

# 2010 Preferred Drug List



Catholic Healthcare West



## 2010 Preferred Drug List

The CHW medical plans include coverage for prescription medications based on a Preferred Drug List (PDL). A PDL is a list of commonly prescribed drugs covered under your health plan at a lower copayment than those not listed on the PDL. If your prescribed drug is not on the list, you may want to contact your physician to find out if another medication on the list would be appropriate to treat your condition. You and your physician always make final decisions concerning your treatment, however, some drugs may not be covered by your benefit plan or you may be required to pay higher copayments. Always refer to your benefit materials to determine coverage and copayment amounts. If you have additional questions, please contact the Express Scripts Patient Care Contact Center at **1-877-292-1227**. To provide you with maximum flexibility, your prescription drug benefit provides coverage of prescription drugs at different levels. The amount that you pay out-of-pocket (your copayment) will vary for each of the following categories:

### **Generic**

Generic drugs are reviewed and approved by the Food and Drug Administration (FDA). They have the same active ingredients and come in the same strength and dosage as the brand name equivalent. You can expect the generic drug to produce the same effects as the comparable brand name drug. Generic drugs are listed in lower case letters.

### **Preferred Brand Drugs**

The brand name drugs included in this PDL have been selected for their clinical and economic value. Your copayment for preferred brand name drugs will be more than you will pay for generic drugs, but less than you will pay for non-preferred brand name drugs. This PDL includes a list of commonly prescribed preferred brand name drugs. Brand name drugs are listed in CAPITAL letters.

### **Non-Preferred Brand Name Drugs**

These brand name drugs are the most expensive form of prescription medication. Non-preferred brand name drugs are not listed in this PDL. You may want to discuss the possibility of using less costly preferred drug alternatives with your physician and/or health care provider.

### **Copay Amounts**

The amount of your copayment depends on whether the prescribed drug is a generic, preferred brand or non-preferred brand medication. If you request a brand name drug when a lower-cost generic equivalent is available, you will be required to pay the applicable copayment plus the difference in price between the brand name and the generic drug. Please refer to "A Guide to Your 2009 Medical Plans" booklet for copayment amounts. Non-preferred brand name drugs are not listed in this PDL.

### **Prior Authorization [PA]**

Certain medications require a prior authorization (PA) in advance of being dispensed. Your physician or health care provider must fax a PA form to the Express Scripts PA unit at **1-800-357-9577** before prescribing these medications. Medications that require PA are identified by a [PA] on the Preferred Brand Drug List.

### **Quantity Limits [QLL]**

Certain medications covered under the CHW medical plans have quantity limitations to encourage appropriate utilization. Quantity limits are based on clinically approved prescribing guidelines to ensure safe and proper use of medications. Drugs that have established quantity limits are identified on the PDL by the symbol [QLL]. You can download or view a complete list of drugs with quantity limits on **www.chwmedicalplans.com**. In order to receive an override for the indicated quantity limit, your physician is required to complete a PA Request Form and fax it to the Express Scripts PA unit at **1-800-357-9577**.

### **Step Therapy [ST]**

The step therapy program requires certain first-line drugs: generic drugs (tier 1) or preferred brand drugs (tier 2), to be prescribed prior to approval of specific second-line drugs: preferred brand drugs (tier 2) or non-preferred brand drugs (tier 3). Access to these second-line drugs is allowed and covered after use and therapeutic failure of two of the first-line drugs within 130 days. If direct access to the second-line drugs is needed, your participating physician can fax a PA form to the Express Script's PA unit at **1-800-357-9577**. Please refer to the Step Therapy list on **www.chwmedicalplans.com**. Drugs that require step therapy are identified on the PDL by the symbol [ST].

### **Medications by Mail**

This option of your drug benefit plan may be the most valuable method of receiving medications on the Preferred Drug List (PDL), you take over a long period of time. By using this program, you can obtain a 90-day supply of certain maintenance medications at a lower cost. Refer to "A Guide to Your 2010 Medical Plans" booklet for copayment amounts. For more information call the Express Scripts Patient Care Contact Center at **1-877-292-1227**.

### ***Specialty Medications***

Specialty medications are generally used for complex or chronic conditions, such as treatment for multiple sclerosis or rheumatoid arthritis. Your copay will be 25 percent of the cost of the drug, but not less than a \$50 copayment and no more than \$100. There is a \$2,500 annual copayment maximum and then the plan pays 100 percent of your specialty medications. You can receive up to a 30-day supply of medication.

### ***Special Pricing – SJHMC 222 Pharmacy***

Reduced copayments are available to all member who have prescriptions filled in the SJHMC 222 Pharmacy that are written by a St. Joseph's Hospital physician, resident and/or SJHMC emergency room physician. Refer to "A Guide to Your 2010 Medical Plans" for more specific information.



# 2010 Therapy Class Listing

The following is a list of the most commonly prescribed drugs. It represents an abbreviated version of the drug list (formulary) that is at the core of your pharmacy benefit plan. The list is not all-inclusive and does not guarantee coverage. In addition to using this list, you are encouraged to ask your doctor to prescribe generic drugs whenever appropriate. Brand name drugs are listed in CAPITAL letters. Generic drugs are listed in lower case letters.

## ANESTHETICS

### LOCAL ANESTHETICS

lidocaine hcl

### TOPICAL ANESTHETICS

lidocaine hcl,viscous  
lidocaine-prilocaine  
LIDODERM

## ANTIINFECTIVES

### AMINOGLYCOSIDES

gentamicin sulfate  
tobramycin sulfate

### ANTIRETROVIRALS & PROTEASE INH

AGENERASE  
APTIVUS  
COMBIVIR  
CRIXIVAN  
didanosine  
EMTRIVA  
EPIVIR  
EPZICOM  
FORTOVASE  
HIVID  
INVIRASE  
KALETRA  
LEXIVA  
NORVIR  
PREZISTA  
RESCRIPTOR  
REYATAZ  
SUSTIVA  
stavudine  
TRIZIVIR [PA]  
TRUVADA  
VIDEX (not EC)  
VIRACEPT  
VIRAMUNE  
VIREAD  
ZIAGEN  
zidovudine

### ANTITUBERCULOSIS DRUGS

isoniazid  
rifampin

### ANTITUBERCULOSIS DRUGS

isoniazid  
rifampin

### CEPHALOSPORINS

cefaclor,er  
cefadroxil  
cefidinir  
cefepodoxime proxetil  
cefprozil  
cefuroxime tab, susp  
cephalexin  
SUPRAX

### CLINDAMYCINS

clindamycin hcl,phosphate

### ERYTHROMYCINS

erythrocin stearate  
erythromycin base,ethylsuccinate

### ORAL ANTIFUNGAL DRUGS

ANCOBON  
clotrimazole  
fluconazole  
griseofulvin  
itraconazole  
ketoconazole  
nystatin

## ORAL ANTIFUNGAL DRUGS (Cont.)

SPORANOX soln  
terbinafine hcl

## OTHER ANTIINFECTIVE DRUGS

MEPRON  
NEBUPENT  
VANCOCIN HCL  
ZYVOX

## OTHER ANTIVIRAL DRUGS

acyclovir  
amantadine hcl  
famciclovir  
ribavirin [PA]  
rimantadine hcl

TYZEKA [PA]  
VALCYTE [PA]  
VALTREX [QLL] [ST]

## OTHER MACROLIDES

azithromycin  
clarithromycin

## OTHER TOPICAL ANTIFUNGALS

ciclopirox  
clotrimazole  
econazole nitrate  
ketoconazole  
LOPROX (shampoo)  
nystatin

## OXISTAT

## PENICILLINS

amoxicillin  
amoxicillin clavulanate  
AUGMENTIN ES, XR  
penicillin v potassium

## PLASMOCIDICIDES

COARTEM [PA]  
DARAPRIM

hydroxychloroquine sulfate  
quinine sulfate

## QUINOLONES

AVELOX,ABC PACK [QLL]  
ciprofloxacin hcl, er  
LEVAQUIN [QLL]  
ofloxacin

## SULFONAMIDES

erythromycin w/sulfisoxazole  
GANTRISIN  
sulfamethoxazole/trimethoprim  
sulfatrim

## TETRACYCLINES

doxycycline hyclate  
minocycline hcl  
tetracycline hcl

## TOPICAL ANTIBACTERIAL DRUGS

BACTROBAN,NASAL  
gentamicin sulfate  
mupirocin  
silver sulfadiazine  
ssd

## TOPICAL ANTIFUNGAL-CORTICOSTEROID COMB.

clotrimazole-betamethasone  
nystatin w/triamcinolone

## TOPICAL ANTIVIRAL DRUGS

ZOVIRAX topical

## TRICHOMONOCIDES

metronidazole

## URINARY ANTIINFECTIVES

FURADANTIN

## URINARY ANTIINFECTIVES (Con't)

nitrofurantoin macrocrystal  
trimethoprim

## VAGINAL ANTIFUNGALS

clotrimazole  
nystatin  
terconazole

## ANTINEOPLASTIC/IMMUNO-SUPPRESSANT DRUGS

ALKERAN [PA]  
ARIMIDEX  
AROMASIN  
ARAVA  
azathioprine  
bicalutamide  
CEENU  
cyclophosphamide  
cyclosporine  
CYTARABINE [PA]  
EMCYT  
etoposide [PA]  
FEMARA  
HEXALEN  
LEUKERAN  
LYSODREN  
megestrol acetate  
mercaptopurine  
methotrexate [PA]  
mycophenolate oral  
MYFORTIC  
NILANDRON  
RAPAMUNE  
tacrolimus  
tamoxifen citrate  
TARCEVA [PA]  
TARGRETIN  
TEMODAR [PA]  
TESLAC  
THIOGUANINE  
vinblastine sulfate [PA]  
XELODA  
ZOLINZA [PA]

## AUTONOMIC AND CNS MEDICATIONS

### ALIPHATIC PHENOTHIAZINES

chlorpromazine hcl

### ANALGESICS

tramadol hcl,-acetaminophen

### ANTICONSULSANT BARBITURATES

phenobarbital  
primidone

### ANTICONSULSANT BENZODIAZEPINES

clonazepam

DIASTAT

### ANTIDEMENTIA DRUGS

ARICEPT, -ODT

### ANTIMANIA DRUGS

lithium carbonate,citrate

### ANTIPARKINSON ANTICHOLINERGIC DRUGS

benztropine mesylate

### ANTIPTSYCHOTIC DRUGS

clozapine

### ANTIPSYCHOTIC DRUGS (Cont)

fluphenazine hcl  
GEODON [QLL]  
haloperidol  
loxapine succinate  
perphenazine  
risperidone (NOT -M) [QLL]  
thioridazine hcl  
ZYPREXA (not Zydys) [QLL]

### ANTIVERTIGO AND ANTIEMETIC DRUGS

granisetron [QLL]  
ondansetron hcl, -odt [QLL]  
prochlorperazine maleate  
promethazine hcl  
trimethobenzamide hcl

### ANXIOLYTICS

Alprazolam, ER  
buspirone hcl  
chlordiazepoxide hcl  
clorazepate dipotassium  
diazepam  
lorazepam

### CARBAMAZEPINES

carbamazepine, XR  
epitol  
oxacarbazepine

### CLASS II NARCOTICS

endocet  
endodan  
fentanyl [QLL]  
hydromorphone hcl  
meperidine hcl  
methadone hcl  
morphine sulfate  
MS CONTIN  
oxycodone hcl cap,soln,tab  
oxycodone w/acetaminophen,w/aspirin  
oxycodone/apap

### CLASS III NARCOTICS

acetaminophen w/codeine  
hydrocodone bit-ibuprofen

### CLASS IV NARCOTICS

propoxyphene hcl

### CNS STIMULANT DRUGS

amphetamine salt combo  
dexmethylphenidate  
METADATE CD  
metadate er tab sa 20 mg  
METHYLIN soln,tab (2.5 mg,5 mg,10 mg)  
methylin tab 5 mg,10 mg,20 mg  
methylin er  
methylphenidate er,hcl  
pemoline  
PROVIGIL[PA]

### DRUGS TO PREVENT AND TREAT HEADACHES

butalbital compound,w/codeine  
EQUAGESIC  
IMITREX nasal [QLL]  
MIGRANAL [QLL]  
sumatriptan tab, vial, syringes [QLL]  
ZOMIG,ZMT [QLL]

### HYDANTOINS

DILANTIN  
PHENYTEK  
phenytoin sodium  
phenytoin,sodium, extended

### MAO INHIBITORS

NARDIL  
tranylcypromine sulfate

### OTHER ANTICONVULSANTS

gabapentin  
GABITRIL  
lamotrigine tab and DISPER  
levetiracetam  
NEURONTIN soln  
topiramate  
zonisamide

### OTHER ANTIDEPRESSANTS

budeprion sr  
bupropion hcl  
mirtazapine  
trazodone hcl  
venlafaxine hcl

### OTHER ANTIPARKINSON DRUGS

bromocriptine mesylate  
carbidopa/levodopa  
COMTAN  
MIRAPEX  
ropinirole  
STALEVO 150

