



2026 Elite Impact Formulary Biosimilar

The 2026 Elite Impact Formulary Biosimilar 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. This printed formulary does not provide information regarding the specific coverage and limitations an individual member may have. Many members have specific benefit inclusions, exclusions, copays, or a lack of coverage, which are not reflected in the formulary. For example, drugs for the treatment of infertility or weight loss may not be covered. Refer to your benefit summary for more information regarding your specific coverage.

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

[SP] – Drug is listed on a Specialty Tier

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.

1	albuterol sulfate	ASMANEX	BOSULIF [PA][SP]
1ST TIER UNIFINE PENTIPS	albuterol sulfate hfa	ASMANEX HFA	BREO ELLIPTA
1ST TIER UNIFINE PENTIPS PLUS	ALECENSA [PA][SP]	atenolol	BREZTRI AEROSPHERE
A	alendronate sodium	atomoxetine hcl	BRIXADI
ABILIFY ASIMTUFI	allopurinol	atorvastatin calcium	brompheniramine- pseudoephed-dm
ABILIFY MAINTENA	alprazolam	ATROVENT HFA	BRUKINSA [PA][SP]
ACCU-CHEK FASTCLIX LANCET DRUM	ALPROLIX[SP]	AUGTYRO [PA][SP]	budesonide
ACCU-CHEK SOFTCLIX	ALTUVIIIO[SP]	AUVI-Q	budesonide-formoterol fumarate
acetaminophen-codeine	ALUNBRIG [PA][SP]	AVONEX (4 PACK) [PA][SP]	buprenorphine-naloxone
acyclovir	amitriptyline hcl	AVONEX PEN (4 PACK) [PA][SP]	bupropion hcl
ADBRY [PA][SP]	amlodipine besylate	AZASITE	bupropion hcl sr
ADBRY AUTOINJECTOR [PA][SP]	amoxicillin	azelastine hcl	bupropion xl
ADEMPAS [PA][SP]	amoxicillin-clavulanate potass	azithromycin	buspirone hcl
ADVAIR HFA	ANORO ELLIPTA	B	BYOOVIZ [PA][SP]
ADVATE[SP]	APRETUDE [PA]	baclofen	C
ADVOCATE SYRINGES	ARALAST NP[SP]	BARACLUDE[SP]	CABENUVA [PA]
ADYNOVATE[SP]	ARIKAYCE [PA][SP]	BAXDELA [PA]	CABOMETYX [PA][SP]
AFSTYLA[SP]	aripiprazole	BELBUCA	CALQUENCE [PA][SP]
AIMOVIG AUTOINJECTOR [PA]	ARISTADA	BENEFIX[SP]	CARBAGLU [PA][SP]
AJOVY AUTOINJECTOR [PA]	ARISTADA INITIO	benzonatate	CARETOUCH INSULIN SYRINGE
AJOVY SYRINGE [PA]	ARMOUR THYROID	BETASERON [PA][SP]	carvedilol
	ARNUITY ELLIPTA	BIKTARVY	

Cost for covered alternatives may vary.

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cefazolin sodium[sp]	DILANTIN	ERIVEDGE [PA][SP]	FREESTYLE PRECISION NEO METER
cefdinir	diltiazem 24hr er (cd)	ERLEADA [PA][SP]	FREESTYLE PRECISION NEO TEST STRIPS
celecoxib	divalproex sodium	erythromycin	FREESTYLE SIDEKICK II
cephalexin	DOPTelet [PA][SP]	ERZOFRI	FREESTYLE SYSTEM
CEQUA	DOVATO	escitalopram oxalate	FREESTYLE TEST STRIPS
CERDELGA [PA][SP]	doxycycline hyclate	esomeprazole magnesium	furosemide
CEREZYME [PA][SP]	doxycycline monohydrate	ESPEROCT[SP]	G
CETROTIDE[SP]	DROPLET INSULIN SYRINGE	estradiol	gabapentin
chlorhexidine gluconate	DROPSAFE PREP PADS	estradiol (twice weekly)	GAVRETO [PA][SP]
chlorthalidone	DUAVEE	ESTRING	GEMTESA
CIBINQO [PA][SP]	DULERA	EUFLEXXA [PA][SP]	GENOTROPIN [PA][SP]
CIMDUO	duloxetine hcl	EXTENDED RESERVOIR	GENVOYA
CINRYZE [PA][SP]	DUPIXENT PEN [PA][SP]	ezetimibe	GLASSIA[SP]
ciprofloxacin hcl	DUPIXENT SYRINGE [PA][SP]	F	glimepiride
citapram hbr	DYANAVEL XR [ST]	FABHALTA [PA][SP]	glipizide
clindamycin hcl	DYSPORT [PA][SP]	FABRAZYME [PA][SP]	glipizide er
clindamycin phosphate	E	famotidine	GLYXAMBI [ST]
clobetasol propionate	EASY COMFORT INSULIN SYRINGE	fenofibrate	GONAL-F RFF REDI-JECT[SP]
clonazepam	EASY GLIDE INSULIN SYRINGE	fentanyl [pa]	GONAL-F RFF[SP]
clonidine hcl	EASY TOUCH	finasteride	GONAL-F[SP]
clopidogrel	EASY TOUCH FLIPLOCK INSULIN	FIRMAGON[SP]	GRASTEK
COMBIPATCH	EASY TOUCH INSULIN SAFETY	FLECTOR [PA]	guanfacine hcl er
COMBIVENT RESPIMAT	EASY TOUCH INSULIN SYRINGE	fluconazole	GVOKE
COMFORT EZ INSULIN SYRINGE	EASY TOUCH LUER LOCK INSULIN	fluoxetine hcl	GVOKE HYPOPEN 1-PACK
COTELLIC [PA][SP]	EASY TOUCH SHEATHLOCK INSULIN	fluticasone propionate	GVOKE HYPOPEN 2-PACK
CREON	EASY TOUCH UNI-SLIP	fluticasone propionate hfa	GVOKE PFS 1-PACK SYRINGE
cyanocobalamin injection	EASY TOUCH INSULIN SYRINGE	fluticasone-salmeterol	GVOKE PFS 2-PACK SYRINGE
cyclobenzaprine hcl	EBGLYSS PEN [PA][SP]	folic acid	H
CYSTADANE[SP]	EBGLYSS SYRINGE [PA][SP]	FREESTYLE FREEDOM LITE METER	HADLIMA [PA][SP]
D	ELFABRIO [PA][SP]	FREESTYLE INSULINX METER	HADLIMA PUSHTOUCH [PA][SP]
DANZITEN [PA][SP]	ELIGARD [PA][SP]	FREESTYLE INSULINX TEST STRIPS	HADLIMA(CF) [PA][SP]
DAYVIGO [ST]	ELIQUIS	FREESTYLE LANCETS	HADLIMA(CF) PUSHTOUCH [PA][SP]
DESCOVY	ELOCTATE[SP]	FREESTYLE LIBRE 14 DAY READER	HAEGARDA [PA][SP]
desvenlafaxine succinate er	EMGALITY PEN [PA]	FREESTYLE LIBRE 14 DAY SENSOR	haloperidol
dexamethasone	EMGALITY SYRINGE [PA]	FREESTYLE LIBRE 2 PLUS SENSOR	haloperidol lactate
DEXCOM G6 RECEIVER	EMPAVELI [PA][SP]	FREESTYLE LIBRE 2 READER	HARVONI [PA][SP]
DEXCOM G6 SENSOR	EMVERM [PA]	FREESTYLE LIBRE 2 SENSOR	HEALTHWISE INSULIN SYRINGE
DEXCOM G6 TRANSMITTER	ENBREL [PA][SP]	FREESTYLE LIBRE 3 PLUS SENSOR	HUMALOG
DEXCOM G7 RECEIVER	ENBREL MINI [PA][SP]	FREESTYLE LIBRE 3 READER	HUMALOG JUNIOR KWIKPEN
DEXCOM G7 SENSOR	ENBREL SURECLICK [PA][SP]	FREESTYLE LIBRE 3 SENSOR	HUMALOG KWIKPEN U-100
dexmethylphenidate hcl er	ENDOMETRIN	FREESTYLE LITE METER	HUMALOG KWIKPEN U-200
dextroamphetamine-amphet er	enoxaparin sodium	FREESTYLE LITE TEST STRIPS	HUMALOG MIX 50-50 KWIKPEN
dextroamphetamine-amphetamine	EPCLUSA [PA][SP]	FREESTYLE PRECISION	HUMALOG MIX 75-25
diazepam	EPIDIOLEX [PA][SP]		HUMALOG MIX 75-25 KWIKPEN
diclofenac sodium	epinephrine		HUMALOG TEMPO PEN U-100
dicyclomine hcl			

