



MASSACHUSETTS

Blue Cross Blue Shield of Massachusetts is an Independent Licensee of the Blue Cross and Blue Shield Association

Pharmacy Medical Policy Non-Covered Drug List & Non-Covered Formulary Exception

Table of Contents

- [Prior Authorization Information](#)
- [Summary](#)
- [Policy](#)
- [Documentation Requirements](#)
- [Individual Consideration](#)
- [Information Pertaining to All Policies](#)
- [Policy History](#)
- [Forms](#)
- [Non-Covered Drug List](#)

Policy Number 433

BCBSA Reference Number: None

Related Policies

Quality Care Dosing (QCD) [#621A](#)

Formulary Exception Form [#434](#)

Prior Authorization Information

Guideline	<input type="checkbox"/> Prior Authorization <input type="checkbox"/> Step Therapy <input type="checkbox"/> Quality Care Dosing <input checked="" type="checkbox"/> Administrative	Reviewing Department Policy Effective Date	Pharmacy Operations: Tel: 1-800-366-7778 Fax: 1-800-583-6289 1/2024
Pharmacy (Rx) or Medical (MED) benefit coverage	<input checked="" type="checkbox"/> Rx <input type="checkbox"/> MED	To request for coverage: Physicians may call, fax, or mail the attached form (Formulary Exception/Prior Authorization form) to the address below.	
Policy applies to Commercial Members: <ul style="list-style-type: none"> • Managed Care (HMO and POS), • PPO and Indemnity • MEDEX with Rx plan • Managed Major Medical with Custom BCBSMA Formulary • Comprehensive Managed Major Medical with Custom BCBSMA Formulary • Managed Blue for Seniors with Custom BCBSMA Formulary Policy does NOT apply to: Medicare Advantage		Blue Cross Blue Shield of Massachusetts Pharmacy Operations Department 25 Technology Place Hingham, MA 02043 Individual Consideration: Policy for requests that do not meet clinical criteria of this policy, see section labeled Individual Consideration	

Summary

To promote clinically appropriate and cost-effective prescription drug use, BCBSMA has several programs which includes BCSMA's Formulary Exception criteria for non-covered / non-formulary drugs.

As part of this program, BCBSMA may require the use of BCBSMA formulary alternatives prior to allowing benefit coverage for the non-covered drug.

The drugs on the non-covered list are not covered because there are safe, comparably effective alternatives available or there are generic versions of the brand-name product available. The alternatives listed are approved by the U.S. Food and Drug Administration (FDA) and are widely used and accepted by the medical community to treat the same condition as the medications that are on the non-covered list.

Policy

Length of Approval	24 months
Member cost share consideration	Applies the highest copayment level and terms as the Plan allows if exception authorized

BCBSMA may determine a non-formulary drug to be **MEDICALLY NECESSARY** and authorize coverage if a Member has been successfully maintained on their current medication. Criteria for successful maintenance is established when **ONE** of the following criteria is met:

1. The provider can establish either through documented clinical records or medication history that the Member has been successfully maintained on their current medication regimen and **clinical justification** that a change to a formulary alternative would result in instability of the medical condition. Documentation is required to support reason for clinical justification;
OR
2. The Member is actively using a medical device e.g., continuous subcutaneous insulin infusion pump and requires the use of non-covered diabetic test strips;

If the Member is not being successfully maintained on the requested non-covered medication as defined in criteria #1 and #2 above, then the following criteria must be met:

1. The requested drug is for a FDA-approved indication or an indication supported in the compendia of current literature such as but not limited to AHFS, Micromedex or currently accepted treatment guidelines or *peer reviewed standard of care*;
AND
2. For non-covered combination medications, the Member has had a trial of the individual ingredients used together when available and covered on the formulary or preferred drugs in the same therapeutic class as the individual agents if the individual agents are non-covered, including over-the-counter (OTC) alternatives;
OR
3. If formulary alternative(s) are available, the Member has tried and failed at least **2** covered alternatives **OR** **1** covered alternative if only one formulary alternative is covered within the same therapeutic class for the given diagnosis. Reasons for failure may include but not limited to inadequate treatment response or intolerance, clinical contraindication, allergic or adverse reaction. Documentation to support clinical reason preventing trial of formulary alternative is required for approval. **Must** provide name and strength of the alternatives tried and failed and specifics regarding the treatment failure;
OR
4. If formulary alternative(s) are available, unable to switch Member to a covered formulary alternative due to some other specified clinical basis or if switching would cause instability of the medical condition (i.e., narrow therapeutic index medications). Documentation is required to support clinical basis prior to approval;
OR
5. The requested non-covered drug is due to a drug supply shortage

Please Note - The plan uses prescription claim records to support criteria for successful maintenance or trial and failure of formulary alternatives when available. Additional information will be required from the provider when historic prescription claim data is either not available or

the medication fill history fails to establish criteria for successful maintenance or trial and failure of formulary alternatives when applicable.

Provider Documentation Requirements

Documentation from provider to support reason preventing trial of formulary alternative must include the name and strength of alternatives tried and failed (if alternatives were tried) and specifics regarding the treatment failure. Documentation to support clinical basis preventing switch to formulary alternative should also provide specifics around clinical reason.

Please Note - The plan uses prescription claim records to support criteria for successful maintenance or trial and failure of formulary alternatives when available. Additional information will be required from the provider when historic prescription claim data is either not available or the medication fill history fails to establish criteria for successful maintenance or trial and failure of formulary alternatives when applicable.

Individual Consideration (for individuals with unique clinical circumstances)

Our medical policies are written for most people with a given condition. Each policy is based on peer reviewed clinical evidence. We also take into consideration the needs of atypical patient populations and diagnoses.

