

2026 Alternative Covered Drugs

wellcare




MEDICARE ADVANTAGE

We strive to cover the most common drugs across all conditions. Below are some common drugs *not* covered by the plan, along with alternative drugs that *are* covered. If your patient is currently on a drug that is not covered, please see if the formulary alternatives listed below would work for your patient.

You can also check our plan's formulary (drug list) for a comprehensive listing of all drugs that are covered and any formulary restrictions that may apply.



Generics and authorized generics listed in the table below with the double asterisk (**) have the same active ingredients as the drug not covered on the formulary. If your patient has an *active* prescription for a drug *not* covered, they will still be able to access the listed double-asterisked drug without needing a new prescription.




 Drug(s) Not covered	 Drug(s) covered on the Formulary	 Formulary restrictions
BASAGLAR KWIKPEN (insulin glargine) TRESIBA (insulin degludec) INSULIN DEGLUDEC [DISCONTINUED] SEMGLEE (insulin glargine-yfgh)** LANTUS (insulin glargine)** INSULIN GLARGINE	INSULIN GLARGINE-YFGN**, INSULIN GLARGINE U-300	None
TOUJEO U-300 (insulin glargine)**	INSULIN GLARGINE U-300**, INSULIN GLARGINE-YFGN	None
BYDUREON BCISE [DISCONTINUED]	MOUNJARO, OZEMPIC, RYBELSUS, TRULICITY	PA, QL
XULTOPHY	SOLIQUA	QL

(continued)

For more than 20 years, Wellcare has offered a range of Medicare products, which offer affordable coverage beyond Original Medicare. Beginning Jan. 1, 2022, our affiliated Medicare product brands, including Allwell, Health Net, Fidelis Care, Trillium Advantage, and 'Ohana Health Plan transitioned to the newly refreshed Wellcare brand. If you have any questions, please contact Provider Relations.



By Allwell
By Fidelis Care
By Health Net
By 'Ohana Health Plan
By Trillium Advantage

 Drug(s) not covered on the Formulary	 Drug(s) covered on the Formulary	 Formulary restrictions
ADVAIR DISKUS**, wixela inhub**	fluticasone-salmeterol diskus**, breyna hfa, BREO ELLIPTA, ADVAIR HFA	QL
fluticasone-salmeterol hfa**	ADVAIR HFA**, breyna hfa, fluticasone-salmeterol diskus, BREO ELLIPTA	QL
SYMBICORT (budesonide-formoterol)**budesonide-formoterol hfa** DULERA	breyna hfa (budesonide-formoterol)**, fluticasone-salmeterol diskus, BREO ELLIPTA, ADVAIR HFA	QL
PULMICORT FLEXHALER	ARNUITY ELLIPTA	QL
FASENRA	DUPIXENT, XOLAIR	PA, QL
SIMBRINZA	ALPHAGAN P 0.1%, brimonidine 0.2%, brimonidine 0.15%, carteolol, COMBIGAN, dorzolamide, dorzolamide-timolol, brinzolamide, levobunolol, timolol gel, timolol drops	None
GEMTESA	mirabegron, tolterodine IR/ER, solifenacin, oxybutynin IR/ER	QL
diclofenac 2% topical solution pump	diclofenac 1.5% topical solution	QL
REPATHA	PRALUENT	PA
omega-3 ethyl esters	icosapent ethyl, VASCEPA	None
AJOVY	AIMOVIG, EMGALITY 120mg/ml	PA, QL
QULIPTA, UBRELVY, ZAVZPRET	NURTEC	PA, QL
ACTEMRA (tocilizumab)	TYENNE (tocilizumab-aazg), CYLTEZO, YUFLYMA, STEQEYMA, COSENTYX, OTEZLA, RINVOQ, SKYRIZI, TREMFYA	PA, QL
HUMIRA (adalimumab)**	CYLTEZO (adalimumab-adbm)**, YUFLYMA (adalimumab-aaty)**, STEQEYMA, COSENTYX, OTEZLA, RINVOQ, SKYRIZI, TREMFYA, TYENNE	PA, QL
STELARA (ustekinumab)**	STEQEYMA (ustekinumab-stba)**, CYLTEZO, YUFLYMA, COSENTYX, OTEZLA, RINVOQ, SKYRIZI, TREMFYA, TYENNE	PA, QL
AUSTEDO, AUSTEDO XR	INGREZZA, tetrabenazine	PA, QL
abiraterone acetate 500mg tab	abiraterone acetate 250mg tab, abirtega 250mg tab	PA, QL
EPOGEN (epoetin alfa), PROCRIT (epoetin alfa)	RETACRIT (epoetin alfa-epbx)	PA
VELTASSA	sodium polystyrene sulfonate, SPS, kionex, LOKELMA	None
TRULANCE	LINZESS, lubiprostone	QL
OPSUMIT	sildenafil 20mg, tadalafil 20mg, ambrisentan, bosentan	PA, QL

► Uppercase text = Brand Name Drug

► Lowercase text = generic drug

► **interchangeable alternative (same active ingredient)

► PA = Prior Authorization

► QL = Quantity Limit



Please note: Alternative drugs are suggestions *only* and may not be right for every patient or their condition. This information is correct as of **October 1, 2025**, but is subject to change. Please check the drug list for details on which drugs are covered, as this drug list can change at any time.