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HUMIRA [PA][SP]	JAKAFI [PA][SP]	LYUMJEV	naltrexone hcl
HUMIRA PEN [PA][SP]	JANUMET [ST]	LYUMJEV KWIKPEN U-100	naproxen
HUMIRA(CF) [PA][SP]	JANUMET XR [ST]	LYUMJEV KWIKPEN U-200	NATESTO [PA]
HUMIRA(CF) PEN [PA][SP]	JANUVIA [ST]	LYUMJEV TEMPO PEN U-100	NAYZILAM
HUMIRA(CF) PEN CROHN'S-UC- HS [PA][SP]	JARDIANCE	M	NEULASTA [PA][SP]
HUMIRA(CF) PEN PSOR-UV- ADOL HS [PA][SP]	JIVI[SP]	MAGELLAN INSULIN SAFETY SYRNG	NEULASTA ONPRO [PA][SP]
HUMULIN 70/30 KWIKPEN	JULUCA	MAGELLAN INSULIN SYRINGE	NEXLETOL [PA]
HUMULIN 70-30	JYLAMVO [ST]	MAVYRET [PA][SP]	NEXLIZET [PA]
HUMULIN N	JYNARQUE [PA][SP]	MAXI-COMFORT	nifedipine er
HUMULIN N KWIKPEN	K	MAXICOMFORT INSULIN SYRINGE	nitrofurantoin mono-macro
HUMULIN R	KESIMPTA PEN [PA][SP]	meclizine hcl	NIVESTYM [PA][SP]
HUMULIN R U-500	ketoconazole	medroxyprogesterone acetate	normal saline flush
HUMULIN R U-500 KWIKPEN	ketorolac tromethamine	MEKINIST [PA][SP]	nortriptyline hcl
hydralazine hcl	KISQALI [PA][SP]	meloxicam	NOVAREL
hydrochlorothiazide	KLOXXADO	mesalamine ER	NOVOEIGHT[SP]
hydrocodone-acetaminophen	KOGENATE FS[SP]	metformin hcl	np thyroid
hydrocortisone	KOVALTRY[SP]	metformin hcl er	NUCALA [PA][SP]
hydromorphone hcl	KYLEENA	methocarbamol	NUDEXTA [PA]
hydroxychloroquine sulfate	L	methotrexate	NURTEC ODT [PA]
hydroxyzine hcl	labetalol hcl	methylphenidate er	nystatin
hydroxyzine pamoate	lactulose	methylphenidate hcl	O
hyoscyamine sulfate	lamotrigine	methylprednisolone	OCALIVA [PA][SP]
I	latanoprost	metoprolol succinate	OCREVUS [PA][SP]
IBRANCE [PA][SP]	LENVIMA [PA][SP]	metoprolol tartrate	OCREVUS ZUNOVO [PA][SP]
ibuprofen	levetiracetam	metronidazole	ODACTRA
ILET INFUSION KIT-INSET	levocetirizine dihydrochloride	MICROLET	ODEFSEY
ILET INFUSION-CONTACT DETACH	levofloxacin	MICROLET 2	ODOMZO [PA][SP]
ILET INSULIN PUMP	levothyroxine sodium	MICROLET NEXT LANCING DEVICE	OFEV [PA][SP]
ILET STARTER KIT-INSET	lidocaine	MIRENA	ofloxacin
IMBRUVICA [PA][SP]	LINZESS	mirtazapine	OGIVRI [PA][SP]
IMULDOSA [PA][SP]	liothyronine sodium	MONOJECT	olanzapine
INCONTROL PEN NEEDLE	lisdexamphetamine dimesylate	MONOJECT INSULIN SAFETY SYRNG	olmesartan medoxomil
INCRUSE ELLIPTA	lisinopril	MONOJECT INSULIN SYRINGE	omeprazole
INFLECTRA [PA][SP]	lisinopril-hydrochlorothiazide	MONOVISC [SP]	OMNIPOD 5 (G6/LIBRE 2 PLUS)
INLYTA [PA][SP]	LOKELMA [PA]	montelukast sodium	OMNIPOD 5 DEXG7G6 INTRO(GEN 5)
insulin glargine-yfgn	lorazepam	morphine sulfate [PA]	OMNIPOD 5 DEXG7G6 PODS (GEN 5)
insulin lispro	LORBRENA [PA][SP]	morphine sulfate er	OMNIPOD 5 INTRO(G6/LIBRE2PLUS)
insulin lispro kwikpen u-100	losartan potassium	MOUNJARO [PA]	OMNIPOD DASH INTRO KIT (GEN 4)
INSULIN SYRINGE	losartan-hydrochlorothiazide	MOVANTIK	OMNIPOD DASH PODS (GEN 4)
INSULIN SYRINGE U-500	LOTEMAX GEL	mupirocin	OMNITROPE [PA][SP]
ipratropium bromide	LOTEMAX SM	MVASI [PA][SP]	ondansetron hcl
ipratropium-albuterol	loteprednol drops	MYFEMBREE [PA]	ondansetron odt
IQIRVO [PA][SP]	LUMAKRAS [PA][SP]	MYRBETRIQ	OPVEE
IXINITY[SP]	LUPRON DEPOT [PA][SP]	N	ORALAIR
J	LUPRON DEPOT-PED [PA][SP]		
	LYNPARZA [PA][SP]		

