

2018 National Preferred Formulary New Exclusions

Below is a summary of the exclusions going into effect on January 1, 2018.

Multi-Source Brand Exclusions

The generic equivalents of the following brand-name medications are covered on the NPF. These generic medications meet strict standards and have been approved by the FDA. These generic products contain the same active ingredients as their corresponding brand-name medications, although they may have a different color or shape.

ABILIFY	PLAVIX
ACIPHEX	PREVACID
ADDERALL	PRISTIQ
ANDROGEL 1%	PROTONIX
ANUSOL-HC	PROVIGIL
ATACAND, ATACAND HCT	PROZAC
AZOR	PULMICORT RESPULES
BENICAR, BENICAR HCT	SEROQUEL, SEROQUEL XR
BUPAP	SINGULAIR
CYMBALTA	STRATTERA
CYTOMEL	TIKOSYN
EFFEXOR XR	TOBI SOLUTION
IMITREX	TRIBENZOR
INDERAL LA	VALIUM
INTUNIV	VALTREX
LEXAPRO	VYTORIN
LIBRAX	WELLBUTRIN SR
LIDODERM	XANAX, XANAX XR
LOVENOX	XENAZINE
LUNESTA	ZEGERID
MINASTRIN 24 FE	ZETIA
NASONEX	ZOLOFT
PLAQUENIL	ZYFLO CR

Single-Source Brand Exclusions

The following drug classes have new exclusions for 2018. Please note that product placement for Hepatitis C and treatment for Inflammatory Conditions are under consideration, and changes may occur based upon changes in market dynamics and new product launches. The full list of excluded products will be available on or before September 15, 2017.

Drug Class	Excluded Medications	Preferred Alternatives
Long-Acting Opioid Oral Analgesics	OPANA ER, OXYCODONE ER	hydromorphone ER, morphine sulfate ER, oxymorphone ER, HYSINGLA ER, NUCYNTA ER, OXYCONTIN
Transmucosal Fentanyl Analgesics	ABSTRAL*, FENTORA*, LAZANDA	fentanyl citrate lozenges
Estrogen and Estrogen Modifiers for Vaginal Symptoms	FEMRING	estradiol patches, estradiol tablets, yuvafem, ESTRACE Cream, ESTRING, PREMARIN Cream, PREMARIN Tablets
Somatostatin Analogs	SANDOSTATIN LAR DEPOT, SIGNIFOR LAR	SOMATULINE DEPOT
Irritable Bowel Syndrome and Chronic Constipation Agents	TRULANCE	AMITIZA, LINZESS
Proton Pump Inhibitors	ACIPHEX SPRINKLE, PREVACID SOLUTAB, PRILOSEC Suspension, PROTONIX Suspension	esomeprazole, lansoprazole, omeprazole, pantoprazole, rabeprazole, NEXIUM Packets
Granulocyte Colony Stimulating Factors	NEUPOGEN	GRANIX, ZARXIO
Osteoporosis Therapy	FORTEO	alendronate, ibandronate, risedronate, zoledronic acid, TYMLOS
Antiglaucoma Drugs (Beta-Adrenergic Blockers)	ISTALOL*, TIMOPTIC OCUDOSE	betaxolol drops, levobunolol drops, timolol drops, ALPHAGAN P 0.1%, COMBIGAN
Ophthalmic Non-Steroidal Anti-Inflammatory Drugs (NSAIDs)	ACUVAIL*, NEVANAC	bromfenac drops, diclofenac drops, ketorolac drops, ILEVRO, PROLENSA
Renal Disease—Phosphate Binders	FOSRENOL, RENAGEL	sevelamer carbonate, PHOSLYRA, VELPHORO
Respiratory—Epinephrine Auto-Injector Systems	AUVI-Q*, EPINEPHRINE AUTO-INJECTOR (by A-S Medication, Impax & Lineage)	EPINEPHRINE AUTO-INJECTOR (by Mylan), EPIPEN, EPIPEN JR.

*Current 2017 exclusion in this class