



# 2014 Express Scripts Preferred Drug List

## A

ABILIFY, ABLIFY DISCMELT  
 ACANYA  
 ACCU-CHEK LANCETS;  
 FASTCLIX, MULTICLIX,  
 SOFT TOUCH, SOFTCLIX  
 acetaminophen/codeine  
 ACTONEL  
 acyclovir  
 ACZONE  
 ADCIRCA  
 AGGRENOX  
 albuterol  
 alendronate sodium  
 allopurinol  
 ALPHAGAN P 0.1%  
 alprazolam  
 ALREX  
 amiodarone  
 AMITIZA  
 amitriptyline  
 amlodipine  
 amlodipine/benazepril  
 amoxicillin  
 amoxicillin/potassium  
 clavulanate  
 amphetamine salt combo  
 amphetamine salt combo  
 ext-release  
 AMPYRA  
 AMTURNIDE  
 ANALPRAM ADVANCED  
 CREAM KIT  
 ANALPRAM HC 1% CREAM,  
 2.5% LOTION  
 anastrozole  
 ANDRODERM  
 ANDROGEL  
 antipyrine/benzocaine  
 ARANESP [INJ]  
 arbinoxa  
 ARCAPTA  
 ASACOL HD  
 ASMANEX  
 ASTEPRO  
 ATELVIA  
 atenolol  
 atenolol/chlorthalidone  
 atorvastatin  
 ATRALIN  
 AVELOX  
 AVONEX [INJ]  
 AXIRON  
 AZASITE  
 azathioprine  
 azelastine nasal spray  
 AZILECT  
 azithromycin  
 AZOR

## B

baclofen  
 benazepril  
 benazepril/  
 hydrochlorothiazide

BENICAR, BENICAR HCT  
 BENZACLIN PUMP  
 benzonatate  
 BEPREVE  
 BESIVANCE  
 BEYAZ  
 bisoprolol/  
 hydrochlorothiazide  
 BRILINTA  
 BROMDAY  
 budesonide neb susp  
 bupropion  
 bupropion ext-release  
 (12 hour)  
 bupropion ext-release  
 (24 hour)  
 buspirone  
 butalbital/acetaminophen/  
 caffeine  
 BUTRANS  
 BYDUREON [INJ]  
 BYETTA [INJ]  
 BYSTOLIC

## C

calcipotriene  
 CANASA  
 carbidopa/levodopa  
 carvedilol  
 cefdinir  
 cefprozil  
 cefuroxime  
 CELEBREX  
 CENESTIN  
 cephalixin  
 CETROTIDE [INJ]  
 chlorthalidone  
 chorionic  
 gonadotropin [INJ]  
 CIALIS  
 CIPRODEX  
 ciprofloxacin  
 ciprofloxacin eye solution  
 citalopram  
 clarithromycin  
 clindamycin hcl  
 clindamycin phosphate  
 clobetasol propionate  
 clomiphene citrate  
 clonazepam  
 clonidine  
 clopidogrel  
 clotrimazole/  
 betamethasone  
 dipropionate  
 COLCRYS  
 COMBIGAN  
 COMBIPATCH  
 COMBIVENT RESPIMAT  
 COPAXONE [INJ]  
 COREG CR  
 CREON  
 CRESTOR  
 CRINONE  
 cyanocobalamin [INJ]  
 cyclobenzaprine

## CYMBALTA

## D

DALIRESP  
 DAYTRANA  
 DELZICOL  
 desloratadine  
 desonide  
 DETROL LA  
 dexamethasone  
 diazepam  
 diclofenac sodium  
 delayed-release  
 dicyclomine hcl  
 DIFFERIN 0.3% GEL,  
 0.1% LOTION  
 digoxin  
 diltiazem ext-release  
 (24 hour)  
 DIOVAN  
 diphenoxylate/atropine  
 divalproex sodium  
 ext-release  
 DIVIGEL  
 donepezil  
 dorzolamide/timolol  
 doxazosin  
 doxepin  
 doxycycline hyclate  
 doxycycline monohydrate  
 DULERA  
 DUREZOL

