



2019 Clinical Focus Formulary

The following is a list of the most commonly prescribed drugs. It represents an abbreviated version of the drug list (formulary) that is at the core of your prescription-drug benefit plan. The list is not all-inclusive and does not guarantee coverage. In addition to using this list, you are encouraged to ask your doctor to prescribe generic drugs whenever appropriate.

PLEASE NOTE: Brand-name drugs may move to nonformulary status if a generic version becomes available during the year. Not all the drugs listed are covered by all prescription-drug benefit programs; check your benefit materials for the specific drugs covered and the copayments for your prescription-drug benefit program. For specific questions about your coverage, please call the phone number printed on your member ID card.

A	AZASITE	chorionic gonadotropin [†] [INJ]	dextroamphetamine-amphetamine ^{AE}	EVEKEO ^{AE QL}	H
acetaminophen-codeine	azelastine nasal spray ^{QL ST}	CIALIS ^{QL}	dextroamphetamine-amphetamine ER ^{AE}	EXTAVIA ^{† PA QL} [INJ]	HUMIRA ^{† PA LD} [INJ]
ACTEMRA ^{† PA QL LD} [INJ]	azithromycin	CIPRODEX	diazepam	ezetimibe ^{QL ST}	hydralazine
ACTHAR H.P. ^{† PA LD} [INJ]	B	ciprofloxacin	diclofenac	ezetimibe-simvastatin ^{QL ST}	hydrochlorothiazide
acyclovir	baclofen	citalopram ^{QL}	dicyclomine	F	acetaminophen
ADCIRCA ^{† PA QL}	benazepril	clarithromycin	digoxin	famotidine	hydrocortisone
ADEMPAS ^{† PA QL LD}	benzonatate	clindamycin hcl	diltiazem ER	FARXIGA ^{QL}	hydromorphone
ADVAIR DISKUS ^{QL}	BEPREVE	clindamycin-phosphate	divalproex DR	fenofibrate ^{QL ST}	hydroxychloroquine
ADVAIR HFA ^{QL}	BETHKIS ^{† PA QL LD}	clindamycin-benzoyl peroxide ^{AE}	divalproex ER	fenofibrate micronized ^{QL ST}	hydroxyzine hcl
AKYNZEO ^{PA QL}	bimatoprost eye soln ST	clobetasol propionate	DIVIGEL	fentanyl patch ^{QL}	hydroxyzine pamoate
albuterol nebulizing soln	bisoprolol-hydrochlorothiazide	clomiphene citrate	donepezil ^{QL}	FETZIMA ^{QL}	HYSINGLA ER ^{QL}
alendronate	BREO ELLIPTA ^{QL}	clonazepam	doxazosin	FINACEA ^{AE PA}	I
allopurinol	BREVICON	clonidine	doxycycline hyclate	finasteride	ibandronate soln ^{† PA QL}
ALPHAGAN P 0.1%	BRILINTA ^{QL}	clopidogrel	doxycycline monohydrate	FLOVENT DISKUS ^{QL}	ibandronate ^{QL}
alprazolam	budesonide ER	clotrimazole-betamethasone	DUAVEE ^{QL}	FLOVENT HFA ^{QL}	ibuprofen
ALREX	budesonide nebulizing soln ^{QL}	COLCRYS ^{QL}	duloxetine DR ^{QL ST}	fluconazole	ICLUSIG ^{† PA QL LD}
amiodarone	buprenorphine-naloxone ^{QL}	COMBIGAN	DYMISTA ^{QL ST}	fluocinonide	ILEVRO
AMITIZA ^{PA QL}	buprenorphine patch ^{QL}	COMBIPATCH ^{QL}	E	fluoxetine	indapamide
amitriptyline	bupropion	COMBIVENT RESPIMAT ^{QL}	ELIDEL ^{PA}	fluticasone nasal spray	indomethacin
amlodipine	bupropion ER	CORLANOR ^{PA QL}	ELIQUIS ^{QL}	FORTEO ^{† PA QL} [INJ]	INLYTA ^{† PA QL LD}
amlodipine-benazepril ST	buspirone	COSENTYX ^{† PA LD} [INJ]	enalapril	FRAGMIN ^{QL} [INJ]	irbesartan
amlodipine-valsartan ^{QL ST}	butalbital-acetaminophen-caffeine ^{QL}	CREON	ENBREL ^{† PA QL} [INJ]	furosemide	irbesartan-hydrochlorothiazide
amoxicillin	BYSTOLIC ^{QL ST}	CRINONE	ENJUVA ^{QL}	FYCOMPA ^{QL}	IRESSA ^{† PA QL LD}
amoxicillin-clavulanate	C	cyclobenzaprine	enoxaparin [INJ]	G	isosorbide dinitrate
anastrozole	CANASA	D	ENSTILAR ^{QL}	gabapentin	isosorbide mononitrate
ANORO ELLIPTA ^{QL}	carbidopa-levodopa	dalfampridine ^{PA QL}	ENTRESTO ^{PA QL}	GELNIQUE ST	isotretinoin ^{PA}
APRISO ^{QL}	carvedilol	DALIRESP ^{PA QL}	EPIDUO FORTE ^{AE}	gemfibrozil	J
ARCAPTA NEOHALER ^{QL}	cefdinir	DAYTRANA ^{AE QL}	EPIPEN ^{QL} [INJ]	GENERESS FE	JANUMET ^{QL}
aripiprazole ^{QL}	cefuroxime axetil	desloratadine ^{QL}	EPIPEN JR ^{QL} [INJ]	GENOTROPIN ^{† PA} [INJ]	JANUMET XR ^{QL}
ARISTADA ^{PA QL} [INJ]	celecoxib ^{QL ST}	desonide	ergocalciferol	GILENYA ^{† PA QL}	JANUVIA ^{QL}
ARNUITY ELLIPTA ^{QL}	cephalexin	desvenlafaxine ^{QL ST}	erythromycin eye ointment	GILOTRIF ^{† PA QL LD}	JARDIANCE ^{QL}
ASMANEX HFA ^{QL}	CETROTIDE ^{† PA} [INJ]	dexamethasone	escitalopram	glatiramer ^{† PA QL} [INJ]	JENTADUETO ^{QL}
ASMANEX TWISTHALER ^{QL}	CHANTIX ^{QL}	DEXILANT ^{QL ST}	esomeprazole DR ^{QL ST}	glimepiride	JENTADUETO XR ^{QL}
atenolol	chlorhexidine gluconate	dexmethylphenidate ^{AE QL}	estradiol	glipizide	K
atenolol-chlorthalidone		dexmethylphenidate ER ^{AE QL}	estradiol patch ^{QL}	glipizide ER	KALBITOR ^{† PA LD} [INJ]
atomoxetine ^{AE QL}			estradiol vaginal cream	GLUCAGON ^{QL} [INJ]	ketoconazole
atorvastatin			ESTROSTEP FE	glyburide	KISQALI ^{† PA QL}
AVONEX ^{† PA QL} [INJ]			eszopiclone ^{QL ST}	GONAL-F [†]	KITABIS PAK ^{† PA QL LD}
			etodolac	GONAL-F RFF [†]	L
			EUFLEXXA ^{† PA QL} [INJ]	GRANIX ^{† PA} [INJ]	labetalol
				guanfacine ER ^{QL}	lamotrigine

