



UnitedHealthcare Pharmacy
Clinical Pharmacy Programs

| | |
|------------------------------|---|
| Program Number | 2023 P 2080-30 |
| Program | New and Therapeutic Equivalent Medications - Excluded Drug |
| Medication/Therapeutic Class | Select Medications |
| P&T Approval Date | 5/2016 UM approval; 10/2016, 2/2017, 4/2017, 4/2018, 4/2019, 8/2019, 11/2019, 2/2020, 3/2020, 4/2020, 5/2020, 6/2020, 9/2020, 10/2020, 12/2020, 1/2021, 3/2021, 5/2021, 6/2021, 11/2021, 3/2022, 4/2022, 7/2022 (w/ 8/1/2022 effective date), 6/2022 (w/ 9/1/2022 effective date), 11/2022, 3/2023, 6/2023, 12/2023 |
| Effective Date | 1/1/2024 |

1. Background:

UnitedHealthcare benefit documents define Therapeutically Equivalent as when medications/products have essentially the same efficacy and adverse effect profile. This determination is made by the UnitedHealthcare Pharmacy and Therapeutics (P&T) Committee and is not intended to imply therapeutic equivalence as defined by the FDA Orange Book.

Benefit plan designs incorporate a clinical review for certain prescription medications if they are Therapeutically Equivalent, defined as similar outcomes and adverse events, to a covered medication or an over-the-counter medication. Members or providers may request a clinical review for these medications. This may include members with individual and small group, and members in some large groups due to state mandates or regulatory requirements. Coverage criteria will require history of failure, contraindication or intolerance to covered products or an over-the-counter medication. For additional information on coverage please see the Physician PDL posted to UHCProvider.com.

2. Coverage Criteria^{a, d}:

A. The following excluded medications may be approved based on the following criteria:

1. Approval Criteria

a. Submission of medical records documenting history of trial and failure, inadequate response, or intolerance to the Therapeutically Equivalent covered medications as listed below. (Document date and duration of trial):

| Excluded Medication | * | Must try all unless otherwise noted (up to a maximum of 5 alternatives) |
|---|--|---|
| Abilify Tablets | Brand & Generic Abilify and Abilify ODT | olanzapine (generic Zyprexa), quetiapine (generic Seroquel), risperidone (generic Risperdal), ziprasidone (generic Geodon) aripiprazole requests ONLY: approve for those at risk for metabolic syndrome or QT prolongation |
| Januvia ^d | Single Source Brand | MUST HAVE THREE MONTH TRIAL ^b : Nesina, Onglyza, Tradjenta |
| Janumet/ Janumet XR ^d | Single Source Brand | MUST TRY BOTH OF THE FOLLOWING FOR THREE MONTHS ^b : Kazano, or Kombiglyze XR, AND Jentadueto or Jentadueto XR |
| Myrbetriq | Single Source Brand | MUST TRY ONE OF THE FOLLOWING: solifenacin (generic Vesicare), trospium (generic Sanctura), tolterodine (generic Detrol), AND ONE OF THE FOLLOWING: Oxybutynin (generic Ditropan) or oxybutynin extended-release (generic Ditropan XL) |
| Noritrate | Single Source Brand | MUST TRY ONE OF THE FOLLOWING: metronidazole 0.75% cream (generic Metrocream) or metronidazole 0.75% gel (generic Metrogel) |
| Tresiba/ Insulin Degludec ^d | Single Source Brand | MUST HAVE THREE MONTH TRIAL ^b : Lantus, Toujeo |
| Vesicare | Brand Only | MUST TRY ALL OF THE FOLLOWING: solifenacin (generic Vesicare), trospium (generic Sanctura), tolterodine (generic Detrol), Oxytrol OTC, AND ONE OF THE FOLLOWING: Oxybutynin (generic Ditropan) or oxybutynin extended-release (generic Ditropan XL) |
| Zovirax cream | Brand & Generic | acyclovir capsule/tablet (generic Zovirax), famciclovir tablet (generic Famvir), valacyclovir tablet (generic Valtrex), OTC Abreva |
| Secuado | Single Source Brand | Saphris |
| Symtuza | Single Source Brand | Prezcobix plus Cimduo, Prezcobix plus Descovy |

Authorization will be issued for 12 months.

B. The following excluded medications may be approved based on the following criteria:

1. Approval Criteria

a. Both of the following:

- (1) Submission of medical records documenting history of trial and failure, inadequate response, or intolerance to the Therapeutically Equivalent covered medications as documented. (Document date and duration of trial):

| Excluded Medication | * | Must try all unless otherwise noted (up to a maximum of 5 alternatives) |
|--|---------------------|--|
| Acanya | Brand & Generic | clindamycin 1.2% /benzoyl peroxide 5% gel (generic Duac), clindamycin + OTC benzoyl peroxide |
| Adapalene 0.1% pads | Single Source Brand | OTC Differin gel, tretinoin cream (generic Retin-A) |
| Albuterol HFA [Ventolin HFA Authorized Generic (Prasco)] | Authorized Generic | albuterol sulfate HFA (generic ProAir HFA, Proventil HFA) [non-Prasco products] |
| Ambien | Brand Only | 2 week trial of: zolpidem (generic Ambien), zaleplon (generic Sonata), eszopiclone (generic Lunesta) |
| Ambien CR | Brand Only | 2 week trial of: zolpidem (generic Ambien), zaleplon (generic Sonata), eszopiclone (generic Lunesta) |
| Aplenzin | Brand Only | bupropion extended-release (generic Wellbutrin XL) |
| Ampyra | Brand Only | dalfampridine (generic Ampyra) |
| Asacol HD | Brand & Generic | Apriso |
| Ativan | Brand Only | MUST TRY: lorazepam (generic Ativan), AND ONE OF: alprazolam (generic Xanax), clonazepam (generic Klonopin), diazepam (generic Valium) |
| Azor | Brand & Generic | MUST TRY 5 of the following: Amlodipine/valsartan (generic Exforge) amlodipine (generic Norvasc) + losartan (generic Cozaar), amlodipine (generic Norvasc) + irbesartan (generic Avapro), amlodipine (generic Norvasc) + telmisartan (generic Micardis), amlodipine (generic Norvasc) + candesartan (generic Atacand), amlodipine (generic Norvasc) + eprosartan (Teveten), amlodipine (generic Norvasc) + Edarbi |
| Basaglar ^d | Single Source Brand | Lantus, Toujeo |
| Celexa | Brand Only | citalopram (generic Celexa) |

| | | |
|---------------------------|---------------------|---|
| Clemastine fumarate syrup | Generic Only | OTC clemastine (generic Tavist) |
| Cymbalta | Brand Only | duloxetine (generic Cymbalta), venlafaxine ER (generic Effexor XR) |
| Delzicol | Brand Only | Apriso |
| Differin | Brand & Generic | OTC Differin gel, tretinoin cream (generic Retin-A) |
| Diovan | Brand Only | MUST TRY 5 of the following: candesartan (generic Atacand), eprosartan (generic Teveten), irbesartan (generic Avapro), losartan (generic Cozaar), telmisartan (generic Micardis), valsartan (generic Diovan) |
| Diovan HCT | Brand Only | valsartan/HCTZ (generic Diovan HCT), losartan/HCTZ (generic Hyzaar), telmisartan/HCTZ (generic Micardis HCT), irbesartan/HCTZ (generic Avalide) |
| Duexis | Brand & Generic | ibuprofen (generic for Motrin) plus OTC famotidine (generic for Pepcid AC) |
| Dymista | Brand & Generic | fluticasone (generic for Flonase) plus azelastine (generic for Astelin) |
| Duragesic | Brand Only | fentanyl transdermal patch (includes: 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr, 100 mcg/hr (generic Duragesic)) |
| Effexor XR | Brand Only | venlafaxine extended-release (generic Effexor XR) |
| Focalin XR | Brand Only | MUST TRY: dexamethylphenidate (generic Focalin XR), AND ONE OF: brand Adderall XR, brand Concerta, methylphenidate extended-release capsule (generic Metadate CD or Ritalin LA) (note trial of generic is acceptable) |
| Forfivo XL | Brand & Generic | bupropion extended-release (generic Wellbutrin XL) |
| Gleevec | Brand Only | Imatinib (generic Gleevec) ^c |
| Intuniv | Brand Only | guanfacine extended-release (generic Intuniv) |
| Klonopin | Brand Only | MUST TRY: clonazepam (generic Klonopin) AND ONE OF THE FOLLOWING: alprazolam (generic Xanax), diazepam (generic Valium), lorazepam (generic Ativan) |
| Lexapro | Brand Only | escitalopram (generic Lexapro), paroxetine (generic Paxil), sertraline (generic Zoloft), fluoxetine (generic Prozac), citalopram (generic Celexa) |
| Lipitor | Brand Only | atorvastatin (generic Lipitor), lovastatin (generic Mevacor), pravastatin (generic Pravachol), simvastatin (generic Zocor), rosuvastatin (generic Crestor) |
| Lunesta | Brand Only | 2 week trial of: zolpidem (generic Ambien), zaleplon (generic Sonata), eszopiclone (generic Lunesta) |
| Otrexup | Single Source Brand | Oral methotrexate tablets, Rasuvo |
| Oxtellar XR | Single Source Brand | oxcarbazepine or Trileptal |

| | | |
|-------------------------|---------------------|--|
| Pennsaid 1.5% Drops | Brand & Generic | OTC Voltaren Gel |
| Pennsaid 2% | Brand and Generic | OTC Voltaren Gel |
| Pentasa | Brand and Generic | Apriso |
| Percocet | Brand Only | oxycodone/acetaminophen (generic Percocet) |
| Pexeva | Brand Only | paroxetine (generic Paxil) |
| Proair RespiClick & HFA | Single Source Brand | albuterol sulfate HFA (generic ProAir HFA, Proventil HFA) [non-Prasco products] |
| Prozac | Brand Only | fluoxetine (generic Prozac), paroxetine (generic Paxil), sertraline (generic Zoloft), citalopram (generic Celexa), escitalopram (generic Lexapro) |
| Qudexy XR | Brand & Generic | topiramate or Topamax |
| Rayos | Single Source Brand | prednisone |
| Rebif & Rebif Rebidose | Single Source Brand | MUST TRY TWO OF THE FOLLOWING: Avonex, Betaseron, Plegridy |
| Relafen | Brand Only | nabumetone (generic Relafen) |
| Relafen DS | Single Source Brand | nabumetone (generic Relafen) |
| Semglee ^d | Single Source Brand | MUST HAVE THREE MONTH TRIAL ^b : Lantus, Toujeo |
| Sorilux | Single Source Brand | calcipotriene (generic Dfvonex) |
| Spritam | Single Source Brand | levetiracetam immediate-release or levetiracetam solution |
| Synthroid | Brand Only | levothyroxine (generic Synthroid) |
| Tecfidera | Brand Only | dimethyl fumarate (generic Tecfidera) |
| Tivorbex | Single Source Brand | ibuprofen (generic Motrin), indomethacin capsule (generic Indocin), meloxicam (generic Mobic), naproxen (generic Naprosyn) |
| Treximet | Brand & Generic | naratriptan (generic Amerge) + naproxen, rizatriptan, (generic Maxalt) + naproxen, sumatriptan (generic Imitrex)+ naproxen, zolmitriptan (generic Zomig)+ naproxen |
| Trokendi XR | Single Source Brand | topiramate or Topamax |
| Valium | Brand Only | diazepam (generic Valium) |
| Valtrex | Brand Only | valacyclovir (generic Valtrex) |
| Ventolin HFA | Single Source Brand | albuterol sulfate HFA (generic ProAir HFA, Proventil HFA) [non-Prasco products] |
| Wellbutrin SR | Brand Only | bupropion extended-release (generic Wellbutrin SR) |

| | | |
|---------------|------------|---|
| Wellbutrin XL | Brand Only | bupropion extended-release (generic Wellbutrin XL) (trial must be in 2014 or later) |
| Xanax | Brand Only | MUST TRY: alprazolam (generic Xanax) AND ONE OF THE FOLLOWING: clonazepam (generic Klonopin), diazepam (generic Valium), lorazepam (generic Ativan) |
| Xanax XR | Brand Only | MUST TRY: alprazolam (generic Xanax) AND ONE OF THE FOLLOWING: clonazepam (generic Klonopin), diazepam (generic Valium), lorazepam (generic Ativan) |
| Zoloft | Brand Only | sertraline (generic Zoloft), paroxetine (generic Paxil), fluoxetine (generic Prozac), citalopram (generic Celexa), escitalopram (generic Lexapro) |

-AND-

- (2) Provider must give an explanation of potential rationale for how the excluded medication will work if stating the patient failed on the covered Therapeutically Equivalent product which has the same active ingredient- (eg, the member had an adverse reaction to an inactive ingredient in the alternative product).

Authorization will be issued for 12 months.

C. The following excluded medications may be approved based on the following criteria:

1. Approval Criteria

- a. History of failure, contraindication or intolerance to at ALL (covered without prior authorization or step therapy EXCEPT where noted) up to a maximum of 5 alternatives:

| **Excluded Medication | * | Must try all unless otherwise noted (up to a maximum of 5 alternatives) |
|------------------------------|---------------------|--|
| Abilify MyCite | Single Source Brand | olanzapine (generic Zyprexa), quetiapine (generic Seroquel), risperidone (generic Risperdal), ziprasidone (generic Geodon), aripiprazole tablets (generic Abilify) Minnesota: See State Mandate Overview Document |
| Abrilada | Single Source Brand | Adalimumab-adaz (unbranded Hyrimoz), Amjevita, Cyltezo, Hadlima, Humira |
| Absorica (all strengths) | Brand Only | BOTH of the following: (1) Must try isotretinoin 10mg, 20mg, 30mg, or 40mg AND (2) Must try all of the following: (a) Amnesteem (b) Claravis (c) Myorisan (d) Zenatane |

| | | |
|---|---------------------|--|
| Absorica LD | Single Source Brand | BOTH of the following: (1) Must try isotretinoin 10mg, 20mg, 30mg, or 40mg AND (2) Must try all of the following: (a) Amnesteem (b) Claravis (c) Myorisan (d) Zenatane |
| Abstral | Single Source Brand | fentanyl citrate lozenges (generic for Actiq) MN, NV - Coverage of medications to treat conditions associated with cancer may be approved based on state mandates. See State Mandate Overview Document for specifics. |
| Accrufer | Single Source Brand | OTC iron |
| Accupril | Brand Only | quinapril (generic Accupril) |
| Acetaminophen/ Caffeine/ Dihydrocodeine Bitartrate 325/30/16 mg | Single Source Brand | acetaminophen/codeine |
| Aciphex | Brand Only | omeprazole (generic Prilosec), pantoprazole (generic Protonix), rabeprazole (generic Aciphex), OTC Nexium, OTC Prevacid, OTC Prilosec, OTC Zegerid |
| Aciphex Sprinkle | Single Source Brand | omeprazole (generic Prilosec), pantoprazole (generic Protonix), rabeprazole (generic Aciphex), OTC Nexium, OTC Prevacid, OTC Prilosec, OTC Zegerid |
| Actemra | Single Source Brand | Must try two: Cimzia, Humira, Olumiant, Rinvoq, Simponi, Xeljanz/Xeljanz XR |
| Acthar | Single Source Brand | Use med nec or step therapy |
| Acticlate | Single Source Brand | Must try one: doxycycline hyclate (generic Vibramycin, Vibra-Tab), doxycycline monohydrate 50 or 100mg (generic Monodox) |
| Actigall | Brand Only | ursodiol (generic Actigall, generic Usro 250, generic Urso Forte) |
| Actiq | Brand Only | fentanyl citrate lozenges (generic for Actiq) MN, NV - Coverage of medications to treat conditions associated with cancer may be approved based on state mandates. See State Mandate Overview Document for specifics. |
| Actonel | Brand and Generic | alendronate (generic Fosamax), ibandronate (generic Boniva) |
| Actoplus Met | Brand Only | pioglitazone/metformin (generic ActoPlus Met) |
| Actos | Brand Only | pioglitazone (generic Actos) In Florida, Maine, and Tennessee only, medications prescribed for diabetes may be approved based on both of the following: 1) Provider attests use of this product is medically necessary for the treatment of |

| | | |
|----------------------------|---------------------|--|
| | | diabetes; and- 2) If applicable, clinical characteristics exist that preclude the use of the covered preferred alternative(s) and use of the covered preferred alternative(s) could result in worsening of patient's condition or inadequate treatment (document alternatives and clinical information related to worsening/inadequate treatment). |
| Acuvail | Single Source Brand | ketorolac ophthalmic solution (generic Acular, Acular LS) |
| Aczone topical gel | Brand Only | dapsone topical gel (generic Aczone) |
| Adcirca | Brand and Generic | sildenafil (generic Revatio) |
| Adderall | Brand Only | amphetamine/ dextroamphetamine immediate-release (generic Adderall) |
| Adderall XR | Brand Only | amphetamine/dextroamphetamine extended-release 24hr (generic Adderall XR) |
| Adhansia XR | Single Source Brand | Brand Adderall XR, Brand Concerta, methylphenidate extended-release capsule (generic Metadate CD or Ritalin LA) |
| Adlarity transdermal patch | Single Source Brand | Must try: donepezil tablet (generic Aricept) AND one of the the following: galantamine (Razadyne), memantine (generic Namenda), rivastigmine transdermal patch (generic Exelon) |
| Adlyxin | Single Source Brand | Byetta, Bydureon, Trulicity, Victoza, Ozempic In Florida, Maine, and Tennessee only, medications prescribed for diabetes may be approved based on both of the following: 1) Provider attests use of this product is medically necessary for the treatment of diabetes; and- 2) If applicable, clinical characteristics exist that preclude the use of the covered preferred alternative(s) and use of the covered preferred alternative(s) could result in worsening of patient's condition or inadequate treatment (document alternatives and clinical information related to worsening/inadequate treatment). |
| Admelog (All dosage forms) | Single Source Brand | Humalog vial or Humalog KwikPen In Florida, Maine, and Tennessee only, medications prescribed for diabetes may be approved based on both of the following: 1) Provider attests use of this product is medically necessary for the treatment of diabetes; and- 2) If applicable, clinical characteristics exist that preclude the use of the covered preferred alternative(s) and use of the covered preferred alternative(s) could result in worsening of patient's condition or inadequate treatment (document alternatives and clinical information related to worsening/inadequate treatment). |

| | | |
|---|---------------------|---|
| Adoxa | Brand & Generic | Must Try One: doxycycline hyclate (generic Vibramycin, Vibra-Tab), doxycycline monohydrate 50 and 100mg (generic Monodox) |
| Advair Diskus | Brand Only | fluticasone propionate/salmeterol (generic Advair Diskus), Breo Ellipta, Symbicort |
| Adzenys XR | Single Source Brand | Brand Adderall XR, Brand Concerta, methylphenidate extended-release capsule (generic Metadate CD or Ritalin LA) (note trial of generic is acceptable) |
| Afinitor 2.5 mg, 5 mg, 7.5 mg, 10 mg tablet | Brand Only | everolimus (generic Afinitor) AR, CO, DE, IL, LA, MD, MN, NV - Coverage of oncology medications may be approved based on state mandates. See State Mandate Overview Document for specifics |
| Afinitor Disperz | Brand Only | everolimus tablet for oral suspension (generic Afinitor Disperz) AR, CO, DE, IL, LA, MD, MN, NV - Coverage of oncology medications may be approved based on state mandates. See State Mandate Overview Document for specifics |
| Afrezza | Single Source Brand | Use Medical Necessity |
| Aggrenox | Brand Only | aspirin/dipyridamole extended-release (generic Aggrenox) |
| Agrylin | Brand Only | anagrelide (generic Agrylin) |
| AirDuo Digihaler | Single Source Brand | fluticasone/salmeterol (generic AirDuo Respiclick), Advair Diskus/HFA, Breo Ellipta, Symbicort |
| AirDuo Respiclick | Brand Only | fluticasone/salmeterol (generic AirDuo Respiclick), Advair Diskus/HFA, Breo Ellipta, Symbicort |
| Ajovy | Single Source Brand | Use med nec or step therapy |
| Aklief 0.005% cream | Single Source Brand | OTC Differin gel, tretinoin cream (generic Retin-A) |
| Aldactone | Brand Only | spironolactone (generic Aldactone) |
| Alevicyn Antipruritic Gel | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| Alevicyn Antipruritic Sg | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| Alevicyn Dermal Spray | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |

| | | |
|--|---------------------------------------|---|
| Alinia tablets | Brand Only | nitazoxanide (generic Alinia) |
| Alkindi | Single Source Brand | dexamethasone tablet |
| Allegra (all dosage forms) | Legend Medication (Brand and generic) | OTC Allegra (fexofenadine) |
| Allegra -D (all dosage forms) | Brand & Generic | OTC Allegra D (fexofenadine- pseudoephedrine) |
| Allopurinol 200mg | Single Source Brand | allopurinol 100mg or 300mg (generic Zyloprim) |
| Allzital | Single Source Brand | butalbital/acetaminophen 50mg/325 mg (generic Phenrilin) |
| Alogliptin (Nesina Authorized Generic) | Authorized Generic | Nesina, Onglyza, Tradjenta In Florida, Maine, and Tennessee only, medications prescribed for diabetes may be approved based on both of the following: 1) Provider attests use of this product is medically necessary for the treatment of diabetes; and- 2) If applicable, clinical characteristics exist that preclude the use of the covered preferred alternative(s) and use of the covered preferred alternative(s) could result in worsening of patient's condition or inadequate treatment (document alternatives and clinical information related to worsening/inadequate treatment). |
| Alogliptin/Metformin (Kazano Authorized Generic) | Authorized Generic | Kazano, Jentadueto/Jentadueto XR, Kombiglyze XR, Oseni In Florida, Maine, and Tennessee only, medications prescribed for diabetes may be approved based on both of the following: 1) Provider attests use of this product is medically necessary for the treatment of diabetes; and- 2) If applicable, clinical characteristics exist that preclude the use of the covered preferred alternative(s) and use of the covered preferred alternative(s) could result in worsening of patient's condition or inadequate treatment (document alternatives and clinical information related to worsening/inadequate treatment). |
| Alogliptin/Pioglitazone (Oseni Authorized Generic) | Authorized Generic | Oseni In Florida, Maine, and Tennessee only, medications prescribed for diabetes may be approved based on both of the following: 1) Provider attests use of this product is medically necessary for the treatment of diabetes; and- 2) If applicable, clinical characteristics exist that preclude the use of the covered preferred alternative(s) and use of the covered preferred alternative(s) could result in worsening of patient's condition or inadequate treatment (document |

