

Covered and non-covered drugs

Drugs not covered — and their covered alternatives

2025 Advanced Control Plan — Aetna Federal
Employees Formulary Exclusions Drug List



Below is a list of medications that will not be covered without a prior authorization for medical necessity. If you continue using one of these drugs without prior approval, you may be required to pay the full cost. Ask your doctor to choose one of the generic or brand preferred options listed below.

Key	
UPPERCASE	Brand-name medicine
<i>lowercase italics</i>	Generic medicine

Preferred options for excluded medications³

Excluded drug name(s)	Preferred option(s)*
ABILIFY	<i>aripiprazole, asenapine, clozapine, lurasidone, olanzapine, quetiapine, quetiapine ext-rel, risperidone, ziprasidone, VRAYLAR</i>
ABSORICA	<i>isotretinoin capsule 10 mg, 20 mg, 30 mg, 40 mg</i>
ACANYA	<i>adapalene (except adapalene pad), adapalene-benzoyl peroxide, benzoyl peroxide, clindamycin gel (except NDC* 68682046275), clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, ONEXTON</i>
ACIPHEX, ACIPHEX SPRINKLE	<i>dexlansoprazole delayed-rel, esomeprazole delayed-rel, lansoprazole delayed-rel capsule, omeprazole delayed-rel, pantoprazole delayed-rel tablet</i>
ACTICLATE	<i>doxycycline hyclate capsule, doxycycline hyclate tablet (except doxycycline hyclate tablet 50 mg, 75 mg, 150 mg), minocycline, tetracycline</i>
ACTOS	<i>pioglitazone</i>
ACUVAIL	<i>bromfenac, diclofenac, ketorolac</i>
<i>acyclovir cream</i>	<i>acyclovir (except acyclovir cream), valacyclovir</i>
<i>adapalene pad</i>	<i>adapalene (except adapalene pad), adapalene-benzoyl peroxide, benzoyl peroxide, clindamycin gel (except NDC* 68682046275), clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, DIFFERIN 1% gel, ONEXTON</i>
ADCIRCA	<i>sildenafil, tadalafil</i>
ADDERALL	<i>amphetamine-dextroamphetamine mixed salts, dexamethylphenidate, dextroamphetamine, methylphenidate</i>
ADDERALL XR	<i>amphetamine-dextroamphetamine mixed salts ext-rel, dexamethylphenidate ext-rel, dextroamphetamine ext-rel, methylphenidate ext-rel, AZSTARYS</i>
ADVAIR DISKUS, ADVAIR HFA	<i>budesonide-formoterol, fluticasone-salmeterol**, breyna, WIXELA INHUB BREO ELLIPTA**, DULERA</i>
ADZENYS ER, ADZENYS XR-ODT	<i>amphetamine-dextroamphetamine mixed salts ext-rel, dexamethylphenidate ext-rel, dextroamphetamine ext-rel, methylphenidate ext-rel, AZSTARYS</i>
AKYNZEO	<i>aprepitant WITH granisetron, ondansetron or SANCUSO</i>
<i>albuterol sulfate CFC-free aerosol (NDCs 00093317431, 66993001968 only)</i>	<i>albuterol sulfate CFC-free aerosol (except NDC* 66993001968), levalbuterol tartrate CFC-free aerosol</i>
ALLISON MEDICAL INSULIN SYRINGES ⁴	BD ULTRAFINE INSULIN SYRINGES
ALORA	<i>estradiol, DIVIGEL, EVAMIST</i>
ALREX	<i>azelastine, cromolyn sodium, loteprednol suspension (except generic for ALREX), olopatadine</i>
ALTOPREV	<i>atorvastatin, ezetimibe-simvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin</i>
ALVESCO	ARNUITY ELLIPTA, QVAR REDHALER

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Advanced Control Plan - Aetna Formulary Exclusions Drug List (1/2025)

Excluded drug name(s)	Preferred option(s)*
AMITIZA	lubiprostone, LINZESS, MOVANTIK, SYMPROIC
AMPYRA	dalfampridine ext-rel
AMRIX	carisoprodol 350 mg, chlorzoxazone 500 mg (except NDC^ 73007001303), cyclobenzaprine (except cyclobenzaprine tablet 7.5 mg), metaxalone 800 mg, methocarbamol (except NDCs^ 69036091010, 69036093090, 70868090190)
ANDROGEL	testosterone gel (except authorized generics for TESTIM and VOGELXO), testosterone solution, ANDRODERM, NATESTO
ANORO ELLIPTA	BEVESPI AEROSPHERE, STIOLTO RESPIMAT
ANGELIQ	estradiol-norethindrone, BIJUVA
ANZEMET	granisetron, ondansetron, SANCUSO
APEXICON E	desoximetasone (except desoximetasone ointment 0.05%), fluocinonide (except fluocinonide cream 0.1%), BRYHALI
APIDRA	FIASP**, NOVOLOG
APLENZIN	bupropion, bupropion ext-rel (except bupropion ext-rel tablet 450 mg)
APOKYN	INBRIJA, KYNMOBI
APTENSIO XR	amphetamine-dextroamphetamine mixed salts ext-rel, dexamethylphenidate ext-rel, dextroamphetamine ext-rel, methylphenidate ext-rel, AZSTARYS
APTIOM	carbamazepine, carbamazepine ext-rel, divalproex sodium, divalproex sodium ext-rel, felbamate, gabapentin, lacosamide, lamotrigine tablets and chewable tablets, lamotrigine ext-rel, levetiracetam, levetiracetam ext-rel, oxcarbazepine, phenobarbital, phenytoin, phenytoin sodium extended, pregabalin, primidone, tiagabine, topiramate, topiramate ext-rel (except sprinkles), valproic acid, zonisamide, FYCOMPA, OXTELLAR XR, XCOPRI
APTIVUS	Consult doctor
ARALAST NP	PROLASTIN-C
arformoterol soln	formoterol inhalation solution, STRIVERDI RESPIMAT
ARTHROTEC	celecoxib; diclofenac sodium, ibuprofen, meloxicam tablet or naproxen (except naproxen CR or naproxen suspension) WITH dextlansoprazole delayed-rel, esomeprazole delayed-rel, lansoprazole delayed-rel capsule, omeprazole delayed-rel, pantoprazole delayed-rel tablet
ASACOL HD	balsalazide, mesalamine delayed-rel, mesalamine ext-rel, sulfasalazine, sulfasalazine delayed-rel, PENTASA
ASCENSIA KITS AND STRIPS ⁵	ACCU-CHEK AVIVA PLUS STRIPS AND KITS ² , ACCU-CHEK COMPACT PLUS STRIPS AND KITS ² , ACCU-CHEK GUIDE STRIPS AND KITS ² , ACCU-CHEK SMARTVIEW STRIPS AND KITS ² , ONETOUCH ULTRA STRIPS AND KITS ² , ONETOUCH VERIO STRIPS AND KITS ²
ASMANEX, ASMANEX HFA	ARNUITY ELLIPTA, QVAR REDHALER
ATACAND, ATACAND HCT	candesartan, candesartan-hydrochlorothiazide, irbesartan, irbesartan-hydrochlorothiazide, losartan, losartan-hydrochlorothiazide, olmesartan, olmesartan-hydrochlorothiazide, telmisartan, telmisartan-hydrochlorothiazide, valsartan, valsartan-hydrochlorothiazide
ATIVAN	alprazolam, clonazepam, diazepam, lorazepam, oxazepam
ATRALIN	adapalene (except adapalene pad), adapalene-benzoyl peroxide, benzoyl peroxide, clindamycin gel (except NDC* 68682046275), clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, DIFFERIN 1% gel, ONEXTON
ATRIPLA	efavirenz-emtricitabine-tenofovir disoproxil fumarate, efavirenz-lamivudine-tenofovir disoproxil fumarate, BIKTARVY, DOVATO, GENVOYA, ODEFSEY, SYMTUZA
ATROVENT HFA	SPIRIVA
AUBAGIO	dimethyl fumarate delayed-rel, fingolimod, glatiramer, glatopa, teriflunomide, BETASERON, COPAXONE 40 MG/ML, KESIMPTA, MAYZENT, REBIF, TYSABRI, VUMERITY, ZEPOSIA
AURYXIA	calcium acetate, sevelamer carbonate, sevelamer hcl, PHOSLYRA, VELPHORO
AUVI-Q	epinephrine auto-injector, EPIPEN, EPIPEN JR, SYMJEPi

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Excluded drug name(s)	Preferred option(s)*
AVSOLA	REMICADE, SIMPONI ARIA, STELARA INTRAVENOUS
AZASITE	ciprofloxacin, erythromycin, gentamicin, levofloxacin, moxifloxacin, ofloxacin, sulfacetamide, tobramycin
AZELEX	adapalene (except adapalene pad), adapalene-benzoyl peroxide, benzoyl peroxide, clindamycin gel (except NDC* 68682046275), clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, DIFFERIN 1% gel, ONEXTON
AZESCO®	prenatal vitamins, CITRANATAL
AZOPT	brinzolamide, dorzolamide
AZOR	amlodipine-olmesartan, amlodipine-telmisartan, amlodipine-valsartan
BALCOLTRA	ethinyl estradiol-drospirenone, ethinyl estradiol-drospirenone-levomefolate, ethinyl estradiol-levonorgestrel, ethinyl estradiol-norethindrone acetate-iron, ethinyl estradiol-norgestimate, LO LOESTRIN FE
BANZEL SUSPENSION	clobazam, clonazepam, felbamate, lamotrigine tablets and chewable tablets, rufinamide, topiramate, topiramate ext-rel (except sprinkles)
BARACLUDE TABLET	entecavir, lamivudine, tenofovir disoproxil fumarate, BARACLUDE SOLUTION, VEMLIDY
BECONASE AQ	azelastine-fluticasone, flunisolide, fluticasone, mometasone
BENICAR, BENICAR HCT	candesartan, candesartan-hydrochlorothiazide, irbesartan, irbesartan-hydrochlorothiazide, losartan, losartan-hydrochlorothiazide, olmesartan, olmesartan-hydrochlorothiazide, telmisartan, telmisartan-hydrochlorothiazide, valsartan, valsartan-hydrochlorothiazide
BENZACLIN	adapalene, benzoyl peroxide, clindamycin gel (except NDC^ 68682046275), clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, EPIDUO, ONEXTON
benzonatate (NDCs^ 69336012615, 69499032915 only)	benzonatate (except NDCs^ 69336012615, 69499032915)
BEPREVE, bepotastine	azelastine, cromolyn sodium, loteprednol suspension (except generic for ALREX), olopatadine
BERINERT	icatibant, RUCONEST
BESIVANCE	ciprofloxacin, erythromycin, gentamicin, levofloxacin, moxifloxacin, ofloxacin, sulfacetamide, tobramycin
betamethasone dipropionate ointment 0.05%	desoximetasone (except desoximetasone ointment 0.05%), fluocinonide (except fluocinonide cream 0.1%), BRYHALI
BETAPACE, BETAPACE AF	sotalol
BETIMOL	timolol maleate solution
BETOPTIC S	timolol maleate solution
BEYAZ	ethinyl estradiol-drospirenone, ethinyl estradiol-drospirenone-levomefolate, ethinyl estradiol-levonorgestrel, ethinyl estradiol-norethindrone acetate-iron, ethinyl estradiol-norgestimate, LO LOESTRIN FE
bimatoprost solution 0.03%	latanoprost, travoprost, ZIOPTAN
BREEZE 2 STRIPS AND KITS⁵	ACCU-CHEK AVIVA PLUS STRIPS AND KITS ² , ACCU-CHEK COMPACT PLUS STRIPS AND KITS ² , ACCU-CHEK GUIDE STRIPS AND KITS ² , ACCU-CHEK SMARTVIEW STRIPS AND KITS ² , ONETOUGH ULTRA STRIPS AND KITS ² , ONETOUGH VERIO STRIPS AND KITS ²
BROMSITE	bromfenac, diclofenac, ketorolac
BROVANA	formoterol inhalation solution, STRIVERDI RESPIMAT
Bupap	diclofenac sodium, ibuprofen, naproxen (except naproxen CR or naproxen suspension)
BUPHENYL	sodium phenylbutyrate, PHEBURANE
bupropion ext-rel tablet 450 mg	bupropion, bupropion ext-rel (except bupropion ext-rel tablet 450 mg)

