

# Therapeutic Alternative Drug List



Category	Requirement																																										
BRAND ANTIPSYCHOTIC AGENTS	ONE 30-DAY TRIAL, PERFORMED WITHIN THE LAST 180 DAYS, IS REQUIRED ON A GENERIC ANTIPSYCHOTIC																																										
<table border="0"> <tr> <td>Abilify</td> <td>Latuda</td> <td>ARIPiprazole</td> </tr> <tr> <td>Abilify Maintena</td> <td>Nuplazid</td> <td>OLANZapine</td> </tr> <tr> <td>Abilify MyCite</td> <td>Perseris</td> <td>QUETiapine Fumarate</td> </tr> <tr> <td>Aristada</td> <td>Pimozide</td> <td>QUETiapine Fumarate ER</td> </tr> <tr> <td>Aristada Initio</td> <td>Rexulti</td> <td>Ziprasidone HCl</td> </tr> <tr> <td>Clozaril</td> <td>RisperDAL</td> <td>cloZAPine</td> </tr> <tr> <td>Equetro</td> <td>RisperDAL Consta</td> <td>risperiDONE</td> </tr> <tr> <td>Fanapt</td> <td>SEROquel</td> <td>risperiDONE M-TAB</td> </tr> <tr> <td>Fanapt Titration Pack</td> <td>Saphris</td> <td></td> </tr> <tr> <td>FazaClo</td> <td>Versacloz</td> <td></td> </tr> <tr> <td>Geodon</td> <td>Vraylar</td> <td></td> </tr> <tr> <td>Invega</td> <td>ZyPREXA</td> <td></td> </tr> <tr> <td>Invega Sustenna</td> <td>ZyPREXA Relprev</td> <td></td> </tr> <tr> <td>Invega Trinza</td> <td>ZyPREXA Zydys</td> <td></td> </tr> </table>	Abilify	Latuda	ARIPiprazole	Abilify Maintena	Nuplazid	OLANZapine	Abilify MyCite	Perseris	QUETiapine Fumarate	Aristada	Pimozide	QUETiapine Fumarate ER	Aristada Initio	Rexulti	Ziprasidone HCl	Clozaril	RisperDAL	cloZAPine	Equetro	RisperDAL Consta	risperiDONE	Fanapt	SEROquel	risperiDONE M-TAB	Fanapt Titration Pack	Saphris		FazaClo	Versacloz		Geodon	Vraylar		Invega	ZyPREXA		Invega Sustenna	ZyPREXA Relprev		Invega Trinza	ZyPREXA Zydys		
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ANGIOTENSIN II RECEPTOR ANTAGONISTS (ARBs)	THREE 30-DAY TRIALS, PERFORMED WITHIN THE LAST 180 DAYS, ARE REQUIRED ON A GENERIC ACE OR ARB AGENT																																										
<table border="0"> <tr> <td>Atacand</td> <td>Benazepril HCl</td> <td>Losartan Potassium</td> </tr> <tr> <td>Atacand HCT</td> <td>Benazepril-hydroCHLOROthiazide</td> <td>Losartan Potassium-HCTZ</td> </tr> <tr> <td>Avalide</td> <td>Candesartan Cilexetil</td> <td>Moexipril HCl</td> </tr> <tr> <td>Avapro</td> <td>Candesartan Cilexetil-HCTZ</td> <td>Olmesartan Medoxomil</td> </tr> <tr> <td>Benicar</td> <td>Captopril</td> <td>Olmesartan Medoxomil-HCTZ</td> </tr> <tr> <td>Benicar HCT</td> <td>Enalapril Maleate</td> <td>Perindopril Erbumine</td> </tr> </table>	Atacand	Benazepril HCl	Losartan Potassium	Atacand HCT	Benazepril-hydroCHLOROthiazide	Losartan Potassium-HCTZ	Avalide	Candesartan Cilexetil	Moexipril HCl	Avapro	Candesartan Cilexetil-HCTZ	Olmesartan Medoxomil	Benicar	Captopril	Olmesartan Medoxomil-HCTZ	Benicar HCT	Enalapril Maleate	Perindopril Erbumine																									
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Cozaar	Enalapril-hydroCHLOROthiazid e	Quinapril HCl
Diovan	Enalaprilat	Quinapril-hydroCHLOROthiazid e
Diovan HCT	Fosinopril Sodium	Ramipril
Edarbi	Fosinopril Sodium-HCTZ	Telmisartan
Edarbyclor	Irbesartan	Telmisartan-HCTZ
Eprosartan Mesylate	Irbesartan-hydroCHLOROthiazid e	Trandolapril
Hyzaar	Lisinopril	Valsartan
Micardis	Lisinopril-hydroCHLOROthiazid e	Valsartan-hydroCHLOROthiazid e
Micardis HCT		

BRAND NASAL SPRAY MEDICATIONS		TWO 30-DAY TRIALS, PERFORMED WITHIN THE LAST 180 DAYS, ARE REQUIRED ON A GENERIC NASAL SPRAY	
Astepro	Patanase	Allergy Spray 24 Hour	GNP Budesonide Nasal Spray
Beconase AQ	Propel	CVS Budesonide	GNP Fluticasone Propionate
DermacinRx Azenase Pak	Propel Mini	CVS Fluticasone Propionate	GNP Fluticasone Propionate Chl
Dymista	Qnasl	CVS Nasal Allergy Spray	GoodSense Nasal Allergy Spray
Flonase Allergy Relief	Qnasl Childrens	ClariSpray	KLS Aller-Flo
Flonase Sensimist	Sinuva	EQ Budesonide Nasal	Nasal Allergy 24 Hour
Nasacort Allergy 24HR	Ticalast	EQ Nasal Allergy	QC Fluticasone Propionate
Nasacort Allergy 24HR Children	Xhance	EQL Fluticasone Childrens	RA Budesonide
Nasonex	Zetonna	EQL Fluticasone Propionate	RA Nasal Allergy