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ORFADIN [PA][SP]	PRODIGY INSULIN SYRINGE	SAVELLA	TAKHZYRO [PA][SP]
ORIAHNN [PA]	progesterone	SCSEMBLIX [PA][SP]	TALTZ AUTOINJECTOR (2 PACK) [PA][SP]
ORLISSA [PA]	PROLASTIN C[SP]	SEMGLEE (YFGN)	TALTZ AUTOINJECTOR (3 PACK) [PA][SP]
ORTHOVISC [PA][SP]	promethazine hcl	SEMGLEE (YFGN) PEN	TALTZ AUTOINJECTOR [PA][SP]
oseltamivir phosphate	promethazine-dm	sertraline hcl	TALTZ SYRINGE [PA][SP]
OTEZLA [PA][SP]	propranolol hcl	SEVENFACT[SP]	TALZENNA [PA][SP]
OTEZLA XR [PA][SP]	propranolol hcl er	sildenafil citrate	tamsulosin hcl
OVIDREL	Q	SIMPONI ARIA [PA][SP]	TASIGNA [PA][SP]
oxcarbazepine	quetiapine fumarate	simvastatin	TECHLITE INSULIN SYRINGE
oxybutynin chloride er	QUILLICHEW ER [ST]	SKYLA	TEMPO REFILL KIT (WITH GAUZE)
oxycodone hcl	QUILLIVANT XR [ST]	SKYRIZI [PA][SP]	TEMPO SMART BUTTON
oxycodone ER	QULIPTA [PA]	SKYRIZI ON-BODY [PA][SP]	TEMPO WELCOME KIT
oxycodone-acetaminophen	QVAR REDIHALER	SKYRIZI PEN [PA][SP]	TERUMO INSULIN SYRINGE
OZEMPIC [PA]	R	SKYTROFA [PA][SP]	testosterone cypionate [pa]
P	RAGWITEK	SOGROYA [PA][SP]	TEZSPIRE [PA][SP]
pantoprazole sodium	RASUVO [ST]	SOLQUA 100-33 [ST]	THINPRO INSULIN SYRINGE
PARADIGM	REBIF [PA][SP]	SOMATULINE DEPOT [PA][SP]	tizanidine hcl
paroxetine hcl	REBIF REBIDOSE [PA][SP]	SOMAVERT [PA][SP]	TOBI PODHALER [PA][SP]
PAXLOVID	REBINYN[SP]	SOTYKTU [PA][SP]	TOBRADEX
PEN NEEDLE	RELISTOR [PA]	SPIRIVA HANDIHALER	TOBRADEX ST
PEN NEEDLES	REPATHA PUSHTRONEX [PA]	SPIRIVA RESPIMAT	topiramate
PENTASA	REPATHA SURECLICK [PA]	spironolactone	tramadol hcl
PENTIPS PEN NEEDLE	REPATHA SYRINGE [PA]	STEQEYMA [PA][SP]	TRAZIMERA [PA][SP]
PERSERIS	RESTASIS	STIOLTO RESPIMAT	trazodone hcl
PHEBURANE [PA][SP]	RESTASIS MULTIDOSE	STIVARGA [PA][SP]	TRELEGY ELLIPTA
phenazopyridine hcl	RETACRIT [PA][SP]	STRENSIQ [PA][SP]	TRESIBA
phentermine hcl	REVLIMID [PA][SP]	STRIVERDI RESPIMAT	TRESIBA FLEXTOUCH U-100
phenylephrine hcl-0.9% nacl[sp]	REYVOW [PA]	SUBLOCADE [PA]	TRESIBA FLEXTOUCH U-200
PHESGO [PA][SP]	RINVOQ [PA][SP]	sucrafate	tretinoin
pioglitazone hcl	RINVOQ LQ [PA][SP]	sumatriptan succinate	triamcinolone acetonide
PIQRAY [PA][SP]	risperidone	SUNOSI [PA]	triamterene-hydrochlorothiazid
PLEGRIDY [PA][SP]	RIXUBIS[SP]	SURE COMFORT	TRIJARDY XR [ST]
PLEGRIDY PEN [PA][SP]	rizatriptan	SURE COMFORT INSULIN SYRINGE	TRIPTODUR [PA][SP]
POMALYST [PA][SP]	ropinirole hcl	SURE-JECT INSULIN SYRINGE	TRIUMEQ
potassium chloride	rosuvastatin calcium	SYMLINPEN 120	TRIUMEQ PD
pravastatin sodium	ROZLYTREK [PA][SP]	SYMLINPEN 60	TROKENDI XR [ST]
prazosin hcl	RUCONEST [PA][SP]	SYMPROIC	TRUE COMFORT INSULIN SYRINGE
PRECISION XTRA	RUXIENCE [PA][SP]	SYMTOZA	TRUE COMFORT PRO INS SYRINGE
prednisolone acetate	RYBELSUS [PA]	SYNJARDY	TRUE METRIX AIR GLUCOSE METER
prednisone	RYKINDO	SYNJARDY XR	TRUE METRIX GLUCOSE TEST STRIP
pregabalin	S	T	TRUEPLUS INSULIN SYRINGE
PREMARIN	sacubitril-valsartan	tacrolimus	TRUEPLUS PEN NEEDLE
PREMPHASE	SAFESNAP INSULIN SYRINGE	tadalafil	TRULANCE
PREMPRO	SAFETYGLIDE INSULIN SYRINGE	TAFINLAR [PA][SP]	
PRO COMFORT INSULIN SYRINGE	SAFETYGLIDE SYRINGE	TAGRISSO [PA][SP]	
PROCRT [PA][SP]	SANCUSO [PA]		

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TRULICITY [PA]	UNIFINE PENTIPS MAXFLOW	VIOKACE	YUFLYMA [PA][SP]
TWIST REFILL KT(CSST-NDL-SYR)	UNIFINE PENTIPS PLUS	vitamin d2	YUPELRI
TWIST RFL(INFUS-CSST-NDL-SYR)	UNIFINE PENTIPS PLUS MAXFLOW	VITRAKVI [PA][SP]	Z
TWIST STARTER KIT	UNIFINE SAFECONTROL PEN NEEDLE	VIVITROL[SP]	ZARXIO [PA][SP]
TYENNE [PA][SP]	UNIFINE ULTRA PEN NEEDLE	VIZIMPRO [PA][SP]	ZEGALOGUE AUTOINJECTOR
TYENNE AUTOINJECTOR [PA][SP]	UPTRAVI [PA][SP]	VOSEVI [PA][SP]	ZEGALOGUE SYRINGE
TYMLOS [PA][SP]	UZEDY	VOYDEYA [PA][SP]	ZEJULA [PA][SP]
U	V	W	ZELBORAF [PA][SP]
UBRELVI [PA]	valacyclovir	warfarin sodium	ZENPEP
ULTICARE	valsartan	X	ZEPOSIA [PA][SP]
ULTICARE INSULIN SYRINGE	VANISHPOINT	XALKORI [PA][SP]	ZIEXTENZO [PA][SP]
ULTIGUARD SAFEPAK-INSULIN SYR	VANISHPOINT INSULIN SYRINGE	XARELTO	ZIRABEV [PA][SP]
ULTILET INSULIN SYRINGE	VARUBI	XIFAXAN [PA]	zolpidem tartrate
ULTRA COMFORT	VASCEPA	XOLAIR [PA][SP]	ZOMIG [ST]
ULTRA FLO INSULIN SYRINGE	VEMLIDY	XTANDI [PA][SP]	ZUBSOLV
ULTRACARE INSULIN SYRINGE	venlafaxine hcl er	XULTOPHY 100-3.6 [ST]	ZYKADIA [PA][SP]
ULTRA-FINE INSULIN SYRINGE	V-GO 20	XYNTHA SOLOFUSE[SP]	ZYLET
ULTRA-THIN II	V-GO 30	XYNTHA[SP]	ZYMFENTRA [PA][SP]
UNIFINE PENTIPS	V-GO 40	Y	ZYMFENTRA PEN (2 PACK) [PA][SP]
	VIBERZI [ST]	YESINTEK [PA][SP]	
		YEZTUGO	