| | | |
|----------------|---------------------|--|
| | | alternatives and clinical information related to worsening/inadequate treatment). |
| Altace | Brand Only | ramipril (generic Altace) |
| Altprev | Single Source Brand | atorvastatin (generic Lipitor), lovastatin (generic Mevacor), pravastatin (generic Pravachol), simvastatin (generic Zocor), rosuvastatin (generic Crestor) |
| Altreno | Single Source Brand | OTC Differin gel, tretinoin cream (generic Retin-A) |
| Alvesco | Single Source Brand | Arnuity Ellipta, Flovent HFA, Flovent Diskus, Pulmicort Flexhaler |
| Amaryl | Brand Only | glimepiride (generic Amaryl) |
| Amerge | Brand Only | naratriptan (generic Amerge) |
| Amicar | Brand Only | aminocaproic acid (generic Amicar) |
| Amitiza | Brand Only | lubiprostone, Linzess |
| Amrix | Brand & Generic | cyclobenzaprine tablet (generic Flexeril), carisoprodol (Soma 350mg), methocarbamol (generic Robaxin), chlorzoxazone (generic Parafon Forte DSC), tizanidine (Zanaflex Tablets) |
| Amzeeq | Single Source Brand | minocycline immediate-release capsules (generic Minocin), tretinoin cream (generic Retin-A), OTC Differin gel |
| Anafranil | Brand & Generic | citalopram (generic Celexa), escitalopram (generic Lexapro), fluoxetine capsules (generic Prozac), fluvoxamine (generic Luvox), paroxetine (generic Paxil), sertraline (generic Zoloft) |
| AndroGel 1% | Brand & Generic | Testim |
| AndroGel 1.62% | Brand Only | Testim |
| Antara | Single Source Brand | Must try ALL of the following: 1. One of the following: fenofibrate 48mg, 54mg, 145mg, or 160mg tablet (generic Lofibra, Tricor, Triglide); AND 2. One of the following: fenofibrate micronized capsule 43mg or 130mg (generic Antara); AND 3. One of the following: fenofibrate micronized capsule 67mg, 134mg, or 200mg (generic Lofibra, Tricor) |
| Anusol HC Supp | Brand Only | hydrocortisone cream (generic Anusol-HC), hydrocortisone suppository (generic Anusol-HC) |
| Apadaz | Brand only | hydrocodone/acetaminophen (generic Norco) |

| | | |
|---------------------------|---------------------|--|
| Apidra (All dosage forms) | Single Source Brand | Use Step Therapy |
| Apriso | Generic Only | Apriso (Brand) |
| Aptensio XR | Brand & Generic | Brand Adderall XR, Brand Concerta, methylphenidate extended-release capsule (generic Metadate CD or Ritalin LA) (note trial of generic is acceptable) |
| Aptiom | Single Source Brand | carbamazepine (generic Tegretol), oxcarbazepine (generic Trileptal) |
| Arava | Brand Only | leflunomide (generic Arava) |
| Arazlo | Single Source Brand | OTC Differin, tretinoin cream |
| Aricept 23 mg only | Brand Only | donepezil 10 mg (generic Aricept 10 mg) |
| Aricept 5 mg, 10 mg | Brand Only | donepezil (generic Aricept) |
| Arimidex | Brand Only | anastrozole (generic Arimidex) AR, CO, DE, IL, LA, MD, MN, NV - Coverage of oncology medications may be approved based on state mandates. See State Mandate Overview Document for specifics |
| Arixtra | Brand Only | fondaparinux (generic Arixtra) |
| ArmonAir Digihaler | Single Source Brand | Arnuity Ellipta, Flovent Diskus/HFA, Pulmicort Flexhaler |
| ArmonAir RespiClick | Single Source Brand | Arnuity Ellipta, Flovent HFA, Flovent Diskus, Pulmicort Flexhaler |
| Aromasin | Brand Only | exemestane (generic Aromasin) AR, CO, DE, IL, LA, MD, MN, NV - Coverage of oncology medications may be approved based on state mandates. See State Mandate Overview Document for specifics. |
| Arthrotec | Brand Only | diclofenac/misoprostol (generic Arthrotec) |
| Asmanex HFA | Single Source Brand | Arnuity Ellipta, QVAR RediHaler |
| Asmanex Twisthaler | Single Source Brand | Arnuity Ellipta, Flovent HFA, Flovent Diskus, Pulmicort Flexhaler |
| Astagraf XL | Single Source Brand | tacrolimus |

| | | |
|-------------------------------|---------------------|---|
| Astepro | Brand & Generic | azelastine nasal spray (generic Astelin) |
| Atacand | Brand Only | candesartan (generic Atacand) |
| Atacand HCT | Brand Only | candesartan/hydrochlorothiazide (generic Atacand HCT) |
| Atelvia | Brand & Generic | alendronate (generic Fosamax) ibandronate (generic Boniva) |
| Atopaderm | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| Atopiclair | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| Atralin | Brand & Generic | tretinoin cream (generic Retin-A) OTC Differin gel |
| Atrapro Antipruritic Hydrogel | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| Atrapro Cp | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| Atrapro Dermal Spray | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| Atripla | Brand Only | efavirenz/emtricitabine/tenofovir disoproxil fumarate (generic Atripla), Symfi, Symfi Lo |
| Augmentin | Brand Only | amoxicillin/clavulanic acid (generic Augmentin) |
| Augmentin 125mg /5 mL | Single Source Brand | amoxicillin/clavulanic acid (generic Augmentin 250mg/5mL) |
| Augmentin ES-600 | Brand Only | amoxicillin/clavulanic acid (generic Augmentin) |
| Augmentin XR | Brand & Generic | amoxicillin/clavulanic acid (generic Augmentin) |
| Aurstat Anti-Itch Hydrogel | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| Auryxia | Single Source Brand | Must try two: calcium acetate (generic PhosLo), sevelamer (generic Renagel), Velphoro |
| Auvelity | Single Source Brand | Minimum four week trial (document date and duration) of at least five of any formulation of the following: bupropion, citalopram, duloxetine, escitalopram, fluoxetine, fluvoxamine, paroxetine, sertraline, venlafaxine immediate release/extended-release capsule |
| Avalide | Brand Only | Irbesartan/hydrochlorothiazide (generic Avalide), candesartan/hydrochlorothiazide (generic Atacand HCT), losartan-HCTZ (generic Hyzaar), olmesartan-HCTZ (Benicar HCT), valsartan-HCTZ |

| | | |
|----------------------------|-----------------------------------|---|
| | | (generic Diovan HCT), telmisartan-HCTZ (generic Micardis HCT) |
| Avandia | Brand & Generic | pioglitazone (generic Actos) In Florida, Maine, and Tennessee only, medications prescribed for diabetes may be approved based on both of the following: 1) Provider attests use of this product is medically necessary for the treatment of diabetes; and- 2) If applicable, clinical characteristics exist that preclude the use of the covered preferred alternative(s) and use of the covered preferred alternative(s) could result in worsening of patient's condition or inadequate treatment (document alternatives and clinical information related to worsening/inadequate treatment). |
| Avapro | Brand Only | Candesartan (generic Atacand), eprosartan (generic Teveten), irbesartan (generic Avapro), losartan (generic Cozaar), telmisartan (generic Micardis), valsartan (generic Diovan), Edarbi, olmesartan (generic Benicar) |
| Avar Foam (9.5%-5%, 10-2%) | Single Source Brand | sulfacetamide sodium/sulfur 10-5% |
| Avar, Avar LS | Single Source Brand | sulfacetamide sodium/sulfur 10-5% |
| Avar-E Emollient | Single Source Brand | sulfacetamide sodium/sulfur 10-5% |
| Avar-E Green | Single Source Brand | sulfacetamide sodium/sulfur 10-5% |
| Avar-E LS | Single Source Brand | sulfacetamide sodium/sulfur 10-5% |
| Avelox tablet | Brand Only | moxifloxacin tablets (generic Avelox) |
| Avinza | Brand Only | Use med nec or step therapy MN, NV - Coverage of medications to treat conditions associated with cancer may be approved based on state mandates. See State Mandate Overview Document for specifics. |
| Avita 0.025% | Brand and Generic | OTC Differin gel, tretinoin cream (generic Retin-A) |
| Avodart | Brand Only | dutasteride (generic Avodart), finasteride (generic Proscar) |
| Axert | Generic Only | naratriptan (generic Amerge), rizatriptan (generic Maxalt), sumatriptan (generic Imitrex), zolmitriptan (generic Zomig) |
| Axid Solution | Brand & Generic Legend Medication | OTC Axid (nizatidine) |
| Axiron | Brand & Generic | Testim |

| | | |
|---------------------------------|-----------------------------------|---|
| Azelex | Single Source Brand | OTC Differin gel, tretinoin cream (generic Retin-A) |
| Azeschew | Single Source Brand | Brand and generic prenatal vitamins |
| Azesco | Single Source Brand | Brand and generic prenatal vitamins |
| Azilect | Brand and Generic | selegiline (generic Eldepryl) |
| Azopt (brand only) | Brand Only | brinzolamide (generic Azopt), dorzolamide (generic Trusopt) |
| Azstarys | Single Source Brand | amphetamine/ dextroamphetamine immediate-release (generic Adderall), methylphenidate extended-release capsules (generic Metadate CD, Ritalin LA), Adderall XR, Concerta |
| Azulfidine (brand only) | Brand Only | sulfasalazine (generic Azulfidine) |
| Azulfidine En-tabs (brand only) | Brand Only | sulfasalazine (generic Azulfidine) |
| Balcoltra | Brand Only | levonorgestrel 0.1 mg/ethinyl estradiol 0.02 mg [Aubra, Aubra EQ, Aviane, Delyla, Falmina, Larissia, Lessina, Lutera, Orsythia, Sronyx, Vienva (generics for Alesse)] DC, Oregon, Connecticut, California, Delaware, Illinois, Maryland, Massachusetts, New Jersey, New York, and West Virginia only: approve if provider states medically necessary |
| Banzel (brand only) | Brand Only | rufinamide (generic Banzel) |
| Baraclude Tablets | Brand Only | entecavir tablet (generic Baraclude) |
| Beconase AQ | Single Source Brand | flunisolide (generic Nasarel), fluticasone (generic Flonase), Zetonna, Nasacort OTC, Flonase OTC, Rhinocort OTC (flonase OTC and fluticasone (generic Flonase) count as one alternative) |
| Belbuca | Single Source Brand | Use med nec |
| Belsomra | Single Source Brand | Two week trial of: zolpidem (generic Ambien), zaleplon (generic Sonata), eszopiclone (generic Lunesta) |
| Benadryl | Brand & Generic Legend Medication | OTC Benadryl (diphenhydramine) |
| Benicar | Brand Only | candesartan (generic Atacand), eprosartan (generic Teveten), irbesartan (generic Avapro), losartan (generic Cozaar), telmisartan (generic Micardis), valsartan (generic Diovan), Edarbi, olmesartan (generic Benicar) |
| Benicar HCT | Brand Only | candesartan HCT (generic Atacand HCT), irbesartan HCT (generic Avalide), losartan HCT (generic Hyzaar), valsartan HCT (generic Diovan HCT), |

| | | |
|--|---------------------|---|
| | | Edarbyclor, olmesartan/hydrochlorothiazide (generic Benicar HCT) |
| Benzaclin jar & pump | Brand & Generic | clindamycin 1.2% /benzoyl peroxide 5% gel (generic Duac), clindamycin solution + OTC benzoyl peroxide |
| Benzamycin | Brand Only | erythromycin/benzoyl peroxide 3/5% (generic Benzamycin) |
| Bepreve | Brand & Generic | OTC ketotifen (Zaditor), OTC olopatadine (Pataday/Patanol), azelastine ophthalmic solution (generic Optivar), olopatadine ophthalmic solution (generic Patanol), Lastacast |
| Besremi | Single Source Brand | hydroxyurea, Myleran, Jakafi, Pegasys AR, CO, DE, IL, LA, MD, MN, NV - Coverage of oncology medications may be approved based on state mandates. See State Mandate Overview Document for specifics |
| Betapace | Brand Only | sotalol (generic Betapace) |
| Bethkis | Brand Only | tobramycin 300 mg /4 mL (generic Bethkis) |
| Beyaz | Brand & Generic | Yaz + Folic Acid DC, Oregon, Connecticut, California, Delaware, Illinois, Maryland, Massachusetts, New Jersey, New York, and West Virginia only: approve if provider states medically necessary |
| BiDil | Brand Only | isosorbide dinitrate/hydralazine (generic BiDil) |
| Binosto | Single Source Brand | alendronate (generic for Fosamax) ibandronate (generic Boniva) |
| Boniva tablet | Brand Only | ibandronate (generic Boniva) |
| Bonjesta | Single Source Brand | OTC doxylamine (Unisom) + pyridoxine (Vitamin B6) |
| Bosulif | Single Source Brand | Use Step Therapy |
| BP 10-1 | Generic Only | sulfacetamide sodium/sulfur 10-5% |
| Brexafemme | Single Source Brand | OTC clotrimazole (generic Gyne-Lotrimin), OTC miconazole (generic Monistat), fluconazole (generic Diflucan), terconazole (generic Terazol) |
| Brimonidine tartrate/timolol maleate | Generic Only | brand Combigan |
| Brisdelle | Brand & Generic | Must try ONE: estradiol (generic Estrace), paroxetine (generic Paxil), paroxetine extended-release (generic Paxil CR) |
| Briviact | Single Source Brand | levetiracetam tablets or oral solution (generic Keppra) |
| Brompheniramine / pseudoephedrine / dextromethorphan | Generic Only | OTC brompheniramine/pseudoephedrine (e.g. Rynex PSE) + OTC dextromethorphan (e.g., Robitussin, Delsym) |
| Bromsite | Single Source Brand | bromfenac ophthalmic solution (generic Bromday, Xibrom), diclofenac ophthalmic solution (generic |

| | | |
|---|---------------------|---|
| | | Voltaren), ketorolac ophthalmic solution (generic Acular), Nevanac |
| Bronchitol | Single Source Brand | sodium chloride 7% nebulized solution |
| Brovana | Single Source Brand | Striverdi Respimat |
| Bryhali | Single Source Brand | fluocinonide 0.05% gel/solution (generic Lidex), desoximetasone 0.05% gel (generic Topicort) |
| Budesonide/ Formoterol (Symbicort Authorized Generic) | Authorized Generic | Symbicort |
| Bunavail Film | Single Source Brand | Zubsolv, buprenorphine/naloxone (tablet or film) |
| Bupap (butalbital 50mg/300 mg acetaminophen) | Brand & Generic | butalbital/acetaminophen 50 mg/325 mg (generic Phrenilin) |
| Buphenyl (brand only) | Brand Only | sodium phenylbutyrate (generic Buphenyl) |
| butalbital/acetaminophen capsule 50/300 mg | generic only | butalbital/acetaminophen 50/325 mg tablet (generic Phrenilin) |
| Butrans | Brand Only | Use med nec or step therapy MN, NV - Coverage of medications to treat conditions associated with cancer may be approved based on state mandates. See State Mandate Overview Document for specifics. |
| Bylvay | Single Source Brand | Use Medical Necessity |
| Bystolic | Brand & Generic | atenolol (generic Tenormin), bisoprolol (generic Zebeta), metoprolol (generic Lopressor) |
| Caduet | Brand & Generic | amlodipine (generic Norvasc) + atorvastatin (generic Lipitor), amlodipine (generic Norvasc) + lovastatin (generic Mevacor), amlodipine (generic Norvasc) + pravastatin (generic Pravachol), amlodipine (generic Norvasc) + simvastatin (generic Zocor), amlodipine (generic Norvasc) + rosuvastatin (generic Crestor) |
| Cambia | Single Source Brand | diclofenac tablets (generic Voltaren, Cataflam), ibuprofen (generic Motrin), naproxen (generic Aleve) |
| Canasa | Brand Only | mesalamine suppository (generic Canasa) |
| Carac | Single Source Brand | fluorouracil 5% (generic Efudex), Fluoroplex 1% cream |
| Carafate tablet/suspension | Brand Only | sulcralfate (generic Carafate) |
| Carbaglu | Brand Only | carglumic tablets (generic Carbaglu) |
| Carbatrol | Brand Only | carbamazepine (generic Carbatrol) |
| carbinoxamine 6 mg | generic only | carbinoxamine tablets (generic Palgic) |

| | | |
|--|---------------------|--|
| Cardizem CD | Brand Only | diltiazem extended-release (generic Cardizem CD) |
| Cardizem LA | Brand Only | diltiazem extended-release (generic Cardizem LA) |
| Cardizem | Brand Only | diltiazem (generic Cardizem) |
| Carnitor | Brand Only | levocarnitine (generic Carnitor) |
| Carnitor SF | Brand Only | levocarnitine (generic Carnitor) |
| Carrasyn Hydrogel Wound Dressing | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| Cataflam | Brand Only | diclofenac tablets (generic Cataflam, generic Voltaren) |
| Catapres-TTS | Brand Only | clonidine patch (generic Catapres-TTS) |
| Cayston | Single Source Brand | tobramycin 300 mg /4 mL (generic Bethkis) |
| Cefaclor | Brand & Generic | cefdinir (Omnicef), cefprozil (Cefzil), cefuroxime (Ceftin) |
| Celebrex | Brand Only | celecoxib (generic Celebrex), ibuprofen (generic Motrin), meloxicam (generic Mobic), naproxen (generic Naprosyn) |
| Cellcept | Brand Only | mycophenolate mofetil (generic Cellcept) |
| Centany AT Kit | Single Source Brand | mupirocin ointment (generic Bactroban) |
| Cequa | Single Source Brand | Restasis (single use vials) |
| Ceracade | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| Cesamet | Single Source Brand | ondansetron (generic Zofran) |
| Chenodal | Single Source Brand | ursodiol |
| chlorpromazine concentrate (generic Thorazine) | Generic Only | chlorpromazine tablets (generic Thorazine) Minnesota: See State Mandate Overview Document |
| Chlorzoxazone 250 mg | Single Source Brand | chlorzoxazone 500 mg (generic Parafon Forte DSC) |
| Cialis | Brand Only | Sildenafil (generic Viagra), tadalafil (generic Cialis), and vardenafil (generic Levitra) |
| Ciclodan Combination Package | Brand & Generic | ciclopirox (generic Loprox) |
| Ciclodan Kit | Brand & Generic | ciclopirox nail lacquer (generic Penlac) |
| Cinryze | Single Source Brand | Haegarda, Takhzyro |

| | | |
|-----------------------------------|----------------------------|--|
| Cipro HC | Single Source Brand | ofloxacin otic solution (generic Floxin Otic, Ocuflax), ciprofloxacin otic |
| Ciprodex | Brand Only | ciprofloxacin/dexamethasone otic (generic Ciprodex) |
| Clarinex | Brand & Generic | levocetirizine (generic for Xyzal) |
| Clarinex-D | Single Source Brand | levocetirizine (generic for Xyzal) + OTC pseudoephedrine |
| Claritin (all dosage forms) | Brand & Generic | OTC Claritin (loratadine) |
| Claritin D | Brand & Generic | OTC Claritin-D (loratadine-pseudoephedrine) |
| Clemastine fumerate tab | Generic Only | OTC clemastine (generic Tavist) |
| Cleocin T | Brand Only | clindamycin gel 1% (generic Cleocin-T) |
| Cleocin Vaginal Supp | Single Source Brand | clindamycin vaginal cream (generic Cleocin) |
| Climara | Brand Only | estradiol transdermal patch (generic Climara) |
| Clindacin Pac | Single Source Brand | clindamycin gel 1% (generic for Cleocin-T), clindamycin solution, clindamycin lotion |
| Clindagel | Brand & Authorized Generic | clindamycin gel 1% (generic for Cleocin-T), clindamycin solution, clindamycin lotion |
| Clobex 0.05% spray | Brand Only | clobetasol 0.05% spray (generic Clobex spray) |
| Clobex Lotion | Brand & Generic | betamethasone 0.05% augmented gel (generic Diprolene), clobetasol propionate 0.05% gel (generic Temovate), clobetasol 0.05% solution (generic Temovate) |
| Clobex Shampoo (including Clodan) | Brand & Generic | betamethasone 0.05% augmented gel (generic Diprolene), clobetasol propionate 0.05% gel (generic Temovate), clobetasol 0.05% solution (generic Temovate) |
| Cloderm | Brand Only | clocortolone 0.1% cream (generic Cloderm), mometasone furoate cream 0.1 % (generic Elocon) |
| Colazal | Brand Only | balsalazide (generic Colazal) |
| Colchicine Capsule | Generic Only | Mitigare |
| Colcrys tablet | Brand Only | Must try both: colchicine (generic Colcrys), Mitigare |
| Combivir (brand only) | Brand Only | lamivudine/zidovudine (generic Combivir) |
| Comfort Pac Tizanidine | Single Source Brand | cyclobenzaprine HCL (generic Flexeril), carisoprodol (Soma 350mg), methocarbamol (generic Robaxin), chlorzoxazone (generic Parafon Forte DSC), tizanidine tablets (Zanaflex Tablets) |
| Compounding Kits | All | Use prior authorization criteria |

| | | |
|----------------------|--|---|
| Concerta | Single Source Brand | methylphenidate extended-release osmotic release (generic Concerta) |
| Conjupri | Single Source Brand | amlodipine (generic Norvasc) |
| Consensi | Single Source Brand | amlodipine (generic Norvasc) + celecoxib (generic Celebrex) |
| ConZip | Single Source Brand & Authorized Generic | tramadol (generic Ultram), tramadol ER (generic for Ultram ER) |
| Cordran 0.025% cream | Single Source Brand | hydrocortisone valerate 0.2% cream (generic Westcort cream), prednicarbate 0.1% cream (generic Dermatop cream), fluticasone propionate cream 0.05% (generic Cutivate cream) |
| Cordran Lotion | Brand Only | flurandrenolide 0.05% lotion (generic Cordran), triamcinolone acetonide 0.1% lotion (generic Kenalog lotion) |
| Coreg | Brand Only | carvedilol (generic Coreg) |
| Coreg CR | Brand & Generic | carvedilol (generic for Coreg) |
| Cosopt PF | Brand and Generic | dorzolamide/timolol (generic for Cosopt) |
| Cotempla | Single Source Brand | Brand Adderall XR, Brand Concerta, methylphenidate extended-release capsule (generic Metadate CD or Ritalin LA) (note trial of generic is acceptable) |
| Cozaar | Brand Only | losartan (generic Cozaar) |
| Cresemba | Single Source Brand | voriconazole (generic Vfend) |
| Crestor | Brand only | atorvastatin (generic Lipitor), lovastatin (generic Mevacor), pravastatin (generic Pravachol), simvastatin (generic Zocor), rosuvastatin (generic Crestor) |
| Cutivate Lotion | Brand & Generic | triamcinolone acetonide lotion (0.1%) or ointment (0.025%) (generic Kenalog), betamethasone lotion (generic Diprolene), fluticasone cream (generic Cutivate), betamethasone valerate cream (generic Valisone), hydrocortisone valerate cream (generic Westcort), fluocinolone acetonide cream (generic Synalar) |
| Cycloset | Single Source Brand | Must try ONE: bromocriptine (generic Parlodel); metformin (generic Glucophage); one GLP-1 product; one SGLT-2 product; one DPP-4 product; In Florida, Maine, and Tennessee only, medications prescribed for diabetes may be approved based on both of the following: 1) Provider attests use of this product is medically necessary for the treatment of |

