2017 Prescription Drug List

UnitedHealthcare & Affiliated Companies

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2017 Prescription Drug List

Introduction

The UnitedHealthcare Prescription Drug List (PDL)[1] provides a list of medications in various therapeutic classes for use in meeting the prescription medication needs of your patients who are our members. This list is intended for use with UnitedHealthcare health plans and affiliated companies' pharmacy benefit plan designs. The PDL applies only to prescription medications dispensed to outpatients and does not include inpatient medications or medications obtained or administered in a physician's office. The PDL does not define benefit coverage. Benefit coverage is determined by the member's pharmacy benefit plan.[2] This means that there may be medications listed on the PDL that are not covered under a particular member's pharmacy benefit plan.

You may also access PDL information by visiting our website at **UnitedHealthcareOnline.com**.

Prescription Drug List Medication Overview

Tier decisions are made by our PDL Management Committee based on clinical, economic, and other factors. The PDL Management Committee is comprised of senior UnitedHealth Group physician and business leaders. The UnitedHealthcare National Pharmacy & Therapeutics (P&T) Committee, comprised of physicians and pharmacists, reviews new and existing medications and provides clinical guidance to the PDL Management Committee. Guidance is based on similarities and differences compared with other medications that treat the same disease or condition.

The tier placement of a medication on the PDL may change. While medications change tiers infrequently, such changes generally occur two times per calendar year. Additionally, when a brand-name medication becomes available as a generic, the tier status of the brand-name medication and its corresponding generic will be evaluated. When a medication changes tiers, your patient may be required to pay more or less for that medication. These changes may occur without prior notice to you or your patient. However, you may visit our website at **UnitedHealthcareOnline.com** for the most up-to-date information for a particular medication. Your patient can also find the most up-to-date tier status and cost* information for a particular medication by visiting our member website at myuhc.com® and/or calling the toll-free member phone number located on his or her health plan ID card.

Tier Designations

Prescription medications are categorized within three tiers on the PDL.[3] Each tier is assigned a cost,* which is determined by the member's pharmacy benefit plan. You may refer to the PDL as a guide to select the most appropriate medication with the lowest member cost for your patients.

Tier 1
Your patient's lowest-cost medications

Tier 2
Your patient's midrange-cost medications

Tier 3
Your patient's highest-cost medications

Tier 1
Tier 1 medications are your patient's lowest-cost option. Members can maximize their cost savings when you prescribe Tier 1 medications, if you decide they are appropriate for your patient's treatment.

Tier 2
Tier 2 medications are your patient's midrange-cost option. Consider Tier 2 medications if no Tier 1 medication is appropriate to treat your patient's condition.

Tier 3
Tier 3 medications are your patient's highest-cost option. If your patient is currently taking a medication in Tier 3, you may want to determine if there is an appropriate alternative in Tier 1 or Tier 2.

You and your patient make decisions about health care and medication treatments.

If the member has a "closed" pharmacy benefit (e.g. a two-tier pharmacy benefit plan that does not cover medications classified in Tier 3 of this PDL), medications in Tier 3 are generally not covered, except under certain processes consistent with applicable law.

Some members have a four-tier prescription plan, and these medications are noted as T4 throughout the document. Members with a four-tier prescription plan should refer to their enrollment materials, check the Medication Pricing / Coverage information on our member website or call the toll-free member phone number provided on their health plan ID card for more information about their benefit plan.

Not all medications are represented in this PDL. Only the most commonly prescribed medications are included.

* UnitedHealthcare operates a wide number of benefit programs and products, and some benefit programs may have alternative benefit designs. Physicians should always check the member's specific benefit prior to prescribing medications.

Over-the-Counter and Therapeutically Equivalent Medications

For some conditions, you and your patient may decide that an over-the-counter (OTC) medication is the most appropriate treatment. According to UnitedHealthcare benefit design, OTC medications are defined as medications that do not require a prescription by federal or state law to be dispensed. In some instances, OTC medications are listed on the PDL for reference purposes only. OTC medications may cost less than the member's out-of-pocket expense for prescription medications.

Therapeutically Equivalent means that medications can be expected to produce essentially the same efficacy or adverse event profile. Our benefit designs allow us to exclude a medication if determined to be Therapeutically Equivalent to another covered product or OTC option.

If the patient or physician requests a medication we have excluded based on determination of Therapeutic Equivalent, the patient may be required to pay the entire cost of the product as they may not be covered under the member's pharmacy benefit. Please refer to the member's pharmacy benefit plan.

Symbols	
DSP	Designated Specialty Program
E	May be excluded from coverage
H	This medication is part of a Health Care Reform preventive benefit and may be available at no cost to members^
MC	Multiple copay
PA	Prior Authorization required**
RS	May be eligible for the Refill and Save Program
SL	Supply limit
ST	Step Therapy+
T4	May be covered on Tier 4 in select benefits

+ For New Jersey fully insured members, this program is referred to as First Start.

** Depending on your patients' benefit and/or medication, notification or medical necessity criteria will be applied to determine if covered under the pharmacy benefit.

^ Health Care Reform drug lists may vary by plan; your patient can find the most up-to-date Tier status and cost information for a particular medication by visiting myuhc.com and/or calling the toll-free member phone number on their health plan ID card.

Generic Medication Policy

While there are exceptions, generic medications are generally included on the PDL in Tier 1. If a generic medication does not offer significant financial savings over the brand, it may be placed in the same tier as the brand or in a higher tier. Generic medications are noted in *italic* font.

Note that when a brand-name medication becomes available as a generic, that brand-name product may move to a higher tier or be excluded from coverage by the member's plan. Members may be required to pay more for a prescription when a higher-tier brand-name product is dispensed. The member's cost share is determined by the pharmacy benefit plan. When generic substitution conflicts with state regulations or restrictions, the pharmacist must obtain approval from the prescribing physician or other health care professional to substitute the generic equivalent.

Specialty Medications

Some members may have coverage for self-administered injectable and oral specialty medications through their pharmacy benefit plan. You will find these medications included in the body of this document within the appropriate therapeutic categories. UnitedHealthcare has developed a specialty pharmacy program that requires most specialty medications to be obtained through a designated specialty pharmacy. These medications are noted by DSP throughout the document. The specialty pharmacy program includes designated specialty pharmacies, each selected based on their clinical expertise for the targeted therapeutic classes, quality of services, and cost. Their pharmacists are trained to help educate patients and create personalized plans, if needed, for these specialty medications, which may help improve treatment adherence.

Participating members should be instructed to call the toll-free member number on their ID card where a representative will answer questions about our program and then transfer them to a specialty pharmacy based on their particular specialty medication prescription.

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Medications Requiring Prior Authorization and Other Pharmacy Programs

Select medications may require prior authorization to be eligible for coverage under the member's pharmacy benefit plan. Such medications are noted as PA in this booklet. Depending on your patients' benefit and/or medication, a coverage review may apply to determine coverage under the pharmacy benefit. The pharmacy benefit may exclude coverage of medications for certain uses.

Clinical criteria for PA medications are available on our website at **UnitedHealthcareOnline.com**. The criteria reflect UnitedHealthcare's National P&T Committee decisions. For a member to receive benefit coverage for a medication requiring prior authorization, the physician or the physician's designee must provide information to the prior authorization department.

Some benefit plans may include our Step Therapy[+] program. Step Therapy offers a "stepwise" approach to therapy for certain high-cost medications and requires that a member first try a more cost-effective medication before another high-cost medication. Step Therapy medications are noted as ST.

Supply limits define the maximum supply of medication per copayment or period of time. Supply limits are based on several factors that may include FDA-approved dosing guidelines as defined in the product package insert, medical literature, guidelines, or supportive data. Supply limit medications are noted as SL.

The Refill and Save Program encourages members to adhere to their treatment regimens by rewarding them with a discounted copayment/coinsurance for refilling their prescription within the defined time period. Eligible medications are noted as RS.

How to Obtain Authorization?

The Online Prior Authorization tool (available through **UnitedHealthCareOnline.com**) is easy to use. The majority of online prior authorizations are approved in real time, and an auto-population feature provides 95 percent of a member's information. The OptumRx Prior Authorization team is also available by phone at 800-711-4555. Prior authorizations can also be submitted online by signing in to **optumrx.com** > Healthcare Professionals > Prior Authorizations.

[+]For New Jersey fully insured members this program is referred to as First Start.

[1] In certain documents the Prescription Drug List (PDL) was referred to as the "Preferred Drug List (PDL)." This change in descriptive terms does not affect your patient's benefit coverage.

[2] Where differences are noted, the benefit plan documents will govern.

[3] In certain documents Tier 1 was referred to as "generics;" Tier 2 was referred to as "preferred brands" or "brand-name" on the PDL; and Tier 3 was referred to as "non-preferred brands," "not on the PDL," or "brand-name not on the PDL." These changes in descriptive terms do not affect your patient's benefit coverage.

Anti-Infectives

UnitedHealthcare

Penicillins

Tier 1

Amoxicillin Extended-Release Tablet (generic Moxatag)
Amoxicillin Trihydrate Capsule, Chewable Tablet, Suspension, Tablet (generic Amoxil)
Amoxicillin Trihydrate/Potassium Clavulanate (generic Augmentin Chewable Tablet, Tablet, Suspension)
Penicillin V Potassium (generic Pen-V K)

Tier 3

Amoxicillin Clavulanate ER Tablet, Sustained-Release 12 Hour (generic Augmentin XR)*** **E T4**

Tetracyclines

Tier 1

Doxycycline Hyclate Tablet 20 mg (generic Periostat)
Doxycycline Monohydrate 50, 100 mg Capsule (generic Monodox)
Minocycline HCl Capsule (generic Minocin)

Tier 2

Doxycycline Hyclate 50, 75, 100 mg (generic Morgidox, Vibra-Tabs, Vibramycin)**

Tier 3

Adoxa **E T4**
Doxycycline Hyclate Tablet, Enteric-Coated (generic Doryx)*** **E T4**
Doxycycline Monohydrate 75 mg Capsule (generic Monodox)*** **E T4**
Doxycycline Monohydrate Capsule (generic Adoxa 150 mg)*** **E T4**
Oracea **T4**
Minocycline HCl Tablet (generic Dynacin)***
Minocycline HCl Tablet, Extended-Release 24 Hour (generic Solodyn 45, 90, 135 mg)***
Solodyn **T4**
Tetracycline HCl (generic Achromycin V)***

Cephalosporins

FIRST GENERATION CEPHALOSPORINS

Tier 1

Cefadroxil Hydrate (generic Duricef)
Cephalexin Monohydrate (generic Keflex)

SECOND GENERATION CEPHALOSPORINS

Tier 1

Cefaclor (generic Ceclor, Ceclor CD)
Cefpodoxime Tablet (generic Vantin)
Cefprozil (generic Cefzil)
Cefuroxime Axetil Suspension, Tablet (generic Ceftin)

Tier 3

Ceftin Suspension

THIRD GENERATION CEPHALOSPORINS

Tier 1

Cefdinir (generic Omnicef)
Cefditoren Pivoxil (generic Spectracef)

Tier 3

Cedax
Cefixime Suspension (generic Suprax)***
Suprax Tablet, Chewable Tablet, Capsule **T4**

Macrolides

Tier 1

Azithromycin (generic Zithromax)
Clarithromycin Tablet (generic Biaxin)
Erythromycin Base Capsule, Delayed-Release (generic Eryc)
Erythromycin Ethylsuccinate Tablet (generic E.E.S.)

Tier 2

Clarithromycin Suspension (generic Biaxin)**
Clarithromycin Sustained-Release Tablet (generic Biaxin XL)**
Ery-Tab

Tier 3

Eryped
PCE
Zmax

Please refer to page 4 for a definition of notations/symbols.

