

## 2019 Express Scripts Preferred Formulary For the UFT Welfare Fund

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 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:** An asterisk (\*) next to a medication signifies that it may move to nonformulary status when the generic becomes available during the year. Not all the medications and/or products listed are covered by the UFT Welfare Fund prescription plan. Check your benefit materials for the specific drugs covered and the copayment information. For specific questions about your coverage, please call the phone number printed on your UFT Welfare Fund/Express Scripts prescription drug ID card.

<p><b>A</b></p> <p>ABSORICA ACANYA [STP] acetaminophen-codeine acyclovir ADVAIR DISKUS ADVAIR HFA albuterol sulfate alendronate ALPHAGAN P 0.1% alprazolam AMITIZA amitriptyline hcl amlodipine besylate amlodipine besylate-benazepril amoxicillin amphetamine salt combo anastrozole [PICA] ANDROGEL 1.62% [PA] ANORO ELLIPTA apri [GHI/HIP] APRISO ARCAPTA NEOHALER aripiprazole ARMONAIR RESPICLICK ARNUITY ELLIPTA ASMANEX ASMANEX TWISTHALER atazanavir atomoxetine atorvastatin calcium [GHI/HIP] ATRALIN [PA] AVONEX [INJ] [PA] [PICA] azelastine hcl azithromycin</p>	<p>COMBIGAN COMBIVENT RESPIMAT COMPLERA COPAXONE [INJ] [PA] [PICA] COREG CR CRINONE 8% [FER] cyclobenzaprine hcl</p> <p><b>D</b></p> <p>DAYTRANA DESCOVY desonide desvenlafaxine succinate er dexamethasone dexmethylphenidate er diazepam diclofenac sodium er dicyclomine divalproex sodium, er dorzolamide-timolol doxazosin mesylate doxycycline hyclate doxycycline monohydrate DULERA duloxetine hcl DYMISTA</p> <p><b>E</b></p> <p>efavirenz eletripan ELIDEL [STP] ELIQUIS enalapril maleate ENBREL [INJ] [PA] [PICA] enoxaparin sodium [INJ] [PICA] ENTRESTO EPCLUSA [AC] [PA] EPINEPHRINE AUTO-INJECTOR (by Mylan) [INJ] [PICA] escitalopram oxalate estradiol estradiol cream ESTRING eszopiclone etodolac ezetimibe ezetimibe-simvastatin</p> <p><b>F</b></p> <p>FARXIGA [HP] fenofibrate fentanyl FINACEA [STP] finasteride FLECTOR [STP] FLOVENT DISKUS, HFA fluconazole fluocinonide fluorouracil [PICA] flouxetine hcl folic acid</p> <p><b>G</b></p> <p>gabapentin gavilyte-g [GHI/HIP] gemfibrozil GENVOYA gianvi [GHI/HIP] gildess fe [GHI/HIP] GILENYA [AC] [PA] gIimepiride [HP] glipizide [HP] glyburide [HP] GONAL-F [FER] [INJ] [PICA]</p> <p><b>H</b></p> <p>HARVONI [AC] [PA] HUMALOG [HP] [INJ] HUMIRA [INJ] [PA] [PICA] HUMULIN [HP] [INJ] hydrochlorothiazide hydromorphone hcl hydroxychloroquine sulfate</p>	<p><b>I</b></p> <p>ibandronate sodium ILEVRO imiquimod [PICA] INVOKANA [HP] irbesartan ISENTRESS isosorbide mononitrate er</p> <p><b>J</b></p> <p>JANUVIA [HP] junel fe [GHI/HIP]</p> <p><b>K</b></p> <p>ketoconazole topical</p> <p><b>L</b></p> <p>labetalol latanoprost eye solution LATUDA LEVEMIR [HP] [INJ] levetiracetam levothyroxine sodium LINZESS liothyronine sodium lisinopril lisinopril-hydrochlorothiazide LO LOESTRIN FE [GHI/HIP] lopinavir-ritonavir lorazepam losartan potassium losartan-hydrochlorothiazide LOTEMAX lovastatin [GHI/HIP] LUMIGAN [STP] LYRICA* [PA]</p> <p><b>M</b></p> <p>medroxyprogesterone [INJ] [PICA] meloxicam memantine er MENOPUR [INJ] [PICA] mercaptopurine [PICA] mesalamine mesalamine 1.2 gm delayed release metaxalone metformin hcl [HP] methimazole methocarbamol methotrexate [PICA] methylphenidate hcl, er methylphenidate LA