Alternative Drug Tables

The Non-Preferred or Excluded medications shown below may be filled at a higher copay or co-insurance. If you fill a prescription for an excluded drug, you may pay the full retail price. Please note that product placement on this list is subject to change throughout the year based upon market dynamics, new indications for existing products, and new product launches. The list below is NOT a complete list of all products considered excluded or non-preferred drugs by Kroger Prescription Plans; in most cases, multi-source brands are excluded from coverage with preference given to generic equivalents.

Take action to avoid paying full price. If you're currently using one of the non-preferred or excluded medications, you can ask your doctor to consider writing you a new prescription for a preferred alternative. Additional covered alternatives may be available. Costs for covered alternatives may vary. 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 plan. For specific questions about your coverage, please call the number on your member ID card.

Drug Class	Non-Preferred/Excluded	Preferred
ACE INHIBITOR/THIAZIDE & THIAZIDE-LIKE DIURETIC	ZESTORETIC	LISINOPRIL-HYDROCHLOROTHIAZIDE
ACNE AGENTS,SYSTEMIC	ABSORICA, ABSORICA LD, ISOTRETINOIN (25 MG CAP), ISOTRETINOIN (35 MG CAP)	ISOTRETINOIN CAP (10 MG, 20 MG, 30MG, OR 40MG)
ADRENERGICS, AROMATIC, NON-CATECHOLAMINE	XELSTRYM, ADZENYS XR-ODT	DYANAVEL XR, DEXTROAMPHETAMINE-AMPHET ER, DEXTROAMPHETAMINE-AMPHETAMINE
AGENTS TO TREAT MULTIPLE SCLEROSIS	MAYZENT, PONVORY, COPAXONE, BRIUMVI, VUMERITY, GILENYA, BAFIERTAM, MAVENCLAD, TASCENSO ODT	DIMETHYL FUMARATE, BETASERON, REBIF REBIDOSE, KESIMPTA PEN, PLEGRIDY PEN, AVONEX, PLEGRIDY, REBIF, GLATOPA, OCREVUS ZUNOVO, OCREVUS
AMINOGLYCOSIDES	BETHKIS, KITABIS PAK	ARIKAYCE, TOBI PODHALER
AMMONIA INHIBITORS	OLPRUVA	PHEBURANE, CARBAGLU
ANAEROBIC ANTIPROTOZOAL-ANTIBACTERIAL AGENTS	LIKMEZ	METRONIDAZOLE
ANALGESICS,NARCOTICS	XTAMPZA ER, NUCYNTA ER, NUCYNTA, HYSINGLA ER, OXAYDO, ROXYBOND	BELBUCA, OXYCODONE HCL, TRAMADOL HCL, OXYCODONE ER TAB (10MG, 20MG, OR 40MG, 80MG), OXYCONTIN (15MG, 30MG, OR 60MG), HYDROCODONE BITARTRATE ER 24HR TAB
ANAPHYLAXIS THERAPY AGENTS	NEFFY, SYMJEPI	AUVI-Q, EPINEPHRINE 0.15MG
ANDROGENIC AGENTS	XYOSTED, JATENZO, KYZATREX, TLANDO, UNDECATREX	NATESTO, TESTOSTERONE CYPIONATE, TESTOSTERONE 1% GEL
ANGIOTENSIN RECEPT-NEPRILYSIN INHIBITOR COMB(ARNI)	ENTRESTO SPRINKLE, ENTRESTO TAB	SACUBITRIL/VALSARTAN TAB
ANGIOTENSIN RECEPTOR ANTAG./THIAZIDE DIURETIC COMB	EDARBYCLOR	LOSARTAN-HYDROCHLOROTHIAZIDE
ANTIANDROGENIC AGENTS	YONSA, NUBEQA	XTANDI, ERLEADA, ABIRATERONE 250MG TAB
ANTI-ANXIETY - BENZODIAZEPINES	LOREEV XR	ALPRAZOLAM, LORAZEPAM
ANTI-ARTHRITIC, FOLATE ANTAGONIST AGENTS	OTREXUP	RASUVO
ANTI-CD20 (B LYMPHOCYTE) MONOCLONAL ANTIBODY	RIABNI	RUXIENCE
ANTICHOLINERGICS, ORALLY INHALED LONG ACTING	TUDORZA PRESSAIR	SPIRIVA RESPIMAT, INCRUSE ELLIPTA, YUPELRI, SPIRIVA HANDIHALER
ANTICONVULSANT - BENZODIAZEPINE TYPE	LIBERVANT, SYMPAZAN, VALTOCO	NAYZILAM, CLONAZEPAM
ANTICONVULSANTS	SPRITAM, FYCOMPA, XCOPRI, BRIVIACT, LYRICA, DILANTIN-125, DILANTIN (100 MG CAP), MOTPOLY XR, OXTELLAR XR, ELEPSIA XR, APTIOM	GABAPENTIN, TROKENDI XR, TOPIRAMATE ER SPRINKLE, DILANTIN (30 MG CAP), LAMOTRIGINE, TOPIRAMATE, PREGABALIN, DIVALPROEX SODIUM, OXCARBAZEPINE
ANTIEMETIC/ANTIVERTIGO AGENTS	EMEND, DICLEGIS, ONDANSETRON ODT (16 MG TAB), BONJESTA	SANCUSO, ONDANSETRON HCL, ONDANSETRON ODT (4 MG, 8MG), VARUBI, APREPITANT