* Products listed in Tier 1 may be covered in Tier 3 in a non-standard Prescription Drug List
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Quinolones

Tier 1
Ciprofloxacin Tablet (generic Cipro)
Levofloxacin (generic Levaquin Tablet, Solution)
Ofloxacin (generic Floxin)

Tier 2
Ciprofloxacin Oral Suspension (generic Cipro Suspension)**

Tier 3
Cipro Oral Suspension
Ciprofloxacin Tablet, Sustained-Release 24 Hour (generic Cipro XR)***
Moxifloxacin Tablet (generic Avelox)***

Sulfas & Related Agents

Tier 1
Sulfamethoxazole/Trimethoprim (generic Bactrim, Bactrim DS, Septra, Septra DS)

Urinary Tract Agents

Tier 1
Nitrofurantoin Macrocrystal (generic Macrodantin)
Nitrofurantoin Suspension, Oral (generic Furadantin)
Nitrofurantoin/Nitrofurantoin Macrocrystal (generic Macrobid)
Trimethoprim (generic Proloprim)

Tier 3
Primsol

Antivirals

HEPATITIS C

Tier 1
Ribavirin (generic Copegus)
Ribavirin (generic Rebetol Capsules)

Tier 2

Daklinza	**DSP PA SL ST**
Epclusa	**DSP PA SL ST**
Harvoni	**DSP PA SL**
Sovaldi	**DSP PA SL ST**

Tier 3

Olysio	**DSP PA SL ST T4**
*Ribasphere Ribapak****	**E**
Technivie	**DSP PA ST T4**
Viekira Pak	**DSP PA SL ST T4**
Zepatier	**DSP PA SL ST T4**

MISCELLANEOUS ANTIVIRALS

Tier 1

Acyclovir (generic Zovirax)	
Adefovir (generic Hepsera)	**DSP**
Amantadine HCl (generic Symmetrel)	
Ganciclovir (generic Cytovene)	
Lamivudine (generic Epivir HBV)	**DSP**
Rimantadine HCl Tablet (generic Flumadine)	
Valganciclovir (generic Valcyte)	**SL**
Valacyclovir HCl (generic Valtrex)	**SL**

Tier 2

Entecavir (generic Baraclude)**	**DSP**
Famciclovir (generic Famvir)**	**SL**

Tier 3

Relenza	**SL**
Tamiflu	**SL**
Tyzeka	**DSP**

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PA Prior Authorization required****
RS May be eligible for the Refill and Save Program
SL Supply limit
ST Step Therapy
T4 May be covered on Tier 4 in selected benefits

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Anti-Infectives

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HIV/AIDS THERAPY

Tier 1

Abacavir Sulfate Tablet (generic Ziagen)	**DSP**
Abacavir/Lamivudine/Zidovudine (generic Trizivir)	**DSP**
Didanosine Capsule, Enteric-Coated (generic Videx EC)	**DSP**
Lamivudine Solution, Tablet (generic Epivir)	**DSP**
Nevirapine (generic Viramune)	**DSP**
Stavudine (generic Zerit)	**DSP**
Zidovudine (generic Retrovir)	**DSP**
Zidovudine/Lamivudine (generic Combivir)	**DSP**

Tier 2

Abacavir/Lamivudine (generic Epzicom)**	**DSP**
Aptivus	**DSP**
Atripla	**DSP**
Crixivan	**DSP**
Emtriva	**DSP**
Edurant	**DSP**
Evotaz	**DSP**
Fuzeon	**DSP**
Intelence	**DSP**
Invirase	**DSP**
Isentress	**DSP**
Kaletra	**DSP**
Lexiva	**DSP**
Norvir	**DSP**
Prezcobix	**DSP**
Prezista	**DSP**
Rescriptor	**DSP**
Reyataz	**DSP**
Selzentry	**DSP PA**
Sustiva	**DSP**
Triumeq	**DSP**
Tybost	**DSP**
Viracept	**DSP**
Viread	**DSP**
Vitekta	**DSP**

Tier 3

Complera	**DSP T4**
Descovy	**DSP T4**
Genvoya	**DSP ST T4**
Nevirapine Extended-Release (generic Viramune XR)***	**DSP E T4**
Odefsey	**DSP T4**
Stribild	**DSP ST**
Tivicay	**DSP**
Truvada	**DSP T4**

Antifungal Agents

Tier 1

Clotrimazole Troche (generic Mycelex)	
Fluconazole (generic Diflucan)	
Griseofulvin Microsize (generic Grifulvin V)	
Griseofulvin Ultramicrosize (generic Gris-Peg)	
Itraconazole Capsule (generic Sporanox Capsule)	**SL**
Ketoconazole (generic Nizoral)	
Nystatin (generic Mycostatin)	
Terbinafine HCl Tablet (generic Lamisil)	**SL**
Voriconazole (generic Vfend)	**SL**

Tier 2

Noxafil Suspension, Tablet	
Sporanox Solution, Oral	

Tier 3

Cresemba	
Jublia	**PA SL ST T4**
Kerydin	**PA SL ST T4**
Lamisil Granules	**SL**

Vancomycin

Tier 1

Vancomycin HCl (generic Vancocin HCl)	**SL**

Miscellaneous Anti-infectives

Tier 1

Clindamycin HCl (generic Cleocin HCl 150, 300 mg)	
Neomycin Sulfate (generic Neomycin Sulfate)	

Tier 2

Bethkis**	**DSP PA SL**
Cayston	**PA SL**
Cleocin HCl 75 mg	
Clindamycin Palmitate HCl (generic Cleocin Palmitate)**	
Dapsone	
Linezolid (generic Zyvox)**	**SL**

Tier 3

Dificid	**SL**
Kitabis Pak	**DSP E PA SL T4**
Tobi Podhaler	**DSP PA SL**
Tobramycin Nebulized Solution (generic Tobi)***	**DSP E PA SL T4**

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Anti-Infectives

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ANTIPARASITICS

Tier 1

Atovaquone (generic Mepron)
Ivermectin (generic Stromectol)
Metronidazole (generic Flagyl)
Paromomycin Sulfate (generic Humatin)

Tier 2

Albenza
Alinia **SL**
NebuPent

Tier 3

Tinidazole (generic Tindamax)***

ANTIMALARIALS

Tier 1

Hydroxychloroquine Sulfate (generic Plaquenil)
Mefloquine HCl (generic Lariam)
Quinine Sulfate (generic Qualaquin) **SL**

Tier 2

Atovaquone/Proguanil HCl (generic Malarone)**
Coartem
Daraprim **PA**

ANTIMYCOBACTERIALS

Tier 1

Ethambutol HCl (generic Myambutol)
Isoniazid (generic Isoniazid)
Pyrazinamide (generic Pyrazinamide)
Rifampin (generic Rifadin)
Rifampin/Isoniazid (generic Rifamate)

Tier 2

Priftin
Rifater

DSP Designated Specialty Program
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MC Multiple copay
PA Prior Authorization required****
RS May be eligible for the Refill and Save Program
SL Supply limit
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T4 May be covered on Tier 4 in selected benefits

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Antineoplastic & Immunosuppressant Drugs

ALKYLATING AGENTS

Tier 1

Temozolamide (generic Temodar)	**DSP PA**

Tier 2

Cyclophosphamide Capsules

ANTIMETABOLITES

Tier 1

Mercaptopurine (generic Purinethol)	
Methotrexate Tablet	
Xeloda	**DSP SL**

Tier 2

Trexall

Tier 3

Capecitabine (generic Xeloda)	**DSP E SL**

ANDROGENS, ESTROGENS, HORMONES & RELATED DRUGS

ANDROGENS

Tier 2

Oxandrolone (generic Oxandrin)**

HORMONES

Tier 1

Megestrol Acetate (generic Megace)

Tier 3

Megestrol Acetate Suspension (generic Megace ES)***

ANTIESTROGENS

Tier 1

Anastrozole (generic Arimidex)	
Letrozole (generic Femara)	
Tamoxifen (generic Nolvadex)	**H PA**

Tier 2

Exemestane (generic Aromasin)**	
Fareston	
Raloxifene (generic Evista)	**H PA**

ANTIANDROGENS

Tier 1

Bicalutamide (generic Casodex)
Flutamide (generic Eulexin)

IMMUNOSUPPRESSANT DRUGS

Tier 1

Azathioprine (generic Imuran)	
Cyclosporine, Modified (generic Gengraf)	**DSP**
Mycophenolate Mofetil Capsule, Suspension (generic CellCept)	**DSP**
Sirolimus (generic Rapamune)	**DSP**
Tacrolimus Anhydrous (generic Prograf)	**DSP**

Tier 2

Mycophenolic Acid (generic Myfortic)**	**DSP**

Tier 3

CellCept	**DSP T4**
Neoral	**DSP T4**
Sandimmune	**DSP T4**

MISCELLANEOUS ANTINEOPLASTIC DRUGS

Tier 1

Etoposide (generic VePesid)	
Hydroxyurea (generic Hydrea)	
Imatinib (generic Gleevec)	**DSP PA SL**
Leuprolide Acetate (generic Lupron 1 mg/0.2 ml)	**PA**
Octreotide Acetate (generic Sandostatin)	**DSP PA**

Tier 2

Afinitor	**DSP PA SL**
Bosulif	**DSP PA SL ST**
Caprelsa	**DSP PA SL**
Cometriq	**DSP PA SL**
Erivedge	**DSP PA SL**
Hycamtin	**DSP PA SL**
Imbruvica	**DSP PA SL**
Jakafi	**DSP PA SL**
Mekinist	**DSP PA SL**
Nexavar	**DSP PA SL**
Revlimid	**DSP PA SL**
Stivarga	**DSP PA SL**
Sutent	**DSP PA SL**
Sylatron	**DSP PA SL**
Tafinlar	**DSP PA SL**
Tarceva	**DSP PA SL**
Targretin Capsule**	**DSP SL**
Tasigna	**DSP PA SL ST**
Thalomid	**DSP PA SL**
Tretinoin (generic Vesanoid)**	**DSP SL**
Tykerb	**DSP PA SL**
Valchlor	**DSP PA SL**
Votrient	**DSP PA SL**
Xalkori	**DSP PA SL**
Zelboraf	**DSP PA SL**
Zolinza	**DSP SL**
Zytiga	**DSP PA SL**

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Tier 3

Bexarotene Capsule (generic Targretin)	**DSP E SL T4**
Gilotrif	**DSP PA SL**
Pomalyst	**DSP PA SL**
Somatuline Depot	**DSP PA T4**
Sprycel	**DSP PA SL ST T4**
Targretin Gel	**SL**
Xtandi	**DSP PA SL ST**
Zydelig	**DSP PA SL T4**
Zykadia	**PA SL**

Adjunctive Agents

Tier 1

Leucovorin Calcium
(generic Leucovorin Calcium 5, 25 mg)

Tier 2

Leucovorin Calcium 10, 15 mg
(generic Leucovorin Calcium)

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Narcotic Analgesics

NARCOTICS

Tier 1

Codeine Sulfate (generic Codeine Sulfate)	
Hydromorphone HCl (generic Dilaudid)	
Methadone HCl (generic Dolophine HCl)	**SL**
Meperidine HCl (generic Demerol)	
Morphine Sulfate Solution, Oral (generic MSIR 20 mg/ml, Roxanol)	
Morphine Sulfate Tablet, Sustained-Action (generic MS Contin)	**PA SL**
Oxycodone HCl (generic Roxicodone, OxyIR)	

Tier 2

Fentanyl Citrate Lollipop (generic Actiq)**	**PA SL**
Fentanyl Transdermal 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr, 100 mcg/hr (generic Duragesic)**	**PA SL**
Opana ER	**PA SL**
Oxymorphone Tablet (generic Opana)**	**SL**

Tier 3

Abstral	**E PA SL T4**
Belbuca	**PA SL ST**
Butrans	**E PA SL ST T4**
*Fentanyl Transdermal 37.5 mcg/hr, 62.5 mcg/hr, 87.5 mcg/hr****	**E PA SL T4**
Fentora	**E PA SL T4**
Hydromorphone Extended-Release Tablet (generic Exalgo)***	**PA SL ST T4**
Hysingla ER	**E PA SL ST T4**
Lazanda	**PA SL T4**
Morphine Sulfate Capsule, Extended-Release (generic Avinza)***	**PA SL ST T4**
Morphine Sulfate Capsule, Extended-Release Pellets (generic Kadian)***	**E PA SL ST T4**
Oxaydo	**E SL T4**
Oxycodone Extended-Release	**E PA SL ST T4**
OxyContin	**E PA SL ST T4**
Oxymorphone HCl Tablet, Sustained-Release 12 Hour (generic Opana ER)***	**PA SL ST T4**
Subsys	**E PA SL T4**
Xartemis XR	**E SL T4**
Xtampza ER	**PA SL**
Zohydro ER	**PA SL ST T4**

COMBINATION NARCOTIC ANALGESICS

Tier 1

Acetaminophen/Caffeine/Butalbital 325-50-40 mg (generic Fioricet)	**SL**
Codeine Phosphate/Acetaminophen (generic Tylenol w/Codeine)	**SL**
Hydrocodone/Acetaminophen (generic Norco)	**SL**

Tier 2

Hydrocodone/Acetaminophen Solution, Oral (generic Hycet)**	**SL**
Oxycodone HCl/Acetaminophen Tablet (generic Percocet, Roxicet)**	**SL**

Tier 3

Embeda	**E PA SL ST T4**
Hydrocodone/Acetaminophen (generic Xodol, Vicodin, Vicodin ES, Vicodin HP)***	**E SL T4**
*Trezix****	**SL T4**

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Non-Narcotic Analgesics

MISCELLANEOUS ANALGESICS

Tier 1

Tramadol HCl (generic Ultram)	**SL**
Tramadol HCl/Acetaminophen (generic Ultracet)	**SL**

Tier 2

Butorphanol Tartrate Aerosol, Spray (generic Stadol)**	**SL**
Tramadol HCl Tablet, Sustained-Release 24 Hour (generic Ultram ER)**	**SL**

Tier 3

Nucynta	**SL T4**
Nucynta ER	**PA SL**

NARCOTIC ANTAGONISTS/OPIOID DEPENDENCE

Tier 1

Naloxone Injection (generic Narcan)	**SL**
Naltrexone HCl (generic ReVia)	

Tier 2

Zubsolv**	**PA SL**

Tier 3

Bunavail	**E PA SL T4**
Buphrenorphine HCl/Naloxone HCl Tablet, Sublingual (generic Suboxone)**	**E PA SL T4**
Evzio	**E PA SL T4**
Suboxone Film	**E PA SL T4**

