Formulary Changes Effective 01/01/2021

Effective 01/01/2021 SelectHealth from VNSNY CHOICE will no longer cover the drug(s) listed in the table below.



NDC Code	Brand Name	Generic Name	Strength	Dosage Form	Formulary Alternative:
00135-0200-01	ABREVA	DOCOSANOL	10 %	CREAM (G)	Try an alternate manufacturer or speak with the pharmacist or doctor for alternative options
00135-0200-03	ABREVA	DOCOSANOL	10 %	CREAM (G)	Try an alternate manufacturer or speak with the pharmacist or doctor for alternative options
00713-0503-12	ANUCORT-HC	HYDROCORTISONE ACETATE	25 MG	SUPP.RECT	Try an alternate manufacturer or speak with the pharmacist or doctor for alternative options
24385-0006-05	ARTIFICIAL TEARS	POLYVINYL ALCOHOL/POVIDONE	0.5%- 0.6%	DROPS	Try an alternate manufacturer or speak with the pharmacist or doctor for alternative options
17478-0062-35	ARTIFICIAL TEARS	MINERAL OIL/PETROLATUM, WHITE	15 %- 83 %	OINT. (G)	Try an alternate manufacturer or speak with the pharmacist or doctor for alternative options
70000-0428-01	ASPIRIN EC	ASPIRIN	81 MG	TABLET DR	Try an alternate manufacturer or speak with the pharmacist or doctor for alternative options
00904-5062-60	CALCITRATE	CALCIUM CITRATE	200(950) MG	TABLET	Try an alternate manufacturer or speak with the pharmacist or doctor for alternative options
00904-5856-52	CALCIUM 600-VIT D3	CALCIUM CARBONATE/VITAMIN D3	600 MG- 200	TABLET	Try an alternate manufacturer or speak with the pharmacist or doctor for alternative options
00536-1206-10	CALCIUM CARBONATE	CALCIUM CARBONATE	260MG (648)	TABLET	Try an alternate manufacturer or speak with the pharmacist or doctor for alternative options
00536-2525-25	CAPSAICIN	CAPSAICIN	0.025 %	CREAM (G)	Try an alternate manufacturer or speak with the pharmacist or doctor for alternative options
00168-0133-46	CLOTRIMAZOLE	CLOTRIMAZOLE	1%	CREAM (G)	Try an alternate manufacturer or speak with the pharmacist or doctor for alternative options
00168-0133-30	CLOTRIMAZOLE	CLOTRIMAZOLE	1%	CREAM (G)	Try an alternate manufacturer or speak with the pharmacist or doctor for alternative options
58657-0500-16	CODEINE- GUAIFENESIN	CODEINE PHOSPHATE/GUAIFENESIN	10- 100MG/5	LIQUID	Try an alternate manufacturer or speak with the pharmacist or doctor for alternative options
65862-0190-01	CYCLOBENZAPRINE HCL	CYCLOBENZAPRINE HCL	5 MG	TABLET	Try an alternate manufacturer or speak with the pharmacist or doctor for alternative options
47335-0675-13	DILTIAZEM 24HR ER (CD)	DILTIAZEM HCL	120 MG	CAP ER 24H	Try an alternate manufacturer or speak with the pharmacist or doctor for alternative options
00904-5675-16	FIBER THERAPY	METHYLCELLULOSE (WITH SUGAR)	2 G/19 G	POWDER	Try an alternate manufacturer or speak with the pharmacist or doctor for alternative options
60505-0847-03	FLUTICASONE PROPIONATE	FLUTICASONE PROPIONATE	50 MCG	SPRAY SUSP	Try an alternate manufacturer or speak with the pharmacist or doctor for alternative options
11788-0001-10	FOLIC ACID	FOLIC ACID	1 MG	TABLET	Try an alternate manufacturer or speak with the pharmacist or doctor for alternative options

