

# Hyperinflation Management

## Medications Requiring Prior Authorization for Medical Necessity

Below is a list of medicines by drug class that will not be covered without a prior authorization for medical necessity. If you continue using one of these drugs without prior approval for medical necessity, you may be required to pay the full cost.

If you are currently using one of the drugs requiring prior authorization for medical necessity, ask your doctor to choose one of the generic or brand formulary options listed below.

<b>Category *</b> <b>Drug Class</b>	<b>Drugs Requiring Prior Authorization for Medical Necessity <sup>1</sup></b>	<b>Formulary Options</b>
<b>Allergies</b> <b>Antihistamines</b>	<i>Dexchlorpheniramine</i> <i>Diphen Elixir (NDC<sup>^</sup> 69067009204 only)</i> <i>RyClora</i> <i>CARBINOXAMINE TABLET 6 MG</i>	levocetirizine
<b>Anti-convulsants</b>	topiramate ext-rel capsule (generics for QUDEXY XR only)	<i>carbamazepine, carbamazepine ext-rel, clobazam, divalproex sodium, divalproex sodium ext-rel, gabapentin, lamotrigine, lamotrigine ext-rel, levetiracetam, levetiracetam ext-rel, oxcarbazepine, phenobarbital, phenytoin, phenytoin sodium extended, primidone, rufinamide, tiagabine, topiramate, valproic acid, zonisamide, FYCOMPA, OXTELLAR XR, TROKENDI XR, VIMPAT, XCOPRI</i>
	ZONEGRAN	<i>carbamazepine, carbamazepine ext-rel, divalproex sodium, divalproex sodium ext-rel, gabapentin, lamotrigine, lamotrigine ext-rel, levetiracetam, levetiracetam ext-rel, oxcarbazepine, phenobarbital, phenytoin, phenytoin sodium extended, primidone, tiagabine, topiramate, valproic acid, zonisamide, FYCOMPA, OXTELLAR XR, TROKENDI XR, VIMPAT, XCOPRI</i>
<b>Anti-infectives, Antibacterials</b> <b>Erythromycins/Macrolides</b>	E.E.S GRANULES ERYPED	erythromycins
<b>Anti-infectives, Antibacterials</b> <b>Tetracyclines</b>	<i>CoreMino</i> <i>doxycycline hydiate delayed-rel tablet 50 mg</i> <i>doxycycline hydiate delayed-rel tablet 100 mg</i> <i>doxycycline hydiate delayed-rel tablet 200 mg</i> <i>doxycycline hydiate tablet 50 mg (NDC<sup>^</sup> 72143021160 only)</i> <i>doxycycline hydiate tablet 75 mg</i> <i>doxycycline hydiate tablet 100mg</i> <i>doxycycline hydiate tablet 150 mg</i> <i>doxycycline monohydrate capsule 75 mg</i> <i>doxycycline monohydrate capsule 150 mg</i> <i>minocycline ext-rel</i> <i>Mondoxyne NL capsule 75 mg</i> <i>Okebo</i> <i>MINOCIN</i>	<i>doxycycline hydiate tablet 20 mg, doxycycline hydiate capsule, minocycline, tetracycline</i>



