

Blue Eagle Health, LLC Preferred Drug List (“PDL”)

Effective May 1, 2025

Note: Not all medication categories are included on this list.

PDL DRUG CATEGORY	GENERIC	PREFERRED BRAND	NON-PREFERRED BRAND
ALLERGY			
NASAL CORTICOSTEROIDS	azelastine/fluticasone flunisolide mometasone	Qnasl (ST) Dymista (ST)	Xhance (PA) Omnaris(ST) Zetonna (ST)
OPHTHALMIC ANTIHISTAMINES	azelastine epinastine		Alomide (ST)
BEHAVIORAL HEALTH			
ADHD AGENTS	amhetamine sulfate dextroamphetamine/ amphetamine dexmethylphenidate dextroamphetamine ER dextroamphetamine methylphenidate	Cotempla XR-ODT (ST) Dyanavel XR (PA) Quillichew Quillivant	Adderall XR Adzenys XR-ODT (ST) Azstarys (ST) Evekeo (PA) Mydayis Qelbree (ST) Relexxii (ST) Vyvanse
ANTIPSYCHOTICS	aripiprazole ODT/ oral solution asenapine clozapine olanzapine paliperidone quetiapine IR/XR risperidone ziprasidone	Lybalvi (ST) Rexulti (ST) Vraylar (ST) Caplyta (ST)	Fanapt (ST) Versacloz (ST)
CARDIOVASCULAR			
LIPID-LOWERING AGENTS	atorvastatin ezetimibe fluvastatin IR/ER (ST) lovastatin pravastatin rosuvastatin simvastatin simvastatin/ezetimibe		
ANTICOAGULANTS		Eliquis Xarelto	
PCSK9 INHIBITORS		Repatha	Praluent
ACL INHIBITOR		Nexletol (ST) Nexlizet (ST)	
DERMATOLOGY			
ACTINIC KERATOSIS AGENTS	diclofenac 3% fluorouracil 0.5% (PA) fluorouracil 5%		Klisyri (PA)
DIABETES			
DPP-4 INHIBITORS	Sitagliptin	Jentaduetto Jentaduetto XR Tradjenta	Januvia Janumet Janumet XR Kazano Kombiglyze XR Nesina (brand and authorized generic) Onglyza Oseni

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SGLT-2 INHIBITORS	Dapagliflozin	Farxiga Jardiance Synjardy Synjardy XR Xigduo XR	Invokana Invokamet Invokamet XR Segluromet Steglatro
DPP-4 INHIBITOR AND SGLT-2 INHIBITOR COMBINATIONS		Glyxambi Trijardy XR	Qtern Steglujan
GLP-1 AGONISTS		Bydureon (PA) Bydureon BCise (PA) Byetta (PA) Mounjaro (PA) Ozempic (PA) Rybelsus (PA) Trulicity (PA)	Adlyxin
INSULINS, RAPID-ACTING	Insulin lispro (authorized generic)	Humalog Lyumjev	Afrezza
INSULINS, SHORT-ACTING		Humuli Novolin (ST)	
INSULINS, LONG-ACTING		Levemir Toujeo (ST) Tresiba	Basaglar (ST) Semglee (yfgn)
INSULIN (LONG-ACTING) AND GLP-1 AGONIST COMBINATIONS		Soliqua (ST) Xultophy (ST)	
DIABETIC SUPPLIES		Preferred Abbott diabetic supplies (Precision, FreeStyle, FreeStyle Neo) BD insulin syringes BD pen needles	All non-Abbott diabetic supplies (e.g., Contour, Breeze, OneTouch brand) (ST)
ENDOCRINE			
ANDROGENS	testosterone cypionate (PA) testosterone enanthate (PA) testosterone gel (PA) testosterone solution (PA)	Androderm patch (PA) Natesto (PA)	Jatenzo (PA) Tlando (PA) Xyosted (PA)
ESTROGENS/ESTROGEN MODIFIERS	estradiol estradiol patches estradiol/norethindrone estropipate medroxyprogesterone norethindrone ac-eth estradiol progesterone, micronized	Bijuva Comvipatch Crinone Duavee Estring Intrarosa Osphena Premarin Premphase Pempro	Elestrin (ST) Femring (ST) Imvexxy (ST) Menest
FERTILITY AGENTS (IF COVERED)		Crinone (PA) Gonal-F (PA) Novarel (PA) Menopur (PA) Ovidrel (PA)	Chorionic gonadotropin (PA) Endometrin Follistim AQ (PA) Granirelix (PA) Pregnyl (PA)

