



Make sure your prescription medicines are covered



Talk to your doctor about switching to one of the alternative drugs included on your prescription drug list. If you use a non-covered drug, you may pay the full price.

NetResults™ is your prescription drug list, or formulary, which is a list of drugs covered by your plan.

Prime Therapeutics (Prime) is trusted by your employer or health plan to help you get the medicine you need to feel better and live well. Our pharmacy experts work hard to make medicine more affordable for everyone.

NetResults is the list of drugs covered by your health plan. It was designed to push back against today's high costs for medicine. NetResults works by offering alternatives to more expensive drugs, so members get the right medicine at the best cost.

Some drugs will not be listed on the NetResults drug list.

If a drug is not on the formulary, it will not be covered by your health plan. This publication lists many of the non-covered drugs along with alternative drugs that are covered. The list is divided into four sections:

- 1 Non-covered with preferred alternatives**
Alternatives to non-covered drugs— potential options at better costs.
- 2 Standard non-covered drugs**
Lists reasons why these drugs are not covered.

Additionally, some health plans or groups may choose not to cover drugs for the following reasons:

- 3 Non-covered with over-the-counter alternatives**
For prescription drugs that have an effective medicine available from your pharmacy.
- 4 Non-covered due to high costs**
Safe, effective alternatives are available at lower costs.

1 Non-covered with preferred alternatives

| DRUG CLASS | NON-COVERED | GENERICS AND PREFERRED BRAND ALTERNATIVES | NON-PREFERRED BRAND ALTERNATIVES |
|---|---|--|-----------------------------------|
| Acne agents: retinoids and retinoid like agents | ADAPALENE LOTION, ADAPALENE SOLUTION, ADAPALENE PAD, isotretinoin products (including: amnesteem capsule, claravis capsule, isotretinoin capsule, myorisan capsule, zenatane capsule), DIFFERIN LOTION, RETIN-A MICRO GEL/PUMP, TRETIN -X cream | ABSORICA, adapalene/benzoyl peroxide, avita cream, avita gel, EPIDUO FORTE, tretinoin cream, tretinoin gel | |
| Acne and rosacea agents | CLINDAGEL GEL, FINACEA FOAM, NORITATE CREAM, RHOFADE | azelaic acid gel, clindamycin gel, clindamycin lotion, clindamycin solution, metronidazole cream, metronidazole gel, metronidazole lotion, SOOLANTRA | MIRVASO |
