

2021 Express Scripts Drug List for the New York City PICA Program

The following is a list of the drugs included in the NYC PICA prescription plan. The list is not all-inclusive and does not guarantee coverage. In addition to using this list, you are encouraged to ask your doctor to prescribe generic drugs whenever appropriate.

PLEASE NOTE: Brand-name drugs may move to nonformulary status if a generic version becomes available during the year. For specific questions about your coverage, please call the phone number printed on your member ID card.

INJECTABLES

NOTE: Coverage based on benefit design.

ABILIFY MAINTENA	buprenorphine	diphenhydramine hcl	IFE-BIMIX 30/1	NATPARA [PA]
ACTEMRA [PA] [SP]	buprenorphine hydrochloride	droperidol	IFE-PG20	NEMBUTAL SODIUM
ACTEMRA ACTPEN [PA] [SP]	butorphanol tartrate	duramorph	INCRELEX [PA] [SP]	NESACAINE
ADAGEN	BYNFEZIA [SP]	EDEX [PA]	infed	NESACAINE-MPF
adrenalin chloride	CABLIVI [PA] [SP]	EGRIFTA [PA] [SP]	INFUMORPH	NEXAVIR
a-hydrocort	caffeine & sodium benzoate	EGRIFTA SV	INVANZ	NIVESTYM [PA] [SP]
AIMOVIG [PA]	calcium disodium versenate	EMGALITY [PA]	INVEGA SUSTENNA	NORDITROPIN FLEXPRO [PA] [SP]
AJOVY [PA]	CAPASTAT SULFATE	ENBREL [PA] [SP]	INVEGA TRINZA	NOVAREL [FER]
ALFENTA	CARBOCAINE	enoxaparin sodium [SP]	isoniazid	NUTROPIN [SP] [ST]
alfentanil hydrochloride	CAVERJECT [PA]	ENSPLYNG [SP]	isoproterenol hcl	NYVEPRIA [PA] [SP]
amikacin sulfate	cefazolin sodium	ephedrine sulfate	ISUPREL	octreotide acetate [SP]
ampicillin sodium	cefepime hcl	epinephrine auto-injector	KENALOG	olanzapine
ampicillin/sulbactam	CEFOTAN	ertapenem	KESIMPTA PEN [PA] [SP]	orphenadrine citrate
AMYTAL SODIUM	cefotaxime sodium	estradiol valerate	KETALAR	OXIDREL [FER]
AQUASOL A	cefotetan	fentanyl citrate	ketamine hcl	oxacillin sodium
ARCALYST [PA] [SP]	ceftazidime	fluphenazine decanoate	ketamine hcl-ns	PALYNZIQ [PA] [SP]
ARISTADA	ceftriaxone	fluphenazine hcl	ketamine hcl-water	papaverine hcl
ARISTADA INITIO	cefuroxime sodium	folic acid	ketorolac tromethamine	papaverine-alprostadil
ARISTOSPAN	CELESTONE	fondaparinux sodium [SP]	LEUKINE [SP]	papaverine-phentolamine
ARIXTRA [SP]	CEREBYX	FORTAZ	LEVSIN	papaverine-phentolmn-alprostdl
ascorbic acid	CETROTIDE [FER]	FORTEO [PA] [SP]	lidocaine hcl	PEGASYS [PA] [SP]
ATIVAN	chlorprocaine hcl	fosphenytoin sodium	lidocaine hcl w/epinephrine	PEGASYS PROCLICK [PA] [SP]
ATROPEN	chlorpromazine hcl	FRAGMIN [SP]	lidocaine hcl-ns	PEG-INTRON [PA] [SP]
