

The excluded medications shown below are not covered on the Express Scripts 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](https://www.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 employer, plan sponsor, health plan or benefit fund. These excluded medications do not apply to Medicare plans.

Drug Class	Excluded Medications	Preferred Alternatives
<b>ANTIINFECTIVES</b> Antibiotics	DOXYCYCLINE HYCLATE DR 80 MG	doxycycline hyclate dr
Antifungal Agents (Oral)	TOLSURA	itraconazole
Antivirals (Oral)	SITAVIG	acyclovir oral or cream, famciclovir, valacyclovir
<b>AUTONOMIC &amp; CENTRAL NERVOUS SYSTEM</b> Alpha-2 Adrenergic Agonists (for Opioid Withdrawal)	LUCEMYRA	clonidine
Anticonvulsants	TOPIRAMATE ER CAPSULES	topiramate tablets, QUDEXY XR
Anti-Migraine Therapy	ONZETRA XSAIL	sumatriptan nasal spray, ZOMIG NASAL SPRAY
Antiparkinsonism Agents	GOCOVRI ER, OSMOLEX ER	amantadine capsules, amantadine tablets, amantadine oral solution
	XADAGO	rasagiline, selegiline
Antispasmodic Agents	OZOBAX	baclofen, tizanidine
Duchenne Muscular Dystrophy (DMD) Agents	EMFLAZA	prednisone solution, prednisone tablets
	EXONDYS 51	No alternatives recommended
Long-Acting Opioid Oral Analgesics	EMBEDA, OXYCODONE ER	hydromorphone er, morphine sulfate er, oxymorphone er, HYSINGLA ER, NUCYNTA ER, OXYCONTIN
Multiple Sclerosis (Beta Interferons)	EXTAVIA	AVONEX ADMINISTRATION PACK, AVONEX PEN, BETASERON, PLEGRIDY, REBIF, REBIF REBIDOSE
Multiple Sclerosis (Oral)	AUBAGIO	GILENYA, MAYZENT, TECFIDERA
Narcotic Analgesics & Combinations	APADAZ, BENZHYDROCODONE/ACETAMINOPHEN	hydrocodone/acetaminophen
	BUTRANS	buprenorphine patches, BELBUCA
Narcotic Antagonists	EVZIO	naloxone syringes, NARCAN NASAL SPRAY
Neuropathic Agents	LYRICA CR	gabapentin, pregabalin
Serotonin/Norepinephrine Reuptake Inhibitor Antidepressants	DRIZALMA SPRINKLE	desvenlafaxine er, duloxetine, venlafaxine er, FETZIMA
Tardive Dyskinesia Therapy	INGREZZA	AUSTEDO
Transmucosal Fentanyl Analgesics	ABSTRAL, FENTANYL CITRATE BUCCAL TABLETS, FENTORA, LAZANDA, SUBSYS	fentanyl citrate lozenges
Miscellaneous Antidepressants	SPRAVATO	olanzapine/fluoxetine, bupropion, desvenlafaxine er, duloxetine, escitalopram, mirtazapine, sertraline
<b>CARDIOVASCULAR</b> ACE Inhibitors	EPANED	enalapril
	QBRELIS	lisinopril
Anticoagulants	PRADAXA, SAVAYSA	ELIQUIS, XARELTO
Beta Blockers & Combinations	KAPSPARGO SPRINKLE	metoprolol succinate
	DUTOPROL, METOPROLOL SUCCINATE/HCTZ ER	metoprolol tartrate/hydrochlorothiazide, metoprolol succinate er plus hydrochlorothiazide
Calcium Channel Blockers	KATERZIA	amlodipine
HMG & Cholesterol Inhibitor Combinations	ALTOPREV, EZALLOR SPRINKLE	atorvastatin, fluvastatin er, lovastatin, pravastatin, rosuvastatin, simvastatin, LIVALO

