Alternative Covered Drugs

Your plan's Drug List includes many different types of drugs, but it doesn't include all drugs. Drugs not covered by your plan typically have alternative drugs that can be used instead. This is a **partial** list of alternative drugs that you can use in place of some drugs that are not covered by your plan.

Talk with your provider or pharmacist to see if the alternative drugs listed here are appropriate for you.

| Drugs not covered by the plan | Alternative covered drugs - Tier |
|---|---|
| Amitiza | Linzess - 3 Lubiprostone - 3 Movantik - 3 Motegrity - 4 Relistor - 5 Trulance - 4 |
| Basaglar | Lantus – 3 Levemir – 3 Toujeo – 3 Tresiba – 3 |
| Bystolic | Atenolol Tablet - 1 Bisoprolol Fumarate - 2 Metoprolol Tablet - 1 Carvedilol Tablet - 1 |
| Cialis & Tadalafil 2.5mg and 5mg (BPH Only) | Alfuzosin Extended Release - 2 Doxazosin - 1 Tamsulosin - 1 |
| Cyclosporine Ophthalmic | Restasis – 3 |
| Metformin HCL Extended Release (Osmotic) | Metformin Extended Release (Generic Glucophage XR) - 1 |
| Novolin | Humulin – 3 |
| Novolog | Humalog – 3 Insulin Lispro – 3 Lyumjev – 3 |
| Nucynta ER | Xtampza XR – 4 Morphine Sulfate ER 15mg, 30mg, 60mg, 100mg Tablets – 3 |
| OxyContin | Xtampza XR – 4 Morphine Sulfate ER 15mg, 30mg, 60mg, 100mg |
| | Tablets - 3 |

| Drugs not covered by the plan | Alternative covered drugs - Tier |
|--|--|
| Proventil HFA | Albuterol HFA (Generic Proair/Proventil HFA) – 2 Proair HFA – 3 Proair Respiclick – 3 |
| Qvar Redihaler | Arnuity – 3 Flovent – 3 |
| Venlafaxine HCL Extended Release Tablet | Venlafaxine HCL Extended Release Capsule - 2 |
| Ventolin HFA | Albuterol HFA (Generic Proair/Proventil HFA) – 2 Proair HFA – 3 Proair Respiclick – 3 |
| Zolpidem Tartrate Extended Release | Trazodone 50mg, 100mg, 150mg Tablet – 1 Zolpidem Immediate Release – 2 Belsomra – 3 |

Bold type = Brand name drug Plain type = Generic drug



Note: Alternatives are suggestions only and may or may not be appropriate depending on the specific illness being treated. Information is accurate as of August 1, 2022, and may be subject to change. Please refer to the Drug List for details on drug coverage.

The Drug List may change at any time. You will receive notice when necessary.

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