

KEY

- [AC] Medication is available through Accredo (800.501.7260).
 [FER] Medication is available through Freedom Fertility Pharmacy (800.660.4283). Please note: Fertility drugs obtained through the NYC PICA program require Prior Authorization through WIN Fertility (833.439.1515).
 [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)
ABSORICA	accutane, amnesteem, claravis, myorisan, zenatane	ILEVRO	bromfenac sodium, diclofenac sodium, ketorolac tromethamine
ACANYA [STP]	benzoyl peroxide, clindamycin phosphate, dapsona, erythromycin	IMPOYZ	clobetazol propionate
ACTONEL	alendronate, ibandronate sodium, risedronate sodium	INVEGA TRINZA [PICA]	ABILIFY MAINTENA [PICA], RISPERDAL CONSTA [PICA]
ACTOPLUS MET [HP]	pioglitazone-metformin [HP]	INVELTYS	dexamethasone sodium phosphate, fluorometholone, loteprednol etabonate, prednisolone acetate
ACTOS [HP]	pioglitazone hcl [HP]	JALYN [STP]	dutasteride [STP], finasteride
ACZONE [STP]	benzoyl peroxide, clindamycin phosphate, dapsona, erythromycin	JUBLIA [STP]	ciclopirox
ADVAIR DISKUS [†]	fluticasone-salmeterol, WIXELA INHUB	KALETRA	lopinavir-ritonavir
ADZENYS XR-ODT	dextroamphetamine sulfate er, dextroamphetamine-amphet er, methylphenidate er, DYANAVEL, MYDAYIS	KRISTALOSE	lactulose
AKLIEF [STP]	adapalene, tazarotene 0.1% cream [PA], tretinoin [PA]	LOCOID LIPOCREAM [PA]	hydrocortisone butyrate
ALDARA [PICA]	imiquimod [PICA]	LORZONE	chlorzoxazone
ALPHAGAN P 0.1%	brimonidine tartrate	LOTEMAX GEL	loteprednol etabonate
ALPHAGAN P 0.15% [†]	brimonidine tartrate	LOTEMAX OINTMENT, SM	dexamethasone sodium phosphate, fluorometholone, loteprednol etabonate, prednisolone acetate
ALTRENO LOTION [STP]	tretinoin [PA]	LOVENOX [PICA]	enoxaparin sodium [PICA]
ALVESCO [STP]	ARNUITY ELLIPTA, ASMANEX HFA, FLOVENT DISKUS/HFA, QVAR REDIHALER	LUMIGAN	bimatoprost, latanoprost, travoprost
ARCAPTA NEOHALER	SEREVENT DISKUS	MIRAPEX ER 3.75 MG TABLET	pramipexole er
ARIMIDEX [PICA]	anastrozole [PICA]	MOXEZA	ciprofloxacin, gatrifloxacin, levofloxacin, moxifloxacin, ofloxacin
AROMASIN [PICA]	exemestane [PICA]	MULTAQ	amiodarone hcl, flecainide acetate, propafenone hcl, sotalol
AUBAGIO [AC] [PA]	dimethyl fumarate [AC] [PA], GILENYA [AC] [PA], MAYZENT [AC] [PA], VUMERITY [AC] [PA]	NAFTIN	ciclopirox, clotrimazole, econazole nitrate, ketoconazole, naftifine hcl, oxiconazole nitrate
ATROVENT	ipratropium bromide	NIASPAN ER [†]	niacin er
AVANDAMET [HP]	pioglitazone-metformin [HP]	NUVESSA	clindamycin, metronidazole
AVANDIA [HP]	pioglitazone hcl [HP]	OB COMPLETE GOLD	PNV-DHA, PRENA1 Pearl, VIRT-PN DHA
AZELEX [STP]	adapalene, metronidazole, tretinoin [PA], tazarotene 0.01% cream [PA], FINACEA GEL	OLUX	clobetazol propionate
BACTROBAN NASAL	mupirocin	OLUX-E	clobetazol propionate
BELSOMRA [PA]	eszopiclone, ramelteon, zaleplon, zolpidem, zolpidem er	ORACEA	doxycycline hyclate, doxycycline monohydrate
BELVIQ	benzphetamine hcl, diethylpropion hcl, phentermine hcl	OSPHENA	estradiol, yuvafem, PREMARIN
BELVIQ XR	benzphetamine hcl, diethylpropion hcl, phentermine hcl	oxazepam	alprazolam, diazepam, lorazepam
BEYAZ [GHI/HIP]	drospirenone-ethinyl estradiol-levomefolate [GHI/HIP], rajani [GHI/HIP]	OXTELLAR XR	oxcarbazepine
