April 2023

Family of health care plans

CareFirst Formulary 4 Quick Reference List

The CareFirst Formulary 4 Quick Reference List is not an all-inclusive list but represents a summary of prescribed medications within select therapeutic categories. This useful reference tool can assist medical providers in selecting therapeutically appropriate and cost-effective products for their patients. This document represents a closed formulary plan design.

This list represents brand products in CAPS and generic products in lowercase *italics*. Unless specifically indicated, drug list products will include all dosage forms, except for orally disintegrating formulations. Some prescription benefit plan designs may alter coverage of certain products or vary copay amounts based on the condition being treated. This document is subject to state-specific regulations and rules, including, but not limited to, those regarding generic substitution, preference for brands and mandatory generics whenever available.

*The coverage of prescription drugs and supplies along with the utilization management listed on this document is dependent on your benefit plan and is subject to change. For the most accurate information on your drug cost and pricing, please log in to My Account (**www.carefirst.com/myaccount**) and click on Drug & Pharmacy Resources under the Coverage tab.*

ANALGESICS

NSAIDS

diclofenac potassium 50mg
diclofenac sodium delayed-rel
diclofenac sodium ext-rel
diflunisal
etodolac
flurbiprofen
ibuprofen
ketoprofen 50mg, 75mg
ketorolac tromethamine
meloxicam tabs
nabumetone
naproxen tabs
oxaprozin
piroxicam
sulindac

ANTI-INFECTIVES

ANTHELMINTICS

ivermectin
praziquantel QL; PA*
EMVERM QL; PA*

ANTIFUNGALS

clotrimazole troches QL; PA*
fluconazole
griseofulvin microsize
itraconazole
nystatin
terbinafine hcl tabs
voriconazole PA

ANTITUBERCULAR AGENTS

rifabutin

ANTIVIRALS

acyclovir
famciclovir
oseltamivir phosphate QL; PA*
valacyclovir hcl

CEPHALOSPORINS

cefadroxil
cefdinir
cefpodoxime proxetil
cefprozil
cefuroxime axetil
cephalexin

ERYTHROMYCINS/MACROLIDES

azithromycin
clarithromycin
clarithromycin ext-rel
erythromycin
erythromycins
DIFICID PA

FLUOROQUINOLONES

ciprofloxacin hcl
levofloxacin
moxifloxacin hcl

HEPATITIS C

ribavirin SP, PA
EPCLUSA (genotypes 1, 2, 3, 4, 5, 6) SP, PA, QL
HARVONI (genotypes 1, 4, 5, 6) SP, PA, QL
VOSEVI SP, PA, QL, ^

MISCELLANEOUS

atovaquone
clindamycin hcl
linezolid PA
linezolid inj PA
metronidazole
nitrofurantoin ext-rel
nitrofurantoin macrocrystals
sulfamethoxazole/trimethoprim
vancomycin hcl QL

PENICILLINS

amoxicillin
amoxicillin & pot clavulanate
amoxicillin & pot clavulanate ext-rel
ampicillin
dicloxacillin sodium
penicillin v potassium

TETRACYCLINES

doxycycline hyclate caps; tabs 20mg, 100mg
doxycycline monohydrate susp
minocycline hcl
tetracycline hcl QL; PA*

CARDIOVASCULAR

ACE INHIBITOR COMBINATIONS

amlodipine besylate-benazepril hcl
enalapril maleate & hydrochlorothiazide
lisinopril & hydrochlorothiazide

ACE INHIBITORS

captopril
enalapril maleate
lisinopril
perindopril erbumine
ramipril
trandolapril

ALPHA BLOCKERS

doxazosin mesylate
terazosin hcl

ANGIOTENSIN II RECEPTOR ANTAGONIST COMBINATIONS

irbesartan-hydrochlorothiazide

AGE - Age Limit **OTC** - Over the counter **PA** - Prior Authorization **PA*** - If Quantity Limit is exceeded, Prior Authorization may apply **PA**** - If Step Therapy requirements are not met, Prior Authorization may apply **QL** - Quantity Limits **SP** - Specialty **ST** - Step Therapy

losartan potassium & hydrochlorothiazide
olmesartan medoxomil-hydrochlorothiazide
valsartan-hydrochlorothiazide

ANGIOTENSIN II RECEPTOR ANTAGONISTS

irbesartan
losartan potassium
olmesartan medoxomil
valsartan

ANTIARRHYTHMICS

amiodarone
disopyramide phosphate
dofetilide **SP, PA**
flecainide acetate
ibutilide fumarate
propafenone ext-rel
propafenone hcl
sotalol