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Drug Class	Non-Preferred/Excluded	Preferred
ANTIFUNGAL AGENTS	TOLSURA, VIVJOA	FLUCONAZOLE
ANTIHYPERGLY, (DPP-4) INHIBITOR & BIGUANIDE COMB.	JENTADUETO, JENTADUETO XR, ALOGLIPTIN-METFORMIN, KAZANO, ZITUVIMET XR, SITAGLIPTIN-METFORMIN, ZITUVIMET	JANUMET, JANUMET XR
ANTIHYPERGLYCEMIC-SOD/GLUC COTransport2(SGLT2)INHIB	STEGLATRO, INPEFA, DAPAGLIFLOZIN, BRENZAVVY, FARXIGA, INVOKANA	JARDIANCE
ANTIHYPERGLYCEMIC, DPP-4 INHIBITORS	SITAGLIPTIN, TRADJENTA, ALOGLIPTIN, ZITUVIO, NESINA	JANUVIA, SAXAGLIPTIN
ANTIHYPERGLYCEMIC, SGLT-2 & DPP-4 INHIBITOR COMB.	STEGLUJAN	GLYXAMBI
ANTIHYPERGLYCEMIC, BIGUANIDE TYPE(NON-SULFONYLUREA)	METFORMIN ER OSMOTIC, METFORMIN ER GASTRIC	METFORMIN HCL ER, METFORMIN HCL TAB (500 MG OR 1000 MG)
ANTIHYPERGLYCEMIC-SGLT2 INHIBITOR & BIGUANIDE COMB	XIGDUO XR, INVOKAMET, INVOKAMET XR, SEGLUROMET, DAPAGLIFLOZIN-METFORMIN ER	SYNJARDY, SYNJARDY XR
ANTIHYPERLIPIDEMIC - HMG COA REDUCTASE INHIBITORS	ATORVALIQ, CRESTOR, ZYPITAMAG, LIVALO	ROSUVASTATIN, ATORVASTATIN
ANTIHYPERLIPIDEMIC - PCSK9 INHIBITORS	PRALUENT	REPATHA
ANTIHYPERTENSIVES, ACE INHIBITORS	ZESTRIL	LISINOPRIL
ANTIHYPERTENSIVES, ANGIOTENSIN RECEPTOR ANTAGONIST	EDARBI	LOSARTAN POTASSIUM, VALSARTAN
ANTI-INFLAMMATORY/ANTIARTHRITIC AGENTS, MISC.	VISCO-3, SYNOJOYNT, SUPARTZ FX, GELSYN-3, GENVISC 850, GEL-ONE, TRIVISC, SYNVIS, HYALGAN, SYNVIS-ONE, TRILURON, HYMOVIS, DUROLANE	ORTHOVISC, EUFLEXXA, MONOVISC
ANTIMALARIAL DRUGS	ARAKODA, DARAPRIM	HYDROXYCHLOROQUINE SULFATE
ANTIMIGRAINE PREPARATIONS	ZAVZPRET, TOSYMRA, ELYXYB, ONZETRA XSAIL, CAMBIA, ZEMBRACE, RELPAX	AIMOVIG, AJOVY, ZOMIG, EMGALITY, SUMATRIPTAN, RIZATRIPTAN, REYVOW, UBRELVY, QULIPTA, NURTEC ODT
ANTI-NARCOLEPSY & ANTI-CATAPEXSY, SEDATIVE-TYPE AGT	XYREM, LUMRYZ STARTER PACK, XYWAV, LUMRYZ	SODIUM OXYBATE (HIKMA)
ANTINEOPLAST EGF RECEPTOR BLOCKER RCMB MC ANTIBODY	KANJINTI, HERZUMA, ONTRUZANT, HERCESSI	OGIVRI, TRAZIMERA, PHESGO, VECTIBIX
ANTINEOPLASTIC - BRAF KINASE INHIBITORS	BRAFTOVI, OJEMDA	TAFINLAR, ZELBORAF
ANTINEOPLASTIC - MEK1 AND MEK2 KINASE INHIBITORS	MEKTOVI, GOMEKLI	MEKINIST, COTELLIC, KOSELUGO
ANTINEOPLASTIC LHRH(GNRH) AGONIST,PITUITARY SUPPR.	CAMCEVI, TRELSTAR	ELIGARD, LUPRON DEPOT, LEUPROLIDE DEPOT
ANTINEOPLASTIC LHRH(GNRH) ANTAGONIST,PITUIT.SUPPRS	ORGOVYX	FIRMAGON
ANTINEOPLASTIC SYSTEMIC ENZYME INHIBITORS	IMKELDI, NINLARO, RYDAPT, EXKIVITY, JAYPIRCA, TABRECTA, RUBRACA, NEXAVAR, VANFLYTA, VERZENIO, TRUQAP, TASIGNA	ALUNBRIG, IMBRUVICA, XALKORI, VITRAKVI, ROZLYTREK, TALZENNA, IBRANCE, BOSULIF, GAVRETO, AUGTYRO, ALECENSA, BRUKINSA, CALQUENCE, LENVIMA, LORBRENA, ZYKADIA, PIQRAY, LYNPARZA, STIVARGA, CABOMETYX, TAGRISSO, VIZIMPRO, SCSEMBLIX, KISQALI, INLYTA, ZEJULA, FRUZAQLA
ANTIPSYCHOTICS, ATYP, D2 PARTIAL AGONIST/5HT MIXED	OPIPZA, ABILIFY MYCITE, REXULTI	ABILIFY MAINTENA, ARISTADA INITIO, ABILIFY ASIMTUFII, ARISTADA, ARIPIIPRAZOLE
ANTIPSYCHOTICS, ATYPICAL, DOPAMINE, & SEROTONIN ANTAG	SECUADO, FANAPT, INVEGA SUSTENNA, INVEGA HAFYERA, INVEGA TRINZA, ZYPREXA, CAPLYTA, LYBALVI, LATUDA	PERSERIS, RYKINDO, ERZOFRI, RISPERIDONE, QUETIAPINE, PALIPERIDONE ER