## E

EFFIENT  
 ELIDEL  
 eliphos  
 ELIQUIS  
 enalapril  
 ENBREL [INJ]  
 ENDOMETRIN  
 ENJUVIA  
 enoxaparin [INJ]  
 EPIDUO  
 EPIPEN, EPIPEN JR [INJ]  
 ergocalciferol  
 erythromycin eye ointment  
 escitalopram  
 estradiol  
 estradiol/norethindrone  
 acetate  
 etodolac  
 EUFLEXA [INJ]  
 EURAX  
 EVAMIST  
 EVISTA  
 EXELON PATCHES  
 EXFORGE, EXFORGE HCT  
 EXTAVIA [INJ]

## F

famotidine  
 fenofibrate  
 fenofibrate micronized

The following is a list of the most commonly prescribed drugs. It represents an abbreviated version of the drug list (formulary) that is at the core of your prescription-drug benefit plan. The list is not all-inclusive and does not guarantee coverage. In addition to using this list, you are encouraged to ask your doctor to prescribe generic drugs whenever appropriate.

**PLEASE NOTE:** Brand-name drugs may move to nonformulary status if a generic version becomes available during the year. Not all the drugs listed are covered by all prescription-drug benefit programs; check your benefit materials for the specific drugs covered and the copayments for your prescription-drug benefit program. For specific questions about your coverage, please call the phone number printed on your ID card.

## J

JANUMET, JANUMET XR  
 JANUVIA  
 JUVISYNC

## K

ketoconazole topical  
 KOMBIGLYZE XR  
 KRISTALOSE

## L

labetalol hcl  
 LAMICTAL ODT  
 lamotrigine  
 lansoprazole  
 delayed-release  
 LANTUS, LANTUS  
 SOLOSTAR [INJ]  
 latanoprost  
 LATUDA  
 LETAIRIS  
 levalbuterol  
 LEVEMIR, LEVEMIR  
 FLEXPEN [INJ]  
 levetiracetam  
 levocetirizine  
 levofloxacin  
 levthyroxine sodium

## N

LIALDA  
 LINZESS  
 liothyronine  
 LIPOFEN  
 LIPTRUZET  
 lisinopril  
 lisinopril/  
 hydrochlorothiazide  
 lithium carbonate  
 LOESTRIN 24 FE,  
 LO LOESTRIN FE  
 lorazepam  
 loryna  
 losartan  
 losartan/  
 hydrochlorothiazide  
 LOTEMAX  
 lovastatin  
 LOVAZA  
 LUMIGAN  
 LUNESTA  
 LYRICA

## M

MAKENA [INJ]  
 meclizine hcl  
 medroxyprogesterone  
 acetate  
 meloxicam  
 metaxalone  
 metformin  
 metformin ext-release  
 methadone  
 methimazole  
 methocarbamol

methotrexate  
 methylphenidate  
 methylphenidate  
 ext-release  
 methylprednisolone  
 metoclopramide hcl  
 metoprolol succinate  
 ext-release  
 metoprolol tartrate  
 metronidazole  
 metronidazole vaginal gel  
 microgestin fe  
 minocycline  
 mirtazapine  
 modafinil  
 mometasone  
 mononessa  
 montelukast  
 morphine sulfate  
 ext-release  
 MOVIPREP  
 MOXEZA  
 multivitamins/fluoride  
 mupirocin  
 MUSE  
 MYRBETRIQ

nabumetone  
 nadolol  
 NAMENDA, NAMENDA XR  
 naproxen, naproxen sodium  
 NASCOBAL  
 NASONEX  
 NATAZIA  
 neomycin/polymyxin/  
 hydrocortisone ear drops  
 NEVANAC  
 NEXIUM  
 NIASPAN  
 nifedipine ext-release  
 nitrofurantoin macrocrystal  
 NITROLINGUAL PUMPSPRAY  
 NORDITROPIN [INJ]  
 nortriptyline  
 NOVOFINE  
 NUCYNTA, NUCYNTA ER  
 NUEDEXTA  
 NUVARING  
 nystatin  
 nystatin/triamcinolone

## O

ofloxacin eye solution  
 olanzapine  
 omeprazole delayed-release  
 ondansetron  
 ondansetron orally  
 disintegrating tablets  
 ONETOUCH KITS/METERS;  
 BASIC, ULTRA 2,  
 ULTRAMINI,  
 ULTRASMART, VERIO IQ

(continued)

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ONETOUCH TEST STRIPS;  
FASTAKE, ONETOUCH,  
SURESTEP, ULTRA,  
VERIO  
ONGLYZA  
OPANA ER  
ORACEA  
ORENCIA [INJ]  
orsythia  
ORTHOVISC [INJ]  
oxcarbazepine  
oxybutynin  
oxybutynin ext-release  
oxycodone  
oxycodone/acetaminophen  
OXYCONTIN  
OXYTROL