If the coverage criteria outlined is unlikely to be clinically effective for the prescribed purpose, the health care provider may request an exception to cover the requested medication based on an individual's unique clinical circumstances. This is also referred to as "individual consideration" or an "exception request."

Some reasons why you may need us to make an exception include: therapeutic contraindications; history of adverse effects; expected to be ineffective or likely to cause harm (physical, mental, or adverse reaction).

To facilitate a thorough and prompt review of an exception request, we encourage the provider to include additional supporting clinical documentation with their request. This may include:

- Clinical notes or supporting clinical statements.
- The name and strength of formulary alternatives tried and failed (if alternatives were tried) and specifics regarding the treatment failure, if applicable.
- Clinical literature from reputable peer reviewed journals.
- References from nationally recognized and approved drug compendia such as American Hospital Formulary Service[®] Drug Information (AHFS-DI), Lexi-Drug, Clinical Pharmacology, Micromedex or Drugdex[®]; and
- References from consensus documents and/or nationally sanctioned guidelines.

Providers may call, fax or mail relevant clinical information, including clinical references for individual patient consideration, to:

Blue Cross Blue Shield of Massachusetts
Pharmacy Operations Department
25 Technology Place
Hingham, MA 02043
Phone: 1-800-366-7778
Fax: 1-800-583-6289

We may also use prescription claims records to establish prior use of formulary alternatives or to show if step therapy criteria has been met. We will require the provider to share additional information when prescription claims data is either not available or the medication fill history fails to establish use of preferred formulary medications or that step therapy criteria has been met.

Information Pertaining to All Blue Cross Blue Shield Medical Policies

Click on any of the following terms to access the relevant information:

- [Medical Policy Terms of Use](#)
- [Managed Care Guidelines](#)
- [Indemnity/PPO Guidelines](#)
- [Clinical Exception Process](#)
- [Medical Technology Assessment Guidelines](#)

Forms

To request prior authorization using the Massachusetts Standard Form for Medication Prior Authorization Requests (eForm), click the link below:

- Formulary Exception Form [#434](#)

Other Policy Conditions

[INVESTIGATIONAL
NOT MEDICALLY NECESSARY](#)

Non-covered Drug List

Non-covered Drug List

Drug Class	Non-covered Drug
Acne Treatment, Oral	Absorica LD [®]
ALS Treatment	Exservan [®]
Anaphylaxis Management	Adrenaclick [®] Authorized product, Adyphren [®] Amp, Adyphren [®] Amp II, Adyphren [®] , Adyphren [®] II, Auvi-Q [™] , Epinephrine Snap V [®] , Episnap Convenience Kit [®]
Anti-Bacterial Cephalosporin	Cedax [®] , Daxbia [®] , Maxipime [®] , Panixine [™] , Spectracef [®]
Doxycycline	Acticlate [®] , Alodox [™] , Avidoxy [™] , Avidoxy [™] CK, Doryx [®] DR 80mg, doxycycline 50mg tablets, Doxycycline DR 80, Monodox [®] , Morgidox [®] , Ocudox KIT [®] , Oracea [™]
Macrolide	Dificid [™] , PCE [®] , PCE Dispertabs [®] , Zithromax [®] , Zmax [™]
Quinolone	Avelox [®] , Ciprofloxacin 250mg/ml, Ciprofloxacin 500mg/ml, Cipro [®] XR, Factive [®] , Levaquin, Avidoxy [™] , Maxaquin [®] , Penetrex [™] , Tequin [™] , Zagam [®]
Tetracycline	Amzeeq [®] , Cleervue-M [™] , doxycycline hyclate 75mg and 150mg tabs, doxycycline IR-DR, Minocin [®] , Minocin Combo PAK [®] , Minocycline Tablets, Minolira ER [®] , Seysara [®] , Solodyn [™] , Ximino ER [®] , Zilxi [®]
Other	Aemcolo [®] , Augmentin XR [™] , Moxatag [™] , Solosec [®] , Xepi [®] , Xifaxan [™]
Antiemetic	Akynzeo [®] , Brexafemme [®] , Anzemet [®] , Cesamet [®] , Sancuso [®] , Zofran [®] , Zofran [®] ODT, Zuplenz [®]
Anti-Fungal, oral	Lamisil [®] , Lamisil [®] Granules, Oravig [™] , Onmel [™] , Penlac [®] , Sporanox [®] , Tolsura [®]

