

Care 1st Health Plan Medi-Cal Drug Formulary

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GENERIC NAME	BRAND NAME	STRENGTH	FORMULATION	FORMULARY STATUS	NOTE
Therapeutic Class: Analgesics					
Therapeutic Subclass: Analgesics, Narcotic					
Acetaminophen-Caff-Butalbital-Codeine	Fioricet w/ Codeine	325-40-50-30mg	Capsule	On Formulary	Quantity Limit: 60 capsules per 30 days
Acetaminophen-Codeine	Tylenol/Codeine	12-120mg/5ml	Elixir	On Formulary	Quantity Limit: 8 ounces (240 ml) per 30 days
Acetaminophen-Codeine	Tylenol/Codeine #2, #3, #4	15-300mg, 30-300mg, 60-300mg	Tablet	On Formulary	Quantity Limit: 100 tablets of acetaminophen and codeine product per 30 days
Acetaminophen-Hydrocodone	Lorcet	10-650mg	Tablet	On Formulary	Quantity Limit: 100 tablets of hydrocodone and acetaminophen product per 30 days
Acetaminophen-Hydrocodone	Lorcet Plus	7.5-650mg	Tablet	On Formulary	Quantity Limit: 100 tablets of hydrocodone and acetaminophen product per 30 days
Acetaminophen-Hydrocodone	Lortab	2.5-500mg, 7.5-500mg, 10-500mg	Tablet	On Formulary	Quantity Limit: 100 tablets of hydrocodone and acetaminophen product per 30 days
Acetaminophen-Hydrocodone	Lortab	2.5-167mg/5ml	Elixir	On Formulary	Quantity Limit: 8 ounces (240 mls) per 30 days
Acetaminophen-Hydrocodone	Norco	5-325mg, 7.5-325mg, 10-325mg	Tablet	On Formulary	Quantity Limit: 100 tablets of hydrocodone and acetaminophen product per 30 days
Acetaminophen-Hydrocodone	Vicodin	5-500mg	Tablet	On Formulary	Quantity Limit: 100 tablets of hydrocodone and acetaminophen product per 30 days
Acetaminophen-Hydrocodone	Vicodin ES	7.5-750mg	Tablet	On Formulary	Quantity Limit: 100 tablets of hydrocodone and acetaminophen product per 30 days
Acetaminophen-Hydrocodone	Vicodin HP	10-660mg	Tablet	On Formulary	Quantity Limit: 100 tablets of hydrocodone and acetaminophen product per 30 days
ASA-Caff-Butalbital-Codeine	Fiorinal/Codeine #3	30mg	Capsule	On Formulary	Quantity Limit: 60 caps per 30 days
Aspirin-Codeine	Empirin/Codeine	30-325mg, 60-325mg	Tablet	On Formulary	Quantity Limit: 100 tablets per 30 days
Buprenorphine HCl	Subutex, Buprenex	2mg, 8mg, 0.3mg/ml	Tabs, Vial, Ampule	On Formulary	MediCal carve out
Codeine Sulfate		15mg, 30mg, 60mg	Tablet	Prior Authorization	
Fentanyl	Duragesic	25mcg, 50mcg, 75mcg, 100mcg	Patch	Step Therapy	Step Therapy: Requires use of morphine sulfate ER tablets in past 90 days
Hydromorphone HCl	Dilaudid	3mg	Suppository	On Formulary	
Hydromorphone HCl	Dilaudid	1mg / ml	Liquid	On Formulary	
Hydromorphone HCl	Dilaudid	2mg, 4mg, 8mg	Tablet	On Formulary	Quantity Limit: 60 tablets per 30 days
Meperidine HCl	Demerol	50mg, 100mg	Tablet	On Formulary	Quantity Limit: 100 tablets per 30 days
Methadone HCl	Dolophine	5mg, 10mg	Tablet	On Formulary	Quantity Limit: 100 tablets per 30 days
Methadone HCl	Dolophine	5mg/5ml, 10mg/ml	Solution	On Formulary	Quantity Limit: 120 mls per 30 days
Morphine Sulfate	Morphine Sulfate	10mg/5ml, 20mg/5ml, 20mg/ml	Solution	On Formulary	Quantity Limit: 4 ounces (120 mls) per 30 days
Morphine Sulfate	Morphine Sulfate	5mg, 10mg, 20mg, 30mg	Supp. Rect	On Formulary	Quantity Limit: 24 suppositories per 30 days
Morphine Sulfate	MS Contin	15mg, 30mg, 60mg, 100mg, 200mg	Tablet	On Formulary	Quantity Limit: 90 tablets per 30 days
Morphine Sulfate	MSIR	15mg, 30mg	Tablet	On Formulary	Quantity Limit: 90 tablets per 30 days
Oxycodone	Oxy Fast, Roxicodone Intenso	5mg/5ml, 20mg/ml	Solution	Prior Authorization	
Oxycodone	Oxy IR	5mg	Tablet, Capsules	Prior Authorization	
Oxycodone	Roxicodone	15mg, 30mg	Tablet	Prior Authorization	
Oxycodone HCl	OxyContin	10mg, 20mg, 40mg, 80mg	Tablet	Prior Authorization	Quantity Limit: 2 tablets per day
Oxycodone-Acetaminophen	Percocet	5-325mg	Tablet	On Formulary	Limited to 5mg-325mg strength; Quantity Limit: 100 tablets of oxycodone with ASA or oxycodone with acetaminophen product per 30 days