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Drug Class	Excluded Medications	Preferred Alternatives
<b>DERMATOLOGICAL</b> Oral Agents for Acne	MINOLIRA	minocycline er
Rosacea Agents (Oral)	DOXYCYCLINE 40 MG CAPSULES	ORACEA
Rosacea Agents (Topical)	RHOFADE	MIRVASO
Topical Acne/Antibiotic Combinations	AKTIPAK, VELTIN	clindamycin/benzoyl peroxide, clindamycin/tretinoin, erythromycin/benzoyl peroxide, ONEXTON
Topical Agents for Actinic Keratosis	FLUOROURACIL 0.5% CREAM, IMIQUIMOD 3.75% CREAM PUMP, ZYCLARA	diclofenac 3% gel, fluorouracil 2% solution, fluorouracil 5% cream, imiquimod 5% cream, CARAC, PICATO
Topical Antifungals	LULICONAZOLE	ciclopirox, econazole, ketoconazole, naftifine, oxiconazole
Topical Corticosteroids	CLOCORTOLONE	betamethasone valerate, fluocinolone acetonide, triamcinolone acetonide
	TOPICORT SPRAY, VERDESO FOAM	desonide 0.05% cream/lotion/ointment, desoximetasone 0.25% cream/ointment
Miscellaneous Topical Dermatological Agents	ALCORTIN A	hydrocortisone, mupirocin
	LIDOCAINE/TETRACAINE	lidocaine cream, lidocaine/prilocaine cream
<b>DIABETES</b> Blood Glucose Meters & Test Strips	BAYER (BREEZE, CONTOUR) NATIONAL MEDICAL (ADVOCATE) OMNIS HEALTH (EMBRACE, VICTORY) ROCHE (ACCU-CHEK) TRIVIDIA (TRUETEST, TRUETRACK) UNISTRIP ALL OTHER METERS & TEST STRIPS THAT ARE NOT LISTED AS PREFERRED	FREESTYLE KITS/METERS: FREESTYLE FREEDOM, FREESTYLE FREEDOM LITE, FREESTYLE INSULINX, FREESTYLE LITE FREESTYLE TEST STRIPS: FREESTYLE, FREESTYLE INSULINX, FREESTYLE LITE ONETOUCH KITS/METERS: ULTRA2, ULTRAMINI, VERIO, VERIO FLEX ONETOUCH TEST STRIPS: ULTRA, VERIO PRECISION XTRA METERS, TEST STRIPS, B-KETONE STRIPS
Dipeptidyl Peptidase-4 Inhibitors & Combinations	ALOGLIPTIN, NESINA, ONGLYZA	JANUVIA, TRADJENTA
	ALOGLIPTIN/METFORMIN, KAZANO, KOMBIGLYZE XR	JANUMET, JANUMET XR, JENTADUETO, JENTADUETO XR
	ALOGLIPTIN/PIOGLITAZONE	pioglitazone plus JANUVIA or TRADJENTA
Glucagon-Like Peptide-1 Agonists	ADLYXIN, VICTOZA	BYDUREON, BYETTA, OZEMPIC, TRULICITY
Insulins	NOVOLIN, RELION NOVOLIN	HUMULIN
	ADMELOG, APIDRA, FIASP, INSULIN LISPRO, NOVOLOG	HUMALOG
<b>EAR/NOSE</b> Nasal Steroids	BECONASE AQ, OMNARIS, ZETONNA	budesonide, flunisolide, fluticasone, mometasone, QNASL
Otic Fluoroquinolone Antibiotics	CETRAXAL	ciprofloxacin ear solution, ofloxacin ear solution, CIPRODEX, OTOVEL
	CIPROFLOXACIN/FLUOCINOLONE OTIC	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
Growth Hormones	HUMATROPE, NUTROPIN AQ NUSPIN, OMNITROPE, SAIZEN, SAIZENPREP, ZOMACTON	GENOTROPIN, NORDITROPIN FLEXPRO
Somatostatin Analogs	SANDOSTATIN LAR DEPOT, SIGNIFOR LAR	SOMATULINE DEPOT
Topical Estrogen Gels	ESTROGEL	DIVIGEL
<b>GASTROINTESTINAL</b> Antiemetics (Oral)	AKYNZEO CAPSULES	granisetron, ondansetron, aprepitant, VARUBI TABLETS
	EMEND POWDER PACKETS	aprepitant, VARUBI TABLETS
Corticosteroids (Rectal Formulations)	CORTIFOAM	hydrocortisone enema, UCERIS FOAM
Inflammatory Bowel Agents	DIPENTUM	balsalazide disodium, mesalamine dr, mesalamine er, sulfasalazine, APRISO, PENTASA
Irritable Bowel Agents	ZELNORM	LINZESS, TRULANCE

