



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 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.

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

Cost for covered alternatives may vary.

bupropion xl	COTEMPLA XR-ODT	DYSPORT [PA]	fluoxetine hcl
bupirone hcl	CREON	E	fluticasone propionate
BYOOVIZ [PA]	CRINONE	EDARBI	fluticasone propionate hfa
C	cyclobenzaprine hcl	EDARBYCLOR	fluticasone-salmeterol
CABENUVA [PA]	CYCLOSET	ELEPSIA XR [ST]	folic acid
CABOMETYX [PA]	CYSTADANE	ELIGARD [PA]	FOLTX
calcitriol	D	ELIQUIS	FORFIVO XL
CAMBIA	DAYVIGO [ST]	ELOCTATE	FORTEO [PA]
CAPLYTA	DENAVIR	ELYXYB [ST]	FRAGMIN
CARAFATE	DEPLIN-ALGAL OIL	EMGALITY PEN [PA]	FREESTYLE LIBRE 14 DAY
CARBAGLU [PA]	DESCOVY	EMGALITY SYRINGE [PA]	READER
CAROSPIR [ST]	desvenlafaxine succinate er	EMPAVELI [PA]	FREESTYLE LIBRE 14 DAY
carvedilol	dexamethasone	EMVERM [PA]	SENSOR
cefazolin sodium	DEXCOM G6 RECEIVER	ENBREL [PA]	FREESTYLE LIBRE 2 READER
cefdinir	DEXCOM G6 SENSOR	ENBREL MINI [PA]	FREESTYLE LIBRE 2 SENSOR
celecoxib	DEXCOM G6 TRANSMITTER	ENBREL SURECLICK [PA]	FREESTYLE LIBRE 3 READER
cephalexin	DEXCOM G7 RECEIVER	ENSTILAR	FREESTYLE LIBRE 3 SENSOR
CEQUA	DEXCOM G7 SENSOR	ENTRESTO	FUROSCIX [ST]
CERDELGA [PA]	dexmethylphenidate hcl er	EPIDIOLEX [PA]	furosemide
CEREFOLIN NAC	dextroamphetamine-amphet er	epinephrine	FYCOMPA
CEREZYME [PA]	dextroamphetamine- amphetamine	EPIPEN 2-PAK	G
CETRAXAL	diazepam	EPIPEN JR 2-PAK	gabapentin
CETROTIDE	DICLEGIS	ERIVEDGE [PA]	GAVRETO [PA]
chlorhexidine gluconate	diclofenac sodium	erythromycin	GELNIQUE [ST]
chlorthalidone	dicyclomine hcl	escitalopram oxalate	GEMTESA
CIBINQO [PA]	DILANTIN	esomeprazole magnesium	GENOTROPIN [PA]
CIMDUO	diltiazem 24hr er (cd)	ESPEROCT	gentamicin sulfate
CIMERLI [PA]	divalproex sodium	estradiol	GENVOYA
cinacalcet hcl [pa]	DOPTelet [PA]	estradiol (twice weekly)	GLASSIA
CINRYZE [PA]	DORYX MPC [ST]	ESTRING	glimepiride
ciprofloxacin hcl	DOVATO	EUCRISA [ST]	glipizide
cialopram hbr	doxycycline hyclate	EUFLEXXA [PA]	glipizide er
CLENPIQ	doxycycline monohydrate	EYSUVIS	GONAL-F
clindamycin hcl	DROPLET GENTEEL LANCING DEVICE	ezetimibe	GONAL-F RFF
clindamycin phosphate	DROPLET LANCETS	F	GONAL-F RFF REDI-JECT
clobetasol propionate	DUAVEE	FABHALTA [PA]	GRALISE [ST]
clonazepam	DUJEXIS	FABIOR [ST]	GRASTEK
clonidine hcl	DULERA	famotidine	guanfacine hcl er
clopidogrel	duloxetine hcl	FASENRA [PA]	GVOKE
COMBIGAN	DUOBRII	FASENRA PEN [PA]	GVOKE HYPOPEN 1-PACK
COMBIPATCH	DUPIXENT PEN [PA]	fenofibrate	GVOKE HYPOPEN 2-PACK
COMBIVENT RESPIMAT	DUPIXENT SYRINGE [PA]	fentanyl [pa]	GVOKE PFS 1-PACK SYRINGE
COMETRIQ [PA]	DYANAVEL XR	FETZIMA	GVOKE PFS 2-PACK SYRINGE
CORLANOR	DYMISTA	finasteride	H
CORTROPHIN [PA]		FLECTOR [PA]	HADLIMA [PA]
COTELLIC [PA]		fluconazole	HADLIMA PUSHTOUCH [PA]
			HADLIMA(CF) [PA]

Cost for covered alternatives may vary.