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Omnaris	GNP 24 Hour Nasal Allergy	Rhinocort Allergy
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BRAND OAB/INCONTINENCE MEDICATIONS	TWO 30-DAY TRIALS, PERFORMED WITHIN THE LAST 180 DAYS, ARE REQUIRED ON OXYBUTYNIN, TOLTERODINE, OR TROSPIUM		
Detrol	Myrbetriq	Darifenacin Hydrobromide ER	Tolterodine Tartrate
Ditropan XL	Oxytrol	Oxybutynin Chloride	Tolterodine Tartrate ER
Enablex	Oxytrol For Women	Oxybutynin Chloride ER	Trospium Chloride
Gelnique Gelnique Pump	VESicare	Solifenacin Succinate	Trospium Chloride ER

BRAND TRIPTAN MIGRAINE AGENTS	TWO 30-DAY TRIALS, PERFORMED WITHIN THE LAST 180 DAYS, ARE REQUIRED ON A GENERIC TRIPTAN AGENT		
Amerge	Maxalt-MLT	Almotriptan Malate	SUMatriptan
Frova	Onzetra Xsail	Eletriptan Hydrobromide	SUMatriptan Succinate
Imitrex	Relpax	Frovatriptan Succinate	SUMatriptan Succinate Refill
Imitrex STATdose Refill	Zembrace SymTouch	Naratriptan HCl	ZOLMitriptan
Imitrex STATdose System	Zomig	Rizatriptan Benzoate	
Maxalt	Zomig ZMT		

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BRAND ADHD/STIMULANT MEDICATIONS		TWO 30-DAY TRIALS, PERFORMED WITHIN THE LAST 180 DAYS, ARE REQUIRED ON GENERIC METHYLPHENIDATE OR AMPHETAMINE	
Adderall	Methylin	Amphetamine Sulfate	guanFACINE HCl ER
Adderall XR	Methylphenidate HCl ER	Amphetamine-	Metadate ER
Aptensio XR	Mydayis	Dextroamphet ER	
Concerta	ProCentra	Amphetamine-	Methylphenidate HCl
Cotempla XR-ODT	QuilliChew ER	Dextroamphetamine	
Daytrana	Quillivant XR	Dexmethylphenidate	Methylphenidate HCl
Focalin	Relexxii	HCl	ER (CD)
Focalin XR	Ritalin	Dexmethylphenidate	Methylphenidate HCl
Intuniv	Ritalin LA	HCl ER	ER (LA)
Jornay PM	Strattera	Dextroamphetamine	Zenzedi
Kapvay		Sulfate	
		Dextroamphetamine	
		Sulfate ER	

ANTI- ALLERGY OPHTHALMIC AGENTS		ONE 30-DAY TRIAL, PERFORMED WITHIN THE LAST 180 DAYS, IS REQUIRED ON GENERIC KETOTIFEN OR OTHER GENERIC AGENT	
Alocril	Pataday	Alaway	GNP Itchy Eye
Alomide	Patanol	Alaway Childrens	GoodSense Itchy Eye
Bepreve	Pazeo	Allergy	
		Allergy Eye Drops	HM Eye Itch Relief

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Lastacaft	Azelastine HCl	Ketotifen Fumarate
	Claritin Eye	KP Ketotifen Fumarate
	Cromolyn Sodium	Olopatadine HCl
	CVS Allergy Eye Drops	RA Antihistamine Eye Drops
	CVS Eye Itch Relief	RA Eye Itch Relief
	Epinastine HCl	SM Eye Itch Relief
	Eye Itch Relief	TheraTears Allergy
	GNP Eye Itch Relief	

BRAND ANTIDEPRESSANTS - SNRIS		TWO 30-DAY TRIALS, PERFORMED WITHIN THE LAST 180 DAYS, ARE REQUIRED ON A GENERIC SSRI OR SNRI	
Cymbalta	Fetzima Titration	Citalopram Hydrobromide	PARoxetine HCl
Desvenlafaxine ER	Khedezla	DULOxetine HCl	PARoxetine HCl ER
Effexor XR	Pristiq	Escitalopram Oxalate	Sertraline HCl
Fetzima		FLUoxetine HCl	Venlafaxine HCl
		fluvoxaMINE Maleate	Venlafaxine HCl ER
		fluvoxaMINE Maleate ER	

BRAND ANTIDEPRESSANTS - SSRIS		TWO 30-DAY TRIALS, PERFORMED WITHIN THE LAST 180 DAYS, ARE REQUIRED ON A GENERIC SSRI ANTIDEPRESSANT	
CeleXA	Paxil CR	Citalopram Hydrobromide	fluvoxaMINE Maleate ER PARoxetine HCl
Lexapro	Pexeva	Escitalopram Oxalate	PARoxetine HCl ER
PROzac	Trintellix	FLUoxetine HCl	Sertraline HCl
Paxil	Zoloft	fluvoxaMINE Maleate	