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Drug Class	Non-Preferred/Excluded	Preferred
ANTIRETROVIRAL – CAPSID INHIBITORS		YEZTUGO, SUNLECA
ANTIVIRALS, GENERAL	XOFLUZA, TAMIFLU, VALTREX	OSELTAMIVIR PHOSPHATE, VALACYCLOVIR
ARTV CMB NUCLEOSIDE, NUCLEOTIDE, &NON-NUCLEOSIDE RTI	SYMFI, SYMFI LO	ODEFSEY, EFAVIRENZ/LAMIVUDINE/TENOFOVIR TAB
BETA-ADRENERGIC AGENTS, INHALED, SHORT ACTING	XOPENEX HFA, VENTOLIN HFA, PROAIR RESPICLICK	ALBUTEROL SULFATE HFA, LEVALBUTEROL TARTRATE HFA, ALBUTEROL SULFATE
BETA-ADRENERGIC AND ANTICHOLINERGIC COMBINATIONS	DUAKLIR PRESSAIR, BEVESPI AEROSPHERE	ANORO ELLIPTA, COMBIVENT RESPIMAT, STIOLTO RESPIMAT, IPRATROPIUM/ALBUTEROL
BETA-ADRENERGIC AND GLUCOCORTICOID COMBINATIONS	SYMBICORT, AIRDUO DIGIHALER, FLUTICASONE-SALMETEROL HFA, AIRDUO RESPICLICK, FLUTICASONE-VILANTEROL, AIRSUPRA	BUDESONIDE-FORMOTEROL FUMARATE, FLUTICASONE-SALMETEROL, BREO ELLIPTA, DULERA, ADVAIR HFA, BREYNA
BETA-ADRENERGIC BLOCKING AGENTS	HEMANGEOL, TENORMIN, BYSTOLIC	METOPROLOL SUCCINATE, METOPROLOL TARTRATE, PROPRANOLOL HCL, ATENOLOL
BLOOD SUGAR DIAGNOSTICS	CONTOUR TEST STRIP, CONTOUR NEXT TEST STRIP, GLUCOCARD EXPRESSION, ACCU-CHEK SMARTVIEW, ACCU-CHEK AVIVA PLUS, ACCU-CHEK GUIDE TEST STRIP, GLUCOCARD SHINE, PRECISION XTRA, GLUCOCARD VITAL SENSOR, CONTOUR PLUS TEST STRIP, ONETOUCH VERIO TEST STRIP, ONETOUCH ULTRA TEST STRIP	FREESTYLE TEST STRIP, FREESTYLE LITE TEST STRIP, FREESTYLE INSULINX, FREESTYLE PRECISION NEO TEST STRIP, TRUE METRIX GLUCOSE TEST STRIP
CALCIUM CHANNEL BLOCKING AGENTS	NORLIQVA, CONJUPRI, TIAZAC	AMLODIPINE BESYLATE, DILTIAZEM 24HR ER CAP, NIFEDIPINE ER
CONTRACEPTIVES, INTRAVAGINAL, SYSTEMIC	NUVARING	ETONOGESTREL-ETHINYL ESTRADIOL, HALOETTE
CONTRACEPTIVES, ORAL	LO LOESTRIN FE, YAZ, SAFYRAL, BEYAZ, YASMIN 28, BALCOLTRA	NIKKI, HAILEY 24 FE, SPRINTec, ZOVIA 1-35, SLYND, NORETHINDRONE
DIRECT FACTOR XA INHIBITORS	SAVAYSA, RIVAROXABAN	XARELTO, ELIQUIS
DRUGS TO TREAT HEREDITARY TYROSINEMIA	NITYR	ORFADIN, NITISINONE
ELECTROLYTE DEPLETERS	VELTASSA, FOSRENOL, RENVELA	LOKELMA, SEVELAMER, LANTHANUM, CALCIUM ACETATE
ESTROGENIC AGENTS	ESTROGEL, CLIMARA, CLIMARA PRO, EVAMIST, ELESTRIN, DIVIGEL	COMBIPATCH, PREMARIN, PREMPRO, PREMPHASE, ESTRADIOL (ONCE WEEKLY), ESTRADIOL (TWICE WEEKLY)
EYE ANTIINFLAMMATORY AGENTS	ILEVRO, PRED MILD, BROMSITE, FLAREX, MAXIDEX, FML FORTE, EYSUVIS, ACUVAIL, PROLENSA, NEVANAC, ALREX, BROMFENAC SODIUM, INVELTYS. LOTEMAX DROPS	LOTEMAX OINTMENT, LOTEMAX SM, PREDNISOLONE ACETATE, LOTEPREDNOL DROPS
FACTOR IX PREPARATIONS	IDELVION	REBINYN, BENEFIX, ALPROLIX, RIXUBIS, IXINITY
FOLIC ACID PREPARATIONS	DEPLIN FC, DEPLIN-ALGAL OIL	FOLIC ACID
FOLLICLE-STIMULATING HORMONE (FSH)	FOLLISTIM AQ	GONAL-F RFF REDI-JECT, GONAL-F, GONAL-F RFF
GLUCOCORTICIDS	HEMADY, RAYOS, UCERIS	METHYLPREDNISOLONE, PREDNISONE, DEXAMETHASONE
GLUCOCORTICIDS, ORALLY INHALED	PULMICORT FLEXHALER, ALVESCO	FLUTICASONE PROPIONATE HFA, ASMANEX, ARNUITY ELLIPTA, FLUTICASONE PROPIONATE, ASMANEX HFA, QVAR REDIHALER

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Drug Class	Non-Preferred/Excluded	Preferred
GROWTH HORMONES	HUMATROPE, NGENLA, NORDITROPIN FLEXPRO, NUTROPIN AQ NUSPIN, ZOMACTON	OMNITROPE, SKYTROFA, GENOTROPIN, SOGROYA
HEMATINICS, OTHER	MIRCERA, ARANESP, EPOGEN	PROCRIT, RETACRIT
HEP C VIRUS - NS5A & NS5B POLYMERASE INHIB. COMBO.	LEDIPASVIR-SOFOSBUVIR, SOFOSBUVIR- VELPATASVIR	HARVONI, EPCLUSA
HEPATITIS C VIRUS- NS5A AND NS3/4A INHIBITOR COMB	ZEPATIER	MAVYRET
HUMAN CHORIONIC GONADOTROPIN (HCG)	PREGNYL, CHORIONIC GONADOTROPIN	OVIDREL, NOVAREL
HUMAN MONOCLONAL ANTIBODY COMPLEMENT(C5) INHIBITOR	ULTOMIRIS, SOLIRIS, TAVNEOS, ZILBRYSQ	FABHALTA, VOYDEYA
INSULINS	AFREZZA, FIASP, INSULIN ASPART, NOVOLOG, INSULIN GLARGINE (300/ML (3) PEN), NOVOLIN, TOUJEO, ADMELOG, APIDRA, LANTUS, REZVOGLAR, BASAGLAR, INSULIN GLARGINE (100/ML VIAL)	HUMALOG, HUMULIN, LYUMJEV, INSULIN LISPRO, TRESIBA, INSULIN DEGLUDEC, INSULIN GLARGINE-YFGN (100/ML (3) PEN), SEMGLEE, INSULIN GLARGINE-YFGN (100/ML VIAL)
LAXATIVES AND CATHARTICS	SUPREP, KRISTALOSE, AMITIZA	SOD SULF-POTASS SULF-MAG SULF, LUBIPROSTONE, GAVILYTE-N, PLENVU, SUTAB
LEUKOCYTE (WBC) STIMULANTS	UDENYCA AUTOINJECTOR, STIMUFEND, FULPHILA, UDENYCA ONBODY, FYLNETRA, NYVEPRIA, UDENYCA, GRANIX, RELEUKO, NEUPOGEN, NYPOZI	NEULASTA, ZIEXTENZO, NEULASTA ONPRO, NIVESTYM, ZARXIO
LHRH(GNRH) ANTAGONIST, PITUITARY SUPPRESSANT AGENTS	FYREMADEL, GANIRELIX, CETRORELIX	CETROTIDE, ORILISSA
LHRH(GNRH)AGNST PIT.SUP-CENTRAL PRECOCIOUS PUBERTY	SUPPRELIN LA, FENSOLVI	LUPRON DEPOT-PED, TRIPTODUR
LIPOTROPICS	TRICOR, ICASAPENT ETHYL, ZETIA	VASCEPA, EZETIMIBE, FENOFIBRATE TAB (54MG, 135MG, OR 160MG)
LOOP DIURETICS	FUROSCIX, SOANZ. LASIX ONYU	FUROSEMIDE, TORSEMIDE, BUMETANIDE
MACROLIDES	DIFICID	AZITHROMYCIN
MIOTICS/OTHER INTRAOC. PRESSURE REDUCERS	LUMIGAN, COMBIGAN, ALPHAGAN P, XELPROS, BETIMOL, IYUZEH, COSOPT PF, ZIOPTAN, ROCKLATAN, BETOPTIC S, VYZULTA, SIMBRINZA, RHOPRESSA	LATANOPROST, BRIMONIDINE 0.15% DROP, TIMOLOL 0.5% DROP
NASAL ANTI-INFLAMMATORY STEROIDS	OMNARIS, QNASL CHILDREN, QNASL, XHANCE	FLUTICASONE PROPIONATE, MOMETASONE FUROATE
NITROFURAN DERIVATIVES	MACROBID	NITROFURANTOIN MONO-MACRO
NOREPINEPHRINE AND DOPAMINE REUPTAKE INHIB (NDRIS)	WELLBUTRIN XL, APLENZIN	BUPROPION XL
NSAIDS, CYCLOOXYGENASE 2 INHIBITOR - TYPE	CELEBREX	CELECOXIB
NSAIDS, CYCLOOXYGENASE INHIBITOR- TYPE	RELAFEN DS, NAPRELAN	DICLOFENAC SODIUM, MELOXICAM, IBUPROFEN, NAPROXEN
OPHTHALMIC ANTIBIOTICS	BESIVANCE	AZASITE, OFLOXACIN, CIPROFLOXACIN
OPHTHALMIC ANTI-INFLAMMATORY IMMUNOMODULATOR-TYPE	XIIDRA, VERKAZIA, VEVYE	RESTASIS, CEQUA, RESTASIS MULTIDOSE
PANCREATIC ENZYMES	PANCREAZE, PERTZYE	ZENPEP, CREON, VIOKACE
PLASMA KALLIKREIN INHIBITORS	ORLADEYO, EKTERLY	TAKHZYRO
PLATELET AGGREGATION INHIBITORS	ZONTIVITY, BRILINTA, EFFIENT	CLOPIDOGREL, ASPIRIN EC, TICAGRELOR, PRASUGREL
POTASSIUM SPARING DIURETICS	CAROSPIR, KERENDIA	SPIRONOLACTONE, EPLERENONE
PPAR AGONIST	LIVDELZI	IQIRVO