| Allergic reaction (anaphylaxis) therapy | AUVI-Q | epinephrine solution (generic epi-pen), SYMJEPI | |
| Antibiotics: tetracyclines | ARESTIN, DORYX MPC, MINOLIRA, SEYSARA, TARGADOX, VIBRAMYCIN SYRUP, XIMINO | doxycycline hyclate, doxycycline monohydrate, ORACEA | |
| Anticoagulants | SAVAYSA | ELIQUIS, XARELTO | PRADAXA |
| Anti-nausea and vomiting agents | AKYNZEO CAPSULE | ondansetron, VARUBI | |
| Antirheumatics | RASUVO | methotrexate injection, methotrexate tablet, OTREXUP | |
| Antivirals: hepatitis B agents | VEMLIDY | tenofovir disoproxil fumarate | |
| Antivirals: hepatitis C agents | DAKLINZA, LEDIPASVIR/SOFOSBUVIR (authorized generic of HARVONI), SOFOSBUVIR/VELPATASVIR (authorized generic of EPCLUSA), TECHNIVIE, VIEKIRA, ZEPATIER | EPCLUSA, HARVONI, MAVYRET, SOVALDI, VOSEVI | |
| Asthma: inhaled steroids | ALVESCO, ARMONAIR, PULMICORT INHALER | ARNUITY, ASMANEX, FLOVENT, QVAR | |
| Asthma: short-acting beta agonists | ALBUTEROL HFA (authorized generics of PROAIR, PROVENTIL and VENTOLIN), LEVALBUTEROL HFA, PROAIR DIGIHALER, PROVENTIL, XOPENEX HFA | PROAIR, PROAIR RESPICLICK, VENTOLIN | |
| Asthma/COPD: combination agents | AIRDUO, BEVESPI, fluticasone propionate/salmeterol, UTIBRON, wixela | ADVAIR, ANORO, BREO, DULERA, FLUTICASON PROPIONATE/SALMETEROL AEROSOL (authorized generic of AIRDUO), STIOLTO, SYMBICORT, TRELEGY | COMBIVENT |
| Attention deficit hyperactivity disorder (ADHD), narcolepsy, and weight loss | ADHANSIA XR, ADZENYS ER SUSP, ADZENYS XR-ODT, amphetamine/dextroamphetamine ER, APTENSIO XR, COTEMPLA XR-ODT, DAYTRANA PATCH, DYANAVEL XR SUSP, Evekeo ODT, JORNAY PM, methylphenidate ER, MYDAYIS, RELEXII, WAKIX | ADDERALL XR, amphetamine/dextroamphetamine, CONCERTA, dextroamphetamine solution, dextroamphetamine, methylphenidate, SUNOSI, VYVANSE | QUILLICHEW ER, QUILLIVANT XR SUSP |
| Biologic agents: inflammatory bowel disease | SIMPONI, XELJANZ XR | HUMIRA, STELARA | CIMZIA, XELJANZ |
| Biologic agents: plaque psoriasis and psoriatic arthritis | ORENCIA, SILIQ, SIMPONI, TALTZ, XELJANZ XR | COSENTYX, ENBREL, HUMIRA, OTEZLA, SKYRIZI, STELARA, TREMFYA | CIMZIA, XELJANZ |
| Biologic agents: rheumatoid arthritis | KEVZARA, KINERET, OLUMIANT, ORENCIA, SIMPONI, XELJANZ XR | ENBREL, HUMIRA, RINVOQ | ACTEMRA, CIMZIA, XELJANZ |

