

EmblemHealth Pharmacy Benefit Services 2019 City of New York Employee Formulary Summary



This is a list of the most commonly prescribed preferred drugs for members of the City of New York Employee plans with prescription drug coverage. Make sure to ask your doctor to prescribe generic drugs whenever appropriate; this may lower your out-of-pocket expenses.

NOTE: Not all drugs listed are covered by all pharmacy benefit programs, so coverage is not guaranteed. Check your benefit materials for the copay and any other responsibilities you may have under your pharmacy benefit. For additional questions about your prescription drug coverage, please call the phone number on the back of your ID card.

A

ABSORICA (ST)
**acetaminophen/codeine
acyclovir (DQM)**
**acyclovir cream (PA/
DQM)**
ADEMPAS (PA)
ADVAIR DISKUS (PA/DQM)
ADVAIR HFA (PA/DQM)
afirmelle
AIMOVIG [INJ] (PA)
AJOVY [INJ] (PA)
**albuterol nebulization
solution**
alendronate (dqm)
allopurinol
ALPHAGAN P 0.1%
alprazolam
ALREX (ST)
amiodarone
AMITIZA (DQM)
amitriptyline
amlodipine
amlodipine/benazepril
amlodipine/valsartan
amoxicillin
**amoxicillin/potassium
clavulanate**
AMPYRA (PA)
ANDRODERM (PA/DQM)
ANDROGEL 1.62% (PA/DQM)
ANORO ELLIPTA (DQM)
apri
APRISO
ARCAPTA NEOHALER (DQM)
**aripiprazole (Discmelt =
DQM)**
ARMONAIR RESPICLICK
(DQM)
ARNUITY ELLIPTA (DQM)
ASMANEX HFA (DQM)
ASMANEX TWISTHALER
(DQM)
atenolol
atenolol/chlorthalidone
atorvastatin
aurovela
aurovela fe
ayuna
AZASITE
**azelastine nasal spray
(DQM)**
azithromycin
baclofen

B

BARACLUE SOLUTION
BELBUCA (ST/DQM)
benazepril
benzonatate
BEPREVE (ST)
BETHKIS (PA/DQM)
BEVESPI AEROSPHERE (DQM)
BIKTARVY
bisoprolol/hctz
blisovi fe
bosentan (PA)
BREO ELLIPTA (PA/DQM)
BRILINTA
**budesonide nebulization
suspension**
**buprenorphine-naloxone
sl film (PA/DQM)**
bupropion (DQM)

**bupropion ext-release
(DQM)**
buspirone
**butalbital/acetaminophen/
caffeine**
BYDUREON [INJ] (PA/DQM)
BYETTA [INJ] (PA/DQM)
BYSTOLIC (ST)
BYVALSON (ST)

C

carbidopa/levodopa
carvedilol
cefdinir
celecoxib
cephalexin
chlorhexidine gluconate
chlorthalidone
CIALIS (PA/DQM)
CIPRODEX
ciprofloxacin
citalopram
clarithromycin
CLENPIQ
clindamycin hcl
**clindamycin phosphate
topical**
**clindamycin phosphate/
benzoyl peroxide**
**clobetazol propionate
(DQM)**
clomiphene citrate
clonazepam
clonidine (DQM)
clopidogrel
**clotrimazole/
betamethasone
dipropionate**
COLCORYS
COMBIGAN
COMBIPATCH
COMBIVENT RESPIMAT
(DQM)
CORLANOR (PA)
CREON
CRINONE
cyclobenzaprine

D

DALIRESP (PA/DQM)
DARAPRIM (PA)
DAYTRANA (ST)
DESCOVY
desloratadine
desonide
**desvenlafaxine succinate
ext-release (DQM)**
dexamethasone
**dexamethylphenidate ext-
release**
**dextroamphetamine/
amphetamine**
**dextroamphetamine/
amphetamine ext-
release**
diazepam
**diclofenac sodium
delayed-release**
dicyclomine
digoxin
diltiazem ext-release
diphenoxylate/atropine
disintegrating tablets
**divalproex delayed-
release**

divalproex ext-release
DIVIGEL (DQM)
**donepezil
dotti (DQM)**
doxazosin (DQM)
doxycycline hyclate
doxycycline monohydrate
DUAVEE
DULERA (PA/DQM)
**duloxetine delayed-
release**
DUPIXENT [INJ] (PA/DQM)
DYMISTA (ST/DQM)

E

EDARBI (ST)
EDARBYCLOR (ST)
ELIDEL (ST/DQM)
ELIQUIS (PA)
EMGALITY [INJ] (PA)
EMVERM (DQM)
enalapril
ENSTILAR (DQM)
ENTRESTO (DQM)
EPLUSA (PA/DQM)
EPIDUO FORTE (ST)
EPINEPHRINE AUTO-
INJECTOR (BY MYLAN)
[INJ] (DQM)
EPIPEN, EPIPEN JR [INJ] (ST/
DQM)
ergocalciferol
erythromycin
erythromycin eye ointment
escitalopram
**esomeprazole magnesium
delayed-release**
estradiol (DQM)
estradiol patches (DQM)
**estradiol/norethindrone
acetate**
ESTRING
eszopiclone
EVEKEO (PA)
ezetimibe