methylprednisolone metoprolol succinate metoprolol tartrate metronidazole microgestin fe [GHI/HIP] minocycline hcl mirtazapine MITIGARE modafinil [PA] mometasone furoate MOXEZA moxifloxacin hcl multivitamins with fluoride [GHI/HIP age 0-5] mupirocin MYRBETRIQ</p> <p><b>N</b></p> <p>nabumetone naftifine hcl 1% cream naltrexone [HP] niacin er nifedipine er nitrofurantoin monohydrate-macrocrystal NUDEXTA NUVARING* [GHI/HIP] nystatin</p>	<p><b>O</b></p> <p>ocella [GHI/HIP] OFEV [AC] olanzapine olmesartan medoxomil olmesartan medoxomil hctz olopatidine ondansetron hcl [PICA] ONEXTON [STP] OPSUMIT [AC] [PA] ORACEA orsythia [GHI/HIP] oseltamivir phosphate OTEZLA [AC] [PA] OTOVEL oxcarbazepine oxybutynin chloride, er oxycodone hcl OXYCONTIN*</p> <p><b>P</b></p> <p>pantoprazole sodium paroxetine hcl penicillin v potassium PENTASA PERFORMIST phendimetrazine tartrate pioglitazone hcl [HP] polymyxin b sul-trimethoprim potassium chloride prasugrel pravastatin sodium [GHI/HIP] prednisolone acetate prednisolone sodium phosphate prednisone PREMARIN CREAM PREMARIN TABLETS PREMPRO PREZISTA PROAIR HFA PROAIR RESPICLICK progesterone progesterone [INJ] [PICA] PROLENSA promethazine hcl propranolol hcl, er PULMICORT FLEXHALER</p> <p><b>Q</b></p> <p>QNASL quetiapine fumarate er quinapril hcl QVAR QVAR REDHALER</p> <p><b>R</b></p> <p>rabeprazole sodium raloxifene hcl [GHI/HIP] ramipril RANEXA RAPAFLO rasagiline RENVELA RESTASIS* risperidone ritonavir rizatriptan rosuvastatin [GHI/HIP]</p> <p><b>S</b></p> <p>SEREVENT DISKUS sertraline hcl sevelamer sildenafil [PA] simvastatin [GHI/HIP] SOLODYN [STP] SOOLANTRA [STP] SPIRIVA RESPIMAT sprintec [GHI/HIP] STRIBILD STRIVERDI RESPIMAT SUBOXONE [HP] sulfamethoxazole-trimethoprim sulfasalazine sumatriptan succinate</p>	<p>SYMBICORT SYMFI SYMFI LO</p> <p><b>T</b></p> <p>tacrolimus [STP] tadalafil [PA] tamoxifen citrate [PICA] tamsulosin hcl tazarotene 0.1% cream [PA] TAZORAC GEL [PA] TAZORAC 0.05% CREAM [PA] TECFIDERA [AC] [PA] telmisartan telmisartan-hydrochlorothiazide temazepam tenofovir terconazole vaginal testosterone cypionate [INJ] [PA] [PICA] timolol maleate tizanidine hcl TOBRADEX [STP] tobramycin-dexamethasone eye suspension tolterodine tartrate er topiramate [PA] tramadol hcl TRAVATAN Z* [STP] trazodone TRELLEGY ELLIPTA triamcinolone topical triamterene-hydrochlorothiazide trilyte with flavor packets [GHI/HIP] trinessa [GHI/HIP] tri-previfem [GHI/HIP] tri-sprintec [GHI/HIP] TRIUMEQ TRULANCE TRUVADA TUDORZA PRESSAIR</p> <p><b>U</b></p> <p>UCERIS FOAM ULORIC UPTRAVI [AC] [PA]</p> <p><b>V</b></p> <p>valacyclovir valsartan valsartan-hydrochlorothiazide VELTASSA venlafaxine hcl, er VENTOLIN HFA verapamil er VESICARE VIEKIRA PAK [AC] [PA] VIIBRYD [STP] VIMPAT VOSEVI [AC] [PA] VYVANSE</p> <p><b>W</b></p> <p>warfarin</p> <p><b>X</b></p> <p>XARELTO XELJANZ, XELJANZ XR [AC] [PA] XIFAXAN</p> <p><b>Y</b></p> <p>yuvafem</p> <p><b>Z</b></p> <p>ZENPEP ZEPATIER [AC] [PA] zolpidem zolpidem ext-release ZOMIG NASAL zonisamide ZUBSOLV [HP] ZYLET*</p>
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Go to [uft.org/health-benefits/prescription-drugs](http://uft.org/health-benefits/prescription-drugs) for a full list of formulary exclusions with their covered alternatives or log on to compare drug prices at [express-scripts.com/covered](http://express-scripts.com/covered). Costs for covered alternatives may vary.

