

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
ANTIINFECTIVES Antibiotics	DOXYCYCLINE HYCLATE DR 80 MG	doxycycline hyclate dr
Antifungal Agents (Oral)	TOLSURA	itraconazole
Antivirals (Oral)	SITAVIG	acyclovir oral or cream, famciclovir, valacyclovir
AUTONOMIC & CENTRAL NERVOUS SYSTEM 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
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
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
CARDIOVASCULAR 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

Continued

Drug Class	Excluded Medications	Preferred Alternatives
CARDIOVASCULAR (continued) PCSK9 Inhibitors	PRALUENT (NDCs starting with 72733), REPATHA (NDCs starting with 72511)	PRALUENT (NDCs starting with 00024), REPATHA (NDCs starting with 55513)
DERMATOLOGICAL 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
DIABETES 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
EAR/NOSE Nasal Steroids	BECONASE AQ, OMNARIS, ZETONNA	budesonide, flunisolide, fluticasone, mometasone, QNASL
Otic Fluoroquinolone Antibiotics	CETRAXAL	ciprofloxacin ear solution, ofloxacin ear solution, CIPRODEX, OTOVEL
ENDOCRINE (OTHER) 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
GASTROINTESTINAL Antiemetics (Oral)	AKYNZEO CAPSULES	granisetron, ondansetron, aprepitant, VARUBI TABLETS
	EMEND POWDER PACKETS	aprepitant, VARUBI TABLETS
Corticosteroids (Rectal Formulations)	CORTIFOAM	hydrocortisone enema, UCERIS FOAM

Continued

Drug Class	Excluded Medications	Preferred Alternatives
GASTROINTESTINAL (continued) Inflammatory Bowel Agents	DIPENTUM	balsalazide disodium, mesalamine delayed release, sulfasalazine, APRISO, PENTASA
Irritable Bowel Agents	ZELNORM	LINZESS, TRULANCE
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
HEMATOLOGICAL 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	PROCRT, 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
HEPATITIS Hepatitis C	LEDIPASVIR/SOFOSBUVIR, MAVYRET, SOFOSBUVIR/VELPATASVIR, SOVALDI	EPCLUSA, HARVONI, VOSEVI, ZEPATIER
HIV Antiretrovirals Note: Current patients established on therapy are allowed to continue therapy.	ATRIPLA, DELSTRIGO, SYMTUZA	BIKTARVY, GENVOYA, ODEFSEY, SYMFI, SYMFI LO, TRIUMEQ
	COMPLERA	ODEFSEY
	PIFELTRO	efavirenz, EDURANT
	PREZCOBIX	atazanavir, ritonavir, KALETRA TABLETS, PREZISTA
	STRIBILD	BIKTARVY, GENVOYA
MUSCULOSKELETAL & RHEUMATOLOGY 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
OBSTETRICAL & GYNECOLOGICAL Human Chorionic Gonadotropin	CHORIONIC GONADOTROPIN, PREGNYL	NOVAREL, OVIDREL
Ovulatory Stimulants (Folliotropins)	FOLLISTIM AQ	GONAL-F, GONAL-F RFF, GONAL-F RFF REDI-JECT
Vaginal Progesterones	ENDOMETRIN	CRINONE 8% GEL
ONCOLOGY 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
OPHTHALMIC 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

Continued

Drug Class	Excluded Medications	Preferred Alternatives
OPHTHALMIC (continued) Ophthalmic Anti-Allergic	ALOCRI, 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
Ophthalmic Non-Steroidal Anti-Inflammatory Drugs (NSAIDs)	ACUVAIL, NEVANAC	bromfenac drops, diclofenac drops, ketorolac drops, ILEVRO, PROLENSA
OSTEOARTHRITIS 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
OSTEOPOROSIS Bone Modifiers	EVENITY, PROLIA	alendronate, ibandronate, risedronate, zoledronic acid, FORTEO, TYMLOS
RENAL DISEASE Phosphate Binders	FOSRENOL POWDER PACKETS	lanthanum, sevelamer carbonate, sevelamer hcl, PHOSLYRA, VELPHORO
RESPIRATORY 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 ₂ -Agonist Inhalers	ALBUTEROL SULFATE HFA, LEVALBUTEROL HFA, PROVENTIL HFA, XOPENEX HFA	PROAIR HFA/RESPICLICK, VENTOLIN HFA
WEIGHT LOSS Weight Loss Agents	QSYMIA	benzphetamine, diethylpropion, phentermine
MISCELLANEOUS AGENTS	SIKLOS	DROXIA
	NOCTIVA	desmopressin tablets
Hereditary Angioedema	BERINERT	RUCONEST
Immunosuppressant Agents	XATMEP	methotrexate
Metabolic Agents	ORFADIN	nitisinone, NITYR
Polyneuropathy of Hereditary Transthyretin-Mediated Amyloidosis	ONPATTRO	No alternatives recommended
Potassium Binders	VELTASSA	LOKELMA