GENERIC NAME	BRAND NAME	STRENGTH	FORMULATION	FORMULARY STATUS	NOTE
Oxycodone-Aspirin	Percodan	4.88-325mg	Tablet	On Formulary	Quantity Limit: 100 tablets total quantity of oxycodone with ASA or oxycodone with acetaminophen product per 30 day
<i>Therapeutic Subclass: Analgesics, Non-Narcotic</i>					
Acetaminophen	Fever-all	80mg, 120mg, 325mg, 650mg	Suppository	On Formulary	Quantity Limit: 30 suppositories and one (1) prescription per month
Acetaminophen	Tylenol	100mg/ml	Drops	On Formulary	Quantity Limit: 15 ml and two (2) prescriptions per month
Acetaminophen	Tylenol	325mg, 500mg	Tablet	On Formulary	Quantity Limit: 60 tablets and one (1) prescription per month
Acetaminophen	Tylenol	160mg/5ml	Suspension	On Formulary	Quantity Limit: 4 ounces (120ml) and two (2) prescriptions per month
Acetaminophen-Caff-Butalbital	Esgic-Plus	500-40-50mg	Tab/Cap	On Formulary	
Acetaminophen-Caff-Butalbital	Fioricet, Esgic	325-40-50mg	Tablet	On Formulary	
Aspirin-Caffeine-Butalbital	Fiorinal	325-40-50mg	Tablet, Capsule	On Formulary	
Etodolac SR	Lodine XL	600mg	Tablet	Prior Authorization	
Isometheptene-APAP-Dichloral	Midrin	65-325-100mg	Capsule	On Formulary	
Tramadol	Ultram	50 mg	Tablet	On Formulary	Quantity Limit: 100 tablets per 30 days
<i>Therapeutic Subclass: Antirheumatics</i>					
Azathioprine	Imuran	50mg	Tablet	On Formulary	
Hydroxychloroquine Sulfate	Plaquenil	200mg	Tablet	On Formulary	
Leflunomide	Arava	10mg, 20mg	Tablet	On Formulary	
Methotrexate	Methotrexate	2.5mg	Tablet	On Formulary	
Penicillamine	Cuprimine	125mg, 250mg	Capsule	On Formulary	
<i>Therapeutic Subclass: Cyclooxygenase Inhibitor</i>					
Celecoxib	Celebrex	100mg, 200mg, 400mg	Capsule	Prior Authorization	
<i>Therapeutic Subclass: Gout</i>					
Allopurinol	Zyloprim	100mg, 300mg	Tablet	On Formulary	
Colchicine	Colchicine	0.6mg	Tablet	On Formulary	
Colchicine-Probenecid	Colbenemid	0.5-500mg	Tablet	On Formulary	
Probenecid	Probenemid	500mg	Tablet	On Formulary	
<i>Therapeutic Subclass: Migraine</i>					
ASA-APAP-Caffeine	Excedrin Migraine		Tablet	On Formulary	
Ergotamine-Caffeine	Cafergot	1-100mg	Tablet	On Formulary	
Rizatriptan	Maxalt	5mg, 10mg	Tablet	On Formulary	Quantity Limit: 12 tablets per 30 days
Sumatriptan	Imitrex	5 mg, 20 mg	Nasal Spray	On Formulary	Quantity Limit: 6 sprays/Rx; Fill Limit: 1 fill per 30 days
Sumatriptan	Imitrex	6 mg/0.5 ml	Injectable	On Formulary	Quantity Limit: 2 inj/Rx; Fill Limit: 1 fill per 30 days
Sumatriptan	Imitrex	25 mg, 50 mg, 100 mg	Tablet	On Formulary	Quantity Limit: 9 tablets per 30 days
<i>Therapeutic Subclass: NSAIDS</i>					
Aspirin	Aspirin	81mg, 325mg	Tablet	On Formulary	
Aspirin	Ecotrin	81mg, 325mg	Tablet	On Formulary	
Diclofenac Sodium	Voltaren	25mg, 50mg, 75mg	Tablet	On Formulary	
Diclofenac Sodium	Voltaren XR	100mg	Tablet	On Formulary	