| | | |
|---|---------------------|--|
| | | diabetes; and- 2) If applicable, clinical characteristics exist that preclude the use of the covered preferred alternative(s) and use of the covered preferred alternative(s) could result in worsening of patient's condition or inadequate treatment (document alternatives and clinical information related to worsening/inadequate treatment). |
| Cyclosporine 0.05% ophthalmic emulsion single dose vials (generic Restasis SDV) | Generic Only | OTC artificial tears |
| Cytomel | Brand Only | liothyronine (generic Cytomel) |
| D.H.E. 45 | Brand Only | dihydroergotamine (generic D.H.E. 45) |
| Daklinza | Single Source Brand | Epclusa |
| dapsone gel (generic Aczone 5%) | Generic Only | OTC Differin gel |
| Daxbia | Single Source Brand | cephalexin (generic Keflex) |
| Daytrana | Brand and Generic | Brand Adderall XR, Brand Concerta, methylphenidate extended-release capsule (generic Metadate CD or Ritalin LA) (note trial of generic is acceptable) |
| Dayvigo | Single Source Brand | Two week trial of: zolpidem (generic Ambien), zaleplon (generic Sonata), eszopiclone (generic Lunesta) |
| DDAVP injection | Brand Only | desmopressin (generic DDAVP) |
| DDAVP tablets | Brand Only | desmopressin (generic DDAVP) |
| Decadron Elixer | Brand Only | dexamethasone elixer (generic Decadron) |
| Decadron tablets | Brand Only | dexamethasone tablets |
| Delstrigo | Single Source Brand | Symfi, Symfi Lo, Triumeq |
| Denavir | Brand and Generic | acyclovir capsule/tablet (generic Zovirax), famciclovir tablet (generic Famvir), valacyclovir tablet (generic Valtrex), OTC Abreva |
| Dermasorb HC kit | Single Source Brand | hydrocortisone (generic Hytone) |
| Dermasorb TA | Single Source Brand | triamcinolone acetonide cream or ointment (generic Kenalog) |
| Dermasorb XM 39% kit | Single Source Brand | urea 40% |
| Descovy | Single Source Brand | Use Medical Necessity |

| | | |
|--|---------------------|---|
| Desonate | Single Source Brand | triamcinolone acetonide lotion (0.1%) or ointment (0.025%) (generic Kenalog), betamethasone lotion (generic Diprolene), fluticasone cream (generic Cutivate), betamethasone valerate cream (generic Valisone), hydrocortisone valerate cream (generic Westcort), fluocinolone acetonide cream (generic Synalar) |
| Desoxyn | Brand Only | methamphetamine (generic Desoxyn) |
| Desvenlafaxine ER | Brand & Generic | venlafaxine extended-release capsule (generic Effexor XR) |
| Detrol | Brand Only | Must try one of: oxybutynin (generic Ditropan), oxybutynin extended-release (generic Ditropan XL), Oxytrol OTC and All of the following: solifenacin (generic Vesicare), trospium (generic Sanctura) |
| Detrol LA | Brand & Generic | Must try one of: oxybutynin (generic Ditropan), oxybutynin extended-release (generic Ditropan XL), Oxytrol OTC and All of the following: solifenacin (generic Vesicare), tolterodine (generic Detrol), trospium (generic Sanctura) |
| Dexedrine | Brand Only | dextroamphetamine extended-release (generic Dexedrine) |
| Dexilant (dexlansoprazole) | Brand & Generic | omeprazole (generic Prilosec), pantoprazole (generic Protonix), rabeprazole (generic Aciphex) |
| Dhivy | Single Source Brand | carbidopa/levodopa (generic Sinemet) |
| Diab | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| Diab F.D.G. Freeze-Dried | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| Diacomit | Single Source Brand | clobazam (generic Onfi) |
| Dibenzyline | Brand Only | phenoxybenzamine (generic Dibenzyline) |
| Diclegis | Brand & Generic | OTC doxylamine (Unisom) + pyridoxine (Vitamin B6) |
| diflorasone diacetate 0.05% ointment (generic Psorcon) | Generic Only | clobetasol 0.05% ointment (generic Temovate), halobetasol 0.05% ointment (generic Ultravate) |
| Diflucan 100 mg, 150 mg, 200 mg | Brand Only | fluconazole (generic Diflucan) |
| Diflucan 50 mg | Brand Only | fluconazole (generic Diflucan) |
| Diflucan suspension | Brand Only | fluconazole (generic Diflucan) |
| Dilaudid | Brand Only | hydromorphone (generic Dilaudid) |
| Dipentum | Single Source Brand | sulfasalazine (generic Azulfidine), balsalazide (generic Colzal), mesalamine delayed-release (generic Delzicol, generic Lialda), Apriso (brand) |

| | | |
|---|---------------------|---|
| Disalcid | Brand Only | salsalate (generic Disalcid) |
| Ditropan XL | Brand Only | oxybutynin extended-release tablet (generic Ditropan XL) |
| Doral | Brand and Generic | temazepam (generic Restoril) |
| Doryx/Doryx MPC | Brand & Generic | Must try one: doxycycline hyclate (generic Morgidox, Vibramycin), doxycycline monohydrate 50 mg or 100 mg (generic Monodox) |
| Dovonex | Brand Only | calcipotriene cream (generic Dovonex) |
| doxycycline 75mg capsule (generic Monodox) | Generic Only | Must try one: doxycycline hyclate (generic Morgidox, Vibramycin), doxycycline monohydrate 50 mg or 100 mg (generic Monodox) |
| Drospirenone/Ethinyl Estradiol 3 mg/20 mcg [Gianvi, Loryna, Nikki, Vestura (generic Yaz)] | Generic Only | Yaz |
| Drospirenone/Ethinyl Estradiol 3 mg/30 mcg [Ocella, Syeda, Zarah (generic Yasmin)] | Generic Only | Yasmin |
| Duaklir | Single Source Brand | Anoro Ellipta, Bevespi Aerosphere |
| Duavee | Single Source Brand | estradiol tablets (generic Estrace) |
| Dulera | Single Source Brand | fluticasone/salmeterol (generic AirDuo Respiclick), Advair Diskus/HFA, Breo Ellipta, Symbicort |
| duloxetine 40mg (Irenka) | Authorized Generic | duloxetine (generic Cymbalta) |
| Duobrii | Single Source Brand | Enstilar, Taclonex solution + fluocinonide 0.05% gel/solution (generic Lidex), desoximetasone 0.5% gel (generic Topicort) |
| Dutoprol | Brand & Generic | metoprolol extended-release (generic Toprol-XL) plus hydrochlorothiazide |
| Dvorah | Single Source Brand | acetaminophen/codeine |
| Dxevo-11 day pack | Single Source Brand | dexamethasone tablets |
| Dyanavel XR | Single Source Brand | Brand Adderall XR, Brand Concerta, methylphenidate extended-release capsule (generic Metadate CD or Ritalin LA) (note trial of generic is acceptable) |
| Dyrenium | Brand Only | triamterene capsules (generic Dyrenium) |
| E.E.S. 400 | Brand Only | erythromycin ethylsuccinate (generic E.E.S. 400) |
| Ecoza | Single Source Brand | econazole (generic Spectrazole), ketoconazole (generic Nizoral), terbinafine (generic Lamisil) |

| | | |
|----------------------|---------------------|--|
| Edarbi | Single Source Brand | Must try THREE: candesartan (generic Atacand), irbesartan (generic Avapro), losartan (generic Cozaar), olmesartan (generic Benicar), telmisartan (generic Micardis), valsartan (generic Diovan) |
| Edarbyclor | Single Source Brand | Must try THREE: candesartan HCT (generic Atacand HCT), irbesartan HCT (generic Avalide), losartan HCT (generic Hyzaar), olmesartan HCT (Benicar HCT), valsartan HCT (generic Diovan HCT) |
| Edecrin | Brand Only | ethacrynic acid tablets (generic Edecrin) |
| Edluar | Single Source Brand | Two week trial of: zolpidem (generic Ambien), zaleplon (generic Sonata), eszopiclone (generic Lunesta) |
| Effient | Brand Only | prasugrel (generic Effient) |
| Egrifta | Single Source Brand | Use prior authorization criteria |
| Elepsia XR | Single Source Brand | levetiracetam (generic Keppra) |
| Eletone | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| Eletone Twin pack | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| Elidel | Brand Only | pimecrolimus (generic Elidel), tacrolimus (generic Protopic) |
| Elmiron | Single Source Brand | amitriptyline (generic Elavil) |
| Eloctate | Single Source Brand | Use medical necessity |
| Elyxyb oral solution | Single Source Brand | celecoxib capsules (generic Celebrex), OTC ibuprofen (generic Motrin), OTC naproxen (Naprosyn) |
| Emadine | Single Source Brand | azelastine (generic for Optivar), olopatadine (generic Patanol), Lastacaft, OTC Pataday, OTC Zaditor |
| Embeda | Single Source Brand | Use med nec or step therapy |
| Emend capsules | Brand Only | aprepitant capsules (generic Emend) |
| Emflaza | Single Source Brand | Use med nec or step therapy |
| Emsam | Single Source Brand | selegiline (generic Eldepryl) For treatment resistant depression; isocarboxazid (Marplan), phenelzine (Nardil, tranlycypromine (Parnate), citalopram (generic Celexa), fluoxetine (generic Prozac), sertraline (generic Zoloft), venlafaxine ER capsules (generic Effexor ER) |

| | | |
|------------------------|---------------------|--|
| Emtriva | Brand Only | emtricitabine (generic Emtriva) |
| Emulsion Sb | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| Enablex | Brand & Generic | Must try one of: oxybutynin (generic Ditropan), oxybutynin extended-release (generic Ditropan XL), Oxytrol OTC and All of the following: solifenacin (generic Vesicare), tolterodine (generic Detrol), trospium (generic Sanctura) |
| Endometrin | Single Source Brand | progesterone capsules |
| Entadfi | Single Source Brand | finasteride (generic Proscar) plus tadalafil (generic Cialis) |
| Entocort EC | Brand Only | budesonide (generic Entocort EC) |
| Entty | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| Envarsus XR | Single Source Brand | Use Nonform guideline |
| Epiceram | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| Epiduo | Brand and Generic | OTC benzoyl peroxide PLUS OTC Differin Gel, OTC benzoyl peroxide PLUS tretinoin cream (generic Retin-A) |
| Epiduo Forte | Brand & Generic | tretinoin cream (generic Retin-A) + OTC benzoyl peroxide; OTC Differin + OTC benzoyl peroxide |
| EpiPen | Brand Only | epinephrine auto injector (generic EpiPen and EpiPen Jr.), Symjepi |
| EpiPen Jr | Brand Only | epinephrine auto injector (generic EpiPen and EpiPen Jr.), Symjepi |
| Epivir | Brand Only | lamivudine (generic Epivir) |
| Epivir HBV | Brand Only | lamivudine (generic Epivir HBV) |
| Epogen | Single Source Brand | Retacrit |
| Eprontia oral solution | Single Source Brand | topiramate IR (generic Topamax), topiramate sprinkle (generic Topamax sprinkle) |
| Epsolay | Single Source Brand | Soolantra |
| Epzicom | Brand Only | abacavir/lamivudine (generic Epzicom) |
| Ergomar | Single Source Brand | naratriptan (generic Amerge), rizatriptan (generic Maxalt/Maxalt MLT), sumatriptan (generic Imitrex), zolmitriptan (generic Zomig/Zomig-ZMT) |

| | | |
|------------------------|---------------------------------------|---|
| Ertaczo | Single Source Brand | ciclopirox (generic Loprox), econazole (generic Spectazole), ketoconazole (generic Nizoral) |
| Esbriet | Brand Only | pirfenidone (generic Esbriet) |
| Esomeprazole strontium | Single Source Brand Legend Medication | omeprazole (generic Prilosec), pantoprazole (generic Protonix) tablet, rabeprazole (generic Aciphex) tablet |
| Esperoct | Single Source Brand | Advate, Kogenate FS, Kovaltry, NovoEight, Nuwiq, Recombinate |
| Estrace | Brand Only | estradiol tablets (generic Estrace) |
| Estrace vaginal cream | Brand Only | estradiol vaginal cream (generic Estrace vaginal cream) |
| Estrostep FE | Brand Only | norethindrone/ethinyl estradiol 1/20-1/30-1/35 [Tilia FE, Tri-Legest FE (generic Estrostep FE)] DC, Oregon, Connecticut, California, Delaware, Illinois, Maryland, Massachusetts, New Jersey, New York, and West Virginia only: approve if provider states medically necessary |
| Eulexin | Single Source Brand | flutamide (generic Eulexin) AR, CO, DE, IL, LA, MD, MN, NV - Coverage of oncology medications may be approved based on state mandates. See State Mandate Overview Document for specifics |
| Evekeo | Brand & Generic | amphetamine/dextroamphetamine immediate-release (generic Adderall), dextroamphetamine extended-release (generic Dexedrine) |
| Evekeo ODT | Single Source Brand | dextroamphetamine extended-release (generic Dexedrine) |
| Evista | Brand Only | raloxifene (generic Evista) |
| Evoclin | Brand Only | clindamycin gel 1% (generic Cleocin-T), clindamycin phosphate 1% foam (generic Evoclin) |
| Evoxac | Brand Only | cevimeline (generic Evoxac) |
| Evzio | Single Source Brand | Use med nec |
| Exalgo | Brand & Generic | Use med nec or step therapy MN, NV - Coverage of medications to treat conditions associated with cancer may be approved based on state mandates. See State Mandate Overview Document for specifics. |
| Exelon | Brand Only | rivastigmine transdermal patch (generic Exelon), rivastigmine capsules (generic Exelon) |
| Exforge | Brand Only | amlodipine/ valsartan (generic Exforge), amlodipine (generic Norvasc) + losartan (generic Cozaar), amlodipine (generic Norvasc) + irbesartan (generic Avapro), amlodipine (generic Norvasc) + telmisartan (generic Micardis), amlodipine (generic Norvasc) + candesartan (generic Atacand), amlodipine (generic |

| | | |
|--|-----------------------------------|--|
| | | Norvasc) + eprosartan (Teveten), amlodipine (generic Norvasc) + Edarbi, amlodipine (generic Norvasc) + valsartan (generic Diovan) |
| Exforge HCT | Generic Only | Use non-Formulary Criteria |
| Exjade | Brand Only | deferasirox (generic Exjade) |
| Exservan | Single Source Brand | riluzole (generic Rilutek) |
| Extavia | Single Source Brand | Use step therapy |
| Fabior | Single Source Brand | tretinoin cream (generic Retin-A), OTC Differin |
| Fanapt | Single Source Brand | olanzapine (generic Zyprexa), quetiapine (generic Seroquel), risperidone, generic Risperdal), ziprasidone (generic Geodon), add aripiprazole tablets (generic Abilify) Minnesota: See State Mandate Overview Document |
| Fareston | Brand Only | toremifene (generic Fareston) AR, CO, DE, IL, LA, MD, MN, NV - Coverage of oncology medications may be approved based on state mandates. See State Mandate Overview Document for specifics. |
| Farxiga | Single Source Brand | Use step therapy |
| Femara | Brand Only | letrozole (generic Femara) AR, CO, DE, IL, LA, MD, MN, NV - Coverage of oncology medications may be approved based on state mandates. See State Mandate Overview Document for specifics |
| Femhrt | Brand Only | norethindrone/ethinyl estradiol 0.5 mg/2.5 mcg [Fyavolv (generic Femhrt)] |
| Fenofibrate micronized capsule 30mg and 90mg | Multisource Brand Without Generic | Must try ALL of the following: 1. One of the following: fenofibrate 48mg, 54mg, 145mg, or 160mg tablet (generic Lofibra, Tricor, Triglide); AND 2. One of the following: fenofibrate micronized capsule 43mg or 130mg (generic Antara); AND 3. One of the following: fenofibrate micronized capsule 67mg, 134mg, or 200mg (generic Lofibra, Tricor) |
| Fenofibric acid 35mg and 105mg | Generic Only | Must try ALL of the following: 1. One of the following: fenofibrate 48mg, 54mg, 145mg, or 160mg tablet (generic Lofibra, Tricor, Triglide); AND 2. One of the following: fenofibrate micronized capsule 43mg or 130mg (generic Antara); AND |

| | | |
|--|-----------------------------------|---|
| | | 3. One of the following: fenofibrate micronized capsule 67mg, 134mg, or 200mg (generic Lofibra, Tricor) |
| Fenoglide | Brand & Generic | Must try ALL of the following: 1. One of the following: fenofibrate 48mg, 54mg, 145mg, or 160mg tablet (generic Lofibra, Tricor, Triglide); AND 2. One of the following: fenofibrate micronized capsule 43mg or 130mg (generic Antara); AND 3. One of the following: fenofibrate micronized capsule 67mg, 134mg, or 200mg (generic Lofibra, Tricor) |
| Fenortho | Brand & Generic | ibuprofen (generic Motrin), naproxen (generic Aleve, Naprosyn) |
| fentanyl transdermal patch (37.5, 62.5 and 87.5 mcg/hr strengths only) | Generic Only | fentanyl transdermal patch (12, 25, 50, 75, 100 mcg/hr only) (generic Duragesic) MN, NV - Coverage of medications to treat conditions associated with cancer may be approved based on state mandates. See State Mandate Overview Document for specifics. |
| Fentora | Single Source Brand | fentanyl citrate lozenges (generic for Actiq) MN, NV - Coverage of medications to treat conditions associated with cancer may be approved based on state mandates. See State Mandate Overview Document for specifics. |
| Ferriprox | Single Source Brand | deferasirox (generic Exjade) |
| Fetzima | Single Source Brand | Minimum four week trial (document date and duration) of at least five of any formulation of the following: bupropion, citalopram, duloxetine, escitalopram, fluoxetine, fluvoxamine, paroxetine, sertraline, venlafaxine immediate release/extended-release capsule |
| Fexmid 7.5 mg | Brand & Generic | cyclobenzaprine 5 mg, 10 mg (generic Flexeril) |
| Fiasp (All dosage forms) | Single Source Brand | Use Step Therapy In Florida, Maine, and Tennessee only, medications prescribed for diabetes may be approved based on both of the following: 1) Provider attests use of this product is medically necessary for the treatment of diabetes; and- 2) If applicable, clinical characteristics exist that preclude the use of the covered preferred alternative(s) and use of the covered preferred alternative(s) could result in worsening of patient's condition or inadequate treatment (document alternatives and clinical information related to worsening/inadequate treatment). |
| Fibracor 35 mg, 105 mg | Multisource Brand Without Generic | Must try ALL of the following: 1. One of the following: fenofibrate 48mg, 54mg, 145mg, or 160mg tablet (generic Lofibra, Tricor, Triglide); |

| | | |
|---|-----------------------------------|--|
| | | AND 2. One of the following: fenofibrate micronized capsule 43mg or 130mg (generic Antara); AND 3. One of the following: fenofibrate micronized capsule 67mg, 134mg, or 200mg (generic Lofibra, Tricor) |
| Finacea | Brand Only | azelaic acid gel (generic Finacea) |
| Fintepla | Single Source Brand | lamotrigine (generic Lamictal), topiramate (generic Topamax), valproic acid (generic Depakene) |
| Fioricet with Codeine 50 mg/325 mg/40 mg/30 mg | Brand Only | butalbital/acetaminophen/caffeine/codeine 50 mg/325 mg/40 mg/30 mg (generic Fioricet with Codeine) |
| Fioricet with Codeine capsule 50mg/300mg/40 mg/30mg | Brand & Generic | butalbital/acetaminophen/caffeine/codeine 50 mg/325 mg/40 mg/30 mg (generic Fioricet with Codeine) |
| Firazyr | Brand Only | icatibant acetate (generic Firazyr) |
| Flagyl (brand only) | Brand Only | metronidazole (generic Flagyl) |
| Flector 1.3% patch | Single Source Brand | OTC Voltaren Arthritis Pain 1% gel |
| Flomax | Brand Only | tamsulosin (generic Flomax) |
| Flovent Diskus | Single Source Brand | Arnuity Ellipta, QVAR RediHaler |
| Flovent HFA | Multisource Brand Without Generic | Arnuity Ellipta, QVAR RediHaler |
| Floxin 0.3% Otic | Brand Only | ofloxacin 0.3% solution (generic Floxin Otic, Ocuflax) |
| Fluorouracil 0.5% cream | Single Source Brand | fluorouracil 5% (generic Efudex), Fluoroplex 1% cream |
| fluoxetine 60 mg tablets | Generic Only | fluoxetine capsules (generic Prozac) |
| Fluticasone furoate/Vilanterol Ellipta | Multisource Brand without Generic | fluticasone propionate/salmeterol (generic Advair Diskus), Advair HFA, Breo Ellipta, Symbicort |
| Fluticasone propionate HFA | Multisource Brand without Generic | Arnuity Ellipta, QVAR RediHaler |
| Fluticasone-salmeterol HFA | Multisource Brand without Generic | fluticasone propionate/salmeterol (generic Advair Diskus), Advair HFA, Breo Ellipta, Symbicort |
| Focalin (brand only) | Brand Only | dexmethylphenidate (generic Focalin) |
| Fortamet | Brand & Generic | Use Medical Necessity |

