

Prescribing Drugs on Formulary Saves Patients Money

We value your commitment to providing high-quality care to our members and would like your assistance with using our medication formulary when prescribing medications.

Florida Blue works hard to maintain a clinically appropriate formulary that is approved by a Pharmacy and Therapeutic Committee and offers plenty of alternatives within each drug category. Non-formulary or excluded drugs often aren't more effective when compared to their covered alternatives and many times cost more overall. They also may not be covered under your patient's health plan or covered at a higher cost share, resulting in the patient paying more out of pocket.

Tools to Help You

Our [Florida Blue website](#) provides you with the most up-to-date information on our pharmacy programs. In addition to the formularies included in the medication guides, we have a variety of other information to help you do business with us.

- On the home page, click *Providers* at the top, then [Tools & Resources](#).
- The left navigation column shows various resources, including [Medical & Pharmacy Policies and Guidelines](#). This page provides pharmacy-specific information, including:
 - [List of Medications Not Covered](#)
 - Forms for Pharmacy Utilization Management programs:
 - [Prior Authorization](#)
 - [Responsible Steps and Quantity](#)
 - [Medication Guides](#). Based on the patient's insurance card, you will be able to determine which medication guide to use for a list of covered medications.

Notifications to updates to formulary and other medication coverage changes are included in [Bluemail](#) and our [BlueLine](#) provider newsletter.

Top Excluded Drugs and Alternatives Available for Non-Medicare Patients

Each of our plans has its own medication guide that includes a formulary of the drugs covered. There are certain medications excluded from these medication guides across the board. Below is a chart of our top-excluded drugs with the corresponding alternatives available for selection.

| Excluded (Not Covered) Drugs | Alternative Drugs* |
|------------------------------|--|
| Proventil HFA inhaler | ProAir HFA inhaler, Ventolin HFA inhaler |
| Aczone topical gel | adapalene topical cream/gel, benzoyl peroxide (Rx and OTC), Claravis, clindamycin HCl capsule, clindamycin phosphate topical gel, clindamycin phosphate-benzoyl peroxide topical gel, doxycycline monohydrate tablet/capsule (excludes monohydrate 75mg and 150mg capsule), ethinyl estradiol-norgestimate tablet, isotretinoin, minocycline, Tazorac, tretinoin topical gel |

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| Duexis tablet | The following: acetaminophen, diclofenac, ibuprofen (OTC and Rx), indomethacin, meloxicam, or naproxen (OTC and Rx); in combination with the following: cimetidine, famotidine, lansoprazole, misoprostol, omeprazole (OTC and Rx), pantoprazole, Prevacid OTC, rabeprazole, or ranitidine |
| Lidocaine 5% ointment, Lidocaine HCl 3% lotion, Lidocaine HC kit, Lidocaine/Prilocaine kit, Pliaglis | benzocaine 20% ointment/gel (OTC), lidocaine 2% gel/viscous solution, lidocaine 3, 4, and 5% cream, lidocaine 4% topical solution, lidocaine-hydrocortisone 2.8%-0.55% gel, lidocaine/prilocaine 2.5%/2.5%cream |
| Pennsaid 2% solution | acetaminophen, diclofenac DR/ER/IR tablet, diclofenac 1.5% topical solution, duloxetine, ibuprofen (OTC and Rx), indomethacin, meloxicam, naproxen (OTC and Rx), tramadol IR tablet, Voltaren 1% gel |
| diclofenac 3% gel or Solaraze 3% gel | fluorouracil 5% cream, imiquimod 5%, Picato gel, tretinoin cream |
| mometasone furoate nasal spray | cetirizine (OTC), cromolyn sodium, desloratadine, fluticasone nasal, loratadine (OTC), montelukast, triamcinolone nasal, zafirlukast |
| Dexilant capsule | cimetidine (Rx and OTC), esomeprazole (Rx), famotidine (Rx and OTC), lansoprazole (Rx), Nexium 24HR (OTC), omeprazole (Rx and OTC), pantoprazole, Prevacid OTC, Prilosec OTC, rabeprazole, ranitidine (RX and OTC), sucralfate |
| doxycycline hyclate dr tablets and capsules | adapalene topical cream/gel, benzoyl peroxide (Rx and OTC), Claravis, clindamycin HCl capsule, clindamycin phosphate topical gel, clindamycin phosphate-benzoyl peroxide topical gel, doxycycline monohydrate tablet/capsule (excluding 75 and 150 mg capsule), ethinyl estradiol-norgestimate tablet, isotretinoin, minocycline, Tazorac, tretinoin topical gel |
| butalbital/acetaminophen/ caffeine with 300mg of acetaminophen capsule | acetaminophen (OTC), acetaminophen-aspirin-caffeine (OTC), acetaminophen-isometheptene-dichloralphenazone, almotriptan, butalbital combination products with 325 mg of acetaminophen, dihydroergotamine injection, ibuprofen (OTC and Rx), naproxen (OTC and Rx), naratriptan, rizatriptan, sumatriptan oral and injectable, tramadol IR tablets, zolmitriptan |
| Dymista nasal spray | cetirizine (OTC), cromolyn sodium, desloratadine, fluticasone nasal, loratadine (OTC), montelukast, triamcinolone nasal, zafirlukast |
| Auvi-Q injection | Epipen, Epipen Jr, epinephrine injection auto-injector |
| Jublia 10% topical solution | ciclopirox nail lacquer, griseofulvin, itraconazole caps, terbinafine tablet, |