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BRAND ANTIGOUT/HYPERURICEMIA AGENTS		ONE 30-DAY TRIAL, PERFORMED WITHIN THE LAST 180 DAYS, IS REQUIRED ON ALLOPURINOL OR PROBENECID	
Aloprim	Mitigare	Allopurinol	Probenecid
Colchicine	Uloric	Colchicine-Probenecid	
Colcrys	Zyloprim		
Krystexxa			

BRAND DIABETIC AGENTS		ONE 30-DAY TRIAL, PERFORMED WITHIN THE LAST 180 DAYS, IS REQUIRED ON METFORMIN/METFORMIN COMBO AGENT	
Actoplus Met	Oseni	gliPiZIDE-metFORMIN HCl	metFORMIN HCl ER
Alogliptin-Pioglitazone	Prandin	glyBURIDE-metFORMIN	metFORMIN HCl ER (MOD)
Alogliptin-metFORMIN HCl	Precose	metFORMIN HCl	metFORMIN HCl ER (OSM)
Duetact	Qtern		
Glyset	Repaglinide-metFORMIN HCl		
Glyxambi	Segluromet		
Invokamet	Soliqua		
Invokamet XR	Starlix		
Janumet	Steglujan		
Janumet XR	Synjardy		
Jentadueto	Synjardy XR		
Jentadueto XR	Xigduo XR		
Kazano	Xultophy		
Kombiglyze XR			

BRAND DIABETIC DPP4 AGENTS		ONE 30-DAY TRIAL, PERFORMED WITHIN THE LAST 180 DAYS, IS REQUIRED ON METFORMIN OR METFORMIN COMBO	
Alogliptin Benzoate	Jentadueto XR	gliPiZIDE-metFORMIN HCl	metFORMIN HCl ER

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Alogliptin-Pioglitazone	Kazano	glyBURIDE- metFORMIN	metFORMIN HCl ER (MOD)
Alogliptin-metFORMIN HCl	Kombiglyze XR	metFORMIN HCl	metFORMIN HCl ER (OSM)
Janumet	Nesina		
Janumet XR	Onglyza		
Januvia	Oseni		
Jentadueto	Tradjenta		

BRAND DIABETIC GLP-1 AGONIST AGENTS		ONE 30-DAY TRIAL, PERFORMED WITHIN THE LAST 180 DAYS, IS REQUIRED ON METFORMIN OR METFORMIN COMBO	
Adlyxin	Byetta 5 MCG Pen	gliPiZIDE- metFORMIN HCl	metFORMIN HCl ER
Adlyxin Starter Pack	Ozempic	glyBURIDE- metFORMIN	metFORMIN HCl ER (MOD)
Bydureon	Trulicity	metFORMIN HCl	metFORMIN HCl ER (OSM)
Bydureon BCise	Victoza		
Byetta 10 MCG Pen			

BRAND DIABETIC SGLT2 AGENTS		ONE 30-DAY TRIAL, PERFORMED WITHIN THE LAST 180 DAYS, IS REQUIRED ON METFORMIN OR METFORMIN COMBO	
Farxiga	Segluromet	gliPiZIDE- metFORMIN HCl	metFORMIN HCl ER
Invokamet	Steglatro	glyBURIDE- metFORMIN	metFORMIN HCl ER (MOD)
Invokamet XR	Synjardy	metFORMIN HCl	metFORMIN HCl ER (OSM)
Invokana	Synjardy XR		
Jardiance	Xigduo XR		

BRAND NARCOTIC PAIN MEDICATIONS		TWO 30-DAY TRIALS, PERFORMED WITHIN THE LAST 180 DAYS, ARE REQUIRED ON MORPHINE SULF, OXYMORPHONE ER, OR METHADONE	
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Butrans Kadian MS Contin Nucynta ER oxyMORphone HCl ER	Methadone HCl Morphine Sulfate ER
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BRAND NON-SEDATING ANTIHISTAMINES		ONE 30-DAY TRIAL, PERFORMED WITHIN THE LAST 180 DAYS, IS REQUIRED ON OTC/GEN. LORATADINE OR CETERIZINE AGENTS	
Allegra Allergy	Claritin-D 12 Hour	12 Hour Allergy-D	KLS AllerClear D-24HR
Allegra Allergy Childrens	Claritin-D 24 Hour	24HR Allergy Relief	KP Cetirizine HCl
Allegra-D Allergy & Congestion	Xyzal Allergy 24HR	Alavert Allergy/Sinus	KP Fexofenadine HCl
Clarinex	Xyzal Allergy 24HR Childrens	All Day Allergy	KP Loratadine
Clarinex-D 12 Hour	ZyrTEC Allergy	All Day Allergy D	Loradamed
Claritin	ZyrTEC Allergy Childrens	All Day Allergy D-12	Loratadine
Claritin Childrens	ZyrTEC Childrens Allergy	All Day Allergy-D	Loratadine Childrens
Claritin Reditabs	ZyrTEC-D Allergy & Congestion	Allergy	Loratadine-D 12HR
		Allergy 24-HR	Loratadine-D 24HR
		Allergy 24Hour Indoor/Outdoor	Meijer Allergy Relief
		Allergy Childrens	Meijer Allergy Relief-D
		Allergy D-12	Meijer Loratadine
		Allergy Non-Drowsy	MM Cetirizine HCl
		Allergy Relief	MM Loratadine-D 24 Hour
		Allergy Relief Child	PX Allergy Relief