Migraine & Cluster Headache Therapy

Tier 1

Dihydroergotamine Nasal Spray (generic Migranal)	
Naratriptan HCl (generic Amerge)	**SL**
Rizatriptan Benzoate Orally Disintegrating Tablet, Tablet (generic Maxalt, Maxalt MLT)	**SL**
Sumatriptan Succinate Injection (generic Imitrex Injection)	**SL**
Sumatriptan Succinate Tablet (generic Imitrex Tablet)	**SL**

Tier 2

Relpax	**SL**
Sumatriptan Succinate Nasal Spray (generic Imitrex Nasal Spray)**	**SL**

Tier 3

Almotriptan (generic Axert)***	**SL**
Alsuma	**E SL T4**
Frovatriptan (generic Frova)***	**SL**
Onzetra Xsail	**E SL T4**
Sumavel Dosepro	**E SL T4**
Treximet	**E SL T4**
Zembrace SymTouch	**E SL T4**
Zolmitriptan (generic Zomig)***	**SL**
Zolmitriptan Orally Disintegrating Tablet (generic Zomig-ZMT)***	**SL**
Zomig Nasal Spray	**SL**

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MC Multiple copay
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SL Supply limit
ST Step Therapy
T4 May be covered on Tier 4 in selected benefits

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Antiparkinsonism Agents

Tier 1

Amantadine HCl (generic Symmetrel)
Benztropine Mesylate (generic Cogentin)
Bromocriptine Mesylate (generic Parlodel)
Carbidopa/Levodopa (generic Sinemet)
Carbidopa/Levodopa/Entacapone (generic Stalevo)
Carbidopa/Levodopa Tablet, Sustained-Action (generic Sinemet CR)
Pramipexole (generic Mirapex)
Ropinirole HCl (generic Requip)
Selegiline HCl (generic Eldepryl)
Trihexyphenidyl HCl (generic Artane)

Tier 2

Tolcapone (generic Tasmar)**

Tier 3

Azilect
Pramipexole Extended-Release (generic Mirapex ER)*** **E T4**
Ropinirole HCl Tablet, Extended-Release 24 Hour (generic Requip XL)*** **E T4**
Rytary **E T4**

Anticonvulsants

Tier 1

Carbamazepine (generic Tegretol)
Clonazepam (generic Klonopin)
Diazepam, Rectal (generic Diastat Acudial) **SL**
Divalproex Sodium Tablet (generic Depakote)
Ethosuximide (generic Zarontin)
Felbamate (generic Felbatol)
Gabapentin (generic Neurontin)
Lamotrigine 5, 25 mg Chewable Tablet (generic Lamictal Chewable)
Lamotrigine Tablet (generic Lamictal)
Levetiracetam (generic Keppra)
Oxcarbazepine (generic Trileptal)
Phenobarbital (generic Phenobarbital)
Phenytoin (generic Dilantin)
Phenytoin Sodium Extended-Release (generic Dilantin, Phenytek)
Primidone (generic Mysoline)
Topiramate Capsule, Sprinkle (generic Topamax)
Topiramate Tablet (generic Topamax)
Valproic Acid (generic Depakene)
Zonisamide (generic Zonegran)

Tier 2

Carbamazepine Capsule, Extended-Release Multiphase 12 Hour (generic Carbatrol)**
Divalproex Sodium (generic Depakote Sprinkle)**
Divalproex Sodium Tablet, Sustained-Release (generic Depakote ER)**
Levetiracetam Tablet, Extended-Release 24 Hour (generic Keppra XR)**
Sabril

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Tier 3

Aptiom	**PA**
Banzel	**PA**
Carbamazepine Tablet, Sustained-Release 12 Hour (generic Tegretol XR)**	
Depakote	**PA ST T4**
Depakote ER	**PA ST T4**
Fycompa	**PA**
Keppra	**PA ST T4**
Keppra XR	**PA ST T4**
Lamictal	**PA ST T4**
Lamictal ODT	**PA ST T4**
Lamictal XR	**PA ST T4**
Lamotrigine Orally Disintegrating Tablet (generic Lamictal ODT)***	**PA ST T4**
Lamotrigine Tablet, Extended-Release 24 Hour (generic Lamictal XR)***	**PA ST**
Lyrica	**SL ST T4**
Neurontin	**PA ST T4**
Onfi	**PA**
Oxtellar XR	**E PA ST T4**
Potiga	**PA**
Qudexy XR	**E PA ST T4**
Topamax	**PA ST T4**
Trileptal	**PA ST T4**
Trokendi XR	**E PA ST T4**
Vimpat	**PA**
Zonegran	**PA ST T4**

Miscellaneous Neurological Therapy

Tier 1

Donepezil HCl Tablet (generic Aricept)
Galantamine Tablet, Solution (generic Razadyne)
Nimodipine (generic Nimotop)
Rivastigmine Tartrate Capsule (generic Exelon)

Tier 2

Memantine Tablet (generic Namenda)**
Nuedexta

Tier 3

Donepezil 23 mg (generic Aricept 23 mg)***	**E T4**
Hetlioz	**DSP PA SL T4**
Namenda XR	**E T4**
Namzaric	**E T4**
Rivastigmine Patch (generic Exelon)***	
Savella	**SL T4**

Muscle Relaxants & Antispasmodic Therapy

MYASTHENIA GRAVIS

Tier 1

Pyridostigmine Bromide Tablet (generic Mestinon 60 mg)

Tier 2

Mestinon

Multiple Sclerosis

Tier 2

Ampyra	**DSP PA SL**
Avonex	**DSP PA SL**
Betaseron	**DSP PA SL**
Copaxone 20 mg**	**DSP PA SL**
Copaxone 40 mg	**DSP PA SL**
Tecfidera	**DSP PA SL**

Tier 3

Aubagio	**DSP PA SL**
Extavia	**DSP E PA SL ST T4**
Glatopa (generic Copaxone 20 mg)	**DSP E PA SL T4**
Gilenya	**DSP PA SL**
Plegridy	**DSP PA SL**
Rebif	**DSP PA SL ST T4**

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Psychotherapeutic Drugs

HYPNOTIC AGENTS

Tier 1

Temazepam (generic Restoril)	
Triazolam (generic Halcion)	
Zaleplon (generic Sonata)	**SL**
Zolpidem Tartrate (generic Ambien)	**SL**

Tier 2

Eszopiclone (generic Lunesta)**	**SL**

Tier 3

Belsomra	**SL ST T4**
Rozerem	**SL ST**
Silenor	**E SL T4**
Zolpidem Sublingual Tablet (generic Intermezzo)***	**E SL T4**
Zolpidem Tartrate Tablet, Multiphasic-Release (generic Ambien CR)***	**E SL T4**
Zolpimist	**SL ST T4**

ANTIDEPRESSANT AGENTS

TRICYCLICS

Tier 1

Amitriptyline HCl (generic Elavil)
Clomipramine HCl (generic Anafranil)
Desipramine HCl (generic Norpramin)
Doxepin HCl (generic Sinequan)
Imipramine Pamoate (generic Tofranil-PM)
Nortriptyline HCl (generic Pamelor)

MISCELLANEOUS ANTIDEPRESSANTS

Tier 1

Bupropion HCl (generic Wellbutrin)
Bupropion HCl Tablet, Sustained-Action (generic Wellbutrin SR)
Bupropion HCl Tablet, Sustained-Release 24 Hour (generic Wellbutrin XL)
Mirtazapine (generic Remeron)
Mirtazapine Dispersible Tablet (generic Remeron SolTab)
Nefazodone HCl (generic Serzone)
Trazodone HCl (generic Desyrel)
Venlafaxine HCl Capsule, Sustained-Release 24 Hour (generic Effexor XR)

Tier 3

Duloxetine (generic Cymbalta)***	**SL**
Fetzima	**SL ST T4**
Irenka	**E SL T4**
Pristiq	**RS SL**
Trintellix	**SL ST T4**
Viibryd	**SL T4**

MAO INHIBITORS

Tier 1

Phenelzine Sulfate (generic Nardil)
Tranylcypromine Sulfate (generic Parnate)

Tier 3

Emsam
Marplan

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SELECTIVE SEROTONIN REUPTAKE INHIBITORS

Tier 1

Citalopram Hydrobromide (generic Celexa)
Escitalopram Tablet (generic Lexapro)
Fluoxetine Capsule, Delayed-Release (generic Prozac Weekly) **SL**
Fluoxetine HCl Capsule (generic Prozac)
Fluoxetine HCl Tablet (generic Sarafem)
Fluvoxamine Maleate (generic Luvox)
Paroxetine HCl Tablet (generic Paxil)
Sertraline HCl (generic Zoloft)

Tier 3

Escitalopram Solution, Oral (generic Lexapro)***
Fluvoxamine Maleate Capsule, Extended-Release 24 Hour (generic Luvox CR)*** **SL**
Paroxetine HCl Sustained-Release, 24 Hour (generic Paxil CR)*** **SL**

ANTIPSYCHOTICS

PHENOTHIAZINES

Tier 1

Chlorpromazine HCl Tablet (generic Thorazine 200 mg)
Perphenazine (generic Trilafon)

BUTYROPHENONES

Tier 1

Haloperidol (generic Haldol)

MISCELLANEOUS ANTIPSYCHOTICS

Tier 1

Clozapine (generic Clozaril)
Clozapine Orally Disintegrating Tablet (generic FazaClo)
Olanzapine Tablet (generic Zyprexa) **SL**
Quetiapine Fumarate (generic Seroquel)
Risperidone Tablet, Rapid Dissolve (generic Risperdal M-Tab)
Risperidone Tablet (generic Risperdal)

Tier 2

Aripiprazole Tablet (generic Abilify)** **SL**
Olanzapine/Fluoxetine (generic Symbyax)** **SL**
Ziprasidone (generic Geodon)** **SL**

Tier 3

Fanapt **SL T4**
Latuda **SL T4**
Olanzapine Tablet, Rapid Dissolve (generic Zyprexa Zydis)*** **SL**
Paliperidone (generic Invega)*** **SL**
Quetiapine Extended-Release **SL**
Rexulti **SL ST T4**
Saphris **SL T4**
Vraylar **SL ST T4**

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MISCELLANEOUS PSYCHOTHERAPEUTIC AGENTS

Tier 1

Amphetamine Aspartate/Amphetamine Sulfate/Dextroamphetamine (generic Adderall)	**PA**
Lithium Carbonate (generic Eskalith)	
Lithium Carbonate, Sustained-Action (generic Eskalith CR)	
Lithium Carbonate Tablet, Sustained-Action (generic Lithobid)	
Methylphenidate HCl Tablet (generic Ritalin)	**PA**
Methylphenidate HCl Tablet, Sustained-Action (generic Metadate ER)	**PA**

Tier 2

Adderall XR**	**PA SL**
Concerta**	**PA SL**
Guanfacine Extended-Release (generic Intuniv)**	**SL**
Metadate CD**	**PA SL**
Vyvanse	**PA SL**

Tier 3

Amphetamine Aspartate/Amphetamine Sulfate/Dextroamphetamine Capsule, Sustained-Release 24 Hour (generic Adderall XR)	**E PA SL T4**
Aptensio XR	**E PA SL T4**
Armodafanil (generic Nuvigil)***	**E PA SL T4**
Clonidine Extended-Release (generic Kapvay)***	**E T4**
Daytrana	**E PA SL T4**
Dexmethylphenidate Extended-Release (generic Focalin XR)***	**E PA SL T4**
Dextroamphetamine Capsule, Extended-Release (generic Dexedrine)***	**PA**
Dextroamphetamine Sulfate Tablet, Capsule (generic Dexedrine)***	**PA**
Evekeo	**E PA T4**
Methylphenidate HCl Capsule, Extended-Release Multiphase (generic Ritalin LA)***	**E PA SL T4**
Methylphenidate HCl Capsule, Extended-Release Multiphase 30-70 (generic Metadate CD)	**E PA SL T4**
Methylphenidate HCl Chewable Tablet (generic Methylin)***	**PA**
Methylphenidate HCl Tablet, Extended-Release 24 Hour (generic Concerta)	**E PA SL T4**
Modafinil (generic Provigil)***	**PA SL**
Quillivant XR	**E PA SL T4**
Strattera	**SL T4**
Xyrem	**PA SL T4**

ANXIOLYTICS

Tier 1

Alprazolam (generic Xanax)
Alprazolam Tablet, Sustained-Release 24 Hour (generic Xanax XR)
Buspirone HCl (generic Buspar)
Chlordiazepoxide HCl (generic Librium)
Diazepam (generic Valium)
Lorazepam (generic Ativan)

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Antiarrhythmic Agents

Tier 1
Amiodarone HCl (generic Cordarone)
Disopyramide Phosphate Capsule (generic Norpace)
Flecainide Acetate (generic Tambocor)
Mexiletine HCl (generic Mexitil)
Propafenone HCl (generic Rythmol)
Quinidine Gluconate (generic Quinidine Gluconate)
Quinidine Sulfate (generic Quinidine Sulfate)
Quinidine Sulfate Tablet, Sustained-Action (generic Quinidex)
Sotalol HCl (generic Betapace, Betapace AF)

Tier 2
Dofetilide (generic Tikosyn)**
Norpace CR

Tier 3
Multaq **PA T4**
Propafenone Capsule, Sustained-Release 12 Hour (generic Rythmol SR)***

Cardiac Glycosides

Tier 1
Digoxin (generic Lanoxin)

Nitrates

RAPID ACTING NITRATES

Tier 1
Nitroglycerin Sublingual Tablet (generic Nitrostat)