Anti-Fungal, topical	Extina [®] , Jublia [®] , Kerydin [®] , Luliconazole, Luzu [®] , Noritate [®] , PediPak [®] , Pedizol [®] , Sulconazole 1%, tavaborole, TriloCiclo Kit [®] , Vusion [™]
Antimalarial	Arakoda [®] , Krintafel [®] , Plaquenil [®]
Antirheumatic	Arava [®]
Antineoplastic	Arimidex [®] , Aromasin [®] , Fusilev [®] , Gleevec [®]
Antiparasitic	Alinia [®]
Anti-Trichomonas	Flagyl [®] /ER, Flagyl [®] IV, Flagyl [®] IV-RTU Viaflex, Tindamax [™]
Antiviral	Sitavig [®] , Zovirax [®]
Antiviral – Hepatitis C	Daklinza [®] , Ledipasvir/Sofosbuvir, Mavyret [®] , Olysio [®] , Sofosbuvir/Velpatasvir, Sovaldi [®] , Tecnivie [®] , Viekira PAK [®] ,
Biologics	Abrilada [®] , Cimzia [®] , Cosentyx [®] , Cyltezo [®] , Entyvio [®] , Hulio [®] , Hyrimoz [®] , Idacio [®] , Lemtrada [®] , Orencia [®] , Siliq [®] , Simponi [®] , Simponi Aria [®] , Yuflyma [®]
CNS 5HT Agonists	Alsuma [®] , Axert [®] , Frova [™] , Imitrex [®] vial, Imitrex [®] kit refill, Imitrex [®] pen injector, Maxalt [®] /MLT, Relpax [®] , Sumavel [™] Dosepro, Treximet [™] , Zembrace [®] Reyvow [®] , Symtouch [™] , Zomig/ZMT [®]
Alzheimer's disease	Adlarity [®] , Namzaric [®]
Anticonvulsants	Depakote [®] , Depakote ER [®] , Depakote Sprinkle [®] , Elepsia XR [®] , Equetro [™] , Horizant [™] , Keppra XR [™] , Lamictal [®] , Lamictal XR [®] , Lamictal [®] ODT [™] , Neurontin [®] , Primidone 125mg, Spritam [®] , Sympazan [®] , Topamax [®] , Trileptal [®] , Zonegran [®]
Antiparkinsonian	Dhivy [®] , Emsam [®] , Gocovri [®] , Mirapex [®] , Mirapex [®] ER, Requip [®] , Requip [®] XL [™] , Neupro [®] , Osmolex ER [®] , Rytary ER [®] , Sinemet [®] , Stalevo [®] , Xadago [®] , Zelapar [™]
Atypical Antidepressants	Aplenzin [™] , Auvelity ER [®] , Brintellix [®] , Caplyta [®] , Drizalma Sprinkle [®] , Fetzima [®] , Forfivo [™] XL, Irenka DR [®] , Remeron [®] , Wellbutrin [®] , Wellbutrin [®] SR, Wellbutrin [®] XL
Atypical Antipsychotics	Abilify [®] , Abilify [®] Discmelt [™] , Abilify MYCITE [®] , Calyptra [®] , Fanapt [™] , FazaClo [®] , Geodon [®] , Invega [®] , Latuda [®] , Lybalvi [®] , Perseris ER [®] , Risperdal [®] M-tab [®] , Rexulti [®] , Saphris [®] , Seroquel [®] , Secuado [®] , Seroquel XR [®] , Zyprexa [®] , Zyprexa [®] IM, Zyprexa [®] Relprevv, Zyprexa Zydis [®]
Benzodiazepines	Ativan [®] , Klonopin [™] , Loreev XR [®] , Restoril [®] , Tranxene [®] T-Tab [®] , Valium [®] , Xanax [®] , Xanax XR [®]
Hypnotics	Ambien [®] , Ambien CR [™] , Belsomra [®] , Dayvigo [®] , Edluar [™] , Intermezzo [®] , Lunesta [®] , Quviviq [®] , Silenor [®] , Sonata [®] , Zolpimist [®]
Multiple Sclerosis	Copaxone [®] , Extavia [®] , Ponvory [®] , Tascenso [®] , Tecfidera [®] , Vumerity DR [®] , Zinbryta [®]
Pain/Opioid	Abstral [®] , Actiq [®] , Alzital [®] , Apadaz [®] , Arymo [®] ER, Benzhydrocodone/APAP, Conzip [®] , Dilaudid [®] , Duragesic [®] , Embeda [™] , Exalgo [™] , Fentanyl citrate buccal tabs, Fentora [™] , Hydrocodone ER, Hysingla ER [®] , Kadian [®] , Lazanda [®] , Morphabond ER [®] , Nucynta [™] , Nucynta [™] ER, Onsolis [™] , Opana ER [®] , Oramorph SR [™] , oxycodone ER, OxyContin [®] , Percocet [®] , Roxibond [®] , Sprix [®] , Subsys [™] , Trezix [®] , Xartemis XR [®] , Zohydro ER [®]
Pain/Analgesic/Topical	Adazin [®] , Agoneaze [®] , Anodyne LPT [®] , Aprizo PAK [®] , Aprizio II PAK [®] , Capsfenac [®] , D-Care 100X [®] , Dermacin [®] Rx, Dermalid [®] , Diclofenac Epolamine Patch, Diclofenac Powder Pack, Dichoheal-60 [®] , Dolotranz [®] , Empricaine Kit, Empricaine [®] II kit, LevaSet [®] , Gabacaine [®] kit, Gabapal [®] , Lextol [®] , LiprozonePak [®] , LidoDerm [®] , LidoPac [®] , Lido-Prilo Caine Pak [®] , Licart [®] , Lidocort [®] , Lidomark [®] , Lidosol-50 [®] , Lidotin [®] , LidoTor [®] , LidotransKit [®] , Lidovex [®] , Lidovix [®] , Lipritin [®] , Lipritin II [®] , Livixil PAK [®] , LMR Plus [®] , MAC Patch [®] , Marvona SUIK Kit [®] , MedolorKit [®] , MicroVix LP [®] , Neumaxin [®] , Neurcaine [®] , Nopiod LMC [®] , Nopiod-TC [®] , Nuvakaan [®] , Nuvakaan [®] Plus, P-Care MG [®] , P-Care X [®] , PainGo KFT [®] , Pennsaicin [®] , Pentican [®] , Prikaan [®] , Prikaan LITE [®] , PriloHeal Plus 30 [®] , Prilolid [®] Kit, Prilopatch [®] , Prilopatch II [®] , Prilovix [®] , Prilovix Ultralite Plus [®] , Prilovixil [®] , Prizopak [®] , Prizopak II [®] , Prizotral [®] , Prizotral II [®] , Skyaderm LP [®] , Solaice [®] , Solaravix [®] , Suvicort [®] , Synvexia TC [®] , Tramadol 100mg, Tranzarel [®] , Trixyllitral [®] ,