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Excluded drug name(s)	Preferred option(s)*
butalbital-acetaminophen capsule, butalbital-acetaminophen tablet 25-325 mg, butalbital-acetaminophen tablet 50-300 mg, BUTALBITAL-ACETAMINOPHEN (NDC* 69499034230 only)	<i>diclofenac sodium, ibuprofen, naproxen (except naproxen CR or naproxen suspension)</i>
BUTALBITAL-ACETAMINOPHEN (NDC* 69499034230 only)	<i>diclofenac sodium, ibuprofen, naproxen (except naproxen CR or naproxen suspension)</i>
BYDUREON BCISE	<i>liraglutide, MOUNJARO, OZEMPIC, RYBELSUS, TRULICITY, VICTOZA</i>
BYETTA	<i>liraglutide, MOUNJARO, OZEMPIC, RYBELSUS, TRULICITY, VICTOZA</i>
BYSTOLIC	<i>atenolol, carvedilol, carvedilol phosphate ext-rel, metoprolol succinate ext-rel, metoprolol tartrate, nadolol, propranolol, propranolol ext-rel</i>
CAFERGOT	<i>eletriptan, naratriptan, rizatriptan, sumatriptan, zolmitriptan, NURTEC ODT, UBRELVY</i>
calcipotriene cream, calcipotriene foam, CALCIPOTRIENE FOAM	<i>calcipotriene ointment, calcipotriene solution</i>
calcipotriene-betamethasone	<i>calcipotriene ointment or calcipotriene solution WITH desoximetasone (except desoximetasone ointment 0.05%), fluocinonide (except fluocinonide cream 0.1%) or BRYHALI; DUOBRII, ENSTILAR, TACLONEX</i>
calcitriol ointment	<i>calcipotriene ointment, calcipotriene solution</i>
CAMBIA	<i>diclofenac sodium, ibuprofen, naproxen (except naproxen CR or naproxen suspension)</i>
CANASA	<i>hydrocortisone enema, mesalamine suppository, mesalamine suspension, CORTIFOAM</i>
CARAC	<i>fluorouracil cream 5%, fluorouracil solution, imiquimod</i>
CARAFATE	<i>sucralfate tablet</i>
CARBINOXAMINE TABLET 6 MG	<i>levocetirizine</i>
CARDIZEM, CARDIZEM CD, CARDIZEM LA	<i>diltiazem ext-rel (except generics for CARDIZEM LA)</i>
carisoprodol 250 mg	<i>carisoprodol 350 mg, chlorzoxazone 500 mg (except NDC^ 73007001303), cyclobenzaprine (except cyclobenzaprine tablet 7.5 mg), metaxalone 800 mg, methocarbamol (except NDCs^ 69036091010, 69036093090, 70868090190)</i>
CARNITOR, CARNITOR SF	<i>levocarnitine</i>
CELEBREX	<i>celecoxib, diclofenac sodium, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)</i>
CELLCEPT	<i>mycophenolate mofetil, mycophenolate sodium</i>
chlordiazepoxide-clidinium (NDCs^ 11534019701, 42494040901, 51293069601, 51293069610, 67877073101, 70700018501 only)"	<i>dicyclomine</i>
chlorzoxazone 375 mg, chlorzoxazone 500 mg (NDC^ 73007001303 only), chlorzoxazone 750 mg, CHLORZOXAZONE 250 MG	<i>carisoprodol 350 mg, chlorzoxazone 500 mg (except NDC^ 73007001303), cyclobenzaprine (except cyclobenzaprine tablet 7.5 mg), metaxalone 800 mg, methocarbamol (except NDCs^ 69036091010, 69036093090, 70868090190)</i>

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Excluded drug name(s)	Preferred option(s)*
CHORIONIC GONADOTROPIN	VIDREL*
CIALIS	sildenafil, tadalafil, vardenafil*
CILOXAN	ciprofloxacin, erythromycin, gentamicin, levofloxacin, moxifloxacin, ofloxacin, sulfacetamide, tobramycin
CIPRO HC	ciprofloxacin-dexamethasone, ofloxacin otic
CIPRODEX	ciprofloxacin-dexamethasone, ofloxacin otic
<i>ciprofloxacin-fluocinolone</i>	ciprofloxacin-dexamethasone, ofloxacin otic
CLINDAGEL	adapalene (except adapalene pad), adapalene-benzoyl peroxide, benzoyl peroxide, clindamycin gel (except NDC* 68682046275), clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, DIFFERIN 1% gel, ONEXTON
<i>clindamycin gel (NDC^ 68682046275 only)</i>	adapalene (except adapalene pad), adapalene-benzoyl peroxide, benzoyl peroxide, clindamycin gel (except NDC* 68682046275), clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, DIFFERIN 1% gel, ONEXTON
<i>clobetasol emollient foam</i>	clobetasol cream, clobetasol foam (except clobetasol emollient foam), clobetasol gel, clobetasol lotion, clobetasol ointment, halobetasol cream, halobetasol ointment
<i>clobetasol spray</i>	clobetasol cream, clobetasol foam (except clobetasol emollient foam), clobetasol gel, clobetasol lotion, clobetasol ointment, halobetasol cream, halobetasol ointment
CLOBEX SPRAY	clobetasol cream, clobetasol foam (except clobetasol emollient foam), clobetasol gel, clobetasol lotion, clobetasol ointment, halobetasol cream, halobetasol ointment
<i>clocortolone cream</i>	hydrocortisone butyrate cream, hydrocortisone butyrate ointment, hydrocortisone butyrate solution, mometasone, triamcinolone cream, triamcinolone lotion, triamcinolone ointment (except triamcinolone ointment 0.05%)
COLAZAL	balsalazide, mesalamine delayed-rel, mesalamine ext-rel, sulfasalazine, sulfasalazine delayed-rel, PENTASA
<i>colchicine capsule</i>	colchicine tablet, MITIGARE
COLCRYS	colchicine tablet, MITIGARE
COMBIPATCH	CLIMARA PRO
COMPLERA	efavirenz-emtricitabine-tenofovir disoproxil fumarate, efavirenz-lamivudine-tenofovir disoproxil fumarate, BIKTARVY, DOVATO, GENVOYA, ODEFSEY, SYMTUZA
CONSENSI	amlodipine WITH celecoxib
CONCERTA	amphetamine-dextroamphetamine mixed salts ext-rel, dexamethylphenidate ext-rel, dextroamphetamine ext-rel, methylphenidate ext-rel, AZSTARYS
CONTOUR NEXT STRIPS AND KITS⁵ CONTOUR STRIPS AND KITS⁵	ACCU-CHEK AVIVA PLUS STRIPS AND KITS ² , ACCU-CHEK COMPACT PLUS STRIPS AND KITS ² , ACCU-CHEK GUIDE STRIPS AND KITS ² , ACCU-CHEK SMARTVIEW STRIPS AND KITS ² , ONETOUCH ULTRA STRIPS AND KITS ² , ONETOUCH VERIO STRIPS AND KITS ²
CONTRACE	QSYMIA*, SAXENDA*, WEGOVY*
CONTOUR LOW CONTROL⁷ CONTOUR HIGH LIQ CONTROL⁷ CONTOUR NEXT CONTROL LEVEL 1⁷ CONTOUR NEXT SOL LEVEL 2⁷ CONTOUR NORM LIQ CONTROL⁷	ACCU-CHEK AVIVA LIQUID ACCU-CHEK GUIDE CONTROL LEVEL1/LEVEL2 LIQUID ACCU-CHEK SMARTVIEW CONTROL LIQUID
COPAXONE 20 MG/ML	dimethyl fumarate delayed-rel, fingolimod, glatiramer, Glatopa, teriflunomide, BETASERON, COPAXONE 40 MG/ML, KESIMPTA, MAYZENT, REBIF, TYSABRI, VUMERITY, ZEPOSIA
CORDRAN CREAM, CORDRAN LOTION	desonide (except desonide gel), hydrocortisone

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Excluded drug name(s)	Preferred option(s)*
CORDRAN OINTMENT	<i>hydrocortisone butyrate cream, hydrocortisone butyrate ointment, hydrocortisone butyrate solution, mometasone, triamcinolone cream, triamcinolone lotion, triamcinolone ointment (except triamcinolone ointment 0.05%)</i>
CORDRAN TAPE	<i>clobetasol cream, clobetasol foam (except clobetasol emollient foam), clobetasol gel, clobetasol lotion, clobetasol ointment, halobetasol cream, halobetasol ointment</i>
COREG CR	<i>atenolol, carvedilol, carvedilol phosphate ext-rel, metoprolol succinate ext-rel, metoprolol tartrate, nadolol, propranolol, propranolol ext-rel</i>
CoreMino	<i>doxycycline hyclate capsule, doxycycline hyclate tablet (except doxycycline hyclate tablet 50 mg, 75 mg, 150 mg), minocycline, tetracycline</i>
COSOPT PF	<i>dorzolamide-timolol</i>
COZAAR	<i>candesartan, irbesartan, losartan, olmesartan, telmisartan, valsartan</i>
CRESEMBA	<i>itraconazole</i>
CRESTOR	<i>atorvastatin, ezetimibe-simvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin</i>
CRINONE	ENDOMETRIN
CUPRIMINE	<i>penicillamine</i>
cyclobenzaprine ext-rel capsule, cyclobenzaprine tablet 7.5 mg	<i>carisoprodol 350 mg, chlorzoxazone 500 mg (except NDC^ 73007001303), cyclobenzaprine (except cyclobenzaprine tablet 7.5 mg), metaxalone 800 mg, methocarbamol (except NDCs^ 69036091010, 69036093090, 70868090190)</i>
CYCLOSET	Consult doctor
cyclosporine (ophth) (generics for RESTASIS only)	RESTASIS SINGLE DOSE, XIIDRA
CYMBALTA	<i>desvenlafaxine ext-rel, duloxetine, venlafaxine, venlafaxine ext-rel capsule</i>
CYTOMEL	<i>levothyroxine, liothyronine</i>
dabigatran	<i>warfarin, ELIQUIS, XARELTO</i>
DARAPRIM	<i>pyrimethamine</i>
DAYTRANA	<i>amphetamine-dextroamphetamine mixed salts ext-rel, dexamethylphenidate ext-rel, dextroamphetamine ext-rel, methylphenidate ext-rel, AZSTARYS</i>
DELZICOL	<i>balsalazide, mesalamine delayed-rel, mesalamine ext-rel, sulfasalazine, sulfasalazine delayed-rel, PENTASA</i>
DENAVIR	<i>acyclovir (except acyclovir cream), valacyclovir</i>
DEPO-SUBQ PROVERA 104MG	<i>medroxyprogesterone acetate 150 mg/mL</i>
DEFERFAL	<i>deferasirox, deferiprone, deferoxamine</i>
desonide gel	<i>desonide (except desonide gel), hydrocortisone</i>
desoximetasone ointment 0.05%	<i>hydrocortisone butyrate cream, hydrocortisone butyrate ointment, hydrocortisone butyrate solution, mometasone, triamcinolone cream, triamcinolone lotion, triamcinolone ointment (except triamcinolone ointment 0.05%)</i>
DESVENLAFAXINE ER	<i>desvenlafaxine ext-rel, duloxetine, venlafaxine, venlafaxine ext-rel capsule</i>
DETROL LA	<i>darifenacin ext-rel, oxybutynin ext-rel, solifenacin, tolterodine, tolterodine ext-rel, trospium, trospium ext-rel, MYRBETRIQ, TOVIAZ</i>
dexchlorpheniramine	<i>clemastine 2.68 mg, cyproheptadine, levocetirizine</i>
Dexifol	<i>folic acid, folic acid-vitamin B6-vitamin B12</i>
DIASTAT	<i>diazepam rectal gel, NAYZILAM, VALTOCO</i>