1 Non-covered with preferred alternatives (continued)

| DRUG CLASS | NON-COVERED | GENERIC AND PREFERRED BRAND ALTERNATIVES | NON-PREFERRED BRAND ALTERNATIVES |
|---|--|--|----------------------------------|
| Bladder incontinence | darifenacin ER, GELNIQUE, TOVIAZ | MYRBETRIQ, oxybutynin, oxybutynin ER, solifenacin tablet, tolterodine, tolterodine ER, trospium ER | |
| COPD: inhaled anticholinergics | LONHALA, SEEBRI, TUDORZA, YUPELRI | INCRUSE, SPIRIVA | ATROVENT |
| Diabetes: amylin analogs | SYMLINPEN | OZEMPIC, TRULICITY, VICTOZA | BYDUREON |
| Diabetes: combination agents | ALOGLIPTIN/METFORMIN, ALOGLIPTIN/PIOGLITAZONE, JENTADUETO, JENTADUETO XR, KAZANO, OSENI, SEGLUROMET, STEGLUJAN | glipizide/metformin, glyburide/metformin, GLYXAMBI, INVOKAMET, INVOKAMET XR, JANUMET, JANUMET XR, KOMBIGLYZE XR, pioglitazone/metformin, SYNJARDY, SYNJARDY XR | QTERN, XIGDUO XR |
| Diabetes: continuous glucose monitors | FREESTYLE LIBRE | DEXCOM | |
| Diabetes: dipeptidyl peptidase (DPP-4) inhibitors | ALOGLIPTIN, NESINA, TRADJENTA | JANUVIA, ONGLYZA | |
| Diabetes: glucagon-like peptide-1 (GLP-1) agonists | ADLYXIN, BYETTA | OZEMPIC, TRULICITY, VICTOZA | BYDUREON |
| Diabetes: glucose test strips | Abbott (FreeStyle, Precision), Lifescan (OneTouch), Roche (Accu-Chek), Nipro (TRUtest, TRUEtrack) | Bayer/Ascensia (Breeze, Contour) | |
| Diabetes: intermediate and long-acting insulins | BASAGLAR, HUMULIN N | HUMULIN R U-500, LANTUS, LEVEMIR, NOVOLIN N, TOUJEO, TRESIBA | |
| Diabetes: mixed insulins | insulin aspart mix (authorized generic for NOVLOG MIX), insulin aspart 70/30 (authorized generic for NOVLOG 70/30), HUMALOG MIX, HUMULIN 70/30 | NOVOLIN 70/30, NOVLOG MIX | |
| Diabetes: short-acting insulins | ADMELOG, AFREZZA, APIDRA, HUMALOG, HUMULIN R, INSULIN ASPART (authorized generic for NOVLOG), INSULIN LISPRO (authorized generic for HUMALOG) | FIASP, NOVOLIN R, NOVLOG | |
| Diabetes: sodium-glucose co-transporter 2 (SGLT2) inhibitors | STEGLATRO | INVOKANA, JARDIANCE | FARXIGA |
| Dry eyes | CEQUA, LACRISERT | RESTASIS, XIIDRA | |
| Fish oil | omega-3-acid ethyl esters capsule, triklo capsule | VASCEPA | |
| Glaucoma: ophthalmic prostaglandins | bimatoprost, RESCULA, XELPROS, ZIOPTAN | latanoprost solution, LUMIGAN, travoprost solution | VYZULTA |
| Glaucoma: ophthalmic alpha 2 agonists and combinations | ALPHAGAN P, IOPIDINE SOLUTION | apraclonidine solution, brimonidine solution, SIMBRINZA | |
| Glaucoma: ophthalmic rhokinase inhibitors | RHOPRESSA, ROCKLATAN | latanoprost solution, LUMIGAN, travoprost solution | VYZULTA |
| Gout | colchicine (generic COLCRYS), COLCHICINE (authorized generic of MITIGARE) | allopurinol, MITIGARE, probenecid/colchicine | |