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Allergy Relief D	PX Allergy Relief Cetirizine
Allergy Relief D-24	PX Allergy Relief D
Allergy Relief-D	PX Allergy Relief D (Loratid)
Allergy Relief/Indoor/Outdoor	PX Allergy Relief Loratadine
Allergy Relief/Nasal Decongest	QC All Day Allergy
Cetirizine HCl	QC Allergy Relief
Cetirizine-Pseudoephedrine ER	QC Fexofenadine Hydrochloride
Childrens Loratadine	QC Loratadine Allergy Relief
Claritin Allergy Childrens	QC Loratadine-D
CVS Allergy Relief	RA Allergy Relief
CVS Allergy Relief D	RA Allergy Relief-D
CVS Allergy Relief-D	RA Allergy/Congestion Relief
CVS Allergy Relief-D12	RA Ceti-D
CVS Indoor/Outdoor Allergy Rlf	RA Cetirizine
EQ Allergy & Congestion Relief	RA Lorata-D
EQ Allergy Childrens	RA Loratadine
EQ Allergy Relief	RA Loratadine Childrens
EQ Allergy Relief (Cetirizine)	SB Allergy
EQ Allergy Relief D 24 Hour	SB Allergy Relief
EQ Childrens Loratadine	SB Allergy Relief/Nasal Decong
EQ Loratadine	SB Loratadine
EQ Loratadine Childrens	SB Loratadine Allergy Relief
EQL All Day Allergy	Shopko Allergy Relief-D (Ceti)

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EQL All Day Allergy-D	SM All Day Allergy
EQL Aller-ease	SM All Day Allergy-D
EQL Allergy Relief	SM Allergy Childrens
EQL Allergy/Congestion Relief	SM Childrens Loratadine
Fexofenadine HCl	SM Fexofenadine HCl
Fexofenadine-Pseudoephed ER	SM Lorata-dine D
GNP All Day Allergy	SM Loratadine
GNP All Day Allergy-D	SM Loratadine Allergy Relief
GNP Allergy & Congestion	SM Loratadine D
GNP Allergy Relief	SM Loratadine D 12HR
GNP Allergy-D Allergy & Conges	SW Allergy Relief-D
GNP Allergy/Congestion Relief	TGT All Day Allergy Relief
GNP Loratadine	TGT Allergy Relief
GNP Loratadine Childrens	TGT Allergy+ Congestion Relief
GNP Loratadine-D 12HR	TGT Allergy/Congestion Relief
GoodSense All Day Allergy	TGT Loratadine Childrens
GoodSense Aller-Ease	Triaminic Allerchews
HM All Day Allergy	Wal-Fex
HM Allergy Complete-D	Wal-Fex Allergy
HM Allergy Relief/Nasal Decong	Wal-Fex D Allergy & Congestion
HM Cetirizine HCl	Wal-itin
HM Fexofenadine HCl	Wal-itin Aller-Melts
HM Loratadine	Wal-itin Allergy Reditabs
HM Loratadine Childrens	Wal-itin Childrens

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	KLS Aller-Fex	Wal-itin D
	KLS Aller-Tec	Wal-itin D 24 Hour
	KLS Aller-Tec D	Wal-vert
	KLS AllerClear	Wal-Zyr
	KLS AllerClear D-12HR	Wal-Zyr D

BRAND OSTEOPOROSIS AGENTS	ONE 30-DAY TRIAL, PERFORMED WITHIN THE LAST 180 DAYS, IS REQUIRED ON ALENDRONATE OR IBANDRONATE
Actonel Atelvia Binosto Boniva Fosamax Fosamax Plus D	Alendronate Sodium Ibandronate Sodium

BRAND PROTON PUMP INHIBITORS (PPIS)	ONE 30-DAY TRIAL, PERFORMED WITHIN THE LAST 180 DAYS, IS REQUIRED ON A GENERIC PPI MEDICATION																																				
<table border="0"> <tr> <td>AcipHex Sprinkle</td> <td>Omeprazole+Syrspen d SF Alka</td> <td>CVS Esomeprazole Magnesium</td> <td>HM Omeprazole</td> </tr> <tr> <td>Aciphex</td> <td>Prevacid</td> <td>CVS Lansoprazole</td> <td>KLS Esomeprazole Magnesium</td> </tr> <tr> <td>Dexilant</td> <td>Prevacid 24HR</td> <td>CVS Omeprazole</td> <td>KLS Lansoprazole</td> </tr> <tr> <td>Esomep-EZS</td> <td>Prevacid SoluTab</td> <td>EQ Lansoprazole</td> <td>KLS Omeprazole</td> </tr> <tr> <td>First-Lansoprazole</td> <td>PriLOSEC</td> <td>EQ Omeprazole</td> <td>Lansoprazole</td> </tr> <tr> <td>First-Omeprazole</td> <td>PriLOSEC OTC</td> <td>EQL Lansoprazole</td> <td>Omeprazole</td> </tr> <tr> <td>NexIUM</td> <td>Protonix</td> <td>EQL Omeprazole</td> <td>Pantoprazole Sodium</td> </tr> <tr> <td>NexIUM 24HR</td> <td>Zegerid</td> <td>Esomeprazole Magnesium</td> <td>PX Omeprazole</td> </tr> <tr> <td>NexIUM 24HR Clear Minis</td> <td>Zegerid OTC</td> <td>GNP Esomeprazole Magnesium</td> <td>RA Esomeprazole Magnesium</td> </tr> </table>	AcipHex Sprinkle	Omeprazole+Syrspen d SF Alka	CVS Esomeprazole Magnesium	HM Omeprazole	Aciphex	Prevacid	CVS Lansoprazole	KLS Esomeprazole Magnesium	Dexilant	Prevacid 24HR	CVS Omeprazole	KLS Lansoprazole	Esomep-EZS	Prevacid SoluTab	EQ Lansoprazole	KLS Omeprazole	First-Lansoprazole	PriLOSEC	EQ Omeprazole	Lansoprazole	First-Omeprazole	PriLOSEC OTC	EQL Lansoprazole	Omeprazole	NexIUM	Protonix	EQL Omeprazole	Pantoprazole Sodium	NexIUM 24HR	Zegerid	Esomeprazole Magnesium	PX Omeprazole	NexIUM 24HR Clear Minis	Zegerid OTC	GNP Esomeprazole Magnesium	RA Esomeprazole Magnesium	
AcipHex Sprinkle	Omeprazole+Syrspen d SF Alka	CVS Esomeprazole Magnesium	HM Omeprazole																																		
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Dexilant	Prevacid 24HR	CVS Omeprazole	KLS Lansoprazole																																		
Esomep-EZS	Prevacid SoluTab	EQ Lansoprazole	KLS Omeprazole																																		
First-Lansoprazole	PriLOSEC	EQ Omeprazole	Lansoprazole																																		
First-Omeprazole	PriLOSEC OTC	EQL Lansoprazole	Omeprazole																																		
NexIUM	Protonix	EQL Omeprazole	Pantoprazole Sodium																																		
NexIUM 24HR	Zegerid	Esomeprazole Magnesium	PX Omeprazole																																		
NexIUM 24HR Clear Minis	Zegerid OTC	GNP Esomeprazole Magnesium	RA Esomeprazole Magnesium																																		