| | | |
|---------------------------|---------------------|--|
| Forteo | Brand Only | alendronate (generic Fosamax), ibandronate (generic Boniva) |
| Fortesta | Single Source Brand | Testim |
| Fosrenol chewable tablets | Brand & Generic | Use step therapy |
| Fotivda | Single Source Brand | Afinitor, Cabometyx, Inlyta, Lenvima, Nexavar, Votrient, Sutent AR, CO, DE, IL, LA, MD, MN, NV - Coverage of oncology medications may be approved based on state mandates. See State Mandate Overview Document for specifics |
| Fragmin | Single Source Brand | enoxaparin (generic Lovenox) |
| Frova | Brand Only | Must try frovatriptan (Frova) plus two of the following: almotriptan (Axert), eletriptan (Relpax), naratriptan (generic Amerge), rizatriptan (Maxalt/Maxalt MLT), sumatriptan (Imitrex), zolmitriptan (Zomig) |
| Fulphila | Single Source Brand | Neulasta, Udenyca |
| Fycompa | Single Source Brand | carbamazepine (generic Tegretol), divalproex (generic Depakote), lamotrigine (generic Lamictal), oxcarbazepine (generic Trileptal), topiramate (generic Topamax) |
| Fynetra | Single Source Brand | Neulasta, Udenyca |
| Gastrocrom | Brand Only | cromolyn oral concentrate (generic Gastrocrom) |
| Gelnique | Single Source Brand | Must try one of: oxybutynin (generic Ditropan), oxybutynin extended-release (generic Ditropan XL), Oxytrol OTC and All of the following: solifenacin (generic Vesicare), tolterodine (generic Detrol), trospium (generic Sanctura) |
| Gemtesa | Single Source Brand | Must try one of: oxybutynin (generic Ditropan), oxybutynin extended-release (generic Ditropan XL), Oxytrol OTC and All of the following: solifenacin (generic Vesicare), tolterodine (generic Detrol), trospium (generic Sanctura) |
| Genadur | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| Genadur Kit | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| Generess FE | Brand & Generic | norethindrone/ethinyl estradiol 24 FE 1/0.02 mg [Blisovi 24 FE, Junel 24 FE, Larin 24 FE, LoMedia 24 FE, (branded generic Loestrin 24 FE)], and norethindrone/ethinyl estradiol FE 1/0.02 mg [Blisovi FE, Junel FE, Larin FE, Microgestin FE, Tarina FE (branded generic Loestrin FE)] |

| | | |
|-------------------------------------|---------------------|--|
| | | DC, Oregon, Connecticut, California, Delaware, Illinois, Maryland, Massachusetts, New Jersey, New York, and West Virginia only: approve if provider states medically necessary |
| Genotropin and Genotropin MiniQuick | Single Source Brand | ONE of the following: <ul style="list-style-type: none"> • Nutropin AQ; OR • Nutropin AQ NuSpin |
| Geodon | Brand Only | ziprasidone (generic Geodon), olanzapine (generic Zyprexa), quetiapine (generic Seroquel), risperidone (generic Risperdal), aripiprazole tablets (generic Abilify) Minnesota: See State Mandate Overview Document |
| Gialax kit | Single Source Brand | PEG-3350 (generic Miralax) |
| Giazo | Single Source Brand | balsalazide (generic Colazal), sulfasalazine (generic Azulfidine), Apriso (brand) |
| Gimoti | Single Source Brand | metoclopramide (generic Reglan) |
| Gilenya 0.5mg | Brand Only | fingolimod (generic Gilenya) |
| GlucaGen Hypokit | Single Source Brand | glucagon (generic Glucagon Emergency Kit), Baqsimi, Zegalogue |
| Glucagon Emergency Kit (Lilly) | Brand Only | glucagon (generic Glucagon Emergency Kit), Baqsimi, Zegalogue |
| Glumetza | Brand & Generic | Use Medical Necessity |
| Glycate | Brand Only | glycopyrrolate (generic Robinul) |
| Gocovri | Single Source Brand | amantadine IR (generic Symmetrel) |
| Gonitro | Single Source Brand | nitroglycerin sublingual tablet (generic Nitrostat) |
| Gralise | Single Source Brand | gabapentin (generic Neurontin) |
| Granix | Single Source Brand | Zarxio |
| Halog 0.1% solution | Single Source Brand | fluocinonide 0.05% gel/solution (generic Lidex), desoximetasone 0.05% gel (generic Topicort) |
| Halog cream | Brand Only | betamethasone dipropionate augmented 0.05% cream (generic Diprolene AF), fluocinonide 0.05% cream (generic Lidex cream) |
| Halog ointment | Single Source Brand | betamethasone (generic Diprosone), amcinonide (generic Cyclocort), desoximetasone (generic Topicort), fluocinolone (generic Synalar) |

| | | |
|-------------------------|---------------------|--|
| Helidac | Single Source Brand | Omeclamox |
| Helixate FS | Single Source Brand | Kogenate FS, Kovaltry, Novoeight, Nuwiq |
| Hemady | Single Source Brand | dexamethasone tablet |
| Hemangeol oral solution | Single Source Brand | propranolol tablet (generic Inderal), propranolol oral suspension (generic Inderal) Maryland only: Approve for FDA approved indications. All other indications must try propranolol |
| Hepsera | Brand Only | adefovir (generic Hepsera) |
| Hidex 6-day pack | Single Source Brand | dexamethasone |
| Histex | Legend Medication | OTC triprolidine |
| Histex-AC Syrup | Single Source Brand | guaifenesin/codeine solution (cheratussin AC) |
| Horizant | Single Source Brand | Must try one: gabapentin (generic Neurontin) or ropinirole (generic Requip)or pramipexole (generic Mirapex) |
| HPR | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| HPR Plus | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| HPR Plus Hydrogel | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| HPR Plus/MB Hydrogel | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| Humalog Tempo Pen | Single Source Brand | Humalog KwikPen, Insulin Lispro KwikPen (unbranded Humalog), Lyumjev KwikPen In Florida, Maine, and Tennessee only, diabetes medications may be approved based on both of the following: 1) Provider attests use of this product is medically necessary; and- 2) If applicable, clinical characteristics exist that preclude the use of the covered preferred alternative(s) and use of the covered preferred alternative(s) could result in worsening of patient's condition or inadequate treatment (document alternatives and clinical information related to worsening/inadequate treatment). |

| | | |
|---|---------------------|---|
| Humalog vial | Single Source Brand | insulin lispro vial (unbranded Humalog) In Florida, Maine, and Tennessee only, diabetes medications may be approved based on both of the following: 1) Provider attests use of this product is medically necessary; and- 2) If applicable, clinical characteristics exist that preclude the use of the covered preferred alternative(s) and use of the covered preferred alternative(s) could result in worsening of patient's condition or inadequate treatment (document alternatives and clinical information related to worsening/inadequate treatment). |
| Humatin | Brand Only | paromomycin (generic Humatin) |
| Humatrope | Single Source Brand | ONE of the following: • Nutropin AQ; OR • Nutropin AQ NuSpin |
| Hycodan | Single Source Brand | hydrocodone/homatropine 5/1.5 mg/5 mL (generic Hycodan) |
| Hycofenix | Single Source Brand | guaifenesin/codeine solution (cheratussin AC) |
| Hydrocodone/ Guaifenesin Solution 2.5/200 mg/5 mL | Single Source Brand | guaifenesin/codeine solution (cheratussin AC) |
| hydrocortisone cream & lotion | Brand & Generic | OTC hydrocortisone |
| Hylatopic Plus | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| Hysingla extended-release | Brand Only | Use Medical Necessity MN, NV - Coverage of medications to treat conditions associated with cancer may be approved based on state mandates. See State Mandate Overview Document for specifics. |
| Hyzaar | Brand Only | candesartan HCT (generic Atacand HCT), irbesartan HCT (generic Avalide), losartan HCT (generic Hyzaar), valsartan HCT (generic Diovan HCT), Edarbyclor, olmesartan/hydrochlorothiazide (generic Benicar HCT) |
| Ibsrela | Single Source Brand | Use Step Therapy |
| Icy Hot PM | Single Source Brand | OTC capsaicin patches |
| Ilevro | Single Source Brand | bromfenac ophthalmic solution (generic Bromday, Xibrom), diclofenac ophthalmic solution (generic Voltaren), ketorolac ophthalmic solution (generic Acular), Nevanac |

| | | |
|--|-----------------------------------|---|
| Ilumya | Single Source Brand | Use Medical Necessity criteria |
| Imitrex (Injections & Tablets) | Brand Only | naratriptan (generic Amerge), rizatriptan (generic Maxalt), sumatriptan (generic Imitrex), zolmitriptan (generic Zomig) |
| Imodium | Brand & Generic Legend Medication | OTC Imodium (loperamide) |
| Impeklo 0.05% lotion | Single Source Brand | betamethasone 0.05% augmented gel (generic Diprolene), clobetasol propionate 0.05% gel (generic Temovate), clobetasol 0.05% solution (generic Temovate) |
| Impoyz | Single Source Brand | betamethasone dipropionate augmented 0.05% cream (generic Diprolene AF), fluocinonide 0.05% cream (generic Lidex cream) |
| Imuran | Brand Only | azathioprine (generic Imuran) |
| Incruse Ellipta | Single Source Brand | Spiriva Respimat/HandiHaler |
| Inderal LA | Brand Only | propranolol extended-release capsule (generic Inderal LA) |
| Inderal XL | Single Source Brand | propranolol (generic Inderal), propranolol extended-release (generic Inderal LA) |
| Indocin | Brand Only | indomethacin (generic Indocin) |
| Ingrezza | Single Source Brand | Use Medical Necessity or Step Therapy |
| Innopran | Brand & Generic | propranolol (generic Inderal) |
| Innopran XL | Single Source Brand | propranolol (generic Inderal), propranolol extended-release (generic Inderal LA) |
| Inspra | Brand Only | eplerenone (generic Inspra) |
| Insulin Aspart | Single Source Brand | Use Step Therapy |
| Insulin Aspart Protamine/Insulin Aspart | Single Source Brand | Use Step Therapy |
| Insulin glargine vial, SoloStar (Lantus vial/Lantus SoloStar Authorized Brand Alternative) | Single Source Brand | Must try all: Lantus, Toujeo In Florida, Maine, and Tennessee only, medications prescribed for diabetes may be approved based on both of the following: 1) Provider attests use of this product is medically necessary for the treatment of diabetes; and- 2) If applicable, clinical characteristics exist that preclude the use of the covered preferred alternative(s) and use of the covered preferred alternative(s) could result in worsening of patient's condition or inadequate treatment (document |

| | | |
|---|--|--|
| | | alternatives and clinical information related to worsening/inadequate treatment). |
| Insulin Lispro | Authorized generic (Single Source Brand) | Humalog vial or Humalog KwikPen In Florida, Maine, and Tennessee only, medications prescribed for diabetes may be approved based on both of the following: 1) Provider attests use of this product is medically necessary for the treatment of diabetes; and- 2) If applicable, clinical characteristics exist that preclude the use of the covered preferred alternative(s) and use of the covered preferred alternative(s) could result in worsening of patient's condition or inadequate treatment (document alternatives and clinical information related to worsening/inadequate treatment). |
| Intermezzo | Brand & Generic | Two week trial of: zolpidem (generic Ambien), zaleplon (generic Sonata), eszopiclone (generic Lunesta) |
| Intrarosa | Single Source Brand | Imvexxy, Osphena, Premarin cream |
| Invega | Brand and Generic | olanzapine (generic Zyprexa),quetiapine (generic Seroquel), risperidone (generic Risperdal), ziprasidone (generic Geodon), aripiprazole tablets (generic Abilify) Minnesota: See State Mandate Overview Document |
| Invokamet | Single Source Brand | Use Step Therapy |
| Invokamet XR | Single Source Brand | Use Step Therapy |
| Invokana | Single Source Brand | Use Nonformulary criteria |
| Isordil Titradose | Brand Only | isosorbide dinitrate (generic Isordil Titradose) |
| isosorbide dinitrate 40mg | Generic Only | isosorbide dinitrate 2 x 20 mg (generic Isordil Titradose) |
| Isotretinoin 25mg and 35mg (generic Absorica) | Generic Only | BOTH of the following: (1) Must try isotretinoin 10mg, 20mg, 30mg, or 40mg AND (2) Must try all of the following: (a) Amnesteem (b) Claravis (c) Myorisan (d) Zenatane |
| Isturisa | Single Source Brand | cabergoline (generic Dostinex), Signifor |
| Ixinity | Single Source Brand | BeneFIX, Rixubis |
| Jadenu | Brand Only | deferasirox (generic Jadenu) |

| | | |
|---|---------------------|--|
| Jalyn | Brand & Generic | dutasteride (generic Avodart) + tamsulosin (generic Flomax) |
| Jatenzo | Single Source Brand | Testim |
| Javygtor | Brand Only | sapropterin (generic Kuvan) |
| Jornay PM | Single Source Brand | methylphenidate extended-release capsule (generic Metadate CD or Ritalin LA), Concerta (note trial of generic is acceptable), brand Adderall XR |
| Jublia | Single Source Brand | Use Medical Necessity |
| Juxtapid | Single Source Brand | Repatha |
| Kadian | Brand Only | Use med nec or step therapy MN, NV - Coverage of medications to treat conditions associated with cancer may be approved based on state mandates. See State Mandate Overview Document for specifics. |
| Kapvay | Brand & Generic | guanfacine extended-release (generic Intuniv) |
| Karbinal ER | Single Source Brand | carbinoxamine tablets (generic Palgic) |
| Katerzia suspension | Single Source Brand | Must try both: amlodipine (generic Norvasc), Norliqva solution |
| Kenalog Spray | Brand Only | triamcinolone spray (generic Kenalog) |
| Kendall Amorphous Hydrogel Wound Dressing | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| Keppra | Brand Only | levetiracetam (generic Keppra) |
| Keppra XR | Brand Only | levetiracetam extended-release (generic Keppra XR) |
| Keralac 47% cream | Brand & Generic | urea 40% |
| Keralyt Scalp Kit | Single Source Brand | salicylic acid shampoo, salicylic acid gel |
| Kerendia | Single Source Brand | Angiotensin converting enzyme (ACE) inhibitor (e.g., lisinopril), angiotensin receptor blocker (e.g., losartan) |
| Kerydin | Brand Only | Use Medical Necessity |
| Ketodan Kit | Single Source Brand | ketoconazole cream (generic Nizoral) |
| ketoprofen (generic Orudis) | Generic only | diclofenac (generic Cataflam, Voltaren), flurbiprofen (generic Ansaid), ibuprofen (generic Motrin), naproxen (generic Naprosyn) |

| | | |
|--|-----------------------------------|--|
| ketoprofen extended-release (generic Oruvail) | Generic only | diclofenac (generic Cataflam, Voltaren), flurbiprofen (generic Ansaid), ibuprofen (generic Motrin), naproxen (generic Naprosyn) |
| Kevzara | Single Source Brand | Cimzia, Humira, Olumiant, Rinvoq, Simponi, Xeljanz/Xeljanz XR |
| Khedezla | Single Source Brand | venlafaxine extended-release capsule (generic Effexor XR) |
| Kisqali | Single Source Brand | Ibrance AR, CO, DE, IL, LA, MD, MN, NV - Coverage of oncology medications may be approved based on state mandates. See State Mandate Overview Document for specifics |
| Kitabis Pak | Single Source Brand | tobramycin 300 mg /4 mL (generic Bethkis) |
| Kombiglyze XR | Brand Only | saxagliptin/metformin extended-release (generic Kombiglyze XR) |
| Kuvan | Brand Only | sapropterin (generic Kuvan) |
| Lactic Acid with vitamin E (ammonium lactate) OR Lactic Acid cream & lotion (Lac Hydrin 12%) | Brand & Generic Legend Medication | OTC Lac-Hydrin (ammonium lactate) |
| lactulose (generic Kristalose) | Generic Only | lactulose oral solution |
| Lamictal (brand only) | Brand Only | lamotrigine (generic Lamictal) |
| Lamictal Chewable Dispersible | Brand Only | lamotrigine (generic Lamictal) |
| Lamictal ODT | Brand Only | lamotrigine (generic Lamictal) |
| Lamictal XR (Lamotrigine ER) | Brand & Generic | Four week trial of each: levetiracetam generic Keppra), divalproex sodium (generic Depakote), lamotrigine (generic Lamictal), carbamazepine (generic Tegretol), phenytoin (generic Dilantin) |
| lamotrigine ODT (generic Lamictal ODT) | Generic Only | lamotrigine (generic Lamictal) |
| Lanreotide | Single Source Brand | Somatuline Depot |
| Latuda | Brand Only | lurasidone (generic Latuda) Minnesota: See State Mandate Overview Document |
| Lazanda | Single Source Brand | fentanyl citrate lozenges (generic Actiq) |
| Lescol XL | Brand & Generic | atorvastatin (generic Lipitor), fluvastatin (generic Lescol), lovastatin (generic Mevacor), pravastatin (generic Pravachol), simvastatin (generic Zocor), rosuvastatin (generic Crestor) |
| Letairis | Brand Only | ambrisentan (generic Letairis) |

| | | |
|---|---|---|
| Levemir (All dosage forms) | Single Source Brand | Use separate Levemir (insulin detemir) - All Primary Review Types guideline In Florida, Maine, and Tennessee only, diabetes medications may be approved based on both of the following: 1) Provider attests use of this product is medically necessary; and- 2) If applicable, clinical characteristics exist that preclude the use of the covered preferred alternative(s) and use of the covered preferred alternative(s) could result in worsening of patient's condition or inadequate treatment (document alternatives and clinical information related to worsening/inadequate treatment). |
| Levitra | Brand Only | ildenafil (generic Levitra) |
| levonorgestrel / ethinyl estradiol (generic LoSeasonique) | Generic Only | levonorgestrel/ethinyl estradiol 0.15mg-0.03mg [Iclevia, Introvale, Jolessa, Setlakin (generics for Seasonale)] |
| levorphanol tablet (generic Levo-Dromoran) | Generic Only (2 mg & 3 mg Essential PDL Only) | hydromorphone tablet (generic Dilaudid), morphine tablet (generic MS-IR), oxycodone immediate release tablet (generic Roxicodone) |
| Levulan | Single Source Brand | imiquimod 5% cream (generic Aldara) |
| Lexette | Brand and Authorized generic | betamethasone 0.05% augmented gel (generic Diprolene), clobetasol propionate 0.05% gel (generic Temovate), clobetasol 0.05% solution (generic Temovate) |
| Lexiva | Brand Only | fosamprenavir (generic Lexiva) |
| Lialda | Brand Only | mesalamine delayed-release (generic Delzicol), mesalamine delayed-release (generic Lialda), Apriso |
| Librax | Brand and Generic | dicyclomine (generic Bentyl), hyoscyamine (generic Levsin) |
| Licart | Single Source Brand | OTC Voltaren gel |
| Lidoderm | Brand Only | lidocaine transdermal patch (generic Lidoderm) |
| Lipofen | Brand & Generic | Must try ALL of the following: 1. One of the following: fenofibrate 48mg, 54mg, 145mg, or 160mg tablet (generic Lofibra, Tricor, Triglide); AND 2. One of the following: fenofibrate micronized capsule 43mg or 130mg (generic Antara); AND 3. One of the following: fenofibrate micronized capsule 67mg, 134mg, or 200mg (generic Lofibra, Tricor) |

| | | |
|--------------------|---------------------|--|
| Livalo | Single Source Brand | atorvastatin (generic Lipitor), fluvastatin (generic Lescol), lovastatin (generic Mevacor), pravastatin (generic Pravachol), simvastatin (generic Zocor), rosuvastatin (generic Crestor) |
| Livmarli | Single Source Brand | cholestyramine (generic Questran), rifampin, naltrexone (generic Revia), sertraline (generic Zoloft) |
| Lo Loestrin FE | Single Source Brand | norethindrone/ethinyl estradiol FE 1/0.02 mg [Blisovi FE, Junel FE, Larin FE, Microgestin FE, Tarina FE (branded generic for Loestrin FE)] DC, Oregon, Connecticut, California, Delaware, Illinois, Maryland, Massachusetts, New Jersey, New York, and West Virginia only: approve if provider states medically necessary |
| Locoid Lipocream | Brand & Generic | hydrocortisone butyrate (generic Locoid) cream ointment or solution |
| Locoid Lotion | Brand & Generic | hydrocortisone butyrate (generic Locoid) cream ointment or solution |
| Lodine | Brand Only | etodolac (generic Lodine) |
| Lodosyn | Brand Only | carbidopa (generic Lodosyn) |
| Loestrin 1.5/30 | Brand Only | norethindrone/ethinyl estradiol 1.5 mg/30 mcg [Aurovela, Hailey, Junel 1.5/30, Larin, Microgestin (generic Loestrin 1.5/30)] DC, Oregon, Connecticut, California, Delaware, Illinois, Maryland, Massachusetts, New Jersey, New York, and West Virginia only: approve if provider states medically necessary |
| Loestrin 1/20 | Brand Only | norethindrone/ethinyl estradiol 1 mg/20 mcg [Aurovela, Junel 1/20, Larin, Microgestin (generic Loestrin 1/20)] DC, Oregon, Connecticut, California, Delaware, Illinois, Maryland, Massachusetts, New Jersey, New York, and West Virginia only: approve if provider states medically necessary |
| Loestrin FE 1.5/30 | Brand Only | norethindrone/ethinyl estradiol 1.5 mg/30 mcg [Aurovela FE, Blisovi FE, Hailey FE, Junel FE, Larin FE, Microgestin FE, (generic Loestrin FE 1.5/30)] DC, Oregon, Connecticut, California, Delaware, Illinois, Maryland, Massachusetts, New Jersey, New York, and West Virginia only: approve if provider states medically necessary |
| Loestrin FE 1/20 | Brand Only | norethindrone/ethinyl estradiol [Aurovela FE, Blisovi FE, Hailey FE, Junel FE, Larin FE, Microgestin FE, Tarina FE (generics for Loestrin FE 1/20)] DC, Oregon, Connecticut, California, Delaware, Illinois, Maryland, Massachusetts, New Jersey, New York, and West Virginia only: approve if provider states medically necessary |
| Lofena | Brand and Generic | diclofenac tablets (generic Cataflam, generic Voltaren) |
| Lonhala Magnair | Single Source Brand | Use Medical Necessity |