atropine sulfate	CLAFORAN	FULPHILA [PA] [SP]	LINCOCIN	penicillin g procaine
AVONEX [PA] [SP]	CLEOCIN PHOSPHATE	furosemide	lincomycin hcl	PENTAM 300
AZACTAM	clindamycin phosphate	FUZEON [SP]	lorazepam	pentamidine isethionate
aztreonam	COGENTIN	GENOTROPIN [PA] [SP]	LUPRON DEPOT-PED [PA] [SP]	pentobarbital sodium
baci-im	colistimethate sodium	gentamicin sulfate	magnesium chloride	PERSERIS
bacitracin	COLY-MYCIN M PARENTERAL	gentamicin-sodium citrate	MARCAINE	PHENERGAN
BAL IN OIL	COPAXONE [PA] [SP]	GEODON	MARCAINE WITH EPINEPHRINE	phenobarbital sodium
b-complex	CORTROSYN	glatiramer acetate [PA] [SP]	MAXIPIPE	PHENTOLAMINE-ALPROSTADIL
BENLYSTA [SP]	cosyntropin	glatopa [PA] [SP]	medroxyprogesterone acetate	phenylephrine hcl
BENTYL	CRYSVITA [SP]	glycopyrrolate	MENOPUR [FER]	physostigmine salicylate
benztropine mesylate	cyanocobalamin	GLYRX-PF	meperidine hcl	PHYTONADIONE
betamethasone acet and na phos	D.H.E.45	GONAL-F/RFF [FER]	methadone hcl	PLEGRIDY [PA] [SP]
betamethasone acetate-sod phos	DDAVP	H.P. ACTHAR [PA] [SP]	methocarbamol	polocaine
betamethasone sod phos-water	DELESTROGEN	HAEGARDA [PA] [SP]	methylcobalamin	polymyxin b sulfate
BETASERON [PA] [SP]	DEMEROL	HALDOL	methylergonovine maleate	prochlorperazine edisylate
BICILLIN C-R	DEPO-ESTRADIOL	HALDOL DECANOATE	methylprednisolone	PROCRIT [PA] [SP]
BICILLIN L-A	DEPO-MEDROL	haloperidol	methylprednisolone acetate	progesterone [FER]
BOTOX [PA] [SP]	DEPO-PROVERA	haloperidol decanoate	methylprednisolone sod succ	promethazine hcl
bumetanide	DEPO-SUBQ PROVERA	haloperidol lactate	methylprednisolone-bupivacaine	PROMETOPAM CHLORIDE
bupivacaine hcl	DEPO-TESTOSTERONE [PA]	HEMLIBRA [PA] [SP]	MIACALCIN	pyridoxine hcl
bupivacaine hcl-epinephrine	desmopressin acetate	heparin sodium	midazolam hcl	quinidine gluconate
bupivacaine w/dextrose	dexamethasone acetate la	HUMIRA [PA] [SP]	MITIGO	R.E.C.K. (ROPIV-EPI-CLON-KETOR)
bupivacaine-dexamethasone sod	dexamethasone acetate-sod	HUMIRA PEDIATRIC [PA] [SP]	morphine sulfate	ranitidine hcl
bupivacaine-ketorolac-ketamine	phos	hydralazine hcl	morphine sulfate/ns	RASUVO [ST]
BUPRENEX	dexamethasone sodium	hydromorphone hcl	MOZOBIL [SP]	REBIF [PA] [SP]
	phosphate	hydromorphone hcl-water	MYALEPT	REBIF REBIDOSE
	diazepam	hydroxocobalamin	MYOBLOC [PA] [SP]	RELISTOR
	dicyclomine hcl	hydroxyzine hcl	nafcillin sodium	REMODULIN
	dihydroergotamine mesylate	hyoscyamine sulfate	nalbuphine hcl	REPATHA [PA]
	DILAUDID	icatibant [PA] [SP]	NAROPIN	