## P

pantoprazole  
delayed-release  
paroxetine  
PATADAY  
PATANOL  
PEGASYS, PEGASYS  
PROCLICK [INJ]  
penicillin v potassium  
PENTASA  
PERFOROMIST  
pioglitazone  
polymyxin/trimethoprim  
potassium chloride  
ext-release  
POTIGA  
PRADAXA  
pramipexole  
PRAMOSONE,  
PRAMOSONE E  
PRANDIMET  
pravastatin  
prednisolone  
prednisolone acetate  
prednisolone sodium  
phosphate  
prednisone  
PREMARIN TABS  
PREMPHASE  
PREMPRO  
PRISTIQ  
PROAIR HFA  
PROCRIT [INJ]  
PRODIGY INSULIN SYR,  
PEN NEEDLES  
progesterone micronized  
PROLENSA  
promethazine  
promethazine/  
dextromethorphan  
propranolol  
propranolol ext-release  
PROTOPIC  
PULMICORT FLEXHALER  
PYLERA

## Q

QNASL  
quetiapine  
QUILLIVANT XR  
quinapril  
QVAR

## R

ramipril  
RANEXA  
ranitidine  
RAPAFLO

REBIF, REBIF  
REBIDOSE [INJ]  
reclipsen  
RECTIV  
RELISTOR [INJ]  
RELPAK  
RENVELA  
RESTASIS  
RIOMET  
risperidone  
rizatriptan  
rizatriptan orally  
disintegrating tablets  
ropinirole

## S

SAFYRAL  
SANCUSO  
SAVELLA  
SEREVENT DISKUS  
SEROQUEL XR  
sertraline  
SIMCOR  
simvastatin  
SOLARAZE  
SOLODYN 55 MG, 65 MG,  
80 MG, 105 MG, 115 MG  
SOMATULINE DEPOT [INJ]  
sotalol  
SPIRIVA  
spironolactone  
sprintec  
STRATTERA  
SUBOXONE SL FILM  
sucralfate  
sulfamethoxazole/  
trimethoprim  
sumatriptan  
SUMAVEL DOSEPRO [INJ]  
SUPREP  
SYMBICORT  
SYMLINPEN [INJ]

## T

TACLONEX  
TAMIFLU  
tamoxifen  
tamsulosin ext-release  
TARKA  
TAZORAC  
TECFIDERA  
TEKAMLO  
TEKTRUNA, TEKTRUNA HCT  
temazepam  
terazosin  
terconazole  
testosterone cypionate  
[INJ]  
timolol maleate  
eye solution  
tizanidine  
TOBRADEX OINTMENT  
TOBRADEX ST  
tobramycin eye solution  
tobramycin/  
dexamethasone susp  
topiramate  
TOVIAZ  
TRACLEER  
tramadol  
tramadol/acetaminophen  
TRAVATAN Z  
travoprost  
trazodone hcl  
tretinoin  
TREMIMET

triamcinolone acetonide  
nasal spray  
triamcinolone acetonide  
topical  
triamterene/  
hydrochlorothiazide  
TRIBENZOR  
TRILIPIX  
trinessa  
tri-previfem  
tri-sprintec  
TUDORZA

## U

UCERIS  
ULORIC

## V

VAGIFEM  
valacyclovir  
valsartan/  
hydrochlorothiazide  
VASCEPA  
VELTIN  
venlafaxine  
venlafaxine ext-release  
VENTOLIN HFA  
verapamil ext-release  
veripred  
VESICARE  
VGO  
VIAGRA  
VICTRELIS  
VIGAMOX  
VIIBRYD  
VIMOVO  
VIMPAT  
VIRAMUNE XR  
VIVELLE-DOT  
VOLTAREN GEL  
VYTORIN  
VYVANSE

## W

warfarin  
WELCHOL

## X

XARELTO  
XIFAXAN

## Z

ZEMPLAR  
ZENPEP (EXCEPT 5,000 U)  
ZETIA  
ZIANA  
zolmitriptan  
zolmitriptan orally  
disintegrating tablets  
zolpidem  
zolpidem ext-release  
ZOMIG NASAL  
ZYCLARA  
ZYLET  
ZYMAXID  
ZYTIGA

## Excluded Medications With Covered Preferred Alternatives

The following is a list of excluded brand-name medications with covered preferred alternatives that are on the formulary. Column 1 lists excluded medications. Column 2 lists covered preferred alternatives that can be prescribed.