NDC Code	Brand Name	Generic Name	Strength	Dosage Form	Formulary Alternative:
64125-0118-05	FUROSEMIDE	FUROSEMIDE	80 MG	TABLET	Try an alternate manufacturer or speak with
					the pharmacist or doctor for alternative options
00378-5428-01	GABAPENTIN	GABAPENTIN	400 MG	CAPSULE	Try an alternate manufacturer or speak with
					the pharmacist or doctor for alternative options
00378-5426-01	GABAPENTIN	GABAPENTIN	100 MG	CAPSULE	Try an alternate manufacturer or speak with the pharmacist or doctor for alternative options
	GABAPENTIN	GABAPENTIN	400 MG	CAPSULE	Try an alternate manufacturer or speak with
59762-5028-01					the pharmacist or doctor for alternative options
					Try an alternate manufacturer or speak with
59762-5027-01	GABAPENTIN	GABAPENTIN	300 MG	CAPSULE	the pharmacist or doctor for alternative options
00500 4040 04			00.140		Try an alternate manufacturer or speak with
00536-1019-01	GAS RELIEF	SIMETHICONE	80 MG	TAB CHEW	the pharmacist or doctor for alternative options
12529 0510 10		CARBIT/EQUIS XT/ETHAN/CHIT/MSM	UNKNOW		Try an alternate manufacturer or speak with
43538-0510-12	GENADUR		N	LIQUID	the pharmacist or doctor for alternative options
00065-0426-36	GENTEAL TEARS	DEXTRAN/HYPROMELLOS E/GLYCERIN	0.132%	DROPS	Try an alternate manufacturer or speak with
00003-0420-30				DITOFS	the pharmacist or doctor for alternative options
00536-0825-85	GUAIFENESIN	GUAIFENESIN	100 MG/5ML	LIQUID	Try an alternate manufacturer or speak with
					the pharmacist or doctor for alternative options
00121-0775-08	GUAIFENESIN- CODEINE	CODEINE PHOSPHATE/GUAIFENESIN	10- 100MG/5	LIQUID	Try an alternate manufacturer or speak with
					the pharmacist or doctor for alternative options
68084-0430-98	HEALTHYLAX	POLYETHYLENE GLYCOL	17G	POWD PACK	Try an alternate manufacturer or speak with
		3350			the pharmacist or doctor for alternative options
00574-7090-12	HYDROCORTISONE ACETATE	HYDROCORTISONE ACETATE	25 MG	SUPP.RECT	Try an alternate manufacturer or speak with
	HYDROCORTISONE	HYDROCORTISONE			the pharmacist or doctor for alternative options Try an alternate manufacturer or speak with
42494-0301-24	ACETATE	ACETATE	25 MG	SUPP.RECT	the pharmacist or doctor for alternative options
	HYDROCORTISONE	HYDROCORTISONE	25 MG S		Try an alternate manufacturer or speak with
69367-0243-24	ACETATE	ACETATE		SUPP.RECT	the pharmacist or doctor for alternative options
	HYDROCORTISONE-	HYDROCORTISONE/ALOE	4.04	CREAM (G)	Try an alternate manufacturer or speak with
00904-7623-31	ALOE	VERA	1%		the pharmacist or doctor for alternative options
00470 0000 50		HYDROCORTISONE/ALOE	1.0/	CREAM (G)	Try an alternate manufacturer or speak with
00472-0339-56		VERA	1%		the pharmacist or doctor for alternative options
15802 0172 61	HYDROCORTISONE- PRAMOXINE	HYDROCORTISONE/PRAM OXINE	2.5 %-1 %	CREAM/APPL	Try an alternate manufacturer or speak with
45802-0472-64					the pharmacist or doctor for alternative options
57664-0761-13	HYDROXYCHLOROQ UINE SULFATE	HYDROXYCHLOROQUINE SULFATE	200 MG	TABLET	Try an alternate manufacturer or speak with
					the pharmacist or doctor for alternative options
67877-0294-01	IBUPROFEN	IBUPROFEN	400 MG	TABLET	Try an alternate manufacturer or speak with
					the pharmacist or doctor for alternative options