### OTHER CNS/AUTONOMIC DRUGS

PROSTIGMIN

### SECONDARY AMINES

desipramine hcl  
nortriptyline hcl

### SEDATIVE/HYPNOTIC DRUGS

flurazepam hcl  
temazepam  
triazolam  
zaleplon [QLL]  
zolpidem [QLL]

### SELECTIVE SEROTONIN REUPTAKE INHIBITORS

citalopram hbr [QLL]  
fluoxetine hcl [QLL]  
fluvoxamine maleate [QLL]  
paroxetine HCL ER  
paroxetine hcl, susp [QLL]  
sertraline [QLL]

### SMOKING CESSATION PRODUCTS

bupropion hcl  
CHANTIX

Nicotine patches

### SUCCINIMIDES

CELONTIN

### TERTIARY AMINES

amitriptyline hcl  
clomipramine hcl  
doxepin hcl  
imipramine hcl

### VALPROIC ACID AND DERIVATIVES

divalproex sodium, ER  
valproic acid

### CARDIOVASCULAR MEDICATIONS

#### AMIODARONES

amiodarone hcl

#### ANGIOTENSIN CONVERTING ENZYME INHIBITORS (ACE)

benazepril hcl  
captopril  
enalapril maleate  
fosinopril sodium  
lisinopril  
moexipril hcl  
quinapril hcl  
trandolapril

### ANGIOTENSIN II RECEPTOR ANTAGONISTS

AVAPRO [ST]

DIOVAN [ST]

### BETA-ADRENERGIC ANTAGONIST DRUGS

acebutolol hcl  
atenolol  
bisoprolol fumarate  
carvedilol  
labetalol hcl  
metoprolol succinate er  
metoprolol tartrate  
nadolol  
pindolol  
propranolol hcl  
timolol maleate

### CALCIUM ANTAGONISTS

amlodipine besylate  
cartia xt  
dilt-xr  
diltia xt  
diltiazem er,xr  
diltiazem hcl

felodipine er

isradipine

nicardipine hcl

nifediac cc

nifedical xl

nifedipine,er

nimodipine

verapamil hcl

verapamil er pm

### CARDIAC GLYCOSIDES

digitek

digoxin

### CENTRALLY ACTING ANTIHYPERTENSIVES

clonidine hcl

clonidine patch

guanfacine hcl

methyl dopa

### CLASS 1 - MEMBRANE STABILIZING

ETHMOZINE [PA]

#### CLASS 1A

quinidine gluconate

#### CLASS 1C

flecainide acetate

propafenone hcl

### HMG-COA REDUCTASE INHIBITORS

lovastatin [QLL]

pravastatin [QLL]

simvastatin [QLL]

### HYPOLIPOPROTEINEMICS

cholestyramine

colestipol hcl

fenofibrate

gemfibrozil

LOFIBRA

NIASPAN

TRICOR

### LOOP DIURETICS

bumetanide

furosemide

torsemide

### NITRATES

DILATRATE-SR

isosorbide dinitrate,mononitrate

nitroglycerin

### OTHER ANTIARRHYTHMICS

lidocaine hcl

sotalol

## OTHER ANTIHYPERTENSIVES

atenolol w/chlorthalidone  
AVALIDE [ST]  
benazepril hcl-hctz  
benazepril/amlodipine  
bisoprolol fumarate/hctz  
captopril/hydrochlorothiazide  
DIOVAN HCT [ST]  
enalapril maleate/hctz  
fosinopril-hydrochlorothiazide  
lisinopril-hctz  
moexipril-hydrochlorothiazide  
quinaretic

## OTHER CARDIOVASCULAR DRUGS

pentoxifylline

## POTASSIUM SPARING DIURETICS

amiloride hcl w/hctz  
spironolactone,w/hctz  
triamterene w/hctz

## THIAZIDE AND RELATED DRUGS

hydrochlorothiazide  
indapamide  
metolazone

## VASODILATING DRUGS

TRACLEER [PA]

## VASODILATOR ANTIHYPERTENSIVES

doxazosin mesylate  
HYDRALAZINE HCL  
prazosin hcl  
terazosin hcl

## DERMATOLOGICAL MEDICATIONS

### ANTIACNE DRUGS

AZELEX  
benzoyl peroxide  
clindamycin phosphate  
DIFFERIN  
erythromycin,base  
erythromycin base/benz peroxide  
metronidazole  
RETIN-A MICRO (PA AGE 26 and older)  
sod.sulfacetamide/sulfur tf  
tretinoin (PA AGE 26 and older)

### ANTI PRURITIC DRUGS

hydroxyzine hcl,pamoate

### ANTIPSORIASIS AND ANTIECZEMA DRUGS

calcipotriene solution  
DOVONEX cream  
drithocrema hp  
sulfacetamide sodium  
VECTICAL oin

### KERATOLYTIC DRUGS

CONDYLOX  
podofilox  
TRI-CHLOR

### SCABICIDES

acticin  
EURAX  
permethrin

## TOPICAL CORTICOSTEROID DRUGS

alclometasone dipropionate  
betamethasone dipropionate,dp  
augmented,valerate  
clobetasol propionate  
desonide  
desoximetasone  
diflorasone diacetate  
fluocinolone acetonide

## TOPICAL CORTICOSTEROID DRUGS

(Cont.)

fluocinonide  
fluticasone propionate  
halobetasol propionate  
hydrocortisone,valerate  
mometasone furoate  
triamcinolone acetonide

## TOPICAL DERMATOLOGICAL DRUGS

aluminum chloride  
ammonium lactate  
FLUOROPLEX  
PROTOPIC [ST]  
REGRANEX  
sodium chloride

## DIAGNOSTIC & MISCELLANEOUS MEDICATIONS

### DIAGNOSTIC PRODUCTS

dipyridamole

## EAR-NOSE-THROAT MEDICATIONS

### DRUGS AFFECTING THE EAR

a/b otic  
CERUMENEX  
CIPRO HC  
ofloxacin ear drops

### DRUGS AFFECTING THE NOSE

ASTELIN  
ATROVENT  
cromolyn sodium  
flunisolide  
fluticasone propionate  
ipratropium bromide  
NASONEX

### DRUGS AFFECTING THE THROAT AND MOUTH

doxycycline hyclate  
pilocarpine hcl  
triamcinolone acetonide

## ENDOCRINE MEDICATIONS

### ANTI THYROID DRUGS

methimazole  
propylthiouracil

### GLUCOCORTICOID DRUGS

dexamethasone  
hydrocortisone  
methylprednisolone  
prednisolone  
prednisone

### INSULIN

HUMALOG,MIX 50/50,MIX 75/25  
HUMULIN 50/50,70/30,N,R  
LANTUS inj 100 u/ml

### GLUCOSE ELEVATING DRUGS

GLUCAGON

### INSULIN SENSITIZERS & COMBOS

ACTOS [QLL]  
AVANDIA [QLL]

### MINERALOCORTICOID DRUGS

fludrocortisone acetate

### ORAL HYPOGLYCEMICS & COMBOS

acarbose  
chlorpropamide  
glimepiride

## ORAL HYPOGLYCEMICS & COMBOS

(Cont.)

glipizide,er,xl  
glyburide,-metformin hcl  
metformin hcl, er  
PRANDIN

## OTHER ENDOCRINE DRUGS

alendronate [QLL]  
cabergoline  
desmopressin acetate  
fortical  
FOSAMAX PLUS D [QLL]  
pamidronate disodium [PA]  
THYROID SUPPLEMENTS  
levothyroid  
levothyroxine sodium  
levoxyol  
liothyronine  
thyroid

## GASTROINTESTINAL MEDICATIONS

### ANTI DIARRHEAL DRUGS

diphenoxylate w/atropine  
loperamide hcl

### ANTISPASMODICS/DRUGS AFFECT GI MOTILITY

antispasmodic  
belladonna w/phenobarbital  
clidinium w/chlordiazepoxide  
COLYTROL

colytrol tab

dicyclomine hcl  
hyoscyamine sulfate  
metoclopramide hcl

### ANTIULCER DRUGS

#### H2 ANTAGONISTS

cimetidine  
famotidine  
nizatidine

ranitidine hcl

### HELICOBACTER PYLORI DRUGS

HELIDAC

PREVPAC

### OTHER ANTIULCER DRUGS

misoprostol

sucralfate

### OTHER GI DRUGS

amylase/lipase/protease  
ASACOL, -HD  
DIPENTUM  
ENZYMIX tab  
GASTRINEX  
hydrocortisone  
PENTASA  
sulfasalazine  
ursodiol

### PROTON PUMP INHIBITORS [STEP USE

GEN TAGAMET, ZANTAC, THEN  
GENERIC PRILOSEC][QLL]

omeprazole  
pantoprazole  
PREVACID

## IMMUNOLOGICALS AND VACCINES

GARDISIL  
HYPERHEP S/D  
HYPERRHO S/D

## **IMMUNOLOGICALS AND VACCINES(Cont.)**

ROTATEQ  
ZOSTAVAX [PA]

## **ERYTHROID STIMULANTS**

ARANESP [PA]  
PROCRIT [PA]  
**INTERFERONS**  
INTRON A [PA]

## **MEDICAL (MISCELLANEOUS) SUPPLIES**

### **DIABETIC SUPPLIES**

ACCU-CHEK III  
ACCU-CHEK ACTIVE  
ACCU-CHEK ADVANTAGE  
ACCU-CHEK AVIVA  
ACCU-CHEK COMFORT CURVE  
ACCU-CHEK COMPACT  
ACCU-CHEK COMPLETE  
CHEMSTRIP BG  
FAST TAKE  
GLUCOMETER ENCORE  
ONE TOUCH BASIC SYSTEM  
ONE TOUCH FASTTAKE  
ONE TOUCH INDUO  
ONE TOUCH PROFILE  
ONE TOUCH SURESTEP  
ONE TOUCH ULTRA ULTRAMINI  
ONE TOUCH ULTRA SMART  
SOFT TOUCH  
SOFTCLIX

## **MUSCULOSKELETAL MEDICATIONS**

### **CNS MUSCLE RELAXANTS**

carisoprodol  
cyclobenzaprine hcl  
ed-flex  
methocarbamol  
orphenadrine citrate  
SKELAXIN

### **DIRECT MUSCLE RELAXANTS**

baclofen  
tizanidine hcl

### **DRUGS TO PREVENT AND TREAT GOUT**

allopurinol  
colchicine  
probenecid  
sulfapyrazone

### **NON-STEROIDAL ANTIINFLAMMATORY AGENTS**

CELEBREX [ST]  
diclofenac sodium  
etodolac  
ibuprofen  
indomethacin  
ketoprofen  
meloxicam  
nabumetone  
naproxen  
oxaprozin  
piroxicam  
sulindac

## **OTHER DRUGS FOR ARTHRITIS**

CUPRIMINE  
RIDAURA  
SUPARTZ  
**SALICYLATES AND RELATED DRUGS**  
diflunisal  
salsalate

## **NUTRITION,BLOOD MODIFIERS,ELECTROLYTES**

### **ANTIPLATELET DRUGS**

cilostazol  
dipyridamole tab  
PLAVIX  
ticlopidine hcl

## **BLOOD DETOXICANTS**

### **ELECTROLYTES, IRRIGATING SOLUTIONS, ETC.**

sodium chloride

### **INJECTABLE ANTICOAGULANTS**

heparin sodium [PA]  
INNOHEP [PA]

### **ORAL ANTICOAGULANTS, VITAMIN K**

COUMADIN  
MEPHYTON  
warfarin sodium

### **POTASSIUM SUPPLEMENTS**

klor-con  
potassium chloride

### **THERAPEUTIC VITAMINS & MINERALS**

calcitriol  
HECTOROL

## **OBSTETRICAL & GYNECOLOGICAL MEDICATIONS**

### **ANDROGEN DRUGS**

ANDRODERM

### **CONTRACEPTIVES**

apri  
aranelle  
aviane  
cesia  
cryselle  
DESOGEN  
enpresse  
errin  
jolvivette  
junel fe  
kariva  
kelnor 1/35  
lessina  
levora-28  
LOESTRIN,FE  
low-ogestrel  
lutura  
microgestin,fe  
MIRCETTE  
MODICON  
mononessa  
necon  
NEXT CHOICE  
NORDETTE-28  
nortrel  
ogestrel  
ORTHO-CEPT

## **CONTRACEPTIVES (Cont.)**

ORTHO-CYCLEN  
ORTHO-NOVUM  
portia  
previfem  
reclipsen  
solia  
sprintec  
tri-lo sprintec  
tri-previfem  
tri-sprintec  
trinessa  
trivora-28  
velivet  
zovia 1/35e

### **ESTROGEN DRUGS**

estradiol,tds,transdermal patch  
ESTRATEST,H.S.