1 Non-covered with preferred alternatives (continued)

| DRUG CLASS | NON-COVERED | GENERIC AND PREFERRED BRAND ALTERNATIVES | NON-PREFERRED BRAND ALTERNATIVES |
|-------------------------------------|---|---|----------------------------------|
| Growth hormones | GENOTROPIN, HUMATROPE, NUTROPIN AQ, OMNITROPE, SAIZEN, SEROSTIM, ZOMACTON, ZORBTIVE | NORDITROPIN | |
| Hemophilia A | JIVI | ADVATE, ADYNOVATE, AFSTYLA, ELOCTATE, NOVOEIGHT, NUWIQ, RECOMBINATE, XYNTHA | |
| Hereditary angiodema (HAE) agents | TAKHZYRO | HAEGARDA | |
| High cholesterol: PCSK-9 inhibitors | PRALUENT | REPATHA | |
| High cholesterol: statins | EZALLOR SPRINKLE CAPSULE, ZYPITAMAG | atorvastatin tablet, LIVALO, lovastatin, pravastatin, rosuvastatin, simvastatin | |
| HIV | DOVATO, PIFELTRO, SYMTUZA | Talk to your doctor about clinically appropriate alternatives. Examples of covered alternatives include: BIKTARVY, efavirenz, INTELENCE, GENVOYA, nevirapine, STRIBILD | |
| Hypoglycemia agents | BAQSIMI | GLUCAGON KIT, GVOKE, PROGLYCEM | GLUCAGEN HYPOKIT |
| Inflammatory bowel agents | budesonide ER, DIPENTUM, GIAZO, PENTASA | APRISO, balsalazide capsule, budesonide capsule, DELZICOL, mesalamine enema, mesalamine DR tablet, sulfasalazine tablet | |
| Laxatives: bowel prep | CLENIQ, GOLYTELY, MOVIPREP, OSMOPREP TABLET, PLENVU, PREPOPIK | gavilyte-g solution, peg 3350/ electrolytes solution, peg-3350/nacl/na bicarbonate/kcl solution | SUPREP |
| Laxatives: CIC, IBS-C, OIC | AMITIZA, LINZESS, MOTEGRITY, MOVANTIK, RELISTOR, ZELNORM | SYMPROIC, TRULANCE | |
| Long acting beta agonists | PERFOROMIST NEBULIZATION SOLUTION | BROVANA NEBULIZATION SOLUTION, SEREVENT, STRIVERDI | ARCAPTA |
| Migraine products: CGRP inhibitors | AJOVY | AIMOVIG, EMGALITY | |
| Migraine products: ergotamines | DIHYDROERGOTAMINE NASAL (authorized generic of MIGRANAL) | MIGRANAL | |
| Migraine products: triptans | ONZETRA NASAL, ZEMBRACE SYMTOUCH, ZOMIG NASAL | eletriptan, rizatriptan, SUMATRIPTAN SYRINGE, sumatriptan, zolmitriptan | SUMAVEL DOSEPRO |
| Multiple sclerosis | EXTAVIA, glatopa, ZINBRYTA | AUBAGIO, AVONEX, BETASERON, COPAXONE, GILENYA, glatiramer (generic COPAXONE by Mylan), MAVENCLAD, MAYZENT, PLEGRIDY, REBIF, TECFIDERA | |
| Ophthalmic: anti-infectives | AZASITE, CILOXAN OINTMENT, MITOSOL, TOBREX OINTMENT, ZIRGAN | BACITRACIN OINTMENT , BESIVANCE, ciprofloxacin solution, erythromycin ointment, gentamicin solution, MOXEZA, moxifloxacin solution, NATACYN, ofloxacin solution, tobramycin solution, TRIFLURIDINE SOLUTION | |
| Ophthalmic: steroid combinations | TOBRADEX OINTMENT | neomycin/polymyxin/bacitracin/ hydrocortisone ointment, neomycin/ polymyxin/dexamethasone ointment, neomycin/polymyxin/dexamethasone suspension, sulfacetamide/ prednisolone solution, tobramycin/ dexamethasone suspension | ZYLET |

