

Commonly prescribed drugs Humana will cover in 2025

The commonly prescribed drug list is a quick reference guide for prescription drugs in select therapeutic categories that will not be covered in 2025 and their available formulary alternatives. This is not an all-inclusive list. Prescription drugs in the formulary alternatives category are the most affordable for Humana-covered patients, who must pay full retail price for nonformulary drugs. A member (or representative) or a prescriber who believes a nonformulary drug is medically necessary may request a formulary exception.



Drug category	Nonformulary drugs (not covered)	Formulary alternatives
ALLERGY/NASAL		
Nasal antihistamine/anti-inflammatory steroid combo	azelastine-fluticasone, Beconase AQ Dymista, Patanase, Xhance, Zetonna	fluticasone propionate (T2), ipratropium bromide (T2), azelastine 0.1% (T3)
ASTHMA/COPD		
Beta-adrenergic agents, inhaled, short acting	Proair, Proventil HFA, Xopenex	albuterol sulfate HFA (T3), Ventolin HFA (T3)
Beta-adrenergic agents, inhaled, long acting	Serevent Diskus	Striverdi Respimat (T3)
Glucocorticoids, inhaled, long acting	Asmanex, Flovent, Pulmicort, Qvar RediHaler	Arnuity Ellipta (T3)
Anticholinergics, inhaled, long acting	Incruse Ellipta, tiotropium bromide, Tudorza Pressair	Spiriva (T3)
Combo, inhaled	Advair Diskus, Advair HFA, AirDuo, Anoro Ellipta, Bevespi Aerosphere, budesonide-formoterol, Duaklir Pressair, Dulera, fluticasone furoate-vilanterol, fluticasone propionate-salmeterol, Wixela Inhub	Breo Ellipta (T3), Breztri Aerosphere (T3), Stiolto Respimat (T3), Symbicort (T3), Trelegy Ellipta (T3), Combivent Respimat (T4)
CARDIOLOGY – BLOOD THINNERS		
Anticoagulants, coumarin type		warfarin (T1), Jantoven (T1)
Direct oral anticoagulants	Savaysa, Pradaxa	Eliquis (T3), Xarelto (T3), dabigatran etexilate (T4)
CARDIOLOGY – HYPERTENSION AGENTS		
ACE inhibitor-thiazide	Accuretic, Lotensin, Vaseretic, Zestoretic	enalapril-hctz (T1), lisinopril-hctz (T1), benazepril-hctz (T1), fosinopril-hctz (T2), quinapril-hctz (T2), captopril-hctz (T3)
Alpha/beta-adrenergic blocking agents	Coreg, Coreg CR	carvedilol (T1), labetalol (T2)
Angiotensin receptor antagonist-thiazide diuretic combo	Atacand HCT, Avalide, Benicar HCT, Diovan HCT, Edarbyclor, Hyzaar, Micardis HCT, telmisartan-hctz	losartan-hctz (T1), valsartan-hctz (T1), irbesartan-hctz (T2), olmesartan-hctz (T2), candesartan-hctz (T3)
Antihypertensives, ACE inhibitors	Accupril, Altace, Epaned, Lotensin, Qbrelis, Vasotec, Zestril	lisinopril (T1), benazepril (T1), fosinopril (T1), quinapril (T1), ramipril (T1), trandolapril (T1), enalapril maleate (T2), moxipril (T2), perindopril erbumine (T2), captopril (T3)
Antihypertensives, angiotensin receptor antagonists	Atacand, Avapro, Benicar, Cozaar, Diovan, Edarbi, Micardis	losartan (T1), irbesartan (T1), olmesartan (T1), telmisartan (T2), valsartan (T2), candesartan (T3)