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Excluded drug name(s)	Preferred option(s)*
diclofenac potassium capsule 25 mg, diclofenac potassium tablet 25 mg	diclofenac sodium, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)
diclofenac sodium solution 2%	diclofenac sodium, diclofenac sodium solution 1.5%, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)
DIASTIX TEST STRIPS**	Consult doctor
DIFFERIN LOTION	adapalene (except adapalene pad), adapalene-benzoyl peroxide, benzoyl peroxide, clindamycin gel (except NDC* 68682046275), clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, DIFFERIN 1% gel, ONEXTON
diflorasone cream, diflorasone ointment	desoximetasone (except desoximetasone ointment 0.05%), fluocinonide (except fluocinonide cream 0.1%), BRYHALI
dihydroergotamine spray	eletriptan, naratriptan, rizatriptan, sumatriptan, zolmitriptan, NURTEC ODT, UBRELVY
DILANTIN	carbamazepine, carbamazepine ext-rel, divalproex sodium, divalproex sodium ext-rel, felbamate, gabapentin, lacosamide, lamotrigine tablets and chewable tablets, lamotrigine ext-rel, levetiracetam, levetiracetam ext-rel, oxcarbazepine, phenobarbital, phenytoin, phenytoin sodium extended, pregabalin, primidone, tiagabine, topiramate, topiramate ext-rel (except sprinkles), valproic acid, zonisamide, FYCOMPA, OXTELLAR XR, XCOPRI
diltiazem ext-rel (generics for CARDIZEM LA only)	diltiazem ext-rel (except generics for CARDIZEM LA)
DIOVAN, DIOVAN HCT	candesartan, candesartan-hydrochlorothiazide, irbesartan, irbesartan-hydrochlorothiazide, losartan, losartan-hydrochlorothiazide, olmesartan, olmesartan-hydrochlorothiazide, telmisartan, telmisartan-hydrochlorothiazide, valsartan, valsartan-hydrochlorothiazide
DORYX, DORYX MPC	doxycycline hyclate capsule, doxycycline hyclate tablet (except doxycycline hyclate tablet 50 mg [NDC^ 72143021160 only], 75 mg, 150 mg), minocycline, tetracycline
doxepin cream	desonide (except desonide gel), hydrocortisone, pimecrolimus, tacrolimus, EUCRISA
doxycycline hyclate delayed-rel tablet	doxycycline hyclate capsule, doxycycline hyclate tablet (except doxycycline hyclate tablet 50 mg, 75 mg, 150 mg), minocycline, tetracycline
doxycycline hyclate tablet 50 mg, doxycycline hyclate tablet 75 mg, doxycycline hyclate tablet 150 mg	doxycycline hyclate capsule, doxycycline hyclate tablet (except doxycycline hyclate tablet 50 mg, 75 mg, 150 mg), minocycline, tetracycline
doxycycline monohydrate capsule 75 mg, doxycycline monohydrate capsule 150 mg	doxycycline hyclate capsule, doxycycline hyclate tablet (except doxycycline hyclate tablet 50 mg, 75 mg, 150 mg), minocycline, tetracycline
doxycycline monohydrate delayed-rel capsule	ORACEA
DUAVEE	estradiol-norethindrone, raloxifene, BIJUVA
DUEXIS	ibuprofen AND famotidine
DULERA	ADVAIR DISKUS, ADVAIR HFA†, BREO ELLIPTA†, SYMBICORT
DUTOPROL	metoprolol succinate ext-rel WITH hydrochlorothiazide
DYANAVEL XR	amphetamine-dextroamphetamine mixed salts ext-rel, dexamethylphenidate ext-rel, dextroamphetamine ext-rel, methylphenidate ext-rel, AZSTARYS
DYRENIUM	amiloride, triamterene
E.E.S. GRANULES	erythromycins
ECOZA	ciclopirox, clotrimazole, econazole, ketoconazole cream 2%, oxiconazole (except NDCs^ 00168035830, 51672135902)

* Coverage may not apply in all plans. Refer to plan documents.

Excluded drug name(s)	Preferred option(s)*
EDARBI, EDARBYCLOR	candesartan, candesartan-hydrochlorothiazide, irbesartan, irbesartan-hydrochlorothiazide, losartan, losartan-hydrochlorothiazide, olmesartan, olmesartan-hydrochlorothiazide, telmisartan, telmisartan-hydrochlorothiazide, valsartan, valsartan-hydrochlorothiazide
EDLUAR	doxepin, ramelteon, temazepam, zolpidem, zolpidem ext-rel
EFFEXOR XR	desvenlafaxine ext-rel, duloxetine, venlafaxine, venlafaxine ext-rel capsule
ELELYSO	CERDELGA, CEREZYME
ELESTRIN	estradiol, DIVIGEL, EVAMIST
ELIDEL	pimecrolimus, tacrolimus, EUCRISA
ELMIRON	Consult doctor
EMEND	aprepitant
ENLITE CONTINUOUS GLUCOSE MONITORING SYSTEM	DEXCOM CONTINUOUS GLUCOSE MONITORING SYSTEM
ENTYVIO (For Crohn's Disease Only)	REMICADE, STELARA INTRAVENOUS
ENVARUSUS XR	tacrolimus
EPIVIR HBV	entecavir, lamivudine, tenofovir disoproxil fumarate, BARACLUDE SOLUTION, VEMPLIDY
EPOGEN	ARANESP, RETACRIT
ergotamine-caffeine	eletriptan, naratriptan, rizatriptan, sumatriptan, zolmitriptan, NURTEC ODT, UBRELVY
ERTACZO	ciclopirox, clotrimazole, econazole, ketoconazole cream 2%, oxiconazole (except NDCs^ 00168035830, 51672135902)
ERYPED	erythromycins
ESBRIET	irfenidone, OFEV
estradiol vaginal tablet	estradiol vaginal cream, IMVEXXY, VAGIFEM
ESTRING	estradiol vaginal cream, IMVEXXY, VAGIFEM
ESTROGEL	estradiol, DIVIGEL, EVAMIST
EVEKEO	dexmethylphenidate, dextroamphetamine, methylphenidate
EVERSENSE CONTINUOUS GLUCOSE MONITORING SYSTEM	DEXCOM CONTINUOUS GLUCOSE MONITORING SYSTEM
EXFORGE	amlodipine-olmesartan, amlodipine-telmisartan, amlodipine-valsartan
EXFORGE HCT	amlodipine-valsartan-hydrochlorothiazide, olmesartan-amlodipine-hydrochlorothiazide
EXJADE	deferasirox, deferiprone, deferoxamine
EXTAVIA	dimethyl fumarate delayed-rel, fingolimod, glatiramer, Glatopa, teriflunomide, BETASERON, COPAXONE 40 MG/ML, KESIMPTA, MAYZENT, REBIF, TYSABRI, VUMERITY, ZEPOSIA
FABIOR	adapalene (except adapalene pad), adapalene-benzoyl peroxide, benzoyl peroxide, clindamycin gel (except NDC* 68682046275), clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, DIFFERIN 1% gel, ONEXTON
FARXIGA	JARDIANCE
FANAPT	aripiprazole, asenapine, clozapine, lurasidone, olanzapine, quetiapine, quetiapine ext-rel, risperidone, ziprasidone, VRAYLAR
FEIBA	NOVOSEVEN RT, SEVENFACT
FEMHRT LOW DOSE	estradiol-norethindrone, BIJUVA
FEMRING	estradiol, IMVEXXY, VAGIFEM

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Advanced Control Plan - Aetna Formulary Exclusions Drug List (1/2025)

Excluded drug name(s)	Preferred option(s)*
fenofibrate capsule 50 mg, 130 mg; fenofibrate tablet 40 mg, 120 mg	<i>fenofibrate (except fenofibrate capsule 50 mg, 130 mg; fenofibrate tablet 40 mg, 120 mg), fenofibric acid delayed-rel</i>
FENOGLIDE TABLET 120 MG	<i>fenofibrate (except fenofibrate capsule 50 mg, 130 mg; fenofibrate tablet 40 mg, 120 mg), fenofibric acid delayed-rel</i>
fenoprofen, FENOPROFEN CAPSULE	<i>diclofenac sodium, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)</i>
FENTORA	<i>fentanyl transmucosal</i>
FERRIPROX	<i>deferasirox, deferiprone, deferoxamine</i>
FETZIMA	<i>desvenlafaxine ext-rel, duloxetine, venlafaxine, venlafaxine ext-rel capsule</i>
Fexmid	<i>carisoprodol 350 mg, chlorzoxazone 500 mg (except NDC ^ 73007001303), cyclobenzaprine (except cyclobenzaprine tablet 7.5 mg), metaxalone 800 mg, methocarbamol (except NDCs ^ 69036091010, 69036093090, 70868090190)</i>
FINACEA GEL	<i>azelaic acid gel, metronidazole, FINACEA FOAM</i>
FIORICET CAPSULE	<i>diclofenac sodium, ibuprofen, naproxen (except naproxen CR or naproxen suspension)</i>
FLAREX	<i>dexamethasone, difluprednate, loteprednol suspension, prednisolone acetate 1%</i>
FLECTOR	<i>diclofenac sodium, diclofenac sodium solution, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)</i>
FLOVENT DISKUS, FLOVENT HFA	<i>ARNUITY ELLIPTA, QVAR REDIHALER</i>
flucytosine capsule 500 mg	<i>fluconazole</i>
fluocinonide cream 0.1%	<i>clobetasol cream, clobetasol foam (except clobetasol emollient foam), clobetasol gel, clobetasol lotion, clobetasol ointment, halobetasol cream, halobetasol ointment</i>
FLUOROPLEX	<i>fluorouracil cream 5%, fluorouracil solution, imiquimod</i>
fluorouracil cream 0.5%	<i>fluorouracil cream 5%, fluorouracil solution, imiquimod</i>
fluoxetine tablet 60 mg, FLUOXETINE 60 MG	<i>citalopram, escitalopram, fluoxetine (except fluoxetine tablet 60 mg, fluoxetine tablet [generics for SARAFEM]), paroxetine HCl (except paroxetine HCl oral susp), paroxetine HCl ext-rel (except NDC* 60505367503), sertraline</i>
fluoxetine tablet (generics for SARAFEM only)	<i>fluoxetine (except fluoxetine tablet 60 mg, fluoxetine tablet [generics for SARAFEM]), paroxetine HCl ext-rel (except NDC ^ 60505367503), sertraline</i>
flurandrenolide cream, flurandrenolide lotion	<i>desonide (except desonide gel), hydrocortisone</i>
flurandrenolide ointment	<i>hydrocortisone butyrate cream, hydrocortisone butyrate ointment, hydrocortisone butyrate solution, mometasone, triamcinolone cream, triamcinolone lotion, triamcinolone ointment (except triamcinolone ointment 0.05%)</i>
fluticasone propionate HFA	<i>ARNUITY ELLIPTA, QVAR REDIHALER</i>
FML FORTE, FML LIQUIFILM, FML S.O.P.	<i>dexamethasone, difluprednate, loteprednol suspension, prednisolone acetate 1%</i>
FOCALIN XR	<i>amphetamine-dextroamphetamine mixed salts ext-rel, dexamethylphenidate ext-rel, dextroamphetamine ext-rel, methylphenidate ext-rel, AZSTARYS</i>
FOLLISTIM AQ	<i>GONAL-F[†]</i>
FORTEO	<i>teriparatide, TYMLOS</i>
FORTAMET	<i>metformin, metformin ext-rel (except generics for FORTAMET and GLUMETZA)</i>
FOSRENOL	<i>calcium acetate, sevelamer carbonate, PHOSLYRA, VELPHORO</i>
FRAGMIN	<i>enoxaparin</i>
FREESTYLE LIBRE CONTINUOUS GLUCOSE MONITORING SYSTEM	<i>DEXCOM CONTINUOUS GLUCOSE MONITORING SYSTEM</i>