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lansoprazole DR	MINASTRIN 24 FE	ORACEA ^{PA QL}	quetiapine ER ^{QL}	T	VELTASSA ^{QL}
LANTUS [INJ]	minocycline	ORTHOVISC ^{† PA QL} [INJ]	quinapril	TACLONEX	venlafaxine
latanoprost eye soln	MIRENA ^{LD}	OTEZLA ^{† PA QL}	QVAR REDHALER ^{QL}	SUSPENSION	venlafaxine ER ST
LATUDA ^{QL}	mirtazapine	oxcarbazepine	R	tacrolimus ointment	VENTOLIN HFA ^{QL}
LAZANDA ^{PA QL}	MIRVASO ^{AE PA QL}	oxybutynin ER	rabeprazole ST	tamoxifen	verapamil ER
LETAIRIS ^{† PA QL LD}	mometasone	oxycodone	raloxifene ^{QL}	tamsulosin	VESICARE ^{QL ST}
LEVEMIR [INJ]	MONOVISC ^{† PA QL} [INJ]	oxycodone-	ramipril	TARCEVA ^{† PA QL LD}	VIBERZ ^{PA QL}
LEVEMIR	montelukast	acetaminophen ^{QL}	RANEXA ^{QL}	TAZORAC ^{AE}	VICTOZA ^{PA QL} [INJ]
FLEXTOUCH [INJ]	morphine sulfate ER ^{QL}	OXYCONTIN ^{QL}	ranitidine	TECFIDERA ^{† PA QL LD}	VIIBRYD ^{QL ST}
levetiracetam	MOVANTIK ^{PA QL}	OZEMPIC ^{PA QL} [INJ]	RAPAFLO ^{QL}	TEKTRUNA ^{QL ST}	VIMPAT ^{QL}
levocetirizine	MOXEZA ST	P	rasagiline ^{QL}	TEKTRUNA HCT ^{QL ST}	VIOKACE
levofloxacin	moxifloxacin eye soln ST	paliperidone ER ^{QL}	RASUVO ^{† PA QL} [INJ]	temazepam ST	VYVANSE ^{AE QL}
levofloxacin eye soln	mupirocin	pantoprazole	REBIF ^{† PA QL} [INJ]	terazosin	W
levothyroxine	MUSE ^{QL}	paroxetine	RECTIV	terconazole vaginal	warfarin
lidocaine patches ^{QL}	MYRBETRIQ ^{QL ST}	paroxetine ER ST	RELISTOR ^{PA QL} [INJ]	testosterone cypionate ^{PA}	X-Y
LINZESS ^{PA QL}	N	PAZEO	REMICADE ^{† PA} [INJ]	[INJ]	XARELTO ^{QL}
liothyronine	nabumetone	penicillin v potassium	RESTASIS ^{PA QL}	testosterone topical ^{PA}	XELJANZ ^{† PA QL}
lisinopril	naltrexone ^{QL}	PENTASA	rizatriptan ^{QL}	timolol eye soln	XELJANZ XR ^{† PA QL}
lisinopril-	NAMZARIC ^{QL ST}	PERFOROMIST	ropinirole	tizanidine ^{QL}	XIFAXAN ^{PA QL}
hydrochlorothiazide	naproxen	PICATO ^{PA}	rosuvastatin ^{QL ST}	TOBI PODHALER ^{† PA QL LD}	XIGDUO XR ^{QL}
LO LOESTRIN FE	NARCAN	pioglitazone	S	TOBRADEX	XULTOPHY ^{QL} [INJ]
lorazepam	neomycin-polymyxin-	PLEGRIDY ^{† PA QL LD} [INJ]	SANCUSO ^{PA QL}	OINTMENT	Z
losartan	hydrocortisone	polymyxin-	SAVELLA ^{QL}	TOBRADEX ST	ZENPEP
losartan-	otic soln	trimethoprim eye soln	SEGLUROMET ^{QL}	tobramycin eye soln	ZEPATIER ^{† PA QL}
