



# Portfolio – Preferred Drug List (PDL)

October 1, 2023

## What is the MedImpact Preferred Drug List (PDL)?

The PDL is a list of commonly prescribed medications within select classes of drugs covered by your prescription drug plan. The PDL was created to promote clinically appropriate utilization of medications in a cost-effective manner.

## Are the medications listed on the PDL the only drugs my physician can prescribe for me?

No. The PDL is a select list of commonly prescribed drugs and does not represent all preferred formulary medications available under your plan. The PDL does not limit your prescription coverage but is provided to encourage the use of preferred generic and brand name drugs within major therapeutic drug classes (e.g., Cardiovascular, Diabetes, etc.). For complete formulary information, visit your Plan website or refer to the phone number listed on your benefit card.

## How do I get the greatest benefit from my PDL?

- **Print out the Preferred Drug List and take it with you when visiting your physician.**
- Ask your physician to prescribe generic medications whenever possible.
- When there is more than one brand name drug available for your medical condition, ask your physician to prescribe a preferred drug listed on your PDL. This should also reduce your copays.

Please note: The MedImpact PDL is subject to change due to updates and availability of generic alternatives. Please refer to the Rx Plus Pharmacy web site at [www.myadventhealthrx.com](http://www.myadventhealthrx.com) for the most up-to-date PDL. The PDL is not a complete list of formulary drugs; therefore, you should refer to your plan for a complete drug list and details of any additional coverage or quantity limit restrictions that may apply to certain medications.

PDL DRUG CATEGORY	GENERIC	PREFERRED BRAND	NON-PREFERRED BRAND
<b>ALLERGY</b>			
NASAL CORTICOSTEROIDS	budesonide flunisolide fluticasone mometasone	Qnasl (ST) Xhance (ST)	Beconase AQ (ST) Dymista (ST) Omnaris (ST) Zetonna (ST)
OPHTHALMIC ANTIHISTAMINES	azelastine epinastine olopatadine	Alomide (ST)	Bepreve (ST) Emadine (ST) Lastacaft (ST) Pazeo (ST)
<b>BEHAVIORAL HEALTH</b>			
ADHD AGENTS	amphetamine sulfate dextroamphetamine/ amphetamine dexmethylphenidate dextroamphetamine ER dextroamphetamine methylphenidate	Adderall XR Concerta Mydayis Vyvanse	Adhansia XR (ST) Adzenys ER (ST) Adzenys XR-ODT (ST) Aptensio XR (ST) Azstarys (ST) Cotempla XR-ODT (ST) Daytrana (ST) Dyanavel XR (ST) Evekeo ODT (PA) Jornay PM (ST) Qelbree (ST) Quillichew (ST) Quillivant (ST) Xelstryl (ST) Zenzedi (ST)
ANTIPSYCHOTICS	aripiprazole/ODT/oral solution asenapine	Rexulti (ST)	Abilify Mycite Caplyta

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	clozapine/ODT lurasidone olanzapine paliperidone quetiapine IR/XR risperidone ziprasidone	Vraylar	Fanapt (ST) Lybalvi (PA) Secuado (ST) Versacloz (ST)
<b>CARDIOVASCULAR</b>			
LIPID-LOWERING AGENTS	atorvastatin ezetimibe fluvastatin IR/ER lovastatin IR/ER pravastatin rosuvastatin simvastatin tablet simvastatin/ezetimibe	Livalo	Altoprev (ST) AtorvaliqEzallor Sprinkle (PA) Flolipid (PA)
ANTICOAGULANTS	dabigatran	Eliquis Xarelto	Bevyxxa Savaysa (ST)
PCSK9 INHIBITORS		Praluent (ST) Repatha (ST)	
ACL INHIBITORS		Nexletol (ST) Nexlizet (ST)	
<b>DERMATOLOGY</b>			
ACTINIC KERATOSIS AGENTS	diclofenac 3% fluorouracil 0.5% fluorouracil 5%	Tolak Klisyri	Carac 0.5% (PA) Fluoroplex (PA)
<b>DIABETES</b>			
DPP-4 INHIBITORS		Januvia Janumet Janumet XR	Jentaduetto Jentaduetto XR (ST) Kazano (ST) Kombiglyze XR (ST) Nesina (brand and authorized generic) (ST) Onglyza (ST) Oseni (ST) Tadjenta (ST)
SGLT-2 INHIBITORS		Farxiga Jardiance Synjardy Synjardy XR Xigduo XR	Inpefa (ST) Invokana (ST) Invokamet (ST) Invokamet XR (ST) Segluromet (ST) Steglatro (ST)
DPP-4 INHIBITOR AND SGLT-2 INHIBITOR COMBINATIONS		Glyxambi Trijardy XR	Qtem (ST) Steglujan (ST)
GLP-1 AGONISTS		Bydureon (ST) Bydureon BCise (ST) Byetta (ST) Mounjaro (PA/ST) Ozempic (PA/ST) Rybelsus (PA/ST) Trulicity (PA/ST) Victoza (ST)	Adlyxin (PA)