**THIS DOCUMENT LIST IS EFFECTIVE JANUARY 1, 2019 THROUGH DECEMBER 31, 2019. THIS LIST IS SUBJECT TO CHANGE.**

**KEY**

- [AC] Medication is available through Accredo (800.501.7260)
- [FER] Medication is available through Freedom Fertility Pharmacy (800.660.4283)
- [GHI/HIP] These drugs will now be covered under Emblem GHI CBP/HIP HMO at a zero copay when age and indication is appropriate under ACA preventive care coverage. (212.501.4444)
- [HP] Medication is covered through your health plan
- [INJ] Injectable Drug
- [PA] Prior Authorization is required for coverage (800.753.2851)
- [PICA] Medication should be obtained through the NYC PICA program (800.467.2006)
- [STP] Step Therapy may apply to certain indications or some or all strengths of the drug
- [+] if brand-name drug is filled through the mail-order pharmacy, the generic copayment will be applicable as long as the prescription DOES NOT indicate dispense as written or that the brand is required

**For the member:** FDA-approved generic medications meet strict standards and contain the same active ingredients as their corresponding brand-name medications, although they may have a different appearance.

**For the physician:** Please prescribe preferred products and allow generic substitutions when medically appropriate.

**Brand-name drugs** are listed in CAPITAL letters. **Generic drugs** are listed in lower case letters.

**EXAMPLES OF NONFORMULARY MEDICATIONS WITH SELECTED FORMULARY ALTERNATIVES**

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

NONFORMULARY	FORMULARY ALTERNATIVE(S)	NONFORMULARY	FORMULARY ALTERNATIVE(S)
ACTONEL	alendronate, ibandronate sodium, risedronate sodium, ATELVIA	GLUCOTROL XL [HP]	glipizide er [HP]
ACTOPLUS MET [HP]	pioglitazone-metformin [HP]	HALOG	betamethasone dipropionate, betamethasone valerate, fluocinonide, triamcinolone acetonide
ACTOS [HP]	pioglitazone hcl [HP]	HORIZANT [PA]	gabapentin, LYRICA* [PA]
ACZONE [STP]	benzoyl peroxide/clindamycin phosphate, erythromycin	IMPOYZ	clobetasol propionate
ADDERALL XR	dextroamphetamine-amphet er	INTRAROSA	estradiol, yuvafem, ESTRING, PREMARIN
ADZENYS XR-ODT	dextroamphetamine sulfate er, dextroamphetamine-amphet er, methylphenidate er, MYDAYIS	INVEGA TRINZA [PICA]	ABILIFY MAINTENA [PICA], RISPERDAL CONSTA [PICA]
ALDARA [PICA]	imiquimod [PICA]	JALYN [STP]	dutasteride [STP], finasteride
ALPHAGAN P 0.15% [+]	brimonidine tartrate	JUBLIA [STP]	ciclopirox
AMBIEN [STP]	zolpidem	KALETRA	lopinavir-ritonavir
AMBIEN CR [STP]	zolpidem er	KLONOPIN	clonazepam
APTIOM	carbamazepine, oxcarbazepine, topiramate [PA], LYRICA* [PA]	KRISTALOSE	lactulose
ARIMIDEX [PICA]	anastrozole [PICA]	LASTACAPT	azelastine hcl, olopatadine, ALREX, BEPREVE, PAZEO
AROMASIN [PICA]	exemestane [PICA]	LIALDA	mesalamine
AUBAGIO [PA]	GILENYA [AC] [PA], TECFIDERA [AC] [PA]	LOCOID LIPOCREAM [PA]	hydrocortisone butyrate
AVANDAMET [HP]	pioglitazone-metformin [HP]	LORZONE	chlorzoxazone
AVANDIA [HP]	pioglitazone hcl [HP]	LOVAZA [PA] [+]	omega-3 acid ethyl esters [PA]
AZELEX [STP]	metronidazole, tretinoin [PA], FINACEA [STP], TAZORAC [PA]	LOVENOX [PICA]	enoxaparin sodium [PICA]
AZOPT	dorzolamide hcl, ALPHAGAN P 0.1%, COMBIGAN	MIRAPEX ER 3.75 MG TABLET	pramipexole er
BACTROBAN NASAL	mupirocin	MULTAQ	amiodarone hcl, flecainide acetate, propafenone hcl, sotalol
BELSOMRA [PA]	eszopiclone, zaleplon, zolpidem, zolpidem er, ROZEREM [STP]	NAFTIN	ciclopirox, clotrimazole, econazole nitrate, ketoconazole, naftifine hcl, oxiconazole nitrate
BELVIQ	benzphetamine hcl, diethylpropion hcl, phentermine hcl	NIASPAN ER [+]	niacin er