GENERIC NAME	BRAND NAME	STRENGTH	FORMULATION	FORMULARY STATUS	NOTE
Diffunisal	Dolobid	500mg	Tablet	On Formulary	
Flurbiprofen	Ansaid	50mg, 100mg	Tablet	On Formulary	
Ibuprofen	Childrens Motrin	100mg/5ml	Suspension	On Formulary	Quantity Limit: 4 ounces (120ml) and two (2) prescriptions per month
Ibuprofen	Motrin	400mg, 600mg, 800mg	Tablet	On Formulary	
Ibuprofen	Motrin	200mg	Tablet	On Formulary	
Indomethacin	Indocin	25mg, 50mg, 75mg	Capsule	On Formulary	
Ketoprofen	Orudis	50mg, 75mg	Capsule	On Formulary	
Meloxicam	Mobic	7.5mg, 15mg	Tablet	On formulary	
Naproxen	Naprosyn	250mg, 375mg, 500mg	Tablet	On Formulary	
Naproxen Sodium	Anaprox	275mg	Tablet	On Formulary	
Naproxen Sodium	Anaprox DS	550mg	Tablet	On Formulary	
Piroxicam	Feldene	10mg, 20mg	Capsule	On Formulary	
Salsalate	Disalcid	500mg, 750mg	Tablet	On Formulary	
Sulindac	Clinoril	150mg, 200mg	Tablet	On Formulary	
Tolmetin Sodium	Tolectin	200mg, 400mg, 600mg	Tablet	On Formulary	

Therapeutic Class: Anti-Infectives

Therapeutic Subclass: Amebacides

Paromomycin Sulfate	Humatin	250mg	Capsule	On Formulary	
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Therapeutic Subclass: Aminoglycosides

Neomycin Sulfate	Mycifradin	500mg	Tablet	On Formulary	
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Therapeutic Subclass: Anaerobic Antiprotozoal-Antibacterial Agents

Metronidazole	Flagyl	250mg, 500mg	Tablet	On Formulary	
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Therapeutic Subclass: Antifungal Agents