HADLIMA(CF) PUSHTOUCH [PA]	hyoscyamine sulfate	KISQALI FEMARA CO-PACK [PA]	LYUMJEV KWIKPEN U-100
HAEGARDA [PA]	HYRIMOZ(CF) [PA]	KITABIS PAK	LYUMJEV KWIKPEN U-200
haloperidol	HYRIMOZ(CF) PEDIATRIC CROHN'S [PA]	KLOXXADO	LYUMJEV TEMPO PEN U-100
haloperidol lactate	HYRIMOZ(CF) PEN [PA]	KOGENATE FS	M
HEMANGEOL	HYRIMOZ(CF) PEN CROHN-UC START [PA]	KOVALTRY	MAVENCLAD [PA]
heparin sodium	HYRIMOZ(CF) PEN PSORIASIS [PA]	KYLEENA	MAVYRET [PA]
heparin sodium-d5w		L	MAYZENT [PA]
HORIZANT [ST]	I	labetalol hcl	medroxyprogesterone acetate
HUMALOG	IBRANCE [PA]	lactulose	MEKINIST [PA]
HUMALOG JUNIOR KWIKPEN	ibuprofen	lamotrigine	meloxicam
HUMALOG KWIKPEN U-100	ILET INFUSION KIT-INSET	LANTUS	METANX
HUMALOG KWIKPEN U-200	ILET INFUSION-CONTACT DETACH	LANTUS SOLOSTAR	metformin hcl
HUMALOG MIX 50-50	ILET INSULIN PUMP	Latanoprost	metformin hcl er
HUMALOG MIX 50-50 KWIKPEN	ILEVRO	LENVIMA [PA]	methadone hcl
HUMALOG MIX 75-25	IMBRUVICA [PA]	levetiracetam	methocarbamol
HUMALOG MIX 75-25 KWIKPEN	INBRIJA [PA]	levocetirizine dihydrochloride	methotrexate
HUMALOG TEMPO PEN U-100	INCONTROL PEN NEEDLE	levofloxacin	methylphenidate er
HUMIRA [PA]	INCRUSE ELLIPTA	levothyroxine sodium	methylphenidate hcl
HUMIRA PEN [PA]	INFLECTRA [PA]	lidocaine	methylprednisolone
HUMIRA(CF) [PA]	INLYTA [PA]	lidocaine-prilocaine	metoprolol succinate
HUMIRA(CF) PEDIATRIC CROHN'S [PA]	insulin lispro	LINZESS	metoprolol tartrate
HUMIRA(CF) PEN [PA]	insulin lispro kwikpen u-100	lisdexamphetamine dimesylate	metronidazole
HUMIRA(CF) PEN CROHN'S-UC-HS [PA]	INTRAROSA	lisinopril	MICROLET
HUMIRA(CF) PEN PEDIATRIC UC [PA]	ipratropium bromide	lisinopril-hydrochlorothiazide	MICROLET 2
HUMIRA(CF) PEN PSOR-UV-ADOL HS [PA]	ipratropium-albuterol	LIVALO	MICROLET NEXT LANCING DEVICE
HUMULIN 70/30 KWIKPEN	IXINITY	LO LOESTRIN FE	MINIMED 630G
HUMULIN 70-30	J	LODOCOCO [ST]	MINIMED 770G
HUMULIN N	JAKAFI [PA]	lorazepam	MINIMED 780G
HUMULIN N KWIKPEN	JANUMET [ST]	LORBRENA [PA]	MINIMED MIO ADVANCE
HUMULIN R	JANUMET XR [ST]	LOREEV XR	MINIMED QUICK SET
HUMULIN R U-500	JANUVIA [ST]	losartan potassium	MINIMED SILHOUETTE
HUMULIN R U-500 KWIKPEN	JARDIANCE	losartan-hydrochlorothiazide	MINIMED SURE T
hydralazine hcl	JIVI	LOTEMAX	MIRENA
hydrochlorothiazide	JUBLIA [PA]	LOTEMAX SM	mirtazapine
hydrocodone-acetaminophen	JULUCA	LUCEMYRA	MIRVASO
hydrocortisone	JYNARQUE [PA]	LUMAKRAS [PA]	MONOFERRIC
hydromorphone hcl	K	LUMIGAN	MONOVISC [PA]
hydroxychloroquine sulfate	KANJINTI [PA]	LUMRYZ [PA]	montelukast sodium
hydroxyzine hcl	KERASTAT [PA]	LUPRON DEPOT [PA]	morphine sulfate
hydroxyzine pamoate	KERENDIA	LUPRON DEPOT-PED [PA]	morphine sulfate [pa]
	KESIMPTA PEN [PA]	LYBALVI	morphine sulfate er
	ketoconazole	LYNPARZA [PA]	MOUNJARO [PA]
	ketorolac tromethamine	LYUMJEV	MOVANTIK
	KISQALI [PA]		MUGARD
			MULTAQ