Continued

Drug Class	Excluded Medications	Preferred Alternatives
<b>GASTROINTESTINAL (continued)</b> Pancreatic Enzymes	PANCREAZE, PERTZYE	CREON, ZENPEP
Proton Pump Inhibitors	ACIPHEX SPRINKLE, PRILOSEC SUSPENSION, PROTONIX SUSPENSION, RABEPRAZOLE DR SPRINKLE	esomeprazole, lansoprazole, omeprazole, pantoprazole, rabeprazole, NEXIUM PACKETS
<b>HEMATOLOGICAL</b> Antiplatelet Agents	ASPIRIN/OMEPRAZOLE DR, YOSPRALA DR	aspirin plus omeprazole, esomeprazole, lansoprazole, pantoprazole or rabeprazole
Chelating Agents	JADENU, JADENU SPRINKLE	deferasirox
Erythropoiesis-Stimulating Agents	ARANESP, EPOGEN, MIRCERA	PROCRIT, RETACRIT
Factor VIII Recombinant Products	NUWIQ, RECOMBINATE, XYNTHA, XYNTHA SOLOFUSE	ADVATE, ADYNOVATE, AFSTYLA, ELOCTATE, JIVI, KOGENATE FS, KOVALTRY, NOVOEIGHT
Granulocyte Colony Stimulating Factors	GRANIX, NEUPOGEN	NIVESTYM, ZARXIO
Thrombocytopenia Agents	MULPLETA	DOPTELET
<b>HEPATITIS</b> Hepatitis C	LEDIPASVIR/SOFOSBUVIR, MAVYRET, SOFOSBUVIR/VELPATASVIR, SOVALDI	EPCLUSA, HARVONI, VOSEVI, ZEPATIER
<b>HIV</b> Antiretrovirals Note: Current patients established on therapy are allowed to continue therapy.	ATRIPLA, DELSTRIGO	BIKTARVY, GENVOYA, ODEFSEY, SYMFI, SYMFI LO, SYMTUZA, TRIUMEQ
	COMPLERA	ODEFSEY
	PIFELTRO	efavirenz, EDURANT
	PREZCOBIX	atazanavir, ritonavir, KALETRA TABLETS, PREZISTA
	STRIBILD	BIKTARVY, GENVOYA
<b>MUSCULOSKELETAL &amp; RHEUMATOLOGY</b> Gout Therapy	COLCHICINE	COLCRYS, MITIGARE
	ZURAMPIC	allopurinol, probenecid
Nonsteroidal Anti-Inflammatory Drugs (NSAIDs)	FENOPROFEN CAPSULES, FENORTHO, NALFON CAPSULES	fenoprofen calcium tablets, diclofenac, ibuprofen, indomethacin, meloxicam, nabumetone, naproxen
	RELAFEN DS	nabumetone, diclofenac, ibuprofen, indomethacin, meloxicam, naproxen, piroxicam
	TIVORBEX, VIVLODEX, ZORVOLEX	diclofenac sodium, etodolac, ibuprofen, indomethacin, meloxicam, nabumetone, naproxen, piroxicam
	ZIPSOR	diclofenac potassium, diclofenac sodium
Topical Nonsteroidal Anti-Inflammatory Drugs (NSAIDs)	DICLOFENAC EPOLAMINE PATCHES	FLECTOR PATCHES
	PENNSAID	diclofenac sodium topical, FLECTOR PATCHES
<b>OBSTETRICAL &amp; GYNECOLOGICAL</b> Human Chorionic Gonadotropin	CHORIONIC GONADOTROPIN, PREGNYL	NOVAREL, OVIDREL
Ovulatory Stimulants (Follitropins)	FOLLISTIM AQ	GONAL-F, GONAL-F RFF, GONAL-F RFF REDI-JECT
Vaginal Progesterones	ENDOMETRIN	CRINONE 8% GEL
<b>ONCOLOGY</b> Breast Cancer Agents	KISQALI, KISQALI FEMARA CO-PACK, PIQRAY	IBRANCE, VERZENIO
Multiple Myeloma Agents	XPOVIO	DARZALEX, KYPROLIS, NINLARO, POMALYST, REVLIMID, THALOMID, VELCADE
Myelofibrosis Agents	INREBIC	JAKAFI
<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)	XELPROS, ZIOPTAN	bimatoprost drops, latanoprost drops, LUMIGAN, TRAVATAN Z
Ophthalmic Anti-Allergic	ALOCRIL, ALOMIDE	azelastine drops, cromolyn drops, olopatadine drops, ALREX, BEPREVE, PAZEO
Ophthalmic Anti-Inflammatory	FML FORTE, FML S.O.P., MAXIDEX, PRED MILD	dexamethasone drops, fluorometholone drops, prednisolone drops, INVELTYS, LOTEMAX