F

famotidine
FARXIGA (ST/DQM)
febuxostat (ST)
fenofibrate
fenofibrate micronized
**fenofibric acid delayed-
release**
fentanyl patches
FETZIMA (ST/DQM)
FINACEA (ST)
finasteride
FLECTOR (ST/DQM)
FLOVENT DISKUS (DQM)
FLOVENT HFA (DQM)
fluconazole (DQM)
fluocinonide
fluoxetine (DQM)
**fluticasone nasal spray
(DQM)**
folic acid
furosemide
FYCOMPA

G

gabapentin
GELNIQUE (ST/DQM)
gemfibrozil
GENVOYA

GILENYA (ST)
glimepiride
glipizide
glipizide ext-release
glyburide
GLYXAMBI (ST/DQM)
GRALISE (ST)
GRASTEK (PA)
guanfacine ext-release

H

hailey
HARVONI (PA/DQM)
HUMALOG [INJ]
HUMULIN [INJ]
hyalalazine
hydrochlorothiazide
**hydrocodone/
acetaminophen**
**hydrocodone/
chlorpheniramine
polistirex ext-release**
hydrocortisone topical
hydromorphone
hydroxychloroquine
hydroxyzine hcl
hydroxyzine pamoate
HYSINGLA ER (ST/DQM)

I

ibandronate
ibuprofen
ILEVRO
INCRUSE ELLIPTA (DQM)
indomethacin
INVOKAMET (ST/DQM)
INVOKAMET XR (ST)
INVOKANA (ST/DQM)
irbesartan
**isosorbide mononitrate
ext-release**

J

JANUMET, JANUMET XR
(ST/DQM)
JANUVIA (ST/DQM)
JARDIANCE (ST/DQM)
JENTADUETO (ST/DQM)
JENTADUETO XR (ST/DQM)
JULUCA
junel fe

K

kalliga
**ketoconazole topical
(DQM)**
ketorolac
KITABIS PAK (PA/DQM)

L

labetalol
lamotrigine
**lansoprazole delayed-
release**
LANTUS [INJ]
latanoprost eye solution
LATUDA (DQM)
LETAIRIS (ST)
LEVEMIR [INJ]
levetiracetam
levocetirizine
levofloxacin
levohydroxine sodium
lidocaine patches
LINZESS (DQM)
liothyronine

LIPOFEN (ST)
lisinopril
lisinopril/hctz
LIVALO (ST/DQM)
LO LOESTRIN FE (PA)
lorazepam
losartan
losartan/hctz
LOTEMAX
loteprednol etabonate
lovastatin (DQM)
lo-zumandimine
LUMIGAN (ST)

M

MAYZENT (PA/DQM)
meclizine
medroxyprogesterone
meloxicam
MESTINON SYRUP
metaxalone
metformin
metformin ext-release
methimazole
methocarbamol
methylphenidate
**methylphenidate ext-
release**
methylprednisolone
**metoprolol succinate ext-
release**
metoprolol tartrate
metronidazole
metronidazole topical
metronidazole vaginal
microgynon fe (PA)
MINIVELLE (DQM)
Minocycline
**Minocycline ext-release
(ST)**
mirtazapine
MIRVASO (TOPICAL GEL PA)

MITIGARE
moderiba
mometasone (DQM)
mononessa
montelukast
**morphine sulfate ext-
release**
MOVANTIK (DQM)
MOXEZA
multivitamins/fluoride
mupirocin
MUSE (PA/DQM)
MYDAYIS (ST)
MYRBETRIQ (ST)

N

nabumetone
NAMZARIC (ST)
**naproxen, naproxen
sodium**
NARCAN NASAL SPRAY
NASCOBAL
**neomycin/polymyxin/
hydrocortisone ear
solution**
NEXIUM PACKETS (ST/DQM)
niacin ext-release
nifedipine ext-release
nitrofurantoin
macrocrystal
NITYR (PA)
nortriptyline
NUCYNIA ER (ST)

NUCYNIA,
NUDEXTA (PA)
NUVARING
nystatin (DQM)
nystatin topical (DQM)

