



Premium Formulary Exclusions & Preferred Specialty Prior Authorization Requirements

July 1, 2021

Therapeutic Category	Excluded Medications	Preferred Alternatives	
ALLERGIC REACTIONS			
Anaphylaxis Treatment	Auvi-Q (0.15mg, 0.3mg)	epinephrine injection (0.15mg, 0.3mg)	
ANALGESICS			
Non-Steroidal Anti-Inflammatory Agents	Oral	Cambia, Diclofenac Cap 35mg (M), Zipsor, Zorvolex	celecoxib, diflunisal, etodolac, flurbiprofen, ibuprofen, indomethacin, ketoprofen, ketorolac, meclofenamate, meloxicam, nabumetone, naproxen, oxaprozin, piroxicam, sulindac, tolmetin
		Qmiiz ODT	meloxicam
		Relafen DS	nabumetone
	Other	Ketorolac Nasal Spray (M), Sprix Nasal Spray	diclofenac, ibuprofen, meloxicam
	Topical	Diclofenac Patch (M), Flector, Licart, Pennsaid, Voltaren gel	diclofenac gel/solution
Pain	Opioid combinations	Apadaz, Benzhydrocodone/acetaminophen	hydrocodone/acetaminophen, oxycodone/acetaminophen
	Oral Long-Acting Opioid Analgesics	Arymo ER, Kadian ER 200 mg, Nucynta ER, Oxycodone ER (M)	hydromorphone HCl ER, morphine sulfate ER, oxymorphone HCl ER, Hysingla ER, OxyContin, Xtampza ER
		Conzip, Tramadol ER 100mg, 200mg, 300mg cap (M)	tramadol ER
	Oral Short-Acting Opioid Analgesics	Nucynta	codeine sulfate, hydromorphone HCl, morphine sulfate, oxycodone HCl, oxymorphone HCl
	Transmucosal Fentanyl Analgesics	Abstral, Fentora, Fentanyl Citrate Buccal Tab (M), Lazanda, Subsys	fentanyl citrate lozenge
Skeletal Muscle Relaxants	Norgesic Forte, Orphengesic Forte (M)	orphenadrine tab, aspirin	
	Ozobax	baclofen	

(M) Co-branded product

¹ Existing utilizers of these medications will be allowed to continue on therapy. Continuation of therapy will not be provided for any other excluded drugs.

² Existing utilizers of these medications will be allowed to continue on therapy with the diagnosis of HIV only. Continuation of therapy will not be provided for any other excluded drugs

Therapeutic Category	Excluded Medications	Preferred Alternatives
ANTIBACTERIALS, ORAL		
Oral Antibiotics	Doryx 80mg, Doryx MPC, Doxycycline Hyclate DR 80mg, Minolira	doxycycline, minocycline
ANTICONVULSANTS		
Seizure Disorders	Lamictal ODT Kit	lamotrigine ODT
	Oxtellar XR ¹	oxcarbazepine IR
ANTIDEPRESSANTS		
Antidepressants	Bupropion XL (M) ¹ , Forfivo XL ¹	bupropion XL
ANTIFUNGALS, ORAL		
Oral Antifungals	Tolsura	itraconazole cap
ANTIHEMOPHILIACS		
Hemophilia A	Esperoct ¹	Adynovate, Afstyla, Eloctate, Jivi
ANTIMIGRAINES		
CGRP Antagonists	Ajovy	amitriptyline, atenolol, divalproex sodium, nadolol, propranolol, timolol, topiramate, venlafaxine, Aimovig, Emgality
	Reyvow	Nurtec ODT, Ubrelvy
Serotonin Receptor Agonists	Onzetra Xsail, Tosymra, Zembrace Symtouch	rizatriptan ODT, sumatriptan injection, sumatriptan nasal spray, zolmitriptan ODT
ANTIPARKINSON AGENTS		
Parkinson's Disease	Gocovri, Osmolex ER	amantadine
ANTIPSYCHOTICS		
Atypical/Second Generation Antipsychotics	Secuado ¹	aripiprazole, asenipine, olanzapine, quetiapine, quetiapine ER, risperidone
ANTIVIRALS		
Hepatitis-C drugs	Ledipasvir-Sofosbuvir (M), Sofosbuvir-Velpatasvir (M)	Epclusa, Harvoni, Mavyret, Vosevi
HIV drugs	Descovy ² , Temixys ¹	Please talk with your doctor about clinically appropriate options.
AUTONOMIC & CENTRAL NERVOUS SYSTEM		
Attention Deficit Disorder	Adhansia XR	methylphenidate ER, Vyvanse
Interferon Beta Medications for Multiple Sclerosis	Extavia ¹ , Plegridy ¹ , Rebif ¹ , Rebif Rebidose ¹	Avonex, Betaseron
CARDIOVASCULAR		
Cholesterol-Lowering Agents	Livalo, Zypitamag	atorvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin
Hypertension	Inderal XL , Innopran XL	propranolol ER
	Kaspargo	metoprolol ER
	Katerzia	amlodipine
Hypertension with Osteoarthritis	Consensi	amlodipine, celecoxib