ANTILIPEMICS, BILE ACID RESINS

cholestyramine
colestipol hcl

ANTILIPEMICS, FIBRATES

fenofibrate **(except fenofibrate capsule 50mg, 130mg; fenofibrate tablet 40mg, 120mg)**
gemfibrozil

ANTILIPEMICS, HMG-COA REDUCTASE INHIBITORS

atorvastatin calcium
pravastatin sodium
rosuvastatin calcium
simvastatin

ANTILIPEMICS, MISCELLANEOUS

niacin ext-rel

ANTILIPEMICS, OMEGA-3 FATTY ACIDS

VASCEPA

ANTILIPEMICS, PCSK9 INHIBITORS

PRALUENT **PA, QL**

BETA-BLOCKER/DIURETIC COMBINATIONS

atenolol & chlorthalidone
bisoprolol & hydrochlorothiazide
metoprolol & hydrochlorothiazide

BETA-BLOCKERS

acebutolol hcl
atenolol
bisoprolol fumarate
carvedilol
labetalol hcl
metoprolol succinate ext-rel
metoprolol tartrate 25mg, 50mg, 100mg
nadolol
pindolol
propranolol ext-rel
propranolol hcl

CALCIUM CHANNEL BLOCKERS

amlodipine besylate
diltiazem ext-rel
felodipine ext-rel
isradipine
nicardipine hcl
nifedipine ext-rel
verapamil ext-rel

DIGITALIS GLYCOSIDES

digoxin
digoxin ped elixir

DIURETICS

amiloride & hydrochlorothiazide
amiloride hcl
bumetanide
chlorthalidone
ethacrynic acid
furosemide
hydrochlorothiazide
indapamide
metolazone
spironolactone & hydrochlorothiazide
torsemide
triamterene & hydrochlorothiazide

HEART FAILURE

CORLANOR
ENTRESTO

MISCELLANEOUS

hydralazine hcl
midodrine hcl
ranolazine ext-rel

NITRATES

isosorbide dinitrate 5mg, 10mg, 20mg, 30mg
isosorbide mononitrate
isosorbide mononitrate ext-rel
nitroglycerin sublingual
nitroglycerin transdermal

CENTRAL NERVOUS SYSTEM

ANTIANXIETY

alprazolam **QL**
alprazolam orally disintegrating tabs **QL**
buspirone hcl
fluvoxamine ext-rel
fluvoxamine maleate
lorazepam **QL**
oxazepam **QL**

ANTIDEPRESSANTS

bupropion
bupropion hcl ext-rel
citalopram hydrobromide
desvenlafaxine succinate ext-rel
doxepin
duloxetine delayed-rel
escitalopram oxalate
fluoxetine hcl caps; soln
fluoxetine hcl tabs 10mg, 20mg
mirtazapine
mirtazapine orally disintegrating tabs
paroxetine hcl ext-rel
paroxetine hcl tabs
sertraline hcl
trazodone hcl
venlafaxine hcl
venlafaxine hcl ext-rel

ANTISEIZURE AGENTS

clorazepate dipotassium **QL**
diazepam **QL**

HYPNOTICS

ramelteon **QL; PA***
zaleplon **QL; PA***
zolpidem tartrate **QL; PA***
zolpidem tartrate ext-rel **QL; PA***

MIGRAINE

naratriptan hcl **QL; PA***
rizatriptan benzoate **QL; PA***
rizatriptan orally disintegrating tabs **QL; PA***
sumatriptan succinate **QL; PA***
zolmitriptan **QL; PA***
zolmitriptan orally disintegrating tabs **QL; PA***
AIMOVIG **ST, QL; PA****
EMGALITY **ST, QL; PA****
UBRELVY **ST, QL; PA****

MULTIPLE SCLEROSIS AGENTS

dimethyl fumarate delayed-rel **SP, PA, QL**
fingolimod hcl **SP, PA, QL**
glatiramer acetate **SP, PA, QL**
AUBAGIO **SP, PA, QL**
AVONEX **SP, PA, QL**
BETASERON **SP, PA, QL**
COPAXONE **SP, PA, QL**
KESIMPTA **SP, PA, QL**
MAYZENT **SP, PA, QL**
MAYZENT STARTER PACK **SP, PA, QL**
REBIF **SP, PA, QL**
VUMERITY **SP, PA, QL**
ZEPOSIA **SP, PA, QL**