	Vexa [®] , Wound Debride 4% [®] , Xryliderm [®] , Zeyocaine [®] , Ziclocin [®] , Zilacaine [®] ,
Other	Bunavail [®] , GelX [®] , Lyrica [®] , Lyrica CR [®] , Norgesic Forte [®] , orphenadrine/aspirin/caffeine, Savella [®] , Sodium Oxybates, Qdolo [®] , Suboxone [®] , Tramadol ER capsules, Trudhesa [®] , Xywav [®] , Zubsolv [®] , Zyban [®]
Stimulant	Adderall [®] , Adhansia XR [®] , Adzenys [®] , Adzenyz [®] XR, Amphetamine 1.25mg/ml susp, Azstarys [®] , Contempla XR [®] , Daytrana [™] , Dexedrine [®] , Evekeo [®] , Focalin [®] , Focalin XR [®] , Jornay PM [®] , Kapvay [®] , Methylphenidate ER capsules, Mydayis [®] , Nuvigil [™] , ProCentra [™] , Qelbree [®] , Quillichew [®] ER, Quillivant XR [™] , Relexxi ER [®] , Ritalin [®] , Ritalin SR [®] , Ritalin LA [®] , Strattera [®] , Sunosi [®] , Vyvanse [®] , Wakix [®] , Xelstrym [®]
SNRI	Cymbalta [®] , desvenlafaxine ER, Effexor [®] , Effexor XR [®] , Fluoxetine tablet, Khedezla [™] , Pristiq [™] , Venlafaxine ER tablet
SSRI	Celexa [®] , Lexapro [®] , Paxil [®] , Paxil CR [™] , Pexeva [™] , Prozac [®] , Prozac [®] Weekly [™] , Sarafem [®] , sertraline capsules, Zoloft [®]
SSRI/5-HT1A Receptor Partial Agonist	Viibryd [™]
Other	Allzital [®] , Episil [®] , Fiorinal [®] , Fiorinal [®] with codeine #3, Intuniv [™] , Kapvay [™] , Nuedexta [™] , Provigil [™] , Qdolo [®] , Sunosi [®] , Ultracet [™] , Ultram ER [®] , Wakix [®]
Tricyclic Antidepressants	Anafranil [®] , Pamelor [®] , Tofranil [®]
Cardiovascular	
ARB	Avapro [®] , Atacand [™] , Benicar [®] , Cozaar [®] , Diovan [®] , Edarbi [™] , Micardis [®] , Tekturna [®]
ACEI	Accupril [®] , Altace [™] , Epaned [™] , Lotensin, Prinivil [®] , Vasotec [®] , Zestril [®]
Alpha Blocker	Cardura XL [®]
Antiplatelet Agents	Pradaxa [®] , Pradaxa [®] Pellet Packs
Beta Blocker	Bystolic [™] , Coreg [®] , Coreg CR [®] , Inderal [®] LA, Inderal [®] XL, InnoPran XL [™] , Kaspargo Sprinkle [®] , Lopressor [®] , Tenormin [®]
CCB	Adalat [®] CC, Cardene [®] SR, Cardizem [®] CD, Cardizem [®] LA, Conjugpri [®] , Katerzia [®] , Norvasc [®] , Sular [®] , Tiazac [®] , Verapamil 100mg capsules
Combination products	Accuretic [®] , Atacand [®] HCT, Avalide [®] , Azor [®] , Benicar HCT [®] , Caduet [®] , Diovan HCT [®] , Edarbyclor [®] , Exforge [®] , Exforge HCT [®] , Hyzaar [®] , Lotrel [®] , Lotensin [®] HCT, Micardis [®] HCT, Prestalia, Tarka [®] , Tekturna HCT [®] , Tribenzor [®] , Twynsta [®] , Vaseretic [®]
Hematologic	Mulpleta [®]
HMG-CoA and combinations	Altoprev [™] , Atorvaliq [®] , Caduet [®] , Crestor [®] , Ezallor Sprinkle [®] , Ezetimibe/Atorvastatin, FloLipid [®] , Lescol [®] /XL, Livalo [®] , Lipitor [®] , Pravachol [®] , Pravigard [™] PAC, rosuvastatin/ezetimibe, Roszet [®] , Simvastatin suspension, Vytorin [®] , Zocor [®] , Zypitamag [®]
Low Molecular Weight Heparins	Arixtra [®] , Enoxiluv [®] , Fragmin [®] , Lovenox [®]
Erythroid Stimulants	Aranesp [®] , Epogen [®] , Procrit [®]
Granulocyte Colony Stimulating Factor	Neupogen [®]
Other	Antara [™] , Brilinta [™] , clonidine ER, Corlanor [®] , Duralaza [®] , Fenoglide [™] , Entresto [®] , fenofibrate 50mg, 150mg, Fibricor [®] , Lipofen [™] , Lovaza [®] , Nexiclon XR [®] , Nitro-Dur [®] , Northera [®] , Recothrom [®] , Repatha [®] , Rythmol [®] , Savaysa [®] , Teczem [®] /HCT, Tricor [®] , Triglide [™] , TriLipix [™] , Vascepa [®] , Welchol [®] , Zontivity [®]
Dermatologic	Aklief [®] , Absorica [™] , Absorica LD [®] , Acanya [™] , Aczone [®] , Advanced Allergy Collection Kit [®] , Aklief [®] , Aktipak Gel Pouch [®] , Aloquin [™] , Altanax [®] , Alcortin-A [®] ,