Tier 3
Nitroglycerin Spray (generic Nitromist)*** **SL**

LONG ACTING NITRATES

Tier 1
Isosorbide Dinitrate Tablet (generic Isordil 5, 10, 20, 30 mg)
Isosorbide Dinitrate Tablet, Sublingual (generic Isordil 2.5, 5 mg)
Isosorbide Mononitrate (generic ISMO)
Isosorbide Mononitrate Tablet, Sustained-Release 24 Hour (generic Imdur)
Nitroglycerin Capsule, Sustained-Action (generic Nitro-Bid)
Nitroglycerin Patch, Transdermal 24 Hour (generic Transderm-Nitro)

Tier 3
Dilatrate-SR
Nitro-Dur

Coagulation Therapy

ANTICOAGULANTS

Tier 1
Warfarin Sodium (generic Coumadin)

Tier 2
Pradaxa **SL**
Xarelto **SL**

Tier 3
Coumadin
Eliquis **SL T4**
Savaysa **SL T4**

ANTIPLATELET DRUGS

Tier 1
Cilostazol (generic Pletal)
Clopidogrel Bisulfate (generic Plavix)
Dipyridamole (generic Persantine)

Tier 3
Brilinta **PA SL T4**
Effient **SL T4**
Zontivity **SL T4**

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HEMOPHILIA AGENTS

Tier 2

Alphanate vonWillebrand	**DSP**
Alphanine SD	**DSP**
Bebulin	**DSP**
BeneFix	**DSP**
Coagadex	**DSP**
Feiba	**DSP**
Hemofil-M	**DSP**
Humate-P	**DSP**
Koate-DVI	**DSP**
Kogenate FS	**DSP**
Kovaltry	**DSP**
Monoclate-P	**DSP**
Mononine	**DSP**
Novoeight	**DSP**
Novoseven	**DSP**
Nuwiq	**DSP**
Profilnine SD	**DSP**

Tier 3

Advate	**DSP PA ST T4**
Adynovate	**DSP E PA ST T4**
Eloctate	**DSP PA T4**
Helixate FS	**DSP E PA ST T4**
Idelvion	**DSP**
Ixinity	**DSP E PA ST T4**
Recombinate	**DSP PA ST T4**
Xyntha	**DSP PA ST T4**

HEPARIN

Tier 1

Heparin Sodium (generic Heparin)

Tier 2

Fondaparinux Sodium (generic Arixtra)**	**SL**
Enoxaparin (generic Lovenox)**	**SL**

VITAMIN K

Tier 2

Mephyton	**SL**

Antihypertensive Therapy

THIAZIDE & RELATED DIURETICS

Tier 1

Amiloride HCl (generic Midamor)
Amiloride HCl/Hydrochlorothiazide (generic Moduretic)
Bumetanide (generic Bumex)
Chlorothiazide Tablet (generic Diuril)
Furosemide (generic Lasix)
Hydrochlorothiazide (generic HydroDIURIL, Microzide)
Metolazone (generic Zaroxolyn)
Spironolactone (generic Aldactone)
Spironolactone/Hydrochlorothiazide (generic Aldactazide 25-25 mg)
Triamterene/Hydrochlorothiazide (generic Dyazide, Maxzide)

Tier 2

Aldactazide 50-50 mg
Eplerenone (generic Inspra)**

BETA BLOCKERS

Tier 1

Acebutolol HCl (generic Sectral)
Atenolol (generic Tenormin)
Carvedilol (generic Coreg)
Labetalol HCl (generic Normodyne)
Metoprolol Succinate Tablet, Sustained-Release 24 Hour (generic Toprol XL 25 mg)
Metoprolol Tartrate 50, 100 mg (generic Lopressor)
Nadolol (generic Corgard)
Propranolol HCl Tablet (generic Inderal)

Tier 2

Bystolic
Metoprolol Succinate Tablet, Sustained-Release 24 Hour (generic Toprol XL 50, 100, 200 mg)**
Propranolol HCl Sustained-Action Capsule (generic Inderal LA)**

Tier 3

Coreg CR	**E SL T4**

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Cardiovascular, Hypertension & Lipids

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CALCIUM CHANNEL BLOCKERS

CALCIUM CHANNEL BLOCKERS/NON-DIHYDROPYRIDINES

Tier 1

Diltiazem HCl (generic Cardizem)
Diltiazem HCl Capsule, Controlled-Release (generic Dilacor XR)
Diltiazem HCl Capsule, Sustained-Release 12 Hour (generic Cardizem SR)
Verapamil HCl (generic Calan)
Verapamil HCl (generic Verelan)
Verapamil HCl Tablet, Sustained-Action (generic Calan SR)

Tier 2

Diltiazem HCl Capsule, Sustained-Action (generic Tiazac)**
Diltiazem HCl Capsule, Sustained-Release 24 Hour (generic Cardizem CD)**
Diltiazem HCl Tablet, Sustained-Release 24 Hour (generic Cardizem LA 120, 180, 240, 300, 360, 420 mg)**

Tier 3

Verapamil HCl Capsule, 24 Hour Sustained-Release Pellets (generic Verelan PM)***

CALCIUM CHANNEL BLOCKERS/DIHYDROPYRIDINES

Tier 1

Amlodipine Besylate (generic Norvasc)
Felodipine (generic Plendil)
Nifedipine (generic Procardia)
Nifedipine Tablet, Osmotic Laser-Drilled Formulation (generic Procardia XL)

Tier 2

Nisoldipine (generic Sular)**

ACE INHIBITORS

Tier 1

Benazepril HCl (generic Lotensin)
Enalapril Maleate (generic Vasotec)
Lisinopril (generic Prinivil, Zestril)
Ramipril (generic Altace)
Trandolapril (generic Mavik)

ADRENERGIC ANTAGONISTS & RELATED DRUGS

Tier 1

Clonidine HCl (generic Catapres)
Doxazosin Mesylate (generic Cardura)
Guanfacine HCl (generic Tenex)
Prazosin HCl (generic Minipress)
Terazosin HCl (generic Hytrin)

Tier 3

Clonidine Patch, Transdermal Weekly (generic Catapres-TTS)***

VASODILATORS

Tier 1

Hydralazine HCl (generic Apresoline)

Tier 2

BiDil

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OTHER ANTIHYPERTENSIVE COMBINATIONS

Tier 1

Amlodipine/Benazepril (generic Lotrel)
Benazepril/Hydrochlorothiazide (generic Lotensin HCT)
Bisoprolol Fumarate/Hydrochlorothiazide (generic Ziac)
Enalapril Maleate/Hydrochlorothiazide (generic Vaseretic)
Irbesartan/Hydrochlorothiazide (generic Avalide)
Lisinopril/Hydrochlorothiazide (generic Prinzide, Zestoretic)
Losartan Potassium/Hydrochlorothiazide (generic Hyzaar)
Metoprolol/Hydrochlorothiazide (generic Lopressor HCT)
Valsartan/Hydrochlorothiazide (generic Diovan HCT)

Tier 2

Amlodipine-Valsartan (generic Exforge)**
Benicar HCT **SL**
Clorpres
Dutoprol **SL**
Quinapril HCl/Hydrochlorothiazide (generic Accuretic)**
Telmisartan/Hydrochlorothiazide (generic Micardis HCT)**

Tier 3

Amlodipine-Valsartan-Hydrochlorothiazide (generic Exforge HCT)*** **E**
Candesartan/Hydrochlorothiazide (generic Atacand HCT)***
Edarbyclor **SL**
Tekturna HCT **SL**
Teveten HCT
Trandolapril/Verapamil (generic Tarka)***

ANGIOTENSIN II RECEPTOR BLOCKERS AND RENIN INHIBITOR

Tier 1

Irbesartan (generic Avapro)
Losartan Potassium (generic Cozaar)

Tier 2

Benicar **SL**
Telmisartan (generic Micardis)**
Valsartan (generic Diovan)**

Tier 3

Candesartan (generic Atacand)***
Edarbi **SL**
Eprosartan (generic Teveten)
Tekturna **SL**

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Cardiovascular, Hypertension & Lipids

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Lipid/Cholesterol Lowering Agents

Tier 1	
Atorvastatin Calcium (generic Lipitor)	**SL**
Cholestyramine/Sucrose (generic Questran)	
Colestipol HCl (generic Colestid)	
Fluvastatin Sodium (generic Lescol)	**SL**
Gemfibrozil (generic Lopid)	
Lovastatin (generic Mevacor)	
Pravastatin (generic Pravachol)	
Simvastatin (generic Zocor)	
Tier 2	
Rosuvastain (generic Crestor)**	**SL**
Fenofibrate 54, 160 mg (generic Lofibra)**	
Niaspan	
Praluent	**DSP PA SL ST**
Welchol	
Tier 3	
Choline Fenofibrate (generic Trilipix)***	**E T4**
Fenofibrate 40, 48, 120, 140 mg Tablet (generic Fenoglide, Tricor)***	**E T4**
Fenofibrate 43, 50, 67, 130, 134, 150, 200 mg Capsule (generic Antara, Lofibra, Lipofen)***	**E T4**
Fenofibric Acid (generic Fibricor)***	**E T4**
Fluvastatin Extended-Release (generic Lescol XL)***	**SL ST**
Juxtapid	**DSP PA SL ST T4**
Kynamro	**DSP PA SL ST T4**
Livalo	**SL ST T4**
Niacin Extended-Release (generic Niaspan)***	**T4**
Omega-3-Acid Ethyl Esters (generic Lovaza)***	**PA**
Repatha	**DSP PA SL ST T4**
Vascepa	**PA T4**
Vytorin	**SL T4**
Zetia	**SL T4**

Miscellaneous Cardiovascular Agents

Tier 1	
Midodrine (generic ProAmatine)	
Tier 2	
Ranexa	
Tier 3	
Corlanor	**PA SL**
Entresto	**PA SL T4**

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Topical Corticosteroids

TOPICAL CORTICOSTEROIDS VERY HIGH POTENCY

Tier 1

Clobetasol Propionate Solution (generic Clobex) **SL**

Tier 2

Clobetasol Propionate Cream (generic Temovate E)** **SL**

Clobetasol Propionate Cream, Gel, Ointment, Solution (generic Temovate)** **SL**

Halobetasol Propionate Cream, Ointment (generic Ultravate)** **SL**

Tier 3

Betamethasone Dipropionate/Propylene Glycol Lotion, Ointment (generic Diprolene)***

Clobetasol Propionate Foam (generic Olux, Olux E)*** **E SL T4**

Clobetasol Propionate Lotion, Shampoo (generic Clobex)*** **E SL T4**

Diflorasone Diacetate Ointment (generic Psorcon, Apexicon, Florone)***

TOPICAL CORTICOSTEROIDS HIGH POTENCY

Tier 1

Amcinonide Ointment (generic Cyclocort)

Betamethasone Dipropionate Lotion (generic Diprosone, Maxivate)

Betamethasone Dipropionate/Propylene Glycol Gel (generic Diprolene)

Betamethasone DP Augmented Cream (generic Diprolene AF Cream)

Betamethasone Valerate Ointment (generic Valisone)

Desoximetasone Cream (generic Topicort) **SL**

Fluocinonide Cream, Gel, Ointment, Solution, Non-Oral (generic Lidex)

Triamcinolone Acetonide Cream (generic Aristocort, Kenalog)

Triamcinolone Acetonide Ointment (generic Aristocort HP)

Tier 2

Betamethasone Dipropionate Cream, Ointment (generic Diprosone, Maxivate)**

Tier 3

Amcinonide Cream, Lotion (generic Cyclocort)***

Betamethasone Dipropionate Augmented, Lotion, Ointment (generic Diprolene)***

Desoximetasone Gel, Ointment (generic Topicort)*** **SL**

Diflorasone Diacetate Cream (generic Apexicon E)*** **SL**

Flucinonide 0.1% Cream (generic Vanos)*** **E SL T4**

Halog Cream, Ointment **SL ST**

TOPICAL CORTICOSTEROIDS MEDIUM POTENCY

Tier 1

Betamethasone Valerate Cream, Lotion (generic Valisone)

Desoximetasone Cream (generic Topicort)

Flucinolone Acetonide Ointment **SL**

Fluticasone Propionate Cream, Ointment (generic Cutivate)

Hydrocortisone Butyrate Ointment, Solution, Non-Oral (generic Locoid)

Mometasone Furoate Cream, Ointment, Solution (generic Elocon)

Prednicarbate Cream (generic Dermatop)

Triamcinolone Acetonide Cream, Ointment, Lotion (generic Aristocort, Kenalog)

Tier 2

Fluocinolone Acetonide 0.025% Ointment (generic Synalar)** **SL**

Tier 3

Betamethasone Valerate Foam (generic Luxiq)*** **E SL T4**

Clocortolone (generic Cloderm)*** **SL ST**

Cordran Ointment **MC SL ST T4**

Fluocinolone Acetonide Cream (generic Synalar)*** **SL**

Flurandrenolide Cream, Lotion (generic Cordran)*** **MC SL ST**

Fluticasone Propionate (generic Cutivate Lotion)*** **MC SL ST**

Hydrocortisone Butyrate Cream (generic Locoid Lipocream) **E SL T4**

Hydrocortisone Valerate Cream, Ointment (generic Westcort)*** **SL**

Locoid Lotion **E SL T4**

Pandel Cream

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TOPICAL CORTICOSTEROIDS LOW POTENCY