(M) Co-branded product

¹ Existing utilizers of these medications will be allowed to continue on therapy. Continuation of therapy will not be provided for any other excluded drugs.

² Existing utilizers of these medications will be allowed to continue on therapy with the diagnosis of HIV only. Continuation of therapy will not be provided for any other excluded drugs

Therapeutic Category	Excluded Medications	Preferred Alternatives
CHEMOTHERAPY AGENTS		
Antiandrogens	Erleada ¹ , Yonsa ¹	
Kinase Inhibitors	Tabrecta ¹	Please talk to your doctor about clinically appropriate options.
Methyltransferase Inhibitors	Tazverik ¹	
CONTRACEPTIVES		
Gel	Phexxi	Please talk to your doctor about clinically appropriate options.
Oral	Lo Loestrin	junel FE, Iarin FE, microgestin FE, tarina FE
	Slynd	Camila, Incassia, Nora-Be, norethindrone, Norlyda, Norlyroc
Patch	Twirla	levonorgestrel/ethinyl estradiol combined generic oral contraceptive, Xulane
Vaginal ring	Annovera	etonogestrel-ethinyl estradiol vaginal ring
CORTICOSTEROIDS		
Oral Steroids	Hemady	dexamethasone
	Rayos	prednisone
DERMATOLOGICAL AGENTS		
Topical Acne Treatment	Avita, Differin lotion	adapalene, tretinoin cream/gel, Retin-A micro gel 0.06% and 0.08%
	Aklief, Aktipak, Clindagel, Clindamycin phosphate 1% gel(M), Dapsone 7.5% (M), Veltin	adapalene, adapalene/benzoyl peroxide, clindamycin gel/lotion/solution, clindamycin/benzoyl peroxide, dapsone, erythromycin/benzoyl peroxide, tretinoin cream, Aczone 7.5%, Amzeeq, Epiduo Forte, Onexton
	Arazlo, Fabior, Tazorac	tazarotene cream
Topical anesthetics	ZTlido	lidocaine patch
Topical Antifungals	Jublia	ciclopirox, tavaborole, terbinafine, Kerydin
Topical Antiinfectives	Noritate cream	metronidazole cream/gel/lotion, Finacea, Soolantra
Topical Corticosteroids	ALA Scalp lotion	hydrocortisone
	Apexicon E cream	fluocinonide, betamethasone
	Capex shampoo	Derma-Smoothe/FS, flucinolone acetone scalp oil
	Cordran tape	flurandrenolide
	Halobetasol foam(M), Lexette	betamethasone, clobetasol, halobetasol cream/ointment
	Halog ointment	betamethasone, mometasone, triamcinolone
	Impoyz cream	clobetasol

(M) Co-branded product

¹ Existing utilizers of these medications will be allowed to continue on therapy. Continuation of therapy will not be provided for any other excluded drugs.