O

ODACTRA (PA)
ODEFSEY
ofloxacin
olanzapine
olmesartan
olmesartan/hctz
olopatadine eye solution
omega-3 acid ethyl esters
**omeprazole delayed-
release**
ONETOUCH KITS/METERS;
ULTRA 2, ULTRAMINI,
VERIO, VERIO FLEX, VERIO
IQ, VERIO SYNC
ONETOUCH TEST STRIPS;
ULTRA, VERIO
ONEXTON (ST)
OPSUMIT (PA)
ORACEA (ST)
ORFADIN (PA)
OTEZLA (PA/ST)
OTOVEL
oxcarbazepine
oxybutynin ext-release
oxycodone (DQM)
**oxycodone/
acetaminophen**
OXYCONTIN (ST/DQM)
OZEMPIC (PA/DQM)

P

**pantoprazole delayed-
release**
paroxetine hcl (DQM)
PAROX (ST)
penicillin v potassium
PENTASA
PERFOROMIST (DQM)
PHOSLYRA
pioglitazone (DQM)
PLEGRIDY [INJ] (PA/ST/DQM)
**polymyxin/trimethoprim
eye solution**
**potassium chloride ext-
release**
pramipexole
pravastatin (DQM)
**prednisolone acetate eye
suspension**
**prednisolone sodium
phosphate**
prednisone
pregabalin
PREMARIN CREAM
PREMARIN TABLETS
PREMPHASE
PREMPRO
PREPOIK
PROAIR HFA (DQM)
PROAIR RESPICLICK (DQM)
PROCRT [INJ] (PA)
progesterone
PROLNSA
promethazine
**promethazine/
dextromethorphan**
propranolol
propranolol ext-release

SEE KEY ON NEXT PAGE.

EmblemHealth Pharmacy Benefit Services

2019 City of New York Employee Formulary Summary (continued)

PULMICORT FLEXHALER (DQM)
PYLERA

Q

QNASL (ST/DQM)
QUDEXY XR
quetiapine
QUILLICHEW ER (ST)
QUILLIVANT XR (ST)
quinapril
QVAR (DQM)
QVAR REDIHALER (DQM)

R

rabeprazole delayed-release
RAGWITEK (PA)
raloxifene
ramelteon (ST/DQM)
ramipril
ranitidine
ranolazine er
RAPAFLO (ST)
RECTIV
RESTASIS (PA/DQM)
RHOPRESSA
risperidone (DQM)

rizatriptan
ropinirole
rosuvastatin

S

SAVELLA (ST/DQM)
SEGLUROMET (DQM)
SEREVENT DISKUS
sertraline
simpesse
simvastatin
SOLIQUA [INJ] (DQM)
SOOLANTRA (ST)
spironolactone
sprintec
STEGLATRO (ST/DQM)
STRENSIQ [INJ]
STRIVERDI RESPIMAT (DQM)
sulfamethoxazole/trimethoprim
sumatriptan (DQM)
SUPREP
SYMBICORT (PA/DQM)
SYMFI
SYMFI LO
SYMLINPEN [INJ] (PA/DQM)
SYNJARDY, SYNJARDY XR (ST/DQM)

T

TACLONEX SUSPENSION (DQM)
tamoxifen
tamsulosin ext-release
TAYTULLA (PA)
TAZORAC 0.05% CREAM
TAZORAC GEL
TECFIDERA (ST)
TEKTRUNA, TEKTRUNA HCT
terazosin
terconazole vaginal
timolol maleate eye solution
tizanidine
TOBI PODHALER (PA/DQM)
TOBRADEX OINTMENT
TOBRADEX ST
tobramycin eye solution
tobramycin/dexamethasone eye suspension
topiramate
TOUJEO [INJ]
TOVIAZ (ST)
TRACLEER (PA)
TRADJENTA (ST/DQM)

tramadol (DQM)

TRAVATAN Z (ST)
trazodone
TRELEGY ELLIPTA (DQM)
TRESIBA [INJ]
triamcinolone topical
triamterene
triamterene/hctz
tri-lo-mili
trinessa
tri-sprintec
TRIUMEQ
TRULANCE
TRULICITY [INJ] (PA/DQM)

U

UCERIS FOAM
UPTRAVI (PA)

V

valacyclovir
valsartan
valsartan/hctz
VASCEPA (PA)
VELPHORO
venlafaxine (DQM)
venlafaxine ext-release (DQM)

VENTOLIN HFA (DQM)
verapamil ext-release
VESICARE (ST)
VIBERZI
VIIBRYD (ST/DQM)
VIMPAT
VIOKACE
VOSEVI (PA/DQM)
VYVANSE (ST)

W

warfarin
WELCHOL PACKETS (ST)

X

XARELTO (PA)
XELJANZ, XELJANZ XR (ST)
XIFAXAN (DQM)
XIGDUO XR (ST/DQM)
XIIDRA (PA/DQM)
XULTOPHY [INJ] (DQM)

Z

ZENPEP
ZEPATIER (PA/DQM)
zolpidem (DQM)
zolpidem ext-release (DQM)
ZOMIG NASAL (ST)

ZONTIVITY (PA)
ZUBSOLV (PA/DQM)
zumandimine
ZYLET (PA)

Key:

Capital letters:	Brand drug
Lowercase bold letters:	Generic drug
(PA):	Prior Authorization – Prescriber needs to obtain EmblemHealth approval for coverage of this drug (as outlined in the member's plan).
(DQM):	Drug Quantity Management – Quantities dispensed may be limited.
(ST):	Step Therapy – Drug is part of a program where drug options are organized in a series of steps (as outlined in the member's plan).
For the member:	Generic medications contain the same active ingredients as the corresponding brand-name medications, but may differ in color or shape. They have been FDA-approved under strict standards.
For the physician:	Please prescribe preferred products and allow generic substitutions when medically appropriate.