hydrochlorothiazide	NEUPOGEN ^{† PA} [INJ]	potassium chloride ER	SEREVENT DISKUS ^{QL}	tobramycin-	zolmitriptan ^{QL}
LOTEMAX	NEVANAC	POTIGA ^{QL}	sertraline	dexamethasone	zolpidem ^{QL}
lovastatin	niacin ER ^{QL}	pramipexole	sevelamer	tolterodine ER ^{QL ST}	zolpidem ER ^{QL ST}
LYRICA ^{QL ST}	nifedipine ER	prasugrel ^{QL}	SIGNIFOR ^{† PA QL}	topiramate	ZOMIG NASAL ^{QL}
M	nitrofurantoin	pravastatin	SIGNIFOR LAR ^{† PA QL}	TOUJEO	ZONTIVITY ^{QL}
MAKENA ^{† PA QL LD} [INJ]	NORDITROPIN ^{† PA} [INJ]	prednisolone	sildenafil ^{QL}	SOLOSTAR [INJ]	ZYLET
MAVYRET ^{† PA QL}	nortriptyline	prednisone	simvastatin	TOVIAZ ^{QL ST}	ZYTIGA ^{† PA QL LD}
meclizine	NOVOLIN [INJ]	PREMARIN TABS ^{QL}	SOMATULINE	TRACLEER ^{† PA QL LD}	
medroxyprogesterone	NOVOLOG [INJ]	PREMARIN VAGINAL	DEPOT ^{† PA QL LD} [INJ]	TRADJENTA ^{QL}	
meloxicam	NUCYNTA ^{QL}	CREAM	SPIRIVA HANDIHALER ^{QL}	tramadol	
memantine ER ^{QL ST}	NUCYNTA ER ^{QL}	PREMPRO ^{QL}	SPIRIVA RESPIMAT ^{QL}	TRAVATAN Z ST	
mesalamine DR	NUVARING ^{QL}	PREPOPIK ^{QL}	spironolactone	trazodone	
metaxalone	nystatin	PROAIR HFA ^{QL}	SPRYCEL ^{† PA QL}	TRESIBA	
metformin	nystatin	PROAIR RESPICLICK ^{QL}	STEGLATRO ^{QL}	FLEXTOUCH [INJ]	
methimazole	oral suspension	PROCRIT ^{† PA} [INJ]	STEGLUJAN ^{QL}	triamcinolone	
methocarbamol	O	progesterone	STELARA ^{† PA QL} [INJ]	triamterene-	
methotrexate	OFEV ^{† PA QL LD}	micronized	STIOLTO RESPIMAT ^{QL}	hydrochlorothiazide	
methylphenidate ^{AE QL}	olanzapine ^{QL}	PROLENSA	SUBOXONE SL FILM ^{QL}	TRULICITY ^{PA QL} [INJ]	
methylphenidate ER ^{AE QL}	olmesartan ^{QL ST}	promethazine	sulfamethoxazole-	TYMLOS ^{† PA QL} [INJ]	
methylprednisolone	olmesartan-	promethazine-	trimethoprim	U	
metoclopramide	amlodipine ^{QL ST}	dextromethorphan	sumatriptan ^{QL}	ULORIC ^{QL}	
metoprolol	olmesartan-	propranolol	SUPREP ^{QL}	UPTRAVI ^{† PA QL LD}	
succinate ER ST	hydrochlorothiazide ^{QL ST}	propranolol ER	SYNJARDY ^{QL}	V	
metoprolol tartrate	olopatadine eye soln	PULMICORT	SYNJARDY XR ^{QL}	valacyclovir	
metronidazole	omeprazole DR	FLEXHALER ^{QL}	SYMBICORT ^{QL}	valsartan	
metronidazole topical	ondansetron ^{QL}	Q	SYMLINPEN ^{PA} [INJ]	valsartan-	
metronidazole	ONETOUCH ^{QL}	QNASL ^{QL ST}		hydrochlorothiazide	
vaginal gel	OPSUMIT ^{† PA QL LD}	quetiapine ^{QL}		VASCEPA ^{QL}	