ENDOCRINE AND METABOLIC

ANTIDIABETICS, AMYLIN ANALOGS

SYMLINPEN **ST; PA****

ANTIDIABETICS, BIGUANIDE

metformin ext-rel **(except generics for FORTAMET and GLUMETZA)**
metformin hcl

ANTIDIABETICS, BIGUANIDE/SULFONYLUREA COMBINATIONS

glipizide-metformin hcl

ANTIDIABETICS, DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITOR / BIGUANIDE COMBINATIONS

JENTADUETO **ST; PA****
JENTADUETO XR **ST; PA****

ANTIDIABETICS, DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS

TRADJENTA **ST; PA****

ANTIDIABETICS, INCRETIN MIMETIC AGENTS

OZEMPIC **ST, QL; PA****
RYBELSUS **ST, QL; PA****
TRULICITY **ST, QL; PA****
VICTOZA **ST, QL; PA****

ANTIDIABETICS, INCRETIN MIMETIC COMBINATION AGENTS

SOLIQUA **ST; PA****

ANTIDIABETICS, INSULIN

NOVOLIN **OTC**
BASAGLAR
FIASP
HUMULIN R U-500
LEVEMIR
NOVOLOG
NOVOLOG MIX
TRESIBA

ANTIDIABETICS, INSULIN SENSITIZER

pioglitazone hcl

ANTIDIABETICS, INSULIN SENSITIZER/BIGUANIDE COMBINATION

pioglitazone hcl-metformin hcl

ANTIDIABETICS, INSULIN SENSITIZER/SULFONYLUREA COMBINATION

pioglitazone hcl-glimepiride

ANTIDIABETICS, SODIUM-GLUC CO-TRANSPOR2 INHIB (SGLT2)/DPP-4 INHIBITOR/BIGUANIDE COMBINATIONS

TRIJARDY XR **ST; PA****

ANTIDIABETICS, SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITOR / BIGUANIDE COMBINATIONS

SYNJARDY **ST; PA****
SYNJARDY XR **ST; PA****
XIGDUO XR **ST; PA****

ANTIDIABETICS, SODIUM-GLUCOSE CO-TRANSPORTER

2(SGLT2) INHIBITOR/DPP-4 INHIBITOR COMBINATIONS

GLYXAMBI **ST; PA****

ANTIDIABETICS, SODIUM-GLUCOSE CO-TRANSPORTER 2(SGLT2) INHIBITORS

FARXIGA **ST; PA****
JARDIANCE **ST; PA****

ANTIDIABETICS, SULFONYLUREA

glimepiride
glipizide
glipizide ext-rel
glipizide xl

CALCIUM REGULATORS, BISPHOSPHONATES

alendronate sodium
ibandronate sodium
risedronate sodium

CALCIUM REGULATORS, PARATHYROID HORMONES

FORTEO **SP, PA, QL**
TYMLOS **SP, PA, QL**

CONTRACEPTIVES

desogestrel & ethinyl estradiol
desogestrel-ethinyl estradiol (biphasic)
desogestrel-ethinyl estradiol (triphasic)
drospirenone-ethinyl estradiol
ethynodiol diacet & eth estrad
levonorgestrel & eth estradiol
levonorgestrel-eth estradiol (triphasic)
levonorgestrel-ethinyl estradiol (91-day)
medroxyprogesterone acetate 150 mg/ml
norelgestromin/ethinyl estradiol - xulane
norethin acet & estrad-fe
norethindrone
norethindrone & eth estradiol
norethindrone & ethinyl estradiol-fe
norethindrone acet & eth estra
norethindrone-eth estradiol (triphasic)
norgestimate-ethinyl estradiol
norgestimate-ethinyl estradiol (triphasic)
norgestrel & ethinyl estradiol
ANNOVERA
ELLA
LO LOESTRIN FE
NUVARING

DIABETIC SUPPLIES

ACCU-CHEK AVIVA PLUS STRIPS AND KITS [1] **OTC**
ACCU-CHEK COMPACT PLUS STRIPS AND KITS [1] **OTC**
ACCU-CHEK GUIDE STRIPS AND KITS [1] **OTC**
ACCU-CHEK SMARTVIEW STRIPS AND KITS [1] **OTC**
BD INSULIN SYRINGES AND NEEDLES **OTC**
ONETOUCH ULTRA STRIPS AND KITS [1] **OTC**
ONETOUCH VERIO STRIPS AND KITS [1] **OTC**
DEXCOM CONTINUOUS GLUCOSE MONITORING SYSTEM **QL**
OMNIPOD 5 INSULIN INFUSION PUMP
OMNIPOD DASH INSULIN INFUSION PUMP
OMNIPOD INSULIN INFUSION PUMP
V-GO INSULIN INFUSION PUMP **QL**