BELVIQ XR	benzphetamine hcl, diethylpropion hcl, phentermine hcl	OB COMPLETE GOLD	PNV-DHA, PRENA1 Pearl, VIRT-PN DHA
BESIVANCE	ciprofloxacin hcl, gatifloxacin, levofloxacin hemihydrate, moxifloxacin hcl, ofloxacin	OLUX	clobetasol propionate
BETIMOL	timolol maleate, ALPHAGAN P 0.1%, COMBIGAN	OLUX-E	clobetasol propionate
BEYAZ [GHI/HIP]	drospirenone-ethinyl estradiol-levomefolate [GHI/HIP], rajani [GHI/HIP]	OPANA ER	morphine sulfate
BRAVELLE [FER] [PICA]	GONAL-F [FER] [PICA], GONAL-F RFF [FER] [PICA]	OSPHENA	estradiol, yuvafem, ESTRING, PREMARIN
CARDIZEM LA [+]	diltiazem la	OVIDREL [FER] [PICA]	chorionic gonadotropin [FER] [PICA]
carisoprodol	metaxalone, tizanidine hcl	oxazepam	alprazolam, diazepam, lorazepam
CEFTIN	amox tr/potassium clavulanate, cefdinir, cefpodoxime proxetil, cefuroxime axetil	OXISTAT	ciclopirox, clotrimazole, econazole nitrate, oxiconazole nitrate
CIMZIA [AC] [PA] [PICA]	ENBREL [PA] [PICA], HUMIRA [PA] [PICA], STELARA [AC] [PA] [PICA]	OXTELLAR XR	oxcarbazepine
CIPRO HC	CIPRODEX, OTOVEL	PATADAY	olopatadine
CITRANATAL 90 DHA	PNV-DHA, PRENA1 Pearl, VIRT-PN DHA	PLEXION	sulfacetamide sodium-sulfur
CLEOCIN	clindamycin hcl	PRAMOSONE	hc pramoxine
CLIMARA [+]	estradiol	PREVIDENT	dentagel
CLINDESSE	clindamycin phosphate, metronidazole	PREVIDENT 5000 ENAMEL PROTECT	denta 5000 plus, sf 5000 plus
CLOBEX LOTION	clobetasol propionate	PREZCOBIX	ritonavir, PREZISTA
CONTRAVE	benzphetamine hcl, diethylpropion hcl, phentermine hcl	PROMETRIUM	progesterone
COTEMPLA XR-ODT	dexmethylphenidate hcl er, methylphenidate er, methylphenidate hcl cd, VYVANSE	RELPAX	eletriptan
COUMADIN	warfarin	RETIN-A MICRO PUMP [PA]	tretinoin microsphere [PA]
CYCLOSET [HP]	metformin hcl [HP], BYETTA [HP], JANUMET [HP], JANUVIA [HP], TRAJENTA [HP]	RHOFADE	MIRVASO
DENAVIR	acyclovir, famciclovir, valacyclovir, ZOVIRAX	RITALIN LA	methylphenidate er
DIFLUCAN	fluconazole	SIMBRINZA	brimonidine tartrate, dorzolamide-timolol, ALPHAGAN P 0.1%, COMBIGAN
DORYX	doxycycline hyclate	SIMPONI [AC] [PA] [PICA]	ENBREL [PA] [PICA], HUMIRA [PA] [PICA], STELARA [AC] [PA] [PICA]
DRYSOL	aluminum chloride, hypercare	SKLICE	malathion
DUREZOL	dexamethasone sodium phosphate, fluorometholone, prednisolone acetate, LOTEMAX	SUPRAX	cefdinir, cefuroxime axetil
ECOZA	ciclopirox, econazole nitrate, ketoconazole, naftifine hcl	SYNTHROID [+]	levothyroxine sodium
EFFIENT	prasugrel	TAMIFLU	oseltamivir phosphate
EFUDEX [PICA]	fluorouracil [PICA]	TARKA [+]	trandolapril-verapamil
EPOGEN [PICA]	PROCRIT [PICA]	TAZORAC 0.1% CREAM [PA]	tazarotene 0.1% cream [PA]
ESTRACE CREAM	estradiol cream	TIROSINT	levothyroxine sodium
ESTROSTEP FE [GHI/HIP]	apri [GHI/HIP], kariva [GHI/HIP], microgestin fe [GHI/HIP]	TOPICORT	desoximetasone
EUCRISA	tacrolimus [STP], ELIDEL [STP]	TOPROL XL [+]	metoprolol succinate xl
FABIOR [PA]	tazarotene 0.1% cream [PA], TAZORAC GEL [PA], TAZORAC 0.05% CREAM [PA]	TRI-LUMA	fluocinolone acetonide, hydroquinone, tretinoin [PA]
FEMARA [PICA]	letrozole [PICA]	TRINTELLIX [STP]	citalopram hbr, fluoxetine hcl, paroxetine hcl, sertraline hcl, VIIBRYD [STP]
FOCALIN	dexmethylphenidate hcl	TROKENDI XR [STP]	topiramate [PA]
FOCALIN XR	dexmethylphenidate hcl er	VERDESO	desonide
FOLLISTIM AQ [FER] [PICA]	GONAL-F [FER] [PICA], GONAL-F RFF [FER] [PICA]	VIGAMOX	moxifloxacin
FORADIL	ARCAPTA NEOHALER, SEREVENT DISKUS, STRIVERDI RESPIMAT	VITAFOL ULTRA	folic acid
GANIRELIX ACETATE [FER] [PICA]	CETROTIDE [FER] [PICA]	VOLTAREN	diclofenac sodium
GLUCOTROL [HP]	glipizide [HP]	WELLBUTRIN XL	bupropion hcl xl
		YAZ [GHI/HIP]	drospirenone-ethinyl estradiol [GHI/HIP]
		ZIANA [STP]	clindamycin phosphate-tretinoin [PA]