Continued

Drug Class	Excluded Medications	Preferred Alternatives
<b>OPHTHALMIC (continued)</b> Ophthalmic Non-Steroidal Anti-Inflammatory Drugs (NSAIDs)	ACUVAIL, NEVANAC	bromfenac drops, diclofenac drops, ketorolac drops, ILEVRO, PROLENSA
<b>OSTEOARTHRITIS</b> Hyaluronic Acid Derivatives	DUROLANE, GEL-ONE, GELSYN-3, GENVISC 850, HYALGAN, HYMOVIS, SODIUM HYALURONATE, SUPARTZ FX, SYNVISIC, SYNVISIC-ONE, TRIVISC, VISCO-3	EUFLEXXA, MONOVISC, ORTHOVISC
<b>OSTEOPOROSIS</b> Bone Modifiers	EVENITY, PROLIA	alendronate, ibandronate, risedronate, zoledronic acid, FORTEO, TYMLOS
<b>RENAL DISEASE</b> Phosphate Binders	FOSRENOL POWDER PACKETS	lanthanum, sevelamer carbonate, sevelamer hcl, PHOSLYRA, VELPHORO
<b>RESPIRATORY</b> Epinephrine Auto-Injector Systems	AUVI-Q, EPINEPHRINE AUTO-INJECTOR (BY IMPAX)	epinephrine auto-injector (by Mylan), EPIPEN, EPIPEN JR
Immunological Agents for Asthma	CINQAIR	FASENRA, NUCALA
Long-Acting Beta Agonist Inhalers	STRIVERDI RESPIMAT	SEREVENT DISKUS
Long-Acting Muscarinic Antagonist Inhalers	SPIRIVA HANDIHALER, SPIRIVA RESPIMAT, TUDORZA PRESSAIR	INCRUSE ELLIPTA
Long-Acting Muscarinic Antagonist/ Long-Acting Beta-Agonist Combination Inhalers	STIOLTO RESPIMAT	ANORO ELLIPTA, BEVESPI AEROSPHERE
Pulmonary Anti-Inflammatory Inhalers	ALVESCO	ARNUITY ELLIPTA, ASMANEX HFA/TWISTHALER, FLOVENT DISKUS/HFA, PULMICORT FLEXHALER, QVAR REDIHALER
Short-Acting Beta <sub>2</sub> -Agonist Inhalers	ALBUTEROL SULFATE HFA, LEVALBUTEROL HFA, PROVENTIL HFA, XOPENEX HFA	PROAIR HFA/RESPICLICK, VENTOLIN HFA
<b>WEIGHT LOSS</b> Weight Loss Agents	QSYMIA	benzphetamine, diethylpropion, phentermine
<b>MISCELLANEOUS AGENTS</b>	SIKLOS	DROXIA
	NOCTIVA	desmopressin tablets
Hereditary Angioedema	BERINERT	RUCONEST
Immunosuppressant Agents	XATMEP	methotrexate
Metabolic Agents	ORFADIN	nitisinone, NITYR
Polynuropathy of Hereditary Transthyretin-Mediated Amyloidosis	ONPATRO	No alternatives recommended
Potassium Binders	VELTASSA	LOKELMA

### Indication Based Management

Drug Class	Excluded Medications	Preferred Alternatives
<b>INFLAMMATORY CONDITIONS</b>	TALTZ	COSENTYX, ENBREL, HUMIRA, OTEZLA, SKYRIZI, STELARA SC, TREMFYA
Drug Class	Nonpreferred Medications	Preferred Alternatives
<b>INFLAMMATORY CONDITIONS‡</b>	All other Brand Name medications for Inflammatory Conditions are Nonpreferred. Approval may be granted following a coverage review. A trial of one or more Preferred medications is required prior to initiating therapy with a Nonpreferred medication. A formulary exception may be granted for patients already established on therapy with a Nonpreferred medication.	ACTEMRA, COSENTYX, ENBREL, HUMIRA, OTEZLA, REMICADE, RINVOQ ER, SIMPONI 100 MG (FOR ULCERATIVE COLITIS ONLY), SKYRIZI, STELARA SC, TREMFYA, XELJANZ, XELJANZ XR

‡ Please note that product placement for treatment for Inflammatory Conditions are subject to change throughout the year based upon changes in market dynamics, new indications for existing products, biosimilar and new product launches.