	<p>Alivycin SG[®], AlivycinPlus[®], Ana-Lex Kit[®], Aqua Glycolic HC[®], Arazlo[®], Atopavo[®], Atopiclair[™], Atopoderm[®], Atralin[™], Atrapro[™] Dermal Spray, Atrapro CP[™], Atrapro Hydrogel[™], Avita[®], Basadrox[®], Benzacilin[®], Beser[®], Bionect[®], Bryhali[®], Cabtreo[®], Calcipotriene foam, Calcipotriene/Betamethasone susp, Calitriol Topical, Carac[®], Cem-Urea[®], Centany[®], Ceramax[®] Skin Barrier, Clenia Plus[®], Cleocin T[®], Clindacin[®] ETZ, Clindacin PAC[®], Clindagel[®], Clindavix[®], Clobex[®], Clodan Kit[®], Dapsone 7.5%, Deluo[®], Dermacin Rx[®], Dermacin Silazone Pharnpak[®], Dermacin[®] Rx Chlorhexacin Kit[®], Dermacin[®] Rx Therazole PAK[®], Derma-Smoother/FS[®], DermaSORB-AF[™], DermaSORB-HC[™], DermaSORB-TA[™], DermaSORB-XM[™], DermawaRx[®] Surgical Plus Pack, DesOwen[®], Differin[®], Dimentho[®] kit, Duac[®], Duobrii[®], Eleton[®], Elizia Pack[®], EpiCeram[®], Epiduo[™], Epiduo Forte[™], Ertaczo[®], Eucrisa[®], Evoclin[®], Garimide[®], Fabior[®], Finacea[®] Plus[™], Fluopar[®], Fluoroplex[®], Fluovix[®], Fluovix Plus[®], HPR[™] Emolient Foam, Halobetasol Propionate Foam, HPR[™] Plus, HPR[™] Plus Hydrogel, Hydrocortisone-Lidocaine Kit, Hylaguard[®], Hylatopic[™], Hylatopic[™] Plus, Hylatopic[™] Plus Aurstat, Impeklo[®], Jylamvo[®] Keralyt[®] Scalp Kit, MB[™] Hydrogel, Levicycyn Antipruritic[®], Lexette[®], Loutrex[™], Mometacure[®], Neosalus[™], Neosalus CP[™], NeoSynalar KIT[®], Neucac KIT[®], Novacort[®], NuCaraClinPack[®], NuCaraRxPack[®], NuCort[®], Nu-Derm RxPack[®], NuSurgepak Surgical Prep[®], Nutraseb[®], NutriaRx Cream PAK[®], Nuversa[®], Olux[®], Onexton[®], Picato[®], Plixda[®], PR Cream[®], Pram-HCA[®], Pramosome E[™], Presera[™], Procort[®], Promiseb, Quinixil[®], Quinja[®], Quinosone[®], RadiaGel[®], RadiaPlex[®], Relador PAK[®], Relador PAK Plus[®], Retin-A[®] cream, Retin-A Micro[®], Rosadan[®], Salicylic Acid 6% Kit, Salicylic Acid/Ceramide Kit, Salkera[™], Salvax, Salvax Duo[®], Salvax Duo Plus[®], SanadermRx Skin Repair[®], Scalacort/DK[™], Sebuderm[®], Silalite PAK[®], Sila III[®] kit, Silazone-II Kit[®], SilvrSTAT[®], Sklice[®], Solaraze[®], Soolantra[®], Sorilux[®], Sumadan[®], Sumaxin[™], Sumaxin[™] CP, Sumaxin[™] TS, Synalar Combo PAK[®], Synalar TS[®], Taclonex[®], Tasoprol[®], Tazorac[®], Tersi, Therapevo[®], Tovet[®] kit, tretinoin 0.8% gel, Tretin-X[™], TriadiMe-80[®], triamcinolone 0.05% ointment, Trianex[®], TriaSil[®], TriHeal-80[®] Kit, TriloCiclo Kit[®], Tritocin[®], Trivix[®], Trixylitral[®], Ultrasal ER[®], Ultravate[®] PAC, Ultravate X[®], Uramaxin[™], Urea Nail Kit, Vacustim[®] Silver Kit, Vanos[™], Vectical[®], Veltin[™], Veregen[™], Virasal[®], Vusion[®], Whytederm SurgiPAK[®], Whytederm Trilisal PAK[®], WPR Plus Kit[®], Wynzora[®], X-Clair[™], Xerese[®], Xologel Zanaderm Antipruritic Hydrogel[®], Zenieva[®], Ziana[™], Zolpak[®], Zyclara[®], Zypram[™]</p>
Diabetic Supplies	<p>Accu-Chek[®], Advocate Redi-Code[®], Ascensia[™], Assure[®], B-D[™], BG Star[®], CareOne[®], CareTouch[®], CareSens N[®], Clever Choice Voice+[®], Contour[®], Cool[®] products, CVS Advanced Care[®], EasyGluco[®] G2, EasyMax[®], Easy Step[®], Easy Talk[®], Easy Touch[®], Easy Trak[®], Embrace[™], Enlite[®], EQ[®] Diabetic testing Supplies, EvenCare[®], Eversense[®], Exactech[®], Fifty50[®], Fora[®], Fortiscare G1[®], Freestyle[®], G-4[®], GE 100[®], Genstrip[®], Glucocard[®], Glucometer[®], G-Mate[®], Guardian[®], Harmony[®], HealthPro[®], Humana[®], KRO Premium[®], Lancet[®], NovaMax[®], On-Call[®] Plus, Pharmacist Choice[®], Pogo[®] Testing Supplies, Precision[®] QID, Precision[®] XTRA, Premium[®], Prestige[®], Prodigy[®], Pro-Voice[®], Refuah[™] Plus, Relion[®], Smart Sense[®], Sof-Tact Test Strips[®], Solus V2 Audible[®], Sure-Test Easyplus[™], Test N' Go[®], TrueMetrex[®], TRUETest[™], TrueTrack[®], Ultratrak Ultimate[™], UniStrip One[®], Up & Up[®], Verasens[®], Vivaguard[®], Wavesense[®],</p>
DMARD	RediTrex [®]
Erectile Dysfunction	Cialis [®] , Levitra [®] , Staxyn [®] , Stendra [®] , Viagra [®]
Endocrine Androgen	<p>Fortesta[®], Natesto Nasal[®], Striant[®], Testim[®], Testone CIK KIT[®], Testosterone Gel (Fortesta Authorized generic), testosterone (Tetsim Authorized generic), Testosterone (Vogelxo Authorized generic), Vogelxo[®], Xyosted[®]</p>

