Medication Alternatives



The Essential Drug List is a list of prescription medications approved by the U.S. Food and Drug Administration (FDA). We've reviewed these drugs through our Pharmacy and Therapeutics (P&T) Process, which considers a drug's:

- · Effectiveness
- Safety
- · Similarity to other drugs within a therapeutic class
- Affordability

The Essential Drug List is a closed formulary, which means that only the prescription drugs on the list will be covered by the plan. Drugs that aren't covered have cost-effective, high-quality alternatives available. There may be a brand alternative, a generic equivalent or an over-the-counter (OTC) option. Brand-name drugs with a generic equivalent available aren't covered on the Essential Drug List.

Some common drugs that aren't on the Essential Drug List are shown below. Other preferred alternatives may also be available. Please note, exclusions and limitations may apply. For details about what's covered and what's not, it's best to check the Certificate/Evidence of Coverage or Summary Plan Description (SPD).

To view and search the complete Essential Drug List, members should log in at anthem.com and choose Prescription Benefits. Information on dosage/strength options and any restrictions such as quantity limits, prior approval or step therapy requirements is available. Members can also call Member Services at the number on their ID card.

What if a medication isn't on the Essential Drug List?

There may be times when a member's drug isn't on the Essential Drug List. If the covered alternative options aren't right for a member, their doctor can submit a request for an exception. This process, called prior authorization, requires the doctor to call the Member Services number on the member's ID card or log in at anthem.com and choose Tools & Resources to download and submit the prior authorization form.

Doctors can also submit prior authorizations electronically, which requires less processing time and possible real-time approval so members can fill their prescriptions right away.

For the most up-to-date information, members should log in at anthem.com and choose Prescription Benefits.

Drug Class	Medications not on the Essential Drug List	Preferred alternatives
ANAPHYLAXIS THERAPY AGENTS	Auvi-Q, Symjepi	epinephrine auto-injector
ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Adrenergic Combinations	Bevespi Aerosphere, Duaklir Pressair	Anoro Ellipta, Breztri, Combivent, Stiolto Respimat
ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Beta Adrenergics	ProAir Digihaler, Striverdi	albuterol HFA, arformoterol, formoterol, ProAir Respiclick, Serevent
ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Bronchodilators - Anticholinergics	Incruse Ellipta, Tudorza Pressair	Atrovent, Spiriva
ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Steroid Inhalants and Combinations	Advair HFA, Airduo Digihaler, Airsupra, Alvesco, Armonair Digihaler, Asmanex HFA/Twisthaler, Dulera, Pulmicort Flexhaler	Arnuity Ellipta, Breo Ellipta (Brand and Generic), budesonide-formoterol fumarate dihydrate/breyna, fluticasone propionate diskus/HFA, fluticasone-salmeterol HFA, fluticasone-salmeterol/ wixela (generic Advair Diskus), Qvar Redihaler, Trelegy
ANTIBIOTIC AGENTS - Tetracyclines	Acticlate (Brand and Generic), Doryx MPC, Doryx (Brand and Generic), doxycycline hyclate 50mg tablets, Minolira (Brand and Generic), Oracea (Brand and Generic), Seysara, Solodyn (Brand and Generic), targadox, Tetracycline Tablet, Ximino (Brand and Generic)	doxycycline hyclate immediate release (except 50mg, 75mg and 150mg tablets), doxycycline monohydrate immediate release, doxycycline suspension, minocycline (immediate release), tetracycline capsule
ANTIDIABETICS - Biguanides	Glumetza (Brand and Generic), metformin 625mg tablet, metformin ER (generic Fortamet)	metformin ER (generic Glucophage XR)
ANTIDIABETICS - Diabetic Test Strips and Glucometers	All except Accu-Chek and OneTouch Products	Accu-Chek and OneTouch Products
ANTIDIABETICS - Dipeptidyl Peptidase-4 (DPP-4) Inhibitors and Combinations	Jentadueto, Jentadueto XR, Kombiglyze XR (Brand and Generic), Onglyza (Brand and Generic), Sitagliptin, Sitagliptin-Metformin, Tradjenta, Zituvio	Janumet, Janumet XR, Januvia, metformin (generic Glucophage), metformin ER (generic Glucophage XR)

