

Hot Tip: Allergies

Your Amerigroup District of Columbia, Inc. patients on nonpreferred products will experience a pharmacy claim rejection. To avoid additional steps or delays at the pharmacy, please consider prescribing preferred products whenever possible.

Non-Preferred Products	Preferred Products
Zyrtec [®] /Zyrtec D [®] <i>Generic: Cetirizine/Cetirizine D¹</i>	Fexofenadine/Fexofenadine-D <i>Brand: Allegra[®]/Allegra D[®]</i>
Xyzal [®] <i>Generic: Levocetirizine¹</i>	Over-the-counter (OTC) Loratadine, Loratadine/Pseudoephedrine <i>Brand: OTC Claritin[®]/Claritin D[®]</i>
Clarinex [®] <i>Generic: Desloratadine¹</i>	
Flonase [®] Nasal Spray <i>Generic: Fluticasone Nasal¹</i>	OTC Flonase [®] Allergy Relief
Nasonex [®] <i>Generic: Mometasone¹</i>	OTC Triamcinolone Acetonide Nasal Relief Over-the-counter (OTC) Nasacort [®]
Patanol [®] 0.1% Eye Drops <i>Generic: Olopatadine¹</i>	OTC Allergy Eye Drops, Ketotifen 0.025% <i>Brand: OTC Zaditor[®]</i>
Pataday [®] 0.2% Eye Drops <i>Generic: Olopatadine¹</i>	OTC Alaway [®] Eye Drops, Ketotifen 0.025%
Alocril [®] 2% Eye Drops	Epinastine 0.05% Eye Drops <i>Brand: Elestat[®]</i>
Alomide [®] 0.1% Eye Drops	Azelastine 0.05% Eye Drops
Bepreve [®] 1.5% Eye Drops	Cromolyn 4% Eye drops
Emadine [®] 0.5% Eye Drops	
Lastacaft [®] 0.25% Eye Drops	
Pazeo [®] 0.7% Eye Drops	
1 Neither brand nor generic formulations are covered.	

If you have questions regarding this *Hot Tip*, please call Provider Services at 1-800-454-3730.

Preferred Drug List: https://fm.formularynavigator.com/FBO/4/DC_PDL_English.pdf