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The excluded medications shown below are not covered on the United Federation of Teachers Welfare Fund drug list. In most cases, if you fill a prescription for one of these drugs, you will pay the full retail price.

**Take action to avoid paying full price.** If you're currently using one of the excluded medications, please ask your doctor to consider writing you a new prescription for one of the following preferred alternatives. Additional covered alternatives may be available. Costs for covered alternatives may vary. Log on to [express-scripts.com/covered](http://express-scripts.com/covered) to compare drug prices. Not all the drugs listed are covered by all prescription plans; check your benefit materials for the specific drugs covered and the copayments for your plan. For specific questions about your coverage, please call the number on your member ID card.

Express Scripts manages your prescription plan for your Benefit Fund.

Drug Class	Excluded Medications	Preferred Alternatives
<b>AUTONOMIC &amp; CENTRAL NERVOUS SYSTEM</b> Antiparkinsonism Agents	GOCOVRI ER, OSMOLEX ER	amantadine capsules, amantadine tablets, amantadine oral solution
	XADAGO	rasagiline, selegiline
Duchenne Muscular Dystrophy (DMD) Agents	EMFLAZA	prednisone solution, prednisone tablets
Long-Acting Opioid Oral Analgesics	EMBEDA, OXYCODONE ER	hydromorphone ER, morphine sulfate ER, oxymorphone ER, HYSINGLA ER, NUCYNTA ER, OXYCONTIN
Narcotic Analgesics	BUTRANS	BELBUCA
Neuropathic Agents	LYRICA CR	gabapentin, LYRICA [PA]
Transmucosal Fentanyl Analgesics	ABSTRAL, FENTORA, LAZANDA	fentanyl citrate lozenges
<b>CARDIOVASCULAR</b> Anticoagulants	PRADAXA, SAVAYSA	ELIQUIS, XARELTO
Beta Blockers	KAPSPARGO SPRINKLE	metoprolol succinate
HMG & Cholesterol Inhibitor Combinations	ALTOPREV, ZYPITAMAG	atorvastatin [GHI/HIP], lovastatin [GHI/HIP], rosuvastatin [GHI/HIP], simvastatin [GHI/HIP], LIVALO
<b>DERMATOLOGICAL</b> Oral Agents for Acne	MINOCYCLINE ER 55 MG TABLETS, MINOLIRA	minocycline ER
Oral Agents for Rosacea	DOXYCYCLINE 40 MG CAPSULES	ORACEA
Topical Acne/Antibiotic Combinations	AKTIPAK, VELTIN	clindamycin/benzoyl peroxide, clindamycin/tretinoin, erythromycin/benzoyl peroxide, ACANYA [STP], ONEXTON [STP]
Topical Antifungals	LULICONAZOLE	ciclopirox, econazole, ketoconazole, naftifine, oxiconazole
Topical Antiviral Agents	XERESE CREAM	acyclovir capsules, acyclovir tablets, famciclovir tablets, valacyclovir tablets, ZOVIRAX CREAM
Topical Corticosteroids	TOPICORT SPRAY, VERDESO FOAM	desonide 0.05% cream/lotion/ointment, desoximetasone 0.25% cream/ointment
<b>EAR/NOSE</b> Nasal Steroids	BECONASE AQ, OMNARIS, ZETONNA	budesonide, flunisolide, mometasone, QNASL
Otic Fluoroquinolone Antibiotics	CETRALAX	ciprofloxacin ear solution, ofloxacin ear solution, CIPRODEX, OTOVEL
<b>ENDOCRINE (OTHER)</b> Combination Patches	CLIMARA PRO	COMBIPATCH
Estrogen and Estrogen Modifiers for Vaginal Symptoms	FEMRING	estradiol patches, estradiol tablets, yuvafem, ESTRING, PREMARIN CREAM, PREMARIN TABLETS
Topical Estrogen Gels	ESTROGEL	DIVIGEL
<b>GASTROINTESTINAL</b> Corticosteroids (Rectal Formulations)	CORTIFOAM	hydrocortisone enema, UCERIS FOAM
Inflammatory Bowel Agents	DELZICOL, DIPENTUM	balsalazide disodium, mesalamine 1.2 gm delayed release, sulfasalazine, APRISO, PENTASA
Pancreatic Enzymes	PANCREAZE, PERTZYE	CREON, ZENPEP
<b>HEPATITIS</b> Hepatitis C	DAKLINZA, LEDIPASVIR/SOFOSBUVIR, MAVYRET, OLYSIO, SOFOSBUVIR/VELPATASVIR, SOVALDI	EPCLUSA [PA], HARVONI [PA], VOSEVI [PA], ZEPATIER [PA]
<b>HIV</b> Antiretrovirals	ATRIPLA, DELSTRIGO, SYMTUZA	BIKTARVY, GENVOYA, ODEFSEY, STRIBILD, SYMFI, SYMFI LO, TRIUMEQ
	PIFELTRO	efavirenz, nevirapine ER, EDURANT, INTELENCE, RESCRIPTOR
<b>MUSCULOSKELETAL &amp; RHEUMATOLOGY</b> Gout Therapy	COLCHICINE	COLCRYS, MITIGARE
	DUZALLO, ZURAMPIC	allopurinol, probenecid
Nonsteroidal Anti-Inflammatory Drugs (NSAIDs)	FENOPROFEN CAPSULES, FENORTHO, NALFON CAPSULES	fenoprofen calcium tablets, diclofenac, indomethacin, meloxicam, nabumetone
<b>OBSTETRICAL &amp; GYNECOLOGICAL</b> Gonadotropin-Releasing Hormone (GnRH) Receptor Antagonists (for Endometriosis)	ORLISSA	LUPRON DEPOT [PICA], SYNAREL [PICA], ZOLADEX [PICA]
	Vaginal Progesterones	ENDOMETRIN