| | | |
|------------------------------------|---------------------|--|
| Lonsurf | Single Source Brand | Stivarga AR, CO, DE, IL, LA, MD, MN, NV - Coverage of oncology medications may be approved based on state mandates. See State Mandate Overview Document for specifics |
| Loprox 0.77% cream | Brand Only | ciclopirox 0.77% cream (generic Loprox) |
| Loprox 0.77% suspension | Brand Only | ciclopirox 0.77% suspension (generic Loprox) |
| Loprox Shampoo | Brand Only | ciclopirox shampoo (generic Loprox Shampoo) |
| Loreev XR | Single Source Brand | lorazepam (generic Ativan) |
| Lorzone | Brand and Generic | cyclobenzaprine HCL (generic Flexeril), carisoprodol (Soma 350mg), methocarbamol (generic Robaxin), chlorzoxazone (generic Parafon Forte DSC), tizanidine (Zanaflex Tablets) |
| LoSeasonique (brand only) | Brand Only | levonorgestrel/ethinyl estradiol 0.15mg-0.03mg [Iclevia, Introvale, Jolessa, Setlakin (generics for Seasonale)] |
| Lotemax 0.5% ophthalmic suspension | Brand Only | loteprednol 0.5% ophthalmic suspension (generic Lotemax) |
| Lotemax Gel | Brand & Generic | loteprednol 0.5% suspension (generic Lotemax) |
| Lotrel | Brand Only | amlodipine/benazepril (generic Lotrel) |
| Lotrimin 1% cream & solution | Legend Medication | OTC Lotrimin (clotrimazole) |
| Lotronex | Brand Only | alosetron (generic Lotronex) |
| Lovaza | Brand and Generic | fenofibrate 54, 160mg (generic Lofibra, Triglide); |
| Lovenox | Brand Only | enoxaparin (generic Lovenox) |
| Lucemyra | Single Source Brand | clonidine tablet (generic Catapres) |
| Lumakras | Single Source Brand | Use Notification guideline AR, CO, DE, IL, LA, MD, MN, NV - Coverage of oncology medications may be approved based on state mandates. See State Mandate Overview Document for specifics |
| Lupkynis | Single Source Brand | mycophenolate mofetil (generic Cellcept), prednisone |
| Luxiq | Brand & Generic | betamethasone lotion (generic Valisone), triamcinolone 0.025% lotion (generic Kenalog) |
| Luzu | Brand & Generic | ciclopirox (generic Loprox), econazole (generic Spectazole), ketoconazole (generic Nizoral) |
| Lybalvi | Single Source Brand | Use Medical Necessity |
| Lymepak | Single Source Brand | doxycycline hyclate 100 mg (generic Morgidox, Vibramycin), doxycycline monohydrate 100 mg (generic Monodox) |

| | | |
|----------------------|--|--|
| Lyrica | Brand Only (Capsule) Brand & Generic (Solution) | gabapentin(generic Neurontin), pregabalin capsule (generic Lyrica); Allow approval for seizure diagnosis |
| Lyrica CR | Single Source Brand | gabapentin (generic Neurontin), duloxetine (generic Cymbalta), amitriptyline (generic Elavil), pregabalin (generic Lyrica) |
| Lyumjev Tempo Pen | Single Source Brand | Humalog KwikPen, Insulin Lispro KwikPen (unbranded Humalog), Lyumjev KwikPen In Florida, Maine, and Tennessee only, diabetes medications may be approved based on both of the following: 1) Provider attests use of this product is medically necessary; and- 2) If applicable, clinical characteristics exist that preclude the use of the covered preferred alternative(s) and use of the covered preferred alternative(s) could result in worsening of patient's condition or inadequate treatment (document alternatives and clinical information related to worsening/inadequate treatment). |
| Lyvispah granules | Single Source Brand | Must try both: baclofen (generic Lioresal), Ozobax |
| Marplan | Single Source Brand | phenelzine (generic Nardil), tranylcypromine (generic Parnate) |
| Maxalt | Brand Only | Must try rizatriptan (Maxalt/Maxalt MLT) plus two of the following: almotriptan (Axert), eletriptan (Relpax), frovatriptan (Frova), naratriptan (generic Amerge), sumatriptan (generic Imitrex), zolmitriptan (Zomig) |
| Maxalt- MLT | Brand Only | Must try rizatriptan (Maxalt/Maxalt MLT) plus two of the following: almotriptan (Axert), eletriptan (Relpax), frovatriptan (Frova), naratriptan (generic Amerge), sumatriptan (generic Imitrex), zolmitriptan (Zomig) |
| MB Hydrogel | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| Meclizine (Antivert) | Brand & Generic Legend Medication | OTC Meclizine |
| Mektovi | Single Source Brand | Use Step Therapy AR, CO, DE, IL, LA, MD, MN, NV - Coverage of oncology medications may be approved based on state mandates. See State Mandate Overview Document for specifics |
| Mephyton | Brand Only | phytonadione (generic Mephyton) |
| Mepron Suspension | Generic Only | atovaquone suspension (generic Mepron) |

| | | |
|------------------------|------------------------------------|--|
| Mestinon 60 mg tablet | Brand Only | pyridostigmine (generic Mestinon) |
| Mestinon Timespan | Brand Only | pyridostigmine extended-release tablet (generic Mestinon Timespan) |
| Metadate CD | Brand Only | Brand Adderall XR, Brand Concerta, methylphenidate extended-release capsule (generic Metadate CD or Ritalin LA) (note trial of generic is acceptable) |
| Metadate ER | Brand & Generic | Brand Adderall XR, Brand Concerta, methylphenidate extended-release capsule (generic Metadate CD or Ritalin LA) (note trial of generic is acceptable) |
| Metformin 625mg | Generic Only | metformin (generic Glucophage, generic Glucophage XR) In Florida, Maine, and Tennessee only, medications prescribed for diabetes may be approved based on both of the following: 1) Provider attests use of this product is medically necessary for the treatment of diabetes; and- 2) If applicable, clinical characteristics exist that preclude the use of the covered preferred alternative(s) and use of the covered preferred alternative(s) could result in worsening of patient's condition or inadequate treatment (document alternatives and clinical information related to worsening/inadequate treatment). |
| Methocarbamol 1000mg | Generic Only | Methocarbamol 500mg (generic Robaxin) |
| Methylin (brand only) | Brand Only | methylphenidate solution (generic Methylin) |
| Metoprolol 37.5, 75 mg | Generic Only (Single Source Brand) | metoprolol (25, 50, 100 mg strengths) (generic Lopressor) |
| Metozolv ODT | Brand & Generic | metoclopramide (generic Reglan) |
| Metrogel 0.75% Vaginal | Brand Only | metronidazole 0.75% vaginal gel (generic Metrogel-Vaginal) |
| Metrogel 1% | Brand & Generic | metronidazole gel 0.75% (generic Metrogel) |
| Micardis | Brand Only | candesartan (generic Atacand), eprosartan (generic Teveten), irbesartan (generic Avapro), losartan (generic Cozaar), telmisartan (generic Micardis), valsartan (generic Diovan), Edarbi, olmesartan (generic Benicar) |
| Micardis HCT | Brand Only | candesartan HCT (generic Atacand HCT), irbesartan HCT (generic Avalide), losartan HCT (generic Hyzaar), valsartan HCT (generic Diovan HCT), Edarbyclor, olmesartan/hydrochlorothiazide (generic Benicar HCT) |
| Micort-HC 2.5% Cream | Brand | hydrocortisone 2.5% cream |
| Microcyn | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |

| | | |
|--------------------------------------|-----------------------------------|---|
| Migranal | Brand and Generic | naratriptan (generic Amerge), rizatriptan (generic Maxalt/Maxalt MLT), sumatriptan (generic Imitrex), zolmitriptan (generic Zomig/Zomig-ZMT) |
| Minastrin 24 FE | Brand Only | norethindrone/ethinyl estradiol FE 1/0.02 mg [Blisovi FE, Junel FE, Larin FE, Microgestin FE, Tarina FE (branded generics for Loestrin FE)] DC, Oregon, Connecticut, California, Delaware, Illinois, Maryland, Massachusetts, New Jersey, New York, and West Virginia only: approve if provider states medically necessary |
| Minivelle | Brand Only | estradiol patch (generic Minivelle), Vivelle-Dot |
| Minocin 50mg, 75mg and 100mg | Brand Only | minocycline immediate release capsules (generic Minocin) |
| minocycline tablet (Generic Dynacin) | Generic Only | minocycline immediate release capsules (generic Minocin) |
| Minolira | Single Source Brand | minocycline immediate-release capsules (generic Minocin) |
| Mirapex ER | Brand & Generic | pramipexole (generic for Mirapex) |
| Mircette | Brand Only | desogestrel/ethinyl estradiol [Azurette, Bekyree, Kariva, Pimtree, Simliya, Viorele, Volnea (generic Mircette)] DC, Oregon, Connecticut, California, Delaware, Illinois, Maryland, Massachusetts, New Jersey, New York, and West Virginia only: approve if provider states medically necessary |
| Mobic | Brand Only | meloxicam (generic Mobic) |
| Moderiba Tablet and Pak | Generic Only | ribavirin (generic for Copegus, Rebetol) |
| Monodox | Brand Only | Must Try One: doxycycline hyclate (generic Vibramycin, Vibra-Tab), doxycycline monohydrate 50 and 100mg (generic Monodox) |
| Morgidox Kit | Single Source Brand | Must Try One: doxycycline hyclate (generic Vibramycin, Vibra-Tab), doxycycline monohydrate 50 and 100mg (generic Monodox) |
| Motofen | Single Source Brand | diphenoxylate/atropine (generic Lomotil) |
| Motrin Suspension, Pedia-Profen | Brand & Generic Legend Medication | OTC Motrin (ibuprofen) |
| Movantik | Single Source Brand | Symproic |
| MS Contin | Brand Only | Use Medical Necessity |
| Multaq | Single Source Brand | amiodarone (generic Cordarone, Pacerone) |
| Mycapssa | Single Source Brand | octreotide (generic Sandostatin) |

| | | |
|---|-----------------------------------|--|
| Mydayis | Single Source Brand | Brand Adderall XR, Brand Concerta, methylphenidate extended-release capsule (generic Metadate CD or Ritalin LA) (note trial of generic is acceptable) |
| Myfortic | Brand Only | mycophenolate sodium, delayed release (generic Myfortic) |
| Mysoline (brand only) | Brand Only | primidone (generic Mysoline) |
| Mytesi | Single Source Brand | OTC Imodium; atropine/diphenoxylate (generic Lomotil) |
| Naftin 1% & 2% Cream, Gel | Brand & Generic | ciclopirox (generic Loprox), econazole (generic Spectazole), ketoconazole (generic Nizoral) |
| Nalfon | Brand & Generic | ibuprofen (generic Motrin), naproxen (generic Aleve, Naprosyn) |
| Nalocet/oxycodone-acetaminophen 2.5-300mg | Multisource Brand Without Generic | oxycodone/acetaminophen (generic Percocet) |
| Namenda | Brand Only | memantine (generic Namenda) |
| Namenda XR | Brand Only | memantine immediate-release (generic Namenda) |
| Namzaric | Single Source Brand | galantamine (generic Razadyne), memantine (generic Namenda), rivastigmine (generic Exelon) |
| Naprelan | Brand & Generic | naproxen sodium (generic Naprosyn) |
| Naprosyn oral suspension | Brand & Generic | OTC Naproxen, OTC Ibuprofen suspension |
| Naprosyn tablets | Brand Only | naproxen tablets (generic Naprosyn) |
| Nasonex | Brand & Generic | flunisolide (generic Nasarel), fluticasone (generic Flonase), Zetonna, Nasacort OTC, Flonase OTC, Rhinocort OTC (flonase OTC and fluticasone (generic Flonase) count as one alternative) |
| Natesto | Single Source Brand | Testim |
| Natroba | Brand Only | spinosad (generic Natroba) |
| Nebupent (brand only) | Brand Only | pentamidine (generic Nebupent) |
| Neevo DHA | Single Source Brand | prenatal plus |
| Neoral | Single Source Brand | cyclosporine modified (generic Neoral) |
| Neosalus | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| Neosalus Cp | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |

| | | |
|---|-----------------------------------|---|
| Neo-Synalar | Single Source Brand | OTC Triple Antibiotic Ointment plus fluocinolone 0.025% cream (generic Synalar), |
| Neo-Synalar Kit | Single Source Brand | OTC Triple Antibiotic Ointment plus fluocinolone 0.025% cream (generic Synalar), |
| Neuac kit | Single Source Brand | clindamycin 1.2% /benzoyl peroxide 5% gel (generic Duac), clindamycin solution + OTC benzoyl peroxide |
| Neupogen (Vial & Syringe) | Brand Only | 1. For patients 12 years of age and younger - Approve 2. For patients > 12 years of age - Must try Zarxio |
| Neupro | Single Source Brand | pramipexole (generic Mirapex), ropinirole (generic Requip) For Parkinson only must ALSO try: rivastigmine; galantamine; |
| Neurontin (brand only) | Brand Only | gabapentin (generic Neurontin) |
| Nexavar | Brand Only | sorafenib (generic Nexavar) AR, CO, DE, IL, LA, MD, MN, NV - Coverage of oncology medications may be approved based on state mandates. See State Mandate Overview Document for specifics. |
| Nexiclon XR(clonidine extended-release) | Multisource Brand Without Generic | clonidine (generic Catapres) |
| Nexium Capsules | Brand & Generic Legend Medication | omeprazole (generic Prilosec), pantoprazole (generic Protonix) tablet, rabeprazole (generic Aciphex) tablet |
| Nextstellis | Single Source Brand | Yaz, Yasmin DC, Oregon, Connecticut, California, Delaware, Illinois, Maryland, Massachusetts, New Jersey, New York, and West Virginia only: approve if provider states medically necessary |
| Niacin ER | Generic Only | Niaspan |
| Niacor | Generic Only | Niaspan |
| Niaspan | Brand Only | niacin extended-release (generic Niaspan) |
| Nicazaldoxy 30 kit (Doxycycline plus MVI) | Single Source Brand | Must try one: doxycycline hyclate (generic Vibramycin, Vibra-Tab), doxycycline monohydrate 50 and 100mg (generic Monodox) |
| Nilandron | Brand & Generic | bicalutamide (generic Casodex) |
| Nitisinone | Generic Only | Orfadin |
| Nitrolingual | Brand & Generic | nitroglycerin spray (generic Nitromist), nitroglycerin sublingual tablet (generic Nitrostat) |
| Nityr | Brand Only | Orfadin |
| Nivatopic Plus | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |

| | | |
|--|---------------------|--|
| Nivestym | Single Source Brand | Zarxio |
| Norco | Brand Only | hydrocodone/acetaminophen (generic Norco) |
| Norgesic Forte | Brand & Generic | Must try one: OTC aspirin + cyclobenzaprine tablet (generic Flexeril), chlorzoxazone (generic Parafon Forte DSC) methocarbamol (generic Robaxin), orphenadrine extended-release (generic Norflex), or tizanidine (Zanaflex Tablets) |
| Northera | Brand and Generic | Use Medical Necessity criteria |
| Norvasc | Brand Only | amlodipine (generic Norvasc) |
| Norvir | Brand Only | ritonavir tablets (generic Norvir) |
| Nourianz | Single Source Brand | Use Medical Necessity |
| Novolin (includes Relion) | Single Source Brand | Use Step Therapy |
| Novolin 70/30 (Includes Novolin 70/30 Relion) | Single Source Brand | Use Step Therapy |
| Novolin N (Includes Novolin N Relion) | Single Source Brand | Use Step Therapy |
| Novolin R (Includes Novolin R Relion) | Single Source Brand | Use Step Therapy |
| Novolog (All dosage forms) | Single Source Brand | Use Step Therapy |
| Noxafil tablets | Brand Only | posaconazole tablets (generic Noxafil) |
| Nuvaring | Brand only | etonogestrel/ethinyl estradiol vaginal ring (generic Nuvaring) DC, Oregon, Connecticut, California, Delaware, Illinois, Maryland, Massachusetts, New Jersey, New York, and West Virginia only: approve if provider states medically necessary |
| Nuessa | Single Source Brand | metronidazole 0.75% vaginal gel (generic Metrogel-Vaginal) |
| Nuvigil | Brand Only | armodafinil (generic Nuvigil) |
| nystatin/triamcinolone (generic Mycolog II) cream and ointment | Generic Only | nystatin cream or ointment (generic Mycostatin) + triamcinolone 0.1% cream or ointment (generic Kenalog) |
| Nyvepria | Single Source Brand | Neulasta, Udenyca |
| Ofev | Single Source Brand | Esbriet |

| | | |
|-------------------|---------------------|--|
| Olux | Brand & Generic | betamethasone 0.05% augmented gel (generic Diprolene), clobetasol propionate 0.05% gel (generic Temovate), clobetasol 0.05% solution (generic Temovate) |
| Olux-E | Brand & Generic | betamethasone 0.05% augmented gel (generic Diprolene), clobetasol propionate 0.05% gel (generic Temovate), clobetasol 0.05% solution (generic Temovate) |
| Omnaris | Single Source Brand | flunisolide (generic Nasarel), fluticasone (generic Flonase), Zetonna, Nasacort OTC, Flonase OTC, Rhinocort OTC (flonase OTC and fluticasone (generic Flonase) count as one alternative) |
| Omnipod 5 | Single Source Brand | Use Medical Necessity |
| Omnitrope | Single Source Brand | ONE of the following: <ul style="list-style-type: none"> • Nutropin AQ; OR • Nutropin AQ NuSpin |
| Onexton 1.2-3.75% | Brand and Generic | clindamycin topical solution (generic Cleocin T) + OTC benzoyl peroxide, clindamycin-benzoyl peroxide (generic Duac) 1.2%-5% |
| Ongentys | Single Source Brand | carbidopa/levodopa (generic Sinemet), entacapone (generic Comtan), tolcapone (generic Tasmar) |
| Onglyza | Brand Only | saxagliptin (generic Onglyza) |
| Onmel | Single Source Brand | itraconazole (generic for Sporanox) |
| Onzetra Xsail | Single Source Brand | sumatriptan nasal spray (generic Imitrex) |
| Opana ER | Single Source Brand | use med nec |
| Optivar | Brand Only | azelastine (generic for Optivar), olopatadine (generic Patanol), Lastacaft, OTC Pataday, OTC Zaditor |
| Opzelura | Single Source Brand | betamethasone dipropionate cream 0.05% (generic Diprosone), desoximetasone cream 0.05% (generic Topicort), fluocinonide cream 0.05% (generic Lidex), mometasone furoate cream 0.1% (generic Elocon), pimecrolimus (generic Elidel), tacrolimus (generic Protopic), triamcinolone acetonide cream 0.5% (generic Aristocort) |
| Oracea | Brand and Generic | Must try two: doxycycline hyclate 50 mg, 100 mg (generic Morgidox, Vibramycin), doxycycline hyclate 20 mg (generic Periostat), doxycycline monohydrate 50 mg, 100 mg (generic Monodox) |
| Orencia | Single Source Brand | Use medical necessity |

| | | |
|------------------------|-----------------------------------|---|
| Orladeyo | Single Source Brand | Use Medical Necessity |
| Orphengesic Forte | Brand & Generic | OTC aspirin + cyclobenzaprine tablet (generic Flexeril), chlorzoxazone (generic Parafon Forte DSC) methocarbamol (generic Robaxin), orphenadrine extended-release (generic Norflex), or tizanidine (Zanaflex Tablets) |
| Ortho Tri-Cyclen Lo | Brand Only | norgestimate/ethinyl estradiol Lo 0.18-0.215-0.25/0.025 mg [Tri-Lo-Estarylla, Tri-Lo-Marzia, Tri-Lo-Sprintec, Trinessa Lo (branded generics Ortho Tri-Cyclen Lo)] DC, Oregon, Connecticut, California, Delaware, Illinois, Maryland, Massachusetts, New Jersey, New York, and West Virginia only: approve if provider states medically necessary |
| Ortikos | Single Source Brand | budesonide extended-release (generic Entocort EC) |
| Osmolex ER | Single Source Brand | amantadine immediate-release |
| OsmoPrep | Single Source Brand | polyethylene glycol powder (generic Glycolax), PEG (generic Golytely), Sutab, Suprep |
| Otovel | Single Source Brand | ofloxacin 0.3% solution (generic Floxin, Ocuflax) |
| Ovace Plus 9.8% lotion | Single Source Brand | sulfacetamide sodium 10% lotion, gel |
| Ovace Plus Foam | Single Source Brand | sulfacetamide sodium 10% lotion, gel |
| Oxaydo | Single Source Brand | oxycodone immediate-release (generic Roxicodone) |
| Oxbryta | Single Source Brand | Use Medical Necessity |
| Oxistat Cream | Brand & generic | Use Medical Necessity |
| Oxistat Lotion | Single Source Brand | ciclopirox (generic Loprox), econazole (generic Spectazole), ketoconazole (generic Nizoral) |
| Oxycontin | Brand & Generic | Use med nec or step therapy MN, NV - Coverage of medications to treat conditions associated with cancer may be approved based on state mandates. See State Mandate Overview Document for specifics. |
| Oxytrol | Brand & Generic Legend Medication | Must try one of: oxybutynin (generic Ditropan), oxybutynin extended-release (generic Ditropan XL), Oxytrol OTC and All of the following: solifenacin (generic Vesicare), tolterodine (generic Detrol), trospium (generic Sanctura) |

| | | |
|-----------------------------------|-----------------------------------|--|
| Palyzinq | Single Source Brand | sapropterin (generic Kuvan) |
| Pamelor | Brand Only | nortriptyline (generic Pamelor) |
| Pancreaze | Single Source Brand | Creon, Zenpep |
| Panlor | Single Source Brand | acetaminophen/codeine |
| Parlodel | Brand only | bromocriptine (generic Parlodel) |
| Pataday | Brand & Generic | OTC ketotifen (Zaditor), OTC olopatadine (Pataday), azelastine ophthalmic solution (generic Optivar), olopatadine ophthalmic solution (generic Patanol), Lastacaft |
| Patanase | Brand & Generic | azelastine nasal spray (generic Astelin) |
| Patanase | Brand Only | olopatadine 0.6% nasal spray (generic Patanase) |
| Patanol | Brand Only | OTC ketotifen (Zaditor), OTC olopatadine (Pataday), azelastine ophthalmic solution (generic Optivar), olopatadine ophthalmic solution (generic Patanol), Lastacaft |
| Paxil | Brand Only | paroxetine (generic Paxil) |
| Paxil CR | Brand Only | paroxetine extended-release (generic Paxil CR) |
| Pazeo | Single Source Brand | OTC ketotifen (Zaditor), OTC olopatadine (Pataday), azelastine ophthalmic solution (generic Optivar), olopatadine ophthalmic solution (generic Patanol), Lastacaft |
| Pcp 100 Kit | Single Source Brand | metoclopramide (generic Reglan) + OTC magnesium citrate + OTC Miralax, + OTC bisacodyl + OTC CereLyte 50 |
| penicillamine (generic Cuprimine) | Generic Only | penicillamine titratabs (generic Depen) |
| Penlac Nail Lacquer | Brand Only | ciclopirox 8% solution (generic Penlac Nail Lacquer) |
| Pepcid Tablets | Brand & Generic Legend Medication | OTC Pepcid AC (famotidine) |
| Perforomist | Single Source Brand | Striverdi Respimat |
| Pheburane | Single Source Brand | sodium phenylbutyrate (generic Buphenyl) |
| Phexxi gel | Single Source Brand | OTC spermicides |
| Picato | Single Source Brand | imiquimod 5% cream (generic Aldara) |