Clotrimazole	Mycelex	10mg	Troche	On Formulary	
Fluconazole	Diflucan	10mg/ml, 40mg/ml, 50mg, 100mg, 200mg	Tab / Susp	On Formulary	Quantity Limit for suspension only: 70ml per 30 days
Flucytosine	Ancobon	250mg, 500mg	Capsules	On Formulary	
Griseofulvin Microsize	Grifulvin V	500mg, 125mg/5ml	Tab / Susp	Prior Authorization	PA required unless treating Tinea Capitis. Age restriction: <= 12 yrs; Quantity Limit: 600mls / month; Fill Limit: 2 months / year
Griseofulvin Ultramicrosize	Gris-PEG	125mg, 250mg	Tablet	Prior Authorization	PA required, unless treatment for "Tinea Capitis" with fill limit of 60 days in 1 year.
Ketoconazole	Nizoral	200mg	Tablet	On Formulary	Quantity Limit: 1 tablet per day
Nystatin	Mycostatin	100K U/ml	Suspension	On Formulary	
Nystatin	Mycostatin	500000U	Tablet	On Formulary	
Terbinafine	Lamisil	250mg	Tablet	On Formulary	

Therapeutic Subclass: Antileprotic

Dapsone	Dapsone	25mg, 100mg	Tablet	On Formulary	
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Therapeutic Subclass: Antimalarials

Chloroquine Phosphate	Aralen	250mg	Tablet	Prior Authorization	
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GENERIC NAME	BRAND NAME	STRENGTH	FORMULATION	FORMULARY STATUS	NOTE
Hydroxychloroquine Sulfate	Plaquenil	200mg	Tablet	On Formulary	
Mefloquine HCl	Lariam	250mg	Tablet	On Formulary	
Primaquine Phosphate	Primaquine Phosphate	26.3mg	Tablet	On Formulary	
<i>Therapeutic Subclass: Anti-mycobacterium Agents</i>					
Ethambutol HCl	Myambutol	100mg, 400mg	Tablet	On Formulary	
Isoniazid	Isoniazid	100mg, 300mg, 50mg/5ml	Tablet / Suspension	On Formulary	May be dispensed as 100 day supply
Pyrazinamide	Pyrazinamide	500mg	Tablet	On Formulary	
<i>Therapeutic Subclass: Antiparasitics</i>					
Praziquantel	Biltricide	600mg	Tablet	On Formulary	
<i>Therapeutic Subclass: Antitubercular Antibiotics</i>					
Rifampin	Rifadin	150mg, 300mg	Capsule	On Formulary	
<i>Therapeutic Subclass: Antivirals</i>					
Abacavir Sulfate	Ziagen	300mg, 20mg/ml	Capsule / Liquid	On Formulary	MediCal carve out
Acyclovir	Zovirax	200mg, 400mg, 800mg, 200mg/5ml	Tab / Cap / Susp	On Formulary	
Amantadine HCl	Symmetrel	100mg	Capsule	On Formulary	MediCal carve out
Amprenavir	Agenerase	50mg, 150mg	Capsule	On Formulary	MediCal carve out
Atazanavir Sulfate	Reyataz	100mg, 150mg, 200mg	Capsule	On Formulary	MediCal carve out
Delavirdine Mesylate	Rescriptor	100mg, 200mg	Tablet	On Formulary	MediCal carve out
Didanosine	Videx	10mg/ml	Solution	Prior Authorization	
Didanosine	Videx	25mg, 50mg, 100mg, 150mg, 200mg	Chew Tabs	Prior Authorization	
Didanosine	Videx EC	125mg, 200mg, 250mg, 400mg	Capsule	Prior Authorization	
Efavirenz	Sustiva	50mg, 100mg, 200mg, 600mg	Tab/Cap	On Formulary	MediCal carve out
Emtricitabine	Emtriva	200mg	Capsule	On Formulary	MediCal carve out
Enfuvirtide	Fuzeon	90mg	Injection	On Formulary	MediCal carve out
Fosamprenavir	Lexiva	700mg	Tablet	On Formulary	MediCal carve out
Indinavir Sulfate	Crixivan	100mg, 200mg, 400mg, 333mg	Capsule	On Formulary	MediCal carve out
Lamivudine	Epivir	100mg, 150mg, 300mg	Tablet	On Formulary	MediCal carve out
Lamivudine	Epivir HBV	100mg, 25mg/5ml	Tablet, Susp	Prior Authorization	
Lamivudine-Zidovudine	Combivir	300-150mg	Tablet	On Formulary	MediCal carve out
Lamivudine-Zidovudine-Abacavir Sulfate	Trizivir	150-300mg	Tablet	On Formulary	MediCal carve out
Lopinavir-Ritonavir	Kaletra	33.3-133.3	Capsule	On Formulary	MediCal carve out
Nelfinavir Mesylate	Viracept	250mg	Tablet	On Formulary	MediCal carve out
Nevirapine	Viramune	200mg	Tablet	On Formulary	MediCal carve out
Oseltamivir	Tamiflu	30mg, 45mg, 75mg, 6mg/ml	Capsule, Suspension	On Formulary	Restricted to 1 fill (up to 10 days supply) in 180 days; Qty limit for suspension: 120mL per fill and 1 fill per 180 days
Ribavirin	Rebetol	200mg	Capsule	Prior Authorization	
Ritonavir	Norvir	80mg/ml	Solution	On Formulary	MediCal carve out
Ritonavir	Norvir Soft Gelatin	100mg	Capsule	On Formulary	MediCal carve out