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<b>Anti-infectives, Anti-bacterials Miscellaneous</b>	MACRODANTIN <i>nitrofurantoin suspension (NDC<sup>^</sup> 70408023932 only)</i>	<i>Nitrofurantoin</i> (except NDC <sup>^</sup> 70408023932)
<b>Anti-infectives, Anti-fungals</b>	<i>flucytosine capsule 500 mg</i>	<i>fluconazole</i>
	<i>posaconazole delayed-rel tablet</i>	<i>fluconazole, itraconazole</i>
	<i>luliconazole CRE</i>	<i>ciclopirox, clotrimazole, econazole, ketoconazole cream 2%, NAFTIN</i>
<b>Anti-infectives, Anti-virals Herpes *</b>	<i>acyclovir cream</i>	<i>acyclovir capsule, acyclovir tablet, valacyclovir</i>
<b>Anti-inflammatory Steroidal, Ophthalmic</b>	PRED FORTE FML LIQUIFILM	<i>dexamethasone, loteprednol, prednisolone acetate 1%, DUREZOL, FML FORTE, FML S.O.P., MAXIDEX, PRED MILD</i>
<b>Asthma *</b> <b>Leukotriene Modulators</b>	<i>zileuton ext-rel SINGULAIR</i>	<i>montelukast, zafirlukast</i>
<b>Cancer Prostate *</b> <b>Hormonal Agents, Antiandrogens</b>	<i>NILANDRON</i>	<i>abiraterone, bicalutamide, XTANDI, YONSA</i>
<b>Cardiovascular Anti-arrhythmics</b>	BETAPACE BETAPACE AF	<i>sotalol</i>
<b>Cardiovascular Anti-lipidemics Fibrates</b>	<i>fenofibrate tablet 120 mg fenofibrate capsule 50 mg fenofibrate capsule 130 mg fenofibrate tablet 40 mg FENOGLIDE TABLET 120 MG</i>	<i>fenofibrate</i> (except <i>fenofibrate capsule 50 mg, 130 mg; fenofibrate tablet 40 mg, 120 mg</i> ), <i>fenofibric acid delayed-rel</i>
<b>Cardiovascular Anti-lipidemics Niacins</b>	<i>niacin tablet 500 mg Niacor</i>	<i>niacin ext-rel</i>
<b>Cardiovascular Digitalis Glycosides</b>	<i>LANOXIN TABLET (125 MCG and 250 MCG only)</i>	<i>digoxin</i>
<b>Cardiovascular Diuretics</b>	<i>DYRENIUM</i>	<i>amiloride, triamterene</i>
<b>Cardiovascular Nitrates</b>	<i>isosorbide dinitrate 40 mg</i>	<i>isosorbide dinitrate</i> (except <i>isosorbide dinitrate 40 mg</i> ), <i>isosorbide mononitrate</i>
<b>Cardiovascular Calcium Channel Blocker / Nonsteroidal Anti-inflammatory Drugs (NSAIDs) Combinations</b>	<i>CONSENSI</i>	<i>amlodipine WITH celecoxib</i>
<b>Carnitine Deficiency</b>	<i>CARNITOR CARNITOR SF</i>	<i>levocarnitine</i>

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<b>Depression *</b> <b>Antidepressants, Selective Serotonin Reuptake Inhibitors (SSRIs)</b>	fluoxetine tablet 60 mg	citalopram, escitalopram, fluoxetine (except fluoxetine tablet 60 mg, fluoxetine tablet [generics for SARAFEM]), paroxetine HCl, paroxetine HCl ext-rel (except NDC <sup>^</sup> 60505367503), sertraline, TRINTELLIX
<b>Depression and/or Schizophrenia *</b> <b>Antipsychotics, Atypicals</b>	FANAPT	ariPIPRAZOLE, clozapine, olanzapine, quetiapine, quetiapine ext-rel, risperidone, ziprasidone, LATUDA, VRAYLAR
<b>Depression/Antidepressants* Miscellaneous Agents</b>	bupropion ext-rel tablet 450 mg	bupropion, bupropion ext-rel (except bupropion ext-rel tablet 450 mg)
<b>Dermatology Acne *</b>	clindamycin gel (NDC <sup>^</sup> 68682046275 only) VANOXIDE-HC	adapalene, benzoyl peroxide, clindamycin gel (except NDC <sup>^</sup> 68682046275), clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, EPIDUO, ONEXTON
<b>Dermatology Anti-psoriasis</b>	calcipotriene cream calcitriol ointment VECTICAL	calcipotriene ointment, calcipotriene solution
	calcipotriene-betamethasone	calcipotriene ointment or calcipotriene solution WITH desoximetasone, (except desoximetasone ointment 0.05%), fluocinonide (except fluocinonide cream 0.1%) or BRYHALI
<b>Dermatology Atopic Dermatitis *</b>	doxepin cream	desonide, hydrocortisone, pimecrolimus, tacrolimus, EUCRISA
<b>Dermatology Scars</b>	CICATRACE POLYTOZA SCARSILK PAD SILIVEX SILTREX	Consult doctor
<b>Dermatology Seborrheic Dermatitis *</b>	ketoconazole foam 2% Ketodan	ketoconazole shampoo 2%, selenium sulfide lotion 2.5%
<b>Dermatology Seborrheic Dermatitis *</b>	XOLEGEL	ciclopirox, ketoconazole cream 2%
<b>Dermatology Skin Inflammation and Hives * Corticosteroids</b>	flurandrenol cream flurandrenolide lotion (NDC <sup>^</sup> 24470092112 only) hydrocortisone 1% in absorbable (NDCs <sup>^</sup> 69499032210, 69499034325 only) NEO SYNALAR cream / kit NOLIX cream / lotion	hydrocortisone 1% in absorbable (except NDCs <sup>^</sup> 69499032210, 69499034325)
	fluocinonide cream 0.1%	clobetasol cream
	clorcortolone cream desoximetasone ointment 0.05% flurandrenolide ointment	hydrocortisone butyrate cream, hydrocortisone butyrate ointment, hydrocortisone butyrate solution,