*Continued*

Drug Class	Excluded Medications	Preferred Alternatives
<b>OPHTHALMIC</b> Antiglaucoma Drugs (Beta-Adrenergic Blockers)	TIMOPTIC OCUDOSE	betaxolol drops, levobunolol drops, timolol drops, ALPHAGAN P 0.1%, COMBIGAN
Antiglaucoma Drugs (Ophthalmic Prostaglandins)	ZIOPTAN	bimatoprost drops, latanoprost drops, LUMIGAN [STP], TRAVATAN Z [STP]
Ophthalmic Anti-Allergic	ALOCRIIL, ALOMIDE, EMADINE	azelastine drops, cromolyn drops, olopatadine drops, ALREX, BEPREVE, PAZEO
Ophthalmic Anti-Inflammatory	FLAREX, FML FORTE, FML S.O.P., MAXIDEX, PRED MILD	dexamethasone drops, fluorometholone drops, prednisolone drops, LOTEMAX
Ophthalmic Non-Steroidal Anti-Inflammatory Drugs (NSAIDs)	ACUVAIL, NEVANAC	bromfenac drops, diclofenac drops, ketorolac drops, ILEVRO, PROLENSA
<b>RENAL DISEASE</b> Phosphate Binders	FOSRENOL POWDER PACKETS, RENAGEL	lanthanum, sevelamer carbonate, PHOSLYRA, VELPHORO
<b>RESPIRATORY</b> Long-Acting Beta Agonist Nebulized	BROVANA	PERFOROMIST
Pulmonary Anti-Inflammatory Inhalers	ALVESCO	ARMONAIR RESPICLICK, ARNUITY ELLIPTA, ASMANEX HFA/TWISTHALER, FLOVENT DISKUS/HFA, PULMICORT FLEXHALER, QVAR
Short-Acting Beta <sub>2</sub> -Agonist Inhalers	LEVALBUTEROL HFA, PROVENTIL HFA, XOPENEX HFA	PROAIR HFA/RESPICLICK, VENTOLIN HFA
<b>UROLOGICAL</b> Erectile Dysfunction Oral Agents	LEVITRA, STAXYN, STENDRA	sildenafil, tadalafil
<b>WEIGHT LOSS</b> Weight Loss Agents	CONTRAVE ER, QSYMIA	benzphetamine, diethylpropion, phentermine
<b>MISCELLANEOUS AGENTS</b>	NOCTIVA	desmopressin tablets

**KEY**

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- [GHI/HIP] These drugs will now be covered under Emblem GHI CBP/HIP HMO at a zero copay when age and indication is appropriate under ACA preventive care coverage. (212.501.4444)
- [PA] Prior Authorization is required for coverage (800.753.2851)
- [PICA] Medication should be obtained through the NYC PICA program (800.467.2006)
- [STP] Step Therapy may apply to certain indications or some or all strengths of the drug

