SilverScript®

Excluded Medications/Devices/Supplies

EUTF & HSTA VB EGWP Retirees

Last Updated: 9/11/26

Drug Class/Category	EUTF	HSTA VB
Bulk Ingredients	Bulk chemicals, bulk powders, bulk compounding ingredients, bulk hormone replacement therapy, intravenous antibiotics and anti-infectives	
Contraceptive Devices, Contraceptive Implants, and Vaginal Contraceptives	Nexplanon, IUDs, diaphragms, pH modulators	Nexplanon
Cosmetic Drugs	Cosmetic drugs – including hair loss drugs, anti-wrinkle creams, hair removal creams, Botox, Dysport (requiring a prescription) and others	Cosmetic drugs – including hair loss drugs, anti-wrinkle creams, hair removal creams, Botox, Dysport (requiring a prescription) and others
COVID-19 Products	Monoclonal Antibodies, OTC at Home Test Kits, Specimen Collection Testing	Monoclonal Antibodies, OTC at Home Test Kits, Specimen Collection Testing
Diabetes Devices	Blood glucose monitors, continuous blood glucose monitors, sensors, transmitters, insulin pumps, and associated supplies and accessories Alcohol swabs, testing strips, lancets, lancing devices, insulin needles and syringes are covered.	Blood glucose monitors, continuous blood glucose monitors, sensors, transmitters, insulin pumps, and associated supplies and accessories Alcohol swabs, testing strips, lancets, lancing devices, insulin needles and syringes are covered.
Dietary Management Products	Oral nutritional supplements	

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Drug Class/Category	EUTF	HSTA VB
Erectile Dysfunction	Alprostadil, Avanafil, Sildenafil, Tadalafil, Vardenafil, Phenylephrine, Papaverine-phentolamine, Papaverine-phentolamine-alprostadil-atropine Muse (alprostadil) and drugs treating benign prostatic hyperplasia (BPH) are covered.	Alprostadil, Avanafil, Sildenafil, Tadalafil, Vardenafil, Phenylephrine, Papaverine-phentolamine, Papaverine-phentolamine-alprostadil-atropine Muse (alprostadil) and drugs treating benign prostatic hyperplasia (BPH) are covered.
Fertility	Fertility agents – injectable and oral	Fertility agents – injectable and oral
Hypercholesterolemia or Atherosclerotic Cardiovascular Disease	Praluent	Praluent
Over-the-Counter (OTC) Coverage Program	OTC proton pump inhibitors, OTC non-sedating antihistamines, OTC products within a compound, and Naloxone	OTC proton pump inhibitors, OTC non-sedating antihistamines, OTC products within a compound, and Naloxone
Passive Immunizing Agents	Rabies immune globulin, Hepatitis B immune globulin, Botulism immune globulin, Immune globulin, Rho D immune globulin, Vaccinia Immune globulin, Varicella-zoster immune globulin, Crotalidae immune fab, antivenin Latrodectus mactans, Antivenin micrurus fulvius, Centruroides immune fab, Tetanus immune globulin	Rabies immune globulin, Hepatitis B immune globulin, Botulism immune globulin, Immune globulin, Rho D immune globulin, Vaccinia Immune globulin, Varicella-zoster immune globulin, Crotalidae immune fab, antivenin Latrodectus mactans, Antivenin micrurus fulvius, Centruroides immune fab, Tetanus immune globulin
Prescription Anti-Smoking Aids	Apo-varenicline	Apo-varenicline

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Drug Class/Category	EUTF	HSTA VB
Prescription Multivitamins	Prescription vitamin supplements Prenatal and pediatric vitamins are covered.	
Respiratory Therapy Supplies	Peak flow meters, spacers, nebulizers, etc.	Nebulizers
Spinal Muscular Atrophy	Spinraza	Spinraza
Subgingival Implants	Arestin	
Therapeutic Devices and Software	Therapeutic devices or appliances, including prescription digital therapeutics, hypodermic needles, and syringes	Therapeutic devices or appliances, including prescription digital therapeutics, hypodermic needles, and syringes
Topical Analgesics	Various products	Various products
Vision Agents	Vuity, Upneeq	

Note:

- Exclusions include Medical Benefit Only products.
- Plans do not cover most non-FDA approved products.

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