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|---|--|
| Onexton topical | adapalene topical cream/gel, benzoyl peroxide (Rx and OTC), Claravis, clindamycin HCl capsule, clindamycin phosphate topical gel, clindamycin phosphate-benzoyl peroxide topical gel, doxycycline monohydrate tablet/capsule (excludes monohydrate 75mg and 150mg capsule), ethinyl estradiol-norgestimate tablet, isotretinoin, minocycline, Tazorac, tretinoin topical gel |
| cetirizine syrup | cetirizine (OTC), chlorpheniramine (OTC), desloratadine tablet, diphenhydramine (OTC), fexofenadine (OTC), fexofenadine-pseudoephedrine (OTC), hydroxyzine, levocetirizine, loratadine (OTC), loratadine-pseudoephedrine (OTC), montelukast, zafirlukast |
| fluocinonide 0.1% cream or Vanos cream | alclometasone, betamethasone, clobetasol, desonide, fluocinolone, fluocinonide 0.05%, fluticasone cream/lotion, halobetasol, hydrocortisone (OTC and Rx), mometasone, triamcinolone |
| Fortamet, Glumetza, metformin ER (generics for Fortamet and Glumetza) tablets | acarbose, colesevelam, glimepiride, glipizide, glyburide, Januvia, Jardiance, metformin, metformin ER (generic Glucophage XR), miglitol, nateglinide, pioglitazone, pioglitazone, repaglinide, rosiglitazone |
| Adzenys XR-ODT tablet | amphetamine, amphetamine-dextroamphetamine, atomoxetine, clonidine ER tablet, Concerta, dextroamphetamine, dexamethylphenidate, dexamethylphenidate ER, guanfacine ER, methylphenidate ER capsule, methylphenidate solution/tablet |
| Belsomra tablet | diphenhydramine (OTC), doxepin, doxylamine (OTC), estazolam, eszopiclone, hydroxyzine, oxazepam, Rozerem, temazepam, trazodone, zaleplon, zolpidem, zolpidem ER |
| levalbuterol tartrate HFA inhaler | albuterol solution for inhalation, levalbuterol solution for inhalation, ProAir HFA inhaler, Ventolin HFA inhaler |
| *Please note, these alternative drugs may still require Prior Authorization, Step Therapy or Quantity Limits clinical review. | |
| OTC alternative drugs are listed, but may not be covered on member's prescription benefits plan | |