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## Excluded Medications/Products at a Glance

ABILIFY^	DUROLANE	LYRICA CR	SIKLOS
ABSTRAL	DUTOPROL	MAYVRET	SINGULAIR^
ACIPHEX^	EFFEXOR XR^	MAXALT^, MAXALT MLT^	SITAVIG
ACIPHEX SPRINKLE	ELIDEL^	MAXIDEX	SODIUM HYALURONATE
ACUVAIL	EMBEDA	METOPROLOL SUCCINATE/HCTZ ER	SOFOBSUVIR/VELPATASVIR
ADCIRCA^	EMEND CAPSULES^, TRIFOLD PACK^	MICARDIS^, MICARDIS HCT^	SOVALDI
ADDERALL^	EMEND POWDER PACKETS	MINASTRIN 24 FE^	SPIRIVA HANDHALER, SPIRIVA RESPIMAT
ADLYXIN	EMFLAZA	MINOLIRA	SPRAVATO
ADMELOG	ENDOMETRIN	MIRCERA	STIOLTO RESPIMAT
AKTIPAK	EPANED	MULPLETA	STRATTERA^
AKYNZEO CAPSULES	EPINEPHRINE AUTO-INJECTOR (BY IMPAX)	NALFON CAPSULES	STRIBILD
ALBUTEROL SULFATE HFA	EPOGEN	NAMENDA XR^	STRIVERDI RESPIMAT
ALCORTIN A	ESTROGEL	NASONEX^	SUBSYS
ALOCRIAL	EVENITY	NATIONAL MEDICAL (ADVOCATE)	SUPARTZ FX
ALOGLIPTIN	EVZIO	NESINA	SYNVISC, SYNVISC-ONE
ALOGLIPTIN/METFORMIN	EXFORGE^, EXFORGE HCT^	NEUPOGEN	TALTZ
ALOGLIPTIN/PIOGLITAZONE	EXJADE^	NEURONTIN^	TESTIM^
ALOMIDE	EXONDYS 51	NEVANAC	TIKOSYN^
ALTOPREV	EXTAVIA	NOCTIVA	TIMOPTIC OCULOSE
ALVESCO	EZALLOR SPRINKLE	NORCO^	TIVORBEX
AMBIEN^, AMBIEN CR^	FEMRING	NORVASC^	TOBI SOLUTION^
AMPYRA^	FENOPROFEN CAPSULES	NOVOLIN	TOLSURA
AMRIX^	FENORTHO	NOVOLOG	TOPAMAX^
ANDROGEL 1% <sup>^</sup>	FENTANYL CITRATE BUCCAL TABLETS	NUTROPIN AQ NUSPIN	TOPICORT SPRAY
ANUSOL-HC^	FENTORA	NUVIGIL^	TOPIRAMATE ER CAPSULES
APADAZ	FIASP	NUWIQ	TRIBENZOR^
APIDRA	FLUOROURACIL 0.5% CREAM	OMNARIS	TRICOR^
ARANESP	FML FORTE, FML S.O.P.	OMNIS HEALTH (EMBRACE, VICTORY)	TRILEPTAL^
ARIMIDEX^	FOCALIN^, FOCALIN XR^	OMNITROPE	TRIVIDIA (TRUETEST, TRUETRACK)
ASACOL HD^	FOLLISTIM AQ	ONGLYZA	TRIVISC
ASPIRIN/OMEPRAZOLE DR	FOSRENOL CHEWABLE TABLETS^	ONPATTRO	TUDORZA PRESSAIR
ATACAND^, ATACAND HCT^	FOSRENOL POWDER PACKETS	ONZETRA XSAIL	UNISTRIP
ATRIPLA	GANIRELIX ACETATE^	ORFADIN	UROXATRAL^
AUBAGIO	GEL-ONE	ORTHO TRI-CYCLEN^, ORTHO TRI-CYCLEN LO^	VAGIFEM^
AUVI-Q	GELSYN-3	OSMOLEX ER	VALIUM^
AVALIDE^, AVAPRO^	GENVISC 850	OXYCODONE ER	VALTRESA^
