGLEE (YFGN) PEN |
| OB COMPLETE WITH DHA | oxycodone-acetaminophen | QNASL | sertraline hcl |
| OCREVUS [PA] | OXYCONTIN | QNASL CHILDREN | SEVENFACT |
| ODACTRA | OZEMPIC [PA] | QUDEXY XR [ST] | sildenafil citrate |
| ODEFSEY | P | quetiapine fumarate | SIMBRINZA |
| ODOMZO [PA] | pantoprazole sodium | QUILLICHEW ER [ST] | SIMPONI ARIA |
| OFEV [PA] | paroxetine hcl | QUILLIVANT XR [ST] | simvastatin |
| ofloxacin | PAXLOVID | QULIPTA [PA] | SKYLA |
| olanzapine | PEN NEEDLE | QVAR REDIHALER | SKYRIZI [PA] |
| olmesartan medoxomil | PEN NEEDLES | R | SKYRIZI ON-BODY [PA] |
| OMECLAMOX-PAK | PENTASA | RAGWITEK | SKYRIZI PEN [PA] |
| omeprazole | PENTIPS | RASUVO [ST] | SKYTROFA [PA] |
| OMNIPOD 5 G6 INTRO KIT (GEN 5) | PERSERIS | REBIF [PA] | SOGROYA [PA] |
| OMNIPOD 5 G6 PODS (GEN 5) | PHEBURANE [PA] | REBIF REBIDOSE [PA] | SOLIQUA 100-33 [ST] |
| OMNIPOD CLASSIC PODS (GEN 3) | phenazopyridine hcl | REBINYN | SOLIRIS [PA] |
| OMNIPOD DASH INTRO KIT (GEN 4) | phentermine hcl | RECTIV | SOMATULINE DEPOT [PA] |
| OMNIPOD DASH PODS (GEN 4) | phenylephrine hcl-0.9% nacl | RELISTOR [PA] | SOMAVERT [PA] |
| OMNIPOD GO PODS | PHESGO [PA] | REPATHA PUSHTRONEX [PA] | SOOLANTRA |
| OMNITROPE [PA] | pioglitazone hcl | REPATHA SURECLICK [PA] | SPIRIVA HANDIHALER |
| ondansetron hcl | PIQRAY [PA] | REPATHA SYRINGE [PA] | SPIRIVA RESPIMAT |
| ondansetron odt | PLEGRIDY [PA] | RESTASIS | spironolactone |
| ONETOUCH DELICA PLUS LANCET | PLEGRIDY PEN [PA] | RESTASIS MULTIDOSE | SPRYCEL [PA] |
| ONETOUCH ULTRA TEST STRIP | polymyxin b sul- trimethoprim | RETACRIT [PA] | STEGLUJAN [ST] |
| ONETOUCH ULTRA2 | potassium chloride | RETIN-A MICRO PUMP | STELARA [PA] |
| ONETOUCH VERIO FLEX METER | PRALUENT PEN [PA] | REVLIMID [PA] | STIMUFEND [PA] |
| ONETOUCH VERIO REFLECT METER | pravastatin sodium | REXULTI | STIOLTO RESPIMAT |
| ONETOUCH VERIO TEST STRIP | prazosin hcl | REYVOW [PA] | STIVARGA [PA] |
| ONEXTON | PRECISION XTRA | RINVOQ [PA] | STRENSIQ [PA] |
| OPVEE | prednisolone acetate | risperidone | STRIVERDI RESPIMAT |
| ORALAIR [PA] | prednisone | RIXUBIS | SUBLOCADE [PA] |
| ORFADIN [PA] | pregabalin | rizatriptan | sucralfate |
| ORIAHNN [PA] | PREMARIN | ropinirole hcl | SUFLAVE |
| | PREMPHASE | rosuvastatin calcium | sulfamethoxazole- trimethoprim |
| | PREMPRO | ROZLYTREK [PA] | sumatriptan succinate |
| | PREZISTA | RUCONEST [PA] | SUNOSI [PA] |
| | PROAIR RESPICLICK | RUXIENCE [PA] | SUPARTZ FX [PA] |
| | PROCRIIT [PA] | RYBELSUS [PA] | SUPREP |
| | progesterone | RYKINDO | SUTAB |

Cost for covered alternatives may vary.