² Existing utilizers of these medications will be allowed to continue on therapy with the diagnosis of HIV only. Continuation of therapy will not be provided for any other excluded drugs

Therapeutic Category	Excluded Medications	Preferred Alternatives
	Pandel cream	flurandrenolide, hydrocortisone valerate, triamcinolone acetonide
	Psorcon cream, Verdeso foam	betamethasone, fluocinolone
	Trianex oint 0.05%	hydrocortisone valerate, triamcinolone acetonide
	Ultravate lotion	clobetasol propionate, fluocinonide, halobetasol propionate
Topical Immune Response Modifier	Imiquimod cream pump 3.75% (M), Zyclara Pump	imiquimod
Topical Plaque Psoriasis	Calcipotriene foam 0.005% (M), Sorilux	calcipotriene
	Duobrii lotion	clobetasol, fluocinonide, halobetasol, tazarotene, Enstilar
DIABETES		
Blood Glucose Meters, Test Strips and Control Solutions	Examples: Abbott (FreeStyle, Precision), Arkray(GlucoCard), Ascencia (Contour, Contour Next), Trividia, (TRUEtest, TRUEtrack), Roche (Accu-Chek)	Lifescan (Onetouch)
Continuous Glucose Monitoring (CGM)	Freestyle Libre	Dexcom
Blood Sugar Regulators Miscellaneous	metformin HCl 24hr ER osmotic release, metformin HCl 24hr ER modified release	metformin ER
Dipeptidyl Peptidase-4 (DPP4) Inhibitors & Combinations	Alogliptin(M), Alogliptin with metformin(M), Alogliptin with pioglitazone(M), Kazano, Kombiglyze XR, Nesina, Onglyza, Oseni	Janumet, Janumet XR, Januvia, Jentadueto, Jentadueto XR, Tradjenta
Basal insulins	Basaglar, Levemir, Semglee, Tresiba	Lantus, Toujeo
Glucagon-Like Peptide-1(GLP1) Agonists	Adlyxin	Bydureon, Bydureon BCise, Byetta, Ozempic, Rybelsus, Trulicity, Victoza
Insulins	Novolin	Humulin
Rapid-acting insulins	Admelog, Apidra, Fiasp, Insulin Aspart (M), Insulin Lispro (M), Novolog	Humalog, Lyumjev
Sodium-glucose co-transporter (SGLT2) Inhibitors - Single agent	Invokana, Steglatro	Farxiga, Jardiance
Sodium-glucose co-transporter (SGLT2) inhibitors - Combination agents	Invokamet, Invokamet XR, Segluromet	Synjardy, Synjardy XR, Xigduo XR
SGLT2 and DPP4 Combinations	QTERN, Steglujan	Glyxambi, Trijardy XR
ENDOCRINE (OTHER)		
Growth Hormones	Genotropin, Humatrope, Omnitrope, Saizen, Zomacton	Norditropin, Nutropin
Infertility	Gonal-F, Gonal-F RFF	Follistim AQ
	Cetrotide	ganirelix (made by Organon)
Nocturia	Noctiva	desmopressin, Nocurna

(M) Co-branded product

¹ Existing utilizers of these medications will be allowed to continue on therapy. Continuation of therapy will not be provided for any other excluded drugs.

² Existing utilizers of these medications will be allowed to continue on therapy with the diagnosis of HIV only. Continuation of therapy will not be provided for any other excluded drugs

Therapeutic Category	Excluded Medications	Preferred Alternatives
Testosterone Replacement	Aveed, Jatenzo, Natesto, Testopel	testosterone, Androderm, Xyosted
ENZYME DISORDERS		
Duchenne Muscular dystrophy (DMD)	Exondys 51, Vyondys 53	dexamethasone, methylprednisolone, prednisone
GASTROINTESTINAL		
Anti-Diarrheal Agents	Motofen	diphenoxylate/atropine, loperamide
Antiemetics	Sancuso patch	granisetron solution/tablet, ondansetron ODT
Anti-Inflammatory, Anti-Ulcer Agents	Duexis	famotidine, ibuprofen
Irritable Bowel Syndrome with Constipation/ Chronic Idiopathic Constipation (IBS-C/CIC)	Amitiza, Lubiprostone (M), Trulance	Linzess
Opioid-Induced Constipation (OIC)	Amitiza, Lubiprostone (M), Movantik, Relistor	Symproic
Inflammatory Bowel Disease	Dipentum	balsalazide, mesalamine, Apriso
	Ortikos	budesonide ER
Laxatives	Golytely packets	Gavilyte-C, Gavilyte-H, PEG 3350
	Osmoprep, Plenvu	Clenpiq, Gavilyte, PEG 3350, Prepopik, Suprep
Pancreatic Enzymes	Pancreaze, Pertzye, Viokace	Creon, Zenpep
Proton pump inhibitors	omeprazole with sodium bicarbonate (cap, powder pak), Rabeprazole sprinkle cap (M), esomeprazole magnesium delayed release, lansoprazole, Aciphex Sprinkle caps, Dexilant	omeprazole, pantoprazole
HEMATOLOGICAL		
Immune globulin, intravenous (IVIG)	Asceniv ¹ , Panzyga ¹	Please talk to your doctor about clinically appropriate options.
Immune globulin, subcutaneous (SCIG)	Cutaquig ¹	Please talk to your doctor about clinically appropriate options.
IMMUNOMODULATORS		
Interleukin-17 (IL-17) Inhibitor	Cosentyx ¹	Taltz
JAK Inhibitor	Olumiant ¹	Rinvoq, Xeljanz, Xeljanz XR
IMMUNOTHERAPY		
Oral	Palforzia	Please talk to your doctor about clinically appropriate options.