Corticosteroid	Alkindi [®] , Arze-Ject-A Kit [®] , BSP 0820 [®] , Clobetavix [®] , Cortisone 25MG, Hemady [®] , Orapred ODT [™] , Rayos [®] , Betaloon SUIK [®] , DMT SUIK Kit [®] , Lidocidex I [®] , Medroloan SUIK Kit [®] , Medroloan II SUIK Kit [®] , P-Care D40 [®] , P-Care D80 [®] , P-Care D40G [®] , P-Care D80G [®] , Pod-Care 100C [®] , Pod-Care 100CG [®] , Pod-Care 100K [®] , Pod-Care 100KG [®] , P-Care K40 [®] , P-Care K40G [®] , P-Care K80 [®] , P-Care K80G [®] , prednisolone 5mg, Readysharp Betamethasone Kit [®] , Readysharp Triamcinolone Kit [®] , Toronova SUIK Kit [®] , Toronova II SUIK Kit [®] , Triloan SUIK Kit [®] , Triloan IISUIK Kit [®]
Growth Hormone	Genotropin [®] , Omnitrope [®] , Norditropin [®] , Saizen [®] , Saizen Prep [®] , Tev-Tropin [®] , Zomacton [®] ,
Insulins	Admelog [®] , Apidra [®] , Fiasp [®] , Insulin Aspart, Insulin Glargine, flutica Lispro, Levemir [®] , Lyumjev [®] , Novolog [®] , Novolin [®] , Rezvoglar [®] , Toujeo Solostar [®]
Diabetes – Other	Adlyxin [®] , DM2 Kit [®] , Soliqua [®] , Tanzeum [®] , Victoza [®] , Xultophy [®]
Osteoporosis, Paget's	Actonel [®] , Atelvia [™] , Binosto [®] , Boniva [®] , Fosamax [®]
Thyroid Supplement	Levothyroxine capsules, Tirosint [®]
Other	Hemady [®] , Kuvan [®] , Noctiva [®] , Qbrexza [®]
ENT other	Astepro [™] , Cetraxal [®] , Dermotic [®]
GI Bowel Evacuants	CoLyte [®] , GoLyteLy [®] , Moviprep [®] , NuLyteLy [®] , Osmoprep [®] , Prepopik [®] , Sodium Sulfate/Potassium Sulfate/Magnesium Sulfate, Suprep [®]
H2 Antagonists	Pepcid [®] , Zantac [®]
H.Pylori	Helidac [®] Therapy Pack, Omeclamox [®] , Pylera [®] , PrevPac [®] , Talicia DR [®]
PPI (Excluded for members 18 years and older)	Aciphex [™] , aspirin/omeprazole, Dexilant [®] , Esomeprazole Strontium, Esomep-EZS [®] , First Pantoprazole [®] , Konvomep [®] , Nexium [®] , NapraPAC [™] , Omeprazole/Sodium Bicarbonate, Prilosec [®] , Prevacid [®] 30mg, Protonix [®] , Yosprala [®] , Zegerid [®]
Other	Asacol HD [®] , Actigall [®] , Anusol HC [®] Suppository, Apriso [®] , Chenodal [™] , Colazal [®] , Delzicol [®] , Dipentum [®] , Giazol [®] , Ibsrela [®] , Kristalose [®] , lactulose 10gm packet, lubiprostone, Megace ES [®] , mesalamine HD, Motegrity [®] , Pancreaze [™] , Pertze [®] , Symproic [®] , Trulance [®] , Viberzi [®] , Xifaxan [®] , Zelnorm [®]
GOUT Treatment	Colchicine capsules, Colcrys [®] tablets, Duzallo [®] , Gloperba [®] , Zurampic [®]
GU Alpha Blocker	Rapaflo [™]
Anticholinergic	Detrol [®] , Detrol [®] LA, Enablex [®] , Toviaz [™]
Antispasmodic	Ditropan XL [®] , Gelnique [™] , Oxytrol [™]
Other	DDAVP [®] , Nocdurna [®] , Noctiva [®] , Oxybutynin 2.5mg, Oxybutynin 5mg/5ml solution, Uroxatral [®] , Vesicare [®]
Hyaluronic Acids /Joint Fluid Replacement	Durolane [®] , Euflexxa [®] , Gel-One [®] , Hyalgan [®] , Monovisc [®] , Orthovisc [®] , Sodium Hyaluronate 1%, Supartz [®] , Synvisc [®] , Synvisc-One [®] , Synjoyn [®] , Trilon [®] , Trivisc [®]
Infertility	Bravelle [®] , Chorionic Gonadotropin [®] , Follistim [®] AQ, Ganirelix [®] , Pergonal [®] , Pregnyl [®]
Iron Reducers	Exjade [®] , Ferriprox [®] , Jadenu [®]
Miscellaneous	AtroPen [®] , Caphasol [®] , carbinoxamine 6mg, carbinoxamine 4mg/5ml soln, Gelclair [®] , Orfadin [®] , ProBarimin QT [™] , Lysteda [™] , Ryvent [®]
Musculoskeletal	chlorzoxazone 250, 375, 750mg, cyclobenzaprine 7.5mg, Cyclopak Kit [®] , Amrix [®] , Fexmid [™] , Lorzone [®] , Nopioid LMC [®] , Soma [®] , Zanaflex [®]