Excluded Medications	Covered Preferred Alternative(s)
ACCU-CHEK METERS/STRIPS	OneTouch meters/strips
ADVAIR DISKUS/HFA	Dulera, Symbicort
ALVESCO	Asmanex, Pulmicort Flexhaler, QVAR
APIDRA	Humalog
AUVI-Q	Epipen, Epipen Jr
AVINZA	morphine sulfate ext-release, oxymorphone ext-release, Nucynta ER, Opana ER, Oxycontin
BECONASE AQ	flunisolide, fluticasone, triamcinolone acetonide, Nasonex, Qnasl
BETASERON	Avonex, Extavia, Rebif
BRAVELLE	Gonal-f
BREEZE, CONTOUR METERS/STRIPS	OneTouch meters/strips
BREO ELLIPTA	Dulera, Symbicort
CIMZIA	Enbrel, Humira
EDARBI/EDARBYCLOR	candesartan/hydrochlorothiazide, irbesartan/hydrochlorothiazide, losartan/hydrochlorothiazide, valsartan/hydrochlorothiazide, Benicar/HCT
EXALGO	morphine sulfate ext-release, oxymorphone ext-release, Nucynta ER, Opana ER, Oxycontin
FLOVENT DISKUS/HFA	Asmanex, Pulmicort Flexhaler, QVAR
FOLLISTIM AQ	Gonal-f
FORTESTA	AndroGel, Axiron
FREESTYLE, PRECISION METERS/STRIPS	OneTouch meters/strips
JENTADUETO	Janumet, Janumet XR, Kombiglyze XR
KADIAN	morphine sulfate ext-release, oxymorphone ext-release, Nucynta ER, Opana ER, Oxycontin
KAZANO	Janumet, Janumet XR, Kombiglyze XR
LEVITRA	Cialis, Viagra
MAXAIR AUTOHALER	Proair HFA, Ventolin HFA
MICARDIS/MICARDIS HCT	candesartan/hydrochlorothiazide, irbesartan/hydrochlorothiazide, losartan/hydrochlorothiazide, valsartan/hydrochlorothiazide, Benicar/HCT
NESINA	Januvia, Onglyza
NOVOLIN	Humulin
NOVOLOG	Humalog
NUTROPIN/NUTROPIN AQ	Genotropin, Humatrope, Norditropin
OMNARIS	flunisolide, fluticasone, triamcinolone acetonide, Nasonex, Qnasl
OMNITROPE	Genotropin, Humatrope, Norditropin
PEGINTRON	Pegasys
PROVENTIL HFA	Proair HFA, Ventolin HFA
RHINOCORT AQUA	flunisolide, fluticasone, triamcinolone acetonide, Nasonex, Qnasl
SAIZEN	Genotropin, Humatrope, Norditropin
SIMPONI	Enbrel, Humira
STAXYN	Cialis, Viagra
STELARA	Enbrel, Humira
TESTIM	AndroGel, Axiron
TEVETEN/TEVETEN HCT	candesartan/hydrochlorothiazide, irbesartan/hydrochlorothiazide, losartan/hydrochlorothiazide, valsartan/hydrochlorothiazide, Benicar/HCT
TEV-TROPIN	Genotropin, Humatrope, Norditropin
TRADJENTA	Januvia, Onglyza
TRUETEST, TRUETRACK METERS/STRIPS	OneTouch meters/strips
VERAMYST	flunisolide, fluticasone, triamcinolone acetonide, Nasonex, Qnasl
VICTOZA	Bydureon, Byetta
XELJANZ	Enbrel, Humira
XOPENEX HFA	Proair HFA, Ventolin HFA
ZETONNA	flunisolide, fluticasone, triamcinolone acetonide, Nasonex, Qnasl
ZIOPTAN	latanoprost, travoprost, Lumigan, Travatan Z

## KEY

The symbol [INJ] next to a drug name indicates that the drug is available in injectable form only.  
**For the member:** Generic medications contain the same active ingredients as their corresponding brand-name medications, although they may look different in color or shape. They have been FDA-approved under strict standards.  
**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.

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