(continued)

Costs for covered alternatives may vary. Log on to express-scripts.com/covered to compare drug prices.

THIS DOCUMENT LIST IS EFFECTIVE JANUARY 1, 2021 THROUGH DECEMBER 31, 2021. THIS LIST IS SUBJECT TO CHANGE. You can find more information at express-scripts.com.

RETACRIT [PA] [SP]	vancomycin hcl	DAURISMO [PA] [SP]	LUPRON DEPOT [INJ] [SP] [ST]	TALZENNA [PA] [SP]
REVOCOI	VAZCULEP	diclofenac sodium	LYNPARZA [PA] [SP]	tamoxifen citrate
RISPERDAL CONSTA	vitamin k	dronabinol	LYSODREN	TARCEVA [PA] [SP]
ROBAXIN	XGEVA	DROXIA	MARINOL	TARGRETIN [SP]
ROBINUL	XYLOCAINE	EFUDEX	MATULANE [SP]	TASIGNA [PA] [SP]
ropivacaine hcl/pf	XYLOCAINE WITH EPINEPHRINE	ELIGARD [INJ] [PA] [SP]	megestrol acetate	TAZVERIK [PA] [SP]
ropivacaine hcl-ns	XYOSTED [PA]	EMCYT	MEKINIST [PA] [SP]	TEMODAR [PA] [SP]
ropivacaine-clonidine-ketorolc	ZANTAC RX	ERIVEDGE [PA] [SP]	MEKTOVI [PA] [SP]	temozolomide [PA] [SP]
ropivacaine-ketorolac-ketamine	ZARXIO [SP] [ST]	ERLEADA [PA] [SP]	melphalan hcl	TEPADINA
SAXENDA [PA]	ZEMBACE SYMTOUCH	erlotinib hcl [PA] [SP]	mercaptopurine	THALOMID [PA] [SP]
SENSORCAINE	ZINACEF	ERWINAZE	MESNEX	thiamine hcl [INJ]
SENSORCAINE WITH DEXTROSE	ZINBRYTA [PA] [SP]	etoposide	methotrexate	thiotepa
SENSORCAINE WITH EPINEPHRINE	ziprasidone mesylate	everolimus [PA] [SP]	methotrexate sodium [INJ]	TIBSOVO [PA] [SP]
SENSORCAINE-MPF	ZORBIVE	exemestane	metoclopramide hcl	TIGAN [INJ]
SEROSTIM [SP]	ZYPREXA	FARESTON	metoclopramide hcl odt	TOLAK
SKYRIZI (2 SYRINGES) KIT [PA] [SP]	CHEMOTHERAPY	FARYDAK [PA] [SP]	MUSTARGEN	toremifene citrate
SOLU-CORTEF	abiraterone acetate [PA] [SP]	FASLODEX [INJ]	MYLERAN	tretinoin
SOLU-MEDROL	ACTIMMUNE [INJ] [SP]	FEMARA	NERLYNX [PA] [SP]	trexall
SOMATULINE DEPOT [SP]	AFINITOR [PA] [SP]	FIRMAGON [INJ] [PA] [SP]	NEXAVAR [PA] [SP]	trimethobenzamide hcl
SOMAVERT [PA] [SP]	AFINITOR DISPERZ [PA] [SP]	floxuridine	NILANDRON	TUKYSA [PA] [SP]
STELARA [PA] [SP]	ALDARA	FLUOROPLEX	nilutamide	TURALIO [PA] [SP]
STRENSIQ [PA] [SP]	ALECENSA [PA] [SP]	flutamide	NINLARO [PA] [SP]	TYKERB [PA] [SP]
STREPTOMYCIN SULFATE	ALFERON N	fulvestrant [PA] [SP]	NUBEQA [PA] [SP]	UVADEX
succinylcholine chloride-ns	ALKERAN	GAVRETO [PA] [SP]	ODOMZO [PA] [SP]	VALCHLOR [SP]
sumatriptan succinate	ALUNBRIG [PA] [SP]	GILOTRIF [PA] [SP]	ONCASPASPAR [INJ]	VANTAS [SP]
SUMAVEL DOSEPRO	AMELUZ	GLEOSTINE	ondansetron hcl	VARUBI
SUSTOL	anastrozole	granisetron hcl	ondansetron odt	VELCADE [INJ] [SP]
SYMJEPI	ANZEMET	HEXALEN	PANRETIN	VENCLEXTA [SP]
TAKHZYRO [PA] [SP]	aprepitant	HYCANTIN	PEMAZYRE [PA] [SP]	VENCLEXTA STARTING PACK [SP]
TALTZ [PA] [SP]	AROMASIN	HYDREA	PICATO	VERZENIO [PA] [SP]
TALWIN	azacitidine	hydroxyurea	POMALYST [SP]	VIDAZA [SP]