Tier 1

Alclometasone Dipropionate Cream, Ointment (generic Aclovate)
Hydrocortisone 2.5% Cream, Ointment, Lotion (generic Hytone)

Tier 3

Desonate	**SL ST**
Desonide Cream, Ointment, Lotion (generic DesOwen, Tridesilon)***	**SL**
Fluocinolone Acetonide Body Oil, Scalp Oil (generic Derma-Smoothe/FS)***	**SL**
Fluocinolone Acetonide Solution Non-Oral (generic Synalar)***	**SL**
Verdeso	**E SL T4**

Topical Anesthetics

Tier 1

Lidocaine HCL Gel, Solution (generic Xylocaine)

Lidocaine HCL Ointment	**SL**
Lidocaine/Prilocaine Cream (generic Emla)	

Tier 2

Lidocaine Adhesive Patch (generic Lidoderm)**	**SL**

Therapy For Acne

Tier 1

Clindamycin Phosphate Cream, Solution, Swab (generic Cleocin T)	
Erythromycin Base/Benzoyl Peroxide (generic Benzamycin)	**SL**
Erythromycin Base/Ethyl Alcohol (generic Emgel, Erygel)	
Erythromycin Base/Ethyl Alcohol Swab, Medicated (generic Erycette)	
Metronidazole Lotion (generic Metrolotion)	
Metronidazole Cream (generic Metrocream)	
Metronidazole Gel (generic Metrogel 0.75%)	
Tretinoin Cream (generic Avita)	**PA SL**
Tretinoin Cream, Gel (generic Retin-A)	**PA SL**

Tier 2

Claravis (generic Accutane)**	**PA**
Differin Cream, Gel 0.1%^^	**PA SL**
Myorisan (generic Accutane)**	**PA**
Zenatane (generic Accutane)**	**PA**

Tier 3

Absorica	**E PA T4**
Acanya	**E SL T4**
Aczone	**SL T4**
Adapalene (generic Differin Cream, Gel 0.1%)***	**PA SL**
Adapalene (generic Differin Gel 0.3%)***	**PA SL**
Avita Gel	**PA SL**
Azelex	**SL**
Clindagel	**E SL T4**
Clindamycin Phosphate Foam 1% (generic Evoclin)***	
Clindamycin Phosphate Gel (generic Cleocin T)***	**SL**
Clindamycin Phosphate Lotion (generic Cleocin T)***	
Clindamycin Phosphate/Benzoyl Peroxide Gel *(generic Benzaclin 1%-5%)****	**E SL**
Clindamycin Phosphate/Benzoyl Peroxide *Gel 1.2%-5% (generic Duac)****	**SL**
Differin Lotion	**PA SL**
Epiduo	**SL**
Epiduo Forte	**E SL T4**
Fabior	**E SL T4**
Finacea	**T4**
Metronidazole Gel 1% (generic Metrogel 1%)***	**E MC T4**
Mirvaso	**SL T4**
Noritate	**E MC T4**
Retin-A Micro	**E PA SL T4**
Soolantra	**SL ST T4**
Tazorac	**PA SL T4**
Tretin-X	**E PA SL**
Tretinoin 0.05% Gel (generic Atralin)***	**E MC PA SL T4**
Tretinoin Microspheres (generic Retin-A Micro)***	**E PA SL T4**
Veltin	**E SL T4**
Ziana	**E SL T4**

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Dermatologicals/Topical Therapy

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Topical Antibacterials

Tier 1

Gentamicin Sulfate (generic Garamycin)	
Mupirocin Ointment (generic Bactroban)	**SL**

Tier 3

Mupirocin Calcium Cream (generic Bactroban)***	**SL**

Topical Antifungals

Tier 1

Ciclopirox Cream, Gel, Lotion (generic Loprox 0.77%)	
Ciclopirox Solution, Non-Oral (generic Penlac)	
Clotrimazole/Betamethasone Dipropionate (generic Lotrisone)	**SL**
Ketoconazole Cream, Shampoo (generic Nizoral 2%)	
Nystatin (generic Mycostatin)	

Tier 2

Ciclopirox Shampoo (generic Loprox 1%)**	

Tier 3

Econazole Nitrate (generic Spectazole 1%)	**SL**
Ertaczo	**E T4**
Ketoconazole Foam (generic Extina)***	**SL**
Luzu	**E SL T4**
Nafitifine 1%, 2% Cream (generic Naftin)***	**E T4**
Nystatin/Triamcinolone Acetonide (generic Mycolog II)***	**E T4**
Oxiconazole Cream (generic Oxistat)***	**PA ST SL T4**
Oxistat Lotion	**E SL T4**
Vusion	**E MC T4**
Xolegel	**MC**

Topical Antivirals

Tier 3

Acyclovir Ointment (generic Zovirax)***	**PA SL ST T4**
Denavir	**E T4**
Xerese	**E T4**
Zovirax Cream	**E SL T4**

Burn Therapy

Tier 1

Silver Sulfadiazine (generic Silvadene)

Topical Enzymes

Tier 3

Santyl

Antipsoriatic/Antiseborrheic

Tier 1

Acitretin (generic Soriatane)	
Calcipotriene Solution, Topical (generic Dovonex)	**SL**
Calcitrol Ointment (generic Vectical)	**SL**

Tier 2

Calcipotriene Cream, Ointment (generic Dovonex)**	**SL**

Tier 3

Betamethasone/Calcipotriene Ointment (generic Taclonex)***	**SL T4**
Taclonex Suspension	**SL T4**

Topical Scabicides/Pediculicides

Tier 1

Lindane (generic Lindane Shampoo)	**SL**
Malathion (generic Ovide)	
Permethrin (generic Elimite)	

Tier 2

Eurax

Tier 3

Sklice	**SL T4**
Spinosad (generic Natroba)***	

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Miscellaneous Dermatologicals

Tier 1	
Fluorouracil 5% Cream (generic Efudex)	
Imiquimod (generic Aldara)	**SL**
Podofilox Liquid (generic Condylox Liquid)	
Urea 40% Emulsion (generic Umecta)	
Tier 2	
Carac	
Oxsoralen-Ultra	
Regranex	**PA SL**
Tacrolimus (generic Protopic)**	**PA SL**
Tier 3	
Condylox Gel	
Diclofenac 3% Gel (generic Solaraze)	**PA**
Elidel	**PA SL**
Fluoroplex	**T4**
Picato	**SL**
Veregen	**SL**
Zyclara	**E SL T4**

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Miscellaneous Otic Preparations

Tier 1
Acetic Acid/Hydrocortisone (generic VoSol HC)
Ofloxacin (generic Floxin Otic)

Tier 3
Cetraxal

Otic Steroid/Antibiotic

Tier 1
Neomycin Sulfate/Polymyxin B Sulfate/ Hydrocortisone (generic Cortisporin)

Tier 2
Ciprodex

Tier 3
Cipro HC Suspension, Drops
Coly-Mycin S Suspension, Drops
Cortisporin-TC Suspension, Drops

Miscellaneous Agents

Tier 1
Cevimeline HCl (generic Evoxac)
Chlorhexidine Gluconate (generic Peridex)
Pilocarpine HCl (generic Salagen 5 mg)
Sodium Fluoride Gel (generic Prevident 1.1%)

Tier 3
Tyzine

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Endocrine/Diabetes

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Antithyroid Agents

Tier 1
Methimazole (generic Tapazole)
Propylthiouracil (generic Propylthiouracil)

Thyroid Hormones

Tier 1
Levothyroxine (generic Levothroid)

Tier 2
Levothyroxine Sodium (generic Levoxyl)**
Liothyronine Sodium (generic Cytomel)**
Synthroid

Tier 3
Armour Thyroid
Tirosint **E T4**

Adrenal Hormones

Tier 1
Dexamethasone (generic Decadron)
Fludrocortisone Acetate (generic Florinef Acetate)
Hydrocortisone Tablet (generic Cortef)
Methylprednisolone Tablet, Dose Pack (generic Medrol 4, 16, 32 mg)
Prednisolone Sodium Phosphate Orally Disintegrating Tablet (generic Orapred ODT)
Prednisolone Sodium Phosphate Solution, Oral (generic Pediapred)
Prednisolone Syrup (generic Prelone)
Prednisone

Tier 2
Medrol 2, 8, 24 mg
Pediapred

Tier 3
Acthar H.P. **DSP PA SL ST T4**

Miscellaneous Hormones

ANDROGENS

Tier 2
Androderm **PA SL**
Methyltestosterone (generic Android)**
Oxandrolone (generic Oxandrin)**
Testim **PA SL**

Tier 3
Androgel 1.62% **E PA SL T4**
Axiron **E PA SL T4**
Fortesta **E PA SL T4**
Natesto **E PA SL T4**
Striant **PA SL**
Testosterone 1% Gel (generic Androgel)*** **E PA SL T4**
Vogelxo **E PA SL T4**

MISCELLANEOUS AGENTS

Tier 1
Calcitriol (generic Rocaltrol)
Desmopressin Acetate (generic DDAVP)
Doxercalciferol (generic Hectorol)
Octreotide Acetate (generic Octreotide Acetate) **DSP PA**
Paricalcitol (generic Zemplar) **DSP**

Tier 2
Cabergoline (generic Dostinex)**
Calcitonin Salmon Nasal Spray (generic Miacalcin)**
Calcitonin, Salmon, Synthetic Nasal Spray (generic Fortical)**
Depen
Kuvan **DSP PA SL**
Samsca **DSP SL**
Synarel

Tier 3
Ravicti **PA T4**
Sensipar **DSP PA T4**
Syprine **PA**

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GONADOTROPIN & RELATED AGENTS

Coverage is determined by the consumer's prescription drug benefit plan.

Tier 2

Cetrotide	**DSP PA**

Tier 3

Ganirelix Acetate	**DSP PA**

Diabetes Therapy

INSULIN THERAPY

Tier 1

Basaglar	
(Tier 3 until 3/31/17)	**SL**
(Tier 1 beginning 4/1/17)	**SL**
Humalog Mix Vial	**SL**
Humalog Vial	**SL**
Humulin R U-500 Vial	**SL**
Humulin Vial	**SL**
Levemir FlexTouch	
(Tier 1 until 3/31/17)	**SL**
(Tier 2 beginning 4/1/17)	**SL**

Tier 2

Humalog Mix KwikPens	**SL**
Humalog Pen	**SL**
Humulin KwikPen	**SL**
Humulin R U-500 KwikPen	**SL**
Levemir FlexTouch	
(Tier 1 until 3/31/17)	**SL**
(Tier 2 beginning 4/1/17)	**SL**
Levemir Vial	**SL**

Tier 3

Afrezza	**E PA SL ST T4**
Apidra Solostar	**SL ST T4**
Apidra Vial	**SL ST T4**
Basaglar	
(Tier 3 until 3/31/17)	**SL**
(Tier 1 beginning 4/1/17)	**SL**
Lantus Solostar Pen/Cartridge/Vial	
(Tier 3 until 3/31/17)	**SL**
(Tier 3 beginning 4/1/17)	**E SL T4**
Novolin Vial	**SL ST**
NovoLog 70-30 FlexTouch	**SL ST T4**
NovoLog 70-30 Vial	**SL ST T4**
NovoLog FlexTouch	**SL ST T4**
NovoLog Vial	**SL ST T4**
Toujeo Solostar	**E SL T4**
Tresiba FlexTouch	**E PA SL T4**

NON-INSULIN HYPOGLYCEMIC AGENTS

Tier 1

Glimepiride (generic Amaryl)	
Glipizide (generic Glucotrol)	
Glipizide Tablet, Osmotic Laser-Drilled Formulation (generic Glucotrol XL)	
Glyburide (generic DiaBeta)	
Glyburide, Micronized (generic Glynase)	
Glyburide/Metformin HCl (generic Glucovance)	
Metformin HCl (generic Glucophage)	
Metformin HCl Sustained-Release (generic Glucophage XR)	
Pioglitazone HCl (generic Actos)	**SL**
Pioglitazone HCl/Glimepiride (generic Duetact)	**SL**

Tier 2

Bydureon	**SL**
Byetta	**SL**
Glipizide/Metformin HCl (generic Metaglip)**	
Invokamet	**SL**
Invokana	**SL ST**
Jardiance	**SL ST**
Jentadueto	**SL**
Kazano	**SL**
Kombiglyze XR	**SL**
Nesina	**SL**
Onglyza	**SL**
Oseni	**SL**
Pioglitazone HCl/Metformin HCl (generic Actoplus Met)**	**SL**
Repaglinide (generic Prandin)**	**SL**
Synjardy	**SL**
Tanzeum	**SL**
Tradjenta	**SL**
Victoza 2-Pak	**SL**

Tier 3

Actoplus Met XR	**SL**
Farxiga	**SL ST T4**
Glyxambi	**E SL ST T4**
Janumet	**SL ST T4**
Janumet XR	**SL ST T4**
Januvia	**SL ST T4**
Metformin HCl Tablet, Extended-Release 24 Hour (generic Fortamet)***	**E PA T4**
Metformin Modified-Release (generic Glumetza)***	**E PA T4**
Trulicity	**SL ST T4**
Victoza 3-Pak	**SL**
Xigduo XR	**E SL ST T4**