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| SYMFI | TOBRADEX ST | UDENYCA [PA] | W |
| SYMFI LO | topiramate | UDENYCA AUTOINJECTOR [PA] | warfarin sodium |
| SYMLINPEN 120 | TRADJENTA [ST] | UDENYCA ONBODY [PA] | WEGOVY [PA] |
| SYMLINPEN 60 | tramadol hcl | ULTOMIRIS [PA] | X |
| SYMPROIC | TRAZIMERA [PA] | UNIFINE PENTIPS | XALKORI [PA] |
| SYMTUZA | trazodone hcl | UNIFINE PENTIPS MAXFLOW | XARELTO |
| SYNJARDY | TRELEGY ELLIPTA | UNIFINE PENTIPS PLUS | XDEMVY [PA] |
| SYNJARDY XR | TREMFYA [PA] | UNIFINE PENTIPS PLUS MAXFLOW | XIFAXAN |
| T | TRESIBA | UNIFINE SAFECONTROL | XIGDUO XR |
| TACLONEX | TRESIBA FLEXTOUCH U-100 | UNIFINE ULTRA PEN NEEDLE | XOLAIR [PA] |
| tacrolimus | TRESIBA FLEXTOUCH U-200 | UPTRAVI [PA] | XTANDI [PA] |
| TAFINLAR [PA] | tretinoin | UZEDY | XULTOPHY 100-3.6 [ST] |
| TAGRISSO [PA] | triamcinolone acetonide | V | Y |
| TAKHZYRO [PA] | triamterene-hydrochlorothiazid | valacyclovir | YUPELRI |
| TALICIA | TRIJARDY XR [ST] | valsartan | Z |
| TALTZ AUTOINJECTOR (2 PACK) [PA] | TRINTELLIX | VARUBI | ZARXIO [PA] |
| TALTZ AUTOINJECTOR (3 PACK) [PA] | TRIPTODUR [PA] | VASCEPA | ZEGALOGUE AUTOINJECTOR |
| TALTZ AUTOINJECTOR [PA] | TRIUMEQ | VELPHORO | ZEGALOGUE SYRINGE |
| TALTZ SYRINGE [PA] | TRIUMEQ PD | VEMLIDY | ZEJULA [PA] |
| TALZENNA [PA] | TROKENDI XR [ST] | venlafaxine hcl er | ZELBORAF [PA] |
| tamsulosin hcl | TRUE METRIX AIR GLUCOSE METER | VENTOLIN HFA | ZENPEP |
| TASIGNA [PA] | TRUE METRIX BLOOD GLUCOSE MTR | V-GO 20 | ZEPBOUND [PA] |
| TAZORAC | TRUE METRIX GLUCOSE TEST STRIP | V-GO 30 | ZERVIAE |
| TEGSEDI [PA] | TRUEPLUS INSULIN SYRINGE | V-GO 40 | ZIEXTENZO [PA] |
| TEKTRUNA [ST] | TRUEPLUS PEN NEEDLE | VIOKACE | ZIMHI |
| TEMPO REFILL KIT (WITH GAUZE) | TRULANCE | vitamin d2 | ZIRABEV [PA] |
| TEMPO SMART BUTTON | TRULICITY [PA] | VITRAKVI [PA] | zolpidem tartrate |
| TEMPO WELCOME KIT | TWIRLA | VIVITROL | ZOMIG [ST] |
| testosterone cypionate [pa] | TYMLOS [PA] | VOSEVI [PA] | ZUBSOLV |
| TEZSPIRE [PA] | U | VUMERITY [PA] | ZURZUVAE [PA] |
| tizanidine hcl | UBRELVY [PA] | VYVGART HYTRULO [PA] | ZYLET |
| TOBI PODHALER | UCERIS | VYZULTA | |
| TOBRADEX | | | |

Cost for covered alternatives may vary.

Indication Based Management

| Indication | Non-Preferred Medications | Preferred Alternatives |
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| Non-Radiographic Axial Spondyloarthritis | COSENTYX ⁴ | CIMZIA, RINVOQ, TALTZ |
| Rheumatoid Arthritis | CIMZIA ³ , ORENCIA ³ , OLUMIANT ³ , SIMPONI ³ , KEVZARA ³ , KINERET ³ , XELJANZ ⁴ , XELJANZ XR ⁴ | ENBREL, HUMIRA, HYRIMOZ, HADLIMA, ADALIMUMAB-ADAZ, RINVOQ, ACTEMRA ¹ |
| Juvenile Idiopathic Arthritis | ORENCIA ³ , XELJANZ ⁴ , XELJANZ XR ⁴ | ENBREL, HUMIRA, HYRIMOZ, HADLIMA, ADALIMUMAB-ADAZ, ACTEMRA ¹ |
| Psoriatic Arthritis | CIMZIA ³ , ORENCIA ³ , SIMPONI ³ , COSENTYX ⁴ , XELJANZ ⁴ , XELJANZ XR ⁴ | ENBREL, HUMIRA, HYRIMOZ, HADLIMA, ADALIMUMAB-ADAZ, OTEZLA, RINVOQ, SKYRIZI, STELARA SC, TALTZ, TREMFYA |
| Ankylosing Spondylitis | CIMZIA ³ , SIMPONI ³ , COSENTYX ⁴ , XELJANZ ⁴ , XELJANZ XR ⁴ | ENBREL, HUMIRA, HYRIMOZ, HADLIMA, ADALIMUMAB-ADAZ, RINVOQ, TALTZ |
| Psoriasis | CIMZIA ³ , ILUMYA ³ , SILIQ ³ , BIMZELX ³ , COSENTYX ⁴ | ENBREL, HUMIRA, HYRIMOZ, HADLIMA, ADALIMUMAB-ADAZ, OTEZLA, SKYRIZI, STELARA SC, TALTZ, TREMFYA, SOTYKTU ² |
| Ulcerative Colitis | ZEPOSIA ³ , ENTYVIO SC ³ , OMVOH ³ , VELSIPITY ⁴ , XELJANZ ⁴ , XELJANZ XR ⁴ | HUMIRA, HYRIMOZ, HADLIMA, ADALIMUMAB-ADAZ, STELARA SC, RINVOQ, SIMPONI 100MG ¹ |
| Crohn's Disease | CIMZIA ³ , ENTYVIO SC ³ | HUMIRA, HYRIMOZ, HADLIMA, ADALIMUMAB-ADAZ, RINVOQ, STELARA SC, SKYRIZI |
| Hidradenitis Suppurativa | COSENTYX ⁴ | HUMIRA, HYRIMOZ, HADLIMA, ADALIMUMAB-ADAZ |

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.

¹Preferred Brand with step through ONE Adalimumab Product

²Preferred Brand with step through ONE Preferred Biologic

³Non-Preferred Brand with step through TWO Preferred Biologics

⁴Excluded Product or Non-Preferred Brand stepped through THREE Preferred Biologics

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