Medication Alternatives



Drug Class	Medications not on the Essential Drug List	Preferred alternatives
ANTIDIABETICS - Human Insulin	Basaglar/Tempo, Insulin Degludec, Insulin Glargine, Insulin Glargine-yfgn, Rezvoglar, Semglee	Lantus, Soliqua, Toujeo, Tresiba, Xultophy
ANTIDIABETICS - Human Insulin	Admelog, Afrezza, Apidra, Fiasp, Humalog Tempo, Insulin Aspart, Insulin Aspart Protamine-Aspart, Lyumjev Tempo, Novolin, Novolog	Humulin, Humalog, Insulin Lispro, Insulin Lispro Protamine-Lispro, Lyumjev
ANTIDIABETICS - Incretin Mimetic Agents (GLP-1 Receptor Agonists)	Bydureon, Byetta	liraglutide, Mounjaro, Ozempic, Rybelsus, Trulicity
ANTIDIABETICS - Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitors and Combinations	Bexagliflozin, Brenzavvy, dapagliflozin, dapagliflozin-metformin, Invokamet, Invokamet XR, Invokana, Qtern, Segluromet, Steglatro, Steglujan	Farxiga, Glyxambi, Jardiance, Synjardy, Synjardy XR, Trijardy XR, Xigduo XR, metformin (generic Glucophage), metformin ER (generic Glucophage XR)
ANTIHISTAMINES	Carbinoxamine 6mg Tablet, ryclora, Ryvent	carbinoxamine solution, carbinoxamine 4mg tablet, cetirizine solution, clemastine tablet, desloratadine odt/tablet, levocetirizine 5mg tablet
ANTIHYPERLIPIDEMICS - HMG COA Reductase Inhibitors and Combinations	Altoprev, Atorvaliq, Ezallor Sprinkle, Ezetimibe-Rosuvastatin, Flolipid, Lescol XL (Brand and Generic), Livalo (Brand and Generic), Roszet, Zypitamag	atorvastatin, ezetimibe-simvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin
ANTIVIRALS - Hepatitis Agents	Ledipasvir-Sofosbuvir, Mavyret, Sofosbuvir-Velpatasvir, Sovaldi, Zepatier	Epclusa, Harvoni, Vosevi
ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD)	Adzenys XR-ODT, Azstarys, Cotempla XR-ODT, Desoxyn (Brand and Generic), Dyanavel XR, Evekeo ODT, Jornay PM, Qelbree, Quillichew ER, Quillivant XR, Relexxii, Vyvanse, Xelstrym	amphetamine, amphetamine-dextroamphetamine tablet/ ER capsule, atomoxetine, clonidine er, dexmethylphenidate, dextroamphetamine ER capsule, guanfacine er, lisdexamfetamine, methylphenidate tablet/capsule, methylphenidate hcl er tablet