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GNP Lansoprazole	RA Lansoprazole
GNP Omeprazole	RA Omeprazole
GoodSense	SB Omeprazole
Esomeprazole	
GoodSense	SM Esomeprazole
Lansoprazole	Magnesium
Heartburn Treatment 24 Hour	SM Lansoprazole
HM Esomeprazole	SM Omeprazole
Magnesium DR	
HM Lansoprazole	TGT Omeprazole

BRAND SEDATIVE/HYPNOTIC AGENTS	FOUR 30-DAY TRIALS, PERFORMED WITHIN THE LAST 180 DAYS, ARE REQUIRED ON GENERIC ZOLPIDEM OR ZALEPLON
Ambien Ambien CR Edluar Intermezzo Lunesta Rozerem Silenor Zolpimist	Eszopiclone Zaleplon Zolpidem Tartrate Zolpidem Tartrate ER

BRAND TOPICAL IMMUNOMODULATORS	TWO 30-DAY TRIALS, PERFORMED WITHIN THE LAST 180 DAYS, ARE REQUIRED ON TOPICAL CORTICOSTEROID OR CALCIPOTRIENE
Dovonex Elidel Enstilar	Protopic Sorilux Taclonex
	Advanced Allergy Collection Ala Scalp Ala-Cort
	Fluticasone Propionate GNP Hydrocortisone GNP Hydrocortisone Max St

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Alclometasone Dipropionate	GNP Hydrocortisone Plus
Amcinonide	Gynecort 10
Anti-Itch Intensive Healing	Halobetasol Propionate
ApexiCon E	Halog
Aquanil HC	Hydrocortisone Butyr Lipo Base
Aveeno Anti-Itch Max St	Hydrocortisone Butyrate
Beta HC	Hydrocortisone Intensive Heal
Betamethasone Dipropionate	Hydrocortisone Max St
Betamethasone Dipropionate Aug	Hydrocortisone Max St/12 Moist
Betamethasone Valerate	Hydrocortisone Plus
Bryhali	Hydrocortisone Valerate
Calcipotriene	Impoyz
Calcitrene	Instacort 5
Capex	KeriCort 10
Clobetasol Prop Emollient Base	KP Hydrocortisone
Clobetasol Propionate	KP Hydrocortisone Max St
Clobetasol Propionate E	Lanacort 10
Clobetasol Propionate Emulsion	Lexette
Clocortolone Pivalate	Meijer Hydrocortisone
Clocortolone Pivalate Pump	MG217 Psoriasis Anit-Itch
Clodan	MiCort-HC
Cloderm	Mometasone Furoate
Cloderm Pump	Noble Formula HC
Cordran	Nolix
Cortaid Maximum Strength	NuCort

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# Therapeutic Alternative Drug List



Cortizone-10	Pandel
Cortizone-10	Prednicarbate
Diabetics Skin	
Cortizone-10 Eczema	Preparation H
	Hydrocortisone
Cortizone-10	Psorcon
Hydratensive	
Curad Hydrocortisone	PX Hydrocream
CVS Anti-Itch	RA Anti-Itch
Maximum Strength	Maximum Strength
CVS Cortisone	RA First Aid Anti-Itch
Intense Healing	Spray
CVS Cortisone	RA Hydrocortisone
Maximum Strength	Max St
CVS Eczema Anti-Itch	RA Hydrocortisone
	Plus 12
CVS Hydrocortisone	Recort Plus
Anti-Itch	
CVS Hydrocortisone	Sarnol-HC
Max St	
Dermarest Eczema	SB Hydrocortisone
Dermasorb TA	SB Hydrocortisone
	Max St
Desonate	SB Hydrocortisone
	Plus
Desonide	Scalp Relief
	Maximum Strength
Desoximetasone	Scalpicin Maximum
	Strength
Diflorasone Diacetate	Sernivo
EQ Hydrocortisone	SM Hydrocortisone
EQ Hydrocortisone	SM Hydrocortisone
Max St	Max St
EQ Hydrocortisone	Texacort
Plus	
EQL Anti-Itch	TGT Anti-Itch Plus
Intensive Heal	Oatmeal
EQL Anti-Itch	TGT Anti-
Maximum Strength	Itch/Aloe/Vit E
Fluocinolone	Triamcinolone
Acetonide	Acetonide