| | | |
|---|---------------------|---|
| Pifeltro | Single Source Brand | Symfi, Symfi Lo, Triumeq |
| Plaquenil | Brand Only | hydroxychloroquine (generic Plaquenil) |
| Plavix | Brand Only | clopidogrel (generic Plavix) |
| Plexion 9.8-4.8% cream, liquid, lotion | Single Source Brand | sulfacetamide sodium/sulfur 10-5% |
| Plexion Cloth 9.8%-4.8% pads | Single Source Brand | sulfacetamide sodium/sulfur 10-5% |
| Ponstel (Mefenamic Acid) | Brand & Generic | ibuprofen (generic Motrin), naproxen (generic Naprosyn) |
| Ponvory | Single Source Brand | fingolimod (generic Gilenya) |
| PR Cream | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| Praluent | Single Source Brand | Use Medical Necessity |
| Pramosone E | Single Source Brand | hydrocortisone/pramoxine |
| Pravachol | Brand Only | pravastatin (generic Pravachol) |
| Pred Forte 1% | Brand Only | prednisolone 1% ophthalmic suspension (generic Pred Forte) |
| prednisolone solution 5mg/5ml, 25mg/5ml, 20mg/5ml, 10mg/5ml | Generic Only | prednisolone sodium phosphate 15mg/5mL (generic Prelone) |
| Preferaob One | Single Source Brand | prenatal plus |
| Pregenna | Single Source Brand | Brand and generic prenatal vitamins |
| Premarin | Single Source Brand | estradiol tablets (generic Estrace), Estrace vaginal cream |
| Prempro | Single Source Brand | medroxyprogesterone (generic Provera) + estradiol (generic Estrace) |
| Prenara | Single Source Brand | Brand and generic prenatal vitamins |
| Prenatrix | Single Source Brand | Brand and generic prenatal vitamins |
| Prescription Benzoyl Peroxide Products-multiple strengths and | Brand & Generic | TWO OTC benzoyl peroxide formulations |

| | | |
|--|-----------------------------------|---|
| dosage forms (ex-cleanser, cleansing pad, cream, creamy wash, gel, etc.) | | |
| Presera | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| Prestalia | Single Source Brand | perindopril (generic Aceon) plus amlodipine (generic Norvasc) |
| Prevacid Capsules | Brand & Generic Legend Medication | omeprazole (generic Prilosec), pantoprazole (generic Protonix) tablet, rabeprazole (generic Aciphex) tablet, Prevacid 24 hour |
| Prevacid Solutab | Brand Only | lansoprazole delayed-release orally disintegrating tablet (generic Prevacid Solutab), omeprazole (generic Prilosec), pantoprazole (generic Protonix), OTC - Nexium, Prilosec, Prevacid, Zegerid |
| Prevpac | Brand & Generic | Omeclamox-Pak |
| Prezista | Brand Only | darunavir (generic Prezista) |
| Prilosec Capsules | Brand Only Legend Medication | omeprazole (generic Prilosec), pantoprazole (generic Protonix) tablet, rabeprazole (generic Aciphex) tablet |
| Prilosec Suspension | Brand & Generic | omeprazole (generic Prilosec), pantoprazole (generic Protonix), rabeprazole (generic Aciphex), OTC Nexium, OTC Prevacid, OTC Prilosec, OTC Zegerid |
| Primlev | Single Source Brand | oxycodone/acetaminophen (generic Percocet) |
| Pristiq | Brand and Generic | venlafaxine extended-release capsule (Effexor XR) |
| ProAir Digihaler | Single Source Brand | albuterol sulfate HFA (generic ProAir HFA, Proventil HFA) |
| Procardia XL | Brand Only | nifedipine extended-release tablet (generic Procardia XL) |
| ProCentra (brand only) | Brand Only | dextroamphetamine solution (generic Procentra) |
| Procort | Single Source Brand | hydrocortisone acetate/pramoxine HCl |
| Procrit | Single Source Brand | Retacrit |
| Proctocort | Brand Only | hydrocortisone 1% cream (generic Proctocort), hydrocortisone 30 mg suppository (generic Proctocort) |
| Procysbi | Single Source Brand | Cystagon |
| Proglycem | Brand Only | diazoxide (generic Proglycem) |
| Prolate 10/300 mg (oxycodone/acetaminophen) solution | Single Source Brand | oxycodone/acetaminophen (generic Percocet) |

| | | |
|---|---------------------|--|
| Prolate 5/300 mg (oxycodone/acetaminophen) tablet | Single Source Brand | oxycodone/acetaminophen (generic Percocet) |
| Prolensa | Single Source Brand | bromfenac ophthalmic solution (generic Bromday, Xibrom), diclofenac ophthalmic solution (generic Voltaren), ketorolac ophthalmic solution (generic Acular), Nevanac |
| Prometrium | Brand Only | progesterone (generic Prometrium) |
| Promiseb Complete Kit | Single Source Brand | Promiseb |
| Proscar | Brand Only | finasteride (generic Proscar) |
| Protonix | Brand Only | omeprazole (generic Prilosec), pantoprazole (generic Protonix), rabeprazole (generic Aciphex), OTC Nexium, OTC Prevacid, OTC Prilosec, OTC Zegerid |
| Protonix Granules for Suspension | Brand & Generic | omeprazole (generic Prilosec), pantoprazole (generic Protonix), rabeprazole (generic Aciphex), OTC Nexium, OTC Prevacid, OTC Prilosec, OTC Zegerid |
| Protopic | Brand Only | tacrolimus ointment (generic Protopic) |
| Proventil | Single Source Brand | albuterol sulfate HFA (generic ProAir HFA, Proventil HFA) |
| Proventil HFA | Brand Only | albuterol sulfate HFA (generic ProAir HFA, Proventil HFA) |
| Provigil | Brand Only | modafinil |
| Prozac Weekly | Brand Only | fluoxetine capsules (generic Prozac) |
| Pruclair | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| Prudoxin | Brand Only | betamethasone dipropionate cream 0.05% (generic Diprosone), desoximetasone cream 0.05% (generic Topicort), fluocinonide cream 0.05% (generic Lidex), mometasone furoate cream 0.1% (generic Elocon), triamcinolone acetonide cream 0.5% (generic Aristocort) |
| Prumyx | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| Pulmicort Flexhaler | Single Source Brand | Arnuity Ellipta, QVAR RediHaler |
| Pulmicort inhalation suspension | Brand Only | budesonide inhalation suspension (generic Pulmicort) |
| Pylera | Brand & Generic | Omeclamox-Pak |
| Pyridostigmine 30 mg | Single Source Brand | pyridostigmine 60 mg (generic Mestinon) |
| Qdolo | Single Source Brand | tramadol 50 mg (generic Ultram) |
| Qelbree | Single Source Brand | Use Medical Necessity |

| | | |
|--------------------------------------|---------------------|---|
| Qinlock | Single Source Brand | Nexavar, Tasgina, or Votrient, or everolimus (generic Afinitor) plus one of the following: imatinib (generic Gleevec), Sutent, Stivarga AR, CO, DE, IL, LA, MD, MN, NV - Coverage of oncology medications may be approved based on state mandates. See State Mandate Overview Document for specifics |
| Qmiiz ODT | Single Source Brand | meloxicam (generic Mobic) |
| Qnasl | Single Source Brand | flunisolide (generic Nasarel), fluticasone (generic Flonase), Zetonna, Nasacort OTC, Flonase OTC, Rhinocort OTC (flonase OTC and fluticasone (generic Flonase) count as one alternative) |
| Qtern | Single Source Brand | Use Step Therapy |
| Quartette | Brand & Generic | levonorgestrel/ethinyl estradiol 0.15/0.03 mg [Introvale, Jolessa, , Quasense, Setlakin (branded generic Seasonale)], levonorgestrel/ethinyl estradiol [Amethia, Ashlyna, Camrese, Daysee, (generic Seasonique)] , levonorgestrel/ethinyl estradiol 0.1 mg/20 mcg/10 mcg [Amethia Lo, Camrese Lo, (generic LoSeasonique)] DC, Oregon, Connecticut, California, Delaware, Illinois, Maryland, Massachusetts, New Jersey, New York, and West Virginia only: approve if provider states medically necessary |
| Quillichew ER | Single Source Brand | Brand Adderall XR, Brand Concerta, methylphenidate extended-release capsule (generic Metadate CD or Ritalin LA) (note trial of generic is acceptable) |
| Quillivant XR | Single Source Brand | Brand Adderall XR, Brand Concerta, methylphenidate extended-release capsule (generic Metadate CD or Ritalin LA) (note trial of generic is acceptable) |
| Qulipta | Single Source Brand | Use Step Therapy or medical necessity |
| Quviviq | Single Source Brand | Use Step Therapy |
| Rabeprazole delayed-release sprinkle | Single Source Brand | omeprazole (generic Prilosec), pantoprazole (generic Protonix), rabeprazole (generic Aciphex), OTC Nexium, OTC Prevacid, OTC Prilosec, OTC Zegerid |
| Radiagel | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| RadiaPlexRX | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| Ranexa | Brand Only | ranolazine (generic Ranexa) |
| Rapaflo | Brand Only | silodosin (generic Rapaflo) |
| Rapamune Tablet | Brand Only | sirolimus (generic Rapamune) |

| | | |
|--|-----------------------------------|---|
| Rayaldee | Single Source Brand | calcitriol (generic Rocaltrol), doxercalciferol (generic Hectorol), paricalcitol (generic Zemplar) |
| Rebinyn | Single Source Brand | Benefix, Rixubis, Alprolix, Idelvion |
| Rectiv | single Source Brand | OTC bowel forming agents; nifedipine (generic Procardia), diltiazem (generic Cardizem) Maryland only: approve |
| Reditrex | Single Source Brand | methotrexate tablets, Rasuvo |
| Releuko | Single Source Brand | Zarxio |
| Relexxii/methylphenidate extended-release 45mg, 63mg | Multisource Brand Without Generic | Brand Adderall XR, Brand Concerta, methylphenidate extended-release capsule (generic Metadate CD or Ritalin LA) (note trial of generic is acceptable) |
| Relexxii 72mg | Brand & Generic | Brand Adderall XR, Brand Concerta, methylphenidate extended-release capsule (generic Metadate CD or Ritalin LA) (note trial of generic is acceptable) |
| Relistor Tablet | Single Source Brand | Symproic |
| Relpax | Brand Only | eletriptan (generic Relpax), naratriptan (generic Amerge), rizatriptan (generic Maxalt), sumatriptan (generic Imitrex), zolmitriptan (generic Zomig) |
| Reltone | Single Source Brand | ursodiol (generic Actigall) |
| Remeron | Brand Only | mirtazapine (generic Remeron) |
| Remeron SolTab | Brand Only | mirtazapine (generic Remeron) |
| Renagel | Brand Only | sevelamer (generic Renagel) |
| Renvela | Brand Only | sevelamer carbonate (generic Renvela) |
| Repatha | Single Source Brand | atorvastatin (generic Lipitor), simvastatin (generic Zocor), pravastatin (generic Pravachol), rosuvastatin (generic Crestor) |
| Requip XL | Brand & Generic | ropinirole (Requip) |
| Restasis MultiDose | Single Source Brand | OTC artificial tears, Restasis Single Use vials |
| Retin-A Cream | Brand Only | OTC Differin gel, tretinoin cream (generic Retin-A) |
| Retin-A Gel | Brand & Generic | OTC Differin gel, tretinoin cream (generic Retin-A) |
| Retin-A Micro & Retin-A Micro Pump | Brand & Generic | OTC Differin gel, tretinoin cream (generic Retin-A) |
| Revatio suspension | Brand Only | sildenafil (generic Revatio) |
| Revatio tablets | Brand Only | sildenafil (generic Revatio) |

| | | |
|------------------------|---------------------|--|
| Rexulti | Single Source Brand | olanzapine (generic Zyprexa), quetiapine (generic Seroquel), risperidone (generic Risperdal), ziprasidone (generic Geodon), aripiprazole tablets (generic Abilify) Minnesota: See State Mandate Overview Document |
| Reyataz Capsules | Brand Only | atazanavir (generic Reyataz) |
| Reyvow | Single Source Brand | Use Step Therapy or medical necessity |
| Rezurock | Single Source Brand | prednisone, cyclosporine (generic Neoral, generic Sandimmune), tacrolimus (generic Prograf), mycophenolate (generic Cellcept), sirolimus (generic Rapamune), Jakafi |
| Rezvoglar KwikPen | Single Source Brand | Lantus, Toujeo In Florida, Maine, and Tennessee only, diabetes medications may be approved based on both of the following: 1) Provider attests use of this product is medically necessary; and- 2) If applicable, clinical characteristics exist that preclude the use of the covered preferred alternative(s) and use of the covered preferred alternative(s) could result in worsening of patient's condition or inadequate treatment (document alternatives and clinical information related to worsening/inadequate treatment). |
| Riax | Single Source Brand | benzoyl peroxide |
| Ribasphere Ribapak | Generic Only | ribavirin (generic for Copegus, Rebetol) |
| Ridaura | Single Source Brand | sulfasalazine (generic Azulfidine), methotrexate, leflunomide (generic Arava), hydroxychloroquine (generic Plaquenil) |
| Rilutek (brand only) | Brand Only | riluzole (generic Rilutek) |
| Riomet | Brand Only | metformin tablets (generic Glucophage), metformin oral solution (generic Riomet) |
| Risperdal | Brand Only | risperidone (generic Risperdal) Minnesota: See State Mandate Overview Document |
| Ritalin LA | Brand Only | Brand Adderall XR, Brand Concerta, methylphenidate extended-release capsule (generic Metadate CD or Ritalin LA) (note trial of generic is acceptable) |
| Ritalin tablets | Brand Only | methylphenidate tablets (generic Ritalin) |
| Robinul | Brand Only | glycopyrrolate tablet (generic Robinul) |
| Robinul Forte | Brand Only | glycopyrrolate tablet (generic Robinul Forte) |
| Rocaltrol (brand only) | Brand Only | calcitriol (generic Rocaltrol) |
| Rosadan Cream Kit | Single Source Brand | metronidazole cream (generic Metrocream), metronidazole 0.75% gel (generic Metrogel) |
| Rosadan Gel Kit | Single Source Brand | metronidazole gel 0.75% (generic Metrogel), metronidazole lotion (generic Metrolotion) |

| | | |
|--------------------------|-----------------------------------|--|
| Rosula | Single Source Brand | sodium sulfacetamide/sulfur 10-5% |
| Roszet | Multisource Brand without Generic | ezetimibe (generic Zetia) plus rosuvastatin (generic Crestor) |
| Rowasa (brand only) | Brand Only | mesalamine rectal enema (generic Rowasa) |
| Roxicodone | Brand Only | oxycodone immediate-release (generic Roxicodone) |
| Roxybond | Single Source Brand | oxycodone immediate-release (generic Roxicodone) FL, MD and WV only: approve |
| Rozerem | Brand Only | Use Step Therapy |
| Ryaltris | Single Source Brand | olopatadine (generic Patanase) plus an over-the-counter nasal steroid (e.g., Nasonex Allergy), OR over-the-counter Astepro Allergy plus an over-the-counter nasal steroid (e.g., Nasonex Allergy) |
| Ryclora | Brand and Generic | OTC chlorpheniramine (generic Chlor-Trimeton) |
| Rytary | Single Source Brand | carbidopa/levodopa extended release tablet (generic Sinemet CR), carbidopa/levodopa (generic Sinemet) |
| Rythmol SR | Brand Only | propafenone extended-release capsules (generic Rythmol) |
| Ryvent 6mg Tablet | Brand & Generic | carbinoxamine tablets (generic Palgic) |
| Sabril powder pack | Brand Only | vigabatrin powder pack (generic Sabril) |
| Safyral | Brand & Generic | drospirenone/ethinyl estradiol (generic Yasmin), Yasmin + folic acid DC, Oregon, Connecticut, California, Delaware, Illinois, Maryland, Massachusetts, New Jersey, New York, and West Virginia only: approve if provider states medically necessary |
| Saizen | Single Source Brand | ONE of the following: • Nutropin AQ; OR • Nutropin AQ NuSpin |
| Sajazir | Generic Only | Icatibant acetate (generic Firazyr) |
| Samsca 15mg | Single Source Brand | Tolvaptan 15mg (Authorized brand alternative for Samsca) |
| Samsca 30mg (brand only) | Brand Only | tolvaptan 30mg (generic Samsca) |
| Sancuso | Single Source Brand | granisetron (generic Kytril) |
| Sandimmune Capsule | Brand Only | cyclosporine (generic Sandimmune) |
| Sandostatin | Brand Only | octreotide (generic Sandostatin) |
| Saphris | Brand Only | asenapine (generic Saphris) Minnesota: See State Mandate Overview Document |
| Sarafem | Brand & Generic | fluoxetine capsules (generic Prozac); Maryland only: approve |

| | | |
|---|---------------------|---|
| Savaysa | Single Source Brand | Eliquis, Pradaxa, Xarelto |
| Scemblix | Single Source Brand | imatinib (generic Gleevec), Bosulif, Iclusig, Sprycel, Tasigna AR, CO, DE, IL, LA, MD, MN, NV - Coverage of oncology medications may be approved based on state mandates. See State Mandate Overview Document for specifics. |
| Seasonique | Brand Only | levonorgestrel/ethinyl estradiol [Introvale, Jolessa, Quasense, Setlakin (generics for Seasonale)], levonorgestrel/ethinyl estradiol [Amethia, Ashlyna, Camrese, Daysee, Jaimiess, Simpesse (generics for Seasonique)] |
| Seconal | Brand & Generic | zolpidem (generic Ambien), zaleplon (generic Sonata), eszopiclone (generic Lunesta) |
| Segluromet | Single Source Brand | Use Step therapy |
| Selenium sulfide-pyrithione zinc in urea shampoo 2.3% | Brand & Generic | selenium sulfide shampoo |
| Selrx | Single Source Brand | selenium sulfide shampoo (generic Selsun shampoo) |
| Sensipar | Brand Only | calcium acetate (generic PhosLo), cinacalcet (generic Sensipar), sevelamer (generic Renagel), Velphoro |
| Sernivo spray | Single Source Brand | betamethasone lotion (generic Del-Beta) |
| Seroquel | Brand Only | quetiapine (generic Seroquel) Minnesota: See State Mandate Overview Document |
| Seroquel XR | Brand and Generic | olanzapine (generic Zyprexa), quetiapine (generic Seroquel), risperidone (generic Risperdal), ziprasidone (generic Geodon), aripiprazole tablets (generic Abilify) Minnesota: See State Mandate Overview Document |
| Serostim | Single Source Brand | Use Prior Authorization or Medical Necessity |
| Sertraline capsules 150 mg, 200 mg | Single Source Brand | sertraline tablets 25 mg, 50 mg, 100 mg (generic Zoloft) |
| Sevenfact | Single Source Brand | Novoseven |
| Seysara | Single Source Brand | minocycline immediate-release capsules (generic Minocin) and one of the following: doxycycline hyclate (generic Vibramycin), doxycycline monohydrate 50 mg and 100 mg (generic Monodox), |
| Sfrowasa | Single Source Brand | mesalamine (generic Rowasa) kit |

| | | |
|---------------------------------|-----------------------------------|---|
| Siklos | Single Source Brand | hydroxyurea (generic Hydrea), Droxia |
| Silenor | Brand and Generic | doxepin (generic Sinequan), zolpidem (generic Ambien), zaleplon (generic Sonata) Maryland only: zolpidem, zaleplon |
| Siliq | Single Source Brand | Use medical necessity |
| SilvaSorb | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| Simbrinza 1-0.2% | Single Source Brand | brimonidine (generic Alphagan) plus Azopt |
| Singulair Chewable Tablet | Brand Only | montelukast chewable tablet (generic Singulair) |
| Singulair Tablet | Brand Only | montelukast tablet (generic Singulair) |
| Sitavig | Single Source Brand | acyclovir capsule/tablet (generic Zovirax), famciclovir tablet (generic Famvir), valacyclovir tablet (generic Valtrex), OTC Abreva |
| Sivextro | Multisource Brand Without Generic | linezolid (generic Zyvox) |
| Skelaxin | Brand Only | cyclobenzaprine tablet (generic Flexeril), chlorzoxazone (generic Parafon Forte DSC), methocarbamol (generic Robaxin), tizanidine (generic Zanaflex), metaxalone (generic Skelaxin) |
| Skytrofa | Single Source Brand | Use Medical Necessity |
| Soaanz | Single Source Brand | Torseamide (generic Demadex) |
| Sodium Sulfacetamide/Sulfur Kit | Generic Only | sulfacetamide sodium/sulfur 10-5% |
| Solaraze | Brand & Generic | imiquimod 5% cream (generic Aldara) Allow approval for actinic cheilitis |
| Solodyn | Brand & Generic | Use med nec |
| Soltamox | Single Source Brand | tamoxifen (generic Nolvadex) AR, CO, DE, IL, LA, MD, MN, NV - Coverage of oncology medications may be approved based on state mandates. See State Mandate Overview Document for specifics. |
| Soma 250 mg | Brand & Generic | cyclobenzaprine tablet (generic Flexeril), carisoprodol (Soma 350mg), methocarbamol (generic Robaxin), chlorzoxazone (generic Parafon Forte DSC), tizanidine (Zanaflex Tablets) |
| Soma 350 mg tablets | Brand Only | carisoprodol 350 mg tablets (generic Soma) |
| Somatuline | Single Source Brand | octreotide (generic Sandostatin) AR, CO, DE, IL, LA, MD, MN, NV - Coverage of oncology medications may be approved based on |