THIS FORMULARY SUMMARY IS EFFECTIVE OCTOBER 1, 2019 TO DECEMBER 31, 2019, AND IS SUBJECT TO CHANGE.

You can get more information about our formularies and our Pharmacy Benefit Services program at emblemhealth.com.

Formulary Disclaimer

Please refer to your benefit materials for specific coverage information. Your benefit design determines what is covered for you and what your copayment will be. The presence of a medication on this formulary does not guarantee that you as a plan member will be covered for that drug. Additionally, these medications may be subject to Prior Authorization. Coverage for some drugs may be limited to specific dosage forms and/or strengths. The medications listed on this formulary are subject to change pursuant to the formulary management activities of EmblemHealth's Pharmacy Benefit Services. As new generics become available, the corresponding brand-name drug will no longer be considered a preferred agent.

EmblemHealth Pharmacy Benefit Services
2019 City of New York Employee Formulary Summary (continued)

2019 NATIONAL PREFERRED FORMULARY EXCLUSIONS

The excluded medications shown below are not covered on the Express Scripts drug list. In most cases, if you fill a prescription for one of these drugs, you will pay the full retail price. **Take action to avoid paying full price.** If you're currently using one of the excluded medications, please ask your doctor to consider writing you a new prescription for one of the following preferred alternatives. Additional covered alternatives may be available. Costs for covered alternatives may vary. Log on to express-scripts.com/covered to compare drug prices. Not all the drugs listed are covered by all prescription plans; check your benefit materials for the specific drugs covered and the copayments for your plan. For specific questions about your coverage, please call the number on your member ID card. Express Scripts manages your prescription plan for your employer, plan sponsor, health plan or benefit fund. These excluded medications do not apply to Medicare plans.

DRUG CLASS	EXCLUDED MEDICATIONS	PREFERRED ALTERNATIVES
AUTONOMIC & CENTRAL NERVOUS SYSTEM		
Antiparkinsonism Agents	GOCOVRI ER, OSMOLEX ER	amantadine capsules, amantadine tablets, amantadine oral solution
Duchenne Muscular Dystrophy (DMD) Agents	EMFLAZA	prednisone solution, prednisone tablets
Long-Acting Opioid Oral Analgesics	EMBEDA, OXYCODONE ER	hydromorphone ER, morphine sulfate ER, oxymorphone ER, HYSINGLA ER, NUCYNTA ER, OXYCONTIN
Narcotic Analgesics	BUPRENORPHINE PATCHES, BUTRANS	fentanyl patches, hydromorphone ER, morphine sulfate ER, oxymorphone ER, BELBUCA, HYSINGLA ER, NUCYNTA ER, OXYCONTIN
Narcotic Antagonists	EVZIO	naloxone syringe, NARCAN NASAL SPRAY
Neuropathic Agents	LYRICA CR	gabapentin, GRALISE, pregabalin
Transmucosal Fentanyl Analgesics	ABSTRAL, FENTORA, LAZANDA	fentanyl citrate lozenges
DERMATOLOGICAL		
Oral Agents For Rosacea	DOXYCYCLINE 40 MG CA PSULES	ORACEA
Topical Acne/Antibiotic Combinations	AKTIPAK, VELTIN	clindamycin/benzoyl peroxide, clindamycin/tretinoin, erythromycin/benzoyl peroxide, ONEXTON
DIABETES		
Blood Glucose Meters & Test Strips	ABBOTT (FREESTYLE, PRECISION), BAYER (BREEZE, CONTOUR), NATIONAL MEDICAL (ADVOCATE), OMNIS HEALTH (EMBRACE, VICTORY), ROCHE (ACCU-CHEK), TRIVIDIA (TRUETEST, TRUETRA CK), UNISTRIP, ALL OTHER METERS & STRIPS THAT ARE NOT LIFESCAN BRAND	LIFESCAN (ONETOUCH)
Dipeptidyl Peptidase-4 Inhibitors & Combinations	ALOGLIPTIN, NESINA, ONGLYZA	JANUVIA, TRADJENTA
	ALOGLIPTIN/METFORMIN, KAZANO, KOMBIGLYZE XR	JANUMET, JANUMET XR, JENTADUETO, JENTADUETO XR
Glucagon-Like Peptide-1 Agonists	ADLYXIN, TANZEUM, VICTOZA	BYDUREON, BYETTA, OZEMPIC, TRULICITY
Insulins	NOVOLIN	HUMULIN
	ADMELOG, APIDRA, FIASP, NOVOLOG, INSULIN LISPRO	HUMALOG
EAR/NOSE		
Nasal Steroids	BECONASE AQ, OMNARIS, ZETONNA	budesonide, flunisolide, fluticasone, mometasone, QNASL
Otic Fluoroquinolone Antibiotics	CETRAXAL	ciprofloxacin ear solution, ofloxacin ear solution, CIPRODEX, OTOVEL
ENDOCRINE (OTHER)		
Estrogen and Estrogen Modifiers for Vaginal Symptoms	FEMRING	estradiol patches, estradiol tablets, yuvafem, ESTRING, PREMARIN CREAM, PREMARIN TABLETS
Topical Estrogen Gels	ESTROGEL	DIVIGEL