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Excluded drug name(s)	Preferred option(s)*
FREESTYLE LIQUID CONTROL⁷	ACCU-CHEK AVIVA LIQUID, ACCU-CHEK GUIDE CONTROL LEVEL1/LEVEL2 LIQUID, ACCU-CHEK SMARTVIEW CONTROL LIQUID
FREESTYLE STRIPS AND KITS⁵	ACCU-CHEK AVIVA PLUS STRIPS AND KITS ² , ACCU-CHEK COMPACT PLUS STRIPS AND KITS ² , ACCU-CHEK GUIDE STRIPS AND KITS ² , ACCU-CHEK SMARTVIEW STRIPS AND KITS ² , ONETOUCH ULTRA STRIPS AND KITS ² , ONETOUCH VERIO STRIPS AND KITS ²
FULPHILA	FYLNETRA, NYVEPRIA
fyremadel	CETROTIDE+,GANIRELIX ACETATE
GAMMAGARD	CUTAQUIG
ganirelix acetate	CETROTIDE+,GANIRELIX ACETATE
GELNIQUE	<i>darifenacin ext-rel, oxybutynin ext-rel, solifenacin, tolterodine, tolterodine ext-rel, trospium, trospium ext-rel, MYRBETRIQ</i>
GEL-ONE	DUROLANE, EUFLEXXA, GELSYN-3, SUPARTZ FX
GENOTROPIN	NORDITROPIN, SOGROYA
GEODON CAPSULE	<i>aripiprazole, asenapine, clozapine, lurasidone, olanzapine, quetiapine, quetiapine ext-rel, risperidone, ziprasidone, VRAYLAR</i>
GEODON INTRAMUSCULAR	<i>haloperidol, ziprasidone</i>
GILENYA	<i>dimethyl fumarate delayed-rel, fingolimod, glatiramer, Glatopa, teriflunomide, BETASERON, COPAXONE 40 MG/ML, KESIMPTA, MAYZENT, NORDITROPIN, REBIF, SOGROYA, TYSABRI, VUMERITY, ZEPOSIA</i>
GLASSIA	PROLASTIN-C
GLEEVEC	<i>dasatinib, imatinib mesylate, BOSULIF, SPRYCEL</i>
GLUMETZA	<i>metformin, metformin ext-rel</i> (except generics for FORTAMET and GLUMETZA)
GLYCOPYRROLATE TABLET 1.5 MG	<i>dicyclomine</i>
GOLYTELY	<i>peg 3350-electrolytes</i> (except generics for MOVIPREP), CLENPIQ
GRANIX	NIVESTYM
GUARDIAN CONNECT CONTINUOUS GLUCOSE MONITORING SYSTEM	DEXCOM CONTINUOUS GLUCOSE MONITORING SYSTEM
GUARDIAN REAL-TIME CONTINUOUS GLUCOSE MONITORING SYSTEM	DEXCOM CONTINUOUS GLUCOSE MONITORING SYSTEM
halcinonide cream	<i>desoximetasone</i> (except <i>desoximetasone ointment 0.05%</i>), <i>fluocinonide</i> (except <i>fluocinonide cream 0.1%</i>), BRYHALI
HALOG	<i>desoximetasone</i> (except <i>desoximetasone ointment 0.05%</i>), <i>fluocinonide</i> (except <i>fluocinonide cream 0.1%</i>), BRYHALI
HEPSERA	<i>entecavir, lamivudine, tenofovir disoproxil fumarate, BARACLUDE SOLUTION, VEMLIDY</i>
HORIZANT	<i>gabapentin, pregabalin, GRALISE</i>
HUMALOG	FIASP**, NOVOLOG
HUMALOG MIX 50/50	NOVOLOG MIX 70/30
HUMALOG MIX 75/25	NOVOLOG MIX 70/30
HUMULIN 70/30	NOVOLIN 70/30
HUMULIN N	NOVOLIN N
HUMULIN R	<i>NOVOLIN R</i>
HYALGAN	DUROLANE, EUFLEXXA, GELSYN-3, SUPARTZ FX

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Advanced Control Plan - Aetna Formulary Exclusions Drug List (1/2025)

Excluded drug name(s)	Preferred option(s)*
hydrocortisone butyrate lipophilic cream 0.1%	hydrocortisone butyrate cream, hydrocortisone butyrate ointment, hydrocortisone butyrate solution, mometasone, triamcinolone cream, triamcinolone lotion, triamcinolone ointment (except triamcinolone ointment 0.05%)
hydrocortisone butyrate lotion	hydrocortisone butyrate cream, hydrocortisone butyrate ointment, hydrocortisone butyrate solution, mometasone, triamcinolone cream, triamcinolone lotion, triamcinolone ointment (except triamcinolone ointment 0.05%)
HYSINGLA ER	fentanyl transdermal, hydrocodone ext-rel, methadone, morphine ext-rel, NUCYNTA ER, XTAMPZA ER
HYZAAR	candesartan-hydrochlorothiazide, irbesartan-hydrochlorothiazide, losartan-hydrochlorothiazide, olmesartan-hydrochlorothiazide, telmisartan-hydrochlorothiazide, valsartan-hydrochlorothiazide
ibuprofen/famotidine	ibuprofen AND famotidine
ICLUSIG	dasatinib, imatinib mesylate, BOSULIF, SPRYCEL
icosapent ethyl	omega-3 acid ethyl esters, VASCEPA
ILEVRO	bromfenac, diclofenac, ketorolac
ILUMYA	REMICADE
INCRUSE ELLIPTA	SPIRIVA
INDERAL LA, INDERAL XL	atenolol, carvedilol, carvedilol phosphate ext-rel, metoprolol succinate ext-rel, metoprolol tartrate, nadolol, propranolol, propranolol ext-rel
INDOCIN	diclofenac sodium, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)
indomethacin capsule 20 mg	diclofenac sodium, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)
indomethacin supp	diclofenac sodium, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)
INFLECTRA	REMICADE, SIMPONI ARIA, STELARA INTRAVENOUS
INNOPRAN XL	atenolol, carvedilol, carvedilol phosphate ext-rel, metoprolol succinate ext-rel, metoprolol tartrate, nadolol, propranolol, propranolol ext-rel
INTRAROSA	estradiol vaginal cream, IMVEXXY, VAGIFEM
INTUNIV	amphetamine-dextroamphetamine mixed salts ext-rel, atomoxetine, dexamethylphenidate ext-rel, dextroamphetamine ext-rel, guanfacine ext-rel, methylphenidate ext-rel, AZSTARYS
INVELTYS	dexamethasone, difluprednate, loteprednol suspension, prednisolone acetate 1%
INVIRASE	atazanavir, lopinavir-ritonavir, EVOTAZ, PREZCOBIX, PREZISTA
INVOKAMET, INVOKAMET XR	SYNJARDY, SYNJARDY XR, XIGDUO XR
INVOKANA	FARXIGA, JARDIANCE
ISORDIL	isosorbide dinitrate (except isosorbide dinitrate 40 mg), isosorbide mononitrate
isosorbide dinitrate 40 mg tab	isosorbide dinitrate (except isosorbide dinitrate 40 mg), isosorbide mononitrate
isotretinoin capsule 10mg, 25 mg, 35 mg	isotretinoin capsule 20 mg, 30 mg, 40 mg
ISTALOL	timolol maleate solution
JADENU	deferasirox, deferiprone, deferoxamine
JENTADUETO, JENTADUETO XR	JANUMET, JANUMET XR
JUBLIA	terbinafine tablet
KAPVAY	amphetamine-dextroamphetamine mixed salts ext-rel, atomoxetine, dexamethylphenidate ext-rel, dextroamphetamine ext-rel, guanfacine ext-rel, methylphenidate ext-rel, AZSTARYS

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Advanced Control Plan - Aetna Formulary Exclusions Drug List (1/2025)

Excluded drug name(s)	Preferred option(s)*
KAZANO	JANUMET, JANUMET XR
KENALOG	hydrocortisone butyrate cream, hydrocortisone butyrate ointment, hydrocortisone butyrate solution, mometasone, triamcinolone cream, triamcinolone lotion, triamcinolone ointment (except triamcinolone ointment 0.05%)
KEPPRA, KEPPRA XR	carbamazepine, carbamazepine ext-rel, divalproex sodium, divalproex sodium ext-rel, felbamate, gabapentin, lacosamide, lamotrigine tablets and chewable tablets, lamotrigine ext-rel, levetiracetam, levetiracetam ext-rel, oxcarbazepine, phenobarbital, phenytoin, phenytoin sodium extended, pregabalin, primidone, tiagabine, topiramate, topiramate ext-rel (except sprinkles), valproic acid, zonisamide, FYCOMPA, OXTELLAR XR, XCOPRI
KERYDIN	terbinafine tablet
KETO-DIASTIX	Consult doctor
KETOSTIX	Consult doctor
ketoconazole foam 2%	ketoconazole shampoo 2%, selenium sulfide lotion 2.5%
Ketodan	ketoconazole shampoo 2%, selenium sulfide lotion 2.5%
ketoprofen capsule 25 mg	diclofenac sodium, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)
ketoprofen ext-rel capsule	diclofenac sodium, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)
KOMBIGLYZE XR	JANUMET, JANUMET XR
KUVAN	sapropterin
LACRISERT	XIIDRA, RESTASIS SINGLE DOSE
LACTULOSE PAK	lactulose solution
LANOXIN TABLET (125 MCG and 250 MCG only)	digoxin
lansoprazole delayed-rel orally disintegrating tablet	dexlansoprazole delayed-rel, esomeprazole delayed-rel, lansoprazole delayed-rel capsule, omeprazole delayed-rel, pantoprazole delayed-rel tablet
lanthanum carbonate	calcium acetate, sevelamer carbonate, PHOSLYRA, VELPHORO
LANTUS	BASAGLAR
LATUDA	aripiprazole, asenapine, clozapine, lurasidone, olanzapine, quetiapine, quetiapine ext-rel, risperidone, ziprasidone, VRAYLAR
LAZANDA	fentanyl transmucosal
LESCOL XL	atorvastatin, ezetimibe-simvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin
LETAIRIS	ambrisentan, bosentan, OPSUMIT
LEVEMIR	BASAGLAR
levorphanol	fentanyl transdermal, hydrocodone ext-rel, methadone, morphine ext-rel, NUCYNTA ER, XTAMPZA ER
LEXAPRO	citalopram, escitalopram, fluoxetine (except fluoxetine tablet 60 mg, fluoxetine tablet [generics for SARAFEM]), paroxetine HCl (except paroxetine HCl oral susp), paroxetine HCl ext-rel (except NDC* 60505367503), sertraline
LEXIVA	atazanavir, lopinavir-ritonavir, EVOTAZ, PREZCOBIX, PREZISTA
LIALDA	balsalazide, mesalamine delayed-rel (except mesalamine delayed-rel tablet 800 mg), mesalamine ext-rel, sulfasalazine, sulfasalazine delayed-rel, ASACOL HD, PENTASA
LIBRAX	dicyclomine
LIDOCAINE-TETRACAINE CREAM (NDC^ 71800063115 only)	lidocaine-prilocaine
LILETTA	KYLEENA, MIRENA, SKYLA

