



July 1, 2019 Premium Formulary Exclusions & Preferred Specialty Prior Authorization Requirements

Therapeutic Category	Excluded Medications	Preferred Alternatives
ALLERGIC REACTIONS		
Anaphylaxis Treatment	Auvi-Q (0.15mg, 0.3mg), Epi-Pen JR 0.15mg	epinephrine injection made by Mylan, Epinephrine injection made by Impax(M), Epi-Pen 0.3mg
ANALGESICS		
Non-Steroidal Anti-Inflammatory Agents	Cambia	celecoxib, diflunisal, etodolac, fenoprofen, flurbiprofen, ibuprofen, indomethacin, ketoprofen, ketorolac, meclofenamate, meloxicam, nabumetone, naproxen, oxaprozin, piroxicam, sulindac, tolmetin
Pain	Sprix Nasal Spray	diclofenac, ibuprofen, meloxicam
ANTIBACTERIALS		
Oral Antibiotics	Doryx, Doryx MPC, Minolira	doxycycline, minocycline
ANTICONVULSANTS		
Seizure Disorders	Trokendi XR ¹	topiramate ER
	Oxtellar XR ¹	oxcarbazepine IR
ANTIMIGRAINES		
CGRP agonists	Ajovy	amitriptyline, atenolol, divalproex sodium, nadolol, propranolol, timolol, topiramate, venlafaxine, Aimovig, Emgality
Serotonin Receptor Agonists	Onzetra Xsail, Sumavel, Zembrace Symtouch	rizatriptan ODT, sumatriptan injection, sumatriptan nasal spray, zolmitriptan ODT
ANTIPARKINSON AGENTS		
Parkinson's Disease	Osmolex ER	amantadine
ANTIVIRALS		
Hepatitis-C drugs	Ledipasvir-Sofosbuvir (M), Sofosbuvir-Velpatasvir (M)	Epclusa, Harvoni, Mavyret
HIV drugs	Atripla ¹	Please talk with your doctor about clinically appropriate options.
AUTONOMIC & CENTRAL NERVOUS SYSTEM		
Interferon Beta Medications for Multiple Sclerosis	Extavia ¹ , Plegridy ¹	Avonex, Betaseron

(M) Co-branded product

* Tier 3 preferred

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Therapeutic Category	Excluded Medications	Preferred Alternatives
Oral Long-Acting Opioid Analgesics	Arymo ER, Kadian ER Nucynta ER, Xtampza ER, Zohydro ER	hydromorphone HCl ER, morphine sulfate ER, oxycodone HCl ER, Embeda, Hysingla ER, OxyContin
Oral Short-Acting Opioid Analgesics	Nucynta	codeine sulfate, hydromorphone HCl, morphine sulfate, oxycodone HCl, oxycodone HCl
Transmucosal Fentanyl Analgesics	Abstral, Fentora, Lazanda, Subsys	fentanyl citrate lozenge
CARDIOVASCULAR		
Hypertension	Kaspargo	metoprolol ER
Cholesterol-Lowering Agents	Zypitamag	atorvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin, Livalo
CORTICOSTEROIDS		
Oral Steroids	Rayos	prednisone
DERMATOLOGICAL AGENTS		
Non-Steroidal Anti-Inflammatory	Pennsaid	diclofenac solution
Topical Acne Treatment	Acanya, Aktipak, Clindagel Clindamycin phosphate 1% gel(M), Veltin	adapalene, adapalene/benzoyl peroxide, clindamycin gel/lotion/solution, clindamycin/benzoyl peroxide, erythromycin/benzoyl peroxide, tretinoin cream, Epiduo, Epiduo Forte, Onexton
Topical anesthetics	ZTlido	lidocaine patch
Topical Antifungals	Jublia	terbinafine, Kerydin
Topical Antiinfectives	Noritate cream	metronidazole cream/gel/lotion, Soolantra
Topical Corticosteroids	Halog cream/ointment	fluticasone ointment, halobetasol cream/ointment, triamcinolone
	Halobetasol foam (M), Lexette	betamethasone, clobetasol, halobetasol cream/ointment
Topical Plaque Psoriasis Treatment	Sorilux	calcipotriene
DIABETES		
Blood Glucose Meters, Test Strips and Control Solutions	Examples: Abbott (FreeStyle, Precision), Arkray(Glucocard), Bayer (Breeze, Contour), Nipro (TRUEtest, TRUEtrack), Roche (Accu-Chek)	Lifescan (One Touch products)
Blood Sugar Regulators Miscellaneous	metformin HCl 24hr ER osmotic release, metformin HCl 24hr ER modified release	metformin ER (generic GLUCOPHAGE XR)
Dipeptidyl Peptidase-4 (DPP4) Inhibitors & Combinations	Alogliptin(M), Alogliptin with metformin(M), Alogliptin with pioglitazone(M), Kazano, Kombiglyze XR, Nesina, Onglyza, Oseni	Janumet, Janumet XR, Januvia, Jentadueto, Jentadueto XR, Tradjenta