ESTROGENS

estradiol
estradiol vaginal crm
estradiol/norethindrone
CLIMARA PRO
COMBIPATCH
IMVEXXY
VAGIFEM

HUMAN GROWTH HORMONES

GENOTROPIN **SP, PA**
GENOTROPIN MINIQUICK **SP, PA**
NORDITROPIN **SP, PA**

PHOSPHATE BINDER AGENTS

calcium acetate caps
sevelamer carbonate

PROGESTINS

medroxyprogesterone acetate
norethindrone acetate
progesterone, micronized
ENDOMETRIN

SELECTIVE ESTROGEN RECEPTOR MODULATORS

raloxifene hcl

THYROID AGENTS

levothyroxine sodium
liothyronine sodium

GASTROINTESTINAL

H2-RECEPTOR ANTAGONISTS

cimetidine
famotidine

PROTON PUMP INHIBITORS

lansoprazole delayed-rel **PA, QL**
omeprazole delayed-rel **PA, QL**
pantoprazole delayed-rel tabs **PA, QL**

GENITOURINARY

BENIGN PROSTATIC HYPERPLASIA

alfuzosin ext-rel
finasteride
tamsulosin hcl

URINARY ANTISPASMODICS

oxybutynin chloride
oxybutynin ext-rel
tolterodine tartrate
trospium

VAGINAL ANTI-INFECTIVES

clindamycin cream
metronidazole vaginal gel
terconazole vaginal

HEMATOLOGIC

ANTICOAGULANTS

enoxaparin sodium
warfarin sodium
ELIQUIS
ELIQUIS STARTER PACK
XARELTO
XARELTO STARTER PACK

PLATELET AGGREGATION INHIBITORS

clopidogrel bisulfate
dipyridamole
dipyridamole ext-rel/aspirin
prasugrel hcl

IMMUNOLOGIC AGENTS

AUTOIMMUNE AGENTS (SELF-ADMINISTERED), ALL OTHER CONDITIONS

ENBREL SOSY 50mg/ml **SP, PA, QL**
HUMIRA PNKT 80mg/0.8ml **SP, PA, QL**

AUTOIMMUNE AGENTS (SELF-ADMINISTERED), ANKYLOSING SPONDYLITIS

COSENTYX SOAJ **SP, PA, QL**
ENBREL SOLN **SP, PA, QL**
HUMIRA PSKT 40mg/0.4ml, 40mg/0.8ml **SP, PA, QL**
RINVOQ TB24 15mg **SP, PA, QL**

AUTOIMMUNE AGENTS (SELF-ADMINISTERED), CROHN'S DISEASE

HUMIRA PSKT 80mg/0.8ml **SP, PA, QL**
SKYRIZI SOCT **SP, PA, QL**
STELARA SUBCUTANEOUS SOLN **SP, PA, QL**

AUTOIMMUNE AGENTS (SELF-ADMINISTERED), NON-RADIOGRAPHIC AXIAL SPONDYLOARTHRITIS

CIMZIA **SP, PA, QL**
COSENTYX SOSY 75mg/0.5ml, 150mg/ml **SP, PA, QL**
RINVOQ TABS **SP, PA, QL**

AUTOIMMUNE AGENTS (SELF-ADMINISTERED), PSORIASIS

HUMIRA PNKT 40mg/0.8ml **SP, PA, QL**
OTEZLA TABS **SP, PA, QL**
SKYRIZI SOAJ; SOLN **SP, PA, QL**
STELARA SUBCUTANEOUS SOSY 45mg/0.5ml **SP, PA, QL**
TALTZ **SP, PA, QL**
TREMFYA SOPN **SP, PA, QL**

AUTOIMMUNE AGENTS (SELF-ADMINISTERED), PSORIATIC ARTHRITIS

COSENTYX SOSY 150mg/ml **SP, PA, QL**
ENBREL SOAJ **SP, PA, QL**
ENBREL SOCT **SP, PA, QL**
HUMIRA PNKT 40mg/0.8ml **SP, PA, QL**
HUMIRA PSKT 10mg/0.1ml, 20mg/0.2ml **SP, PA, QL**
OTEZLA TBPK **SP, PA, QL**
RINVOQ TB24 30mg **SP, PA, QL**
SKYRIZI PSKT; SOSY **SP, PA, QL**
STELARA SUBCUTANEOUS SOSY 90mg/ml **SP, PA, QL**
TREMFYA SOSY **SP, PA, QL**