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INSULINS, RAPID-ACTING		Humalog Lyumjev	Admelog (ST) Afrezza (PA) Apidra (ST) Fiasp (ST) Novolog (ST)
INSULINS, SHORT-ACTING		Humulin	Novolin (ST)
INSULINS, LONG-ACTING		Levemir Semglee (yfgn) Tresiba	Basaglar (ST) Toujeo (ST)
INSULIN (LONG-ACTING) AND GLP-1 AGONIST COMBINATIONS		Soliqua Xultophy	
DIABETIC SUPPLIES		True Metrix (QL) BD insulin syringes BD pen needles	All non-True Metrix (e.g., Contour, Breeze, OneTouch brand) (QL, ST)
<b>ENDOCRINE</b>			
ANDROGENS	me-testosterone (PA) testosterone cypionate (PA) testosterone enanthate (PA) testosterone gel (PA) testosterone 1% solution (PA)		Androderm patch (PA) Jatenzo (PA) Kyzatrex (PA) Methitest (PA) Natesto (PA) Striant (PA) Tlando (PA) Xyosted (PA)
ESTROGENS/ESTROGEN MODIFIERS	estradiol gel estradiol patch estradiol/norethindrone estropipate medroxyprogesterone norethindrone ac-eth progesterone, micronized	Combipatch Crinone Duavee Premarin Premphase Prempo	Bijuva (ST) Climara Pro Elestrin (ST) Estring (ST) Estrogel (ST) Femring (ST) Imvexxy (ST) Intrarosa (ST) Menest Osphena (ST) Prefest
ELECTROLYTE REGULATION		Lokelma	Veltassa (PA)
OSTEOPOROSIS AGENTS	alendronate calcitonin, synthetic ibandronate raloxifene risedronate risedronate DR		Teriparatide (PA)
<b>GASTROINTESTINAL</b>			
IRRITABLE BOWEL & CONSTIPATION	Lubiprostone	Linzess Movantik	Ibsrela (PA) Motegrity (ST) Symproic (ST) Trulance (ST) Zelnorm (ST)
INFLAMMATORY BOWEL DISEASE AGENTS	balsalazide disodium mesalamine DR mesalamine ER	Lialda Pentasa 250mg	Dipentum (ST)



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PANCREATIC ENZYMES	sulfasalazine	Creon Zenpep	Pancreaze Pertzye
<b>GENITOURINARY</b>			
DRUGS TO TREAT IMPOTENCY	sildenafil tadalafil vardenafil		Stendra
<b>INFLAMMATORY DISEASE</b>			
AUTOIMMUNE AGENTS	methotrexate	Otrexup	Rasuvo (ST) Xatmep (ST)
<b>PAIN MANAGEMENT</b>			
OPIOIDS - FENTANYL	fentanyl citrate		
HEADACHE/MIGRAINE TREATMENT	Almotriptan (ST) Eletriptan (ST) Frovatriptan (ST) naratriptan rizatriptan sumatriptan zolmitriptan (ST)	Aimovig (PA) Emgality (PA) Nurtec ODT (PA) Qulipta (PA) Reyvow (PA) Ubrelyv (PA)	Ajovy (PA) Trudhesa (ST) Zavzpret (PA) Zomig Nasal (ST)
<b>RESPIRATORY</b>			
BETA-AGONISTS, SHORT-ACTING (SABA)	albuterol HFA levalbuterol tartrate HFA		Proair HFA (ST)
INHALED CORTICOSTEROIDS (ICS)		Arnuity Ellipta Flovent Diskus/HFA	Alvesco (ST) Armonair RespiClick (ST) Armonair DigiClick (ST) Asmanex (ST) Pulmicort (ST) Qvar Redihaler (ST)
INHALED CORTICOSTEROID/LONG-ACTING BETA AGONIST (ICS/LABA) COMBINATIONS		Advair Diskus/HFA Breo Ellipta Symbicort	Airduo (brand and authorized generic) (ST) Airduo RespiClick (ST) Airduo DigiClick (ST) Dulera (ST)
INHALED LONG-ACTING BETA AGONIST (LABA)		Perforomist Serevent Diskus Striverdi Respimat	Arcapta (ST) Brovana (ST)
INHALED LONG-ACTING MUSCARINIC ANTAGONISTS (LAMA)		Spiriva Handihaler Spiriva Respimat	Incruse Ellipta (ST) Lonhala Magnair (ST) Seebri Neohaler (ST) Tudorza Pressair (ST) Yupelri (ST)
INHALED LONG-ACTING MUSCARINIC ANTAGONISTS AND LONG-ACTING BETA AGONIST (LAMA/LABA) COMBINATIONS		Anoro Ellipta Stiolto Respimat	Duaklir Pressair (ST) Utibron Neohaler (ST) Bevespi Aerosphere (ST)
INHALED CORTICOSTEROID, LONG-ACTING MUSCARINIC ANTAGONIST, AND LONG-ACTING BETA AGONIST (ICS/LAMA/LABA) COMBINATIONS		Trelegy Ellipta Breztri Aerosphere	
ANTI-LEUKOTRIENES	montelukast zafirlukast		



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**A recommended prescribing guideline may apply (denoted throughout the document using the following symbols):**

<b>AGE</b>	Age Edit	Coverage may depend on patient age.
<b>CU</b>	Concurrent Use Edit	Coverage or lack thereof may depend upon concurrent use of another drug
<b>NC</b>	Not covered	Excluded from coverage.
<b>PA</b>	Prior Authorization	Requires specific physician request process.
<b>QL</b>	Quantity Limit	Coverage may be limited to specific quantities per prescription and/or time period.
<b>ST</b>	Step Therapy	Coverage depends on previous use of another drug