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	<i>hydrocortisone butyrate lipophilic cream 0.1%</i> <i>hydrocortisone butyrate lotion</i> <i>triamcinolone aerosol spray</i> <i>CORDRAN OINTMENT</i> <i>triamcinolone ointment 0.05%</i> <i>Trianex</i>	<i>mometasone, triamcinolone cream, triamcinolone lotion, triamcinolone ointment (except triamcinolone ointment 0.05%)</i>
	<i>APEXICON E</i> <i>diflorasone cream</i> <i>diflorasone ointment</i> <i>halcione cream</i> <i>PSORCON</i>	<i>Desoximetasone, (except desoximetasone ointment 0.05%), fluocinonide (except fluocinonide cream 0.1%), BRYHALI</i>
<b>Dermatology</b> Warts	VEREGEN	<i>imiquimod</i>
<b>Dermatology</b> Wound Care Products	<i>Alevicyn solution</i> <i>ALEVICYN GEL</i> <i>ALEVYICYN KIT</i> <i>ALEVICYN SG</i>	<i>desonide, hydrocortisone</i>
	<i>mupirocin cream</i>	<i>gentamicin, mupirocin ointment</i>
<b>Dermatology</b> Miscellaneous Skin Conditions	<i>ALCORTIN A</i> <i>ATOPADERM</i> <i>BENSAL HP</i> <i>NOVACORT</i> <i>SYNERDERM</i>	<i>desonide, hydrocortisone</i>
	<i>oxiconazole (NDCs^ 00168035830, 51672135902 only)</i>	<i>ciclopirox, clotrimazole, econazole, ketoconazole cream 2%, luliconazole</i>
<b>Diabetes *</b> Biguanides	<i>metformin ext-rel (generics FORTAMET and GLUMETZA)</i>	<i>metformin, metformin ext-rel (except generic FORTAMET or GLUMETZA)</i>
<b>Dietary Supplements</b>	<i>FOSTEUM</i> <i>FOSTEUM PLUS</i>	<i>alendronate, ibandronate, risedronate</i>
	<i>DaVtie Tab</i> <i>Dexifol</i> <i>Folika-T</i> <i>Genicin Vita-S</i> <i>HylaVite</i> <i>Lorid</i> <i>TronVite</i> <i>Xvite</i> <i>FERIVA 21/7</i> <i>FOLIC-K</i> <i>FOLIKA-V</i> <i>FOLVIK-D</i> <i>NICAPRIN</i> <i>NICAZEL</i> <i>NICAZEL FORTE</i> <i>NICOMIDE</i> <i>OMNIVEX</i> <i>ORTHO DF</i> <i>RHEUMATE</i> <i>RIBOZEL</i> <i>TALIVA</i>	<i>folic acid</i>

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	XYZBAC ZYVIT	
	Activite Vitasure Folvite-D NICADAN	folic acid, folic acid-vitamin B6-vitamin B12
	PRODIGEN VASCULERA	Consult doctor
<b>Erectile Dysfunction *</b> <b>Phosphodiesterase Inhibitors</b>	STENDRA	<i>sildenafil, tadalafil</i>
<b>Endocrine and Metabolic Agents</b>	PROMETRIUM	<i>medroxyprogesterone; progesterone, micronized</i>
<b>Gastrointestinal Anticholinergics</b>	chlordiazepoxide-clidinium (NDCs^ 11534019701, 42494040901, 51293069601, 51293069610, 67877073101, 70700018501 only) hyoscyamine sulfate ext-rel Oscimin SR Symax-SR GLYCOPYRROLATE TABLET 1.5 MG	<i>dicyclomine</i>
<b>Gastrointestinal Antidiarrheals</b>	ENTERAGAM	<i>alosetron, VIBERZI, XIFAXAN 550 MG</i>
	MYTESI	<i>diphenoxylate-atropine, loperamide</i>
<b>Gastrointestinal Laxatives</b>	<i>lactulose pak</i>	<i>lactulose solution</i>
<b>Gastrointestinal Probiotics</b>	PROVAD ZELAC	Consult doctor
<b>Gastrointestinal Proton Pump Inhibitors (PPIs)</b>	omeprazole-sodium bicarbonate pantoprazole delayed-rel suspension ACIPHEX ACIPHEX SPRINKLE NEXIUM PREVACID PRILOSEC POWDER PROTONIX ZEGERID	<i>Esomeprazole delayed-rel, lansoprazole delayed-rel, omeprazole delayed-rel, pantoprazole delayed-rel, DEXILANT</i>
<b>Gastrointestinal Dietary Supplement</b>	LACTOJEN CAP	Consult doctor
<b>Gastrointestinal Ulcer Treatment</b>	<i>sucralfate suspension</i>	<i>sucralfate tablet</i>
<b>Genitourinary Interstitial Cystitis</b>	RIMSO-50	Consult doctor