AVODART^	GLEEVEC^	OZOBAX	VELTASSA
AZOR^	GLUCOPHAGE^, GLUCOPHAGE XR^	PANCREAZE	VELTIN
BARACLUDE TABLETS^	GLUMETZA^	PATADAY^	VERDESO FOAM
BAYER (BREEZE, CONTOUR)	GOCOVRI ER	PENNSAID	VIAGRA^
BECONASE AQ	GRANIX	PERTZYE	VICTOZA
BENICAR^, BENICAR HCT^	HUMATROPE	PIFELTRO	VISCO-3
BENZHYDROCODONE/ACETAMINOPHEN	HYALGAN	PIQRAY	VIVELLE-DOT^
BERINERT	HYMOVIS	PLAQUENIL^	VIVLODEX
BRISDELLE^	IMIQUIMOD 3.75% CREAM PUMP	PLAVIX^	YTORIN^
BUPAP^	IMITREX^	PRADAXA	WELLBUTRIN SR^
BUTRANS	INDERAL LA^	PRAVACHOL^	XADAGO
CELEBREX^	INGREZZA	PRED MILD	XALATAN^
CELEXA^	INREBIC	PREGNYL	XANAX^, XANAX XR^
CETRAXAL	INSULIN LISPRO	PREVACID^, PREVACID SOLUTAB^	XATMEP
CHORIONIC GONADOTROPIN	INTUNIV^	PREZCOBIX	XELPROS
CIALIS^	ISTALOL^	PRILOSEC SUSPENSION	XENAZINE^
CINQAIR	JADENU, JADENU SPRINKLE	PRISTIQ^	XOPENEX HFA
CIPROFLOXACIN/FLUOCINOLONE OTIC	KAPSPARGO SPRINKLE	PROLIA	XPOVIO
CLIMARA PRO	KATERZIA	PROTONIX^	XYNTHA, XYNTHA SOLOFUSE
CLOCORTOLONE	KAZANO	PROTONIX SUSPENSION	YASMIN^
COLCHICINE	KEPPRA^, KEPPRA XR^	PROVENTIL HFA	YOSPRALA DR
COMPLERA	KISQALI, KISQALI FEMARA CO-PACK	PROVIGIL^	ZAVESCA^
COREG^	KOMBIGLYZE XR	PROZAC^	ZEGERID^
CORTIFOAM	LAMICTAL^, LAMICTAL ODT^, LAMICTAL XR^	PULMICORT RESPULES^	ZELNORM
COSOPT^	LAZANDA	QBRELIS	ZETIA^
COZAAR^, HYZAAR^	LEDIPASVIR/SOFOSBUVIR	QSYMIA	ZETONNA
CRESTOR^	LEVALBUTEROL HFA	RABEPRAZOLE DR SPRINKLE	ZIOPTAN
CUPRIMINE^	LEXAPRO^	RAPAFLO^	ZIPSOR
CYMBALTA^	LIBRAX^	RECOMBINATE	ZOCOR^
CYTOMEL^	LIDOCAINE/TETRACAINE	RELAFEN DS	ZOLOFT^
DELSTRIGO	LIDODERM^	RELION NOVOLIN	ZOMACTON
DELZICOL^	LIPITOR^	RENAGEL^	ZOMIG TABLETS^, ZOMIG ZMT^
DETROL^, DETROL LA^	LOESTRIN^, LOESTRIN FE^	RHOFADE	ZONEGRAM^
DICLOFENAC EPOLAMINE PATCHES	LOTREL^	ROCHE (ACCU-CHEK)	ZORVOLEX
DIOVAN^, DIOVAN HCT^	LOVENOX^	SAIZEN, SAIZENPREP	ZURAMPIC
DIPENTUM	LUCEMYRA	SANDOSTATIN LAR DEPO	ZYCLARA
DOXYCYCLINE 40 MG CAPSULES	LULICONAZOLE	SAVAYSA	ZYFLO CR^
DOXYCYCLINE HYCLATE DR 80 MG	LUNESTA^	SEROQUEL^, SEROQUEL XR^	ZYTIGA 250 MG^
DRIZALMA SPRINKLE	LYRICA^	SIGNIFOR LAR	

^ 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.