GASTROINTESTINAL AGENTS - Proton Pump Inhibitors and Combinations	Aciphex Tab (Brand and Generic), Dexilant (Brand and Generic), Konvomep, Prevacid ODT (Brand and Generic), Prilosec Packet, Protonix Packet (Brand and Generic), Rabeprazole DR Sprinkle, Voquezna, Zegerid (Brand and Generic)	esomeprazole, lansoprazole cap, omeprazole, pantoprazole
GROWTH HORMONES	Ngenla, Norditropin, Nutropin AQ, Omnitrope, Saizen, Sogroya, Zomacton	Genotropin, Humatrope, Skytrofa
HYPNOTICS/SEDATIVES	Belsomra, Dayvigo, Edluar, Hetlioz LQ, Igalmi, Quviviq, Zolpidem Cap, Zolpimist	eszopiclone, zaleplon, zolpidem/er tab
IMPOTENCE AGENTS - Selective cGMP Phosphodiesterase Type 5 Inhibitors	Stendra, vardenafil tablet	sildenafil citrate (generic Viagra), tadalafil (generic Cialis)
INFLAMMATORY CONDITIONS	Abrilada, Actemra, Adbry, Adalimumab-aaty/adaz/fkjp/ryvk, Amjevita, Bimzelx, Cibinqo, Cimzia, Cosentyx IV, Cyltezo, Entyvio SC, Hadlima, Hulio, Hyrimoz, Idacio, Ilumya, Kevzara, Kineret, Olumiant, Omvoh, Orencia, Siliq, Simlandi, Sotyktu, Tofidence, Tyenne, Velsipity, Yuflyma, Yusimry	Adalimumab-adbm, Cosentyx SC, Dupixent, Enbrel, Entyvio IV, Humira, Otezla, Rinvoq, Simponi, Skyrizi, Stelara, Tremfya
INFLIXIMAB PRODUCTS	Renflexis, Inflectra, Zymfentra	Avsola, Infliximab, Remicade
MIGRAINE PRODUCTS	Onzetra, Reyvow, Tosymra, Treximet (Brand and Generic), Zembrace, Zomig Nasal	almotriptan, eletriptan, naratriptan, rizatriptan tablet/ ODT, sumatriptan tablet/nasal/injection/statdose/refill, zolmitriptan tablet/ODT/nasal
MIGRAINE PRODUCTS - Calcitonin Gene-Related Peptide Receptor Antag (CGRP)	Vyepti, Zavzpret	Aimovig, Ajovy, Emgality, Nurtec, Qulipta, Ubrelvy
MULTIPLE SCLEROSIS AGENTS	Bafiertam, Briumvi, Extavia, Gilenya 0.25mg, Kesimpta, Lemtrada, Ocrevus, Ponvory, Tascenso ODT, Tysabri	Avonex, Betaseron, Copaxone 40mg, dalfampridine, dimethyl fumarate, fingolimod, Mavenclad, Mayzent, Plegridy, Rebif, teriflunomide, Vumerity, Zeposia
NASAL AGENTS - Nasal Steroids and Combinations	Beconase AQ, Omnaris, Qnasl/Child, Ryaltris, Xhance, Zetonna	azelastine hcl-fluticasone propionate, fluticasone nasal, mometasone nasal
THYROID AGENTS - Thyroid Hormones	Armour Thyroid, Ermeza, NP Thyroid, Thyquidity, Tirosint	levothyroxine