1 Non-covered with preferred alternatives (continued)

| DRUG CLASS | NON-COVERED | GENERICS AND PREFERRED BRAND ALTERNATIVES | NON-PREFERRED BRAND ALTERNATIVES |
|---|---|--|----------------------------------|
| Ophthalmic: steroids | DUREZOL, FML FORTE, FML OINTMENT, INVELTYS, PRED FORTE, PRED MILD | ALREX, DEXAMETHASONE SOLUTION, fluorometholone suspension, loteprednol suspension, LOTEMAX, prednisolone suspension | |
| Osteoporosis agents | FORTEO | TYMLOS | |
| Otic: anti-infectives, steroids and combinations | CIPRO HC | CIPRODEX, neomycin/polymyxin/hydrocortisone solution, neomycin/polymyxin/hydrocortisone suspension, ofloxacin solution | |
| Ovulatory stimulants | BRAVELLE, GONAL-F, OVIDREL | CHORIONIC GONADOTROPIN SOLUTION, FOLLISTIM AQ, MENOPUR, NOVAREL, PREGNYL | |
| Pain: narcotic analgesics | ARYMO ER, MORPHABOND ER, OXYCONTIN | fentanyl patch, hydromorphone tablet, morphine ER, oxycodone, XTAMPZA ER | |
| Pain: nerve pain | LYRICA CR | gabapentin, pregabalin | GRALISE, HORIZANT |
| Pain: nonsteroidal anti-inflammatory agents (NSAIDS) | naproxen ER, RELAFEN DS, QMIIZ ODT, TIVORBEX, VIVLODEX, ZORVOLEX | diclofenac tablet, ibuprofen tablet, indomethacin capsule, meloxicam tablet, naproxen tablet | DUEXIS, VIMOVO |
| Pancreatic enzymes | PANCREAZE, PERTZYE, VIOKACE | CREON, ZENPEP | |
| Sleep aid: melatonin receptor agonists | ramelteon | eszopiclone, zaleplon, zolpidem, zolpidem ER | HETLIOZ CAPSULE |
| Testosterone products | ANDRODERM, AVEED, NATESTO NASAL, STRIANT, VOGELXO, XYOSTED | testosterone gel (generic ANDROGEL), testosterone solution, testosterone cypionate solution, testosterone enanthate solution, testosterone topical solution (generic AXIRON) | |
| Topical: actinic keratosis (AK) agents | FLUOROPLEX, FLUOROURACIL CREAM (0.5%), PANRETIN, TARGRETIN, TOLAK | CARAC, diclofenac gel (3%), fluorouracil cream (5%), imiquimod cream, PICATO, ZYCLARA | |
| Topical: antifungals | oxiconazole cream | econazole nitrate cream, ketoconazole cream | |
| Topical: anti-inflammatory agents | DICLOFENAC PATCH (authorized generic of FLECTOR PATCH), FLECTOR PATCH | diclofenac gel (1%), diclofenac solution (1.5%) | |
| Topical: corticosteroid combination products | DUOBRII | ENSTILAR, halobetasol cream, halobetasol ointment, TACLONEX, tazarotene cream (0.1%), TAZORAC | |
| Topical: corticosteroids | IMPOYZ CREAM | clobetasol cream, clobetasol ointment, hydrocortisone cream, triamcinolone cream, triamcinolone ointment | |
| Topical: retinoids | FABIOR FOAM | tazarotene cream, TAZORAC | |
| Vaginal: anti-infectives | CLEOCIN SUPPOSITORY | clindamycin vaginal cream, metronidazole vaginal gel | CLINDESSE CREAM, NUVESSA GEL |
| Vaginal: estrogen products | estradiol vaginal tablet, IMVEXXY, yuvafem vaginal tablet | estradiol cream, PREMARIN CREAM, VAGIFEM TABLET | ESTRING RING, FEMRING RING |
| Vaginal: progestin products | CRINONE | ENDOMETRIN | |

2 Standard non-covered drugs

OTHER STANDARD NON-COVERED DRUGS STRATEGIES

RATIONALE

Brand drug, when generic equivalent is available
(e.g., ACTOS, CRESTOR, NEXIUM)

Brand name medications are not covered when a generic equivalent product is available. Please talk to your doctor or pharmacist about a generic version of your medication.

Bulk powders
(e.g., testosterone powder)

Compound drugs are prepared by mixing ingredients together to create an individualized medication for a specific patient. A common ingredient in compounds are bulk powders. Bulk powders are not approved by the Food and Drug Administration (FDA). Drugs marketed without required FDA approval may not meet standards for safety, effectiveness and quality. Therefore, bulk powders are not covered under your drug benefit. Please talk to your doctor or pharmacist about FDA-approved drugs available for your condition.

Drugs deemed not safe and/or effective
(e.g., carisoprodol, KETEK, ZYFLO)

These medications have been determined not safe or not effective by Prime's Pharmacy and Therapeutics Committee. Please talk to your doctor or pharmacist about other medications available for your condition.

General exclusions

These products are no longer covered under your drug benefit. These products may not be covered because they are not appropriate for retail use, used for cosmetic purposes, not available as a prescription, or require healthcare administration. However, these products may be available over-the-counter or through your medical benefit. Please talk to your doctor or pharmacist about other medications available for your condition.

Institutional packs

These medications are no longer covered through your drug benefit because it is packaged for use or redistribution by an institution (e.g. hospital). Institutional packs are not intended for use or sale outside of an institution. Please talk to your doctor or pharmacist about a version of your medication that is packaged for use outside of an institution.

Non-FDA approved medications

These medications are no longer covered under your drug benefit because they are not approved as a drug by the Food and Drug Administration (FDA). Medications marketed without required FDA approval may not meet standards for safety, effectiveness and quality. Please talk to your doctor or pharmacist about FDA-approved medications available for your condition.