AUTOIMMUNE AGENTS (SELF-ADMINISTERED), RHEUMATOID ARTHRITIS

ENBREL SOSY 25mg/0.5ml **SP, PA, QL**
HUMIRA PNKT 40mg/0.4ml, 80mg/0.8ml **SP, PA, QL**
KEVZARA **SP, PA, QL**
ORENCIA CLICKJECT **SP, PA, QL**
ORENCIA SUBCUTANEOUS **SP, PA, QL**
RINVOQ TB24 45mg **SP, PA, QL**
XELJANZ TABS 5mg **SP, PA, QL**
XELJANZ XR 11mg **SP, PA, QL**

AUTOIMMUNE AGENTS (SELF-ADMINISTERED), ULCERATIVE COLITIS

HUMIRA PNKT 40mg/0.8ml, 80mg/0.8ml **SP, PA, QL**
RINVOQ TABS **SP, PA, QL**
STELARA SUBCUTANEOUS MISC **SP, PA, QL**
XELJANZ SOLN **SP, PA, QL**
XELJANZ TABS 10mg **SP, PA, QL**
XELJANZ XR 22mg **SP, PA, QL**

OPHTHALMIC

ANTIGLAUCOMA

betaxolol hcl (ophth)
brimonidine 0.15%, 0.2%
dorzolamide hcl
dorzolamide hcl-timolol maleate
latanoprost
timolol maleate (ophth)

DRY EYE DISEASE

RESTASIS **PA, QL**
XIIDRA **PA, QL**

RESPIRATORY

ANAPHYLAXIS TREATMENT AGENTS

epinephrine (anaphylaxis) **QL; PA***
EPIPEN **QL; PA***
EPIPEN JR **QL; PA***
SYMJEPI **QL; PA***

ANTICHOLINERGIC/BETA AGONIST COMBINATIONS

ipratropium/albuterol inhalation soln **QL**
ANORO ELLIPTA **QL**
BEVESPI AEROSPHERE **QL**

ANTICHOLINERGICS

ipratropium inhalation solution **QL**
SPIRIVA **QL**
YUPELRI **QL**

BETA AGONISTS

albuterol inhalation soln **QL**
albuterol sulfate, cfc-free aerosol[2] **QL**
formoterol inhalation solution **QL**
levalbuterol nebulizer soln concentrate **QL**
levalbuterol, cfc-free aerosol **QL**
STRIVERDI RESPIMAT **QL**

LEUKOTRIENE RECEPTOR ANTAGONISTS

montelukast sodium

NASAL STEROIDS

flunisolide spray
fluticasone spray

STEROID INHALANTS

budesonide inh susp **QL; PA***
FLOVENT HFA **QL**

STEROID/BETA-AGONIST COMBINATIONS

ADVAIR DISKUS **QL**
SYMBICORT **QL**

TOPICAL

DERMATOLOGY, ACNE

clindamycin gel[2] **QL; PA***
clindamycin lotion **QL; PA***
clindamycin solution **QL; PA***
erythromycin gel 2% **QL; PA***
erythromycin soln **QL; PA***
erythromycin/benzoyl peroxide **QL; PA***
sulfacetamide lotion 10%
tretinoin **PA**

January 2023

FOR YOUR INFORMATION: This drug list represents a summary of prescription coverage. It is not all-inclusive and does not guarantee coverage. In most instances, a brand-name drug for which a generic product becomes available will require prior authorization or will no longer be covered upon release of the generic product to the market. Unless specifically indicated, drug list products will include all oral dosage forms, except for orally disintegrating formulations. This list represents brand products in CAPS, branded generics in upper- and lowercase *Italics*, and generic products in lowercase *italics*. Listed products may be available generically in certain strengths or dosage forms. Dosage forms on this list will be consistent with the category and use where listed. Log in to **www.carefirst.com/myaccount** to check coverage.

An exception process may exist for specific clinical or regulatory circumstances that require coverage of a removed medication.

^ 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).

1 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.

2 Listing does not include certain NDCs. Drug products are identified by unique numerical product identifiers, called National Drug Codes (NDC), which identify the manufacturer, strength, dosage form, formulation and package size.

This document contains references to brand-name prescription drugs that are trademarks or registered trademarks of pharmaceutical manufacturers. Listed products are for informational purposes only and are not intended to replace the clinical judgment of the prescriber. The document is subject to state-specific regulations and rules, including, but not limited to, those regarding generic substitution, controlled substance schedules, preference for brands and mandatory generics whenever applicable.

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