(M) Co-branded product

¹ Existing utilizers of these medications will be allowed to continue on therapy. Continuation of therapy will not be provided for any other excluded drugs.

² Existing utilizers of these medications will be allowed to continue on therapy with the diagnosis of HIV only. Continuation of therapy will not be provided for any other excluded drugs

Therapeutic Category	Excluded Medications	Preferred Alternatives
OPHTHALMIC		
Antiglaucoma Drugs	Vyzulta, Zioptan	latanoprost ophthalmic solution, travoprost ophthalmic solution, Lumigan
	Timoptic Ocudose 0.25%	timolol ophthalmic solution
Antihistamines	Bepreve, Lastacaft, Pazeo, Zerviate	azelastine ophthalmic solution, olopatadine ophthalmic solution
Dry Eye Disease	Cequa	Restasis, Xiidra
Non-steroidal Anti-Inflammatory Agents	Bromsite, Ilevro, Nevanac	bromfenac ophthalmic solution, diclofenac ophthalmic solution, flurbiprofen sodium ophthalmic solution, ketorolac tromethamine ophthalmic solution, Prolensa
Wet Age-related Macular Degeneration	Beovu	ophthalmic bevacizumab (compound), Eylea, Lucentis, Macugen
OTHER		
Antigout Agents	Colchicine capsule (M), Colcrys, Gloperba, Mitigare	colchicine tablet
Cortisol Synthesis Inhibitors	Isturisa	ketoconazole tabs, Korlym
Diabetic Gastroparesis	Gimoti	metoclopramide
Lambert-Eaton Myasthenic Syndrome (LEMS)	Firdapse	Ruzurgi
Long-Chain Fatty Acid Oxidation Disorders (LC-FAOD)	Dojolvi	Please talk to your doctor about clinically appropriate options.
Multivitamins	Examples: Folic-K, Genicin Vita-S, Hylavite, Lorid, Tronvite, Xvite	Any preferred multivitamin
Obesity	Contrave	phentermine, Qsymia, Saxenda
Opioid Reversal Agents	Naloxone auto-injector, Evzio	Narcan
Osteoporosis	Forteo	Teriparatide, Tymlos
Platelet-Modifying Agent	Aspirin/Omeprazole (M), Yosprala	aspirin, omeprazole
Prenatal vitamins	Examples: Azesco, Pregenna, Prenate, Trinaz, Vitafof FE, Vitathely, Zalvit	Any preferred prenatal vitamin
Sickle Cell Anemia	Oxbryta	hydroxyurea
Thyroid Agents	Levothyroxine caps (M), Thyquidity, Tirosint caps, solution	levothyroxine

(M) Co-branded product

¹ Existing utilizers of these medications will be allowed to continue on therapy. Continuation of therapy will not be provided for any other excluded drugs.

² Existing utilizers of these medications will be allowed to continue on therapy with the diagnosis of HIV only. Continuation of therapy will not be provided for any other excluded drugs