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CARDIOLOGY – HYPERTENSION/HEART FAILURE		
Beta-adrenergic blocking agents	Betapace/Betapace AF, betaxolol, Brevibloc, Bystolic, Corgard, Inderal, InnoPran XL, Kapspargo Sprinkle, Lopressor, nadolol, pindolol, Sotyline, Tenormin, Toprol XL	metoprolol succinate (T1), metoprolol tartrate (T1), atenolol (T1), bisoprolol fumarate (T2), propranolol tablet (T2), sotalol (T2), acebutolol (T4), nebivolol (T4), propranolol ER capsule (T4), timolol maleate (T4)
CHOLESTEROL		
Antihyperlipidemic – HMGCOA reductase inhibitors (statins)	Altoprev, Crestor, Ezallor Sprinkle, fluvastatin, Lescol XL, Lipitor, Livalo, Zocor, Zypitamag	atorvastatin (T1), rosuvastatin (T1), simvastatin (T1), lovastatin (T1), pravastatin (T2)
Lipotropics	Antara, Evkeeza, Fenoglide, Fibrilcor, icosapent ethyl, Juxtapid, Leqvo, Lipofen, Lopid, Lovaza, Nexletol, Nexlizet, Niacor, Niaspan ER, Praluent, Tricor, Trilipix, Zetia	gemfibrozil (T1), fenofibrate (T2), ezetimibe (T3), fenofibrate micronized (67 mg, 134 mg, 200 mg) (T3), fenofibrate nanocrystallized (48 mg, 145 mg) (T3), omega-3 acid ethyl esters capsule (T3), Vascepa (T3), Repatha (T3), niacin (T4)
DIABETES		
Preferred diabetic syringes/needles		BD syringes/pen needles (T1), HTL (Droplet) syringes/pen needles (T1)
GLP-1 receptor agonists*	Bydureon BCise, Byetta, liraglutide, Rybelsus, Trulicity, Victoza 2-Pak, Victoza 3-Pak	Mounjaro (T3), Ozempic (T3)
* Pharmacies must enter diagnosis code for a medically accepted indication when processing a claim for a GLP-1 receptor agonist.		
Long-acting insulin – GLP-1	Xultophy 100/3.6	Soliqua 100/33 (T3)
Antihyperglycemic, biguanide type	Glumetza, metformin ER (gastric or osmotic), Riomet/Riomet ER	metformin/metformin ER (T1)
DPP-4 inhibitors	alogliptin, Nesina, Onglyza	Januvia (T3), saxagliptin (T3), Tadjenta (T3)
Antihyperglycemic, insulin-release stimulant type	Amaryl, Glucotrol XL, Glynase	glimepiride (T1), glipizide (T1), glyburide (T2), nateglinide (T3), repaglinide (T4)
DPP-4 inhibitor, biguanide combo	alogliptin-metformin, Kazano, Kombiglyze XR	Janumet/Janumet XR (T3), Jentadueto/Jentadueto XR (T3)
DPP-4 inhibitor, SGLT2 combo		Glyxambi (T3)
Thiazolidinedione (PPARG agonist)	Actos	pioglitazone (T1)
SGLT2 inhibitor, biguanide combo	dapagliflozin propanediol-metformin extended release tablet, Invokamet/Invokamet XR, Segluromet	Synjardy/Synjardy XR (T3), Xigduo XR (T4)
SGLT2 inhibitor	dapagliflozin propanediol tablet, Inpefa, Invokana, Steglatiro	Jardiance (T3), Farxiga (T4)
SGLT2 inhibitor, DPP-4 inhibitor, biguanide combo		Trijardy XR (T3)
Insulins	Admelog, Admelog SoloStar U-100, Afrezza, Apidra, Basaglar, Fiasp, insulin aspart, insulin glargine, insulin lispro pen, Levemir, Lyumjev, Semglee	insulin lispro vial (T3), Lantus (T3), Humalog (T3), Humulin (T3), Novo Novolin/Novolog (T3), Relion Novolin/Novolog (T3), Toujeo (T3), Tresiba (T3), Humulin R U-500 (T5)
GASTROINTESTINAL DISEASE		
Proton pump inhibitors	Dexilant, dexlansoprazole, Nexium, omeprazole-sodium bicarbonate, Prevacid, Prilosec, Protonix, rabeprazole	omeprazole (T1), pantoprazole (T1), esomeprazole magnesium (T3), lansoprazole (T3)
GENITOURINARY		
Overactive bladder agents, beta-3 adrenergic agonists	Gemtesa, mirabegron tablet, extended release	Myrbetriq (T3)
Urinary tract antispasmodic, M(3) selective antagonist	Vesicare, darifenacin	solifenacina (T2)
Urinary tract antispasmodic, anti-incontinence agent	Detrol/Detrol LA, Ditropan XL, oxybutynin chloride, Oxytrol, Toviaz, trospium	fesoterodine (T3), tolterodine (T4)