Repackaged medications

Repackaged products are not covered. Please talk to your pharmacist about a version of your medication that is not repackaged.

3 Non-covered with over-the-counter alternatives

| DRUG CLASS | NON-COVERED | GENERIC AND PREFERRED BRAND ALTERNATIVES | NON-PREFERRED BRAND ALTERNATIVES |
|--|---|---|----------------------------------|
| Acne agents: retinoids and retinoid like agents | adapalene cream, adapalene gel | Talk to your pharmacist or doctor about over-the-counter options. The following prescription alternatives are available: avita cream, avita gel, tretinoin cream, tretinoin gel. | |
| Antihistamines | cetirizine solution, CLARINEX SYRUP, desloratadine tablet, levocetirizine solution, levocetirizine tablet | Talk to your pharmacist or doctor about over-the-counter options. | |
| Nasal steroids | BECONASE AQ, budesonide nasal, FLUNISOLIDE NASAL, mometasone nasal, OMNARIS, QNASL, triamcinolone nasal, XHANCE, ZETONNA | Talk to your pharmacist or doctor about over-the-counter options. The following prescription alternative is available: fluticasone nasal. | |
| Ophthalmic antiallergic agents | ALOCRIL, ALOMIDE, BEPREVE, EMADINE, epinastine solution, LASTACRAFT | Talk to your pharmacist or doctor about over-the-counter options. The following prescription alternatives are available: azelastine solution, olopatadine solution, PAZEO. | |
| Topical: antivirals | acyclovir ointment, DENAVIR, XERESE, ZOVIRAX | Talk to your pharmacist or doctor about over-the-counter options. | |
| Ulcer drugs: H2 antagonists | CIMETIDINE SOLUTION, cimetidine tablet, famotidine suspension, famotidine tablet (20 mg), nizatidine capsule, NIZATIDINE SOLUTION, ranitidine capsule, ranitidine tablet (150 mg) | Talk to your pharmacist or doctor about over-the-counter options. The following prescription alternatives are available: famotidine tablet (40 mg), ranitidine syrup, ranitidine tablet (300 mg). | |
| Ulcer drugs: proton pump inhibitors | ACIPHEX, esomeprazole, lansoprazole, PRILOSEC POWDER PACKET, PROTONIX POWDER PACKET, rabeprazole | Talk to your pharmacist or doctor about over-the-counter options. The following prescription alternatives are available: NEXIUM POWDER PACKET, omeprazole capsule, pantoprazole tablet. | DEXILANT |