Indication Based Management

Drug Class	Nonpreferred Medications	Preferred Alternatives
INFLAMMATORY CONDITIONS‡	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^	EFFEXOR XR^	MAXALT^, MAXALT MLT^	SINGULAIR^
ABSTRAL	ELIDEL^	MAXIDEX	SITAVIG
ACIPHEX^	EMBEDA	METOPROLOL SUCCINATE/HCTZ ER	SODIUM HYALURONATE
ACIPHEX SPRINKLE	EMEND CAPSULES^, TRIFOLD PACK^	MICARDIS^, MICARDIS HCT^	SOFOSBUVIR/VELPATASVIR
ACUVAIL	EMEND POWDER PACKETS	MINASTRIN 24 FE^	SOVALDI
ADCIRCA^	EMFLAZA	MINOLIRA	SPIRIVA HANDIHALER, SPIRIVA RESPIMAT
ADDERALL^	ENDOMETRIN	MIRCERA	SPRAVATO
ADLYXIN	EPANED	MULPLETA	STIOLTO RESPIMAT
ADMELOG	EPINEPHRINE AUTO-INJECTOR (BY IMPAX)	NALFON CAPSULES	STRATTERA^
AKTIPAK	EPOGEN	NAMENDA XR^	STRIBILD
AKYNZEO CAPSULES	ESTROGEL	NASONEX^	STRIVERDI RESPIMAT
ALBUTEROL SULFATE HFA	EVENITY	NATIONAL MEDICAL (ADVOCATE)	SUBSYS
ALCORTIN A	EVZIO	NESSINA	SUPARTZ FX
ALOCRIL	EXFORGE^, EXFORGE HCT^	NEUPOGEN	SYMTUZA
ALOGLIPTIN	EXJADE^	NEURONTIN^	SYNVISC, SYNVISC-ONE
ALOGLIPTIN/METFORMIN	EXONDYS 51	NEVANAC	TESTIM^
ALOGLIPTIN/PIOGLITAZONE	EXTAVIA	NOCTIVA	TIKOSYN^
ALOMIDE	EZALLOR SPRINKLE	NORCO^	TIMOPTIC OCUDOSE
ALTOPREV	FEMRING	NORVASC^	TIVORBEX
ALVESCO	FENOPROFEN CAPSULES	NOVOLIN	TOBI SOLUTION^
AMBIEN^, AMBIEN CR^	FENORTHO	NOVOLOG	TOLSURA
AMPYRA^	FENTANYL CITRATE BUCCAL TABLETS	NUTROPIN AQ NUSPIN	TOPAMAX^
AMRIX^	FENTORA	NUVIGIL^	TOPICORT SPRAY
ANDROGEL 1% [^]	FIASP	NUVIQ	TOPIRAMATE ER CAPSULES
ANUSOL-HC^	FLUOROURACIL 0.5% CREAM	OMNARIS	TRIBENZOR^
APADAZ	FML FORTE, FML S.O.P.	OMNIS HEALTH (EMBRACE, VICTORY)	TRICOR^
APIDRA	FOCALIN^, FOCALIN XR^	OMNITROPE	TRILEPTAL^
ARANESP	FOLLISTIM AQ	ONGLYZA	TRIVIDIA (TRUETEST, TRUETRACK)
ARIMIDEX^	FOSRENOL CHEWABLE TABLETS^	ONPATRO	TRIVISC
ASACOL HD^	FOSRENOL POWDER PACKETS	ONZETRA XSAIL	TUDORZA PRESSAIR
ASPIRIN/OMEPRAZOLE DR	GANIRELIX ACETATE^	ORFADIN	UNISTRIP
ATACAND^, ATACAND HCT^	GEL-ONE	ORTHO TRI-CYCLEN^, ORTHO TRI-CYCLEN LO^	UROXATRAL^
ATRIPLA	GELSYN-3	OSMOLEX ER	VAGIFEM^
AUBAGIO	GENVISC 850	OXYCODONE ER	VALIUM^
AUVI-Q	GLEEVEC^	PANCREAZE	VALTRESX^
AVALIDE^, AVAPRO^	GLUCOPHAGE^, GLUCOPHAGE XR^	PATADAY^	VELTASSA