Cost for covered alternatives may vary.

mupirocin	ODEFSEY	oseltamivir phosphate	PROLASTIN C
MUSE	ODOMZO [PA]	OSPHENA	PROLENSA
MVASI [PA]	ofloxacin	OTEZLA [PA]	PROMACTA [PA]
MYFEMBREE [PA]	olanzapine	OTOVEL	promethazine hcl
MYRBETRIQ	olmesartan medoxomil	OVIDREL	promethazine-dm
N	OMECLAMOX-PAK	oxcarbazepine	propranolol hcl
NAFTIN	omeprazole	OXTELLAR XR	PYLERA
naltrexone hcl	OMNIPOD 5 G6 INTRO KIT (GEN 5)	oxybutynin chloride er	Q
NAMZARIC	OMNIPOD 5 G6 PODS (GEN 5)	oxycodone hcl	QBREXZA
naproxen	OMNIPOD CLASSIC PODS (GEN 3)	oxycodone-acetaminophen	QNASL
NASCOBAL	OMNIPOD DASH INTRO KIT (GEN 4)	OXYCONTIN	QNASL CHILDREN
NATAZIA	OMNIPOD DASH PODS (GEN 4)	P	QUDEXY XR [ST]
NATESTO	OMNIPOD GO PODS	pantoprazole sodium	quetiapine fumarate
NAYZILAM	OMNITROPE [PA]	PARADIGM	QUILLICHEW ER [ST]
NEEVODHA	ondansetron hcl	paroxetine hcl	QUILLIVANT XR [ST]
NEULASTA [PA]	ondansetron odt	PAXLOVID	QULIPTA [PA]
NEULASTA ONPRO [PA]	ONETOUCH DELICA PLUS LANCET	PEN NEEDLE	QVAR REDIHALER
NEUPRO	ONETOUCH ULTRA TEST STRIP	PEN NEEDLES	R
NEXAVAR [PA]	ONETOUCH ULTRA2	PENTIPS	RAGWITEK
NEXLETOL [PA]	ONETOUCH VERIO FLEX METER	PERFOROMIST	RASUVO [ST]
NEXLIZET [PA]	ONETOUCH VERIO REFLECT METER	PERSERIS	RAYALDEE
NEXTSTELLIS	ONETOUCH VERIO TEST STRIP	PHEBURANE [PA]	REBIF [PA]
nifedipine er	ONEXTON	phenazopyridine hcl	REBIF REBIDOSE [PA]
nitrofurantoin mono-macro	OPVEE	phentermine hcl	REBINYN
NITYR	ORALAIR	phenylephrine hcl-0.9% nacl	RECTIV
NIVESTYM [PA]	ORAPEUTIC	PHESGO [PA]	RELAFEN DS [ST]
NOCDURNA	ORENITRAM ER [PA]	pioglitazone hcl	RELISTOR [PA]
NORLIQVA [ST]	ORENITRAM MONTH 1 TITRATION KT [PA]	PIQRAY [PA]	RENFLEXIS [PA]
nortriptyline hcl	ORENITRAM MONTH 2 TITRATION KT [PA]	PLEGRIDY [PA]	REPATHA PUSHTRONEX [PA]
NOURIANZ	ORENITRAM MONTH 3 TITRATION KT [PA]	PLEGRIDY PEN [PA]	REPATHA SURECLICK [PA]
NOVAREL	ORFADIN [PA]	polymyxin b sul-trimethoprim	REPATHA SYRINGE [PA]
NOVOEIGHT	ORGOVYX [PA]	PONVORY [PA]	RESTASIS
np thyroid	ORIAHNN [PA]	potassium chloride	RESTASIS MULTIDOSE
NUCALA [PA]	ORILISSA [PA]	pravastatin sodium	RETACRIT [PA]
NUDEXTA [PA]	ORLADEYO [PA]	prazosin hcl	RETIN-A MICRO PUMP
NURTEC ODT [PA]	ORTHOVISC [PA]	prednisolone acetate	REVLIMID [PA]
NUZYRA	ORTIKOS	prednisone	REXULTI
nystatin		pregabalin	REYVOW [PA]
O		PREMARIN	RHOPRESSA
OB COMPLETE		PREMPHASE	RINVOQ [PA]
OB COMPLETE ONE		PREMPRO	risperidone
OB COMPLETE PETITE		PREZISTA	RIXUBIS
OB COMPLETE PREMIER		PROAIR RESPICLICK	rizatriptan
OB COMPLETE WITH DHA		PROCTOFOAM-HC	ROCKLATAN [ST]
OCREVUS [PA]		progesterone	ropinirole hcl
ODACTRA			rosuvastatin calcium