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ELECTROLYTE REGULATION		Lokelma	Veltassa (PA)
OSTEOPOROSIS AGENTS	alendronate calcitonin, synthetic ibandronate raloxifene risedronate	teriparatide (PA) Tymlos (PA)	Forteo (PA)
WEIGHT REDUCTION (IF COVERED)	phentermine (PA) phendimetrazine (PA) diethylpropion (PA) topiramate(PA)	Contrave (PA) Qsymia (PA)	Plenity (PA) Xenical (PA)
GASTROINTESTINAL			
IRRITABLE BOWEL & CONSTIPATION	lubiprostone	Linzess Movantik (PA) Symproic (PA) Trulance (PA)	Ibsrela (PA) Motegrity (ST)
INFLAMMATORY BOWEL DISEASE AGENTS	balsalazide disodium mesalamine DR Pentasa sulfasalazine		Dipentum (ST) Lialda mesalamine ER
PANCREATIC ENZYMES		Creon Zenpep	Pancreaze Pertzye
GENITOURINARY			
DRUGS TO TREAT IMPOTENCY	sildenafil tadalafil 2.5mg, 5 mg (PA) tadalafil 10 mg, 20 mg		Stendra (ST) vardenafil (ST)
INFLAMMATORY DISEASE			
AUTOIMMUNE AGENTS	methotrexate	Rasuvo (ST)	Otrexup (ST)
PAIN MANAGEMENT			
HEADACHE/MIGRAINE TREATMENT	almotriptan eletriptan frovatriptan naratriptan rizatriptan sumatriptan zolmitriptan (ST)	Aimovig (PA) Ajovy (PA) Emgality (PA) Qulipta (PA) Ubrelyv (PA) Zembrace Symthouch (ST)	Nurtec ODT (PA)
RESPIRATORY			
BETA-AGONISTS, SHORT-ACTING (SABA)	albuterol HFA levalbuterol tartrate HFA	ProAir RespiClick	
INHALED CORTICOSTEROIDS (ICS)	Fluticasone Diskus/HFA	Arnuity Ellipta Alvesco Asmanex Qvar Redihaler	

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INHALED CORTICOSTEROID/ LONG-ACTING BETA AGONIST (ICS/LAB) COMBINATIONS	Budesonide/formoterol Fluticasone/Salmeteraol Diskus/Respiclick Wixela Inhub	Advair HFA Breo Ellipta Dulera	Airduo Airduo RespiClick Fluticasone Salmeteraol HFA
INHALED LONG-ACTING BETA AGONIST (LABA)	Arformoterol soln Formoterol soln	Serevent Diskus Striverdi Respimat	Brovana
INHALED LONG-ACTING MUSCARINIC ANTAGONISTS (LAMA)	Spiriva Handihaler	Incruse Ellipta Spiriva Respimat Yupelri	Tudorza Pressair
INHALED LONG-ACTING MUSCARINIC ANTAGONISTS AND LONG-ACTING BETA AGONIST (LAMA/LABA) COMBINATIONS		Anoro Ellipta Bevespi Aerosphere Stiolot Respimat	Duaklir Pressair Utibron Neohaler
INHALED CORTICOSTEROID, LONG-ACTING MUSCARINIC ANTAGONIST, AND LONG-ACTING BETA AGONIST (ICS/LAMA/LABA) COMBINATIONS		Trelegy Ellipta Breztri Aerosphere	
ANTI-LEUKOTRIENES	montelukast zafirlukast		
SPECIALTY			
ANEMIA AGENTS		Procrit (PA) Retacrit (PA)	Aranesp (PA) Epogen (PA) Mircera (PA)
ASTHMA BIOLOGICS		Dupixent (PA) Fasenra (PA) Nucala (PA) Xolair (PA)	
AUTOIMMUNE AGENTS		Enbrel (PA) Hadlima (PA) Otezla (PA) Rinvoq (PA) Stelara (PA) Taltz (PA) Tremfya (PA) Tyenne (PA) Yusimry (PA) Zymfentra (PA)	Cimzia (PA) Ilumya (PA) Kevzara (PA) Kineret (PA) Olumiant (PA) Orencia (PA) Siliq (PA) Simponi (PA) Xeljanz (PA)

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GROWTH HORMONES		Genotropin (PA) Omnitrope (PA) Serostim (PA) Skytrofa (PA)	Humatrope (PA) Norditropin (PA) Nutropin AQ NuSpin (PA) Zomacton (PA)
HEMATOLOGICAL DISORDERS- LEUKOCYTE (WBC) STIMULANTS		Nivestym Fulphila (PA) Neulasta (PA) Neulasta Onpro (PA) Udenyca (PA) Zarxio (PA) Ziextenzo (PA)	Granix (PA) Neupogen (PA) Nyvepria (PA) Releuko (PA)
HEPATITIS C AGENTS		Epclusa (PA) Harvoni (PA) Mavyret (PA) Vosevi (PA)	Sovaldi (PA) Viekira Pak (PA) Viekira XR (PA) Zepatier (PA)
MULTIPLE SCLEROSIS AGENTS	Dalfampridine (PA) dimethyl fumarate (PA) fingolimod 0.5 mg (PA) Glatopa (PA) glatiramer (PA)	Avonex (PA) Bafiertam (PA) Betaseron (PA) Kesimpta Pen (PA) Mavenclad (PA) Mayzent (PA) Plegridy (PA) Ponvory (PA) Rebif (PA) Rebif Rebidose (PA) Zeposia (PA)	Aubagio (PA) Copaxone (PA) Extavia (PA) Gilenya (PA) Tecfidera (PA)
ONCOLOGY AGENTS – HORMONE RECEPTOR-POSITIVE BREAST CANCER		Ibrance (PA) Kisqali (PA) Verzenio (PA)	

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

PA Prior Authorization Requires specific physician request process.
ST Step Therapy Coverage depends on previous use of another drug

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