GENERIC NAME	BRAND NAME	STRENGTH	FORMULATION	FORMULARY STATUS	NOTE
Saquinavir	Fortovase	200mg	Capsule	On Formulary	MediCal carve out
Saquinavir Mesylate	Invirase	200mg, 500mg	Tab / Cap	On Formulary	MediCal carve out
Stavudine	Zerit	15mg, 20mg, 30mg, 40mg	Capsule	On Formulary	MediCal carve out
Tenofovir Disoproxil Fumarate	Viread	300mg	Tablet	On Formulary	MediCal carve out
Tipranavir	Aptivus	250mg	Capsule	On Formulary	MediCal carve out
Valacyclovir	Valtrex	1000mg	Tablet	Prior Authorization	PA required unless treating Herpes Labialis; Quantity limit: 4 tablets per 30days
Zalcitabine	Hivid	0.375mg, 0.75mg	Tablet	Prior Authorization	
Zanamivir	Relenza	5mg	Inhalation	On Formulary	Restricted to 1 fill (up to 10 days supply) in 180 days
Zidovudine	Retrovir	100mg, 300mg, 10mg/ml	Tab / Cap / Syrup	Prior Authorization	

Therapeutic Subclass: Cephalosporins

Cefaclor	Ceclor	125mg/5ml, 250mg/5ml, 187mg/5ml, 375mg/5ml	Suspension	On Formulary	
Cefaclor	Ceclor	250mg, 500mg	Capsule	On Formulary	
Cefdinir	Omnicef	125mg/5ml, 250mg/5ml, 300mg	Susp / Caps	On Formulary	
Cefixime	Suprax	400mg	Tablet	Prior Authorization	
Cephalexin	Keflex	250mg, 500 mg	Tab / Cap	On Formulary	
Cephalexin	Keflex	125mg/5ml, 250mg/5ml	Suspension	On Formulary	

Therapeutic Subclass: Lincosamides

Clindamycin HCl	Cleocin	150mg, 300mg	Capsule	On Formulary	
Clindamycin Palmitate	Cleocin	75mg/5ml	Suspension	On Formulary	

Therapeutic Subclass: Macrolides

Azithromycin	Zithromax	600mg	Tablet	On Formulary	
Azithromycin	Zithromax	500mg	Tri-Pak	On Formulary	
Azithromycin	Zithromax	250mg	Z-pak	On Formulary	
Azithromycin	Zithromax	100mg/5ml, 200mg/5ml	Suspension	On Formulary	
Azithromycin	Zithromax	1 gram	Pack	On Formulary	
Clarithromycin	Biaxin	500mg	Tablet	Step Therapy	Step Therapy: Requires concomitant amoxicillin and PPI fill. Qty restricted to 14 days supply/year
Erythromycin Base	Ery-Tab	250mg, 333mg, 500mg	Tablet	On Formulary	
Erythromycin Ethylsuccinate	Eryped	200mg/5ml, 400mg	Suspension / Tab	On Formulary	
Erythromycin Stearate	Erythrocin Stearate	250mg, 500mg	Tablet	On Formulary	