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# Therapeutic Alternative Drug List



Fluocinolone Acetonide Body	Fluocinolone Acetonide Scalp	Fluocinonide Emulsified Base	Fluocinonide Flurandrenolide	Trianex	Triderm	Vagisil	Verdeso
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BRAND ANTINFLAMMATORY AGENTS		THREE 30-DAY TRIALS, PERFORMED WITHIN THE LAST 180 DAYS, ARE REQUIRED ON TWO GENERIC NSAIDS	
Aleve	Naprelan	Addaprin	IBU
Arthrotec	Naprosyn	Adult Aspirin Regimen	IBU-200
Cambia	Naproxen Comfort Pac	Advil Junior Strength	Ibuprofen
CeleBREX	NuDroxiPAK DSDR-50	All Day Pain Relief	Ibuprofen 100 Junior Strength
DFS DR/MS/Menth/Cap Pak	NuDroxiPAK M-15	All Day Relief	Ibuprofen Childrens
Daypro	NuDroxipak DSDR-75	Aspirin-Low	Ibuprofen Infants
EC-Naprosyn	Qmiiz ODT	Aspirin	Ibuprofen Junior Strength
EC-Naproxen	Sprix	Aspirin 81	Ibuprofen Lysine
Feldene	Tivorbex	Aspirin Adult	Indomethacin
Fenortho	Vivlodex	Aspirin Adult Low Dose	Indomethacin ER
Indocin	Zipsor	Aspirin Adult Low Strength	Indomethacin Sodium
Mobic	Zorvolex	Aspirin Childrens	Infants Ibuprofen
Nalfon		Aspirin EC	Inflammacin
		Aspirin EC Adult Low Strength	Ketorolac Tromethamine
		Aspirin EC Low Dose	KLS Aspirin EC
		Aspirin EC Low Strength	KLS Aspirin Low Dose
		Aspirin Low Dose	KLS Ibuprofen

# Therapeutic Alternative Drug List



Aspirin Low Strength	KLS Naproxen Sodium
Aspirin	KP Aspirin
Aspirin Maximum Strength	KS Ibuprofen
Bayer Advanced Aspirin Ex St	Medi-Profen
Bayer Advanced Aspirin Reg St	Mediproxen
Bayer Aspirin	Medique Aspirin
Bayer Aspirin EC Low Dose	Mefenamic Acid
Bayer Aspirin Extra Strength	Meijer Aspirin EC
Bayer Aspirin Regimen	Meijer Ibuprofen
Bayer Low Dose	Meloxicam
CareAll Aspirin	Miniprin Low Dose
Celecoxib	MM Aspirin
Childrens Aspirin	Motrin IB
Childrens Aspirin Low Strength	Nabumetone
Childrens Ibuprofen	Naproxen
Childrens Ibuprofen 100	Naproxen DR
Childrens Medi-Profen	Naproxen Sodium
Choline-Mag Trisalicylate	Naproxen Sodium ER
CVS All Day Pain Relief	Norwich Aspirin
CVS Aspirin	NuDiclo TabPak
CVS Aspirin Adult Low Dose	Oxaprozin
CVS Aspirin Adult Low Strength	Pamprin All Day Relief Max St
CVS Aspirin EC	Piroxicam
CVS Aspirin Low Dose	PrevidolRx Plus Analgesic
CVS Aspirin Low Strength	Provil



# Therapeutic Alternative Drug List



CVS Backache Relief	PX All Day Relief
CVS Childrens Ibuprofen	PX Aspirin
CVS Ibuprofen	PX Childrens Profen IB
CVS Ibuprofen Childrens	PX Enteric Aspirin
CVS Ibuprofen Infants	PX Ibuprofen
CVS Ibuprofen Junior Strength	PX Ibuprofen Junior Strength
CVS Naproxen Sodium	PX Infants Profen IB
DeWitts Pain Reliever	QC Aspirin
Diclofenac Potassium	QC Aspirin Low Dose
Diclofenac Sodium ER	QC Childrens Aspirin
Diclofenac- miSOPROStol	QC Childrens Ibuprofen
Diflunisal	QC Enteric Aspirin
Doans Extra Strength	QC Ibuprofen
Dyspel	QC Ibuprofen IB
Ecotrin	QC Ibuprofen Infants
Ecotrin Low Strength	QC Naproxen Sodium
EcPirin	RA Aspirin
EQ Adult Aspirin Low Strength	RA Aspirin Adult Low Dose
EQ Aspirin	RA Aspirin Adult Low Strength
EQ Aspirin Adult Low Dose	RA Aspirin Childrens
EQ Aspirin Low Dose	RA Aspirin EC
EQ Childrens Aspirin	RA Aspirin EC Adult Low St
EQ Ibuprofen	RA Backache Relief
EQ Ibuprofen Childrens	RA Childrens Aspirin
EQ Ibuprofen Infants	RA Ibuprofen
EQ Ibuprofen Junior	RA Ibuprofen Childrens
EQ Naproxen Sodium	RA Ibuprofen Infants