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Therapeutic Category	Excluded Medications	Preferred Alternatives
Basal insulin	Basaglar, Levemir, Tresiba	Lantus, Toujeo
Glucagon-Like Peptide-1 (GLP1) Agonists	Adlyxin, Tanzeum	Bydureon, Bydureon Bcise, Byetta, Ozempic, Trulicity, Victoza
Insulins	Novolin	Humulin
Rapid-acting insulin	Admelog, Apidra, Fiasp, Novolog	Humalog
Sodium-glucose co-transporter (SGLT2) Inhibitors	Farxiga, Segluromet, Steglatro, Xigduo XR	Invokamet, Invokamet XR, Invokana, Jardiance, Synjardy, Synjardy XR
SGLT2 and DPP4 Combinations	Qtern, Steglujan	Glyxambi
ENDOCRINE (OTHER)		
Growth Hormones	Genotropin, Humatrope, Saizen, Zomacton	Norditropin, Nutropin, Omnitrope
Infertility	Bravelle, Follistim AQ	Gonal-F
Nocturia	Noctiva	desmopressin, Nocturna
GASTROINTESTINAL		
Anti-Diarrheal Agents	Motofen	diphenoxylate/atropine, loperamide
Antiemetics	Sancuso patch	granisetron solution/tablet, ondansetron ODT
Anti-Inflammatory, Anti-Ulcer Agents	Duexis, Vimovo	famotidine PLUS ibuprofen, omeprazole PLUS naproxen
	Zorvolex	ibuprofen, naproxen
Irritable Bowel Syndrome with Constipation/ Chronic Idiopathic Constipation (IBS-C/CIC)	Amitiza, Trulance	Linzess
Opioid-Induced Constipation (OIC)	Amitiza, Movantik, Relistor	Symproic
Inflammatory Bowel Disease	Delzicol, Dipentum	balsalazide, Apriso
Pancreatic Enzymes	Pancreaze, Pertzeye, Viokace	Creon, Zenpep
Proton pump inhibitors	esomeprazole magnesium delayed release, omeprazole/ sodium bicarbonate cap/powder pak	lansoprazole, omeprazole, pantoprazole
HEMATOLOGICAL		
Erythropoiesis-Stimulating Agents	Epogen	Aranesp, Procrit, Retacrit
Long-Acting Granulocyte-Colony Stimulating Factor (G-CSFs)	Fulphila	Neulasta, Udenyca
Short-Acting Granulocyte-Colony Stimulating Factor (G-CSFs)	Granix, Neupogen	Nivestym, Zarxio
IMMUNOMODULATORS		
Interleukin-17 (IL-17)	Taltz ¹	Cosentyx*
JAK Inhibitor	Olumiant ¹	Xeljanz, Xeljanz XR

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Therapeutic Category	Excluded Medications	Preferred Alternatives
Monoclonal Antibody	Remicade	Inflectra, Renflexis
OPHTHALMIC		
Antiglaucoma Drugs	Rescula, Vyzulta, Zioptan	latanoprost ophthalmic solution, Lumigan, Travatan Z
Anti-Inflammatory	Bromsite, Ilevro, Nevanac	Prolensa
RESPIRATORY		
COPD: Inhaled Anticholinergics	Seebri, Tudorza	Incruse Ellipta, Spiriva
COPD: Long-Acting Beta Agonist/Long-Acting Muscarinic Agonist Combination inhalers	Bevespi, Utibron	Anoro Ellipta, Stiolto Respimat
Cystic Fibrosis (inhaled tobramycin)	Kitabis Pak, TOBI Podhaler, Tobramycin Neb(M)	Bethkis
Pulmonary Anti-Inflammatory Inhalers	Alvesco, Armonair, Asmanex, Asmanex HFA, QVAR, QVAR Redihaler	Arnuity Ellipta, Flovent Diskus, Flovent HFA, Pulmicort Flexhaler
Pulmonary Anti-Inflammatory , Long-Acting Beta Agonist Combination Inhalers	AirDuo, Dulera	Advair Diskus, Advair HFA, Breo Ellipta, Symbicort
Short-Acting Beta-2 Adrenergic Inhalers	Levalbuterol Inhaler(M), Proventil HFA, Xopenex HFA	ProAir HFA, ProAir Respiclick Ventolin HFA
UROLOGICAL		
Erectile Dysfunction Oral Agents	Stendra	sildenafil