Cost for covered alternatives may vary.

ROZLYTREK [PA]	sulfamethoxazole-trimethoprim	TOSYMRA [ST]	valsartan
RUCONEST [PA]	sumatriptan succinate	TOUJEO MAX SOLOSTAR	VALTOCO
RUXIENCE [PA]	SUNOSI [PA]	TOUJEO SOLOSTAR	VARUBI
RYKINDO	SUPREP	tramadol hcl	VASCEPA
RYTARY	SUTAB	TRAZIMERA [PA]	VELPHORO
S	SYMFI	trazodone hcl	VELTASSA [PA]
SANCUSO	SYMFI LO	TRELEGY ELLIPTA	VEMLIDY
SAVELLA	SYMPAZAN [PA]	TREMFYA [PA]	venlafaxine hcl er
SCEMBLIX [PA]	SYMPROIC	tretinoin	VENTOLIN HFA
SECUADO	SYMTUZA	triamcinolone acetonide	VEREGEN [ST]
SEGLUROMET	SYNJARDY	triamterene-hydrochlorothiazid	VERQUVO
SEREVENT DISKUS	SYNJARDY XR	TRIPTODUR [PA]	V-GO 20
sertraline hcl	T	TRIUMEQ	V-GO 30
SEVENFACT	TACLONEX	TRIUMEQ PD	V-GO 40
SEYSARA [ST]	tacrolimus	TROKENDI XR [ST]	VIBERZI
SFROWASA	TADLIQ [ST]	TRUE METRIX AIR GLUCOSE METER	VIOKACE
sildenafil citrate	TAFINLAR [PA]	TRUE METRIX BLOOD GLUCOSE MTR	vitamin d2
SIMBRINZA	TAGRISSO [PA]	TRUE METRIX GLUCOSE TEST STRIP	VITRAKVI [PA]
SIMPONI ARIA [PA]	TAKHZYRO [PA]	TRUEPLUS INSULIN SYRINGE	VIVITROL
simvastatin	TALICIA	TRUEPLUS PEN NEEDLE	VIZIMPRO [PA]
SIVEXTRO	TALTZ AUTOINJECTOR (2 PACK) [PA]	TRULANCE	VRAYLAR
SKYLA	TALTZ AUTOINJECTOR (3 PACK) [PA]	TRULICITY [PA]	VUMERITY [PA]
SKYRIZI [PA]	TALTZ AUTOINJECTOR [PA]	TWIRLA	VYVGART HYTRULO [PA]
SKYRIZI ON-BODY [PA]	TALTZ SYRINGE [PA]	TYMLOS [PA]	VYZULTA
SKYRIZI PEN [PA]	TALZENNA [PA]	TYRVAYA [ST]	W
SKYTROFA [PA]	tamsulosin hcl	U	WAKIX [PA]