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GLUCOSE ELEVATING AGENTS

Tier 2

Glucagen	**SL**
Glucagon Emergency Kit *(generic Glucagon Kit)*	**SL**

INSULIN SYRINGES/MISCELLANEOUS DURABLE MEDICAL EQUIPMENT

Tier 1

OneTouch Ultra
OneTouch Ultra Mini
OneTouch Verio
OneTouch Verio Flex
OneTouch Verio IQ
OneTouch Verio Sync

Tier 3

Dexcom Continuous Glucose Monitoring System	**PA SL**
Dexcom Sensor	**PA SL**
Dexcom Transmitter	**PA SL**

BLOOD GLUCOSE MONITORING SUPPLIES

Tier 1

OneTouch Test Strips	**SL**
OneTouch Ultra Test Strips	**SL**
OneTouch Verio Test Strips	**SL**

Tier 3

Accu-Chek Test Strips	**E SL T4**
Ascensia Test Strips	**E SL T4**
Contour Test Strips	**E SL T4**
Freestyle Test Strips	**E SL T4**
Precision Test Strips	**E SL T4**
UniStrip Test Strips	**E SL T4**

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Ulcer Therapy

PROSTAGLANDINS

Tier 1

Misoprostol (generic Cytotec)

OTHER ULCER THERAPY

Tier 1

Sucralfate Tablet (generic Carafate)

Tier 2

Lansoprazole/Amoxicillin/Clarithromycin (generic Prevpac)	**E SL**

Tier 3

Carafate Oral Suspension	
Omeclamox Pak	**SL**
Prevpac	**E SL T4**
Pylera	**SL**

PROTON PUMP INHIBITORS

Tier 1

Omeprazole (generic Prilosec)
Pantoprazole (generic Protonix)

Tier 3

Dexilant	**SL**
Esomeprazole Capsule (generic Nexium)***	**E SL T4**
Lansoprazole Capsule, Delayed-Release (generic Prevacid)***	**E SL T4**
Nexium Suspension	**PA SL ST**
Omeprazole/Sodium Bicarbonate Capsule (generic Zegerid)***	**E PA SL ST T4**
Prevacid Solutab	**PA SL ST**
Prilosec Suspension	**E T4**
Zegerid Packet	**E PA SL ST T4**
Protonix Suspension	**E T4**
Rabeprazole (generic Aciphex)***	**SL**

Antidiarrheals & Antispasmodics

ANTIDIARRHEALS

Tier 1

Diphenoxylate HCl/Atropine Sulfate (generic Lomotil)

ANTISPASMODICS

Tier 1

Dicyclomine HCl Tablet (generic Bentyl)
Glycopyrrolate (generic Robinul, Robinul Forte)
Hyoscyamine Sulfate (generic Levsin, Levsin/SL)
Hyoscyamine Sulfate Capsule, Sustained-Release 12 Hour (generic Levsinex)
Hyoscyamine Sulfate Tablet, Sustained-Release 12 Hour (generic Levbid)

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Miscellaneous Gastrointestinal Agents

BILE ACIDS

Tier 1

Ursodiol (generic Actigall)

DIGESTIVE ENZYMES

Tier 2

Creon
Sucraid
Zenpep

Tier 3

Pancreaze	**ST**
Pertzye	**ST T4**
Ultresa	**ST T4**
Viokace	**ST T4**

MISCELLANEOUS GASTROINTESTINAL AGENTS

Tier 1

Balsalazide Disodium (generic Colazal)
Hydrocortisone (generic Cortenema)
Hydrocortisone Acetate Suppository, Rectal (generic Anusol-HC)
Hydrocortisone Acetate/Pramoxine HCl (generic Analpram-HC)
Hydrocortisone Cream (generic ProctoCream-HC 2.5%, Anusol-HC 2.5%)
Lactulose (generic Cephulac, Chronulac)
Mesalamine Enema (generic Rowasa) **SL**
Metoclopramide HCl (generic Reglan)
Sulfasalazine Tablet (generic Azulfidine)
Sulfasalazine Tablet, Enteric-Coated (generic Azulfidine)

Tier 2

Alosetron (generic Lotronex)***	**PA SL**
Apriso	
Budesonide Capsule, Sustained-Release (generic Entocort EC)**	
Canasa	
Cortifoam	
Lialda	
Linzess	**PA SL**
Movantik	**PA SL**
Uceris Foam	

Tier 3

Amitiza	**PA SL ST T4**
Asacol HD	**E T4**
Delzicol	**E T4**
Ocaliva	**DSP PA SL T4**
Pentasa	**E T4**
Rectiv	**SL**
Uceris Tablet	
Viberzi	**PA SL T4**
Xifaxan	**PA SL T4**

ANTIVERTIGO & ANTIEMETIC AGENTS

Tier 1

Dronabinol (generic Marinol)
Ondansetron HCl (generic Zofran)
Ondansetron HCl Tablet, Rapid Dissolve (generic Zofran ODT)
Prochlorperazine Maleate Tablet (generic Compazine)
Promethazine HCl (generic Phenergan)

Tier 2

Antivert 50 mg	
Emend Capsule	**SL**
Granisetron HCl Tablet (generic Kytril)**	**SL**
Varubi	**SL**

Tier 3

Akynzeo	**SL T4**
Anzemet	**SL**
Cesamet	
Transderm-Scop	

BOWEL EVACUANTS

Tier 1

Bisacodyl Tab & Peg 3350-KCL-Sod Bicarb-NACL for Solution Kit (generic Halflytely)	**H**
Sod Chloride/NaHCO3/KCl/PEGs (generic Nulytely w/Flavor Packs)	**H**
Sodium Sulfate/Sodium/Sodium Bicarbonate/Potassium Chloride/Polyethylene Glycols (generic Colyte)	**H**
Sodium Sulfate/Sodium/Sodium Bicarbonate/Potassium Chloride/Polyethylene Glycols Solution, Reconstituted, Oral (generic GoLYTELY)	**H**

Tier 2

GoLYTELY
Polyethylene Glycol 3350 Powder (generic Glycolax)**

Tier 3

Moviprep
Osmoprep
Prepopik
Suprep

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PA Prior Authorization required****
RS May be eligible for the Refill and Save Program
SL Supply limit
ST Step Therapy
T4 May be covered on Tier 4 in selected benefits

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Biotechnology Drugs

ERYTHROID STIMULANTS

Tier 2

Aranesp	**DSP SL**
Epogen	**DSP SL**
Procrit	**DSP SL**

MYELOID STIMULANTS

Tier 2

Leukine	**DSP**
Mozobil	**DSP**
Zarxio	**DSP**

Tier 3

Granix	**DSP E T4**
Neulasta	**DSP**
Neupogen	**DSP E T4**

INTERFERONS

Tier 2

Actimmune	**DSP PA SL**
Alferon N	
Pegasys	**DSP PA SL**

Tier 3

Intron A	**DSP PA T4**
Peg-Intron	**DSP PA SL T4**
RediPen	

GROWTH HORMONES

Tier 2

Increlex	**DSP PA SL**
Nutropin	**DSP PA SL**
Nutropin AQ	**DSP PA SL**
Nutropin AQ NuSpin	**DSP PA SL**

Tier 3

Egrifta	**DSP PA T4**
Genotropin	**DSP E PA SL T4**
Humatrope	**DSP E PA SL T4**
Norditropin	**DSP E PA SL T4**
Omnitrope	**DSP E PA SL T4**
Saizen	**DSP E PA SL T4**
Serostim	**DSP PA SL T4**
Zomacton	**DSP E PA SL T4**
Zorbtive	**DSP PA SL**

INTERLEUKINS

Tier 2

Arcalyst	**PA SL**

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Nsaid Agents

NSAIDS

Tier 1

Diclofenac Tablet (generic Cataflam, Voltaren)
Diclofenac Tablet, Sustained-Release 24 Hour (generic Voltaren-XR)
Etodolac (generic Lodine)
Etodolac Tablet, Sustained-Release 24 Hour (generic Lodine XL)
Ibuprofen (generic Motrin)
Indomethacin (generic Indocin)
Indomethacin Capsule, Sustained-Action (generic Indocin SR)
Ketoprofen (generic Orudis)
Ketoprofen Capsule, 24 Hour Sustained-Release (generic Oruvail 200 mg)
Ketorolac Tromethamine (generic Toradol)
Meloxicam (generic Mobic)
Nabumetone (generic Relafen)
Naproxen (generic Anaprox, Naprosyn)
Oxaprozin (generic Daypro)
Piroxicam (generic Feldene)
Sulindac (generic Clinoril)

Tier 2

Voltaren Gel

Tier 3

Diclofenac Sodium/Misoprostol (generic Arthrotec)***
Flector **E T4**

NSAIDS - SPECIFIC COX-II INHIBITORS

Tier 2

Celecoxib (generic Celebrex)** **SL**

SALICYLATES

Tier 1

Salsalate (generic Salflex)

Gout Therapy

Tier 1

Allopurinol (generic Zyloprim)
Probenecid (generic Benemid)

Tier 2

Mitigare

Tier 3

Colcrys **E PA T4**
Uloric **SL ST T4**

Other Inflammatory Conditions: Rheumatoid Arthritis, Crohn's Disease, Psoriasis, Ulcerative Colitis

Tier 1

Azathioprine (generic Imuran)
Hydroxychloroquine Sulfate (generic Plaquenil)
Leflunomide (generic Arava)
Methotrexate Sodium (generic Methotrexate)
Sulfasalazine Tablet (generic Azulfidine)
Sulfasalazine Tablet, Enteric-Coated (generic Azulfidine)

Tier 2

Cimzia **DSP PA SL**
Humira **DSP PA SL**
Simponi **DSP PA SL**
Stelara **DSP PA SL**

Tier 3

Actemra **DSP PA SL ST T4**
Cosentyx **DSP PA SL ST**
Enbrel **DSP PA SL ST T4**
Kineret **DSP PA SL**
Orencia **DSP PA SL ST T4**
Otezla **DSP PA SL ST T4**
Otrexup **E SL ST T4**
Rasuvo **SL ST T4**
Taltz **DSP SL PA ST T4**
Xeljanz **DSP PA SL ST T4**
Xeljanz XR **DSP PA SL ST T4**

MUSCLE RELAXANTS & ANTISPASMODIC THERAPY

Tier 1

Baclofen (generic Lioresal)
Carisoprodol (generic Soma 350 mg)
Chlorzoxazone (generic Parafon Forte DSC)
Cyclobenzaprine HCl (generic Flexeril)
Methocarbamol (generic Robaxin)
Tizanidine HCl Tablet (generic Zanaflex)

Tier 3

Metaxalone (generic Skelaxin)***
Tizanidine HCl Capsule (generic Zanaflex)***

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Osteoporosis Therapy

Tier 1	
Alendronate Sodium (generic Fosamax)	
Tier 2	
Calcitonin Salmon Nasal Spray (generic Miacalcin)**	
Calcitonin, Salmon, Synthetic Nasal Spray (generic Fortical)**	
Forteo	**DSP PA**
Ibandronate Sodium (generic Boniva)**	**SL**
Raloxifene (generic Evista)**	
Tier 3	
Risedronate Delayed-Release Tablets (generic Atelvia)***	**E SL T4**
Risedronate Tablet (generic Actonel)***	**SL**

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Contraceptives & Related Agents