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<b>High Blood Pressure *</b> Beta-blocker Combinations	DUTOPROL	<i>metoprolol succinate ext-rel WITH hydrochlorothiazide</i>
<b>Inflammatory Bowel Disease (IBD)</b> Ulcerative Colitis * Aminosalicylates	COLAZAL <i>mesalamine delayed-rel tablet 800 mg</i> DELZICOL LIALDA	<i>balsalazide, mesalamine delayed-rel (except mesalamine delayed-rel tablet 800 mg), mesalamine ext-rel, sulfasalazine, sulfasalazine delayed-rel, ASACOL HD, PENTASA</i>
<b>Kidney Disease *</b> Phosphate Binders	<i>lanthanum carbonate</i>	<i>calcium acetate, sevelamer carbonate, PHOSLYRA, VELPHORO</i>
<b>Musculoskeletal</b>	<i>carisoprodol chlorzoxazone 250 mg chlorzoxazone 375 mg chlorzoxazone 750 mg cyclobenzaprine ext-rel capsule cyclobenzaprine tablet 7.5 mg Fexmid Lorzone metaxalone 400 mg methocarbamol 500 mg (NDC<sup>^</sup> 69036091010 only) methocarbamol 750 mg (NDCs<sup>^</sup> 69036093090, 70868090190 only) orphenadrine-aspirin-caffeine Orphengesic Forte AMRIX NORGESIC FORTE</i>	<i>cyclobenzaprine (except cyclobenzaprine tablet 7.5 mg)</i>
<b>Ophthalmic Glaucoma</b>	<i>bimatoprost solution 0.03%</i>	<i>latanoprost, travoprost, LUMIGAN, ZIOPTAN</i>
<b>Osteoporosis *</b>	<i>MIACALCIN INJECTION</i>	<i>alendronate, calcitonin-salmon, ibandronate, risedronate, FORTEO, PROLIA, TYMLOS</i>
	<i>MIACALCIN NASAL SPRAY</i>	<i>calcitonin-salmon</i>
<b>Pain</b> <b>Headache*</b>	<i>Bupap butalbital-acetaminophen tablet 50-300 mg butalbital-acetaminophen (NDC<sup>^</sup> 69499034230 only)</i>	<i>diclofenac sodium, ibuprofen, naproxen (except CR, susp)</i>
	<i>dihydroergotamine spray ergotamine-caffeine Migergot CAFERGOT</i>	<i>eletriptan, naratriptan, rizatriptan, sumatriptan, zolmitriptan, NURTEC ODT, ONZETRA XSAIL, REYVOW, UBRELVY, ZEMBRACE SYMTOUCH, ZOMIG NASAL SPRAY</i>
	<i>sumatriptan-naproxen TrexiMet</i>	<i>diclofenac sodium, ibuprofen or naproxen (except naproxen CR or naproxen suspension) WITH eletriptan, naratriptan, rizatriptan, sumatriptan, zolmitriptan, NURTEC ODT, ONZETRA XSAIL, REYVOW, UBRELVY, ZEMBRACE SYMTOUCH or ZOMIG NASAL SPRAY</i>
	<i>LAZANDA</i>	<i>fentanyl transmucosal lozenge, SUBSYS</i>