EmblemHealth Pharmacy Benefit Services
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DRUG CLASS	EXCLUDED MEDICATIONS	PREFERRED ALTERNATIVES
Topical Testosterone Products	FORTESTA, NATESTO, TESTOSTERONE GEL	ANDROGEL 1.62%
GASTROINTESTINAL		
Inflammatory Bowel Agents	ASACOL HD, DELZICOL, DIPENTUM, MESALAMINE 8 0 0 MG DELA YED-RELEASE	balsalazide disodium, mesalamine 1.2gm delayed release, sulfasalazine, APRISO, PENTASA
Irritable Bowel Syndrome and Chronic Constipation Agents	TRULANCE	AMITIZA, LINZESS
Pancreatic Enzymes	PANCREAZE, PERTZYE	CREON, ZENPEP
Proton Pump Inhibitors	ACIPHEX SPRINKLE, PRILOSEC SUSPENSION, PROTONIX SUSPENSION	esomeprazole, lansoprazole, omeprazole, pantoprazole, rabeprazole, NEXIUM PACKETS
HEPATITIS		
Hepatitis C	DAKLINZA, MAVYRET, OLYSIO, SOVALDI,	EPCLUSA, HARVONI, VOSEVI, ZEPATIER
MUSCULOSKELETAL & RHEUMATOLOGY		
Gout Therapy	COLCHICINE	COLCRYS, MITIGARE
OBSTETRICAL & GYNECOLOGICAL		
Vaginal Progestones	ENDOMETRIN	CRINONE 8% GEL
OPHTHALMIC		
Antiglaucoma Drugs (Beta-Adrenergic Blockers)	TIMOPTIC OCULOSE	betaxolol drops, levobunolol drops, timolol drops, ALPHAGAN P 0.1%, COMBIGAN
Antiglaucoma Drugs (Ophthalmic Prostaglandins)	ZIOPATAN	bimatoprost drops, latanoprost drops, LUMIGAN, TRAVATAN Z
Ophthalmic Non-Steroidal Anti-Inflammatory Drugs (NSAIDs)	ACUVAIL, NEVANAC	bromfenac drops, diclofenac drops, ketorolac drops, ILEVRO, PROLENSA
RENAL DISEASE		
Phosphate Binders	FOSRENOL POWDER PACKET, RENAGEL	lanthanum, sevelamer carbonate, PHOSLYRA, VELPHORO
RESPIRATORY		
Epinephrine Auto-Injector Systems	AUVI-Q, EPINEPHRINE AUTO-INJECTOR (BY A-S MEDICATION, IMPAX & LINEAGE)	EPINEPHRINE AUTO-INJECTOR (BY MYLAN), EPIPEN, EPIPEN JR
Long-Acting Muscarinic Antagonist Inhalers	SPIRIVA HANDIHALER, SPIRIVA RESPIMAT	INCRUSE ELLIPTA
Long-Acting Muscarinic Antagonist/ Long-Acting Beta-Agonist Combination Inhalers	STIOLTO RESPIMAT	ANORO ELLIPTA, BEVESPI AEROSPHERE
Pulmonary Anti-Inflammatory Inhalers	ALVESCO	ARMONAIR RESPICLICK, ARNUITY ELLIPTA, ASMANEX HFA /TWISTHALER, FLOVENT DISKUS/HFA, PULMICORT FLEXHALER, QVAR
Short-Acting Beta-Agonist Inhalers	LEVALBUTEROL HFA, PROVENTIL HFA, XOPENEX HFA	PROAIR HFA/RESPICLICK, VENTOLIN HFA
UROLOGICAL		
Erectile Dysfunction Oral Agents	LEVITRA, STAXYN	sildenafil, CIALIS
WEIGHT LOSS		
Weight Loss Agents	QSYMIA	benzphetamine, diethylpropion, phentermine
MISCELLANEOUS AGENTS		
	ENDARI	Over-the-Counter glutamine powder or tablets
	MEBOLIC, OMNIVEX, XYZBAC, ZYVIT	Over-the-Counter multivitamin combination plus folic acid
	NOCTIVA	desmopressin tablets