4 Non-covered due to high costs

| DRUG CLASS | NON-COVERED | GENERICS AND PREFERRED BRAND ALTERNATIVES | NON-PREFERRED BRAND ALTERNATIVES |
|---|--|---|----------------------------------|
| Acne agents: retinoids and retinoid like agents | ALTRENO | ABSORICA, avita cream, avita gel, EPIDUO FORTE GE, tretinoin cream, tretinoin gel | |
| Acne and rosacea agents: topical antibacterials and combinations | ACZONE, AKTIPAK, AZELEX, clindamycin foam, clindamycin/tretinoin gel, dapsons gel, erythromycin/benzoyl peroxide gel, VELTIN | clindamycin gel, clindamycin lotion, clindamycin solution, clindamycin/benzoyl peroxide gel, erythromycin gel, ONEXTON GEL | |
| Agents for painful intercourse | INTRAROSA, OSPHENA | estradiol vaginal cream, PREMARIN CREAM, VAGIFEM TABLET | ESTRING RING, FEMRING RING |
| Alzheimer's agents | memantine ER capsule, NAMENDA XR, NAMZARIC | donepezil, memantine tablet, memantine solution | |
| Anticonvulsants | BRIVIACT, SYMPAZAN | clobazam, levetiracetam | |
| Antidepressants | APLENZIN, DRIZALMA, FORFIVO XL, KHEDEZLA | bupropion SR, bupropion XL, desvenlafaxine ER, duloxetine, venlafaxine, venlafaxine ER | |
| Anti-nausea and vomiting agents | SYNDROS SOLUTION | dronabinol capsule | |
| Antirheumatics | XATMEP | methotrexate injection, methotrexate tablet, OTREXUP | |
| BPH/enlarged prostate | CARDURA XL, silodosin capsule | alfuzosin ER, tamsulosin | |
| Corticosteroids | DXEVO, EMFLAZA, MILLIPRED, prednisolone ODT, ZONACORT | dexamethasone, hydrocortisone, methylprednisolone therapy pack, prednisolone solution, prednisone | RAYOS |
| Diabetes: biguanides | metformin ER modified release (generic GLUMETZA), metformin ER osmotic (generic FORTAMET), RIOMET SOLUTION | metformin, metformin ER (generic GLUCOPHAGE XR) | |
| Diabetes: thiazolidinediones (TZD) | AVANDIA | pioglitazone tablet | |
| Excessive sweating | QBREXZA PAD | Talk to your pharmacist or doctor about over-the-counter options. | |
| Fibromyalgia agents | SAVELLA TABLET | duloxetine, pregabalin | |
| Glaucoma: ophthalmic beta-blockers and combinations | BETIMOL, BETOPTIC-S, COMBIGAN, timolol (generic ISTALOL), TIMOPTIC OCUDOSE | betaxolol solution, carteolol solution, dorzolamide solution, dorzolamide/timolol solution, levobunolol solution, timolol solution, timolol gel | |
| Gout | febuxostat | allopurinol, probenecid/colchicine | |
| High blood pressure: beta blockers | DUTOPROL, HEMANGEOL, INDERAL XL, INNOPRAN XL, KAPSPARGO, SOTYLIZE SOLUTION | atenolol, bisoprolol, carvedilol, labetalol, metoprolol, PROPRANOLOL SOLUTION, propranolol tablet | |
| High blood pressure: direct renin inhibitors and combinations | aliskiren tablet, TEKTURN, TEKTURN HCT | enalapril, lisinopril, irbesartan, losartan, valsartan | |
| High cholesterol: statins | ALTOPREV, FLOLIPID, fluvastatin capsule, fluvastatin ER tablet, SIMVASTATIN SUSPENSION | atorvastatin tablet, LIVALO, lovastatin, pravastatin, rosuvastatin, simvastatin | |
| Irritable bowel syndrome (IBS) | alosetron tablet | VIBERZI, XIFAXAN 550 mg | |