### **ESTRING**

estrogen & methyltestosterone  
estropipate

MENEST

PREMARIN

VAGIFEM

### **ESTROGEN/PROGESTIN COMBINATIONS**

PREMPHASE

PREMPRO

### **OB/GYN TOPICAL ANTIINFECTIVES**

clindamycin phosphate

### **OVULATORY STIMULANTS [\$]**

clomiphene citrate [PA]

LUVERIS [PA]

### **OXYTOCICS**

METHERGINE

### **PRENATAL VITAMINS**

prenatal rx  
natalcare plus

### **PROGESTIN DRUGS**

camila

medroxyprogesterone acetate [PA]

nora-be

norethindrone acetate

ORTHO MICRONOR

PROCHIEVE

PROMETRIUM

### **SPECIALIZED OB/GYN DRUGS**

chorex-10 [PA] [\$]

chorionic gonadotropin [PA] [\$]

leuprolide acetate [PA]

LUPRON [PA]

NOVAREL [PA] [\$]

## **OPHTHALMIC MEDICATIONS**

### **ANTI GLAUCOMA DRUGS**

acetazolamide ER

ALPHAGAN P

apraclonidine

AZOPT

brimonidine tartrate

dorzolamide-timolol

levobunolol hcl

pilocarpine hcl

timolol maleate

XALATAN

### **OPHTHALMIC**

### **ANTIINFECTIVE/CORTICOSTEROIDS**

FML-S

neomycin/polymyxin/dexameth

**OPHTHALMIC ANTIINFECTIVE/CORTICOSTEROIDS**

(Cont.)  
PRED-G  
sulfacetamide-prednisolone  
tobramycin-dexamethasone

**OPHTHALMIC CORTICOSTEROID DRUGS**

FML FORTE  
PRED MILD  
prednisolone acetate  
VEXOL

**OPHTHALMIC TOPICAL ANTIBACTERIAL DRUGS**

CILOXAN  
ciprofloxacin hcl  
erythromycin  
gentamicin sulfate  
ofloxacin polymyxin b sul/trimethoprim  
sulfacetamide sodium  
tobramycin sulfate

**OTHER OPHTHALMIC DRUGS**

ACULAR,LS,PF  
ALOMIDE  
cromolyn sodium  
EMADINE  
ketotifen fumarate  
PATANOL  
sodium chloride

**RESPIRATORY MEDICATIONS**

**ANTI HISTAMINE/DECONGESTANT COMBINATIONS**

andehist  
bromaxefed rf  
de-congestine tr  
dehistine

**ANTI HISTAMINE/DECONGESTANT COMBINATIONS (Cont.)**

duradryl  
ibuprofen  
promethazine vc  
pseudoephedrine w/chlorphenir  
SEMPREX-D

**ANTI HISTAMINES**

clemastine fumarate  
cyproheptadine hcl  
fexofenadine hcl [QLL]  
promethazine hcl

**ANTI TUSSIVE AND EXPECTORANT DRUGS**

ami-tex la,pse  
amibid dm  
andehist-dm  
benzonatate  
biotussin ac  
bromaxefed dm rf  
brometane dx  
carbofed dm  
cardec dm  
cranex la  
guaif-phenylphrine hcl  
guaifenesin w/codeine,w/pseudoephedrine  
guaifenex dm  
guaifenex pse  
h-c tussive  
histinex hc  
hydrocodone compound,w/guaifenesin  
promethazine vc  
w/codeine,w/codeine,w/dm  
TUSSIONEX  
vi-q-tuss

**BETA-2 ADRENERGIC DRUGS**

albuterol sulfate  
albuterol sulfate er  
ALBUTEROL SULFATE HFA

**BETA-2 ADRENERGIC DRUGS (Cont.)**

ALUPENT inhaler  
MAXAIR AUTOHALER  
metaproterenol sulfate  
PROAIR HFA  
PROVENTIL HFA  
SEREVENT DISKUS  
terbutaline sulfate

**LEUKOTRIENE MODIFIERS**

ACCOLATE [ST]

**METHYL XANTHINE DRUGS**

theophylline anhydrous  
UNIPHYL

**OTHER DRUGS FOR ASTHMA**

ADVAIR DISKUS,HFA [QLL]  
AEROBID,-M  
COMBIVENT  
cromolyn sodium  
EPIPEN,JR  
FLOVENT DISKUS,HFA  
INTAL  
ipratropium bromide  
ipratropium-albuterol soln  
sodium chloride  
SPIRIVA [QLL]

**UROLOGICAL MEDICATIONS**

**ANTICHOLINERGIC ANTISPASMODICS**

DETROL  
oxybutynin chloride, er

**OTHER GENITOURINARY PRODUCTS**

finasteride [PA]

FLOMAX [PA]

VIAGRA [QLL, PA]

**URINARY ANESTHETICS**

phenazopyridine hcl

Notes:

1. Diabetic supplies are covered at no copayment and are dispensed as written by the prescribing physician.
2. Pre-natal vitamins (both generic and brand products) are covered at no copayment.
3. Medications requiring prior authorization are identified by a [PA] on the Preferred Drug List. These drugs may change periodically due to plan decisions or actions by the Food and Drug Administration. Please refer to the Prior Authorization list for a full list of PA Drugs. Some classes of drugs requiring prior authorization are listed below but this listing is not inclusive.
  - Growth Hormones
  - Impotence Medications
  - Injectables, except Insulin, Insect sting kits, Imitrex injectable
  - Retin A (for members 26 years of age and older)
4. All drug forms, quantities and strengths may not be covered. Drug status may change periodically due to plan decisions or actions by the Food and Drug Administration. Such changes may affect this PDL's generic and brand listings and the associated copayments. All FDA-approved generic drugs are covered by the tier 1 drug list.
5. This list may change at anytime, and from time to time, without notice. You should contact the Express Scripts Patient Care Contact Center at **1-877-292-1227** to confirm the status of any particular drug.
6. Benefits for infertility medication are limited to a \$1,000 annual maximum.
7. Benefits for smoking cessation medication are limited to \$350 per calendar year.

## 2010 Alphabetical Listing

The following is a list of the most commonly prescribed drugs. It represents an abbreviated version of the formulary that is at the core of your pharmacy benefit plan. The list is not all-inclusive and does not guarantee coverage. In addition to using this list, you are encouraged to ask your doctor to prescribe generic drugs whenever appropriate. Brand name drugs are listed in CAPITAL letters. Generic drugs are listed in lower case letters.

### A

a/b otic (GEN FOR AURALGAN)  
 acarbose (GEN FOR PRECOSE)  
 ACCOLATE [ST]  
 ACCU-CHEK products (diabetic supplies)  
 acebutolol hcl (GEN FOR SECTRAL)  
 acetaminophen w/codeine (GEN FOR TYLENOL-CODEINE)  
 acetazolamide ER (GEN FOR DIAMOX SEQUELS)  
 acticin  
 ACTOS [QLL]  
 ACULAR,LS,PF  
 acyclovir (GEN FOR ZOVIRAX)  
 ADVAIR DISKUS,HFA [QLL]  
 AEROBID,-M  
 AGENERASE  
 albuterol sulfate (GEN FOR PROVENTIL)  
 albuterol sulfate er (GEN FOR VOSPIRE ER)  
 ALBUTEROL SULFATE HFA  
 alclometasone dipropionate (GEN FOR ACLOVATE)  
 alendronate (GEN FOR FOSAMAX) [QLL]  
 ALKERAN [PA]  
 allopurinol (GEN FOR ZYLOPRIM)  
 ALOMIDE  
 ALPHAGAN P  
 alprazolam (GEN FOR XANAX)  
 aluminum chloride (GEN FOR DRY SOL)  
 ALUPENT inhaler  
 amantadine hcl  
 amibid dm (GEN FOR MUCINEX DM)  
 amiloride hcl w/hctz  
 amiodarone hcl (GEN FOR PACERONE)  
 ami-tex la,pse (GEN FOR ENTEX PSE)  
 amitriptyline hcl (GEN FOR ELAVIL)  
 amlodipine besylate (GEN FOR NORVASC)  
 ammonium lactate (GEN FOR LAC-HYDRIN)  
 amoxicillin  
 amoxicillin clavulanate (GEN FOR AUGMENTIN)  
 amphetamine salt combo (GEN FOR ADDERALL)  
 amylase/lipase/protease (GEN FOR PANCREASE MT)  
 ANCOBON  
 andehist,-dm (GEN FOR RONDEC,-DM)  
 ANDRODERM  
 antispasmodic (GEN FOR DONNATAL)  
 apraclonidine (GEN FOR IOPIDINE)  
 apri (GEN FOR ORTHO-CEPT)  
 APTIVUS  
 aranelle (GEN FOR TRIPHASIL)  
 ARANESP [PA]  
 ARAVA  
 ARICEPT,-ODT  
 ARIMIDEX  
 AROMASIN  
 ASACOL,-HD  
 ASTELIN  
 atenolol,w/chlorthalidone (GEN FOR TENORMIN)  
 ATROVENT  
 AUGMENTIN ES, XR  
 AVALIDE [ST]  
 AVANDIA [QLL]

### A (Cont.)

AVAPRO [ST]  
 AVELOX,ABC PACK [QLL]  
 aviane (GEN FOR LEVLITE)  
 azathioprine (GEN FOR IMURAN)  
 AZELEX  
 azithromycin (GEN FOR ZITHROMAX)  
 AZOPT

### B

baclofen (GEN FOR LIORESAL)  
 BACTROBAN, NASAL  
 belladonna w/phenobarbital (GEN FOR DONNATAL)  
 benazepril hcl,-hctz (GEN FOR LOTENSIN)  
 benazepril/amlodipine (GEN FOR LOTREL)  
 benzonatate (GEN FOR TESSALON PERLE)  
 benzoyl peroxide (GEN FOR TRIAZ)  
 benztropine mesylate (GEN FOR COGENTIN)  
 betamethasone dipropionate,dp  
 augmented,valerate (GEN FOR DIPROSONE)  
 bicalutamide (GEN FOR CASODEX)  
 biotussol ac (GEN FOR CHERACOL)  
 bisoprolol fumarate,-/hctz (GEN FOR ZIAC)  
 brimonidine tartrate (GEN FOR ALPHAGAN)  
 bromaxefed dm rf (GEN FOR RONDEC)  
 brometane dx (GEN FOR DIMETANE-DX)  
 bromocriptine mesylate (GEN FOR PARLODEL)  
 budeprion sr (GEN FOR WELLBUTRIN SR)  
 bumetanide  
 BUPROBAN  
 bupropion hcl (GEN FOR WELLBUTRIN)  
 buspirone hcl (GEN FOR BUSPAR)  
 butalbital compound,w/codeine (GEN FOR FIORICET)

### C

cabergoline (GEN FOR DOSTINEX)  
 calcipotriene (GEN FOR DOVONEX solution)  
 calcitriol (GEN FOR ROCALTROL)  
 camila (GEN FOR ORTHO MICRONOR)  
 captopril (GEN FOR CAPOTEN)  
 captopril/hydrochlorothiazide (GEN FOR CAPOZIDE)  
 carbamazepine, XR (GEN FOR TEGRETOL, XR)  
 carbidopa/levodopa (GEN FOR SINEMET)  
 carbofed dm (GEN FOR RONDEC-DM)  
 cardec dm (GEN FOR RONDEC-DM)  
 carisoprodol (GEN FOR SOMA)  
 cartia xt (GEN FOR CARDIZEM CD)  
 carvedilol (GEN FOR COREG)  
 CEENU  
 cefaclor,er (GEN FOR CECLOR)  
 cefadroxil (GEN FOR DURICEF)  
 cefdinir (GEN FOR OMNICEF)  
 cefpodoxime proxetil (GEN FOR VANTIN)  
 cefprozil (GEN FOR CEFZIL)  
 cefuroxime tab, susp (GEN FOR CEFTIN)  
 CELEBREX [ST]  
 CELONTIN