EmblemHealth Pharmacy Benefit Services
2019 City of New York Employee Formulary Summary (continued)

EXCLUDED MEDICATIONS/AT A GLANCE

ABILIFY	BUDESONIDE ER	FOLLISTIM AQ	LOVENOX	PULMICORT	ULTIMA
ABSTRAL	BUPAP	FORTESTA	LUNESTA	QSYMIA	UNISTRIP1
ACCU-CHEK	BUPRENORPHINE	FOSRENOL	LYRICA CR	RENAGEL	VALIUM
ACCU-CHEK AVIVA	BUTRANS	FREESTYLE FLASH SYSTEM	MAXALT	SAIZEN	VALTRES
ACCU-CHEK AVIVA CONNECT	CELEBREX	FREESTYLE FREEDOM	MAXALT MLT	SAIZEN-SAIZENPREP	VELTASSA
ACCU-CHEK AVIVA PLUS	CELEXA	FREESTYLE FREEDOM LITE	MAXIDEX	SANDOSTATIN LAR	VELTIN
ACCU-CHEK COMPACT	CETRAXAL	FREESTYLE INSULINX	MAVYRET	SANDOSTATIN LAR DEPOT	VERDESO FOAM
ACCU-CHEK COMPACT PLUS STRIPS	CIMZIA	FREESTYLE INSULINX TEST STRIPS	MEBOLIC	SAVAYSA	VICTOZA 2-PAK
ACCU-CHEK GUIDE MONITOR SYSTEM	CLIMARA PRO	FREESTYLE LITE METER	METHYLPHENIDATE ER	SEROQUEL	VICTOZA 3-PAK
ACCU-CHEK GUIDE TEST STRIP	COLCHICINE	FREESTYLE LITE METER	MICARDIS	SEROQUEL XR	VISCO-3
ACCU-CHEK NANO SMARTVIEW	COLESEVELAM HCL	FREESTYLE LITE STRIPS	MICARDIS HCT	SIGNIFOR LAR	VOGELXO
ACCU-CHEK SMARTVIEW	CONCERTA	FREESTYLE LITE TEST STRIPS	MINASTRIN 24 FE	SILIQ	VTORIN
ACCU-CHEK SMARTVIEW	CONTOUR	FREESTYLE PRECISION NEO	MIRCERA	SIMPONI	WELCHOL
ACCU-CHEK SMARTVIEW	CONTOUR LINK	FREESTYLE PRECISION NEO METER	NADOLOL	SINGULAIR	WELLBUTRIN SR
ACCU-CHEK SMARTVIEW	CONTOUR NEXT	FREESTYLE PRECISION NEO METER	NAMENDA XR	SOVALDI	XADAGO
ACCU-CHEK SMARTVIEW	CONTOUR NEXT EZ	FREESTYLE SIDEKICK II	NASONEX	SPIRIVA HANDIHALER	XALATAN
ACCU-CHEK SMARTVIEW	CONTOUR NEXT ONE	FREESTYLE SYSTEM	NATESTO	SPIRIVA RESPIMAT	XANAX
ACCU-CHEK SMARTVIEW	CONTOUR NEXT TEST STRIP	FREESTYLE TEST STRIPS	NESINA	STAXYN	XANAX XR
ACCU-CHEK SMARTVIEW	CONTOUR NEXT USB	FREESTYLE TEST STRIPS	NEUROGEN	STIOLTO RESPIMAT	XENAZINE
ACCU-CHEK SMARTVIEW	CONTOUR TEST STRIP	FREESTYLE TEST STRIPS	NEUPRO PATCH	STRATTERA	XERESE CREAM
ACCU-CHEK SMARTVIEW	COREG	FREESTYLE TEST STRIPS	NEURONTIN	STRIBILD	XOPENEX HFA
ACCU-CHEK SMARTVIEW	CORTIFOAM	FREESTYLE TEST STRIPS	NEUVASC	SUMAVEL DOSEPRO	XYZBAC
ACCU-CHEK SMARTVIEW	COSOPT	FREESTYLE TEST STRIPS	NOVASC	SUPARTZ FX	ZEGERID
ACCU-CHEK SMARTVIEW	COZAAR	FREESTYLE TEST STRIPS	NORVASC	SYNVISC	ZEPATIER
ACCU-CHEK SMARTVIEW	CRESTOR	FREESTYLE TEST STRIPS	NOVOLIN 70-30	SYNVISC-ONE	ZETIA
ACCU-CHEK SMARTVIEW	CYMBALTA	FREESTYLE TEST STRIPS	NOVOLIN N	TALTZ AUTOINJECTOR	ZETONNA
ACCU-CHEK SMARTVIEW	CYTOMEL	FREESTYLE TEST STRIPS	NOVOLIN R	TALTZ AUTOINJECTOR (2 PACK)	ZIOPTAN
ACCU-CHEK SMARTVIEW	DAKLINZA	FREESTYLE TEST STRIPS	NOVOLOG	TALTZ AUTOINJECTOR (3 PACK)	ZOCOR
ACCU-CHEK SMARTVIEW	DELZICOL	FREESTYLE TEST STRIPS	NOVOLOG FLEXPEN	TALTZ SYRINGE	ZOLOFT
ACCU-CHEK SMARTVIEW	DETROL	FREESTYLE TEST STRIPS	NOVOLOG MIX 70-30	TALTZ SYRINGE (2 PACK)	ZOMACTON
ACCU-CHEK SMARTVIEW	DETROL LA	FREESTYLE TEST STRIPS	NOVOLOG MIX 70-30	TALTZ SYRINGE (3 PACK)	ZOMIG