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Advanced Control Plan - Aetna Formulary Exclusions Drug List (1/2025)

Excluded drug name(s)	Preferred option(s)*
LIPITOR	atorvastatin, ezetimibe-simvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin
LITHOSTAT	Consult doctor
LIVALO	atorvastatin, ezetimibe-simvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin
Lorzone	carisoprodol 350 mg, chlorzoxazone 500 mg (except NDC^ 73007001303), cyclobenzaprine (except cyclobenzaprine tablet 7.5 mg), metaxalone 800 mg, methocarbamol (except NDCs^ 69036091010, 69036093090, 70868090190)
LOTEMAX, LOTEMAX SM	dexamethasone, difluprednate, loteprednol suspension, prednisolone acetate 1%
loteprednol gel	dexamethasone, difluprednate, loteprednol suspension, prednisolone acetate 1%
loteprednol susp (generic for ALREX)	azelastine, cromolyn sodium, loteprednol suspension (except generic for ALREX), olopatadine
luliconazole	ciclopirox, clotrimazole, econazole, ketoconazole cream 2%, oxiconazole (except NDCs^ 00168035830, 51672135902)
LUMIGAN	bimatoprost, latanoprost, tafluprost, travoprost
LUNESTA	doxepin, ramelteon, temazepam, zolpidem, zolpidem ext-rel
LUPRON DEPOT	ELIGARD, FIRMAGON, ORIAHNN, ORILISSA
LUPRON DEPOT-PED	TRIPTODUR
LUXIQ	hydrocortisone butyrate cream, hydrocortisone butyrate ointment, hydrocortisone butyrate solution, mometasone, triamcinolone cream, triamcinolone lotion, triamcinolone ointment (except triamcinolone ointment 0.05%)
LUZU	ciclopirox, clotrimazole, econazole, ketoconazole cream 2%, oxiconazole (except NDCs^ 00168035830, 51672135902)
LYRICA	duloxetine, pregabalin
MACRODANTIN	nitrofurantoin (except NDCs^ 16571074024)
Matzim LA	diltiazem ext-rel (except generics for CARDIZEM LA)
MAVYRET	EPCLUSA (genotypes 1, 2, 3, 4, 5, 6), HARVONI (genotypes 1, 4, 5, 6), VOSEVI ¹
MAXALT, MAXALT-MLT	eletriptan, naratriptan, rizatriptan, sumatriptan, zolmitriptan, NURTEC ODT, UBRELVY
MAXIDEX	dexamethasone, difluprednate, loteprednol suspension, prednisolone acetate 1%
mefenamic acid (NDC^ 69336012830 only)	diclofenac sodium, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)
meloxicam capsule	diclofenac sodium, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)
MEDISENSE LIQUID GLUCOSE-KETONE [†]	ACCU-CHEK AVIVA LIQUID, ACCU-CHEK GUIDE CONTROL LEVEL1/LEVEL2 LIQUID, ACCU-CHEK SMARTVIEW CONTROL LIQUID
MENEST	estradiol
MENOSTAR	estradiol
meperidine	hydromorphone, morphine, oxycodone**, NUCYNTA
MESTINON	pyridostigmine, pyridostigmine ext-rel
metaxalone 400 mg tab	carisoprodol 350 mg, chlorzoxazone 500 mg (except NDC^ 73007001303), cyclobenzaprine (except cyclobenzaprine tablet 7.5 mg), metaxalone 800 mg, methocarbamol (except NDCs^ 69036091010, 69036093090, 70868090190)
metformin ext-rel (generics for FORTAMET and GLUMETZA only)	metformin, metformin ext-rel (except generics for FORTAMET and GLUMETZA)

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Advanced Control Plan - Aetna Formulary Exclusions Drug List (1/2025)

Excluded drug name(s)	Preferred option(s)*
methocarbamol 500 mg (NDC^ 69036091010 only), methocarbamol 750 mg (NDCs^ 69036093090, 70868090190 only)	carisoprodol 350 mg, chlorzoxazone 500 mg (except NDC^ 73007001303), cyclobenzaprine (except cyclobenzaprine tablet 7.5 mg), metaxalone 800 mg, methocarbamol (except NDCs^ 69036091010, 69036093090, 70868090190)
methylphenidate ext-rel tab (generics for RELEXXI)	amphetamine-dextroamphetamine mixed salts ext-rel, dexamethylphenidate ext-rel, dextroamphetamine ext-rel, methylphenidate ext-rel, AZSTARYS
methylphenidate patch	amphetamine-dextroamphetamine mixed salts ext-rel, dexamethylphenidate ext-rel, dextroamphetamine ext-rel, methylphenidate ext-rel, AZSTARYS
METROGEL	azelaic acid gel, metronidazole, FINACEA FOAM
MICARDIS, MICARDIS HCT	candesartan, candesartan-hydrochlorothiazide, irbesartan, irbesartan-hydrochlorothiazide, losartan, losartan-hydrochlorothiazide, olmesartan, olmesartan-hydrochlorothiazide, telmisartan, telmisartan-hydrochlorothiazide, valsartan, valsartan-hydrochlorothiazide
Migergot	eletriptan, naratriptan, rizatriptan, sumatriptan, zolmitriptan, NURTEC ODT, UBRELVY
MIGRANAL	eletriptan, naratriptan, rizatriptan, sumatriptan, zolmitriptan, NURTEC ODT, UBRELVY
MILLIPRED	dexamethasone, hydrocortisone, methylprednisolone, prednisolone solution (except prednisolone solution 10 mg/5 mL, 20 mg/5 mL), prednisone
MINASTRIN 24 FE	ethinyl estradiol-drospirenone, ethinyl estradiol-drospirenone-levomefolate, ethinyl estradiol-levonorgestrel, ethinyl estradiol-norethindrone acetate-iron, ethinyl estradiol-norgestimate, LO LOESTRIN FE
MINIVELLE	estradiol, DIVIGEL, EVAMIST
minocycline ext-rel	doxycycline hyclate capsule, doxycycline hyclate tablet (except doxycycline hyclate tablet 50 mg, 75 mg, 150 mg), minocycline, tetracycline
MINOLIRA	doxycycline hyclate capsule, doxycycline hyclate tablet (except doxycycline hyclate tablet 50 mg, 75 mg, 150 mg), minocycline, tetracycline
MIRVASO	azelaic acid gel, metronidazole, FINACEA FOAM
Mondoxyme NL capsule 75 mg	doxycycline hyclate capsule, doxycycline hyclate tablet (except doxycycline hyclate tablet 50 mg, 75 mg, 150 mg), minocycline, tetracycline
MONOVISC	DUROLANE, EUFLEXXA, GELSYN-3, SUPARTZ FX
MOTEGRITY	lubiprostone, LINZESS
MOVIPREP	peg 3350-electrolytes (except generics for MOVIPREP), CLENPIQ
MULTISTIX TEST STRIPS	Consult doctor
mupirocin cream	gentamicin, mupirocin ointment
MYDAYIS	amphetamine-dextroamphetamine mixed salts ext-rel, dexamethylphenidate ext-rel, dextroamphetamine ext-rel, methylphenidate ext-rel, AZSTARYS
MYFORTIC	mycophenolate mofetil, mycophenolate sodium
MYTESI	diphenoxylate-atropine, loperamide
NAFTIN	ciclopirox, clotrimazole, econazole, ketoconazole cream 2%, oxiconazole (except NDCs^ 00168035830, 51672135902)
NAMENDA XR	memantine
NAPRELAN	diclofenac sodium, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)
naproxen CR	diclofenac sodium, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)
naproxen suspension	diclofenac sodium, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)

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Excluded drug name(s)	Preferred option(s)*
naproxen-esomeprazole	<i>diclofenac sodium, ibuprofen, meloxicam tablet or naproxen (except naproxen CR or naproxen suspension) WITH esomeprazole delayed-rel, lansoprazole delayed-rel, omeprazole delayed-rel, pantoprazole delayed-rel tablet or DEXILANT</i>
NASCOBAL	<i>cyanocobalamin inj</i>
NATAZIA	<i>ethinyl estradiol-drospirenone, ethinyl estradiol-drospirenone-levomefolate, ethinyl estradiol-levonorgestrel, ethinyl estradiol-norethindrone acetate-iron, ethinyl estradiol-norgestimate, LO LOESTRIN FE</i>
nebivolol	<i>atenolol, carvedilol, carvedilol phosphate ext-rel, metoprolol succinate ext-rel, metoprolol tartrate, nadolol, propranolol, propranolol ext-rel</i>
NEO-SYNALAR	<i>desonide (except desonide gel) or hydrocortisone WITH gentamicin</i>
NESINA	<i>JANUVIA</i>
NEULASTA	<i>FYLNETRA, NYVEPRIA</i>
NEULASTA ONPRO	<i>FYLNETRA, NYVEPRIA</i>
NEUPOGEN	<i>NIVESTYM</i>
NEVANAC	<i>bromfenac, diclofenac, ketorolac</i>
NEXIUM	<i>dexlansoprazole delayed-rel, esomeprazole delayed-rel, lansoprazole delayed-rel capsule, omeprazole delayed-rel, pantoprazole delayed-rel tablet</i>
niacin tablet 500 mg	<i>niacin ext-rel</i>
Niacor	<i>niacin ext-rel</i>
NILANDRON	<i>abiraterone, bicalutamide, ERLEADA, XTANDI, YONSA</i>
nitrofurantoin (NDC^ 70408023932 only)	<i>nitrofurantoin (except NDCs^ 16571074024)</i>
NITROMIST	<i>nitroglycerin lingual spray, nitroglycerin sublingual</i>
Nolix	<i>desonide (except desonide gel), hydrocortisone</i>
NORGESIC FORTE	<i>carisoprodol 350 mg, chlorzoxazone 500 mg (except NDC^ 73007001303), cyclobenzaprine (except cyclobenzaprine tablet 7.5 mg), metaxalone 800 mg, methocarbamol (except NDCs^ 69036091010, 69036093090, 70868090190)</i>
NORITATE	<i>azelaic acid gel, metronidazole, FINACEA FOAM</i>
NORPACE	<i>disopyramide</i>
NORVASC	<i>amlodipine</i>
NOURIANZ	<i>amantadine, entacapone, pramipexole, pramipexole ext-rel, rasagiline, ropinirole, ropinirole ext-rel, selegiline, NEUPRO</i>
NOVO NORDISK NEEDLES⁴	<i>BD ULTRAFINE NEEDLES</i>
NOXAFIL	<i>fluconazole, itraconazole</i>
NP THYROID	<i>levothyroxine, liothyronine</i>
NUTROPIN AQ	<i>NORDITROPIN</i>
NUVARING	<i>ethinyl estradiol-etonogestrel, ANNOVERA</i>
NUVESSA	<i>clindamycin, metronidazole</i>
NUVIGIL	<i>armodafinil, modafinil, SUNOSI</i>
octreotide (generics for SANDOSTATIN LAR only)	<i>SOMATULINE DEPOT</i>
OLUX-E	<i>clobetasol cream, clobetasol foam (except clobetasol emollient foam), clobetasol gel, clobetasol lotion, clobetasol ointment, halobetasol cream, halobetasol ointment</i>
omeprazole-sodium bicarbonate	<i>dexlansoprazole delayed-rel, esomeprazole delayed-rel, lansoprazole delayed-rel capsule, omeprazole delayed-rel, pantoprazole delayed-rel tablet</i>