SOGROYA [PA]	TARGADOX [ST]	UBRELVY [PA]	warfarin sodium
SOLIQUA 100-33 [ST]	TASCENSO ODT [PA]	UCERIS	WELLBUTRIN XL
SOLIRIS [PA]	TASIGNA [PA]	UDENYCA [PA]	WYNZORA
SOLOSEC	TAZORAC	UDENYCA AUTOINJECTOR [PA]	X
SOMATULINE DEPOT [PA]	TEGSEDI [PA]	UDENYCA ONBODY [PA]	XACIATO
SOMAVERT [PA]	TEKTRUNA [ST]	ULTOMIRIS [PA]	XADAGO [ST]
SOOLANTRA	TEMPO REFILL KIT (WITH GAUZE)	UNIFINE PENTIPS	XALKORI [PA]
spironolactone	TEMPO SMART BUTTON	UNIFINE PENTIPS MAXFLOW	XCOPRI
SPRIX	TEMPO WELCOME KIT	UNIFINE PENTIPS PLUS	XDEMVY [PA]
SPRYCEL [PA]	testosterone cypionate [pa]	UNIFINE PENTIPS PLUS MAXFLOW	XENLETA
STEGLATRO	TEZSPIRE [PA]	UNIFINE SAFECONTROL	XIFAXAN
STEGLUJAN [ST]	tizanidine hcl	UNIFINE ULTRA PEN NEEDLE	XOFLUZA
STELARA [PA]	TOBI PODHALER	UPTRAVI [PA]	XOLAIR [PA]
STIMUFEND [PA]	TOBRADEX	UZEDY	XTANDI [PA]
STIVARGA [PA]	TOBRADEX ST	V	XYWAV [PA]
STRENSIQ [PA]	TOLSURA	valacyclovir	Y
SUBLOCADE [PA]	topiramate		YUPELRI
sucalfate			Z
SUFLAVE			ZARXIO [PA]
			ZEGALOGUE AUTOINJECTOR

Cost for covered alternatives may vary.

ZEGALOGUE SYRINGE
ZEJULA [PA]
ZELBORAF [PA]
ZEMBRACE SYMTOUCH [ST]
ZENPEP

ZEPATIER [PA]
ZEPBOUND [PA]
ZERVIAE
ZIEXTENZO [PA]
ZILXI

ZIMHI
ZIRABEV [PA]
ZIRGAN
zolpidem tartrate
zomig [st]

ZTLIDO
ZUBSOLV
ZURZUVAE [PA]
ZYLET
ZYPITAMAG [ST]

Indication Based Management

Indication	Non-Preferred Medications	Preferred Alternatives
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

Cost for covered alternatives may vary.