ACCU-CHEK SMARTVIEW	DEXTROAMPHETAMINE-AMPHET ER	FREESTYLE TEST STRIPS	NOVOLOG MIX 70-30 FLEXPEN	TANZEUM	ZORAMIC
ACCU-CHEK SMARTVIEW	DIOVAN	FREESTYLE TEST STRIPS	NUTROPIN AQ NUSPIN	TESTIM	ZYCLARA
ACCU-CHEK SMARTVIEW	DIOVAN HCT	FREESTYLE TEST STRIPS	OLYSIO	TESTOSTERONE	ZYFLO CR
ACCU-CHEK SMARTVIEW	DIPENTUM	FREESTYLE TEST STRIPS	OMNARIS	TIKOSYN	ZYPITAMAG
ACCU-CHEK SMARTVIEW	DOXYCYCLINE IR-DR	FREESTYLE TEST STRIPS	OMNITROPE	TIMOPTIC OCULOSE	ZYVIT
ACCU-CHEK SMARTVIEW	DUROLANE	FREESTYLE TEST STRIPS	OMNIVEX	TOBI	
ACCU-CHEK SMARTVIEW	DUZALLO	FREESTYLE TEST STRIPS	ONGLYZA	TOPAMAX	
ACCU-CHEK SMARTVIEW	EFFEXOR XR	FREESTYLE TEST STRIPS	OPANA ER	TOPICORT SPRAY	
ACCU-CHEK SMARTVIEW	EMADINE	FREESTYLE TEST STRIPS	OPTIUM	TRIBENZOR	
ACCU-CHEK SMARTVIEW	EMBEDA	FREESTYLE TEST STRIPS	OPTIUM EZ	TRICOR	
ACCU-CHEK SMARTVIEW	EMBRACE	FREESTYLE TEST STRIPS	ORENCIA	TRILEPTAL	
ACCU-CHEK SMARTVIEW	EMBRACE EVO	FREESTYLE TEST STRIPS	ORENCIA CLICKJECT	TRUE METRIX AIR GLUCOSE METER	
ACCU-CHEK SMARTVIEW	EMBRACE PRO	FREESTYLE TEST STRIPS	ORTHO TRI-CYCLEN	TRUE METRIX BLOOD GLUCOSE MTR	
ACCU-CHEK SMARTVIEW	EMFLAZA	FREESTYLE TEST STRIPS	ORTHO TRI-CYCLEN LO	TRUE METRIX GLUCOSE TEST STRIP	
ACCU-CHEK SMARTVIEW	ENDARI	FREESTYLE TEST STRIPS	OXYCODONE HCL ER	TRUE METRIX GO	
ACCU-CHEK SMARTVIEW	ENDOMETRIN	FREESTYLE TEST STRIPS	PANCREAZE	TRUE2GO BLOOD GLUCOSE SYSTEM	
ACCU-CHEK SMARTVIEW	EPINEPHRINE	FREESTYLE TEST STRIPS	PERTZYE	TRUERESULT BLOOD GLUCOSE METER	
ACCU-CHEK SMARTVIEW	EPOGEN	FREESTYLE TEST STRIPS	PLAQUENIL	TRUERESULT BLOOD GLUCOSE SYSTM	
ACCU-CHEK SMARTVIEW	ESTRACE	FREESTYLE TEST STRIPS	PLAVIX	TRUETEST TEST STRIPS	
ACCU-CHEK SMARTVIEW	ESTRADIOL	FREESTYLE TEST STRIPS	PRADAXA	TRUETRACK BLOOD GLUCOSE SYSTEM	
ACCU-CHEK SMARTVIEW	ESTROGEL	FREESTYLE TEST STRIPS	PRECISION PCX	TRUETRACK SMART SYSTEM	
ACCU-CHEK SMARTVIEW	EVZIO	FREESTYLE TEST STRIPS	PRECISION PCX PLUS	TRUETRACK TEST STRIP	
ACCU-CHEK SMARTVIEW	EXFORGE	FREESTYLE TEST STRIPS	PRECISION POINT OF CARE	TRULANCE	
ACCU-CHEK SMARTVIEW	EXFORGE HCT	FREESTYLE TEST STRIPS	PRECISION Q-I-D	TUDORZA PRESSAIR	
ACCU-CHEK SMARTVIEW	EXONDYS 51	FREESTYLE TEST STRIPS	PRECISION XTRA		
ACCU-CHEK SMARTVIEW	FEMRING	FREESTYLE TEST STRIPS	PRED MILD		
ACCU-CHEK SMARTVIEW	FENTORA	FREESTYLE TEST STRIPS	PREVACID		
ACCU-CHEK SMARTVIEW	FIASP	FREESTYLE TEST STRIPS	PRIOSECC		
ACCU-CHEK SMARTVIEW	FIASP FLEXTOUCH	FREESTYLE TEST STRIPS	PRISTIQ		
ACCU-CHEK SMARTVIEW	FLAREX	FREESTYLE TEST STRIPS	PROTONIX		
ACCU-CHEK SMARTVIEW	FLUOROURACIL	FREESTYLE TEST STRIPS	PROTONIX IV		
ACCU-CHEK SMARTVIEW	FML FORTE	FREESTYLE TEST STRIPS	PROVENTIL HFA		
ACCU-CHEK SMARTVIEW	FML S.O.P.	FREESTYLE TEST STRIPS	PROVIGIL		
ACCU-CHEK SMARTVIEW		FREESTYLE TEST STRIPS	PROZAC		