AVODART^	GLUMETZA^	PENNSAID	VELTIN
AZOR^	GOCOVRI ER	PERTZYE	VERDESO FOAM
BARACLUDE TABLETS^	GRANIX	PIFELTRO	VIAGRA^
BAYER (BREEZE, CONTOUR)	HUMATROPE	PIQRAY	VICTOZA
BECONASE AQ	HYALGAN	PLAQUENIL^	VISCO-3
BENICAR^, BENICAR HCT^	HYMOVIS	PLAVIX^	VIVELLE-DOT^
BENZHYDROCODONE/ACETAMINOPHEN	IMIQUIMOD 3.75% CREAM PUMP	PRADAXA	VIVLODEX
BERINERT	IMITREX^	PRALUENT (NDCs starting with 72733)	VYTORIN^
BRISDELLE^	INDERAL LA^	PRAVACHOL^	WELLBUTRIN SR^
BUPAP^	INGREZZA	PRED MILD	XADAGO
BUTRANS	INREBIC	PREGNYL	XALATAN^
CELEBREX^	INSULIN LISPRO	PREVACID^, PREVACID SOLUTAB^	XANAX^, XANAX XR^
CELEXA^	INTUNIV^	PREZCOBIX	XATMEP
CETRALXAL	ISTALOL^	PRILOSEC SUSPENSION	XELPROS
CHORIONIC GONADOTROPIN	JADENU, JADENU SPRINKLE	PRISTIQ^	XENAZINE^
CIALIS^	KAPSPARGO SPRINKLE	PROLIA	XOPENEX HFA
CINQAIR	KATERZIA	PROTONIX^	XPOVIO
CLIMARA PRO	KAZANO	PROTONIX SUSPENSION	XYNTHA, XYNTHA SOLOFUSE
CLOCORTOLONE	KEPPRA^, KEPPRA XR^	PROVENTIL HFA	YASMIN^
COLCHICINE	KISQALI, KISQALI FEMARA CO-PACK	PROVIGIL^	YOSPRALA DR
COMPLERA	KOMBIGLYZE XR	PROZAC^	ZAVESCA^
COREG^	LAMICTAL^, LAMICTAL ODT^, LAMICTAL XR^	PULMICORT RESPULES^	ZEGERID^
CORTIFOAM	LAZANDA	QBRELIS	ZELNORM
COSOPT^	LEDIPASVIR/SOFOSBUVIR	QSYMIA	ZETIA^
COZAAR^, HYZAAR^	LEVALBUTEROL HFA	RABEPRAZOLE DR SPRINKLE	ZETONNA
CRESTOR^	LEXAPRO^	RAPAFLO^	ZIOPTAN
CUPRIMINE^	LIBRAX^	RECOMBINATE	ZIPSOR
CYMBALTA^	LIDOCAINE/TETRACAINE	RELAFEN DS	ZOCOR^
CYTOMEL^	LIDODERM^	RELION NOVOLIN	ZOLOFT^
DELSTRIGO	LIPITOR^	RENAGEL^	ZOMACTON
DELZICOL^	LOESTRIN^, LOESTRIN FE^	REPATHA (NDCs starting with 72511)	ZOMIG TABLETS^, ZOMIG ZMT^
DETROL^, DETROL LA^	LOTREL^	RHOFAD	ZONEGRAN^
DICLOFENAC EPOLAMINE PATCHES	LOVENOX^	ROCHE (ACCU-CHEK)	ZORVOLEX
DIOVAN^, DIOVAN HCT^	LUCEMYRA	SAIZEN, SAIZENPREP	ZURAMPIC
DIPENTUM	LULICONAZOLE	SANDOSTATIN LAR DEPOT	ZYLARA
DOXYCYCLINE 40 MG CAPSULES	LUNESTA^	SAVAYSA	ZYFLO CR^
DOXYCYCLINE HYCLATE DR 80 MG	LYRICA^	SEROQUEL^, SEROQUEL XR^	ZYTIGA 250 MG^
DUROLANE	LYRICA CR	SIGNIFOR LAR	
DUTOPROL	MAVYRET	SIGLOS	

^ 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.