NDC Code	Brand Name	Generic Name	Strength	Dosage Form	Formulary Alternative:
00093-4148-56	LEVALBUTEROL	LEVALBUTEROL HCL	1.25MG/	VIAL-NEB	Try an alternate manufacturer or speak with
	HCL		3ML		the pharmacist or doctor for alternative options
00378-9691-52	LEVALBUTEROL	LEVALBUTEROL HCL	0.63MG/	VIAL-NEB	Try an alternate manufacturer or speak with
	HCL		3ML		the pharmacist or doctor for alternative options
52565-0122-30	LIDOCAINE	LIDOCAINE	4 %	CREAM (G)	Try an alternate manufacturer or speak with
					the pharmacist or doctor for alternative options
47781-0570-73	LIDOCAINE	LIDOCAINE	4 %	CREAM (G)	Try an alternate manufacturer or speak with
					the pharmacist or doctor for alternative options
39328-0024-30	LIDOCAINE	LIDOCAINE	4 %	CREAM (G)	Try an alternate manufacturer or speak with
			_	. ,	the pharmacist or doctor for alternative options
00781-5077-01	LORATADINE	LORATADINE	10 MG	TABLET	Try an alternate manufacturer or speak with
			15 0/ 02		the pharmacist or doctor for alternative options
00904-6488-38	LUBRIFRESH PM		15 %-83 %	OINT. (G)	Try an alternate manufacturer or speak with
		OIL/PETROLATUM, WHITE	70		the pharmacist or doctor for alternative options
00093-5768-01	OLANZAPINE	OLANZAPINE	5 MG	TABLET	Try an alternate manufacturer or speak with
	OMEPRAZOLE Of	OMEPRAZOLE			the pharmacist or doctor for alternative options
45802-0888-30			20 MG	TABLET DR	Try an alternate manufacturer or speak with the pharmacist or doctor for alternative options
					Try an alternate manufacturer or speak with
45802-0888-55	OMEPRAZOLE	OMEPRAZOLE	20 MG	TABLET DR	the pharmacist or doctor for alternative options
					Try an alternate manufacturer or speak with
62011-0157-02	OMEPRAZOLE	OMEPRAZOLE	20 MG	TABLET DR	the pharmacist or doctor for alternative options
					Try an alternate manufacturer or speak with
00904-5834-71	OMEPRAZOLE	OMEPRAZOLE	20 MG	TABLET DR	the pharmacist or doctor for alternative options
					Try an alternate manufacturer or speak with
00904-5834-41	OMEPRAZOLE	OMEPRAZOLE	20 MG	TABLET DR	the pharmacist or doctor for alternative options
	OMEPRAZOLE	OMEPRAZOLE	20 MG	TABLET DR	Try an alternate manufacturer or speak with
00113-0915-30					the pharmacist or doctor for alternative options
	OXYCODONE-	OXYCODONE	5 MG-	5 MG- 325MG TABLET	Try an alternate manufacturer or speak with
10702-0185-50	ACETAMINOPHEN	HCL/ACETAMINOPHEN	325MG		the pharmacist or doctor for alternative options
	POLYETHYLENE	/	17G	POWD PACK	Try an alternate manufacturer or speak with
69784-0180-14	GLYCOL 3350	3350			the pharmacist or doctor for alternative options
00904-6931-76	POLYETHYLENE	POLYETHYLENE GLYCOL	470	POWD PACK	Try an alternate manufacturer or speak with
	GLYCOL 3350	3350	17G POW		the pharmacist or doctor for alternative options
51079-0306-30	POLYETHYLENE		17G	POWD PACK	Try an alternate manufacturer or speak with
	GLYCOL 3350	3350			the pharmacist or doctor for alternative options
45802-0868-66	POLYETHYLENE	POLYETHYLENE GLYCOL	17G	POWD PACK	Try an alternate manufacturer or speak with
	GLYCOL 3350	3350			the pharmacist or doctor for alternative options