### C (Cont.)

cephalexin (GEN FOR KEFLEX)  
 CERUMENEX  
 cesia (GEN FOR CYCLESSA)  
 CHANTIX  
 CHEMSTRIP BG  
 chlordiazepoxide hcl (GEN FOR LIBRIUM)  
 chlorpromazine hcl (GEN FOR THORAZINE)  
 chlorpropamide (GEN FOR DIABINESE)  
 cholestyramine (GEN FOR QUESTRAN)  
 chorex-10 [PA] [\$]  
 chorionic gonadotropin [PA] [\$]  
 ciclopirox (GEN FOR LOPROX)  
 cilostazol (GEN FOR PLETAL)  
 CILOXAN  
 cimetidine (GEN FOR TAGAMET)  
 CIPRO HC  
 Ciprofloxacin hc, er (GEN FOR CIPRO, XR)  
 citalopram hbr (GEN FOR CELEXA) [QLL]  
 clarithromycin (GEN FOR BIAXIN, XL)  
 clemastine fumarate (GEN FOR TAVIST)  
 clidinium w/chlordiazepoxide (GEN FOR LIBRAX)  
 clindamycin hcl,phosphate (GEN FOR CLEOCIN)  
 clobetasol propionate (GEN FOR TEMOVATE)  
 clomiphene citrate (GEN CLOMID) [PA] [\$]  
 clomipramine hcl (GEN FOR ANAFRANIL)  
 clonazepam  
 clonidine hcl (GEN FOR CATAPRES)  
 clonidine patch (GEN FOR CATAPRES-TTS 1,2,3)  
 clorazepate dipotassium (GEN FOR TRANXENE)  
 clotrimazole,-betamethasone (GEN FOR LOTRIMIN, LOTRISONE)  
 clozapine (GEN FOR CLOZARIL)  
 COARTEM [PA]  
 colchicine  
 colestipol hcl (GEN FOR COLESTID)  
 COLYTROL  
 colyrol tab  
 COMBIVENT  
 COMBIVIR  
 COMTAN  
 CONDYLOX  
 COUMADIN  
 crantex la (GEN FOR ENTEX LA)  
 CRIXIVAN  
 cromolyn sodium (GEN FOR INTAL)  
 cryselle (GEN FOR LO/OVRAL)  
 CUPRIMINE  
 cyclobenzaprine hcl  
 cyclophosphamide  
 cyclosporine  
 cyproheptadine hcl (GEN FOR PERIACTIN)  
 CYTARABINE [PA]

### D

DARAPRIM  
 de-congestine tr (GEN FOR DECONAMINE SR)  
 dehistine (GEN FOR EXTENDRYL)

## D (Cont.)

desipramine hcl (GEN FOR NORPRAMIN)  
desmopressin acetate (GEN FOR DDAVP)  
DESOGEN  
desonide (GEN FOR TRIDESILON)  
desoximetasone (GEN FOR TOPICORT)  
DETROL  
dexamethasone (GEN FOR DECADRON,  
DEXPAK)  
dexmethylphenidate (GEN FOR FOCALIN)  
DIASTAT  
diazepam (GEN FOR VALIUM)  
diclofenac sodium (GEN FOR VOLTAREN)  
dicyclomine hcl  
didanosine (GEN FOR VIDEX EC)  
DIFFERIN  
diflorasone diacetate (GEN FOR PSORCON)  
diflunisal (GEN FOR DOLOBID)  
digitek  
digoxin (GEN FOR LANOXIN)  
DILANTIN  
DILATRATE-SR  
diltia xt  
diltiazem er,xr (GEN FOR CARDIZEM CD)  
diltiazem er,xr (GEN FOR CARDIZEM CD)  
diltiazem hcl (GEN FOR CARDIZEM)  
dilt-xr  
DIOVAN,HCT [ST]  
DIPENTUM  
diphenoxylate w/atropine (GEN FOR  
LOMOTIL)  
dipyridamole tab (GEN FOR PERSANTINE)  
divalproex sodium, ER (GEN FOR DEPAKOTE  
EC, ER)  
dorzolamide-timolol (GEN FOR COSOPT)  
DOVONEX cream  
doxazosin mesylate (GEN FOR CARDURA)  
doxepin hcl (GEN FOR ADAPIN)  
doxycycline hyclate (GEN FOR  
VIBRAMYCIN)  
drithocrema hp (GEN FOR PSORiatec)  
duradryl (GEN FOR EXTENDRYL)

## E

econazole nitrate (GEN FOR SPECTAZOLE)  
ed-flex  
EMADINE  
EMCYT  
EMTRIVA  
enalapril maleate,hctz (GEN FOR  
VASOTEC)  
endocet (GEN FOR PERCOCET)  
endodan  
enpresse (GEN FOR TRIPHASIL)  
ENZYMAX tab  
EPIPEN,JR,JR.  
epitol (GEN FOR TEGRETOL)  
EPIVIR  
EPZICOM  
EQUAGESIC  
errin (GEN FOR ORTHO MICRONOR)  
erythrocin stearate (GEN FOR ILOSONE)  
erythromycin base/benz peroxide (GEN FOR  
BENZAMYCIN)  
erythromycin,base,ethylsuccinate,w/sulfisoxaz  
ole (GEN FOR E.E.S., PEDIAZOLE, T-STAT)  
estradiol,tds,transdermal patch (GEN FOR  
CLIMARA, ESCLIM, ALORA)  
ESTRATEST,H.S.  
ESTRING  
estrogen & methyltestosterone

## E (Cont.)

estropipate (GEN FOR OGEN, ORTHO EST)  
ETHMOZINE [PA]  
etodolac (GEN FOR LODINE)  
etoposide (GEN FOR VEPESID) [PA]  
EURAX

## F

famciclovoir (GEN FOR FAMVIR)  
famotidine (GEN FOR PEPCID)  
FAST TAKE  
felodipine er (GEN FOR PLENDIL)  
felodipine er GENERIC CA CHANNEL  
BLOCKERS  
felodipine er GENERIC CA CHANNEL  
BLOCKERS  
FEMARA  
fentanyl (GEN FOR ACTIQ) [QLL]  
fexofenadine hcl (GEN FOR ALLEGRA) [QLL]  
finasteride (GEN FOR PROSCAR) [PA]  
flecainide acetate (GEN FOR TAMBOCOR)  
FLOMAX [PA]  
FLOVENT DISKUS,HFA  
flucanazole (GEN FOR DIFLUCAN)  
fludrocortisone acetate (GEN FOR  
FLORINEF)  
flunisolide (GEN FOR NASAREL)  
fluocinolone acetonide (GEN FOR SYNALAR)  
flucinonide (GEN FOR LIDEX)  
FLUOROPLEX  
fluoxetine hcl (GEN FOR PROZAC) [QLL]  
fluphenazine hcl (GEN FOR PERMITIL)  
flurazepam hcl (GEN FOR DALMANE)  
fluticasone propionate (GEN FOR CUTIVATE,  
FLONASE)  
fluvoxamine maleate (GEN FOR LUVOX)  
[QLL]  
FML FORTE  
FML-S  
fortical (GEN FOR MIACALIN)  
FORTOVASE  
FOSAMAX PLUS D [QLL]  
fosinopril sodium (GEN FOR MONOPRIL)  
fosinopril sodium (GEN FOR MONOPRIL)  
fosinopril-hydrochlorothiazide (GEN FOR  
MONOPRIL HCT)  
FRENADOL  
FURADANTIN  
furosemide (GEN FOR LASIX)

## G

gabapentin (GEN FOR NEURONTIN)  
GABITRIL  
GANTRISIN  
GARDASIL  
GASTRINEX  
gemfibrozil (GEN FOR LOPID)  
gentamicin sulfate (GEN FOR GARAMYCIN)  
GEODON [QLL]  
glimepiride (GEN FOR AMARYL)  
glipizide,er,xl (GEN FOR GLUCOTROL)  
GLUCAGON  
GLUCOMETER DEX  
GLUCOMETER ENCORE  
glyburide,-metformin hcl (GEN FOR  
DIABETA, GLUCOVANCE)  
granisetron (GEN FOR KYTRIL) [QLL]  
griseofulvin (GEN FOR GRIFULVIN V)  
guaifenesin w/codeine,w/pseudoephedrine  
(GEN FOR TUSSI-ORGANIDIN NR)  
guaifenesin dm (GEN FOR MUCINEX DM)

## G (Cont.)

guaifenesin pse  
guaif-phenylphrine hcl  
guanfacine hcl

## H

halobetasol propionate (GEN FOR  
ULTRAVATE)  
haloperidol (GEN FOR HALDOL)  
h-c tussive (GEN FOR HISTUSSIN HC)  
HELIDAC  
heparin sodium [PA]  
HEXALEN  
histinex hc (GEN FOR HISTUSSIN HC)  
HIVID  
HUMALOG,MIX 50/50,MIX 75/25  
HUMULIN 50/50,70/30,N,R  
hydralazine hcl (GEN FOR APRESOLINE)  
hydrochlorothiazide (GEN FOR ESIDREX)  
hydrocodone bit-  
ibuprofen,compound,w/guaifenesin  
(GENERIC VICODEN ES, HYCODAN)  
hydrocortisone, valerate  
hydromorphone hcl (GEN FOR DILAUDID)  
hydroxychloroquine sulfate (GEN FOR  
PLAQUENIL)  
hydroxyzine hcl,pamoate (GEN FOR  
ATARAX)  
hyoscyamine sulfate (GEN FOR LEVSIN,  
LEVBID)  
HYPERHEP S/D

## I

ibuprofen (GEN FOR MOTRIN)  
imipramine hcl (GEN FOR TOFRANIL)  
IMITREX nasal [QLL]  
indapamide (GEN FOR LOZOL)  
indomethacin (GEN FOR INDOCIN)  
INNOHEP [PA]  
INTAL  
INTRON A [PA]  
INVIRASE  
ipratropium bromide (GEN FOR ATROVENT)  
ipratropium-albuterol soln (GEN FOR  
DUONEB)  
isoniazid (GEN FOR INH)  
isosorbide dinitrate,mononitrate (GEN FOR  
ISORDIL)  
isradipine (GEN FOR DYNACIRC)  
itraconazole (GEN FOR SPORANOX)

## J

jolivette (GEN FOR MICRONOR)  
junel fe (GEN FOR LOESTRIN FE)

## K

KALETRA  
kariva (GEN FOR MIRCETTE)  
kelnor 1/35 (GEN FOR DEMULEN 1/35-28)  
ketoconazole (GEN FOR NIZORAL)  
ketoprofen (GEN FOR ORUDIS)  
ketotifen fumarate (GEN FOR ZADITOR)  
klor-con

## L

labetalol hcl (GEN FOR TRANDATE)  
lamotrigine (GEN FOR LAMICTAL TAB and  
DISPERTAB)  
LANTUS

## L (Cont.)

lessina  
LETAIRIS  
LEUKERAN  
leuproliide acetate [PA]  
LEVAQUIN [QLL]  
levetiracetam (GEN FOR KEPPRA)  
levobunolol hcl (GEN FOR BETAGAN)  
levora-28 (GEN FOR LEVLIN)  
levothroid (GEN FOR SYNTHROID)  
levothyroxine sodium (GEN FOR SYNTHROID)  
levoxyil (GEN FOR SYNTHROID)  
LEXIVA  
lidocaine hcl,viscous  
lidocaine-prilocaine (GEN FOR EMLA)  
LIDODERM  
liothyronine (GEN FOR CYTOMEL)  
lisinopril,-hctz (GEN FOR ZESTRIL)  
lithium carbonate,citrate (GEN FOR ESKALITH LITHOBID)  
LOESTRIN,FE  
LOFIBRA  
loperamide hcl (GEN FOR IMODIUM)  
LOPROX (gel, shampoo)  
lorazepam (GEN FOR ATIVAN)  
lovastatin (GEN FOR MEVACOR) [QLL]  
low-ogestrel (GEN FOR LO/OVRAL)  
loxapine succinate (GEN FOR LOXITANE)  
LUPRON [PA]  
lutera (GEN FOR LEVLITE)  
LUVERIS [PA] [\$]  
LYSODREN

## M

MAXAIR AUTOHALER  
medroxyprogesterone acetate inj (GEN FOR DEPO-PROVERA) [PA]  
medroxyprogesterone acetate tab (GEN FOR PROVERA)  
megestrol acetate (GEN FOR MEGACE)  
meloxicam (GEN FOR MOBIC)  
MENEST  
meperidine hcl (GEN FOR DEMEROL)  
MEPHYTON  
MEPRON  
mercaptapurine (GEN FOR PURINETHOL)  
METADATE CD  
metadate er tab sa 20 mg (GEN FOR RITALIN-SR)  
metaproterenol sulfate (GEN FOR ALUPENT)  
metformin hcl, er (GEN FOR GLUCOPHAGE XR)  
methadone hcl  
METHERGINE  
methimazole  
methocarbamol  
methotrexate [PA]  
methylidopa  
methylin er (GEN FOR RITALIN-SR)  
METHYLIN soln,tab (2.5 mg,5 mg,10 mg)  
methylin tab 5 mg,10 mg,20 mg (GEN FOR RITALIN)  
methylphenidate er,hcl (GEN FOR RITALIN-SR)  
methylprednisolone (GEN FOR PRED FORTE)  
metoclopramide hcl (GEN FOR REGLAN)  
metolazone (GEN FOR ZAROXOLYN)  
metoprolol succinate er (GEN FOR TOPROL XL)  
metoprolol tartrate (GEN FOR LOPRESSOR)

## M (Cont.)

metronidazole (GEN FOR METROGEL-VAGINA, METROLOTION)  
microgestin,fe (GEN FOR LOESTRIN)  
MIGRANAL [QLL]  
minocycline hcl  
MIRAPEX  
MIRCETTE  
mirtazapine (GEN FOR REMERON)  
misoprostol (GEN FOR CYTOTEC)  
MODICON  
moexipril hcl (GEN FOR UNIVASC)  
moexipril-hydrochlorothiazide (GEN FOR UNIRETIC)  
mometasone furoate (GEN FOR ELOCON)  
mononessa (GEN FOR ORTHO-CYCLEN)  
morphine sulfate (GEN FOR MS CONTIN)  
MS CONTIN  
mupirocin (GEN FOR BACTROBAN)  
mycophenolate oral (GEN FOR CELLCEPT oral)  
MYFORTIC