| | | |
|-----------------|---------------------|--|
| | | state mandates. See State Mandate Overview Document for specifics |
| Somavert | Single Source Brand | octreotide (generic Sandostatin) |
| Soolantra | Brand & Generic | oral antibiotic (i.e., doxycycline, minocycline, tetracycline), metronidazole 0.75% cream, gel, or lotion |
| Soriatane | Brand Only | acitretin (generic Soriatane) |
| Sovaldi | Single Source Brand | Epclusa, Harvoni, Mavyret |
| Spectragel | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| Sporanox | Brand Only | itraconazole (generic for Sporanox) |
| Sprix | Single Source Brand | diclofenac (generic Cataflam, Voltaren), flurbiprofen (generic Ansaid), ibuprofen (generic Motrin), naproxen (generic Naprosyn) |
| SSS 10-5 | Single Source Brand | sulfacetamide sodium/sulfur 10-5% |
| Steglatro | Single Source Brand | Use Step Therapy |
| Steglujan | Single Source Brand | Use Step Therapy |
| Stimate | Single Source Brand | desmopressin spray (generic DDAVP); Maryland only- approve |
| Stimufend | Single Source Brand | Neulasta, Udenyca |
| Strattera | Brand Only | atomoxetine (generic Strattera) |
| Suboxone Film | Brand Only | Zubsolv, buprenorphine/naloxone (tablet or film) |
| Subsys | Single Source Brand | fentanyl citrate lozenges (generic for Actiq) MN, NV - Coverage of medications to treat conditions associated with cancer may be approved based on state mandates. See State Mandate Overview Document for specifics. |
| Sumadan Kit | Brand & Generic | sulfacetamide sodium/sulfur 10-5% |
| Sumadan Wash | Brand & Generic | sulfacetamide sodium/sulfur 10-5% |
| Sumadan XLT Kit | Single Source Brand | sulfacetamide sodium/sulfur 10-5% |
| Sumaxin | Single Source Brand | sulfacetamide sodium/sulfur 10-5% |
| Sumaxin CP | Single Source Brand | sulfacetamide sodium/sulfur 10-5% |

| | | |
|---------------------|---|--|
| Sumaxin TS | Brand Only | sulfacetamide sodium/sulfur 10-5% |
| Sumaxin Wash | Single Source Brand | sulfacetamide sodium/sulfur 10-5% |
| Sustiva capsules | Brand Only | efavirenz (generic Sustiva) |
| Sutent | Brand Only | sunitinib (generic Sutent) AR, CO, DE, IL, LA, MD, MN, NV - Coverage of oncology medications may be approved based on state mandates. See State Mandate Overview Document for specifics |
| Symax (Duotab) | Single Source Brand | hyoscyomine (generic Levsin SL), Symax (fastab) |
| Symlin Pen | Single Source Brand | Type II Diagnosis: One GLP-1 product; one SGLT-2 product; one DPP-4 product; metformin; Type I Diagnosis: Approve P&T Essential Drug In Florida, Maine, and Tennessee only, medications prescribed for diabetes may be approved based on both of the following: 1) Provider attests use of this product is medically necessary for the treatment of diabetes; and- 2) If applicable, clinical characteristics exist that preclude the use of the covered preferred alternative(s) and use of the covered preferred alternative(s) could result in worsening of patient's condition or inadequate treatment (document alternatives and clinical information related to worsening/inadequate treatment). |
| Sympazan | Single Source Brand | clobazam (generic Onfi), clonazepam (generic Klonopin), lamotrigine (generic Lamictal), topiramate (generic Topamax) |
| Synalar 0.01% | Brand Only | fluocinolone 0.01% solution (generic Synalar) |
| Synalar 0.025% | Brand Only | fluocinolone 0.025% cream, ointment (generic Synalar) |
| Synalar Kit | Single Source Brand | fluocinolone (generic for Synalar) |
| Synalar TS | Single Source Brand | fluocinolone (generic for Synalar) |
| Syprine | Brand Only | penicillamine (generic Cuprimine, Depen Titratabs) |
| Taclonex ointment | Brand & Generic | Enstilar foam |
| Taclonex Suspension | Generic only BOB Brand and Generic EPDL | betamethasone (generic Diprosone) + calcipotriene (generic Dovonex), Enstilar |
| Talicia | Single Source Brand | amoxicillin (generic Amoxil) + omeprazole (generic Prilosec) + rifabutin (generic Mycobutin) OR Omeclamox |
| Taltz | Single Source Brand | Use Medical Necessity or Step Therapy |

| | | |
|--------------------|--|---|
| Talzenna | Single Source Brand | Lynparza |
| Tamiflu | Brand Only | oseltamivir capsules (generic Tamiflu) |
| Tamiflu Suspension | Brand Only | oseltamivir suspension (generic Tamiflu) |
| Tarceva | Brand Only | erlotinib (generic Tarceva) AR, CO, DE, IL, LA, MD, MN, NV - Coverage of oncology medications may be approved based on state mandates. See State Mandate Overview Document for specifics. |
| Targadox | Brand and Generic | Must try one: doxycycline hyclate (generic Vibramycin, Vibra-Tab), doxycycline monohydrate 50 or 100mg (generic Monodox) |
| Targretin capsule | Brand Only | bexarotene capsule (generic Targretin) |
| Targretin gel | Brand Only | bexarotene gel (generic Targretin) |
| Tarka | Brand Only | trandolapril/verapamil extended-release tablet (generic Tarka) |
| Tarpeyo | Single Source Brand | prednisone, methylprednisolone |
| Tascenso ODT | Single Source Brand | fingolimod (generic Gilenya) |
| Tasmar | Generic Only | carbidopa/levodopa (generic Sinemet), entacapone (generic Comtan) |
| Tavneos | Single Source Brand | azathioprine (generic Imuran), cyclophosphamide (generic Cytoxan), glucocorticoids (e.g. prednisone, dexamethasone), mycophenolate (generic Cellcept), rituximab [e.g. Riabni, Rituxan, Ruxience, Truxima (medical benefit)] |
| Taytulla | Single Source Brand | 1 generic for Loestrin FE 1 generic for Loestrin 24 FE norethindrone/ethinyl estradiol 24 FE 1/0.02 mg [Blisovi 24 FE, Junel 24 FE, Larin 24 FE, LoMedia 24 FE, (branded generic Loestrin 24 FE)], and norethindrone/ethinyl estradiol FE 1/0.02 mg [Blisovi FE, Junel FE, Larin FE, Microgestin FE, Tarina FE (branded generic Loestrin FE)] DC, Oregon, Connecticut, California, Delaware, Illinois, Maryland, Massachusetts, New Jersey, New York, and West Virginia only: approve if provider states medically necessary |
| Tazorac | Brand & Generic Tazorac 0.05% cream and gel, Tazorac 0.1% cream (brand & generic), Tazorac 0.1% gel | OTC Differin, tretinoin cream (generic Retin-A) |

| | | |
|---|---------------------|---|
| Technivie | Single Source Brand | Epclusa, Harvoni Mavyret |
| Tegretol (brand only) | Brand Only | carbamazepine (generic Tegretol) |
| Tegretol-XR (brand only) | Brand Only | carbamazepine extended-release (generic Tegretol-XR) |
| Tekturna | Brand & Generic | candesartan (generic Atacand), eprosartan (generic Teveten), irbesartan (generic Avapro), losartan (generic Cozaar), telmisartan (generic Micardis), valsartan (generic Diovan), Edarbi, olmesartan (generic Benicar) |
| Tekturna HCT | Single Source Brand | candesartan HCT (generic Atacand HCT), irbesartan HCT (generic Avalide), losartan HCT (generic Hyzaar), valsartan HCT (generic Diovan HCT), Edarbyclor, olmesartan/hydrochlorothiazide (generic Benicar HCT) |
| Temixys | Single Source Brand | Cimduo |
| Temodar capsules | Brand Only | temozolomide (generic Temodar) AR, CO, DE, IL, LA, MD, MN, NV - Coverage of oncology medications may be approved based on state mandates. See State Mandate Overview Document for specifics. |
| Tenoretic | Brand Only | atenolol/chlorthalidone (generic Tenoretic) |
| Tenormin | Brand Only | atenolol (generic Tenormin) |
| Teriparatide | Brand Only | alendronate (generic Fosamax), ibandronate (generic Boniva) |
| testosterone topical gel (authorized generic) | Authorized Generic | Testim |
| Testosterone topical gel (generic Testim) | Generic Only | Testim |
| Tetravex gel | Single Source Brand | lidocaine 5% cream/ointment |
| Tev Tropin/Zomacton | Single Source Brand | ONE of the following: • Nutropin AQ; OR • Nutropin AQ NuSpin |
| Thalitone 15 mg | Single Source Brand | chlorthalidone (generic Hygronton) |
| Therabenzaprime | Single Source Brand | cyclobenzaprime (generic Flexeril), chlorzoxazone (generic Parafon Forte DSC), methocarbamol (generic Robaxin), tizanidine (generic Zanaflex) |
| Therahoney | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| Thyquidity | Single Source Brand | levothyroxine (generic Synthroid), Tirosint-Sol |
| Tirosint capsules | Brand & Generic | levothyroxine tablet (generic Synthroid) |

| | | |
|-------------------------------------|---------------------|--|
| Tirosint-SOL | Single Source Brand | levothyroxine (generic Synthroid) |
| Tlando capsule | Single Source Brand | Must try both: Androderm, Testim |
| Tobi Nebulized Solution | Brand & Generic | tobramycin 300 mg /4 mL (generic Bethkis) |
| Tobi Podhaler | Single Source Brand | tobramycin 300 mg /4 mL (generic Bethkis) |
| Tobradex ST | Single Source Brand | tobramycin/dexamethasone ophthalmic drops (generic for Tobradex) |
| Tolak 4% cream | Single Source Brand | fluorouracil 5% cream (generic Efudex) |
| Tolsura | Single Source Brand | itraconazole capsule (generic Sporanox) |
| Topamax (brand only) | Brand Only | topiramate (generic Topamax) |
| Topamax Sprinkle (brand only) | Brand Only | topiramate (generic Topamax) |
| Topicort Spray | Single Source Brand | desoximetasone 0.05% gel (generic Topicort) |
| Topiramate ER (generic Trokendi XR) | Generic Only | topiramate (generic Topamax) |
| Toprol XL | Brand Only | metoprolol succinate extended-release tablet (generic Toprol XL) |
| Tosymra | Single Source Brand | sumatriptan injection, nasal spray, tablets (generic Imitrex) |
| Toviaz (fesoterodine) | Brand & Generic | Must try one of: oxybutynin (generic Ditropan), oxybutynin extended-release (generic Ditropan XL), Oxytrol OTC and All of the following: solifenacin (generic Vesicare), tolterodine (generic Detrol), trospium (generic Sanctura) |
| Tramadol 100 mg | Generic only | Use 2 of the tramadol 50 mg (generic Ultram) |
| Transderm Scop | Brand Only | scopolamine transdermal patch (generic Transderm Scop) |
| Travatan Z | Brand & Generic | latanoprost (generic Xalatan), Lumigan |
| Treizix | Brand and Generic | acetaminophen/codeine |
| Trianex | Single Source Brand | triamcinolone ointment (generic Kenalog), fluocinolone 0.025% ointment (generic Synalar) |
| Tribenzor | Brand & Generic | amlodipine (generic Norvasc) + losartan/HCTZ (generic Hyzaar), amlodipine (generic Norvasc) + irbesartan/HCTZ (generic Avalide), amlodipine (generic Norvasc) + valsartan/HCTZ (generic Diovan HCT), amlodipine (generic Norvasc) + candesartan/HCTZ (generic Atacand HCT), amlodipine (generic Norvasc) + Edarbyclor, |

| | | |
|--|---------------------|--|
| | | amlodipine + olmesartan HCTZ (generic Benicar HCT) |
| Tricor | Brand Only | Must try ALL of the following: 1. One of the following: fenofibrate 48mg, 54mg, 145mg, or 160mg tablet (generic Lofibra, Tricor, Triglide); AND 2. One of the following: fenofibrate micronized capsule 43mg or 130mg (generic Antara); AND 3. One of the following: fenofibrate micronized capsule 67mg, 134mg, or 200mg (generic Lofibra, Tricor) |
| Trileptal (brand only) | Brand Only | oxcarbazepine (generic Trileptal) |
| Trilipix | Brand & Generic | Must try ALL of the following: 1. One of the following: fenofibrate 48mg, 54mg, 145mg, or 160mg tablet (generic Lofibra, Tricor, Triglide); AND 2. One of the following: fenofibrate micronized capsule 43mg or 130mg (generic Antara); AND 3. One of the following: fenofibrate micronized capsule 67mg, 134mg, or 200mg (generic Lofibra, Tricor) |
| Trinaz | Single Source Brand | Brand and generic prenatal vitamins |
| Trintellix | Single Source Brand | Minimum four week trial (document date and duration) of at least five of any formulation of the following: bupropion, citalopram, duloxetine, escitalopram, fluoxetine, fluvoxamine, paroxetine, sertraline, venlafaxine immediate release/extended-release capsule |
| Tropazone | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| Trospium chloride extended-release (generic Sanctura ER) | Generic Only | Must try one of: oxybutynin (generic Ditropan), oxybutynin extended-release (generic Ditropan XL), Oxytrol OTC and All of the following: solifenacin (generic Vesicare), tolterodine (generic Detrol), trospium (generic Sanctura) |
| Trudhesa | Single Source Brand | almotriptan (Axert), eletriptan (Relpax), frovatriptan (Frova), naratriptan (Amerge), rizatriptan (Maxalt/Maxalt MLT), sumatriptan (Imitrex) nasal spray/tablets, zolmitriptan (Zomig)] tablets, Zomig nasal spray |
| Trulance | Single Source Brand | Use Step Therapy or Prior Authorization Medical Necessity |
| Tudorza Pressair | Single Source Brand | Spiriva Handihaler/Resipmat |

| | | |
|--|------------------------------------|--|
| Tussionex (hydrocodone-chlorpheniramine) | Brand & Generic | guaifenesin/codeine (generic cheratussin AC) |
| Tuzistra XR | Single Source Brand | chlorpheniramine/hydrocodone/ pseudoephedrine (generic Zutripro), cheratussin AC (guaifenesin / codeine), Z-Tuss AC |
| Twirla | Single Source Brand | ethinyl estradiol/norelgestromin patch (generic Ortho Evra) DC, Oregon, Connecticut, California, Delaware, Illinois, Maryland, Massachusetts, New Jersey, New York, and West Virginia only: approve if provider states medically necessary |
| Twyneo cream | Single Source Brand | OTC benzoyl peroxide + OTC Differin gel or tretinoin cream (generic Retin A) |
| Twynsta | Brand & Generic | amlodipine/valsartan (generic Exforge), amlodipine (generic Norvasc) + [losartan (generic Cozaar), amlodipine (generic Norvasc) + irbesartan (generic Avapro), amlodipine (generic Norvasc) + telmisartan (generic Micardis), amlodipine (generic Norvasc) + candesartan (generic Atacand), amlodipine (generic Norvasc) + eprosartan (Teveten), amlodipine (generic Norvasc) + Edarbi, amlodipine (generic Norvasc) + valsartan (generic Diovan), amlodipine (generic Norvasc) + olmesartan (generic Benicar) |
| Tykerb | Brand Only | lapatinib tablet (generic Tykerb) AR, CO, DE, IL, LA, MD, MN, NV - Coverage of oncology medications may be approved based on state mandates. See State Mandate Overview Document for specifics. |
| Tymlos (requires Prior Authorization) | Single Source Brand | alendronate (generic Fosamax), ibandronate (generic Boniva) |
| Tyrvaya | Single Source Brand | OTC artificial tears, Restasis, Xiidra |
| Uceris (budesonide) tablet | Brand & Generic Essential PDL Only | sulfasalazine (generic Azulfidine), balsalazide (generic Colzal), Apriso (brand) |
| Uceris rectal foam | Brand Only | budesonide rectal foam (generic Uceris) |
| Uloric | Brand & Generic | allopurinol (generic Zyloprim) |
| Ultram | Brand Only | tramadol (generic Ultram) |
| UltraSal-ER | Legend Medication | OTC salicylic acid |
| Ultravate 0.05% lotion | Single Source Brand | betamethasone 0.05% augmented gel or lotion (generic Diprolene), clobetasol 0.05% solution or gel (generic Temovate) |
| Umecta emulsion, foam, suspension | Brand & Generic | urea 40% |
| Umecta Kit (nail film pen/film suspension) | Single Source Brand | urea 40% + hyaluronate gel 0.2% (Hylira) |

| | | |
|-----------------------------------|---------------------|---|
| Umecta PD | Single Source Brand | urea 40% |
| Upneeq | Single Source Brand | Use Medical Necessity |
| Uramaxin GT 45% | Single Source Brand | urea 40% |
| Uramaxin GT Kit | Single Source Brand | urea 40% |
| Urevaz 44% cream | Brand Only | urea 40% cream |
| Uroxatral | Brand Only | alfuzosin (generic Uroxatral), doxazosin (generic Cardura), terazosin (generic Hytrin), tamsulosin (generic Flomax) |
| Urso 250 | Brand Only | ursodiol (generic Actigall, generic Usro 250, generic Urso Forte) |
| Urso Forte | Brand Only | ursodiol (generic Actigall, generic Usro 250, generic Urso Forte) |
| Utopic (urea) 41% | Single Source Brand | urea 40% |
| Vacustim | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| Vagifem | Brand Only | estradiol vaginal tablet (Yuvafem (generic Vagifem)) |
| Valcyte | Brand Only | valganciclovir (generic Valcyte) |
| Valcyte oral solution | Brand Only | valganciclovir oral solution (generic Valcyte) |
| Vanos | Brand & Generic | fluocinonide cream (generic Lidex) |
| Varubi | Single Source Brand | aprepitant capsule (generic Emend) |
| Vascepa 0.5g capsule | Single Source Brand | Use Medical Necessity |
| Vascepa 1g capsule | Brand Only | Use Medical Necessity |
| Vascepa 1g capsule | Generic Only | Use Medical Necessity |
| Vascuderm | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| Vascuderm Hydrogel Wound Dressing | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| Vaseretic | Brand Only | enalapril/hydrochlorothiazide (generic Vaseretic) |
| Vasotec | Brand Only | enalapril (generic Vasotec) |
| Vectical | Brand Only | calcitriol ointment (generic Vectical) |
| Veltin | Single Source Brand | clindamycin gel, solution or lotion (generic Cleocin) + tretinoin cream (generic Retin-A) |

| | | |
|----------------------------------|---------------------|---|
| Vemlidy | Single Source Brand | Use Medical Necessity |
| Venlafaxine besylate ER 112.5 mg | Single Source Brand | venlafaxine extended release (generic Effexor XR) |
| Venlafaxine ER tablet | Brand & Generic | venlafaxine extended-release capsule (Effexor XR) |
| Veramyst | Single Source Brand | flunisolide (generic Nasarel), fluticasone (generic Flonase), Zetonna, Nasacort OTC, Flonase OTC, Rhinocort OTC (flonase OTC and fluticasone (generic Flonase) count as one alternative) |
| Verdeso | Single Source Brand | desonide lotion (generic Desowen) |
| Veregen | Single Source Brand | podofilox solution (generic Condylox), imiquimod (generic Aldara) |
| Verquvo | Single Source Brand | angiotensin converting enzyme (ACE) inhibitor (e.g., lisinopril), angiotensin receptor blocker (e.g., losartan), beta-blocker (e.g., metoprolol), diuretic (e.g., furosemide), spironolactone, Entresto, Jardiance |
| Versacloz | Single Source Brand | clozapine (generic Clozaril), clozapine orally disintegrating tablet (generic Fazaclo) Minnesota: See State Mandate Overview Document |
| Vesicare LS | Single Source Brand | Must try one of: oxybutynin (generic Ditropan), oxybutynin extended-release (generic Ditropan XL), Oxytrol OTC and All of the following: solifenacin (generic Vesicare), tolterodine (generic Detrol), trospium (generic Sanctura) |
| Viagra | Brand Only | sildenafil (generic Viagra), tadalafil (generic Cialis), and vardenafil (generic Levitra) |
| Vicodin 5/300 mg | Brand & Generic | hydrocodone/acetaminophen 5/325 mg (generic Norco) |
| Vicodin ES 7.5/300 mg | Brand & Generic | hydrocodone/acetaminophen 7.5/325 mg (generic Norco) |
| Vicodin HP 10/300 mg | Brand & Generic | hydrocodone/acetaminophen 10/325 mg (generic Norco) |
| Vigamox | Brand Only | moxifloxacin ophthalmic solution (generic Vigamox) |
| Viibryd | Brand Only | vilazodone (generic Viibryd) |
| Vimovo | Brand & Generic | naproxen (generic Naprosyn) + omeprazole (generic Prilosec), pantoprazole (generic Protonix), rabeprazole (generic Aciphex) |
| Vimpat | Brand & Generic | levetiracetam generic (Keppra), divalproex sodium (generic Depakote), lamotrigine (generic Lamictal), carbamazepine (generic Tegretol), phenytoin (generic Dilantin) (8 week trial of each except in Connecticut, Mississippi, and Kentucky) |
| Viramune | Brand Only | nevirapine (generic Viramune) |
| Viramune XR | Brand & Generic | nevirapine (generic Viramune) |
| Virasal | Brand & Generic | salicylic acid OTC |
| Viread | Brand Only | tenofovir (generic Viread) |

| | | |
|---------------------------------|---------------------|---|
| Vivelle-Dot | Brand only | estradiol TD twice weekly patch (generic Vivelle-Dot) |
| Vivlodex | Brand & Generic | meloxicam (generic Mobic) |
| Vocabria | Single Source Brand | Isentress, Tivicay |
| Vogelxo | Single Source Brand | Testim |
| Voltaren 1% gel | Brand & Generic | OTC Voltaren Arthritis Pain 1% gel |
| Vosevi | Single Source Brand | Harvoni, Epclusa |
| Votrient | Single Source Brand | sunitinib (generic Sutent) AR, CO, DE, IL, LA, MD, MN, NV - Coverage of oncology medications may be approved based on state mandates. See State Mandate Overview Document for specifics |
| Vuity 1.25% ophthalmic solution | Single Source Brand | Use Medical Necessity |
| Vumerity | Single Source Brand | Use Step Therapy or medical necessity |
| Vusion | Single Source Brand | nystatin Cream (generic Mycostatin), OTC miconazole cream |
| Vytorin | Brand and Generic | ezetimibe plus atorvastatin (generic Lipitor), ezetimibe plus lovastatin (generic Mevacor), ezetimibe plus pravastatin (generic Pravachol), ezetimibe plus simvastatin (generic Zocor), ezetimibe plus rosuvastatin (generic Crestor) |
| Vyvanse | Single Source Brand | lisdexamfetamine dimesylate (generic Vyvanse) |
| Vyzulta | Single Source Brand | timolol (generic Timoptic), latanoprost (generic Xalatan), Lumigan |
| Welchol | Brand Only | colesevelam (generic Welchol) |
| Wellbutrin | Brand Only | bupropion (generic Wellbutrin) |
| Winlevi | Single Source Brand | Use Medical Necessity |
| Wynzora | Single Source Brand | betamethasone (generic Diprosone) + calcipotriene (generic Dovonex), betamethasone/calcipotriene ointment (generic Taclonex), Enstilar |
| Xadago | Single Source Brand | selegiline (generic Eldepryl) |
| Xalatan (Brand Only) | Brand Only | latanoprost (generic Xalatan) |
| Xalkori | Single Source Brand | Use Nonform guideline AR, CO, DE, IL, LA, MD, MN, NV - Coverage of oncology medications may be approved based on |