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Advanced Control Plan - Aetna Formulary Exclusions Drug List (1/2025)

Excluded drug name(s)	Preferred option(s)*
OMNARIS	azelastine-fluticasone, flunisolide, fluticasone, mometasone
OMNITROPE	NORDITROPIN
ONFI	clobazam, clonazepam, felbamate, lamotrigine tablets and chewable tablets, rufinamide, topiramate, topiramate ext-rel (except sprinkles)
ONGLYZA	JANUVIA
ORENCIA INTRAVENOUS	REMICADE, SIMPONI ARIA
orphenadrine-aspirin-caffeine	carisoprodol 350 mg, chlorzoxazone 500 mg (except NDC^ 73007001303), cyclobenzaprine (except cyclobenzaprine tablet 7.5 mg), metaxalone 800 mg, methocarbamol (except NDCs^ 69036091010, 69036093090, 70868090190)
Orphengesic Forte	carisoprodol 350 mg, chlorzoxazone 500 mg (except NDC^ 73007001303), cyclobenzaprine (except cyclobenzaprine tablet 7.5 mg), metaxalone 800 mg, methocarbamol (except NDCs^ 69036091010, 69036093090, 70868090190)
ORTHOVISC	DUROLANE, EUFLEXXA, GELSYN-3, SUPARTZ FX
OSENI	JANUMET, JANUMET XR; JANUVIA WITH pioglitazone
OSMOPREP	peg 3350-electrolytes, CLENPIQ
OSPHENA	estradiol
OTOVEL	ciprofloxacin-dexamethasone, ofloxacin otic
OTREXUP	methotrexate, TREXALL
OWEN MUMFORD NEEDLES*	BD ULTRAFINE NEEDLES
oxiconazole (NDCs^ 00168035830, 51672135902 only)	ciclopirox, clotrimazole, econazole, ketoconazole cream 2%, oxiconazole (except NDCs^ 00168035830, 51672135902)
OXISTAT	ciclopirox, clotrimazole, econazole, ketoconazole cream 2%, oxiconazole (except NDCs^ 00168035830, 51672135902)
OXYCONTIN	fentanyl transdermal, hydrocodone ext-rel, methadone, morphine ext-rel, NUCYNTA ER, XTAMPZA ER
oxymorphone ext-rel	fentanyl transdermal, hydrocodone ext-rel, methadone, morphine ext-rel, NUCYNTA ER, XTAMPZA ER
PANCREAZE	CREON, VIOKACE, ZENPEP
pantoprazole delayed-rel suspension	dexlansoprazole delayed-rel, esomeprazole delayed-rel, lansoprazole delayed-rel capsule, omeprazole delayed-rel, pantoprazole delayed-rel tablet
paroxetine HCl ext-rel (NDC* 60505367503 only)	citalopram, escitalopram, fluoxetine (except fluoxetine tablet 60 mg, fluoxetine tablet [generics for SARAFEM]), paroxetine HCl (except paroxetine HCl oral susp), paroxetine HCl ext-rel (except NDC* 60505367503), sertraline
paroxetine HCl oral susp	citalopram, escitalopram, fluoxetine (except fluoxetine tablet 60 mg, fluoxetine tablet [generics for SARAFEM]), paroxetine HCl (except paroxetine HCl oral susp), paroxetine HCl ext-rel (except NDC* 60505367503), sertraline
paroxetine mesylate capsule 7.5 mg	paroxetine HCl
PAXIL, PAXIL CR	citalopram, escitalopram, fluoxetine (except fluoxetine tablet 60 mg, fluoxetine tablet [generics for SARAFEM]), paroxetine HCl (except paroxetine HCl oral susp), paroxetine HCl ext-rel (except NDC* 60505367503), sertraline
PEGASYS	Consult doctor
PENNSAID	diclofenac sodium, diclofenac sodium solution, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)
PERCOCET	hydrocodone-acetaminophen, hydromorphone, morphine, oxycodone-acetaminophen, NUCYNTA
PERRIGO NEEDLES 4	BD ULTRAFINE NEEDLES

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Excluded drug name(s)	Preferred option(s)*
PERTZYE	CREON, VIOKACE, ZENPEP
PEXEVA	<i>citalopram, escitalopram, fluoxetine (except fluoxetine tablet 60 mg, fluoxetine tablet [generics for SARAFEM]), paroxetine HCl (except paroxetine HCl oral susp), paroxetine HCl ext-rel (except NDC* 60505367503), sertraline</i>
PLAVIX	<i>clopidogrel, dipyridamole ext-rel-aspirin, prasugrel, BRILINTA</i>
PLENVU	<i>peg 3350-electrolytes (except generics for MOVIPREP), CLENPIQ</i>
<i>posaconazole delayed-rel tablet</i>	<i>fluconazole, itraconazole</i>
PRADAXA	<i>warfarin, ELIQUIS, XARELTO</i>
PRALUENT	REPATHA
PRECISION LIQUID GLUCOSE/KETONE ⁷	ACCU-CHEK AVIVA LIQUID, ACCU-CHEK GUIDE CONTROL LEVEL1/LEVEL2 LIQUID, ACCU-CHEK SMARTVIEW CONTROL LIQUID
PRECISION XTRA STRIPS AND KITS ⁵	ACCU-CHEK AVIVA PLUS STRIPS AND KITS ² , ACCU-CHEK COMPACT PLUS STRIPS AND KITS ² , ACCU-CHEK GUIDE STRIPS AND KITS ² , ACCU-CHEK SMARTVIEW STRIPS AND KITS ² , ONETOUCH ULTRA STRIPS AND KITS ² , ONETOUCH VERIO STRIPS AND KITS ²
PRED FORTE, PRED MILD	<i>dexamethasone, difluprednate, loteprednol suspension, prednisolone acetate 1%</i>
PREFEST	<i>estradiol-norethindrone, BIJUVA</i>
PREGNYL	OIDREL [†]
PREMARIN	<i>estradiol</i>
PREMARIN CREAM	<i>estradiol vaginal cream, IMVEXXY, VAGIFEM</i>
PREMPHASE	<i>estradiol-norethindrone, BIJUVA</i>
PREMPRO	<i>estradiol-norethindrone, BIJUVA</i>
PRENATAL PLUS 6	<i>prenatal vitamins, CITRANATAL</i>
PREVACID	<i>dexlansoprazole delayed-rel, esomeprazole delayed-rel, lansoprazole delayed-rel capsule, omeprazole delayed-rel, pantoprazole delayed-rel tablet</i>
PRIOSEC	<i>dexlansoprazole delayed-rel, esomeprazole delayed-rel, lansoprazole delayed-rel capsule, omeprazole delayed-rel, pantoprazole delayed-rel tablet</i>
PRISTIQ	<i>desvenlafaxine ext-rel, duloxetine, venlafaxine, venlafaxine ext-rel capsule</i>
PROAIR HFA, PROAIR RESPICLICK	<i>albuterol sulfate CFC-free aerosol (except NDCs* 00093317431, 66993001968), levalbuterol tartrate CFC-free aerosol</i>
PROCRT	ARANESP, RETACRIT
PROCTOCORT	<i>hydrocortisone enema, mesalamine suppository, mesalamine suspension, CORTIFOAM</i>
PROCYSBI	CYSTAGON
PROLENSA	<i>bromfenac, diclofenac, ketorolac</i>
PROMACTA	DOPTELET, TAVALISSE
PROMETRIUM	<i>medroxyprogesterone; progesterone, micronized</i>
PROTONIX	<i>dexlansoprazole delayed-rel, esomeprazole delayed-rel, lansoprazole delayed-rel capsule, omeprazole delayed-rel, pantoprazole delayed-rel tablet</i>
PROVENTIL HFA	<i>albuterol sulfate CFC-free aerosol (except NDC* 66993001968), levalbuterol tartrate CFC-free aerosol</i>
PROVIGIL	<i>armodafinil, modafinil, SUNOSI</i>
PROZAC	<i>citalopram, escitalopram, fluoxetine (except fluoxetine tablet 60 mg, fluoxetine tablet [generics for SARAFEM]), paroxetine HCl (except paroxetine HCl oral susp), paroxetine HCl ext-rel (except NDC* 60505367503), sertraline</i>
PSORCON	<i>desoximetasone (except desoximetasone ointment 0.05%), fluocinonide (except fluocinonide cream 0.1%), BRYHALI</i>

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Excluded drug name(s)	Preferred option(s)*
PULMICORT FLEXHALER	ARNUITY ELLIPTA, QVAR REDIHALER
PULMICORT RESPULES	budesonide inhalation suspension, ARNUITY ELLIPTA, QVAR REDIHALER
QNASL	azelastine-fluticasone, flunisolide, fluticasone, mometasone
QTERN	GLYXAMBI
QUARTETTE	ethinyl estradiol-drospirenone, ethinyl estradiol-drospirenone-levomefolate, ethinyl estradiol-levonorgestrel, ethinyl estradiol-norethindrone acetate-iron, ethinyl estradiol-norgestimate, LO LOESTRIN FE
quazepam	doxepin, ramelteon, temazepam, zolpidem, zolpidem ext-rel
QUILLICHEW ER	amphetamine-dextroamphetamine mixed salts ext-rel, dexamethylphenidate ext-rel, dextroamphetamine ext-rel, methylphenidate ext-rel, AZSTARYS
QUILLIVANT XR	amphetamine-dextroamphetamine mixed salts ext-rel, dexamethylphenidate ext-rel, dextroamphetamine ext-rel, methylphenidate ext-rel, AZSTARYS
QVAR REDIHALER	ARNUITY ELLIPTA, ASMANEX HFA
RAPAFLO	alfuzosin ext-rel, doxazosin, silodosin, tamsulosin, terazosin
RASUVO	methotrexate, TREXALL
RAVICTI	sodium phenylbutyrate, PHEBURANE
RAYOS	dexamethasone, hydrocortisone, methylprednisolone, prednisolone solution (except prednisolone solution 10 mg/5 mL, 20 mg/5 mL), prednisone
RELEXXI	amphetamine-dextroamphetamine mixed salts ext-rel, dexamethylphenidate ext-rel, dextroamphetamine ext-rel, methylphenidate ext-rel, AZSTARYS
RELION INSULIN	NOVOLIN INSULIN
RELION TEST KETONE	Consult doctor
RELISTOR	lubiprostone, MOVANTIK, SYMPROIC
REMODULIN	treprostinil
RENFLEXIS	REMICADE, SIMPONI ARIA, STELARA INTRAVENOUS
REVATIO	sildenafil, tadalafil
REXULTI	aripiprazole, asenapine, clozapine, lurasidone, olanzapine, quetiapine, quetiapine ext-rel, risperidone, ziprasidone, VRAYLAR
RHOFADE	azelaic acid gel, metronidazole, FINACEA FOAM
RIOMET	metformin, metformin ext-rel (except generics for FORTAMET and GLUMETZA)
ROWASA	mesalamine suspension
ROZEREM	doxepin, ramelteon, temazepam, zolpidem, zolpidem ext-rel
RUBRACA	LYNPARZA, ZEJULA
RyClora	clemastine 2.68 mg, cyproheptadine, levocetirizine
RYTARY	carbidopa-levodopa, carbidopa-levodopa ext-rel
SABRIL	vigabatrin
SAIZEN	NORDITROPIN
SANDOSTATIN LAR	SOMATULINE DEPOT
saxagliptin	JANUVIA
saxagliptin-metformin hcl tab er	JANUMET, JANUMET XR