Excluded Medications / Products at a Glance

A	DALIRESP DAYTRANA	LOKELMA LYRICA	PREZCOBIX PRISTIQ	TRADJENTA TRANSDERM-SCOP
ADDERALL ADDERALL XR	DEPO-PROVERA DEPO-TESTOSTERONE	LATUDA LASIX	PROGRAF PROZAC	TRESIBA TRESIBA FLEXTOUCH U-100
ADMELOG ADMELOG SOLOSTAR	DEXILANT DHIVY	LAMICTAL LUZU	PULMICORT FLEXHALER PREVDUO	TRESIBA FLEXTOUCH U-200 TRIJARDY XR
AKYNZEO AMITIZA	DILANTIN DIOVAN	M	PATADAY ONCE DAILY RELIEF POLY-VI-SOL WITH IRON	TRINATAL RX 1 TRINTELLIX
AMJEVITA(CF) AUTOINJECTOR	DIVIGEL	MELATONIN METHADOSE	PIFELTRO PROCRIT	TRUVADA TUDORZA PRESSAIR
ADVAIR DISKUS ALVESCO	E	MINOLIRA MUCINEX	Q	TOPROL XL TRI-LUMA
ALTRENO ACCRUFER	EFFER-K EPOGEN	MYDAYIS MIRCERA	QSYMIA	Thera-M
ALLEGRA-D 24 HOUR ARANESP	ESTRACE ESTROGEL	MAXIDEX MAGNESIUM OXIDE	R	U
B	ERLEADA ENTYVIO	N	REGULOID REMICADE	UNITHROID
B-12 BALCOLTRA	ESBRIET	NEORAL NEXIUM	REVELA REZVOGLAR KWIKPEN	V
BETADINE BEVESPI AEROSPHERE	F	NIFEREX NORDITROPIN FLEXPEN	ROZEREM ROZSET	VABYSMO VICTOZA 2-PAK
BEPREVE BREZTRI AEROSPHERE	FARXIGA FIASP	NOVOLIN 70-30 NOVOLIN 70-30 FLEXPEN	RYBELSUS RETIN-A	VICTOZA 3-PAK VIIBRYD
BRILINTA BYDUREON BCISE	FIASP FLEXTOUCH FOCALIN XR	NOVOLOG NOVOLOG FLEXPEN	REFRESH TEARS RIBOFLAVIN	VITAFOL ULTRA VITAMIN D2
BYSTOLIC	FUSION PLUS FISH OIL OMEGA-3	O	RISPERDAL CONSTA RHOFADE	VITAMIN D3 VITRON-C
C	G	NOVOLOG FLEXPEN NUCYNTA	S	VOLTAREN ARTHRITIS PAIN VOTRIENT
CELEBREX CELEXA	GLYXAMBI GRANIX	NUVARING NORVASC	SAMSCA SANDOSTATIN LAR DEPOT	VYVANSE VERZENIO
CIPRO HC COLCRYS	GENTEAL TEARS GELSYN-3	NARCAN NOVOLIN N	SAVAYSA SAXENDA	VITAMIN B-12 VIVELLE-DOT
CONCEPT DHA CONCERTA	I	NOVOLOG MIX 70-30 FLEXPEN	SEMGLEE (YFGN) SEMGLEE (YFGN) PEN	W
COPAXONE CORTEF	ICAR-C IMVEXXY	NOVOSEVEN RT NUBEQA	SENN SEROQUEL	WEGOXY
COSENTYX SENSOREADY (2 PENS) COSENTYX SENSOREADY PEN	INJECTAFER INVOKANA	P	SLOW-MAG SPIRIVA HANDIHALER	X
CYMBALTA CONTRAVE	INTEGRA PLUS	OFEV OPSUMIT	SPIRIVA RESPIMAT SPRAVATO	XALATAN XANAX
COSENTYX UNOREADY PEN CLINPRO 5000	K	OZEMPIC PENTASA	STIOLTO RESPIMAT SUBOXONE	XARELTO XELJANZ
CLIMARA PRO CLASSIC PRENATAL	KALBITOR KASPARGO SPRINKLE	PHEXXI PHOSLYRA	SUSVIMO SYMBICORT	XELJANZ XR XIGDUO XR
CHORIONIC GONADOTROPIN CYTOMEL	KATERZIA KLOR-CON	PRADAXA PRALUENT PEN	SYNTHROID SUPARTZ FX	XIIDRA XTAMPZA ER
CELLCEPT CORTISPORIN-TC	KONVOMEP K-PHOS NEUTRAL	PREGNYL PREVIDENT	T	Y
D	KLOR-CON 10 KORLYM	PREVIDENT 5000 PLUS PREVIDENT 5000 SENSITIVE	TAMIFLU THEO-24	YUSIMRY(CF) PEN
D3-50	L		TRACLEER	Z
	LEVEMIR LEVEMIR FLEXPEN			ZOLOFT ZYPREXA
	LEVOXYL LEXAPRO			ZITHROMAX ZIANA
	LIPITOR			

Cost for covered alternatives may vary.

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