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# Therapeutic Alternative Drug List



EQL Aspirin	RA Ibuprofen Junior Strength
EQL Aspirin EC	RA Naproxen Sodium
EQL Aspirin Low Dose	RA Pain Relief Aspirin
EQL Childrens Ibuprofen	RA Pain Relief Ibuprofen
EQL Ibuprofen	Salsalate
EQL Ibuprofen Infants	SB Aspirin
EQL Ibuprofen Junior Strength	SB Aspirin Adult Low Strength
EQL Naproxen Sodium	SB Aspirin EC
Etodolac	SB Backache Extra Strength
Etodolac ER	SB Childrens Aspirin
Fenoprofen Calcium	SB Ibuprofen
Flanax Pain Relief	SB Infants Ibuprofen
Flexipak	SB Low Dose ASA EC
Flurbiprofen	SB Naproxen Sodium
Genpril	SM Aspirin
GNP All Day Pain Relief	SM Aspirin Adult Low Strength
GNP Aspirin	SM Aspirin EC
GNP Aspirin Low Dose	SM Aspirin EC Low Strength
GNP Childrens Ibuprofen	SM Aspirin Low Dose
GNP Ibuprofen	SM Childrens Aspirin
GNP Ibuprofen Infants	SM Childrens Ibuprofen
GNP Ibuprofen Junior Strength	SM Ibuprofen
GNP Naproxen Sodium	SM Ibuprofen IB
GoodSense Aspirin	SM Ibuprofen Jr
GoodSense Aspirin Adult Low St	SM Infants Ibuprofen
GoodSense Aspirin Low Dose	SM Naproxen Sodium
GoodSense Ibuprofen	St Joseph Aspirin

# Therapeutic Alternative Drug List



GoodSense Ibuprofen Childrens	St Joseph Low Dose
GoodSense Ibuprofen Infants	Sulindac
GoodSense Ibuprofen Junior St	TGT Aspirin
GoodSense Naproxen Sodium	TGT Aspirin EC
H-E-B Aspirin	TGT Aspirin Low Dose
HM Aspirin	TGT Childrens Aspirin
HM Aspirin EC	TGT Childrens Ibuprofen
HM Aspirin EC Low Dose	TGT Ibuprofen
HM Ibuprofen	TGT Ibuprofen Childrens
HM Ibuprofen Childrens	TGT Ibuprofen Junior Strength
HM Ibuprofen IB	TGT Infants Ibuprofen
HM Ibuprofen Infants	TGT Naproxen Sodium
HM Naproxen Sodium	Wal-Profen
Hy-Vee All Day Relief	Xenaflamm
HyVee Ibuprofen Childrens	

BRAND PROSTGLANDIN GLAUCOMA AGENTS	ONE 30-DAY TRIAL, PERFORMED WITHIN THE LAST 180 DAYS, IS REQUIRED ON LATANOPROST OR TRAVOPROST
Lumigan Travatan Z Vyzulta	Xalatan Xelpros Zioptan
	Bimatoprost Latanoprost

BRAND BPH AGENT	TWO 30-DAY TRIALS, PERFORMED WITHIN THE LAST 180 DAYS, ARE REQUIRED ON FINASTERIDE, TAMSULOSIN, OR ALFUZOSIN
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# Therapeutic Alternative Drug List



Cardura XL	Rapaflo	Alfuzosin HCl ER	Silodosin
Flomax	Uroxatral	Dutasteride	Tamsulosin HCl
Proscar			

BRAND BETA BLOCKER MEDICATIONS		TWO 30-DAY TRIALS, PERFORMED WITHIN THE LAST 180 DAYS, ARE REQUIRED ON GENERIC BETA BLOCKER	
Avodart	Inderal XL	Dutasteride	
Corgard	InnoPran XL		
Hemangeol	Proscar		
Inderal LA			

BRAND ANTIEMETIC AGENTS		ONE 5-DAY TRIAL, PERFORMED WITHIN THE LAST 180 DAYS, IS REQUIRED ON GENERIC ONDASETRON ON GRANISETRON	
Anzemet	Zofran	Granisetron HCl	Ondansetron HCl
Sancuso	Zuplenz	Ondansetron	
Sustol			

BRAND FIBRIC ACID AGENTS		TWO 30-DAY TRIALS, PERFORMED WITHIN THE LAST 180 DAYS, ARE REQUIRED ON GENERIC GEMFIBROZIL OR FENOFIBRATE	
Antara	Tricor	Fenofibrate	Gemfibrozil

# Therapeutic Alternative Drug List



Fenoglide	Triglide	Fenofibrate Micronized
Lipofen	Trilipix	
Lopid		

BRAND ANTIDEPRESSANTS - OTHER		ONE 14-DAY TRIAL, PERFORMED WITHIN THE LAST 180 DAYS, IS REQUIRED ON GENERIC BUPROPION	
Aplenzin	Wellbutrin SR	buPROPion HCl	buPROPion HCl ER (XL)
Forfivo XL	Wellbutrin XL	buPROPion HCl ER (SR)	