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Excluded drug name(s)	Preferred option(s)*
SEASONIQUE	ethinyl estradiol-drospirenone, ethinyl estradiol-drospirenone-levomefolate, ethinyl estradiol-levonorgestrel, ethinyl estradiol-norethindrone acetate-iron, ethinyl estradiol-norgestimate, LO LOESTRIN FE
SEREVENT	STRIVERDI RESPIMAT
SEROQUEL XR	aripiprazole, asenapine, clozapine, lurasidone, olanzapine, quetiapine, quetiapine ext-rel, risperidone, ziprasidone, VRAYLAR
SEYSARA	doxycycline hyclate capsule, doxycycline hyclate tablet (except doxycycline hyclate tablet 50 mg, 75 mg, 150 mg), minocycline, tetracycline
SFROWASA	mesalamine suspension
SIGNIFOR LAR	SOMATULINE DEPOT
SILENOR	doxepin, ramelteon, temazepam, zolpidem, zolpidem ext-rel
SINGULAIR	montelukast, zafirlukast
SITAVIG	oral acyclovir, valacyclovir
SOLODYN	doxycycline hyclate capsule, doxycycline hyclate tablet (except doxycycline hyclate tablet 50 mg, 75 mg, 150 mg), minocycline, tetracycline
SOLOSEC	clindamycin, metronidazole
SOMAVERT	SOMATULINE DEPOT
SOOLANTRA	azelaic acid gel, metronidazole, FINACEA FOAM
SORILUX	calcipotriene ointment, calcipotriene solution
SPORANOX CAPSULE	itraconazole, terbinafine tablet
SPORANOX SOLUTION	fluconazole
SPRIX	diclofenac sodium, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)
STENDRA	sildenafil, tadalafil, vardenafil
STRIBILD	efavirenz-emtricitabine-tenofovir disoproxil fumarate, efavirenz-lamivudine-tenofovir disoproxil fumarate, BIKTARVY, DOVATO, GENVOYA, ODEFSEY, SYMTUZA, TRIUMEQ
SUBOXONE	buprenorphine-naloxone sublingual, ZUBSOLV
SUBSYS	fentanyl transmucosal
sucralfate suspension	sucralfate tablet
sumatriptan-naproxen	diclofenac sodium, ibuprofen or naproxen (except naproxen CR or naproxen suspension) WITH eletriptan, naratriptan, rizatriptan, sumatriptan, zolmitriptan, NURTEC ODT, UBRELVY
SUPREP	peg 3350-electrolytes (except generics for MOVIPREP), CLENPIQ
SYMBICORT	budesonide-formoterol, fluticasone-salmeterol**, Breyna, Wixela Inhub, BREO ELLIPTA**, DULERA
SYNDROS	dronabinol
SYNVISC, SYNVISC-ONE	DUROLANE, EUFLEXXA, GELSYN-3, SUPARTZ FX
SYPRINE	trientine
TAKHZYRO	Consult doctor
TARGADOX	doxycycline hyclate capsule, doxycycline hyclate tablet (except doxycycline hyclate tablet 50 mg, 75 mg, 150 mg), minocycline, tetracycline
TASIGNA	dasatinib, imatinib mesylate, BOSULIF, SPRYCEL
tavaborole	terbinafine tablet
TAYTULLA	ethinyl estradiol-drospirenone, ethinyl estradiol-drospirenone-levomefolate, ethinyl estradiol-levonorgestrel, ethinyl estradiol-norethindrone acetate-iron, ethinyl estradiol-norgestimate, LO LOESTRIN FE

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Advanced Control Plan - Aetna Formulary Exclusions Drug List (1/2025)

Excluded drug name(s)	Preferred option(s)*
tazarotene gel	<i>adapalene (except adapalene pad), adapalene-benzoyl peroxide, benzoyl peroxide, clindamycin gel (except NDC* 68682046275), clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, DIFFERIN 1% gel, ONEXTON; calcipotriene ointment, calcipotriene solution</i>
TAZORAC	<i>adapalene (except adapalene pad), adapalene-benzoyl peroxide, benzoyl peroxide, clindamycin gel (except NDC* 68682046275), clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, DIFFERIN 1% gel, ONEXTON; calcipotriene ointment, calcipotriene solution</i>
TECFIDERA	<i>dimethyl fumarate delayed-rel, fingolimod, glatiramer, Glatopa, teriflunomide, BETASERON, COPAXONE 40 MG/ML, KESIMPTA, MAYZENT, REBIF, TYSABRI, VUMERITY, ZEPOSIA</i>
TESTIM	<i>testosterone gel (except authorized generics for TESTIM and VOGELXO), testosterone solution, ANDRODERM, NATESTO</i>
testosterone gel 1% (authorized generics for TESTIM and VOGELXO only)	<i>testosterone gel (except authorized generics for TESTIM and VOGELXO), testosterone solution, ANDRODERM, NATESTO</i>
THEO-24	<i>formoterol inhalation solution, ipratropium inhalation solution, SPIRIVA, STRIVERDI RESPIMAT, YUPELRI</i>
THIOLA, THIOLA EC	<i>tiopronin</i>
TIMOPTIC OCUDOSE	<i>timolol maleate solution (except NDCs* 50742028760 and 00187149825)</i>
TIROSINT	<i>levothyroxine</i>
TIVORBEX	<i>diclofenac sodium, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)</i>
TOBI, TOBI PODHALER	<i>tobramycin inhalation solution</i>
TOBRADEX	<i>neomycin-polymyxin B-bacitracin-hydrocortisone, neomycin-polymyxin B-dexamethasone, tobramycin-dexamethasone</i>
TOBRADEX ST	<i>neomycin-polymyxin B-bacitracin-hydrocortisone, neomycin-polymyxin B-dexamethasone, tobramycin-dexamethasone</i>
topiramate ext-rel capsule (generics for QUEDEXY XR only)	<i>carbamazepine, carbamazepine ext-rel, clobazam, clonazepam, divalproex sodium, divalproex sodium ext-rel, felbamate, gabapentin, lacosamide, lamotrigine tablets and chewable tablets, lamotrigine ext-rel, levetiracetam, levetiracetam ext-rel, oxcarbazepine, phenobarbital, phenytoin, phenytoin sodium extended, pregabalin, primidone, rufinamide, tiagabine, topiramate, topiramate ext-rel (except sprinkles), valproic acid, zonisamide, FYCOMPA, OXTELLAR XR, XCOPRI</i>
TOPROL-XL	<i>atenolol, carvedilol, carvedilol phosphate ext-rel, metoprolol succinate ext-rel, metoprolol tartrate, nadolol, propranolol, propranolol ext-rel</i>
TOUJEO	<i>TRESIBA</i>
Tovet	<i>clobetasol cream, clobetasol foam (except clobetasol emollient foam), clobetasol gel, clobetasol lotion, clobetasol ointment, halobetasol cream, halobetasol ointment</i>
TOVIAZ	<i>darifenacin ext-rel, oxybutynin ext-rel, solifenacin, tolterodine, tolterodine ext-rel, trospium, trospium ext-rel, MYRBETRIQ</i>
TRACLEER	<i>ambrisentan, bosentan, OPSUMIT</i>
TRADJENTA	<i>JANUVIA</i>
tramadol (NDC^ 52817019610 only), tramadol ext-rel capsule	<i>tramadol (except NDC^ 52817019610), tramadol ext-rel tablet</i>
TRANSDERM SCOP	<i>meclizine, scopolamine transdermal</i>
TRAVATAN Z	<i>bimatoprost, latanoprost, tafluprost, travoprost</i>
TRELSTAR MIXJECT	<i>ELIGARD, FIRMAGON</i>
TREXIMET	<i>diclofenac sodium, ibuprofen or naproxen (except naproxen CR or naproxen suspension) WITH eletriptan, naratriptan, rizatriptan, sumatriptan, zolmitriptan, NURTEC ODT, UBRELVY</i>

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Excluded drug name(s)	Preferred option(s)*
triamcinolone aerosol 0.2%	<i>hydrocortisone butyrate cream, hydrocortisone butyrate ointment, hydrocortisone butyrate solution, mometasone, triamcinolone cream, triamcinolone lotion, triamcinolone ointment (except triamcinolone ointment 0.05%)</i>
TRICOR	<i>fenofibrate (except fenofibrate capsule 50 mg, 130 mg; fenofibrate tablet 40 mg, 120 mg), fenofibric acid delayed-rel</i>
TRINTELLIX	<i>citalopram, escitalopram, fluoxetine (except fluoxetine tablet 60 mg, fluoxetine tablet [generics for SARAFEM]), paroxetine HCl (except paroxetine HCl oral susp), paroxetine HCl ext-rel (except NDC* 60505367503), sertraline</i>
TRULANCE	<i>lubiprostone, LINZESS</i>
TRUVADA	<i>abacavir-lamivudine, emtricitabine-tenofovir disoproxil fumarate, lamivudine-zidovudine, CIMDUO, DESCOVY, TEMIXYS</i>
TUDORZA	<i>SPIRIVA</i>
UCERIS FOAM	<i>hydrocortisone enema, mesalamine suppository, mesalamine suspension, CORTIFOAM</i>
UCERIS TABLET	<i>balsalazide, mesalamine delayed-rel, mesalamine ext-rel, sulfasalazine, sulfasalazine delayed-rel, PENTASA</i>
UDENYCA	<i>FYLNETRA, NYVEPRIA</i>
ULORIC	<i>allopurinol**</i>
ULTIMED INSULIN SYRINGES⁴	<i>BD ULTRAFINE INSULIN SYRINGES</i>
ULTIMED NEEDLES⁴	<i>BD ULTRAFINE NEEDLES</i>
ULTRAVATE	<i>clobetasol cream, clobetasol foam, clobetasol gel, clobetasol lotion, clobetasol ointment, halobetasol cream, halobetasol ointment</i>
UROXATRAL	<i>alfuzosin ext-rel, doxazosin, silodosin, tamsulosin, terazosin</i>
VALCYTE	<i>valganciclovir</i>
VALTREX	<i>acyclovir (except acyclovir cream, ointment), valacyclovir</i>
VANOS	<i>clobetasol cream, clobetasol foam (except clobetasol emollient foam), clobetasol gel, clobetasol lotion, clobetasol ointment, halobetasol cream, halobetasol ointment</i>
VARUBI	<i>aprepitant</i>
VECTICAL	<i>calcipotriene ointment, calcipotriene solution</i>
venlafaxine ext-rel tablet (except 225 mg)	<i>desvenlafaxine ext-rel, duloxetine, venlafaxine, venlafaxine ext-rel capsule</i>
VENTOLIN HFA	<i>albuterol sulfate CFC-free aerosol (except NDCs* 00093317431, 66993001968), levalbuterol tartrate CFC-free aerosol</i>
VERDESO	<i>desonide (except desonide gel), hydrocortisone</i>
VEREGEN	<i>imiquimod, podofilox</i>
VESICARE	<i>darifenacin ext-rel, oxybutynin ext-rel, solifenacin, tolterodine, tolterodine ext-rel, trospium, trospium ext-rel, MYRBETRIQ</i>
VIAGRA	<i>sildenafil, tadalafil, vardenafil</i>
VIEKIRA PAK	<i>EPCLUSA (genotypes 1, 2, 3, 4, 5, 6), HARVONI (genotypes 1, 4, 5, 6)</i>
VIIBRYD	<i>citalopram, escitalopram, fluoxetine (except fluoxetine tablet 60 mg, fluoxetine tablet [generics for SARAFEM]), paroxetine HCl (except paroxetine HCl oral susp), paroxetine HCl ext-rel (except NDC* 60505367503), sertraline</i>
vilazodone	<i>citalopram, escitalopram, fluoxetine (except fluoxetine tablet 60 mg, fluoxetine tablet [generics for SARAFEM]), paroxetine HCl (except paroxetine HCl oral susp), paroxetine HCl ext-rel (except NDC* 60505367503), sertraline</i>
VIMOVO	<i>naproxen AND esomeprazole</i>
VIRACEPT	<i>atazanavir, lopinavir-ritonavir, EVOTAZ, PREZCOBIX, PREZISTA</i>

* Coverage may not apply in all plans. Refer to plan documents.