ATTENTION: Language assistance services, free of charge, are available to you. Call **1-877-411-3625** (TTY/TDD: **711**).

Español (Spanish)

ATENCIÓN: Usted tiene a su disposición, gratis, servicios de ayuda para idiomas. Llame al **1-877-411-3625** (TTY/TDD: **711**).

中文 (Traditional Chinese)

注意：我們免費提供相關的語言協助服務。請致電 **1-877-411-3625** (TTY/TDD: **711**)。

Русский (Russian)

ВНИМАНИЕ! Вам доступны бесплатные услуги переводчика. Звоните по тел. **1-877-411-3625** (служба текстового телефона TTY/TDD: **711**).

Kreyòl Ayisyen (Haitian Creole)

ATANSYON: Gen sèvis èd nan lang gratis ki disponib pou ou. Rele nimewo **1-877-411-3625** (TTY/TDD: **711**).

한국어 (Korean)

주의: 귀하에게 언어 지원 서비스가 무료로 제공됩니다. **1-877-411-3625**(TTY/TDD: **711**)번으로 전화하십시오.

Italiano (Italian)

ATTENZIONE: sono disponibili servizi gratuiti di assistenza linguistica. Chiami il numero **1-877-411-3625** (TTY/TDD: **711**).

אידיש (Yiddish)

אכטונג: שפראך הילף סערוויסעס, אהן קיין פרייז, זיינען דא צו באקומען פאר אייך. רופט **1-877-411-3625** (TTY/TDD: **711**).

বাংলা (Bengali)

মনোযোগ দিন: ভাষা সহায়তা পরিষেবাগুলি আপনার জন্য বিনামূল্যে উপলব্ধ আছে। **1-877-411-3625** (TTY/TDD: **711**) নম্বরে ফোন করুন।

Polski (Polish)

UWAGA: dostępna jest bezpłatna pomoc językowa. Prosimy zadzwonić pod numer **1-877-411-3625** (TTY/TDD: **711**).

العربية (Arabic)

يرجى الانتباه: تتوفر لك خدمات المساعدة اللغوية مجاناً، اتصل على الرقم **1-877-411-3625** أو (TTY/TDD: **711**).

Français (French)

ATTENTION : une assistance d'interprétation gratuite est à votre disposition. Veuillez composer le **1-877-411-3625** (TTY/TDD : **711**).

Tagalog (Tagalog)

NANANAWAGAN NG PANSIN: Mayroon kang magagamit na mga serbisyo para sa tulong sa wika nang walang bayad. Tawagan ang **1-877-411-3625** (TTY/TDD: 711).

Ελληνικά (Greek)

ΠΡΟΣΟΧΗ: Διατίθενται για σας υπηρεσίες γλωσσικής βοήθειας, δωρεάν. Καλέστε το **1-877-411-3625** (για άτομα με προβλήματα ακοής (TTY/TDD): 711).

Shqip (Albanian)

VINI RE: Shërbime ndihmore për gjuhën, falas, janë në dispozicionin tuaj. Telefononi në **1-877-411-3625** (TTY/TDD: 711).

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 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose first language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

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