NDC Code	Brand Name	Generic Name	Strength	Dosage Form	Formulary Alternative:
00904-6422-81	POLYETHYLENE	POLYETHYLENE GLYCOL	17G	POWD PACK	Try an alternate manufacturer or speak with
	GLYCOL 3350	3350	1/0		the pharmacist or doctor for alternative options
00904-6422-13	POLYETHYLENE	POLYETHYLENE GLYCOL 3350	17G	POWD PACK	Try an alternate manufacturer or speak with
00004 0422 10	GLYCOL 3350				the pharmacist or doctor for alternative options
59310-0580-20	PROAIR RESPICLICK	ALBUTEROL SULFATE	90 MCG	AER POW BA	Try an alternate manufacturer or speak with
33310 0300 20					the pharmacist or doctor for alternative options
27808-0065-02	PROMETHAZINE- CODEINE	PROMETHAZINE HCL/CODEINE	6.25- 10/5	SYRUP	Try an alternate manufacturer or speak with
21000 0000 02					the pharmacist or doctor for alternative options
65162-0680-90	PROMETHAZINE-	PROMETHAZINE/DEXTRO METHORPHAN	6.25- 15/5	SYRUP	Try an alternate manufacturer or speak with
00102 0000 00	DM			011101	the pharmacist or doctor for alternative options
23155-0111-01	PROPRANOLOL HCL	PROPRANOLOL HCL	20 MG	TABLET	Try an alternate manufacturer or speak with
20100 0111 01					the pharmacist or doctor for alternative options
00536-4444-89	REGULOID	PSYLLIUM HUSK (WITH SUGAR)	3.4 G/7 G	POWDER	Try an alternate manufacturer or speak with
					the pharmacist or doctor for alternative options
00904-6434-59	SENNA	SENNOSIDES	8.6 MG	TABLET	Try an alternate manufacturer or speak with
					the pharmacist or doctor for alternative options
62011-0290-01	SENNA-S	SENNOSIDES/DOCUSATE	8.6MG-	TABLET	Try an alternate manufacturer or speak with
02011 0200 01		SODIUM	50MG		the pharmacist or doctor for alternative options
00536-3604-08	SIMETHICONE	SIMETHICONE	180 MG	CAPSULE	Try an alternate manufacturer or speak with
					the pharmacist or doctor for alternative options
00113-0431-62	SLEEP AID	DIPHENHYDRAMINE HCL	25 MG	TABLET	Try an alternate manufacturer or speak with
					the pharmacist or doctor for alternative options
00904-0262-52	STRESS FORMULA	MULTIVITAMIN, STRESS FORMULA	UNKNOW N	TABLET	Try an alternate manufacturer or speak with
					the pharmacist or doctor for alternative options
65862-0171-60	TOPIRAMATE	TOPIRAMATE	25 MG	TABLET	Try an alternate manufacturer or speak with
					the pharmacist or doctor for alternative options
54629-0110-01	VITAMIN A	VITAMIN A	8000	CAPSULE	Try an alternate manufacturer or speak with
0-020 0110-01			UNIT		the pharmacist or doctor for alternative options

These changes are being made because they are no longer covered under New York State Medicaid.

If you are currently taking any of the above medications, speak to your doctor about changing your prescription to a different drug, listed in the above table under *Available Formulary Alternative*. If no alternative is listed, ask your doctor if another covered drug can be prescribed for you.

If you have any questions, please call Member Services at 1-866-469-7774 (TTY: 711), 8 am – 6 pm, Monday – Friday.

This notice is also available in other formats for members with special needs or members who speak languages other than English. Please call the phone number listed above for help.