Examples of Excluded Medications With Selected Formulary Alternatives

The following is a list of some excluded brand-name medications with examples of selected alternatives that are on the formulary. Column 1 lists examples of excluded medications. Column 2 lists some alternatives that can be prescribed.

Excluded Medications	Sample Preferred Alternative(s)
ACANYA and ONEXTON (clindamycin phosphate-benzoyl peroxide)	clindamycin and benzoyl peroxide (separate agents)
ADMELOG (insulin lispro)	NOVOLOG
AEROSPAN (flunisolide)	ARNUITY ELLIPTA ^{OL} , ASMANEX HFA ^{OL} , ASMANEX TWISTHALER ^{OL} , FLOVENT DISKUS ^{OL} , FLOVENT HFA, ^{OL} PULMICORT FLEXHALER ^{OL} , QVAR ^{OL}
ALVESCO (ciclesonide)	ARNUITY ELLIPTA ^{OL} , ASMANEX HFA ^{OL} , ASMANEX TWISTHALER ^{OL} , FLOVENT DISKUS ^{OL} , FLOVENT HFA, ^{OL} PULMICORT FLEXHALER ^{OL} , QVAR ^{OL}
APIDRA (insulin glulisine)	NOVOLOG
APIDRA SOLOSTAR (insulin glulisine)	NOVOLOG
AUVI-Q (epinephrine solution)	EPIPEN ^{OL} , EPIPEN JR ^{OL}
BASAGLAR (insulin glargine)	LANTUS, LEVEMIR, TOUJEO, TRESIBA
BELSOMRA (suvorexant)	zolpidem IR ^{OL} , zaleplon
BONJESTA and DICLEGIS (doxylamine-pyridoxine)	OTC doxylamine and OTC pyridoxine
BRAVELLE (urofollitropin)	GONAL-F [†] , GONAL-F RFF [†]
BYETTA (exenatide), BYDUREON (exenatide ER)	OZEMPIC ^{PA OL} , TRULICITY ^{PA OL} , VICTOZA ^{PA OL}
CAMBIA (diclofenac)	diclofenac sodium DR
DENAVIR (penciclovir)	acyclovir ointment
DIABETES TEST STRIPS (e.g., Accu-Chek, Ascensia, Breeze, Contour, Freestyle, etc.)	ONETOUCH ^{OL}
DORYX (doxycycline hyclate DR)	doxycycline hyclate
DUREZOL (difluprednate)	prednisolone acetate solution
FOLLISTIM AQ (follitropin beta)	GONAL-F [†] , GONAL-F RFF [†]
FORFIVO XL (bupropion ER)	bupropion ER
GLUMETZA and FORTAMET (metformin ER modified/osmotic)	metformin ER (generic Glucophage XR)
GRALISE (gabapentin once-daily)	gabapentin
HORIZANT (gabapentin ER)	gabapentin
HUMALOG (insulin lispro)	NOVOLOG
HUMULIN (insulin NPH isophane and insulin regular), HUMULIN N (insulin NPH isophane), HUMULIN R (insulin regular)	NOVOLIN, NOVOLIN N, NOVOLIN R
INCRUSE ELLIPTA (umeclidinium)	SPIRIVA ^{OL}
INVOKAMET (canagliflozin-metformin), INVOKAMET XR (canagliflozin-metformin ER)	SYNJARDY ^{OL} , SYNJARDY XR ^{OL} , XIGDUO XR ^{OL}
INVOKANA (canagliflozin)	FARXIGA ^{OL} , JARDIANCE ^{OL}
JUBLIA (eficonazole)	ciclopirox
KAZANO (alogliptin-metformin)	JANUMET ^{OL} , JANUMET XR ^{OL} , JENTADUETO ^{OL} , JENTADUETO XR ^{OL}
KERYDIN (tavaborole)	ciclopirox
KOMBIGLYZE XR (saxagliptin-metformin ER)	JANUMET ^{OL} , JANUMET XR ^{OL} , JENTADUETO ^{OL} , JENTADUETO XR ^{OL}
NASCOBAL (cyanocobalamin nasal)	OTC vitamin B12
NESINA (alogliptin)	JANUVIA ^{OL} , TRADJENTA ^{OL}

