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 & Lubiprostone | Linzess - 3 |
| | Movantik – 3 |
| | Motegrity – 4 |
| | Relistor – 4 |
| | Trulance - 4 |
| Basaglar | Lantus – 3 |
| | Levemir – 3 |
| | Toujeo – 3 |
| | Tresiba – 3 |
| Bevespi | Anoro Ellipta – 3 |
| Bystolic | Atenolol Tablet - 1 |
| | Bisoprolol Fumarate Tablet - 2 |
| | Metoprolol Succinate Tablet - 1 |
| | Carvedilol Tablet - 1 |
| Cialis & Tadalafil 2.5mg and 5mg (BPH | Alfuzosin Extended Release - 2 |
| Only) | Doxazosin - 2 |
| | Tamsulosin – 1 |
| Cyclosporine Ophthalmic | Restasis – 3 |
| | |
| Flovent | Pulmicort Inhaler – 3 |
| Flovent Icosapent Cap | Pulmicort Inhaler – 3 Vascepa – 3 |
| | |
| Icosapent Cap | Vascepa – 3 |
| Icosapent Cap Latuda | Vascepa - 3 Lurasidone - 3 |
| Latuda Metformin HCL Extended Release | Vascepa – 3 Lurasidone – 3 Metformin Extended Release (Generic Glucophage |
| Latuda Metformin HCL Extended Release (Osmotic) | Vascepa - 3 Lurasidone - 3 Metformin Extended Release (Generic Glucophage XR) - 1 |
| Latuda Metformin HCL Extended Release (Osmotic) | Vascepa – 3 Lurasidone – 3 Metformin Extended Release (Generic Glucophage XR) – 1 Xtampza XR – 4 |
| Latuda Metformin HCL Extended Release (Osmotic) | Vascepa - 3 Lurasidone - 3 Metformin Extended Release (Generic Glucophage XR) - 1 Xtampza XR - 4 Morphine Sulfate ER 15mg, 30mg, 60mg, 100mg |
| Latuda Metformin HCL Extended Release (Osmotic) Nucynta ER | Vascepa – 3 Lurasidone – 3 Metformin Extended Release (Generic Glucophage XR) – 1 Xtampza XR – 4 Morphine Sulfate ER 15mg, 30mg, 60mg, 100mg Tablets – 3 |
| Latuda Metformin HCL Extended Release (Osmotic) Nucynta ER | Vascepa – 3 Lurasidone – 3 Metformin Extended Release (Generic Glucophage XR) – 1 Xtampza XR – 4 Morphine Sulfate ER 15mg, 30mg, 60mg, 100mg Tablets – 3 Xtampza XR – 4 |
| Latuda Metformin HCL Extended Release (Osmotic) Nucynta ER | Vascepa - 3 Lurasidone - 3 Metformin Extended Release (Generic Glucophage XR) - 1 Xtampza XR - 4 Morphine Sulfate ER 15mg, 30mg, 60mg, 100mg Tablets - 3 Xtampza XR - 4 Morphine Sulfate ER 15mg, 30mg, 60mg, 100mg |
| Latuda Metformin HCL Extended Release (Osmotic) Nucynta ER OxyContin | Vascepa – 3 Lurasidone – 3 Metformin Extended Release (Generic Glucophage XR) – 1 Xtampza XR – 4 Morphine Sulfate ER 15mg, 30mg, 60mg, 100mg Tablets – 3 Xtampza XR – 4 Morphine Sulfate ER 15mg, 30mg, 60mg, 100mg Tablets – 3 |

| Drugs not covered by the plan | Alternative covered drugs - Tier |
|--|---|
| Proair HFA | Albuterol HFA (Generic Proair/Proventil HFA) – 2 Ventolin HFA – 3 |
| Proventil HFA | Albuterol HFA (Generic Proair/Proventil HFA) – 2 Ventolin HFA – 3 |
| Quetiapine Extended Release | Quetiapine Immediate Release - 2 |
| Qvar Redihaler | Pulmicort Inhaler – 3 |
| Spiriva | Incruse Ellipta – 3 |
| Symbicort | Breo Ellipta – 3 Advair – 3 |
| Venlafaxine HCL Extended Release Tablet | Venlafaxine HCL Extended Release Capsule - 3 |
| Xiidra | Restasis – 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



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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, 2023, 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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