Please note: Preferred alternatives are on multiple tiers, depending on benefit plan. Tiers represent levels of coverage. Member cost share amounts generally increase at higher tier levels.





Common medications not on the Essential Drug List (in alphabetical order)						
Abrilada	Briumvi	Glumetza (Brand and Generic)	Ngenla	Reyvow	Tradjenta	
Aciphex Tab (Brand and Generic)/ Rabeprazole DR Sprinkle	Bydureon	Hadlima	Norditropin	Rezvoglar	Treximet (Brand and Generic)	
Actemra	Byetta	Hetlioz	Novolin	Roszet/ Ezetimibe-Rosuvastatin	Tudorza Pressair	
Acticlate (Brand and Generic)	Carbinoxamine 6mg Tablet	Hulio	Novolog/Insulin Aspart/Insulin Aspart Protamine-Aspart	Ryaltris	Tyenne	
Adalimumab-aaty/ adaz/fkjp/ryvk	Cibinqo	Humalog Tempo	NP Thyroid	ryclora	Tysabri	
Adbry	Cimzia	Hyrimoz	Nutropin AQ	Ryvent	vardenafil tablet	
Admelog	Cosentyx IV	Idacio	Ocrevus	Saizen	Velsipity	
Advair HFA	Cotempla XR-ODT	Igalmi	Olumiant	Segluromet	Voquezna	
Adzenys XR-ODT	Cyltezo	Ilumya	Omnaris	Semglee/Insulin Glargine/Insulin Glargine - yfgn	Vyepti	
Afrezza	dapagliflozin	Incruse Ellipta	Omnitrope	Seysara	Vyvanse	
Airduo Digihaler	dapagliflozin-metformin	Inflectra	Omvoh	Siliq	Xelstrym	
Airsupra	Dayvigo	Insulin Degludec	Onglyza (Brand and Generic)	Simlandi	Xhance	
Altoprev	Desoxyn (Brand and Generic)	Invokamet/XR	Onzetra	Sitagliptin-Metformin	Ximino (Brand and Generic)	
Alvesco	Dexilant (Brand and Generic)	Invokana	Oracea (Brand and Generic)	Sofosbuvir-Velpatasvir	Yuflyma	
Amjevita	Doryx (Brand and Generic)/MPC	Jentadueto/XR	Orencia	Sogroya	Yusimry	
Apidra	doxycycline hyclate 50mg tablet/ targadox	Jornay PM	Ponvory	Solodyn (Brand and Generic)	Zavzpret	
Armonair Digihaler	Duaklir	Kesimpta	Prevacid ODT (Brand and Generic)	Sotyktu	Zegerid (Brand and Generic)	
Armour Thyroid	Dulera	Kevzara	Prilosec Packet	Sovaldi	Zembrace	
Asmanex HFA/ Twisthaler	Dyanavel XR	Kineret	ProAir Digihaler	Steglatro	Zepatier	
Atorvaliq	Edluar	Kombiglyze XR (Brand and Generic)	Protonix Packet (Brand and Generic)	Steglujan	Zetonna	
Auvi-Q	Entyvio SC	Konvomep	Pulmicort Flexhaler	Stendra	Zituvio/Sitagliptin	
Azstarys	Ermeza	Ledipasvir-Sofosbuvir	Qelbree	Striverdi	Zolpidem Cap	
Bafiertam	Evekeo ODT	Lemtrada	Qnasl/child	Symjepi	Zolpimist	
Basaglar/Tempo	Extavia	Lescol XL (Brand and Generic)	Qtern	Tascenso ODT	Zomacton	





Common medications not on the Essential Drug List (in alphabetical order)						
Beconase AQ	Ezallor Sprinkle	Livalo (Brand and Generic)	Quillichew ER	Tetracycline Tablet	Zomig Nasal	
Belsomra	Fiasp	Lyumjev Tempo	Quillivant XR	Thyquidity	Zymfentra	
Bevespi	Flolipid	Mavyret	Quviviq	Tirosint	Zypitamag	
Bimzelx	Fortamet (Brand and Generic)	metformin 625mg tablet	Relexxii	Tofidence		
Brenzavvy/ Bexagliflozin	Gilenya 0.25mg	Minolira (Brand and Generic)	Renflexis	Tosymra		

This list may change without notice which may affect your benefit coverage. To be sure your medication is covered under the PreventiveRx benefit, call the pharmacy member services number located on your ID card.

Anthem Blue Cross and Blue Shield is the trade name of: In Colorado: Rocky Mountain Hospital and Medical Service, Inc. HMD products underwritten by HMO Colorado, Inc. Copies of Colorado network access plans are available on request from member services or can be obtained by going to anthem.com/co/inetworkaccess. In Connecticut: Anthem Health Plans, of Kentucky, Inc. In Georgia: Blue Cross Blue Shield Healthcare Plan of Georgia, Inc. In Indiana: Anthem Insurance Companies, Inc. In Kentucky: Anthem Health Plans of Kentucky, Inc. In Maine:

Anthem Health Plans of Maine, Inc. In Missouri (excluding 30 counties in the Kansas City area): RightCHOICE* Managed Care, Inc. (RIT), Healthy Alliance* Life Insurance Company (HALIC), and HMO Missouri, Inc. RIT and certain affiliates administer non-HMO benefits underwritten by MALIC and HMO Menderwritten by HMO Missouri, Inc. RIT and certain affiliates only provide administrative services for self-funded plans and do not underwrite benefits. In Nevada: Rocky Mountain Hospital and Medical Service, Inc. HMO products underwritten by HMO Colorado, Inc., db HMO Nevada: In New Hampshire: Anthem Health Plans of New Hampshire, Inc. HMO products underwritten by HMO Colorado, Inc., db HMO Nevada: In New Hampshire: Anthem Health Plans of New Hampshire, Inc. HMO products underwritten by Matthew Thornton Health Plans of New Hampshire, Inc. and underwritten by Matthew Thornton Health Plans of New Hampshire, Inc. and underwritten by Matthew Thornton Health Plans of New Hampshire, Inc. and underwritten by Matthew Thornton Health Plans of New Hampshire, Inc. and underwritten by Matthew Thornton Health Plans of New Hampshire, Inc. and underwritten by Matthew Thornton Health Plans of New Hampshire, Inc. and underwritten by Matthew Thornton Health Plans, Inc. In Ohio: Community Insurance Company, In Virginia: Anthem Health Plans of Virginia, Inc. trades as Anthem Blue Cross and Blue Shield of Virginia except for the City of Fairfax, the Town of Vienna, and the area east of State Route 123. In Wis

Get help in your language

Curious to know what all this says? We would be too. Here's the English version: You have the right to get this information and help in your language for free. Call the Member Services number on your ID card for help. (TTY/TDD: 711)

Separate from our language assistance program, we make documents available in alternate formats for members with visual impairments. If you need a copy of this document in an alternate format, please call the customer service telephone number on the back of your ID card.

Spanish

Tiene el derecho de obtener esta información y ayuda en su idioma en forma gratuita. Llame al número de Servicios para Miembros que figura en su tarjeta de identificación para obtener ayuda. (TTY/TDD: 711)

Chinese

您有權使用您的語言免費獲得該資訊和協助。請撥打您的 ID 卡上的成員服務號碼尋求協助。(TTY/TDD: 711)

Vietnamese

Quý vị có quyền nhận miễn phí thông tin này và sự trợ giúp bằng ngôn ngữ của quý vị. Hãy gọi cho số Dịch Vụ Thành Viên trên thẻ ID của quý vị để được giúp đỡ. (TTY/TDD: 711)

Korean

귀하에게는 무료로 이 정보를 얻고 귀하의 언어로 도움을 받을 권리가 있습니다. 도움을 얻으려면 귀하의 ID 카드에 있는 회원 서비스 번호로 전화하십시오. (TTY/TDD: 711)

Tagalog

May karapatan kayong makuha ang impormasyon at tulong na ito sa ginagamit ninyong wika nang walang bayad. Tumawag sa numero ng Member Services na nasa inyong ID card para sa tulong. (TTY/TDD: 711)

Russian

Вы имеете право получить данную информацию и помощь на вашем языке бесплатно. Для получения помощи звоните в отдел обслуживания участников по номеру, указанному на вашей идентификационной карте. (TTY/TDD: 711)

Arabic

يحق لك الحصول على هذه المعلومات والمساعدة بلغتك مجانًا. اتصل برقم خدمات الأعضاء الموجود على بطاقة التعريف الخاصة بك للمساعدة. (711:TDD/TTY)

Armenian

Դուք իրավունք ունեք Ձեր լեզվով անվձար ստանալ այս տեղեկատվությունը և ցանկացած օգնություն։ Օգնություն ստանալու համար զանգահարեք Անդամների սպասարկման կենտրոն՝ Ձեր ID քարտի վրա նշված համարով։ (TTY/TDD: 711)