Advanced Control Plan - Aetna Formulary Exclusions Drug List (1/2025)

Excluded drug name(s)	Preferred option(s)*
VISCO-3	DUROLANE, EUFLEXXA, GELSYN-3, SUPARTZ FX
VITAFOL-ONE ®	<i>prenatal vitamins</i> , CITRANATAL
VIVELLE-DOT	<i>estradiol</i> , DIVIGEL, EVAMIST
VIVLODEX	<i>diclofenac sodium</i> , <i>ibuprofen</i> , <i>meloxicam tablet</i> , <i>naproxen</i> (except <i>naproxen CR</i> or <i>naproxen suspension</i>)
VOGELXO	<i>testosterone gel</i> (except authorized generics for TESTIM and VOGELXO), <i>testosterone solution</i> , ANDRODERM, NATESTO
Vtol LQ	<i>diclofenac sodium</i> , <i>ibuprofen</i> , <i>naproxen</i> (except <i>naproxen CR</i> or <i>naproxen suspension</i>)
VUSION	<i>nystatin</i>
VYVANSE	<i>amphetamine-dextroamphetamine mixed salts ext-rel</i> , <i>dexmethylphenidate ext-rel</i> , <i>dextroamphetamine ext-rel</i> , <i>methylphenidate ext-rel</i> , AZSTARYS
WELLBUTRIN XL	<i>bupropion</i> , <i>bupropion ext-rel</i> (except <i>bupropion ext-rel tablet 450 mg</i>)
XANAX, XANAX XR	<i>alprazolam</i> , <i>clonazepam</i> , <i>diazepam</i> , <i>lorazepam</i> , <i>oxazepam</i>
XENAZINE	<i>tetrabenazine</i> , AUSTEDO
XENICAL	QSYMIA*, SAXENDA*, WEGOVY*
XERESE	<i>acyclovir</i> (except <i>acyclovir cream</i> , <i>ointment</i>), <i>valacyclovir</i>
XIFAXAN 200 MG	<i>sulfamethoxazole-trimethoprim</i>
XIFAXAN 550 MG	<i>alosetron</i> , VIBERZI
XOLEGEL	<i>ciclopirox</i> , <i>ketoconazole cream 2%</i>
XOPENEX HFA	<i>albuterol sulfate CFC-free aerosol</i> (except NDCs* 00093317431, 66993001968), <i>levalbuterol tartrate CFC-free aerosol</i>
XYREM	SODIUM OXYBATE SOLUTION
YASMIN	<i>ethinyl estradiol-drospirenone</i> , <i>ethinyl estradiol-drospirenone-levomefolate</i> , <i>ethinyl estradiol-levonorgestrel</i> , <i>ethinyl estradiol-norethindrone acetate-iron</i> , <i>ethinyl estradiol-norgestimate</i> , LO LOESTRIN FE, NATAZIA
YAZ	<i>ethinyl estradiol-drospirenone</i> , <i>ethinyl estradiol-drospirenone-levomefolate</i> , <i>ethinyl estradiol-levonorgestrel</i> , <i>ethinyl estradiol-norethindrone acetate-iron</i> , <i>ethinyl estradiol-norgestimate</i> , LO LOESTRIN FE
Yuvaferm	<i>estradiol vaginal cream</i> , IMVEXXY, VAGIFEM
ZALVIT 6	<i>prenatal vitamins</i> , CITRANATAL
ZARXIO	NIVESTYM
ZEGERID	<i>esomeprazole delayed-rel</i> , <i>lansoprazole delayed-rel</i> , <i>omeprazole delayed-rel</i> , <i>pantoprazole delayed-rel tablet</i> , DEXILANT
ZELAPAR	<i>rasagiline</i> , <i>selegiline</i>
ZEMAIRA	PROLASTIN-C
ZEPATIER	EPCLUSA (genotypes 1, 2, 3, 4, 5, 6), HARVONI (genotypes 1, 4, 5, 6)
ZESTORETIC	<i>fosinopril-hydrochlorothiazide</i> , <i>lisinopril-hydrochlorothiazide</i> , <i>quinapril-hydrochlorothiazide</i>
ZETIA	<i>ezetimibe</i>
ZETONNA	<i>azelastine-fluticasone</i> , <i>flunisolide</i> , <i>fluticasone</i> , <i>mometasone</i>
ZIANA	<i>adapalene</i> (except <i>adapalene pad</i>), <i>adapalene-benzoyl peroxide</i> , <i>benzoyl peroxide</i> , <i>clindamycin gel</i> (except NDC* 68682046275), <i>clindamycin solution</i> , <i>clindamycin-benzoyl peroxide</i> , <i>erythromycin solution</i> , <i>erythromycin-benzoyl peroxide</i> , <i>tretinoin</i> , DIFFERIN 1% gel, ONEXTON

* Coverage may not apply in all plans. Refer to plan documents.

Excluded drug name(s)	Preferred option(s)*
ZIEXTENZO	FYLNETRA, NYVEPRIA
zileuton ext-rel	montelukast, zafirlukast
ZIPSOR	diclofenac sodium, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)
ZIRGAN	trifluridine
ZOLOFT	citalopram, escitalopram, fluoxetine (except fluoxetine tablet 60 mg, fluoxetine tablet [generics for SARAFEM]), paroxetine HCl (except paroxetine HCl oral susp), paroxetine HCl ext-rel (except NDC* 60505367503), sertraline
zolpidem sublingual	doxepin, ramelteon, temazepam, zolpidem, zolpidem ext-rel
ZOLPIMIST	doxepin, ramelteon, temazepam, zolpidem, zolpidem ext-rel
ZONEGRAN	carbamazepine, carbamazepine ext-rel, divalproex sodium, divalproex sodium ext-rel, felbamate, gabapentin, lacosamide, lamotrigine tablets and chewable tablets, lamotrigine ext-rel, levetiracetam, levetiracetam ext-rel, oxcarbazepine, phenobarbital, phenytoin, phenytoin sodium extended, pregabalin, primidone, tiagabine, topiramate, topiramate ext-rel (except sprinkles), valproic acid, zonisamide, FYCOMPA, OXTELLAR XR, XCOPRI
ZONTIVITY	Consult doctor
ZORVOLEX	diclofenac sodium, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)
ZOVIRAX	acyclovir (except acyclovir cream), valacyclovir
ZUPLENZ	granisetron, ondansetron, SANCUSO
ZYCLARA	fluorouracil 5% cream, fluorouracil solution, imiquimod
ZYDELIG	COPIKTRA
ZYFLO/ZYFLO CR	zafirlukast, montelukast
ZYLET	neomycin-polymyxin B-bacitracin-hydrocortisone, neomycin-polymyxin B-dexamethasone, tobramycin-dexamethasone
ZYMAXID	ciprofloxacin, erythromycin, gentamicin, levofloxacin, moxifloxacin, ofloxacin, sulfacetamide, tobramycin
ZYTIGA	abiraterone, bicalutamide, ERLEADA, XTANDI, YONSA
ZYVOX	linezolid

* Coverage may not apply in all plans. Refer to plan documents.
Advanced Control Plan - Aetna Formulary Exclusions Drug List (1/2025)

Table 1

Preferred Options For Indication Based Autoimmune Excluded Medications

Condition	Excluded Drug Name(s)	Preferred Option(s)
ANKYLOSING SPONDYLITIS	AMJEVITA CIMZIA PREFILLED SYRINGE HUMIRA SIMPONI TALTZ XEKHAZ XELJANZ XR	ADALIMUMAB-ADAZ COSENTYX ENBREL HYRIMOZ RINVOQ
CROHN'S DISEASE	AMJEVITA CIMZIA PREFILLED SYRINGE HUMIRA	ADALIMUMAB-ADAZ HYRIMOZ SKYRIZI SUBCUTANEOUS STELARA SUBCUTANEOUS RINVOQ
PSORIASIS	AMJEVITA CIMZIA PREFILLED SYRINGE COSENTYX ENBREL HUMIRA	ADALIMUMAB-ADAZ HYRIMOZ OTEZLA SKYRIZI SUBCUTANEOUS STELARA SUBCUTANEOUS TALTZ TREMIFYA
PSORIATIC ARTHRITIS	CIMZIA PREFILLED SYRINGE HUMIRA ORENCIA CLICKJECT ORENCIA SUBCUTANEOUS SIMPONI STELARA SUBCUTANEOUS TALTZ TREMIFYA XELJANZ XELJANZ XR	COSENTYX ENBREL OTEZLA RINVOQ SKYRIZI SUBCUTANEOUS
RHEUMATOID ARTHRITIS	ACTEMRA ACTPEN ACTEMRA SUBCUTANEOUS AMJEVITA CIMZIA PREFILLED SYRINGE HUMIRA KINERET SIMPONI	ADALIMUMAB-ADAZ ENBREL HYRIMOZ KEVZARA ORENCIA CLICKJECT ORENCIA SUBCUTANEOUS RINVOQ XELJANZ XELJANZ XR
ULCERATIVE COLITIS	AMJEVITA HUMIRA SIMPONI	ADALIMUMAB-ADAZ HYRIMOZ RINVOQ STELARA SUBCUTANEOUS XELJANZ XELJANZ XR
ALL OTHER CONDITIONS	ACTEMRA ACTPEN ACTEMRA SUBCUTANEOUS AMJEVITA HUMIRA KINERET ORENCIA CLICKJECT ORENCIA SUBCUTANEOUS	ADALIMUMAB-ADAZ ENBREL HYRIMOZ

The listed formulary options are subject to change.

* Coverage may not apply in all plans. Refer to plan documents.
Advanced Control Plan - Aetna Formulary Exclusions Drug List (1/2025)

** Listing does not include certain NDCs*.

† The preferred options in this list are a broad representation within therapeutic categories of available treatment options and do not necessarily represent clinical equivalency.

¹ For use in patients previously treated with an HCV regimen containing an NS5A inhibitor (for genotypes 1-6) or sofosbuvir without an NS5A inhibitor (for genotypes 1a or 3).

² An ACCU-CHEK or ONETOUCH blood glucose meter may be provided at no charge by the manufacturer to those individuals currently using a meter other than ACCU-CHEK or ONETOUCH. For more information on how to obtain a blood glucose meter, call: 1-877-418-4746.

³ An exception process is in place for specific clinical or regulatory circumstances that may require coverage of an excluded medication.

⁴ BD ULTRAFINE syringes and needles are the only preferred options.

⁵ ACCU-CHEK or ONETOUCH brand test strips are the only preferred options.

⁶ Generic prenatal vitamins and CITRANATAL are the only preferred options.

* Coverage may not apply in all plans. Refer to plan documents.

⁷ ACCU-CHEK brand calibration liquids are the preferred options

This is not a complete list of medications covered or excluded under your plan. We only list the most common ones. Certain drugs may not be covered by your particular pharmacy plan. Diabetic supplies may be covered under your medical plan.

Information is subject to change.

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To check coverage and copay information for a specific medicine, log into your member website. For questions, please call the toll free number on the back of your member ID card.

Policy forms issued in Oklahoma include: AL OK HCOC, HC COC00010.

Policy forms issued in Missouri include: AL HGrpPol 01R5, HI HGrpAg 05, HO HGrpPol 04, HO GrpPolAmend-ThirdPartyPay 01.