## N

nabumetone (GEN FOR RELAFEN)  
nadolol (GEN FOR CORGARD)  
naproxen (GEN FOR NAPROSYN)  
NARDIL  
NASONEX  
natalcare plus  
NEBUPENT  
necon  
neomycin/polymyxin/dexameth  
NEURONTIN soln  
NEXT CHOICE (GEN FOR PLAN B)  
NIASPAN  
nicardipine hcl (GEN FOR CARDENE)  
NICOTINE PATCHES  
nifediac cc (GEN FOR ADALAT CC)  
nifedical xl (GEN FOR PROCARDIA XL)  
nifedipine,er (GEN FOR PROCARDIA XL)  
NILANDRON  
nimodipine (GEN FOR NIMOTOP)  
nitrofurantoin macrocrystal (GEN FOR MACRODANTIN)  
nitroglycerin  
nizatidine  
nora-be (GEN FOR ORTHO MICRONOR)  
NORDETTE-28  
norethindrone acetate  
nortrel  
nortriptyline hcl (GEN FOR AVENTYL HCL)  
NORVIR  
NOVAREL [PA] [\$]  
nystatin (GEN FOR MYCOSTATIN)  
nystatin w/triamcinolone (GEN FOR MYCOLOG)

## O

ofloxacin ear drops (GEN FOR FLOXIN EAR DROPS)  
ogestrel (GEN FOR OVRAL)  
omeprazole (GEN FOR PRILOSEC) (ST GEN TAGAMET ZANTAC, QLL)  
ondansetron hcl, -odt (GEN FOR ZOFRAN, -ODT)  
ONE TOUCH products (diabetic supplies)  
orphenadrine citrate (GEN FOR NORFLEX)  
ORTHO MICRONOR

## O (Cont.)

ORTHO-CEPT  
ORTHO-CYCLEN  
ORTHO-NOVUM  
oxacarbazepine (GEN FOR TRILEPTAL)  
oxaprozin (GEN FOR DAYPRO)  
OXISTAT  
oxybutynin chloride, er (GEN FOR DITROPAN XL)  
oxycodone hcl cap,soln,tab (GEN FOR OXYIR)  
oxycodone w/acetaminophen,w/aspirin (GEN FOR PERCOCET, PERCODAN)  
oxycodone/apap

## P

PAMIDRONATE DISODIUM [PA]  
pantoprazole (GEN FOR PROTONIX tabs) (ST GEN TAGAMET ZANTAC, QLL)  
paroxetine CR (GEN FOR PAXIL CR) [QLL]  
paroxetine hcl, susp (GEN FOR PAXIL) [QLL]  
PATANOL  
pemoline (GEN FOR CYLERT)  
penicillin v potassium (GEN FOR VEETIDS)  
PENTASA  
pentoxifylline (GEN FOR TRENTAL)  
permethrin (GEN FOR ELIMITE)  
perphenazine (GEN FOR TRILAFON)  
phenazopyridine hcl (GEN FOR PYRIDIUM)  
phenobarbital  
PHENYTEK  
phenytoin sodium  
phenytoin,sodium, extended (GEN FOR DILANTIN)  
pilocarpine hcl (GEN FOR PILOCAR)  
pindolol (GEN FOR VISKEN)  
piroxicam (GEN FOR FELDENE)  
PLAVIX  
podofilox (GEN FOR CONDYLOX)  
POLYGAM S/D  
polymyxin b sul/trimethoprim  
portia (GEN FOR LEVLIN)  
potassium chloride  
PRANDIN  
pravastatin (GEN FOR PRAVACHOL) [QLL]  
prazosin hcl (GEN FOR MINIPRESS)  
PRED MILD  
PRED-G  
prednisolone,acetate  
prednisone  
PREMARIN  
PREMPHASE  
PREMPRO  
prenatal rx  
PREZISTA  
PREVACID (ST GEN TAGAMET ZANTAC, QLL)  
previfem  
PREVPAC  
primidone (GEN FOR MYSOLINE)  
PROAIR HFA  
probenecid (GEN FOR BENEMID)  
PROCHIEVE  
prochlorperazine maleate (GEN FOR COMPAZINE)  
PROCRIT [PA]  
promethazine hcl,w/codeine,w/dm (GEN FOR PHENERGAN W/CODEINE)

## P (Cont.)

promethazine vc,w/codeine (GEN FOR PHENERGAN VC)  
PROMETRIUM  
propafenone hcl  
propoxyphene hcl (GEN FOR DARVON)  
propranolol hcl (GEN FOR INDERAL)  
propylthiouracil PROSTIGMIN  
PROTOPIC [ST]  
PROVENTIL HFA  
PROVIGIL[PA]  
pseudoephedrine w/chlorphenir (GEN FOR DECONAMINE SR)

## Q

quinapril hcl (GEN FOR ACCUPRIL)  
quinaretic (GEN FOR ACCURETIC)  
quinidine gluconate (GEN FOR QUINAGLUTE)  
quinine sulfate

## R

ranitidine hcl (GEN FOR ZANTAC)  
RAPAMUNE  
reclipsen (GEN FOR ORTHO-CEPT)  
REGRANEX  
RESCRIPTOR  
RETIN-A MICRO (PA age 26 and older)  
REYATAZ  
ribavirin (GEN FOR REBETOL) [PA]  
RIDAURA  
rifampin (GEN FOR RIFADIN)  
rimantadine hcl (GEN FOR FLUMADINE)  
risperidone (GEN FOR RISPERDAL) [QLL]  
ropinirole (GEN FOR REQUIP)  
ROTATEQ  
roxicet tab 5 mg

## S

salsalate (GEN FOR DISALCID)  
SEMPREX-D  
SEREVENT DISKUS  
sertraline (GEN FOR ZOLOFT) [QLL]  
silver sulfadiazine (GEN FOR SILVADENE)  
simvastatin (GEN FOR ZOCOR) [QLL]  
SKELAXIN  
sod.sulfacetamide/sulfur tf (GEN FOR SULFACET-R)  
sodium chloride  
SOFT TOUCH  
SOFTCLIX  
solia (GEN FOR ORTHO-CEPT)  
sotalol (GEN FOR BETAPACE)  
SPIRIVA [QLL]  
spironolactone,w/hctz (GEN FOR ALDACTAZIDE)  
SPORANOX soln  
sprintec (GEN FOR ORTHO-CYCLEN)  
ssd (GEN FOR SILVADENE)

## S (Cont.)

STALEVO 150  
stavudine (GEN FOR ZERIT)  
sucralfate  
sulfacetamide sodium (GEN FOR CARMOL)  
sulfacetamide-prednisolone  
sulfamethoxazole/trimethoprim (GEN FOR SEPTRA DS)  
sulfasalazine  
sulfatrim (GEN FOR SEPTRA DS)  
sulfipyrazone  
sulindac (GEN FOR CLINORIL)  
sumatriptan tablet, inj (GEN FOR IMITREX)  
SUPARTZ  
SUPRAX  
SURESTEP  
SUSTIVA

## T

tacrolimus (GEN FOR PROGRAF)  
tamoxifen citrate (GEN FOR NOLVADEX)  
TARCEVA [PA]  
TARGRETIN  
temazepam (GEN FOR RESTORIL)  
TEMODAR [PA]  
terazosin hcl (GEN FOR HYTRIN)  
terbinafine hcl (GEN FOR LAMISIL)  
terbutaline sulfate (GEN FOR BRETHINE)  
terconazole (GEN FOR TERAZOL)  
TESLAC  
tetracycline hcl (GEN FOR ACHROMYCIN V)  
theophylline anhydrous (GEN FOR THEOLAIR-SR)  
THIOGUANINE  
thioridazine hcl (GEN FOR MELLARIL)  
thyroid (GEN FOR SYNTHROID)  
ticlopidine hcl  
timolol maleate (GEN FOR BLOCADREN)  
tizanidine hcl (GEN FOR ZANAFLEX)  
tobramycin-dexamethasone (GEN FOR TOBRADEX)  
tobramycin sulfate (GEN FOR TOBREX)  
topiramate (GEN FOR TOPAMAX)  
torseamide (GEN FOR DEMADEx)  
TRACLEER [PA]  
tramadol hcl,-acetaminophen (GEN FOR ULTRACET)  
trandolapril (GEN FOR MAVIK)  
tranylcypromine sulfate  
trazodone hcl (GEN FOR DESYREL)  
tretinoin (GEN FOR RETIN-a) (PA age 26 and older)  
triamcinolone acetonide  
triamterene w/hctz (GEN FOR DYAZIDE)  
triazolam  
TRI-CHLOR  
TRICOR  
tri-lo sprintec (GEN FOR ORTHO TRI-CYCLEN LO)

## T (Cont.)

trimethobenzamide hcl  
trimethoprim (GEN FOR TRIMPEX)  
trinessa (GEN FOR ORTHO TRI-CYCLEN)  
tri-previfem  
tri-sprintec (GEN FOR ORTHO TRI-CYCLEN)  
trivora-28 (GEN FOR TRIPHASIL)  
TRIZIVIR [PA]  
TRUVADA  
TUSSIONEX  
TYZEKA [PA]

## U

UNIPHYL  
ursodiol (GEN FOR URSO,FORTE)

## V

VAGIFEM  
VALCYTE [PA]  
valproic acid (GEN FOR DEPAKENE)  
VALTRES [QLL, ST]  
VANCOCIN HCL  
VECTICAL oin  
velivet  
venlafaxine hcl (GEN FOR EFFEXOR)  
verapamil hcl (GEN FOR VERELAN)  
verapamil PM (GEN FOR VERELAN PM)  
VEXOL  
VIAGRA [QLL, PA]  
VIDEX (not EC)  
vinblastine sulfate [PA]  
vi-q-tuss (GEN FOR HYCOTUSS)  
VIRACEPT  
VIRAMUNE  
VIREAD

## W

warfarin sodium (GEN FOR COUMADIN)

## X

XALATAN  
XELODA

## Z

zaleplon [QLL] (GEN FOR SONATA)  
ZIAGEN  
zidovudine (GEN FOR RETROVIR)  
ZOLINZA [PA]  
zolpidem [QLL] (GEN FOR AMBIEN)  
ZOMIG,ZMT [QLL]  
zonisamide (GEN FOR ZONEGRAN)  
ZOSTAVAX [PA]  
zovia 1/35e (GEN FOR DEMULEN 1/35-28)  
ZOVIRAX topical  
ZYPREXA (not Zydys) [QLL]  
ZYVOX

### KEY

The symbol [\$] next to a drug name indicates the product has an annual maximum.  
The symbol [PA] next to a drug name indicates that a prior authorization is required.  
The symbol [QLL] next to a drug name indicates a quantity level limit.  
The symbol [ST] next to a drug name indicates Step Therapy may apply.  
The symbol [SP] next to a drug name indicates a specialty drug to be filled at a specialty pharmacy.

## Examples of Non-Formulary Medications with Selected Formulary Alternatives

The following is a list of some non-formulary brand medications with examples of selected alternatives that are on the formulary. Column 1 lists examples of non-formulary medications. Column 2 lists some alternatives that can be prescribed. Thank you for your compliance.