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<b>Pain</b> <b>Opioid Analgesics</b>	<i>levorphanol</i>	<i>fentanyl transdermal, hydrocodone ext-rel, hydromorphone ext-rel, methadone, morphine ext-rel, NUCYNTA ER, XTAMPZA ER</i>
	<b>PRIMLEV</b>	<i>hydrocodone-acetaminophen, hydromorphone, morphine, oxycodone-acetaminophen, NUCYNTA</i>
	<i>tramadol (NDC<sup>^</sup> 52817019610 only)</i> <b>TRAMADOL ER CAP</b>	<i>tramadol (except NDC 52817019610), tramadol ext-rel</i>
<b>Pain</b> <b>Topical Local Anesthetics</b>	<b>LIDOCAINE-TETRACAIN CREAM</b> <b>LIDOTREX</b>	<i>lidocaine-prilocaine</i>
<b>Pain and Inflammation *</b> <b>Corticosteroids</b>	<b>DEXPAK</b> <b>MILLIPRED</b>	<i>dexamethasone, hydrocortisone, methylprednisolone, prednisolone solution, prednisone</i>
<b>Pain and Inflammation *</b> <b>Nonsteroidal Anti-inflammatory Drugs (NSAIDs)/Combinations</b>	<i>Diclofex DC (NDC<sup>^</sup> 51021037201 only)</i> <i>Diclosaicin</i> <i>Inflamacin</i> <i>NuDiclo SoluPak</i> <i>NuDiclo TabPak</i> <i>Xelital</i>	<i>Diclofex DC (except NDC<sup>^</sup> 51021037201), Diclofenac sodium, diclofenac sodium gel 1%, diclofenac sodium solution, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)</i>
	<i>fenoprofen tab 600mg</i> <i>indomethacin capsule</i> <i>ketoprofen 25mg capsule</i> <i>ketoprofen ext-rel capsule</i> <i>mefenamic acid (NDC<sup>^</sup> 69336012830 only)</i> <i>naproxen CR</i> <i>naproxen suspension</i> <b>MELOXICAM CAPSULE</b> <b>FENOPROFEN CAPSULE</b> <b>INDOCIN</b> <b>SPRIX</b> <b>ZORVOLEX</b>	<i>diclofenac sodium, ibuprofen, meloxicam tablet, naproxen (except naproxen CR or naproxen suspension)</i>
	<i>naproxen-esomeprazole</i>	<i>diclofenac sodium, ibuprofen, meloxicam tablet or naproxen (except naproxen CR or naproxen suspension) <b>WITH</b> esomeprazole delayed-rel, lansoprazole delayed-rel, omeprazole delayed-rel, pantoprazole delayed-rel or DEXILANT</i>
<b>Prostate Condition *</b> <b>Benign Prostatic Hyperplasia</b>	<b>UROXATRAL</b>	<i>alfuzosin ext-rel, doxazosin, silodosin, tamsulosin, terazosin</i>
<b>Respiratory</b> <b>Cough</b>	<i>benzonatate (NDCs<sup>^</sup> 69336012615, 69499032915 only)</i>	<i>benzonatate (except NDCs<sup>^</sup> 69336012615, 69499032915)</i>
<b>Respiratory Xanthines</b>	<b>THEO 24 CAP ER</b>	<i>ipratropium inhalation solution, PERFOROMIST, SEREVENT, SPIRIVA, STRIVERDI RESPIMAT, YUPELRI.</i>
<b>Sleep Disorder</b> <b>Hypnotics, Non-benzodiazepines</b>	<b>Quazepam</b> <b>ZOLPIDEM SUB</b>	<i>doxepin, eszopiclone, zolpidem, zolpidem ext-rel, zolpidem sublingual, BELSOMRA</i>

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	ZOLPIMIST	
<b>Women's Health Contraception</b>	SEASONIQUE	<i>ethinyl estradiol-drospirenone, ethinyl estradiol-drospirenone-levomefolate, ethinyl estradiol-levonorgestrel, ethinyl estradiol-norethindrone acetate, ethinyl estradiol-norethindrone acetate-iron</i>
<b>Women's Health Menopausal Vasomotor Symptom Agents</b>	<i>paroxetine mesylate capsule 7.5 mg</i>	<i>paroxetine HCl</i>
<b>Women's Health Premenstrual Dysphoric Disorder (PMDD)</b>	fluoxetine tablet (generics for SARAFEM only)	<i>fluoxetine (except fluoxetine tablet 60 mg, fluoxetine tablet [generics for SARAFEM]), paroxetine HCl ext-rel (except NDC 60505367503), sertraline</i>
<b>Women's Health Prenatal Vitamins</b>	AZESCO TRINAZ ZALVIT	<i>prenatal vitamins, CITRANATAL</i>

The listed formulary options are subject to change.

Formulary options listed above may be subject to prior authorization or other plan benefit requirements. Drugs not included in this communication may also be subject to prior authorization or other plan benefit requirements. Please consult your plan benefit materials for further information.

This list represents brand products in CAPS, branded generics in upper- and lowercase *italics*, and generic products in lowercase *italics*. This is not an all-inclusive list of available drug options. Log in to [Caremark.com](#) to check coverage and copay information for a specific drug. Discuss this information with your doctor or health care provider. This information is not a substitute for medical advice or treatment. Talk to your doctor or health care provider about this information and any health-related questions you have. CVS Caremark® assumes no liability whatsoever for the information provided or for any diagnosis or treatment made as a result of this information.

\* This list indicates the common uses for which the drug is prescribed. Some drugs are prescribed for more than one condition.

<sup>1</sup> If your doctor believes you have a specific clinical need for one of these products, he or she should contact the Prior Authorization department.

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