**Excluded Medications/Products at a Glance (Previous users in 2018 are Grandfathered.)**

ABILIFY <sup>^</sup>	FENOPROFEN CAPSULES	PRADAXA
ABSTRAL	FENORTHO	PRED MILD
ACIPHEX <sup>^</sup>	FENTORA	PREVACID <sup>^</sup> , PREVACID SOLUTAB <sup>^</sup>
ACUVAIL	FLAREX	PRISTIQ <sup>^</sup>
ADCIRCA <sup>^</sup>	FML FORTE, FML S.O.P.	PROVENTIL HFA
ADDERALL <sup>^</sup>	FOSRENOL CHEWABLE TABLETS <sup>^</sup>	PROVIGIL <sup>^</sup>
AKTIPAK	FOSRENOL POWDER PACKETS	PROZAC <sup>^</sup>
ALOCRIIL	GOCOVRI ER	PULMICORT RESPULES <sup>^</sup>
ALOMIDE	IMITREX <sup>^</sup>	QSYMIA
ALTOPREV	INDERAL LA <sup>^</sup>	RENAGEL
ALVESCO	INTUNIV <sup>^</sup>	SAVAYSA
ANDROGEL 1% <sup>^</sup>	ISTALOL <sup>^</sup>	SEROQUEL <sup>^</sup> , SEROQUEL XR <sup>^</sup>
ANUSOL-HC <sup>^</sup>	KAPSPARGO SPRINKLE	SINGULAIR <sup>^</sup>
ARIMIDEX <sup>^</sup>	KEPPRA <sup>^</sup> , KEPPRA XR <sup>^</sup>	SOFOSBUVIR/VELPATASVIR
ASACOL HD <sup>^</sup>	LAMICTAL <sup>^</sup> , LAMICTAL ODT <sup>^</sup> , LAMICTAL XR <sup>^</sup>	SOVALDI
ATACAND <sup>^</sup> , ATACAND HCT <sup>^</sup>	LAZANDA	STAXYN
ATRIPLA	LEDIPASVIR/SOFOSBUVIR	STENDRA
AVALIDE <sup>^</sup> , AVAPRO <sup>^</sup>	LEVALBUTEROL HFA	STRATTERA <sup>^</sup>
AVODART <sup>^</sup>	LEVITRA	SYMTUZA
AZOR <sup>^</sup>	LEXAPRO <sup>^</sup>	TESTIM <sup>^</sup>
BECONASE AQ	LIBRAX <sup>^</sup>	TIMOPTIC OCUDOSE
BENICAR <sup>^</sup> , BENICAR HCT <sup>^</sup>	LIDODERM <sup>^</sup>	TOBI SOLUTION <sup>^</sup>
BRISDELLE <sup>^</sup>	LIPITOR <sup>^</sup>	TOPAMAX <sup>^</sup>
BROVANA	LOESTRIN <sup>^</sup> , LOESTRIN FE <sup>^</sup>	TOPICORT SPRAY
BUPAP <sup>^</sup>	LOTREL <sup>^</sup>	TRIBENZOR <sup>^</sup>
BUTRANS	LULICONAZOLE	TRICOR <sup>^</sup>
CELEBREX <sup>^</sup>	LUNESTA <sup>^</sup>	TRILEPTAL <sup>^</sup>
CELEXA <sup>^</sup>	LYRICA CR	UROXATRAL <sup>^</sup>
CETRAXAL	MAVYRET	VAGIFEM <sup>^</sup>