Non-formulary drug	CHW alternative (first and second tier medications)	Non-formulary drug	CHW alternative (first and second tier medications)
ABILIFY,DISCMELT	GEODON, GEN RISPERDAL, ZYPREXA	GLYSET	GEN PRECOSE
ACEON	STEP USE GENERIC ACE INHIBITORS FIRST	GONAL-F,RFF	PA REQUIRED
ACIPHEX	STEP USE GEN TAGAMET, ZANTAC, THEN GENERIC PRILOSEC	GYNAZOLE-1	clotrimazole/miconazole/terconazole
ACTIVELLA	GENERIC, PREMPRO/PREMPHASE	HALOG	GENERIC TOPICAL STEROIDS
ACTONEL,WITH CALCIUM	GENERIC FOSAMAX, FOSAMAX D	HYZAAR	STEP USE GEN ACE FIRST, THEN AVAPRO/LIDE DIOVAN/HCT
ADDERALL XR	GENERIC ADDERALL; METADATE CD	INNOPRAN XL	atenolol, nadolol
ADVICOR	GENERIC MEVACOR, ZOCOR, PRAVACHOL	ISTALOL	betaxolol, AZOPT, ALPHAGAN P, GEN COSOPT, GEN IOPIDINE
ALAMAST	ALOMIDE	KADIAN	morphine
ALLEGRA,-D 12 HOUR,-D 24 HOUR	GENERIC ALLEGRA, OTC CLARITIN , OTC ZYRTEC	KETEK,PAK	GENERIC MACROLIDES QUINOLONES
ALOCRIL	ALOMIDE	KLARON	sodium sulfacetamide
ALORA	estradiol patch	LAMISIL soln	OTC LAMISIL SOLUTION
ALREX	ALOMIDE	LESCOL_XL	GEN MEVACOR ZOCOR PRAVACHOL
ALTACE	STEP USE GENERIC ACE INHIBITORS FIRST	LEVITRA	EDEX, MUSE, VIAGRA (all require PA)
ALTOPREV	GEN MEVACOR, ZOCOR, PRAVACHOL	LEVLEN 28	levora, portia
AMBIEN CR,PAK	GENERIC AMBIEN, GEN SONATA	LEVLITE-28	aviane
AMERGE	IMITREX,ZOMIG/ZMT	LEXAPRO	STEP USE GEN CELEXA PROZAC PAXIL ZOLOFT FIRST
ANTARA	GENERIC LOFIBRA; TRICOR	LEXCEL	STEP USE GENERIC ACE INHIBITORS FIRST
ANZEMET	GENERIC ZOFRAN, KYTRIL	LIPITOR	GEN MEVACOR, ZOCOR, PRAVACHOL
ARMOUR THYROID	thyroid, levothyroxine	LOCOID,LIPOCREAM	GENERIC TOPICAL STEROIDS
ASCENSIA ELITE	ACCU-CHEK, ONE TOUCH	LOTEMAX	prednisolone acetate, FML FORTE, VEXOL
ASMANEX	AEROBID, FLOVENT	LOVENOX	PA REQUIRED AFTER FIRST 10 DAYS
ATACAND,HCT	STEP USE GEN ACE FIRST, THEN Avapro/lide Diovan/hct	LUMIGAN	XALATAN
AVANDAMET	AVANDIA/metformin	LUNESTA	GENERIC AMBIEN, GEN SONATA
AVINZA	Morphine	LYRICA	GENERIC NEURONTIN
AVITA (PA AGE 26 and older)	GENERIC RETIN A; AZELEX, DIFFERIN, RETIN A MICRO	MAXALT	GENERIC IMITREX,ZOMIG/ZMT
AVODART	GENERIC CARDURA, HYTRIN	MAXALT MLT	GENERIC IMITREX,ZOMIG/ZMT
AXERT	GENERIC IMITREX, ZOMIG/ZMT	MAXAQUIN	GENERIC CIPRO; AVELOX LEVAQUIN
AZMACORT	AEROBID, FLOVENT	MENOSTAR	estradiol
BECONASE AQ	GENERIC FLONASE; NASONEX	MENTAX	ketoconazole, LOPROX,OXISTAT,SP
BENICAR,HCT	STEP USE GEN ACE FIRST, THEN AVAPRO/LIDE DIOVAN/HCT	METADATE ER tab sa 10 mg	GENERIC RITALIN, METADATE CD
BENZAFLIN	benzoyl peroxide/clindamycin	METAGLIP	glipizide/metformin
BETASERON	PA REQUIRED; AVONEX PREFERRED	METROGEL	metronidazole
BONIVA	GENERIC FOSAMAX	MICARDIS,HCT	STEP USE GEN ACE FIRST, THEN AVAPRO/LIDE DIOVAN/HCT
BREVICON	necon, nortrel	MSIR	GENERIC morphine
CADUET	GENERIC MEVACOR, ZOCOR, PRAVACHOL & NORVASC	NAFTIN	GENERIC TOPICAL ANTIFUNGALS; LOPROX, OXISTAT
CARDENE SR	nicardipine hcl	NAMENDA	ARICEPT
CAVERJECT	EDEX, MUSE, VIAGRA (all require PA)	NASACORT AQ	GENERIC FLONASE; NASONEX
CEDAX	GENERIC CECLOR CEFTIN AUGMENTIN	NEVANAC	GENERIC OCUFEN; ACULAR, VOLTAREN
CENESTIN	estradiol, MENEST, PREMARIN	NEXIUM	STEP USE GEN TAGAMET, ZANTAC, THEN GENERIC PRILOSEC
CIALIS	EDEX, MUSE, VIAGRA	NITROLINGUAL	GENS=nitroglycerin tab, patch, ointment
CIPRODEX	CIPRO HC,XR	NORINYL 1+35,1+50	necon
CLARINEX,-D 12 HOUR,-D 24 HOUR	GENERIC ALLEGRA, OTC CLARITIN, OTC ZYRTEC	NORITATE	metronidazole, METROCREAM
COLAZAL	GENERIC,ASACOL,DIPENTUM,PENTASA	NOROXIN	GENERIC CIPRO; AVELOX, LEVAQUIN
COMBIPATCH	estradiol patch	NOR-Q-D	GENERIC ORAL CONTRACEPTIVE
CONCERTA	GENERIC RITALIN; METADATE CD	NOVOFINE	HUMULIN SYRINGES/VIALS
COPAXONE	PA REQUIRED; AVONEX PREFERRED	NOVOLIN	HUMULIN SYRINGES/VIALS
COVERA-HS	GENERIC CA CHANNEL BLOCKERS	NOVOLOG,MIX 70/30	HUMALOG
COZAAR	STEP USE GEN ACE FIRST, THEN AVAPRO/LIDE DIOVAN/HCT	NULEV	hyosciamine sulfate
CRESTOR	GENERIC MEVACOR ZOCOR PRAVACHOL	NULYTELY,WITH FLAVOR PACKS	peg 3350
CYCLESSA	Velivet	OMACOR	niacin, OTC omega3
CYMBALTA	STEP USE GEN WELLBUTRIN, EFFEXOR FIRST	OPTIVAR	GENERIC ZADITOR; PATANOL
DEMULEN 1/35-28	GENERIC ORAL CONTRACEPTIVE	ORAPRED	prednisolone
DETROL LA	GENERIC DITROPAN XL; DETROL	ORTHO TRI-CYCLEN	trinessa, tri-sprintec
DIDRONEL	GENERIC FOSAMAX, GEN MIACALCIN	ORTHO-PREFEST	PREMPRO/PREMPHASE
DUAC	GENERIC RETIN A; AZELEX, DIFFERIN, RETIN A MICRO	OVCON-35	GENERIC ORAL CONTRACEPTIVE
DYNACIRC CR	STEP USE GENERIC CA CHANNEL BLOCKERS FIRST	OXYTROL	GENERIC DITROPAN XL; DETROL
EDEX	PA REQUIRED	PCE	erythromycin base
ELESTAT	GENERIC ZADITOR; ALOMIDE, EMADINE, PATANOL	PLEXION,SCT,TS	sulfacetamide/sulfur
ELIDEL	STEP USE TOPICAL STEROIDS FIRST	POLY-PRED	GEN TOBRADEX, FML-S, PRED-G
ENABLEX	GENERIC DITROPAN XL; DETROL	PRAMOSONE	GENERIC TOPICAL STEROIDS
ENJUVA	estradiol, estrogens, conjugated or esterified	PRECISION PCX,PLUS	ACCU-CHEK, ONE-TOUCH
EPOGEN	PA REQUIRED	PRECISION,Q-I-D,SOF-TACT,XTRA	ONE TOUCH, ACCUCHEK
ERTACZO	GENS = clotrimazole, ketoconazole, etc	PREFEST	PREMPRO/PREMPHASE
ESTRADERM	CLIMARA	PREVACID NAPRAPAC	GENERIC NSAIDS
ESTRASORB	estradiol	PROZAC WEEKLY	STEP USE GEN CELEXA, PROZAC, PAXIL, ZOLOFT FIRST
ESTROGEL	estradiol patch	PULMICORT nebs	Albuterol
ESTROSTEP FE	trivora-28, tri-sprintec	QUIXIN	GENERIC CIPRO CILOXAN
EVISTA	GENERIC FOSAMAX	QVAR	AEROBID, FLOVENT
EXELDERM	GENERIC TOPICAL ANTIFUNGALS; LOPROX, OXISTAT	RELENZA	amantadine, TAMIFLU
EXELON	ARICEPT	RELPAK tab 20 mg,40 mg	GENERIC IMITREX,ZOMIG/ZMT
FACTIVE	GENERIC CIPRO; AVELOX, LEVAQUIN	RELPAK tab 40 mg	GENERIC IMITREX,ZOMIG/ZMT
FEMHRT	MENEST, PREMARIN	RESTASIS	OTC saline drops
FINACEA	GENERIC RETIN A; AZELEX, DIFFERIN, RETIN A MICRO	RHINOCORT AQUA	GENERIC FLONASE; NASONEX
FOCALIN,XR	GENERIC FOCALIN; METADATE CD	RISPERDAL M	GEN RISPERDAL
FORADIL	SEREVENT/DISKUS	RITALIN LA	methylphenidate sr
FREESTYLE,FLASH SYSTEM,SIDEKICK I,SYSTEM,TEST STRIPS	ONE TOUCH, ACCUCHEK	ROZEREM	GENERIC AMBIEN, GEN SONATA
FROVA	GENERIC IMITREX,ZOMIG/ZMT	RYNATAN	GENERIC ALLEGRA, OTC CLARITIN, OTC ZYRTEC, cough cold
GLUCOMETER ELITE	ONE TOUCH, ACCUCHEK	RYTHMOL SR	propafenone

THIS DOCUMENT LIST IS EFFECTIVE JANUARY 1, 2010 THROUGH DECEMBER 31, 2010. THIS LIST IS SUBJECT TO CHANGE.

Non-formulary drug	CHW alternative (first and second tier medications)	Non-formulary drug	CHW alternative (first and second tier medications)
SANCTURA	GENERIC DITROPAN XL; DETROL	ULTRASE.MT 12,MT 18,MT 20	pancreatic enzymes
SEASONALE	GENERIC ORAL CONTRACEPTIVE	UROXATRAL	FLOMAX [PA]
SEROQUEL	clozapine, GEODON, GEN RISPERDAL, ZYPREXA	VENTOLIN HFA	PROVENTIL HFA
SINGULAIR	USE INHALED STEROIDS FIRST, THEN ACCOLATE	VESICARE	GENERIC DITROPAN XL; DETROL
SKELID	GENERIC FOSAMAX, GEN MIACALCIN	VIGAMOX	GENERIC CIPRO CILOXAN
SOF-TACT	ONE TOUCH, ACCUCHEK	VIVELLE-.DOT	CLIMARA
SPECTRACEF	GEN CECLOR GEN CEFTIN AUGMENTIN	VOLTAREN	GENERIC NSAIDS
STARLIX	PRANDIN, GEN PRECOSE	VYTORIN	GEN MEVACOR ZOCOR PRAVACHOL
STRATTERA	GENERIC RITALIN; METADATE CD	WELCHOL	Cholestyramine
SULAR	STEP USE GENERIC CA CHANNEL BLOCKERS FIRST	XIBROM	GENERIC OCUFEN; ACULAR, VOLTAREN
SYMBYAX	GEN CELEXA, PROZAC, PAXIL, ZOLOFT, WELLBUTRIN, EFFEXOR	XOPENEX,HFA	albuterol inhalation
TAMIFLU	amantadine, FLUMADINE	YASMIN 28	GENERIC, low-ogestrel
TEQUIN	GENERIC CIPRO; AVELOX, LEVAQUIN	YAZ	GENERIC ORAL CONTRACEPTIVE
TESTIM	ANDRODERM	ZEGERID	STEP USE GEN TAGAMET, ZANTAC, THEN GENERIC PRILOSEC
TEVETEN,HCT	STEP USE GEN ACE FIRST, THEN AVAPRO/LIDE DIOVAN/HCT	ZETIA	GEN MEVACOR ZOCOR PRAVACHOL
TOFRANIL-PM	Imipramine	ZYLET	GENERIC CIPRO, CILOXAN; GEN TOBRADEX
TRIGLIDE	GENERIC LOFIBRA; TRICOR	ZYMAR	GENERIC CIPRO CILOXAN; GEN TOBRADEX
TRI-NORINYL	GENERIC ORAL CONTRACEPTIVE	ZYPREXA ZYDIS	USE ZYPREXA NON ZYDIS
TRUSOPT	GENERIC, betaxolol, AZOPT, ALPHAGAN P, GEN COSOPT, GEN IOPIDINE		

### Quantity Limits [QLL]

Certain medications covered under the CHW medical plans have quantity limitations to encourage appropriate utilization. Quantity limits are based on clinically approved prescribing guidelines to ensure safe and proper use of medications. Drugs that have established quantity limits are identified on the PDL by the symbol [QLL]. You can download or view a complete list of drugs with quantity limits on [www.chwmedicalplans.com](http://www.chwmedicalplans.com). In order to receive an override for the indicated quantity limit, your physician is required to complete a PA Request Form and fax it to the Express Scripts PA unit at 1-800-357-9577.