NSAIDs Oral and Topical	Arthrotec [®] , Cambia [™] , Cataflam [®] , Consensi [®] , Coxanto [®] , Daypro [™] , Diclo [®] Gel, diclofenac 2% suspension, diclofenac 25mg capsule, diclofenac 35mg capsule, Diclona [®] , Diclona + Pad [®] , Diclopak Kit [®] , Diclophono [®] , Diclopr Combo Pack [®] , DicloTrex [®] , Diclovix [®] , Diclovix M [®] , Diclozor Kit [®] , Dithol [®] , Duexis [®] , Dyloject [®] , Elyxyb [®] , fenoprofen 200, 400mg, Flector [®] , Flexipak Kit [®] , Ibupak [®] , ibuprofen/famotidine, Indocin [®] suspension, Indomethacin 20mg, Inflathe [®] m, Inavix [®] , Kapzin DC [®] , ketoprofen 25mg, ketoprofen ER, Ketorolac Tromethamine nasal spray, Lofena [®] , Lexixryl [®] , Lodine [®] /XL, meloxicam submicronized, Mobic [®] , Nalfon [®] , Naprosyn [®] /EC, naproxen sodium CR 375mg, 500mg, Naprelan [®] , Naprelan [®] CR, Naprotin [®] , Naproxen/esomeprazole, Nudiclo Solupak [®] , Nudiclo TabPak [®] , Pennsaid [®] , Qmiiz ODT [®] , Tivorbex [®] , Varophen [®] , Vimovo [™] , Vivlodex [®] , Voltaren [®] /XR, Zipsor [™] , Zorvolex [®]
OB/GYN Estrogen, Topical	Alora [®] , Divigel [®] , Esclim [®] , Elestrin [™] , Evamist [™] , Estrogel [®] , FemRing [®] , Menostar [™] , Novacort [™]
Estrogen Receptor Antagonist	Soltamox [™]
Monophasic OC	Balclotra [®] , Brevicon [®] , LoSeasonique [™] , Seasonique [™] , Taytulla [®]
Triphasic OC	Rivelsa [®] , Tri-Norinyl [®]
Four-phasic OC	Natazia [™] , Quartette [®]
Injectable OC	Depo-SubQ Provera 104 [®]
Oral HRT	Activella [™] , Angeliq [®] , Bijuva [®] , Duavee [®] , Estrace [®]
Other	Addyi [™] , Brisdelle [®] , Divigel [®] , Imvexxy [®] , Myfembree [®] , Oriahnn [®] , Orilissa [®] , Osphe [®] na, NuvaRing [®]
Prenatal Vitamins	Atabex EC [®] 29-1MG, Atabex OB [®] 29-1MG, Azesco [®] 13-1MG, Bal-Care DHA, Citranatal Harmony [®] , Citranatal 90 DHA [®] , Citranatal B-Calm [®] , Citranatal PAK Assure [®] , Citranatal [®] , Clitranatal PAK DHA [®] , Citranatal Bloom [®] , Citranatal RX [®] , C-Nate DHA 28-1-200 [®] , Complete Natal PAK DHA [®] , Completenate Chew [®] , CO-Natal FA 29-1MG [®] , Concept DHA [®] , Concept OB [®] , DermacinRx Prenatrix [®] , DermacinRx Prenatryl [®] , DermacinRx Pretrate [®] , Duet DHA 400 25-1-400 [®] , Duet DHA Balanced [®] , Enbrace HR [®] , Folivane-OB [®] , Jenliva [®] , Koshr Prenate [®] 30-1MG, M-Natal Plus [®] , Multi-Mac [®] , Mynatal [®] , Mynatal Advance [®] , Mynate 90 Plus [®] , Natachew [®] , Natalvit [®] 75-1MG, Neevo DHA [®] 27-1.13, Neonatal FE [®] , Neonatal Plus [®] 27-1MG, Neonatal Complete [®] , Neonatal Plus [®] , Neonatal/DHA [®] , Nestabs DHA [®] Pak, Nestabs One [®] , Nestabs [®] , Niva-Plus [®] , OB Complete One [®] , OB Complete Petite [®] , OB Complete [®] , OB Complete Premier [®] , OB Complete/DHA [®] , Obstetrx EC [®] , Obstetrx Pak DHA [®] , Obstetrx One [®] 38-1-225, Obtrex [®] , O-Cal Prenatal [®] , One Vite 1MG Plus [®] , PNV 20-1 [®] , PNV [®] 29-1MG, PNV-DHA [®] , Docusate, PNV-Omega [®] , PR Natal [®] 400 Pak, PR Natal [®] 400 Pak EC, PR Natal [®] 430 Pak, PR Natal [®] 430 Pak EC, Prega DHA [®] , Prega [®] , PremisisRx [®] , Prena 1 True [®] , Prena1 Pearl [®] , Prena1 [®] Chew, Prenaissance [®] , Prenaissance Plus [®] , Prenara Prenatal [®] , Prenatabs FA [®] 29-1MG Prenatal [®] , Prenatal/FE [®] , Prenatal [®] 27-1MG, Prenatal 19 [®] Chew 29-1MG, Prenatal 19 [®] 29-1MG, Prenatal/FE [®] , Prenatal Forte [®] , Prenatal Low Iron [®] , Prenatal [®] 27-1MG, Prenatal Plus [®] , Prenatal+FE 29-1MG [®] , Prenatal-U [®] 106.5-1, Prenate Essential [®] , Prenatal Pixie [®] , Prenate AM [®] 1MG, Prenate DHA [®] , Prenate Mini [®] , Prenate Enhance [®] , Prenate Restore [®] , Prenate [®] Chew 0.6-0.4, Prenate Elite [®] , Prenatvite Complete [®] , Prenatvite Plus [®] , Prenatvite RX [®] , Preplus [®] 27-1MG, Pretab [®] 29-1MG,