CLIMARA PRO	MAXALT <sup>^</sup> , MAXALT MLT <sup>^</sup>	VALIUM <sup>^</sup>
COLCHICINE	MAXIDEX	VALTRESX <sup>^</sup>
CONTRAVE ER	MICARDIS <sup>^</sup> , MICARDIS HCT <sup>^</sup>	VELTIN
COREG <sup>^</sup>	MINASTRIN 24 FE <sup>^</sup>	VERDESO FOAM
CORTIFOAM	MINOCYCLINE ER 55 MG TABLETS	VIAGRA <sup>^</sup>
COSOPT <sup>^</sup>	MINOLIRA	VIVELLE-DOT <sup>^</sup>
COZAAR <sup>^</sup> , HYZAAR <sup>^</sup>	NALFON CAPSULES	VYTORIN <sup>^</sup>
CRESTOR <sup>^</sup>	NAMENDA XR <sup>^</sup>	WELLBUTRIN SR <sup>^</sup>
CYMBALTA <sup>^</sup>	NASONEX <sup>^</sup>	XADAGO
CYTOMEL <sup>^</sup>	NEURONTIN <sup>^</sup>	XALATAN <sup>^</sup>
DAKLINZA	NEVANAC	XANAX <sup>^</sup> , XANAX XR <sup>^</sup>
DELSTRIGO	NOCTIVA	XENAZINE <sup>^</sup>
DELZICOL	NORCO <sup>^</sup>	XERESE CREAM
DETROL <sup>^</sup> , DETROL LA <sup>^</sup>	NORVASC <sup>^</sup>	XOPENEX HFA
DIOVAN <sup>^</sup> , DIOVAN HCT <sup>^</sup>	NUVIGIL <sup>^</sup>	YASMIN <sup>^</sup>
DIPENTUM	OLYSIO	ZEGERID <sup>^</sup>
DOXYCYCLINE 40 MG CAPSULES	OMNARIS	ZETIA <sup>^</sup>
DUZALLO	ORILISSA	ZETONNA
EFFEXOR XR <sup>^</sup>	ORTHO TRI-CYCLEN <sup>^</sup> , ORTHO TRI-CYCLEN LO <sup>^</sup>	ZIOPTAN
EMADINE	OSMOLEX ER	ZOCOR <sup>^</sup>
EMBEDA	OXYCODONE ER	ZOLOFT <sup>^</sup>
EMFLAZA	PANCREAZE	ZOMIG TABLETS <sup>^</sup> , ZOMIG ZMT <sup>^</sup>
ENDOMETRIN	PERTZYE	ZONEGRAN <sup>^</sup>
ESTROGEL	PIFELTRO	ZURAMPIC
EXFORGE <sup>^</sup> , EXFORGE HCT <sup>^</sup>	PLAQUENIL <sup>^</sup>	ZYPITAMAG
FEMRING	PLAVIX <sup>^</sup>	

<sup>^</sup> Multisource brand exclusion – The generic equivalent of this brand-name medication is covered under your plan. FDA-approved generic medications meet strict standards and contain the same active ingredients as their corresponding brand-name medications, although they may have a different appearance. As new generic medications become available, additional multisource brand products may become excluded.