### Quantity Dispensing Limits

Medication	Quantity Dispensing Limit per 30 days
ABILIFY	30
ACIPHEX	30
ACTONEL 5mg,30mg	30
ACTONEL 35mg	4
ACTONEL, W/Calcium 35MG	4
ACTOS	30
ADVAIR DISKUS PKG 60blisters	120
ADVAIR DISKUS PKG 28blisters	28
ADVAIR HFA INHALER 120 inhalations	2
ADVICOR	30
alendronate 5,10,40mg (generic for Fosamax)	30
alendronate 35mg, 70mg (generic for Fosamax)	4
ALLEGRA-D 12 HOUR	60
ALLEGRA-D 24 HOUR	30
ALLEGRA SOLN	300
ALTOCOR	30
ALTOCOR 40mg	60
ALTOPREV	30
ALTOPREV 40mg	60
AMBIEN CR	14
AMERGE	9
ANZEMET	1
AVANDAMET	60
AVANDIA 2mg,4mg	60
AVANDIA 8mg	30
AXERT	6
CADUET	30
CAVERJECT	6
CIALIS	6
citalopram hbr (generic for Celexa)	30
citalopram solution (generic for Celexa)	150
CRESTOR	30
CYMBALTA	60
CYMBALTA 60mg	30
EDEX	6
fenfanyl oralef (generic for Actiq)	90
feofenadine hcl 30mg,60mg (generic for Allegra)	30
feofenadine hcl 180mg (generic for Allegra)	60
FLUMIST 2.5ml	1 per year
fluoxetine hcl 20mg, 20mg/5ml (generic for Prozac)	30
fluoxetine hcl 40mg (generic for Prozac)	60

Medication	Quantity Dispensing Limit per 30 days
fluvoxamine maleate 25mg (generic for Luvox)	30
fluvoxamine maleate 50mg (generic for Luvox)	60
fluvoxamine maleate 100mg (generic for Luvox)	100
FOSAMAX solution	375
FOSAMAX D 70mg	4
FROVA	9
GEODON	60
granisetron tab (generic for Kytril)	2
IMITREX nasal spray	6
KYTRIL solution	30
LESCOL XL	30
LESCOL	30
LEVITRA	6
LEXAPRO	30
LIPITOR	30
lovastatin (generic for Mevacor)	30
lovastatin 40mg (generic for Mevacor)	60
LOVENOX (*PA required >20)	20
LUNESTA	14
MAXALT	9
MAXALT MLT	9
MIGRANAL	8
MUSE	6
NEXIUM	30
omeprazole (generic for Prilosec)	120
OXYCONTN tab	90
ondansetron 24mg tab (generic for Zofran)	1
ondansetron solution (generic for Zofran)	150
ondansetron/odt 4mg,8mg (generic for Zofran ODT)	12
PALLADONE	30
pantoprazole (generic for Protonix)	30
paroxetine hcl 10mg,20mg,40mg (generic for Paxil)	30
paroxetine CR tab sa 12.5mg, 25mg (generic for Paxil CR)	30
paroxetine CR tab sa 37.5 mg (Generic for PAXIL CR)	60
PEXEVA 10mg,40mg	30
PEXEVA 20mg,30mg	60
pravastatin (generic for Pravastatin)	30
PRAVIGARD PAC	30
PREVACID	30

Medication	Quantity Dispensing Limit per 30 days
PRILOSEC	30
PROZAC WEEKLY	5
RELPAK	6
REVATIO	90
risperidone (Generic for RISPERDAL)	60
ROZEREM	14
selfemra (Generic for SARAFEM 10mg,20mg)	30
SEROQUEL 100mg, 200mg	100
SEROQUEL 300MG	60
SEROQUEL 25MG	30
sertraline 25mg, 20mg/ml (generic for Zoloft)	30
sertraline 50mg,100mg (generic for Zoloft)	60
simvastatin (generic for Zocor)	30
SPIRIVA package size 5	5
SPIRIVA package size 30	30
SPIRIVA package size 90	90
sumatriptan tablets (generic for Imitrex)	9
sumatriptan vials (generic for Imitrex)	6
sumatriptan syringe (generic for Imitrex)	3
VALTREX	30
VIAGRA	6
VYTORIN	30
zaleplon (generic for Sonata)	14
ZEGERID	30
zolpidem (generic for Ambien)	14
ZOMIG,ZMT 2.5mg, nasal spray	6
ZOMIG,ZMT 5mg tablet	3
ZYPREXA	30

- Combined limit for Proton Pump Inhibitors (ACIPHEX, KAPIDEX, NEXIUM, PREVACID, PRILOSEC, pantoprazole)
- Combined limit for Statin Therapy (ALTOCOR, ALTOPREV, CRESTOR, LESCOL/XL, LIPITOR, lovastatin, pravastatin, simvastatin)

## Prescription Drugs Requiring Pre-Authorization

This is a list of medications that require a prior authorization (PA) in advance of being dispensed and are to be covered by your health plan. This list is subject to change and will be periodically updated. Your physician and/or health care provider must fax a PA form to the Express Scripts PA unit at **1-800-357-9577** before prescribing these medications. Medications that require PA are identified by a PA on the Preferred Drug List. If you need a copy of the PA Request form, please call the Express Scripts Patient Care Contact Center at **1-877-292-1227**.

Prior Authorization Drug List	
All Injectables* Actimmune Afinitor Alferon-N Arixtra (PA >10 days of therapy) Avonex Avodart (PA for females) Betaseron Cafegot Caverject Cialis Coartem Copegus Depo-Provera Edex Emend Epifoam Ethmozine Exubera Finasteride Flomax Fragmin (PA >10 days of therapy) Growth Hormones Heparins Implanon Infergen Innohep (PA >10 days of therapy) Intron-A Ismelin Januvia Lariam	Levitra Lovenox (PA >10 days of therapy) Lunelle Lupron Lyrica Minoxidil Peg-Intron Next Choice (GEN for Plan B) Nuvigil Prevacid NapraPac Procrit Promacta Proscar Provigil Rapaflo RebetoI Rebetrone Revatio Retina-A (age >25) Roferon-A Suboxone Subutex topiramate (GEN FOR TOPAMAX) Tracleer Trizivir Tyzeka Uroxatral (PA for females) Valcyte Viagra Vfend Xenazine Yohimbine Zavesca Zolinza Zostavax (age <60)
*Exceptions: Insulins, Imitrex, , Bee-Sting Kits, Epi-pens, and Glucagon	

## Specialty Medication List

Specialty medications are generally used for complex or chronic conditions, such as treatment for multiple sclerosis or rheumatoid arthritis. Your copay will be 25 percent of the cost of the drug, but not less than a \$50 copayment and no more than \$100. There is a \$2,500 annual copayment maximum and then the plan pays 100 percent of your specialty medications. You can receive up to a 30-day supply of medication. Specialty medications require pre-authorization (PA) in advance of being dispensed. Your provider must fax a PA form to the Express Scripts PA unit at **1-800-357-9577** before prescribing these medications. You can either obtain your medication through a contracted retail pharmacy or you can receive up to a 30-day supply of medication through the Express Scripts Incorporated (ESI) specialty mail pharmacy, CuraScript. CuraScript provides a complete range of specialty medications, including those not available at retail pharmacies. CuraScript will ship a 30-day supply of medication directly to your home or physician's office. Drugs status may change periodically due to health plan decisions or actions by the Food and Drug Administration. Some specialty drugs may have different coverage requirements based on coverage through the medical plan benefit.

### ENZYLE DEFICIENCIES MISCELLANEOUS DRUGS

ADAGEN  
CINRYZE

### OTHER ENDOCRINE DRUGS

ALDURAZYME  
CEREDASE  
CEREZYME  
FABRAZYME  
MYOZYME  
NAGLAZYME

### GROWTH DEFICIENCY GROWTH HORMONES AND RELATED DRUGS

GENOTROPIN  
GEREF  
GEREF DIAGNOSTIC  
HUMATROPE  
NORDITROPIN  
NORDITROPIN  
NORDIFLEX  
NUTROPIN  
NUTROPIN AQ  
NUTROPIN DEPOT  
SAIZEN  
SEROSTIM  
TEV-TROPIN  
ZORBTIVE

### INSULIN LIKE GROWTH FACTORS-1

INCRELEX  
IPLX

### OTHER ENDOCRINE DRUGS

SOMAVERT

### HEMOPHILIA HEMOSTATICS

ADVATE  
ALPHANATE  
ALPHANINE SD  
BEBULIN VH IMMUNO  
BENEFIX  
FEIBA VH IMMUNO  
GENARC  
HELIXATE FS  
HEMOFIL M  
HUMATE-P  
KOATE-DVI  
KOGENATE FS  
MONARC-M  
MONOCLATE-P

### HEMOPHILIA

MONONINE  
NOVOSEVEN  
PROFILNINE SD  
PROPLEX T  
RECOMBINATE  
REFACTO

### IMMUNOLOGICALS AND VACCINES

AUTOPLEX T

### HEPATITIS B IMMUNOLOGICALS AND VACCINES

BAYHEP B  
HEPAGAM B  
HYPERHEP S/D  
NABI-HB

### HEPATITIS C INTERFERONS

INFERGEN  
PEGASYS  
PEG-INTRON  
PEG-INTRON REDIPEN

### IMMUNE DEFICIENCY ANTIRETROVIRALS & PROTEASE INH

FUZEON  
RETROVIR IV

### IMMUNOLOGICALS AND VACCINES

BAYRHO-D  
CARIMUNE  
CARIMUNE NF  
NANOFILTERED  
CYTOGAM  
FLEBOGAMMA  
GAMASTAN S/D  
GAMIMUNE N  
GAMMAGARD LIQUID  
GAMMAGARD S/D  
GAMMAR-P I.V.  
GAMUNEX  
HYPERRAB S/D  
HYPERRHO S/D  
IMMUNE GLOBULIN  
IMOAG RABIES-HT  
IVEEGAM EN  
MICRHOGAM  
OCTAGAM  
PANGLOBULIN NF  
POLYGAM S/D  
PRIVIGEN (GEN FOR  
GAMMAGARD LIQUID)  
RHOGAM  
RHOPHYLAC  
VARICELLA-ZOSTER IMM  
GLOBULIN  
VENOGLOBULIN-S  
VIVAGLOBIN  
WINRHO SD  
WINRHO SDF

### INTERFERONS ACTIMMUNE

### INFLAMMATORY CONDITIONS ANTINEOPLASTIC/IMMUNO SUPPRESSANT DRUGS

ENBREL  
HUMIRA  
ORENCIA  
REMICADE  
SIMPONI  
INTERLEUKIN RECPTR  
ANTAGONIST  
KINERET

### IRON TOXICITY DIAGNOSTIC PRODUCTS

DEFEROXAMINE  
MESYLATE  
DESFERAL  
DESFERAL MESYLATE

### MISCELLANEOUS SPECIALTY CONDITIONS

ANALGESICS  
PRIALT  
DIRECT MUSCLE  
RELAXANTS  
MYOBLOC

### INJECTABLE DERMATOLOGICALS BOTOX COSMETIC OTHER ANTIPARKINSON DRUGS

APOKYN  
OTHER CNS/AUTONOMIC  
DRUGS  
VIVITROL  
XENAZINE  
OTHER OPHTHALMIC  
DRUGS  
BOTOX  
THROMBOPOIETIC  
AGENTS  
NPLATE  
PROMACTA

### BLOOD CELL DEFICIENCY MOZOBI

### MULTIPLE SCLEROSIS ANTINEOPLASTIC/IMMUNO SUPPRESSANT DRUGS

TYSABRI  
DRUGS TO TREAT  
MULTIPLE SCLEROSIS  
COPAXONE  
INTERFERONS  
AVONEX  
AVONEX  
ADMINISTRATION PACK

### INTERFERONS (Cont.)

BETASERON  
REBIF

### OTHER ENDOCRINE DRUGS

ACTHAR H.P.

### OPHTHALMIC CONDITIONS OTHER OPHTHALMIC DRUGS

HEALON  
LUCENTIS  
MACUGEN  
PROVISC  
VISUDYNE  
VITRAVENE

### OSTEOARTHRITIS OTHER DRUGS FOR ARTHRITIS

EUFLEXXA  
HYALGAN  
ORTHOVISC  
SUPARTZ  
SYNVISC

### OSTEOPOROSIS OTHER ENDOCRINE DRUGS

BONIVA  
DIDRONEL  
FORTEO

### PSORIASIS ANTINEOPLASTIC/IMMUNO SUPPRESSANT DRUGS

AMEVIVE  
RAPTIVA

### PULMONARY HYPERTENSION OTHER VASODILATING DRUGS

EPOPROSTENOL  
SODIUM (GEN FOR  
FLOLAN)  
REMODULIN

### RESPIRATORY CONDITIONS

IMMUNOGLOBULIN  
ANTIBODIES  
XOLAIR  
OTHER RESPIRATORY  
DRUGS  
ARALAST  
PROLASTIN  
PULMOZYME  
ZEMAIRA  
IMMUNOLOGICALS AND  
VACCINES  
ATGAM  
THYMOGLOBULIN

## CuraScript List

Your specialty drugs can be filled through Express Scripts' Specialty Pharmacy. CuraScript can deliver your specialty drugs to anywhere you choose; plus, if you use CuraScript, you receive: access to experienced specialty health care experts, guidance in how to take specialty medications correctly, support in managing your medical condition, personal care and health advocacy through a patient care coordinator and free medication supplies (such as syringes, needles and sharps containers). Medications listed above will require a 25 percent coinsurance, all other medications available through CuraScript will require an applicable copay.