TAZICEF	BALVERSA [PA] [SP]	IBRANCE [PA] [SP]	prochlorperazine maleate	VISTOGARD [SP]
TEGSEDI [PA] [SP]	bexarotene	ICLUSIG [PA] [SP]	PURIXAN [SP]	VITRAKVI [PA] [SP]
terbutaline sulfate	bicalutamide	IDHIFA [PA] [SP]	REGLAN	VIZIMPRO [PA] [SP]
teriparatide [PA] [SP]	bleo 15k	imatinib mesylate [PA] [SP]	RETEVMO [PA] [SP]	VOTRIENT [PA] [SP]
testosterone cypionate [PA]	bleomycin sulfate [INJ]	IMBRUVICA [PA] [SP]	REVLIMID [PA] [SP]	XALKORI [PA] [SP]
testosterone enanthate [PA]	BOSULIF [PA] [SP]	imiquimod	ROZLYTREK [PA] [SP]	XELODA [SP]
tetracaine hcl	BRAFTOVI [PA] [SP]	IMLYGIC [SP]	RUBRACA [PA] [SP]	XERMELO [PA] [SP]
ticarcillin disod-clavulanate	BRUKINSA [PA] [SP]	INLYTA [PA] [SP]	RYDAPT [PA] [SP]	XOSPATA [PA]
TIGAN	CABOMETYX [PA] [SP]	INTRON A [INJ] [SP]	SANCUSO	XTANDI [PA] [SP]
tobramycin sulfate	capecitabine [SP]	IRESSA [PA] [SP]	SOLARAZE [PA]	YONSA [PA] [SP]
TREMFYA [PA] [SP]	CAPRELSA [PA] [SP]	JAKAFI [PA] [SP]	SOLTAMOX	ZEJULA [PA] [SP]
treprostinil [SP]	CASODEX	KOSELUGO [PA] [SP]	SPRYCEL [PA] [SP]	ZELBORAF [PA] [SP]
triamcinolone acet-bupivacaine	COMETRIQ [PA] [SP]	lapatinib [PA] [SP]	STIVARGA [PA] [SP]	ZOFRAN
triamcinolone acetonide	COMPAZINE	LENVIMA [PA] [SP]	SUTENT [PA] [SP]	ZOFRAN ODT
triamcinolone diacetate	compro	letrozole	SYLATRON [SP]	ZOLADEX [INJ] [SP]
tricitrasol	COPIKTRA [PA] [SP]	leucovorin calcium	SYNDROS	ZOLINZA [SP]
TRIPTODUR [SP]	COTELLIC [PA] [SP]	LEUKERAN	SYNRIBO	ZUPLENZ
TYMLOS [PA] [SP]	CYCLOPHOSPHAMIDE	leuprolide acetate [INJ] [PA] [SP]	TABLOID	ZYDELIG [PA] [SP]
UNASYN	cytarabine [INJ]	LEVULAN	TABRECTA [PA] [SP]	ZYKADIA [PA] [SP]
		LONSURF [SP]	TAFINLAR [PA] [SP]	
		LORBRENA [PA] [SP]	TAGRISSO [PA] [SP]	

KEY

[FER] - Medication is available through Freedom Fertility Pharmacy (800.660.4283). Please note: Fertility drugs obtained through the NYC PICA program require Prior Authorization through WIN Fertility (833.439.1515).

[INJ] - Injectable medication

[PA] - Prior Authorization is required for coverage

[SP] - Available through Accredo Specialty Pharmacy (800.467.2006)

[ST] - Step Therapy may apply to certain indications or some or all strengths of the drug

For the member: FDA-approved generic medications meet strict standards and contain the same active ingredients as their corresponding brand-name medications, although they may have a different appearance.

For the physician: Please prescribe preferred products and allow generic substitutions when medically appropriate.

Brand-name drugs are listed in CAPITAL letters. Generic drugs are listed in lower case letters.

Costs for covered alternatives may vary. Log on to [express-scripts.com/covered](https://www.express-scripts.com/covered) to compare drug prices.

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