MONOPHASIC/BIPHASIC/TRIPHASIC AGENTS

Tier 1

Altavera (generic Levlen, Nordette)	**H**
Alyacen 1/35 (generic Ortho-Novum 1/35)	**H**
Alyacen 7/7/7 (generic Ortho-Novum 7/7/7)	**H**
Apri (generic Ortho-Cept, Desogen)	**H**
Aranelle (generic Tri-Norinyl)	**H**
Aubra (generic Levlite)	**H**
Aviane (generic Levlite)	**H**
Caziant (generic Cyclesa)	**H**
Cesia (generic Cyclesa)	**H**
Chateal (generic Levlen, Nordete)	**H**
Cryselle-28 (generic Lo/Ovral)	**H**
Cyclafem 1/35 (generic Ortho-Novum 1/35)	**H**
Cyclafem 7/7/7 (generic Ortho-Novum 7/7/7)	**H**
Dasetta 1/35 (generic Ortho-Novum 1/35)	**H**
Dasetta 7/7/7 (generic Ortho-Novum 7/7/7)	**H**
Delya (generic Levlite)	**H**
Desogestrel-Ethinyl Estradiol 0.15/0.03mg (generic Ortho-Cept, Desogen)	**H**
Elinest (generic Lo/Ovral)	**H**
Emoquette (generic Ortho-Cept, Desogen)	**H**
Enpresse-28 (generic Tri-Levlen, Triphasil)	**H**
Enskyce (generic Ortho-Cept, Desogen)	**H**
Estarylla (generic Ortho-Cyclen)	**H**
Falmina (generic Levlite)	**H**
Gildess FE 1/20, 1.5/30 (generic Loestrin FE)	**H**
Junel FE 1/20, 1.5/30 (generic Loestrin FE)	**H**
Kelnor (generic Demulen)	**H**
Kurvelo (generic Levlen, Nordette)	**H**
Larin FE 1/20, 1.5/30 (generic Loestrin FE)	**H**
Leena (generic Tri-Norinyl)	**H**
Lessina (generic Levlite)	**H**
Levonest (generic Tri-Levlen, Triphsil)	**H**
Levonorgestrel-Ethinyl Estradiol 0.1/0.02mg (generic Levlite)	**H**
Levonorgestrel-Ethinyl Estradiol 0.15/0.03mg (generic Levlen, Nordette)	**H**
Levora-28 (generic Levlen, Nordette)	**H**
Low-Ogestrel (generic Lo/Ovral)	**H**
Lutera (generic Levlite)	
Marlissa (generic Levlen, Nordette)	**H**
Microgestin FE 1/20, 1.5/30 (generic Loestrin FE)	**H**
Mono-Linyah (generic Ortho-Cyclen)	**H**
Mononessa (generic Ortho-Cyclen)	**H**
Myzilra (generic Tri-Levlen, Triphasil)	**H**
Natazia	**H**
Necon 0.5/35, 1/50, 10/11(generic Brevicon, Modicon, Ortho-Novum 10/11)	**H**
Necon 7/7/7 (generic Ortho-Novum 7/7/7)	**H**
Norgestimate-Ethinyl Estradiol 0.18/0.035-0.215/0.035-0.25/0.035 mg (generic Ortho Tri-Cyclen)	**H**
Norgestimate-Ethinyl Estradiol 0.25/0.035 mg (generic Ortho-Cyclen)	**H**
Nortrel 0.5/35 (generic Brevicon, Modicon)	**H**
Nortrel 7/7/7 (generic Ortho-Novum 7/7/7)	**H**
Orsythia (generic Levlite)	**H**
Pirmella 1/35 (generic Ortho-Novum 1/35)	**H**
Pirmella 7/7/7 (generic Ortho-Novum 7/7/7)	**H**
Portia-28 (generic Levlen, Nordette)	**H**
Previfem (generic Ortho-Cyclen)	**H**
Reclipsen (generic Ortho-Cept, Desogen)	**H**
Solia (generic Ortho-Cept, Desogen)	**H**
Sprintec-28 (generic Ortho-Cyclen)	**H**
Sronyx (generic Levlite)	**H**
Tarina FE 1/20 (generic Loestrin FE)	**H**
Tri-Estarylla (generic Ortho Tri-Cyclen)	**H**
Tri-Linyah (generic Ortho Tri-Cyclen)	**H**
Tri-Previfem (generic Ortho Tri-Cyclen)	**H**
Tri-Sprintec (generic Ortho Tri-Cyclen)	**H**
Trinessa (generic Ortho Tri-Cyclen)	**H**
Trivora-28 (generic Tri-Levlen, Triphasil)	**H**
Velivet (generic Cyclesa)	**H**
Wera (generic Brevicon, Modicon)	**H**
Yasmin*	**H**
Zovia 1/35E (generic Demulen)	**H**
Zovia 1/50E (generic Demulen)	**H**

Tier 2

Azurette (generic Mircette)**	
Balziva (generic Ovcon-35)**	
Briellyn (generic Ovcon-35)**	
Desogestrel-Ethinyl Estradiol/Ethinyl Estradiol 0.15/0.02/0.01mg (generic Mircette)**	
Gildagia (generic Ovcon-35)**	
Gildess 1/20, 1.5/30 (generic Loestrin)**	
Introvale (generic Seasonale)**	**H MC**
Jolessa (generic Seasonale)**	**H MC**
Junel 1/20, 1.5/30 (generic Loestrin)**	
Kariva (generic Mircette)**	
Kimidess (generic Mircette)**	
Larin 1/20, 1.5/30 (generic Loestrin)**	
Levonorgestrel-Ethinyl Estradiol 0.15/0.03mg (91) (generic Seasonale)**	**H MC**
Microgestin 1/20, 1.5/30 (generic Loestrin)**	
Norethindrone Acetate/Ethinyl Estradiol 1/0.02mg (generic Loestrin)**	
Norgestimate-Ethinyl Estradiol 0.18/0.215/0.25 mg (generic Ortho Tri-Cyclen Lo)**	
Nuvaring	**H**
Ogestrel (generic Ovral)**	
Philith (generic Ovcon-35)**	

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Pimtrea (generic Mircette)**	
Quasense (generic Seasonale)**	**H MC**
Tri-Lo-Estarylla (generic Ortho Tri-Cyclen Lo)**	
Tri-Lo-Marzia (generic Ortho-Tri-Cyclen Lo)**	
Tri-Lo Sprintec (generic Ortho Tri-Cyclen Lo)**	
Trinessa Lo (generic Ortho Tri-Cyclen Lo)**	
Viorele (generic Mircette)**	
Vyfemla (generic Ovcon-35)**	
Yaz^^	
Zenchent (generic Ovcon-35)**	

Tier 3

Amethia (generic Seasonique)***	**MC**
Amethia Lo (generic LoSeasonique)***	**MC**
Amethyst (generic Lybrel)***	**MC**
Beyaz	**E T4**
Camrese (generic Seasonique)***	**MC**
Camrese Lo (generic LoSeasonique)***	**MC**
Daysee (generic Seasonique)***	**MC**
Ethinyl Estradiol/Drospirenone 3/0.02mg (generic Yaz)***	
Ethinyl Estradiol/Drospirenone 3/0.03mg (generic Yasmin)***	
Falessa	**E ST T4**
Gianvi (generic Yaz)***	
Larin 24 FE (generic Loestrin 24 FE)***	
Layolis FE (generic Generess FE)	**E T4**
Levonorgestrel-Ethinyl Estradiol 0.09/0.02mg (generic Lybrel)***	**MC**
Levonorgestrel/Ethinyl Estradio l 0.1/0.02mg (84) (generic LoSeasonique)***	**MC**
Levonorgestrel/Ethinyl Estradiol 0.15/0.03mg (84) (generic Seasonique)***	**MC**
Lo Loestrin Fe	
LoMedia 24 FE (generic Loestrin 24 FE)***	
Loryna (generic Yaz)***	
Minastrin 24 FE	**E T4**
Nikki (generic Yaz)***	
*Norethindrone Acetate/Ethinyl Estradiolwith Iron 1/0.02 mg** (generic Loestrin 24 FE)***	
Norethindrone/Ethinyl Estradiol/Ferrous Fumarate 0.8/0.025 mg Chewable Tablet (generic Generess FE)	**E T4**
Ocella (generic Yasmin)***	
Ortho-Cyclen	**T4**
Ortho-Novum 7/7/7	**T4**
Ortho Tri-Cyclen	**T4**
Ortho Tri-Cyclen Lo	**E T4**
Quartette	**E T4**
Rajani (generic Beyaz)	**E T4**
Safyral	**E T4**
Syeda (generic Yasmin)***	
Tilia FE (generic Estrostep FE)***	
Tri-Legest FE (generic Estrostep FE)***	
Vestura (generic Yaz)***	
Wymzya FE (generic Femcon FE)***	
Xulane (generic Ortho-Evra)***	**H**
Zarah (generic Yasmin)***	
Zenchent FE (generic Femcon FE)***	

Miscellaneous Contraceptive Agents

Tier 1

Aftera (generic Plan B One Step)	**H**
Econtra EZ (generic Plan B One Step)	**H**
Ella	**H SL**
Fallback Solo (generic Plan B One Step)	**H**
Levonorgestrel 1.5 mg (generic Plan B One Step)	**H**
My Way (generic Plan B One Step)	**H**
Next Choice One Dose (generic Plan B One Step)	**H**
Opcicon One-Step (generic Plan B One Step)	**H**
Take Action (generic Plan B One Step)	**H**

Oxytocics

Tier 1

Methylergonovine Maleate (generic Methergine)

Estrogens & Progestins

PROGESTINS

Tier 1

Camila	**H**
Deblitane	**H**
Errin	**H**
Heather	**H**
Jencycla	**H**
Jolivette	**H**
Lyza	**H**
Medroxyprogesterone Acetate 150 mg/ml	**H MC**
Medroxyprogesterone Acetate (generic Provera)	
Nora-BE	**H**
Norethindrone 0.35mg	**H**
Norethindrone Acetate (generic Aygestin)	
Norlyroc	**H**
Sharobel	**H**

Tier 2

Crinone[1]	**PA**
Depo-SubQ Provera 104	**MC**
Progesterone, Micronized (generic Prometrium)**	

Tier 3

Depo Provera	
Endometrin	**PA**
Nor-QD	**T4**
Ortho Micronor	**T4**

[1]Benefit determines coverage of treatment of infertility.

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ESTROGENS

Tier 1

Estradiol (generic Estrace)	
Estradiol Patch, Transdermal Weekly (generic Climara)	**SL**
Estropipate Tablet (generic Ogen)	

Tier 2

Climara	**SL**
Estring	**MC SL**
Evamist	
Vagifem	
Vivelle-Dot	**SL**

Tier 3

Alora	**SL**
Divigel	
Elestrin	
Estrace Cream with Applicator	
Estradiol Patch, Transdermal Twice Weekly (generic Vivelle-Dot)	**E SL T4**
Estrogel	**SL**
Femring	**MC SL**
Menest	
Menostar Patch, Transdermal Weekly	**SL**
Minivelle	**SL**
Premarin	

ESTROGEN COMBINATIONS

Tier 2

Estradiol/Norethindrone Acetate (generic Activella)**	
Prefest *(generic Estradiol/Norgestimate)*	

Tier 3

Angeliq	
Climara Pro	**SL**
Combipatch	**SL**
Duavee	
Norethindrone Acetate/Ethinyl Estradiol (generic Femhrt)***	
Premphase	
Prempro	

Miscellaneous OB/GYN

DRUGS TO TREAT INFERTILITY /IVF AGENTS

Coverage is determined by the consumer's prescription drug benefit plan.

Tier 1

Clomiphene Citrate (generic Clomid)	**PA**
Clomiphene Citrate (generic Serophene)	**PA**
Leuprolide Acetate (generic Lupron 1 mg/0.2 ml)	**PA**

Tier 2

Cetrotide	**DSP PA**
Gonal-F	**DSP PA**
Gonal-F RFF	**DSP PA**

Tier 3

Bravelle	**DSP PA ST T4**
Follistim AQ	**DSP PA ST T4**
Menopur	**DSP PA T4**
Ovidrel	**DSP PA**

VAGINAL CLEANSER/ANTI-INFECTIVES

Tier 2

AVC	
Clindamycin Phosphate Cream w/Applicator (generic Cleocin Phosphate)**	
Clindesse	
Metronidazole Vaginal Gel (generic Metrogel Vaginal)**	

Tier 3

Nuvessa	**E T4**

VAGINAL ANTIFUNGALS

Tier 1

Fluconazole (generic Diflucan 150 mg)	
Terconazole Cream w/Applicator (generic Terazol)	
Terconazole Suppository, Vaginal (generic Terazol)	

Tier 3

Gynazole-1	

SPECIALIZED OB/GYN DRUGS

Tier 1

Terbutaline Sulfate (generic Brethine)	

Tier 2

Synarel	**PA**
Tranexamic Acid (generic Lysteda)**	**SL**

Tier 3

Addyi	**PA SL T4**
Brisdelle	**E SL T4**
Diclegis	**PA SL T4**
Osphena	

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Ophthalmology

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Beta-Blockers

Tier 1
Timolol Maleate (generic Timoptic-XE)
Timolol Maleate Drops (generic Timoptic)

Tier 2

Betimol	**SL**

Tier 3
Betoptic S
Istalol

Direct Acting Miotics

Tier 1
Pilocarpine HCl
(generic Isopto Carpine 0.5%, 1%, 2%, 4%, 6%)

Other Glaucoma Drugs

Tier 1
Dorzolamide HCl (generic Trusopt)
Latanoprost (generic Xalatan)

Tier 2

Azopt	**SL**
Combigan	**SL**
Dorzolamide HCl/Timolol Maleate (generic Cosopt)**	
Lumigan 0.01%	**SL**
Travatan Z	**SL**

Tier 3

Simbrinza	**E SL T4**
Travoprost (generic Travatan)***	**ST**
Zioptan	**SL ST**

Oral Drugs For Glaucoma

Tier 1
Acetazolamide (generic Diamox)
Acetazolamide Capsule, Sustained-Action (generic Diamox Sequel)

Cycloplegic Mydriatics

Tier 1
Atropine Sulfate (generic Isopto Atropine)
Cyclopentolate HCl (generic Cyclogyl)

Tier 2
Isopto Homatropine *(generic Homatropine HBr)*

Non-Steroidal Anti-Inflammatory Agents

Tier 1
Diclofenac Sodium (generic Voltaren)
Ketorolac Tromethamine (generic Acular)
Ketorolac Tromethamine (generic Acular LS)

Tier 3

Bromfenac (generic Bromday, Xibrom)***	**SL**
Ilevro	**E SL T4**
Nevanac	**SL T4**
Prolensa	**E SL T4**

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Ophthalmology

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Antibiotics

Tier 1

Bacitracin/Polymyxin B Sulfate (generic Polysporin)
Ciprofloxacin HCl Drops (generic Ciloxan)
Erythromycin Base (generic Ilotycin)
Gentamicin Sulfate (generic Garamycin)
Levofloxacin (generic Quixin)
Neomycin Sulfate/Bacitracin/Polymyxin B Ointment (generic Neosporin)
Neomycin Sulfate/Gramicidin D/Polymyxin B Drops (generic Neosporin)
Ofloxacin (generic Ocuflox)
Polymyxin B Sulfate/Trimethoprim (generic Polytrim)
Tobramycin Sulfate Drops (generic Tobrex)