### ANTICOAGULANT

#### INJECTABLE

#### ANTICOAGULANTS

ARIXTRA  
FRAGMIN  
INNOHEP  
LOVENOX

#### OTHER DRUGS AFFECTING

#### COAGULATION

REFLUDAN

### BLOOD CELL DEFICIENCY

#### ERYTHROID STIMULANTS

ARANESP  
EPOGEN  
PROCRIT

#### HEMATOPOIETIC AGENTS

MOZOBIL

#### INTERLEUKINS

NEUMEGA

#### MYELOID STIMULANTS

LEUKINE  
NEULASTA  
NEUPOGEN

### CANCER

#### ANTINEOPLASTIC/IMMUNO

#### SUPPRESSANT DRUGS

ABRAXANE  
ADRIAMYCIN  
ADRUCIL  
ALIMTA  
ALKERAN  
AVASTIN  
BEXXAR  
BICNU  
BLENOXANE  
BLEOMYCIN SULFATE  
BUSULFEX  
CAMPATH  
CARBOPLATIN  
CERUBIDINE  
CISPLATIN  
CLADRIBINE  
COSMEGEN  
CYCLOPHOSPHAMIDE  
CYTARABINE  
CYTOXAN  
DACARBAZINE  
DACOGEN  
DAUNORUBICIN HCL  
DAUNOXOME  
DEPOCYT  
DEXRAZOXANE  
DOXIL  
DOXORUBICIN HCL  
DTIC-DOME IV  
ELIGARD  
ELITEK  
ELLECE  
ELSPAR  
ERBITUX  
ETHYOL  
ETOPOPHOS  
ETOPOSIDE  
FLOXURIDINE  
FLUDARA

#### ANTINEOPLASTIC/IMMUNO

#### SUPPRESSANT DRUGS

#### (Cont.)

FLUDARABINE  
PHOSPHATE  
FLUOROURACIL  
FUHR  
GEMZAR  
GLEEVEC  
HERCEPTIN  
HYCAMTIN  
IDAMYCIN PFS  
IDARUBICIN HCL  
IFEX  
IFEX/MESNEX  
IFOSFAMIDE  
IFOSFAMIDE/MESNA  
IRESSA  
IRINOTECAN  
LEUCOVORIN CALCIUM  
LEUSTATIN  
MESNA  
MESNEX  
METHOTREXATE  
METHOTREXATE  
SODIUM  
MITOMYCIN  
MITOXANTRONE  
MITOXANTRONE HCL  
MUSTARGEN  
MUTAMYCIN  
MYLOTARG  
NAVELBINE  
NEOSAR  
NEOSAR FOR INJECTION  
NEXAVAR  
NIPENT  
NOVANTRONE  
ONCASPAR  
ONTAK  
ONXOL  
OXALIPLATIN (GEN FOR  
ELOXATIN)  
PACLITAXEL  
PARAPLATIN  
PHOTOFRIN  
PLENAXIS  
REVLIMID  
RITUXAN  
SPRYCEL  
SUTENT  
TARABINE PFS  
TARCEVA  
TAXOL  
TAXOTERE  
TEMODAR  
THERACYS  
THIOTEPA  
TOPOSAR  
TRELSTAR DEPOT  
TRELSTAR LA  
TRISENOX  
VANTAS  
VELCADE  
VIADUR  
VIDAZA  
VINBLASTINE SULFATE

#### ANTINEOPLASTIC/IMMUNO

#### SUPPRESSANT DRUGS

#### (Cont.)

VINCRIStINE SULFATE  
VINORELBINE TARTRATE  
VUMON  
XELODA  
ZANOSAR  
ZANOSAR STERILE  
POWDER  
ZEVALIN  
ZINECARD  
ZOLADEx

#### DIAGNOSTIC PRODUCTS

THYROGEN

#### INTERFERONS

ALFERON N  
INTRON A  
ROFERON-A  
PROLEUKIN

#### KERATINOCYTE GROWTH

#### FACTOR

KEPIVANCE

#### MISCELLANEOUS DRUGS

THALOMID

#### OTHER ENDOCRINE

#### DRUGS

AREDia  
OTN PAMIDRONATE  
PAMIDRONATE  
DISODIUM  
ZOMETA

#### SPECIALIZED OB/GYN

#### DRUGS

LEUPROLIDE ACETATE  
LUPRON  
LUPRON DEPOT  
LUPRON DEPOT-PED

#### ENDOCRINE DISORDERS

#### ANTINEOPLASTIC/IMMUNO

#### SUPPRESSANT DRUGS

OCTREOTIDE ACETATE  
SANDOSTATIN  
SANDOSTATIN LAR

#### OTHER ENDOCRINE

#### DRUGS

DDAVP  
DESMOPRESSIN  
ACETATE

#### ENZYME DEFICIENCIES

#### MISCELLANEOUS DRUGS

ADAGEN  
CINRYZE  
ORFADIN

#### OTHER ENDOCRINE

#### DRUGS

ALDURAZYME  
CEREDASE  
CEREZYME  
FABRAZYME  
MYOZYME  
NAGLAZYME  
ZAVESCA

### GROWTH DEFICIENCY

#### GROWTH HORMONES AND

#### RELATED DRUGS

GENOTROPIN  
GEREF  
GEREF DIAGNOSTIC  
HUMATROPE  
NORDITROPIN  
NORDITROPIN  
NORDIFLEX  
NUTROPIN  
NUTROPIN AQ  
NUTROPIN DEPOT  
SAIZEN  
SEROSTIM  
TEV TROPIN  
ZORBTIVE

#### INSULIN LIKE GROWTH

#### FACTORS-1

INCRELEX  
IPLEX

#### OTHER ENDOCRINE

#### DRUGS

SOMAVERT

### HEMOPHILIA

#### HEMOSTATICS

ADVATE  
ALPHANATE  
ALPHANINE SD  
BEBULIN VH IMMUNO  
BENEFIX  
FEIBA VH IMMUNO  
GENARC  
HELIXATE FS  
HEMOfIL M  
HUMATE-P  
KOATE-DVI  
KOGENATE FS  
MONARC-M  
MONOClate-P  
MONONINE  
NOVOSEVEN  
PROFILNINE SD  
PROPLEX T  
RECOMBinate  
REFACTO

#### IMMUNOLOGICALS AND

#### VACCINES

AUTOPLEX T

### HEPATITIS B

#### IMMUNOLOGICALS AND

#### VACCINES

BAYHEP B  
HEPAGAM B  
HYPERHEP S/D  
NABI-HB

### HEPATITIS C

#### INTERFERONS

INFERGEN  
PEGASYS  
PEG-INTRON  
PEG-INTRON REDIPEN

**OTHER ANTIVIRAL DRUGS**

COPEGUS  
 REBETOL  
 RIBAPAK  
 RIBASPHERE  
 RIBATAB  
 RIBAVIRIN

**IMMUNE DEFICIENCY****ANTIRETROVIRALS & PROTEASE INH**

FUZEON  
 RETROVIR IV

**IMMUNOLOGICALS AND VACCINES**

BAYRHO-D  
 CARIMUNE  
 CARIMUNE NF  
 NANOFILTERED  
 CYTOGAM  
 FLEBOGAMMA  
 GAMASTAN S/D  
 GAMIMUNE N  
 GAMMAGARD LIQUID  
 GAMMAGARD S/D  
 GAMMAR-P I.V.  
 GAMUNEX  
 HYPERRAB S/D  
 HYPERRHO S/D  
 IMMUNE GLOBULIN  
 IMOGAM RABIES-HT  
 IVEEGAM EN  
 MICRHOGAM  
 OCTAGAM  
 PANGLOBULIN NF  
 POLYGAM S/D  
 PRIVIGEN (GEN FOR GAMMAGARD LIQUID)  
 RHOGAM  
 RHOPHYLAC  
 VARICELLA-ZOSTER IMM GLOBULIN  
 VENOGLOBULIN-S  
 VIVAGLOBIN  
 WINRHO SD  
 WINRHO SDF

**INTERFERONS**  
 ACTIMMUNE

**INFERTILITY****OVULATORY STIMULANTS**

BRAVELLE  
 FERTINEX  
 FOLLISTIM AQ  
 GONAL-F  
 GONAL-F RFF  
 LUVERIS  
 MENOPUR

**INFERTILITY****OVULATORY STIMULANTS***(Cont.)*

REPRONEX

**PROGESTIN DRUGS****PROGESTERONE IN OIL SPECIALIZED OB/GYN DRUGS**

ANTAGON  
 CETROTIDE  
 CHOREX-10  
 CHORIONIC  
 GONADOTROPIN  
 GANIRELIX ACETATE  
 LUTREPULSE  
 NOVAREL  
 OVIDREL  
 PREGNYL  
 PROFASI

**INFLAMMATORY CONDITIONS****ANTINEOPLASTIC/IMMUNO SUPPRESSANT DRUGS**

ENBREL  
 HUMIRA  
 ORENCIA  
 REMICADE  
 SIMPONI

**INTERLEUKIN RECPTR ANTAGONIST**

KINERET

**IRON TOXICITY****DIAGNOSTIC PRODUCTS**

DEFEROXAMINE  
 MESYLATE  
 DESFERAL  
 DESFERAL MESYLATE  
 EXJADE

**MISCELLANEOUS****SPECIALTY CONDITIONS****ANALGESICS**

PRIALT

**DIRECT MUSCLE****RELAXANTS**

MYOBLOC

**INJECTABLE****DERMATOLOGICALS**

BOTOX COSMETIC

**ORAL DERMATOLOGICAL DRUGS**

8-MOP

**OTHER ANTIPARKINSON DRUGS**

APOKYN

**OTHER CNS/AUTONOMIC DRUGS**

VIVITROL

**OTHER CNS/AUTONOMIC DRUGS (Cont.)**

XYREM

**OTHER****MUSCULOSKELETAL DRUGS**

RILUTEK

**OTHER OPHTHALMIC DRUGS**

BOTOX

**OTHER VASODILATING DRUGS**

NATRECOR

**THROMBOPOIETIC AGENTS**

NPLATE

**TOPICAL****DERMATOLOGICAL DRUGS**

PANRETIN

**MULTIPLE SCLEROSIS****ANTINEOPLASTIC/IMMUNO SUPPRESSANT DRUGS**

TYSABRI

**DRUGS TO TREAT****MULTIPLE SCLEROSIS**

COPAXONE

**INTERFERONS**

AVONEX

AVONEX

ADMINISTRATION PACK

BETASERON

REBIF

**OTHER ENDOCRINE DRUGS**

ACTHAR H.P.

**OPHTHALMIC CONDITIONS****OTHER OPHTHALMIC DRUGS**

HEALON

LUCENTIS

MACUGEN

PROVISC

VISUDYNE

VITRAVENE

**OSTEOARTHRITIS****OTHER DRUGS FOR ARTHRITIS**

EUFLEXXA

HYALGAN

ORTHOVISC

SUPARTZ

SYNVISC

**OSTEOPOROSIS****OTHER ENDOCRINE DRUGS**

BONIVA

**OTHER ENDOCRINE DRUGS**

DIDRONEL  
 FORTEO

**PSORIASIS****ANTINEOPLASTIC/IMMUNO SUPPRESSANT DRUGS**

AMEVIVE  
 RAPTIVA

**PULMONARY****HYPERTENSION****ENDOTHELIN RECPTR ANTAGONIST**

LETAIRIS  
 TRACLEER

**OTHER VASODILATING DRUGS**

EPOPROSTENOL  
 SODIUM (GEN FOR FLOLAN)  
 REMODULIN  
 REVATIO  
 VENTAVIS

**RESPIRATORY CONDITIONS****AMINOGLYCOSIDES**

TOBI

**IMMUNOGLOBULIN****ANTIBODIES**

XOLAIR

**OTHER RESPIRATORY DRUGS**

ARALAST  
 PROLASTIN  
 PULMOZYME  
 ZEMAIRA

**RSV PREVENTION****IMMUNOLOGICALS AND VACCINES**

SYNAGIS

**TRANSPLANT****ANTINEOPLASTIC/IMMUNO SUPPRESSANT DRUGS**

CYCLOSPORINE  
 MYCOPHENOLATE (GEN FOR CELLCEPT oral)  
 ORTHOCLONE OKT-3  
 SANDIMMUNE  
 SIMULECT  
 TACROLIMUS (GEN FOR PROGRAF)

**IMMUNOLOGICALS AND VACCINES**

ATGAM  
 THYMOGLOBULIN  
 INTERLEUKINS  
 ZENAPAX