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Drug Class	Non-Preferred/Excluded	Preferred
PREGNANCY FACILITATING/MAINTAINING AGENT,HORMONAL	CRINONE	ENDOMETRIN
PROGESTATIONAL AGENTS	CRINONE, PROMETRIUM	PROGESTERONE, MEDROXYPROGESTERONE
PROTON-PUMP INHIBITORS	PROTONIX, NEXIUM	OMEPRAZOLE, PANTOPRAZOLE SODIUM
PULMONARY ANTIHYPERTENSIVES, PROSTACYCLIN-TYPE	TYVASO DPI, ORENITRAM ER	UPTRAVI, TREPROSTINIL, YUTREPIA
RECTAL/LOWER BOWEL PREP., GLUCOCORT. (NON-HEMORR)	CORTIFOAM, UCERIS	HYDROCORTISONE RECTAL
RIFAMYCINS AND RELATED DERIVATIVE ANTIBIOTICS	AEMCOLO, XIFAXAN (200 MG TAB)	XIFAXAN (550 MG TAB)
SEDATIVE-HYPNOTICS, NON-BARBITURATE	BELSOMRA, QUUVIVIQ	ZOLPIDEM TARTRATE TAB (5 MG OR 10 MG), DAYVIGO, ESZOPICLONE
SELECTIVE SEROTONIN REUPTAKE INHIBITOR (SSRIS)	ZOLOFT, CITALOPRAM HBR (30 MG CAP), FLUOXETINE HCL (60 MG TAB)	FLUOXETINE HCL CAP (20MG OR 40 MG CAP), SERTRALINE HCL, ESCITALOPRAM OXALATE, CITALOPRAM HBR TAB (10 MG, 20MG, OR 40 MG)
SEROTONIN-NOREPINEPHRINE REUPTAKE-INHIB (SNRIS)	FETZIMA, PRISTIQ, DRIZALMA SPRINKLE	DULOXETINE HCL, VENLAFAXINE HCL ER
SKELETAL MUSCLE RELAXANTS	LYVISPAH, ZANAFLEX, SOMA	CYCLOBENZAPRINE HCL, METHOCARBAMOL, TIZANIDINE HCL, BACLOFEN
SOMATOSTATIC AGENTS	LANREOTIDE ACETATE, SANDOSTATIN LAR DEPOT, SIGNIFOR LAR, MYCAPSSA, PALSONIFY	SOMATULINE DEPOT, OCTREOTIDE ACETATE, SIGNIFOR
TETRACYCLINES	NUZYRA, EMROSI, ORACEA, DORYX MPC, SEYSARA, TARGADOX	DOXYCYCLINE MONOHYDRATE, DOXYCYCLINE HYCLATE
THYROID HORMONES	TIROSINT-SOL, THYQUIDITY, TIROSINT, LEVOXYL, SYNTHROID	LEVOTHYROXINE SODIUM, ARMOUR THYROID, NP THYROID
TOPICAL ANTIBIOTICS	ZILXI, AMZEEQ, XEPI	MUPIROCIN
TOPICAL ANTIFUNGALS	NAFTIN, JUBLIA	KETOCONAZOLE, NYSTATIN
TOPICAL ANTI-INFLAMMATORY, NSAIDS	LICART	DICLOFENAC SODIUM, FLECTOR
TOPICAL LOCAL ANESTHETICS	ZTLIDO	LIDOCAINE
TX FOR ATTENTION DEFICIT-HYPERACT(ADHD)/NARCOLEPSY	AZSTARYS, JORNAY PM, RELEXXII, COTEMPLA XR-ODT, METHYLPHENIDATE ER TAB (45 MG, 63 MG, OR 72 MG)	QUILLIVANT XR, METHYLPHENIDATE ER TAB (18 MG, 27 MG, 36 MG, OR 54 MG), QUILLICHEW ER, DEXMETHYLPHENIDATE
URINARY TRACT ANTISPASMODIC/ANTIINCONTINENCE AGENT	TOVIAZ	OXYBUTYNIN CHLORIDE, FESOTERODINE ER TAB, GELNIQUE
VAGINAL ESTROGEN PREPARATIONS	FEMRING	ESTRADIOL, ESTRING, PREMARIN