	Primacare [®] , Provida OB [®] , Redichew RX [®] , Relnate DHA [®] , R-Natal OB [®] 20-1-320, Select-OB [®] , Select-OB+ [®] Pak DHA, SE-Natal 19 [®] , Taron-C DHA [®] , Taron-Prex [®] , Thrivite RX [®] 29-1MG, Tricare Prenatal [®] , Trinatal RX [®] 1, Trinaz [®] , Tristart DHA [®] , Tristart One [®] 35-1-215, Tristart Free [®] , Tri-Tabs DHA [®] , Triveen-Duo [®] Pak DHA, Vinate DHA [®] AP 27-1.13, Vinate II [®] , Vinate ONE [®] , Virt-C DHA [®] , Virt-Nate DHA [®] , Virt-PN DHA [®] , Virt-PN Plus [®] , Vitafof Ultra [®] . Vitafof [®] Gummies, Vitafof FE+ [®] , Vitafof-Nano [®] , Vitafof-OB Pak +DHA [®] , Vitafof-OB [®] 65-1MG, Vitafof-One [®] , VittamedMD One RX [®] , Vitapearl [®] , Vitahely [®] , Vitatrue [®] , Viva DHA [®] , Vol-Plus [®] , Vol-Tab RX [®] , VP-PNV-DHA [®] . Wescap-C DHA [®] , Wescap-PN DHA [®] , Westgel DHA [®] , Westnatal DHA Pak Complete [®] , Wesnate DHA [®] , Westab Plus 27-1MG [®] , Zalvit [®] 13-1MG, Zatean-PN DHA [®] , Zatean-PN Plus [®] , Ziphex [®] 13-1MG
Ophthalmic Anti-infective	AzaSite [™] , Besivance, Moxeza [®] , Tobradex [®] ointment, Tobradex ST [®] , Vigamox [®] , Zylet [®] , Zymaxid [™]
Other	Acular [®] , Acular LS [®] , Acuvail [™] , Alphagan P [®] , Alrex [™] , Azopt [®] , Bepreve [™] , Betimol [®] , Betoptic S [®] , brimonidine 0.1%, Bromsite [®] , Combigan [®] , Durezol [™] , Eysuvis [®] , Flarex [®] , FML Forte [®] , FML SOP [®] , FML Liquifilm [®] , Ilevro [™] , Inveltys [®] , Istalol [™] , Iyuzeh [®] , Livostin [®] , Lotemax [®] , Lotemax SM [®] , Maxidex [®] , Nevanac [™] , PredMild [®] , Prolensa [™] , Rescula [®] , Restasis [®] Multidose, Rhopressa [®] , Rocklatan [®] , Simbrinza [®] , Timoptic [®] , Timoptic Occudose [®] , Tyrvaya [®] , Vyzulta [®] , Xelpros [®]
Oral Anti-Diabetic	ActoPlus Met [®] , ActoPlus Met XR [®] , alogliptin, alogliptin/metformin, alogliptin/pioglitazone, bexagliflozin, Fortamet [®] , glipizide 2.5mg, Glucophage [®] , Glucophage XR, Glumetza [™] , Invokana [®] , Invokamet [®] , Invokamet XR, Jentaduet [®] , Kazano [®] , Metformin ER, Metformin Film Coated ER, Metformin 625MG, Nesina [®] , Oseni [®] , Qtern [®] , Rybelsus [®] , Segluromet [®] , Steglatro [®] , Steglujan [®] , Tradjenta [™]
Phosphate Binders	Auryxia
Respiratory Beta-adrenergic and combinations (inhaled)	AirSupra [®] , Arformoterol, Albuterol Sulfate HFA (Ventolin Authorized Product), Albuterol Sulfate HFA (ProAir Authorized Product), AirDuo DigiHaler [®] , AirDuo RespiClick [®] , Arcapta [™] , ArmonAir [™] DigiHaler [®] , ArmonAir [™] RespiClick [®] , Breo-Ellipta [®] , Brovana [®] , fluticasone/vilanterol, Levalbuterol HFA, ProAir DigiHaler [®] , ProAir [®] HFA, ProAir [®] RespiClick, Proventil [®] HFA, Symbicort [®] , Ventolin [®] , Ventolin [®] HFA, Ventolin [®] Rotacaps, Xopenex HFA [®] , Xopenex [®] nebulizers
Inhaled Steroid	Arnuity Ellipta [®] , Alvesco [®] , Asmanex HFA [®] , Asmanex Twisthaler [®] , Flovent Diskus [®] , Flovent HFA [®]
Leukotriene Modifier	Accolate [®] , Singulair [®] , Zylfo [™] , Zylfo [™] CR
Other	Benzonatate 150mg, Budesonide/Formoterol, Daliresp [®] , Duaklir Pressair [®] , Kitabis PAK [®] , Lonhala Magnair [®] , Tudorza [®] , Yupelri [®]
Vitamins/Minerals	Nascobal [®] , Rayaldee [®]