Therapeutic Category	Excluded Medications	Preferred Alternatives
RESPIRATORY		
COPD: Inhaled Anticholinergics	Incruse Ellipta, Seebri, Tudorza	Spiriva
COPD: Long-Acting Beta Agonist/Long-Acting Muscarinic Agonist Combination inhalers	Bevespi, Duaklir, Utibron	Anoro Ellipta, Stiolto Respimat
Cystic Fibrosis	Cayston, Kitabis Pak, Tobramycin Neb 300mg/5ml (M)	tobramycin nebulizer soln, TOBI podhaler
Pulmonary Anti-Inflammatory Inhalers	Alvesco, Asmanex, Asmanex HFA, QVAR Redihaler	Arnuity Ellipta, Flovent Diskus, Flovent HFA, Pulmicort Flexhaler
Pulmonary Anti-Inflammatory, Long-Acting Beta Agonist Combination Inhalers	Airduo Digihaler, AirDuo Resplick, Armonair Digihaler, Budesonide/Formoterol (M), Dulera	Advair Diskus, Advair HFA, Breo Ellipta, Symbicort
Short-Acting Beta-2 Adrenergic Inhalers	Albuterol HFA (brand alternative for Ventolin HFA made by Prasco) (M), Levalbuterol Inhaler (M), Proair Digihaler, Proventil HFA, Xopenex HFA	Any generic albuterol HFA inhaler (EXCEPTION: albuterol HFA made by Prasco)
UROLOGICAL		
Erectile Dysfunction Oral Agents	Stendra	sildenafil
Interstitial Cystitis	Elmiron	amitriptyline, hydroxyzine

(M) Co-branded product

¹ Existing utilizers of these medications will be allowed to continue on therapy. Continuation of therapy will not be provided for any other excluded drugs.

² Existing utilizers of these medications will be allowed to continue on therapy with the diagnosis of HIV only. Continuation of therapy will not be provided for any other excluded drugs

Excluded brand-name medications with generic equivalents

The brand-name medications below are excluded on the formulary. These brand-name medications have been identified as having available generic equivalents covered at Tier 1 on the formulary. Speak with your pharmacist to have your excluded brand-name medication substituted with its generic equivalent.

A generic medication contains the same active ingredient(s) as a brand-name medication. An active ingredient is what makes the medication work. For example, Lipitor® and its generic both contain atorvastatin, which reduces the amount of bad cholesterol in the blood. Brand-name medications are often protected by a patent. When the patent ends, drug companies can apply to the U.S. Food and Drug Administration (FDA) to begin making generic versions of the medication.