Farsi

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شما این حق را دارید که این اطلاعات و کمکها را به صورت رایگان به زبان خودتان دریافت
کنید. برای دریافت کمک به شماره مرکز خدمات اعضاء که بر روی کارت شناساییتان درج شده
است، تماس بگیرید.(TTY/TDD:711)
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French

Vous avez le droit d'accéder gratuitement à ces informations et à une aide dans votre langue. Pour cela, veuillez appeler le numéro des Services destinés aux membres qui figure sur votre carte d'identification. (TTY/TDD: 711)

Japanese

この情報と支援を希望する言語で無料で受けることができます。支援を受けるには、IDカードに記載されているメンバーサービス番号に電話してください。(TTY/TDD: 711)

Haitian

Ou gen dwa pou resevwa enfòmasyon sa a ak asistans nan lang ou pou gratis. Rele nimewo Manm Sèvis la ki sou kat idantifikasyon ou a pou jwenn èd. (TTY/TDD: 711)

Italian

Ha il diritto di ricevere queste informazioni ed eventuale assistenza nella sua lingua senza alcun costo aggiuntivo. Per assistenza, chiami il numero dedicato ai Servizi per i membri riportato sul suo libretto. (TTY/TDD: 711)

Polish

Masz prawo do bezpłatnego otrzymania niniejszych informacji oraz uzyskania pomocy w swoim języku. W tym celu skontaktuj się z Działem Obsługi Klienta pod numerem telefonu podanym na karcie identyfikacyjnej. (TTY/TDD: 711)

Punjabi

ਤੁਹਾਨੂੰ ਆਪਣੀ ਭਾਸ਼ਾ ਵਿੱਚ ਇਹ ਜਾਣਕਾਰੀ ਅਤੇ ਮਦਦ ਮੁਫ਼ਤ ਵਿੱਚ ਪ੍ਰਾਪਤ ਕਰਨ ਦਾ ਅਧਿਕਾਰ ਹੈ। ਮਦਦ ਲਈ ਆਪਣੇ ਆਈਡੀ ਕਾਰਡ ਉੱਤੇ ਮੈਂਬਰ ਸਰਵਿਸਿਜ਼ ਨੰਬਰ ਤੇ ਕਾਲ ਕਰੋ। (TTY/TDD: 711)

Navaio

Bee ná ahóót'i' t'áá ni nizaad k'eh jí níká a'doowoł t'áá jíík'e. Naaltsoos bee atah nílínígíí bee néého'dólzingo nanitinígíí béésh bee hane'í bikáá' áa ji' hodíílnih. Naaltsoos bee atah nílínígíí bee néého'dólzingo nanitinígíí béésh bee hane'í bikáá' áa ji' hodíílnih. (TTY/TDD: 711)

It's important we treat you fairly

That's why we follow federal civil rights laws in our health programs and activities. We don't discriminate, exclude people, or treat them differently on the basis of race, color, national origin, sex, age or disability. For people with disabilities, we offer free aids and services. For people whose primary language isn't English, we offer free language assistance services through interpreters and other written languages. Interested in these services? Call the Member Services number on your ID card for help (TTY/TDD: 711). If you think we failed to offer these services or discriminated based on race, color, national origin, age, disability, or sex, you can file a complaint, also known as a grievance. You can file a complaint with our Compliance Coordinator in writing to Compliance Coordinator, P.O. Box 27401, Mail Drop VA2002-N160, Richmond, VA 23279. Or you can file a complaint with the U.S. Department of Health and Human Services, Office for Civil Rights at 200 Independence Avenue, SW; Room 509F, HHH Building; Washington, D.C. 20201 or by calling 1-800-368-1019 (TDD: 1-800-537-7697) or online at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf. Complaint forms are available at https://www.hhs.gov/ocr/office/file/index.html.