Drug category	Nonformulary drugs (not covered)	Formulary alternatives
MENTAL HEALTH		
Antipsychotic, atypical, dopamine, serotonin antagonists	Clozaril, Geodon, Invega, Latuda, Risperdal, Rykindo, Saphris, Seroquel/Seroquel XR, Zyprexa	risperidone tablet (T1), quetiapine fumarate tablet (T2), clozapine tablet (T3), lurasidone (T3), olanzapine tablet (T3), asenapine maleate (T4), paliperidone ER tablet (T4), Invega Hafyera (T4), Invega Sustenna (T4), Invega Trinza (T4), Risperdal Consta (T4), ziprasidone HCl capsule (T4)
Antipsychotic, atypical, D3/D2 partial AG-5HT mixed		Vraylar (T4)
Antipsychotic, atypical, D2 partial agonist/5HT mixed	Abilify, Abilify MyCite	aripiprazole tablet (T3), Abilify Asimtufii (T4), Abilify Maintena (T4), Aristada (T4), Rexulti (T5)
SSRIs	Celexa, fluvoxamine capsule, fluoxetine tablet, Lexapro, Paxil/Paxil CR, Pexeva, Prozac, Zoloft	sertraline tablet (T1), citalopram tablet (T1), escitalopram oxalate (T1), fluoxetine capsule (T1), paroxetine HCl tablet (T1), fluvoxamine tablet (T2)
SARIs		trazodone (T1)
SNRIs	Cymbalta, Effexor XR, Pristiq	duloxetine (T2), venlafaxine (T2), venlafaxine ER capsule (T2), desvenlafaxine succinate (T4), Fetzima (T4)
Miscellaneous mood stabilizers	bupropion hcl 24 hr tablet, extended release (450 mg tablet)	bupropion hcl 24 hr tablet, extended-release (150 mg, 300 mg) (T3), bupropion hcl 12 hr tablet, sustained release (100 mg, 150 mg, 200 mg) (T3), Trintellix (T4)
MIGRAINE		
Calcitonin gene-related peptide (CGRP) inhibitors	Aimovig Autoinjector, Ajovy, Nurtec ODT, Vyepti	Ubrelvy (T3), Emgality (T4), Qulipta (T4)
Antimigraine preparations	almotriptan, dihydroergotamine injection, eletriptan, Imitrex, Relpax, Reyvow, sumatriptan spray, zolmitriptan	sumatriptan tablet (T2), rizatriptan tablet (T2), naratriptan tablet (T3), sumatriptan injection (T4), dihydroergotamine spray (T5)
MULTIPLE SCLEROSIS		
Multiple sclerosis agents	Aubagio, Avonex, Bafiertam, Betaseron, Copaxone, Extavia, Gilenya, Kesimpta Pen, Mavenclad, Mayzent, Plegridy, Ponvory, Rebif, Tecfidera, Vumerity, Zeposia	dimethyl fumarate (T3), fingolimod (T3), teriflunomide (T4), glatiramer (T5), Glatopa (T5)
OPHTHALMOLOGY		
Eye antihistamines	bepotastine besilate, Bepreve, epinastine, Zerviate	olopatadine (T2), azelastine (T3)
Ophthalmic antibiotics	AzaSite, Besivance, Ciloxan, gatifloxacin, Neo-Polycin, Ocuflox, Tobrex, Vigamox, Zymaxid	polymyxin B sulf-trimethoprim (T1), AK-Poly-Bac (T2), bacitracin-polymyxin B (T2), ciprofloxacin HCl (T2), erythromycin (T2), Gentak (T2), gentamicin (T2), ofloxacin (T2), Polycin (T2), tobramycin (T2), moxifloxacin (T3), neomycin-bacitracin-polymyxin (T3), neomycin-polymyxin-gramicidin (T3), bacitracin (T4)
Miotics and other intraocular pressure reducers	Alphagan P 0.1% and 0.15%, Azopt, Betimol, Betoptic S, Combigan, Cosopt, Durysta, Istalol, lopidine, Rhopressa, Rocklatan, Timoptic, Travatan Z, travoprost, Trusopt, Xalatan, Xelpros, Zioptan (PF)	brimonidine 0.2% (T1), carteolol (T1), latanoprost (T1), levobunolol (T1), timolol maleate (T1), dorzolamide (T2), dorzolamide-timolol (T2), apraclonidine (T3), betaxolol (T3), Lumigan (T3), Simbrinza (T4), Vyzulta (T4)
Eye anti-inflammatory agents	Alrex, bromfenac, BromSite, Durezol, Flarex, fluorometholone, Inveltys, Ozurdex, prednisolone sodium phosphate, Pred Forte, Pred Mild, Prolensa	dexamethasone sodium phosphate (T2), diclofenac sodium (T2), flurbiprofen sodium (T2), Eysuvitis (T3), Ilevro (T3), ketorolac (T3), prednisolone acetate (T3), Lotemax SM (T4)

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OSTEOPOROSIS		
Bone resorption inhibitors/bone formation stimulating agents	Actonel, Boniva, Evista, Fosamax, risedronate, Tymlos	alendronate (T1), ibandronate (T2), raloxifene (T3), Prolia (T4), Forteo (T5)
RHEUMATOID ARTHRITIS/PSORIASIS		
Anti-inflammatory, phosphodiesterase-4 (PDE4) inhibitors	Otezla	
Antipsoriatic agents, systemic	Cosentyx, Ilumya, methoxsalen, Siliq, Taltz	acitretin (T4), Skyrizi (T5), Tremfya (T5)
Human interleukin 12/23 (IL 12-23) inhibitors, MAB		Stelara (T5)
Anti-inflammatory tumor necrosis factor inhibitors	Avsola, Cimzia, Cyltezo, Enbrel, Hyrimoz, Inflectra, infliximab, Renflexis, Simponi	Humira (T5), adalimumab-adbm (generic Cyltezo) (T5), adalimumab-adaz (generic Hyrimoz) (T5)
Janus kinase (JAK) inhibitors	Olumiant, Xeljanz/Xeljanz XR	Rinvoq (T5)

Formulary ID: 25452 (Premier Prescription Drug Plan)

For prescription drug information for Humana-covered Medicare patients, please visit [Humana.com/MedicareDrugList](https://www.humana.com/MedicareDrugList) to access a comprehensive prescription drug guide. The comprehensive prescription drug guide will display every covered drug's tier placement and any restrictions that may apply.