Tier 3

Azasite	**SL**
Ciloxan Ointment	
Gatifloxacin (generic Zymaxid)	**SL**
Moxeza	**T4**
Vigamox	**T4**
Tobrex Ointment	

Sulfonamides

Tier 1

Sulfacetamide Sodium (generic Bleph-10, Sodium Sulamyd)

Steroids

Tier 1

Fluorometholone (generic FML)
Prednisolone Acetate (generic Pred Forte)
Prednisolone Sodium Phosphate (generic Inflamase Forte)

Tier 2

FML Forte
Maxidex
Pred Mild

Tier 3

Alrex	**SL T4**
Durezol	**T4**
Lotemax Gel	**E SL T4**
Lotemax Ointment, Suspension	**SL T4**

Steroid-Antibiotic Combinations

Tier 1

Neomycin Sulfate/Bacitracin Zinc/Polymyxin B/ Hydrocortisone Ointment (generic Cortisporin)
Neomycin Sulfate/Polymyxin B Sulfate/ Hydrocortisone Suspension, Drops (generic Cortisporin)
Neomycin/Polymyxin B Sulfate/Dexamethasone (generic Maxitrol)

Tier 2

Tobramycin/Dexamethasone Suspension (generic Tobradex)**

Tier 3

Zylet

Steroid-Sulfonamide Combinations

Tier 1

Sulfacetamide Sodium/Prednisolone Sodium Phosphate (generic Vasocidin)

Tier 3

Blephamide Suspension, Drops

Sympathomimetics

Tier 2

Alphagan P	**SL**
Brimonidine Tartrate 0.15% (generic Alphagan P)**	**SL**

Miscellaneous Ophthalmologics

Tier 1

Azelastine HCl Drops (generic Optivar)	**SL**
Cromolyn Sodium (generic Crolom)	

Tier 2

Lacrisert

Tier 3

Lastacaft	**SL**
Olopatadine (generic Patanol)***	**SL**
Pataday	**E SL T4**
Restasis	**PA SL T4**

Antivirals

Tier 1

Trifluridine (generic Viroptic)

Tier 3

Zirgan	**SL**

DSP Designated Specialty Program
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MC Multiple copay
PA Prior Authorization required****
RS May be eligible for the Refill and Save Program
SL Supply limit
ST Step Therapy
T4 May be covered on Tier 4 in selected benefits

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Antihistamine & Antiallergenic Agents

Note: OTC medications are not on the Prescription Drug List, but are listed for information purposes. If a prescription product is identical to an OTC product in strength and dosage form, the prescription product is not included in the drug list.

Claritin (generic Loratadine Tablet, Syrup) - **OTC**

ANTIHISTAMINES

Tier 1

Cyproheptadine HCl (generic Periactin)
Hydroxyzine HCl (generic Atarax)
Hydroxyzine Pamoate (generic Vistaril)
Levocetirizine Dihydrochloride Tablet (generic Xyzal)
Promethazine HCl (generic Phenergan)

Tier 3

Clarinex D	**E**
Desloratadine (generic Clarinex)***	**E**
Levocetirizine Dihydrochloride Solution, Oral (generic Xyzal)***	

ADRENERGICS

Tier 2

Epipen	**SL**
Epipen Jr	**SL**

Tier 3

Epinephrine Autoinjector (generic Adrenaclick)***	**E SL T4**

ANGIOEDEMA

Tier 2

Berinert	**DSP PA SL**

Tier 3

Firazyr	**DSP PA SL T4**
Ruconest	**DSP PA SL T4**

INTRANASAL ANTIHISTAMINES

Tier 3

Azelastine (generic Astepro)***	**E SL T4**
Azelastine (generic Astelin)***	**SL**
Olpatadine (generic Patanase)***	**SL**

Cough & Cold Therapy

Antitussive and Expectorant Drugs

Only prescription antitussive and expectorant drugs are included in the Prescription Drug List. The use of OTC antitussive and expectorant products is recommended when possible. While not all comparable OTC alternatives to prescription products are provided below, where applicable at least one is listed for informational purposes.

ANTITUSSIVE COMBINATIONS

Tier 1

Codeine/Promethazine HCl (generic Phenergan w/Codeine)
Guaifenesin/Codeine Phosphate (generic Robitussin A-C)
Guaifenesin/Pseudoephedrine HCl/Codeine (generic Robitussin-DAC)
Phenylephrine HCl/Codeine/Promethazine (generic Phenergan VC w/Codeine)

Tier 2

Chlorpheniramine/Hydrocodone Pseudoephedrine (generic Zutripro)**	**SL**

Tier 3

FlowTuss	**E SL T4**
Hycofenix	**E SL T4**
Hydrocodone/Chlorpheniramine Suspension, Sustained-Release 12 Hour (generic Tussionex)***	**SL**
Obredon	**SL ST T4**
Tuzistra XR	**E SL T4**

BIOLOGIC RESPONSE MODIFIERS

Tier 3

Grastek	**PA SL T4**
Oralair	**PA SL T4**
Ragwitek	**PA SL T4**

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Pulmonary Agents

XANTHINES

Tier 1

Theophylline Anhydrous Tablet, Extended-Release 12 Hour (generic Theochron)

BETA AGONISTS ORAL

Tier 1

Albuterol Sulfate (generic Proventil, Ventolin)
Terbutaline Sulfate (generic Brethine)

INHALED BETA AGONISTS

Tier 1

Albuterol Sulfate Solution (generic AccuNeb, Proventil)
Metaproterenol Sulfate Solution, Non-Oral (generic Alupent)

Tier 2

Stiverdi Respimat	**SL**
Ventolin HFA	**SL**

Tier 3

Arcapta Neohaler	**SL**
Brovana	**SL**
Perforomist	**SL**
Proair HFA	**SL**
Proair Respiclick	**SL**
Proventil HFA	**SL**
Serevent Diskus	**SL**
Xopenex HFA	**SL**
Levalbuterol HCl (generic Xopenex Vial, Nebulizer)***	**E SL T4**

INHALED CORTICOSTEROIDS

Tier 1

Alvesco	**SL**
Asmanex HFA, Twisthaler	**SL**
QVAR	**SL**

Tier 2

Budesonide Inhalation Suspension (generic Pulmicort Respules)**	**SL**

Tier 3

Aerospan	**SL**
Arnuity Ellipta	**SL**
Flovent Diskus	**SL**
Flovent HFA	**SL**
Pulmicort Flexhaler	**SL ST T4**

INTRANASAL STEROIDS

Tier 2

Fluticasone Propionate (generic Flonase)**	**SL**

Tier 3

Beconase AQ	**E SL T4**
Budesonide (generic Rhinocort Aqua)***	**E SL T4**
Dymista	**E SL T4**
Flunisolide	
Mometasone (generic Nasonex)***	**E SL T4**
Omnaris	**E SL T4**
Qnasl	**E SL T4**
Triamcinolone Acetonide (generic Nasacort AQ)***	**E SL T4**
Veramyst	**E SL T4**
Zetonna	**SL**

MISCELLANEOUS PULMONARY AGENTS

Tier 1

Ipratropium Bromide Solution, Non-Oral (generic Atrovent)
Montelukast Chewable Tablet, Tablet (generic Singulair)

Sildenafil Citrate (generic Revatio)	**DSP PA SL**
Zafirlukast (generic Accolate)	

Tier 2

Adempas	**DSP PA SL**
Albuterol Sulfate/Ipratropium Solution, Non-Oral (generic Duoneb)**	
Esbriet	**DSP PA SL**
Incruse Elipta	**SL**
Letairis	**DSP PA SL**
Montelukast Granules (generic Singulair)**	
Opsumit	**DSP PA SL**
Pulmozyme	**DSP PA SL**
Seebri NeoHaler	**SL**
Tracleer	**DSP PA SL**
Tudorza Pressair	**SL**
Tyvaso	**DSP PA**
Utibron NeoHaler	**SL**
Ventavis	**DSP PA**

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SL Supply limit
ST Step Therapy
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Tier 3	
Adcirca	**DSP PA SL T4**
Advair Diskus	**RS SL**
Advair HFA	**RS SL**
Atrovent HFA	**SL**
Atrovent Nasal Spray	
Breo Ellipta	**RS SL**
Combivent Respimat	**SL**
Daliresp	**PA SL**
Dulera	**SL ST T4**
Ofev	**DSP PA SL T4**
Orenitram	**DSP PA SL T4**
Spiriva Handihaler	**SL T4**
Spiriva Respimat	**SL T4**
Stiolto Respimat	**E SL T4**
Symbicort	**RS SL**
Uptravi	**DSP PA SL ST T4**
Zyflo	**ST T4**
Zyflo CR	**ST T4**

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Urologicals

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Cholinergic Stimulants

Tier 1

Bethanechol Chloride (generic Urecholine)

Anticholinergics

Tier 1

Oxybutynin Chloride (generic Ditropan)

Tier 2

Oxybutynin Chloride Tablet, Sustained-Release (generic Ditropan XL)**

Tier 3

Darifenacin Extended-Release (generic Enablex)***	**E T4**
Myrbetriq	**E T4**
Tolterodine Extended-Release (generic Detrol LA)***	**E T4**
Toviaz	
Trospium Chloride Capsule, Sustained-Release 24 Hour (generic Sanctura XR)***	**E T4**
Vesicare	**E T4**

Urinary Anesthetics

Tier 1

Phenazopyridine HCl (generic Pyridium)

Miscellaneous Urologicals

Tier 1

Citric Acid/Sodium Citrate (generic Bicitra)

Tier 2

Cystagon	**DSP**
Elmiron	

Tier 3

Procysbi	**DSP PA ST T4**

Erectile Dysfunction

Tier 3

Caverject	**SL**
Cialis	**SL T4**
Edex	**SL**
Levitra	**SL T4**
Muse	**SL**
Staxyn	**E SL T4**
Stendra	**SL T4**
Viagra	**SL T4**

Benign Prostatic Hyperplasia (BPH) Therapy

Tier 1

Alfuzosin HCl (generic Uroxatral)
Doxazosin Mesylate (generic Cardura)
Finasteride (generic Proscar)
Tamsulosin HCl (generic Flomax)
Terazosin HCl (generic Hytrin)

Tier 3

Cialis	**SL ST T4**
Dutasteride (generic Avodart)***	**PA T4**
Rapaflo	**T4**

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Vitamins, Hematinics & Electrolytes

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Vitamins & Hematinics

Injectable vitamins are not included in the Prescription Drug List.

Multivitamins are NOT included in the Prescription Drug List as various OTC products are available.

Tier 1

Fluoride Ion/Iron/Multivitamins (generic Poly-Vi-Flor w/Iron)
Fluoride Ion/Iron/Vitamins A,C, and D (generic Tri-Vi-Flor w/Iron)
Fluoride Ion/Multivitamins (generic Poly-Vi-Flor)
Fluoride Ion/Vitamins A,C, and D (generic Tri-Vi-Flor)
Sodium Fluoride (generic Luride)

Tier 3

Brand Prenatal Vitamins
Nascobal

Electrolytes

POTASSIUM

Tier 1

Potassium Chloride (generic K-Dur)
Potassium Chloride Capsule, Sustained-Action (generic Micro-K)
Potassium Chloride Packet (generic Klor-Con 25mEq)
Potassium Chloride Tablet, Sustained-Action (generic K-Tab, Slow-K)

Tier 3

K-Tab

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Miscellaneous Agents

Tier 1

Acamprosate (generic Campral)
Anagrelide HCl (generic Agrylin)
Calcium Acetate (generic PhosLo)
Disulfiram (generic Antabuse)
Levocarnitine (generic Carnitor)
Pilocarpine HCl (generic Salagen)
Riluzole (generic Rilutek)

Tier 2

Carbaglu	
Chemet	
Exjade	**DSP PA**
Jadenu	**DSP PA**
Renvela	
Velphoro	

Tier 3

Auryxia	
Ferriprox	**DSP PA SL T4**
Fosrenol	
Renagel	
Veltassa	**PA SL**

Smoking Deterrents

Tier 1

Bupropion HCl Tablet, Sustained-Action (generic Zyban)	**H PA**
Nicotine Gum (generic Nicorette Gum)	**H PA**
Nicotine Patch (generic Nicoderm CQ)	**H PA**
Nicotine Patch, Transdermal 24 Hour (generic Habitrol)	**H PA**
Nicotine Lozenge (generic Nicorette Lozenge)	**H PA**
Thrive Gum	**H PA**

Tier 3

Chantix	**H PA T4**
Nicoderm CQ	**H PA**
Nicorette Gum	**H PA**
Nicorette Lozenge	**H PA**
Nicorette Mini-Lozenge	**H PA**
Nicotrol Inhaler	**H PA T4**
Nicotrol Nasal Spray	**H PA T4**

Anorexiants

Appetite Suppressants (e.g. Ionamin, Meridia, Xenical, etc., and amphetamines when used as appetite suppressants) are Tier 3. Coverage is determined by the consumer's prescription drug benefit plan.

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SL Supply limit
ST Step Therapy
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