(Continued)

Excluded Medications	Sample Preferred Alternative(s)
ONGLYZA (saxagliptin)	JANUVIA ^{QL} , TRADJENTA ^{QL}
OSENI (alogliptin-pioglitazone)	JANUVIA ^{QL} and pioglitazone or TRADJENTA ^{QL} and pioglitazone
PANCREAZE (pancrelipase DR)	CREON, ZENPEP
PERTZYE (pancrelipase DR)	CREON, ZENPEP
PROVENTIL HFA (albuterol)	PROAIR HFA ^{QL} , VENTOLIN HFA ^{QL}
QTERN (dapagliflozin-saxagliptin)	GLYXAMBI ^{QL}
SOLARAZE (diclofenac 3% gel)	fluorouracil cream
SOLIQUA (insulin glargine-lixisenatide)	XULTOPHY ^{PA QL}
SOLODYN (minocycline ER)	minocycline
SOOLANTRA (ivermectin cream)	metronidazole cream ^{AE}
TIROSINT (levothyroxine)	levothyroxine
TREXIMET (sumatriptan-naproxen)	sumatriptan ^{QL} and naproxen (separate agents)
TUDORZA PRESSAIR (aclidinium)	SPIRIVA ^{QL}
VIMOVO (esomeprazole-naproxen)	OTC esomeprazole and OTC naproxen
XOPENEX HFA (levalbuterol)	PROAIR HFA ^{QL} , VENTOLIN HFA ^{QL}
ZEGERID (omeprazole-sodium bicarbonate)	OTC omeprazole-sodium bicarbonate
ZIANA and VELTIN (clindamycin phosphate-tretinoin)	clindamycin and tretinoin ^{AE} (separate agents)
ZIOPTAN (tafluprost)	latanoprost
ZORVOLEX (diclofenac)	diclofenac sodium DR
ZOVIRAX (acyclovir cream)	acyclovir ointment

<p>KEY</p> <p>[INJ] = Injectable Drug</p> <p>ER = Extended-Release</p> <p>DR = Delayed Release</p> <p>AE = Age Edit</p> <p>LD= Limited Distribution</p> <p>PA = Prior Authorization</p> <p>QL = Quantity Limits</p> <p>ST = Step Therapy</p> <p>† Indicates specialty medications</p>	<p>For the member: Your specific prescription benefit plan design may not cover certain products or categories, regardless of their appearance in this document. Products recently approved by the US Food and Drug Administration (FDA) may not be covered upon release to market.</p> <p>WellDyneRx may contact your provider after receiving a prescription to request consideration of a drug list product or generic equivalent. This may result in your provider prescribing, when medically appropriate, a different brand-name product or generic equivalent in place of the original prescription. Generic medications contain the same active ingredients as their corresponding brand-name medications, although they may look different in color or shape. They have been FDA-approved under strict standards.</p> <p>In most instances, a brand-name drug for which a generic product becomes available will be designated as a non-preferred or excluded option upon release of the generic product to the market.</p> <p>For the physician: Generics should be considered the first-line of prescribing. Please prescribe preferred products and allow generic substitutions when medically appropriate. Brand-name drugs are listed in CAPITAL letters; generic drugs are listed in lower case letters.</p> <p>This drug list represents a summary of prescription coverage. It is not all-inclusive and does not guarantee coverage. The member's specific prescription benefit plan design may not cover certain products or categories, regardless of their appearance in this document. Products recently approved by the FDA may not be covered upon release to market.</p>
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