BROVANA	arformoterol fumarate, formoterol fumarate	PLEXION	sulfacetamide sodium-sulfur
CARDIZEM LA [†]	diltiazem la	PRAMOSONE	hc pramoxine
carisoprodol	metaxalone, tizanidine hcl	PREVIDENT	dentagel
CEFTIN	amox tr/potassium clavulanate, cefdinir, cefepodoxime proxetil, cefuroxime axetil	PREVIDENT 5000 ENAMEL PROTECT	denta 5000 plus, sf 5000 plus
CIPRODEX	ciprofloxacin/dexamethasone ophthalmic	PROMETRIUM	progesterone
CITRANATAL 90 DHA	PNV-DHA, PRENA1 Pearl, VIRT-PN DHA	QSYMIA	benzphetamine hcl, diethylpropion hcl, phentermine hcl
CLEOCIN	clindamycin hcl	QUDEXY	topiramate ER
CLIMARA [†]	estradiol	REXULTI	aripiprazole, olanzapine, quetiapine, risperidone, ziprasidone
CLINDESSE	clindamycin phosphate, metronidazole	ROZEREM [PA]	ramelteon
CLOBEX LOTION	clobetazol propionate	SIMBRINZA	brimonidine tartrate, dorzolamide-timolol
CLODERM	betamethasone valerate, fluocinonide acetoneide, triamcinolone acetoneide	SIMPONI [AC] [PA] [PICA]	ENBREL [PA] [PICA], HUMIRA [PA] [PICA], STELARA [AC] [PA] [PICA]
COMBIGAN	brimonidine tartrate, timolol maleate	SKLICE	malathion
CONTRAVE	benzphetamine hcl, diethylpropion hcl, phentermine hcl	SOLODYN [PA]	minocycline er
COTEMPLA XR-ODT	dexmethylphenidate hcl er, methylphenidate er, methylphenidate hcl cd, VYVANSE	SOLOSEC	clindamycin, metronidazole, tinidazole
COUMADIN	warfarin	SOOLANTRA [STP]	azelaic acid, metronidazole
CYCLOSET [HP]	metformin hcl [HP], BYETTA [HP], JANUMET [HP], JANUVIA [HP]	SUPRAX	cefdinir, cefuroxime axetil
DENAVIR*	acyclovir, famciclovir, valacyclovir	SYNTHROID [†]	levothyroxine sodium
DRYSOL	aluminum chloride, hypercare	TAMIFLU	oseltamivir phosphate
DUREZOL	dexamethasone sodium phosphate, fluorometholone, prednisolone acetate	TARKA	trandolapril-verapamil
EFFIENT	prasugrel	TOBRADEX [STP]	tobramycin-dexamethasone
EFUDEX [PICA]	fluorouracil [PICA]	TOPICORT	desoximetasone
EPOGEN [PICA]	PROCRIT [PICA]	TOPROL XL	metoprolol succinate xl
EUCRISA	tacrolimus [STP]	TOVIAZ	fesoterodine
EXELDERM	ciclopirox, econazole, ketoconazole, naftifine, oxiconazole	TRINTELLIX [STP]	citalopram hbr, fluoxetine hcl, paroxetine hcl, sertraline hcl
FABIOR [PA]	tazarotene 0.1% cream [PA]	TROKENDI XR [STP]	topiramate [PA]
FEMARA [PICA]	letrozole [PICA]	ULORIC	febuxostat
FORADIL	SEREVENT DISKUS	VERDESO	desonide
GLUCOTROL [HP]	glipizide [HP]	VESICARE [PA]	solefenacin
GLUCOTROL XL [HP]	glipizide er [HP]	VIGAMOX	moxifloxacin
HALOG	betamethasone dipropionate, betamethasone valerate, fluocinonide, triamcinolone acetoneide	VITAFOL ULTRA	folic acid
HORIZANT [PA]	gabapentin, pregabalin [PA]	VOLTAREN	diclofenac sodium
		VRAYLAR	aripiprazole, olanzapine, quetiapine, risperidone, ziprasidone
		VYZULTA [STP]	bimatoprost, latanoprost, travoprost
		YAZ [GHI/HIP]	drospirenone-ethinyl estradiol [GHI/HIP]
		ZIANA [STP]	clindamycin phosphate-tretinoin [PA]

Go to uft.org/health-benefits/prescription-drugs for a full list of formulary exclusions with their covered alternatives or log on to compare.drugprices.com/covered.

Costs for covered alternatives may vary.

THIS DOCUMENT LIST IS EFFECTIVE JANUARY 1, 2023 THROUGH DECEMBER 31, 2023. THIS LIST IS SUBJECT TO CHANGE.