Abilify	Carnitor solution, tablet	Dyazide	Lescol XL	Patanol	Seroquel	Ultracet
Acanya	Catapres-TTS patch	Effexor XR	Letairis	Paxil tab	Seroquel XR	Ultram
Aciphex tablet	Celebrex	Elidel	Levitra	Paxil CR	Silvadene	Vagifem
Acticlate	Celexa	Epiduo gel	Lexapro	Percocet	Singulair	Valium
Aczone 5%	Cialis	EpiPen Jr 0.15mg	Lialda	Plaquenil	Skelaxin	Valtrex
Adcirca	Ciprodex	Estrace	Lidoderm	Plavix	Solodyn	Vanadom
Adderall	Clarinox 5mg tab	Evekeo	Lipitor	Pravachol	Soma	Vectical
Adderall XR	Climara patch	Exforge	Loestrin 21	Pred Forte	Staxyn	Vesicare
Adipex-P	Clobex	Exforge HCT	Loestrin FE	Prevacid	Strattera	Viagra
Afinitor 2.5,5,7.5mg	Cloderm	Fioricet	Lotemax suspension	Prinivil	Suboxone	Vigamox
Alphagan P 0.15%	Colestid	Fioricet w/ codeine	Lotrel	Pristiq	Synthroid	Vimovo
Altace	Concerta	Flomax	Lovaza	Prometrium	Taclonex ointment	Vivelle-Dot
Ambien	Coreg	Focalin	Lunesta	Propecia	Tamiflu	Volgelxo
Ambien CR	Coreg CR	Focalin XR	Lyrica	Protonix tab	Targadox	Vytorin
Amrix	Cortef	Fortamet	Maxalt	Provigil	Targretin	Welchol
Androgel	Cosopt solution	Fortesta	Maxalt-MLT	Prozac	Tecfidera	Wellbutrin SR
Arimidex	Cosopt PF solution	Generess FE chewable	Metrogel	Pulmicort inhalation suspension	Tegretol	Wellbutrin XL
Arthrotec	Cozaar	Gleevec	Micardis	Qudexy XR	Tegretol-XR	Xalatan
Asacol HD	Crestor	Glumetza	Micardis HCT	Questran	Tenormin	Xanax
Atacand	Cymbalta	Golytely solution	Minastrin	Questran Light	Testim gel	Xanax XR
Ativan	Cytomel	Halog cream	Mobic	Ranexa	Tikosyn	Yasmin 28
Atripila ¹	Delestrogen injection 20mg/ml, 40mg/ml	Hyzaar	Moviprep	Relafen	Timoptic	Yaz
Avapro	Delzicol	Imitrex	MS Contin	Relpax	Timoptic Ocudose 0.5%	Zanaflex
Avodart	Depakote	Inderal LA	Nalfon	Remodulin injection	Timoptic-XE	Zegerid
Azor	Depakote ER	Intuniv	Nasonex	Renagel	TOBI nebulizer solution	Zestril
Baraclude	Depakote sprinkle cap	Kenalog spray	Natroba	Restoril	Tobradex suspension	Zetia
Benicar	Depo-testosterone injection	Kenalog-40 Injection	Neurontin	Retin-A	Topamax	Ziana
Benicar HCT	Keppra	Keppra XR	Nexium capsule	Retin-A micro gel 0.04%, 0.1%	Topamax sprinkle cap	Zocor
Benzaclin	Klonopin	Keppra XR	Niaspan ER	Risperdal solution, tablet	Topamax sprinkle cap	Zohydro ER
Benzamycin	Differin cream, gel	Klonopin	Nitrostat	Ritalin	Zoloft	Zomig tab
Bethkis	Dilantin cap 100mg	K-tab	Norco	Ritalin LA	Topicort spray	Zomig ZMT
Beyaz	Dilantin chewable	Kuvan	Norvasc	Roxicodone	Trileptal	Zonegran
Brisdelle	Dilantin suspension	Lamictal chewable	Nulytely	Sabril	Tracleer 62.5, 125mg	Zovirax
Butrans	Dilaudid	Lamictal starter kit	Onfi	Safyral	Tribenzor	Zyclara cream 3.75%
Canasa	Diovan	Lamictal ODT	Oracea	Sandostatin injection	Tricor	Zyprexa
Carafate	Diovan HCT	Lamictal tab	Ortho Micron	Saphris	Truveda ²	Zytiga
Carbatrol	Doryx tab 50, 200mg	Lamictal XR	Ortho-Tri-Cyclen Lo	Seasonique	Tylenol/cod tab	
Cardizem LA 180,240,300, 360, 420mg	Duragesic	Lasix	Ortho-Novum	Sensipar	Uceris tab	
		Latisse	Pataday			

(M) Co-branded product

¹ Existing utilizers of these medications will be allowed to continue on therapy. Continuation of therapy will not be provided for any other excluded drugs.

² Existing utilizers of these medications will be allowed to continue on therapy with the diagnosis of HIV only. Continuation of therapy will not be provided for any other excluded drugs

Required Prior Authorization +

Therapeutic Class	Non-Preferred Medications	Preferred Medications
Hepatitis C	All other brands non-preferred with prior authorization	Epclusa, Harvoni, Mavyret, Vosevi
Multiple Sclerosis	All other brands non-preferred with prior authorization	dimethyl fumarate DR, glatopa, glatiramer, Avonex, Bafiertam, Betaseron, Copaxone, Kesimpta, Vumerity
Immunomodulators	All other brands non-preferred with prior authorization	Avsola, Cimzia, Humira, Inflectra, Otezla, Rinvoq, Simponi, Skyrizi, Stelara, Tremfya, Xeljanz, Xeljanz XR

* All of the products listed above are currently subject to prior authorization. Preferred medications are required prior to new requests for non-preferred medication(s). Existing utilizers of non-preferred medication(s) within the therapeutic categories of Hepatitis C, Immunomodulators and Multiple Sclerosis will be eligible to remain on current therapy if compliance and efficacy of therapy are demonstrated. Exceptions will be granted for specific indications where the preferred agents do not have FDA-approval for use.

About this document: Where differences exist between this formulary and your benefit plan documents, the benefit plan documents rule. This may not be a complete list of medications, and not all medications listed may be covered by your plan. Please look at the benefit plan documents provided by your employer or plan sponsor for full details.



FutureScripts® is an independent company that provides pharmacy benefit management services. FutureScripts® is a registered trademark of OptumRx, an Optum company. All other trademarks are the property of their respective owners.