BRAND CHOLESTEROL AGENTS		TWO 30-DAY TRIALS, PERFORMED WITHIN THE LAST 180 DAYS, ARE REQUIRED ON GENERIC STATIN	
Altoprev	Livalo	Atorvastatin Calcium	Pravastatin Sodium
EquaPAX/Atorvastatin/CoQ 10	Pravachol	Fluvastatin Sodium	Rosuvastatin Calcium
FloLipid	Vytorin	Fluvastatin Sodium ER	Simvastatin
Lescol XL	Zocor	Lovastatin	
Lipitor	Zypitamag		

MIRVASO SOOLANTRA		ONE 30-DAY TRIAL, PERFORMED WITHIN THE LAST 180 DAYS, IS REQUIRED ON TOPICAL METRONIDAZOLE
Mirvaso	Soolantra	Rosadan

# Therapeutic Alternative Drug List



BRAND TOPICAL ANTIFUNGAL AGENT		TWO 30-DAY TRIALS, PERFORMED WITHIN THE LAST 180 DAYS, ARE REQUIRED ON GENERIC TOPICAL ANTIFUNGALS	
Ecoza	Luliconazole	Anti-Fungal	KP Clotrimazole
Ertaczo	Luzu	Carrington Antifungal	KP Miconazole Nitrate
Exelderm	Mentax	Cavilon	Lotrimin AF Deodorant Powder
Extina	Miconazole-Zinc Oxide-Petrolat	Ciclodan	Lotrimin AF Jock Itch Powder
Jublia	Naftin	Ciclopirox	Lotrimin AF Powder
Kerydin	Nizoral	Ciclopirox Olamine	Micaderm
LamISIL AT	Nizoral A-D	Ciclopirox Treatment	Miconazole Antifungal
LamISIL AT Jock Itch	Oxistat	Clotrimazole	Miconazole Nitrate
LamISIL AT Spray	Penlac	Clotrimazole AF	Oxiconazole Nitrate
Lotrimin Ultra	Vusion	Clotrimazole Anti-Fungal	Podactin
Lotrisone	Xolegel	Clotrimazole GRx	Pro-Ex Antifungal
		Cruex Prescription Strength	PX Athletic Foot
		CVS Anti-Fungal	QC Clotrimazole
		CVS Clotrimazole	RA Antifungal
		CVS Itch Relief	RA Athletes Foot
		CVS Ringworm	RA Athletes Foot
		DermaFungal	RA Clotrimazole
		Desenex	RA Jock Itch
		Desenex Jock Itch	Remedy Antifungal
		Econazole Nitrate	Remedy Antifungal Clear
		EQ Antifungal	Remedy Phytoplex Antifungal
		EQ Athletes Foot	SB Clotrimazole Foot
		EQ Athletes Foot Spray	Shopko Athletes Foot
		EQ Jock Itch	SM Antifungal Clotrimazole
		EQL Antifungal	SM Antifungal Miconazole

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# Therapeutic Alternative Drug List



	EQL Athletes Foot	Soothe & Cool INZO
	FungiCure	Antifungal
	Intensive/NailGuard	Tetterine
	GNP Athletes Foot	TGT Clotrimazole
	GNP Miconazole Nitrate	Tineacide
	GNP Miconazorb AF	Triple Paste AF
	Jock Itch	Zeasorb-AF
	Jock Itch Relief	

BRAND ANTIVIRAL AGENT	TWO 30-DAY TRIALS, PERFORMED WITHIN THE LAST 180 DAYS, ARE REQUIRED ON AN ORAL ANTIVIRAL
Sitavig Valtrex Zovirax	Acyclovir Famciclovir valACYclovir HCl

BRAND RHEUMATOID/PSORIATIC ARTHRITIS	TWO 30-DAY TRIALS, PERFORMED WITHIN THE LAST 180 DAYS, ARE REQUIRED ON A GENERIC ANTIMETOBILITE, ORPYRIMIDINE SYNTHESIS INHIBITOR, OR INFLAMMATORY BOWEL AGENT																		
Actemra Actemra ACTPen Cimzia Cimzia Prefilled Cimzia Starter Kit Enbrel	<table border="0"> <tr> <td>Inflectra</td> <td>Hydroxychloroquine Sulfate</td> <td>Methotrexate Sodium</td> </tr> <tr> <td>Kevzara</td> <td>Leflunomide</td> <td>Methotrexate Sodium (PF)</td> </tr> <tr> <td>Olumiant</td> <td>Methotrexate</td> <td>sulfaSALazine</td> </tr> <tr> <td>Orencia</td> <td></td> <td></td> </tr> <tr> <td>Orencia ClickJect</td> <td></td> <td></td> </tr> <tr> <td>Remicade</td> <td></td> <td></td> </tr> </table>	Inflectra	Hydroxychloroquine Sulfate	Methotrexate Sodium	Kevzara	Leflunomide	Methotrexate Sodium (PF)	Olumiant	Methotrexate	sulfaSALazine	Orencia			Orencia ClickJect			Remicade		
Inflectra	Hydroxychloroquine Sulfate	Methotrexate Sodium																	
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Olumiant	Methotrexate	sulfaSALazine																	
Orencia																			
Orencia ClickJect																			
Remicade																			

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# Therapeutic Alternative Drug List



Enbrel Mini	Renflexis
Enbrel SureClick	Rituxan
Humira	Rituxan Hycela
Humira Pediatric Crohns Start	Simponi
Humira Pen	Simponi Aria
Humira Pen-CD/UC/HS Starter	Xeljanz
Humira Pen-Ps/UV/Adol HS Start	Xeljanz XR