4 Non-covered due to high costs (continued)

| DRUG CLASS | NON-COVERED | GENERICS AND PREFERRED BRAND ALTERNATIVES | NON-PREFERRED BRAND ALTERNATIVES |
|---|---|---|----------------------------------|
| Migraine products: triptans | almotriptan tablet, frovatriptan tablet, TOSYMRA NASAL | eletriptan, rizatriptan, SUMATRIPTAN SYRINGE, sumatriptan, zolmitriptan | SUMAVEL DOSEPRO |
| Muscle relaxants | BACLOFEN 5 mg TABLET, cyclobenzaprine er capsule (generic AMRIX) LORZONE, metaxalone tablet, OZOBAX, tizanidine capsule | baclofen tablet, cyclobenzaprine tablet, methocarbamol tablet, tizanidine tablet | |
| Ophthalmic: nonsteroidal anti-inflammatory agents (NSAIDS) | ACUVAIL, NEVANAC, PROLENSA | bromfenac solution, diclofenac solution, flurbiprofen solution, ketorolac solution | BROMSITE, ILEVRO |
| Ophthalmic: steroid combinations | TOBRADEX ST | neomycin/polymyxin/bacitracin/hydrocortisone ointment, neomycin/polymyxin/dexamethasone ointment, neomycin/polymyxin/dexamethasone suspension, sulfacetamide/prednisolone solution, tobramycin/dexamethasone suspension | ZYLET |
| Opioid: antidote | EVZIO | naloxone solution, NARCAN NASAL | |
| Opioid: dependence agents | BUNAVAIL | buprenorphine sublingual tablet, buprenorphine/naloxone sublingual film, buprenorphine/naloxone sublingual tablet | ZUBSOLV |
| Otic: anti-infectives, steroids and combinations | OTOVEL | CIPRODEX, neomycin/polymyxin/hydrocortisone solution, neomycin/polymyxin/hydrocortisone suspension, ofloxacin solution | |
| Pain: narcotic analgesics | ABSTRAL, BUPRENORPHINE PATCH, EMBEDA, FENTORA, HYSINGLA ER, LAZANDA NASAL, OXAYDO, SUBSYS LIQUID | BELBUCA, fentanyl patch, hydromorphone, morphine ER, oxycodone, XTAMPZA ER | ZOHYDRO ER |
| Pain: nonsteroidal anti-inflammatory agents (NSAIDS) | SPRIX NASAL, ZIPSOR | diclofenac tablet, ibuprofen tablet, indomethacin capsule, meloxicam tablet, naproxen tablet | DUEXIS, VIMOVO |
| Pain: tramadol/tapentadol | CONZIP, NUCYNTA, TRAMADOL ER CAPSULE | NUCYNTA ER, tramadol, tramadol ER tablet | |
| Parkinson's agents | GOCOVRI, NOURIANZ, OSMOLEX ER, pramipexole ER, ropinirole ER, XADAGO, ZELAPAR | amantadine capsule, amantadine syrup, amantadine tablet, entacapone tablet, INBRIJA, pramipexole tablet, rasagiline tablet, ropinirole tablet, selegiline capsule, selegiline tablet, tolcapone tablet | |
| Potassium sparing diuretics | CAROSPIR SUSPENSION | spironolactone tablet | |
| Topical: antifungals | ECOZA, ERTACZO, EXELDERM, ketoconazole foam, LULICONAZOLE CREAM, LUZU, NAFTIN, OXISTAT, XOLEGEL | ciclopirox nail lacquer, ciclopirox cream, econazole cream, JUBLIA, KERYDIN, ketoconazole cream, ketoconazole shampoo | |
| Topical: anti-itch | DOXEPIN CREAM, PRUDOXIN CREAM, ZONALON CREAM | betamethasone valerate cream, betamethasone valerate ointment, tacrolimus ointment, triamcinolone cream, triamcinolone ointment | |

4 Non-covered due to high costs (continued)

| DRUG CLASS | NON-COVERED | GENERIC AND PREFERRED BRAND ALTERNATIVES | NON-PREFERRED BRAND ALTERNATIVES |
|--|--|--|----------------------------------|
| Topical: steroid combination products | calcipotriene/betamethasone dipropionate ointment | ENSTILAR, TACLONEX | |
| Ulcer drugs: sucralfate | sucralfate suspension (generic CARAFATE) | sucralfate tablet | |
| Ulcer therapy: combinations packs | lansoprazole/amoxicillin/clarithromycin, OMECLAMOX-PAK, PYLERA | amoxicillin, clarithromycin, metronidazole, omeprazole, pantoprazole, tetracycline | |



About Prime Therapeutics

We are trusted by your health plan to help you get the medicine you need to feel better and live well. Our pharmacy experts are working hard to make your medicine more affordable and your experience easier.

A-Series February 2020

This list may not be all inclusive. This list is subject to change.

New-to-market products and variations of those products will not be added to this formulary until they have been evaluated and approved by Prime Therapeutics.

Please discuss with your health care provider before you switch any medications to ensure clinically appropriate use. This list is not intended to dictate to physicians how to practice medicine or intended to replace the judgment of your physician. Prime Therapeutics is not liable for any treatment administered or prescribed as a result of this formulary information.

Additional restrictions may apply.

Neither this document, nor the successful adjudication of a pharmacy claim, is guarantee of payment. Please refer to your member guide for detailed information regarding your pharmacy benefits, including your benefit design, out-of-pocket costs, prior review and restricted access medication requests, and applicable exclusions. For more information, please contact your Prime Therapeutics representative.

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