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Excluded brand-name medications with generic equivalents

The brand-name medications below are excluded on the formulary. These brand-name medications have been identified as having available generic equivalents covered at Tier 1 on the formulary. Speak with your pharmacist to have your excluded brand-name medication substituted with its generic equivalent.

A generic medication contains the same active ingredient(s) as a brand-name medication. An active ingredient is what makes the medication work. For example, Liptor® and its generic both contain atorvastatin, which reduces the amount of bad cholesterol in the blood. Brand-name medications are often protected by a patent. When the patent ends, drug companies can apply to the U.S. Food and Drug Administration (FDA) to begin making generic versions of the medication.

Aciphex	Celebrex	Lialda	Retin-A Micro Gel 0.04%, 0.1%	Vytorin
Acticlate	Concerta	Lidoderm	Sabril Powder Pak	Wellbutrin SR
Aczone 5%	Crestor	Lipitor	Sandostatin Solution Injection	Wellbutrin XL
Adderall XR	Cymbalta	Lovaza	Singulair	Xanax
Alphagan P 0.15%	Cytomel	Lunesta	Staxyn	Xanax XR
Ambien	Depo – Testosterone Injection	Minastrin	Taclonex Ointment	Yaz
Ambien CR	Dilantin Capsule 100mg	Nasonex	Tamiflu Capsule	Zegerid
Amrix	Dilantin Chewable	Nexium Capsule	Testim	Zetia
Androgel 1%	Dilantin Suspension	Nitrostat	TOBI Nebulizer	Ziana
Asacol HD	Diovan	Norco	Tobradex Suspension	Zolofl
Ativan	Diovan HCT	Norvasc	Topicort Spray	Zomig
Axiron	Duac	Nuvigil	Toprol XL	Zomig ZMT
Azor	Duragesic	Ortho Tri Cyclen	Tribenzor	Zovirax oral, ointment, suspension
Benicar	Effexor XR	Ortho Tri Cyclen Lo	Vagifem	
Benicar HCT	Fortamet	Percocet	Valium	
Benzaclin	Fortesta	Prevacid Capsule	Viagra	
Benzamycin	Glumetza	Pristiq	Vivelle-Dot	
Beyaz	Levitra	Prozac	Vogelxo	
Carafate	Lexapro	Pulmicort Inhalation Suspension	Voltaren Gel	

Required Prior Authorization +

Therapeutic Class	Non-Preferred Medications	Preferred Medications
Hepatitis C	All other brands non-preferred with prior authorization	Epclusa, Harvoni, Mavyret, Vosevi
Multiple Sclerosis	All other brands non-preferred with prior authorization and Gilenya* Tier 3 with prior authorization	Avonex, Betaseron, Copaxone, Tecfidera
Immunomodulators	All other brands non-preferred with prior authorization	Cimzia, Humira, Otezla, Simponi, Stelara, Tremfya

+ All of the products listed above are currently subject to prior authorization. Preferred medications are required prior to new requests for non-preferred medication(s). Existing utilizers of non-preferred medication(s) within the therapeutic categories of Hepatitis C, Immunomodulators and Multiple Sclerosis will be eligible to remain on current therapy if compliance and efficacy of therapy are demonstrated. Exceptions will be granted for specific indications where the preferred agents do not have FDA-approval for use.

(M) Co-branded product

About this document: Where differences exist between this formulary and your benefit plan documents, the benefit plan documents rule. This may not be a complete list of medications, and not all medications listed may be covered by your plan. Please look at the benefit plan documents provided by your employer or plan sponsor for full details.



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