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Indication Based Management

Indication	Non-Preferred/Excluded Medications	Preferred Alternative Medications
Rheumatoid Arthritis	CIMZIA ² , ORENCIA ² , OLUMIANT ² , SIMPONI ² , KEVZARA ² , KINERET ² , XELJANZ ³ , XELJANZ XR ³ , ACTEMRA ³	ENBREL, HUMIRA, HADLIMA, RINVOQ, YUFLYMA, TYENNE ¹
Juvenile Idiopathic Arthritis	ORENCIA ² , XELJANZ ³ , XELJANZ XR ³ , ACTEMRA ³	ENBREL, HUMIRA, HADLIMA, RINVOQ, YUFLYMA, TYENNE ¹
Psoriatic Arthritis	SIMPONI ² , CIMZIA ² , ORENCIA ² , BIMZELX ² , COSENTYX ³ , SELARSDI ³ , STELARA ³ , TREMFYA ³ , XELJANZ ³ , XELJANZ XR ³	ENBREL, HUMIRA, HADLIMA, YUFLYMA, OTEZLA, YESINTEK, IMULDOSA, STEQEYMA, TALTZ, RINVOQ, SKYRIZI
Ankylosing Spondylitis	SIMPONI ² , CIMZIA ² , BIMZELX ² , COSENTYX ³ , XELJANZ ³ , XELJANZ XR ³	ENBREL, HUMIRA, HADLIMA, YUFLYMA, RINVOQ, TALTZ
Psoriasis	CIMZIA ² , ILUMYA ² , SILIQ ³ , BIMZELX ² , TREMFYA ³ , SELARSDI ³ , STELARA ³ , COSENTYX ³	ENBREL, HUMIRA, HADLIMA, YUFLYMA, OTEZLA, SKYRIZI, YESINTEK, IMULDOSA, STEQEYMA, TALTZ, SOTYKTU
Crohn's Disease	CIMZIA ² , ENTYVIO SC ² , SELARSDI ³ , STELARA ³ , TREMFYA ³	HUMIRA, HADLIMA, OMVOH, YUFLYMA, YESINTEK, IMULDOSA, STEQEYMA, RINVOQ, SKYRIZI
Ulcerative Colitis	SIMPONI 100MG ¹ , ENTYVIO SC ² , OMVOH ² , VELSIPITY ³ , SELARSDI ³ , STELARA ³ , TREMFYA ³ , XELJANZ ³ , XELJANZ XR ³	HUMIRA, HADLIMA, YUFLYMA, YESINTEK, IMULDOSA, STEQEYMA, RINVOQ, SKYRIZI, ZEPOSIA ²
Non-Radiographic Axial Spondylarthritis	CIMZIA, BIMZELX, COSENTYX ³	RINVOQ, TALTZ
Hidradenitis Suppurativa	BIMZELX ¹ , COSENTYX ³	HUMIRA, HADLIMA, YUFLYMA

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. The list above is not inclusive of all biosimilar products. Any biosimilars not listed above are considered: Excluded or Requires step through THREE Preferred Biologics

¹Requires step through ONE Preferred Biologic

²Requires step through TWO Preferred Biologics

³Excluded or Requires step through THREE Preferred Biologics

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Excluded Medications/Products at a Glance

A	D3-50	LIPITOR	PROGRAF	URE-NA
ACCRUFER	DILANTIN	LUMIGAN	PULMICORT FLEXHALER	V
ACTEMRA	E	LYRICA	Q	VASHE
ADDERALL	EDARBI	M	QELBREE	VELPHORO
ADDERALL XR	EDARBYCLOR	MAGNESIUM	QSYMIA	VELTASSA
ADMELOG SOLOSTAR	ELITE-OB	MAGNESIUM OXIDE	QUVIVIQ	VENTOLIN HFA
ADVAIR DISKUS	ENTRESTO	MELATONIN	R	VEOZAH
ADZENYS XR-ODT	ESTROGEL	METHADOSE	RECTIV	VERZENIO
AIRSUPRA	EYSUVIS	MG-PLUS-PROTEIN	REFRESH TEARS	VEVYE
AKLIEF	F	MIEBO	REMODULIN	VICTOZA
ALLEGRA-D 24 HOUR	FARXIGA	MOTEGRITY	RETIN-A	VITAMIN B-12
ALPHAGAN P	FASENRA PEN	MUCINEX	REZVOGLAR KWIKPEN	VITAMIN D2
ALTRENO	FETZIMA	MULTAQ	RHOFADE	VITAMIN D3
ALVESCO	FIASP	N	RHOPRESSA	VITRON-C
ALVAIZ	FISH OIL OMEGA-3	NARCAN	RITUXAN	VOQUEZNA
AMZEEQ	FULPHILA	NEFFY	RYALTRIS	VTAMA
APTIOM	G	NEUPRO	S	VUMERITY
ARAZLO	GRANIX	NEXIUM	SELARSDI	VYVANSE
ATIVAN	H	NITROSTAT	SELZENTRY SOLN	VYZULTA
AURYXIA	HERZUMA	NORDITROPIN FLEXPRO	SENNA	W
AUVELITY	HYALGAN	NOVOLIN 70-30	SILIQ	WELLBUTRIN XL
AZO D-MANNOSE	I	NOVOLIN 70-30 FLEXPEN	SIMBRINZA	WINLEVI
AZSTARYS	IBSRELA	NOVOLIN N	SIMLANDI	X
B	IMVEXXY	NOVOLIN R	SPRAVATO	XELJANZ
B-12	INJECTAFER	NOVOLOG	SPRYCEL	XELJANZ XR
BETADINE	INTRAROSA	NOVOLOG FLEXPEN	STEGLATRO	XHANCE
BIJUVA	INVOKANA	NOVOLOG MIX 70-30 FLEXPEN	STELARA	XIGDUO XR
BRENZAVVY	IYUZEH	NUBEQA	SUBOXONE	XIIDRA
BRILINTA	J	NUCYNTA	SYMBICORT	XOFLUZA
BSS	JENTADUETO	NUVARING	SYNTHROID	XOPENEX HFA
C	JENTADUETO XR	O	T	XTAMPZA ER
CABTREO	JUBLIA	ONETOUCH	TAMIFLU	XYOSTED
CHORIONIC GONADOTROPIN	K	OPSUMIT	THEO-24	Y
CIPRO HC	KANJINTI	ORGOVYX	TIROSINT	YUSIMRY(CF) PEN
CLINPRO 5000	KAPSPARGO SPRINKLE	OXTELLAR XR	TIROSINT-SOL	Z
CLOMID	KERENDIA	P	TOUJEO MAX SOLOSTAR	ZAVZPRET
COMBIGAN	KLOR-CON	PATADAY ONCE DAILY RELIEF	TOUJEO SOLOSTAR	ZONISADE
CONCERTA	KONVOMEF	POLY-VI-SOL WITH IRON	TRADJENTA	ZORYVE
CONTRAVE	K-PHOS NEUTRAL	PRADAXA	TRANSDERM-SCOP	ZTLIDO
COSENTYX SENSOREADY (2 PENS)	L	PRALUENT PEN	TREMFYA	
COSENTYX SENSOREADY PEN	LANTUS	PREGNYL	TRI-LUMA	
COSENTYX UNOREADY PEN	LANTUS SOLOSTAR	PREVIDENT	TYRVAYA	
COTEMPLA XR-ODT	LATUDA	PREZCOBIX	TYVASO	
D	LEVOXYL	PROAIR RESPICLICK	U	
	LEXAPRO	PROCTOFOAM-HC	UNITHROID	

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