| | | |
|------------------|---|--|
| | | state mandates. See State Mandate Overview Document for specifics. |
| Xartemis XR | Single Source Brand | oxycodone/acetaminophen (generic Percocet) |
| Xcopri | Single Source Brand | carbamazepine (generic Tegretol), divalproex (generic Depakote), gabapentin (generic Neurontin), lamotrigine (generic Lamictal), levetiracetam (generic Keppra), oxcarbazepine (generic Trileptal), phenytoin (generic Dilantin) |
| Xeloda | Brand Only | capecitabine (generic Xeloda) AR, CO, DE, IL, LA, MD, MN, NV - Coverage of oncology medications may be approved based on state mandates. See State Mandate Overview Document for specifics |
| Xenazine | Brand Only | tetrabenazine (generic Xenazine) |
| Xerese | Single Source Brand | acyclovir capsule/tablet (generic Zovirax), famciclovir tablet (generic Famvir), valacyclovir tablet (generic Valtrex), OTC Abreva |
| Xhance | Single Source Brand | fluticasone (generic Flonase) |
| Xifaxan | Single Source Brand | Use Medical Necessity criteria |
| Xigduo XR | Single Source Brand | Use Step Therapy |
| Ximino | Single Source Brand | minocycline immediate-release capsules (generic Minocin) |
| Xodol 10/300 mg | Brand & Generic | hydrocodone/acetaminophen 10/325 mg (generic Norco) |
| Xodol 5/300 mg | Brand & Generic | hydrocodone/acetaminophen 5/325 mg (generic Norco) |
| Xodol 7.5/300 mg | Brand & Generic | hydrocodone/acetaminophen 7.5/325 mg (generic Norco) |
| Xolegel | Single Source Brand | ketoconazole shampoo (generic Nizoral) |
| Xopenex HFA | Brand Only for BOB Brand and Generic for EPDL | albuterol sulfate HFA (generic ProAir HFA, Proventil HFA) |
| Xopenex Nebules | Multisource Brand Only | albuterol nebulized solution (generic Proventil Inhalation Solution) |
| Xultophy | Single Source Brand | Soliqua In Florida, Maine, and Tennessee only, medications prescribed for diabetes may be approved based on both of the following: 1) Provider attests use of this product is medically necessary for the treatment of diabetes; and- 2) If applicable, clinical characteristics exist that preclude the use of the covered preferred alternative(s) and use of the covered preferred |

| | | |
|--|---------------------------------------|---|
| | | alternative(s) could result in worsening of patient's condition or inadequate treatment (document alternatives and clinical information related to worsening/inadequate treatment). |
| Xyntha | Single Source Brand | Use Medical Necessity |
| Xyosted | Single Source Brand | testosterone injection, Testim |
| Xyrem | Multisource Brand without Generic | Use Prior Authorization or Medical Necessity |
| Sodium oxybate(Xyrem authorized generic) | Multisource Brand Without Generic | modafinil, armodafinil, Sunosi, Wakix |
| Xywav | Single Source Brand | armodafinil (generic Nuvigil), modafinil (generic Provigil), Sunosi, Wakix, Xyrem |
| Yonsa | Single Source Brand | Use Step Therapy AR, CO, DE, IL, LA, MD, MN, NV - Coverage of oncology medications may be approved based on state mandates. See State Mandate Overview Document for specifics |
| Yosprala | Single Source Brand | OTC aspirin plus omeprazole (Prilosec), OTC aspirin plus pantoprazole (Protonix) |
| Zalvit | Single Source Brand | Brand and generic prenatal vitamins |
| Zanabin Antipruritic Hydrogel | Single Source Brand | OTC Aquaphor, OTC Eucerin, OTC Lubriderm, OTC White Petroleum |
| Zantac Capsules/Tablets | Brand & Generic Legend Medication | OTC Zantac (ranitidine) |
| Zarah | Generic Only | Yasmin |
| Zavesca | Brand Only | miglustat (generic Zavesca) |
| Zcort | Single Source Brand | dexamethasone tablet |
| Zegerid capsule | (Brand and generic) Legend Medication | omeprazole (generic Prilosec), pantoprazole (generic Protonix) tablet, rabeprazole (generic Aciphex) tablet |
| Zegerid packet | Brand & Generic | omeprazole (generic Prilosec), pantoprazole (generic Protonix), rabeprazole (generic Aciphex), OTC Nexium, OTC Prevacid, OTC Prilosec, OTC Zegerid |
| Zelapar | Single Source Brand | selegiline (generic Eldepryl) |

| | | |
|---------------------|--|--|
| Zembrace | Single Source Brand | sumatriptan injection (generic Imitrex) |
| Zenzedi | Single Source Brand (2.5 mg & 7.5 mg) Brand & Generic for all other strengths | amphetamine/dextroamphetamine immediate-release (generic Adderall), dextroamphetamine extended-release (generic Dexedrine) |
| Zepatier | Single Source Brand | Epclusa, Harvoni, Mavyret |
| Zerviate | Single Source Brand | OTC ketotifen (Zaditor), OTC olopatadine (Pataday), azelastine ophthalmic solution (generic Optivar), olopatadine ophthalmic solution (generic Patanol), Lastacaft |
| Zestoretic | Brand Only | lisinopril/hydrochlorothiazide (generic Zestoretic) |
| Zestril | Brand Only | lisinopril (generic Zestril) |
| Zetia | Brand Only | ezetimibe tablet (generic Zetia) |
| Ziagen (brand only) | Brand Only | abacavir (generic Ziagen) |
| Ziana | Brand & Generic | clindamycin gel, solution or lotion (generic Cleocin) + tretinoin cream (generic Retin-A) |
| Ziextenzo | Single Source Brand | Must try BOTH: Neulasta, Udenyca |
| Zileuton ER | Generic Only | montelukast (generic Singulair), zafirlukast (generic Accolate) |
| Zilxi 1.5% | Single Source Brand | metronidazole 0.75% cream/gel (generic Metrocream, Metrogel), an oral tetracycline antibiotic (e.g., doxycycline, minocycline) |
| Zipsor 25mg | Single Source Brand | oral diclofenac (generic Voltaren, Cataflam), ibuprofen (generic Motrin), naproxen (generic Naprosyn) |
| Zithranol | Single Source Brand | calcipotriene (generic Dovonex), fluocinolone solution (generic Synalar), clobetasol solution or shampoo (generic Clobex, Temovate) |
| Zocor | Brand Only | simvastatin (generic Zocor) |
| Zofran tablets | Brand Only | ondansetron (generic Zofran) |
| Zohydro ER | Brand Only | morphine sulfate (generic MS Contin), Xtampza ER |
| Zomacton | Brand Only | ONE of the following: • Nutropin AQ; OR • Nutropin AQ NuSpin |
| Zomig nasal spray | Generic Only | sumatriptan nasal spray, brand Zomig nasal spray |
| Zomig tablets | Brand Only | zolmitriptan tablets (generic Zomig) |
| Zomig ZMT | Brand Only | zolmitriptan orally disintegrating tablet (generic Zomig) |
| Zonalon | Generic Only | betamethasone dipropionate cream 0.05% (generic Diprosone), desoximetasone cream 0.05% (generic |

| | | |
|---------------------------|-----------------------------------|---|
| | | Topicort), fluocinonide cream 0.05% (generic Lidex), mometasone furoate cream 0.1% (generic Elocon), triamcinolone acetonide cream 0.5% (generic Aristocort) |
| Zonatuss | Brand & Generic | benzonatate (generic Tessalon Perles) |
| Zonegran (brand only) | Brand Only | zonisamide (generic Zonegran) |
| Zortress | Brand and Generic | cyclosporine (generic Neoral, Sandimmune, Gengraf), tacrolimus (generic Prograf) |
| Zorvolex | Single Source Brand | diclofenac tablets (generic Voltaren, Cataflam), ibuprofen (generic Motrin), naproxen (generic Naprosyn) |
| Zovirax Ointment | Brand Only | oral acyclovir (generic Zovirax), famciclovir (generic Famvir), valacyclovir (generic Valtrex) |
| Zuplenz | Single Source Brand | ondansetron tablet (generic for Zofran), ondansetron ODT (generic for Zofran ODT) |
| Zutripro | Brand Only | chlorpheniramine/hydrocodone/pseudoephedrine (generic Zutripro), guaifenesin/codeine solution (cheratussin AC) |
| Zyclara | Single Source Brand | imiquimod 5% cream (generic Aldara) |
| Zyflo | Single Source Brand | montelukast (generic Singulair), zafirlukast (generic Accolate) |
| Zykadia | Single Source Brand | Use Nonform guideline AR, CO, DE, IL, LA, MD, MN, NV - Coverage of oncology medications may be approved based on state mandates. See State Mandate Overview Document for specifics. |
| Zypitamag | Single Source Brand | atorvastatin (generic Lipitor), lovastatin (generic Mevacor), pravastatin (generic Pravachol), rosuvastatin (generic Crestor), simvastatin (generic Zocor) |
| Zyprexa | Brand Only | olanzapine (generic Zyprexa) Minnesota: See State Mandate Overview Document |
| Zyprexa Zydis | Brand Only | olanzapine orally disintegrating tablet (generic Zyprexa Zydis) Minnesota: See State Mandate Overview Document |
| Zyrtec (all dosage forms) | Brand & Generic Legend Medication | OTC Zyrtec |
| Zytiga 250mg | Brand only | abiraterone 250mg (generic Zytiga) AR, CO, DE, IL, LA, MD, MN, NV - Coverage of oncology medications may be approved based on state mandates. See State Mandate Overview Document for specifics |
| Zytiga 500mg | Brand & Generic | Use 2 of the abiraterone 250mg (generic Zytiga) AR, CO, DE, IL, LA, MD, MN, NV - Coverage of oncology medications may be approved based on state mandates. See State Mandate Overview Document for specifics |
| Zyvox | Brand Only | linezolid (generic Zyvox) |

Authorization will be issued for 12 months.

D. Copaxone Only

1. Copaxone will be approved based on ALL of the following:

- a. Submission of medical records documenting history of trial and failure, inadequate response, or intolerance to glatiramer acetate (generic Copaxone. Mylan product only) Document date and duration of trial

-AND-

- b. Submission of medical records documenting history of trial and failure, inadequate response, or intolerance to Glatopa (Document date and duration of trial)

-AND-

- c. Provider must give an explanation of potential rationale for how the excluded medication will work if stating the patient failed on the covered Therapeutically Equivalent product which has the same active ingredient- (eg, the member had an adverse reaction to an inactive ingredient in the alternative product).

Authorization will be issued for 12 months.

E. Brand Truvada

1. Brand Truvada will be approved based on one of the following

- a. All of the following:

- (1) Member is taking **brand** Truvada 200/300 mg as effective antiretroviral therapy for PrEP (Pre-exposure Prophylaxis)

-AND-

- (2) **Brand** Truvada 200/300 mg will be used as part of a comprehensive prevention strategy including other prevention measures

-AND-

- (3) Submission of medical records documenting a history of adverse event or intolerance to prior use of generic Truvada (emtricitabine/tenofovir disoproxil fumarate)

Authorization will be issued for zero copay for PreP with deductible bypass for 12 months.

-OR-

- b. Submission of medical records documenting Truvada is not being used for PreP and a history of adverse event or intolerance to prior use of generic Truvada (emtricitabine/tenofovir disoproxil fumarate)

Authorization for Non-PreP indications will be issued for 12 months.

- ^a State mandates may apply. Any federal regulatory requirements and the member specific benefit plan coverage may also impact coverage criteria. Other policies and utilization management programs may apply.
- ^b For Connecticut business, only a 60 day trial will be required. For Kentucky and Mississippi business, only a 30 day trial will be required.
- ^c Coverage of oncology medications may be approved based on state mandates.
- ^d In Florida, Maine, and Tennessee only, medications prescribed for diabetes may be approved based on both of the following: 1) Provider attests use of this product is medically necessary for the treatment of diabetes; and- 2) If applicable, clinical characteristics exist that preclude the use of the covered preferred alternative(s) and use of the covered preferred alternative(s) could result in worsening of patient's condition or inadequate treatment (document alternatives and clinical information related to worsening/inadequate treatment).
- *Products listed as single source brands were not available generically at time of review and publication. Products listed are current at the time of last review.
- **Reauthorization criteria may be applied if initial review criteria is not met and member has a previously approved PA on file for the same review type:
Requested medication will be approved based on both of the following: documentation of positive clinical response and member is currently on medication as documented in claims history (evidence of claims in past 120 days)

3. Additional Clinical Programs:

- Supply limits may also apply.
- Prior Authorization may also apply.
- Notwithstanding Coverage Criteria, UnitedHealthcare may approve initial and re-authorization based solely on previous claim/medication history, diagnosis codes (ICD-10) and/or claim logic. Use of automated approval and re-approval processes varies by program and/or therapeutic class.

4. References:

N/A

| | |
|------------------------------|--|
| Program | New and Therapeutic Medications- Excluded Drugs |
| Change Control | |
| Date | Change |
| 5/2016 AT UM | New program |
| 10/2016 | Added additional products to program. Added provider attestation requirement |
| 2/2017 | Added Lantus and Auvi-Q. Added reauthorization criteria. Revised formatting. |
| 4/2017 | Added Lantus Solostar for clarification. |
| 4/2018 | Clarified alternatives for Diovan, Azor, Myrbetriq and Vesicare. Added authorization period for reauthorization. |
| 4/2019 | Annual review. Revised title. Revised background section. |
| 8/2019 | Updated Delzicol, Vesicare, and Zovirax from Single Source Brands to Brand & Generic. |
| 11/2019 | Added Aplenzin, Celexa, Effexor XR, Forfivo XL and Pexeva. |
| 2/2020 | Added Basaglar, Januvia, Janumet, Janumet XR and Tresiba. Removed Lantus. |
| 3/2020 | Added Copaxone. |
| 4/2020: 5/1/20 effective | Added Lantus. Removed Basaglar, Januvia, Januet, Janumet XR and Tresiba due to change in effective date of exclusions. |
| 4/2020: 6/1/20 effective | Added Copaxone to separate section Reformatted reauthorization section. |
| 5/2020: 7/1/20 effective | Added Noritate. Added Basaglar, Januvia, Janumet, Janumet XR and Tresiba. Removed Lantus. Updated Dymista to Brand & Generic. |
| 6/2020; 9/1/20 effective | Added Secuado. Added reference to state mandates. |
| 9/2020; 10/1/20 effective | Added Brand Truvada |
| 10/2020; 1/1/21 effective | Added Duexis, Tivorbex, Symtuza, Norditropin Flexpro, Rayos, Gleevec, Ampyra, and brand Synthroid. Updated Forfivo XL to Brand & Generic. Updated Januvia, Janumet, and Janumet XR requirements. |
| 12/1/2020; 1/1/21 effective | Revised alternatives for Pennsaid |
| 1/1/2021; 3/1/21 effective | Added amphetamine/dextroamphetamine (generic Adderall XR) and Focalin XR |
| 3/1/2021; 5/1/2021 effective | Added Otrexup, Relafen, Relafen DS, Semglee, and brand Tecfidera. |
| 5/1/2021; 7/1/2021 effective | Added Adapalene 0.1% pads. Updated brand Focalin XR. |
| 6/2021; 9/1/2021 effective | Added Oxtellar XR, Qudexy XR, Spritam, Trokendi XR and Sorilux. Removed reauthorization criteria for sections A and B. |
| 11/2021; 1/1/2022 effective | Added Ventolin HFA, Albuterol HFA, Rebif & Rebif Rebidose, Proair RespiClick & HFA, methylphenidate extended-release tablet (generic Concerta & methylphenidate extended-release tablet, and Klonopin. Updated Duexis. Updated Kentucky and Connecticut mandate notes. |

| | |
|---------------------------------|---|
| 3/2022, 5/1/2022 effective | Added Differin. Updated Myrbetriq and Vesicare. |
| 4/2022, 5/1/2022 effective | Added FL, ME, TN mandate language to diabetes drugs. |
| 4/2022, 7/1/2022 effective | Updated oncology medications state mandate note. |
| 7/2022, 8/1/2022 effective | Removed Norditropin Flexpro. Updated Rebif and Rebif Rebidose. |
| 6/2022, 9/1/2022 effective | Added clemastine fumarate syrup. |
| 11/2022, 1/1/2023 effective | <p>Added criteria for existing excluded drugs into a new section within the N&T guideline.</p> <p>Added Aczone 5% topical gel (brand only), Aczone 7.5% topical gel (brand only), Alinia tablets (brand only), Auryxia, Dilaudid (brand only), Firazyr (brand only), MS Contin (brand only), Nilandron (brand and generic), Renagel (brand only), Welchol (brand only).</p> <p>Removed dapsone gel (generic Aczone 5% and 7.5%), generic Firazyr, generic Welchol.</p> <p>Updated Hysingla ER, generic Levo-Dromoran, Colcrys tablet, Vemlidy</p> |
| 3/2023, 5/1/2023 effective | <p>Added Adlarity transdermal patch, Afinitor Disperz tablet for suspension, Epsolay, Ibsrela, insulin glargine vial/SoloStar, Katerzia suspension, Lyvispah granules, metformin 625mg, Nexiclon XR and clonidine extended-release authorized brand alternative, Quviviq, Releuko, Relexxii/methylphenidate extended-release 45mg and 63mg, Relexxii 72mg, Robinul, Robinul Forte, Soanz, Sutent, Tascenso ODT, Tlando, Twyneo cream, sodium oxybate (Xyrem authorized generic).</p> <p>Revised Amitiza, Atripla, Colcrys tablet, Eloctate, Fiasp, Norgesic Forte, Ponvory, Vemlidy, Viibryd, Vimpat (trial duration exception for Mississippi), Xyrem.</p> <p>Updated Pentasa to reflect brand and generic, Amitiza to reflect brand only, Ambien CR to brand only, Aricept 23mg to brand only, Asacol HD to reflect brand and generic, Atripla to brand only, Butrans to brand only, Lofibra 67mg/134mg/200mg to brand only, Minastrin 24 FE, Namenda XR to brand only, Radicava ORS, Restasis SDV to generic only, Nalocet to include oxycodone/acetaminophen 2.5-300mg and reflect multisource brand without generic, Tricor to brand only.</p> <p>Updated Restasis SDV generic only to cyclosporine 0.05% ophthalmic emulsion single dose vials generic only.</p> <p>Removed Cordran cream, Cordran ointment, Mounjaro, Vraylar, Xiidra, Adrenallick, Auvi-Q, Enbrel, Gvoke auto-injector/prefilled syringe, Gvoke kit, tramadol extended-release (generic Ryzolt), Trizivir, Verkazia, Viojoyce, Xyrem, Camzyos.</p> <p>Updated state mandate footnote to include Mississippi. Updated diabetes meds state mandate note for Florida, Maine, and Tennessee.</p> <p>Updated oncology mandate note for Fotivda, Qinlock, somatuline.</p> |
| 6/2023, 9/1/2023 effective date | <p>Added allopurinol, Auvelity, Entadfi, Esbriet, Fynetra, Gilenya, isotretinoin 25mg and 35mg, Javygtor, Lanreotide, methocarbamol 1000mg, Pheburane, Ryaltris, Sajazir, Stimufend</p> <p>Removed pantoprazole (Camber manufacturer)</p> |

| | |
|----------------------------------|--|
| | Revised Absorica, Absorica LD, Amitiza, Fetzima, Trintellix |
| 12/2023, 1/1/2024 effective date | <p>Added Abrilada, Adderall XR, Advair Diskus, BiDil, Ciprodex, Concerta, Edarbi, Edarbyclor, fenofibrate micronized capsule 30mg and 90mg, fenofibric acid 35mg and 105mg, Finacea, Flovent Diskus, Flovent HFA, Humalog vial, Kombiglyze XR, nitisinone, Onglyza, Prezista, Pulmicort Flexhaler, Targretin capsule, Targretin gel, Trezix, Uceris rectal foam, Xyrem, Ziextenzo</p> <p>Revised Androgel 1%, Androgel 1.62%, Antara, Asmanex HFA, Axiron, Delzicol to brand only, Denavir, Dipentum, Fenoglide, Fibracor 35mg and 105mg, fluticasone furoate/vilanterol ellipta, fluticasone propionate HFA, fluticasone propionate/salmeterol HFA, Fortesta, Fulphila, Fylentra, Humalog Tempo Pen, Jatenzo, Latuda, Lialda, Lipofen, Lofena, Lyumjev Tempo Pen, Natesto, Nyvepria, rabeprazole delayed-release sprinkle, Rezvoglar KwikPen, Saphris, Serostim, Stimufend, testosterone gel, topiramate ER (generic Trokendi XR), Tricor, Trilipix, Vogelxo, Vyvanse</p> <p>Updated Daytrana, Doral drug status, Enablex name to generic, Fiasp and Levemir with diabetic mandate, Kerydin drug status, Neupogen, Onexton, Pennsaid 2%, Prevpac to generic name, Rezurock, Roszet, Sivextro, Targadox, Tresiba to include insulin degludec, Zovirax ointment, Zylflo CR to generic name</p> <p>Removed amphetamine/dextroamphetamine XR, bexarotene capsule, bexarotene gel, bimatoprost 0.03%, Elestat, fluticasone-salmeterol (generic Advair Diskus), Lofibra, methylphenidate extended-release (generic Concerta), QVAR RediHaler, Staxyn, Tavalisse, Triglide, Wixela (generic Advair Diskus), Udenyca</p> <p>Removed OTC Exclusion list drug note from Allegra-D, Claritin, Claritin-D, clemastine, hydrocortisone cream and lotion, Icy Hot PM, Prescription Benzoyl Peroxide Products, Selenium sulfide-pyrithione zinc in urea shampoo 2.3%</p> |