Therapeutic Subclass: Miscellaneous Anti-Infectives

Trimethoprim	Trimplex	100mg, 200mg	Tablet	On Formulary	
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Therapeutic Subclass: Nitrofurantoin Derivatives

Nitrofurantoin	Furadantin	25mg/5ml	Suspension	On Formulary	
Nitrofurantoin Macrocrystal	Macrochantin	50mg, 100mg	Capsule	On Formulary	
Nitrofurantoin Monohyd Macro	Macrobid	100mg	Capsule	On Formulary	

Therapeutic Subclass: Penicillins

Amoxicillin	Amoxil	125mg, 250mg, 200mg, 400mg	Chew Tabs	On Formulary	
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GENERIC NAME	BRAND NAME	STRENGTH	FORMULATION	FORMULARY STATUS	NOTE
Amoxicillin	Trimox	125mg/5ml, 250mg/5ml, 200mg/5ml, 400mg/5ml	Suspension	On Formulary	
Amoxicillin	Trimox	250mg, 500mg, 875mg	Tab / Cap	On Formulary	
Amoxicillin Pot Clavulanate	Augmentin	200mg/5ml, 400mg/5ml	Suspension	On Formulary	
Amoxicillin Pot Clavulanate	Augmentin ES	600mg/5ml	Suspension	On Formulary	Quantity Limit: 300ml/Rx; Fill Limit: 1 fill per 30 days
Amoxicillin Pot Clavulanate	Augmentin XR	1000mg	Tablet	On Formulary	Quantity Limit: 40 tablets/Rx; Fill Limit: 1 fill per 30 days
Amoxicillin-Pot Clavulanate	Augmentin	250mg, 500mg, 875mg	Tablet	On Formulary	
Ampicillin	Principen	250mg, 500mg, 125mg/5ml, 250mg/5ml	Cap / Susp	On Formulary	
Dicloxacillin Sodium	Dynapen	250mg, 500mg	Capsule	On Formulary	
Penicillin V Potassium	Veetids	250mg, 500mg	Tablet	On Formulary	
Penicillin V Potassium	Veetids	125mg/5ml, 250mg/5ml	Suspension	On Formulary	

Therapeutic Subclass: Quinolones

Ciprofloxacin	Cipro	250mg, 500mg, 750mg	Tablet	On Formulary	Age Restriction: >=18 yrs
Levofloxacin	Levaquin	250mg, 500mg, 750mg	Tablet	On Formulary	Age Restriction: >=18 yrs

Therapeutic Subclass: Sulfonamides

Erythromycin-Sulfisoxazole	Pediazole	200-600mg/5ml	Suspension	On Formulary	
Sulfisoxazole	Sulfisoxazole	500mg	Tablet	On Formulary	
Sulfisoxazole Acetyl	Gantrisin Pediatric	500mg/5ml	Suspension	On Formulary	
Trimethoprim-Sulfamethoxazole	Bactrim DS	800-160mg	Tablet	On Formulary	
Trimethoprim-Sulfamethoxazole	Septra	200-40mg/5ml, 400-80mg	Susp / Tab	On Formulary	

Therapeutic Subclass: Tetracyclines

Doxycycline Hyclate	Periostat	20mg	Tablet	On Formulary	Quantity Limit: 60 tablets per 30 days; Age Limit >= 18 yrs
Doxycycline Hyclate	Vibramycin	50mg, 100mg	Tab / Cap	On Formulary	
Minocycline Hcl	Minocin	50mg, 100mg	Capsule	On Formulary	
Tetracycline HCl	Sumycin	250mg, 500mg	Capsule	On Formulary	

Therapeutic Subclass: Vitamins

Pyridoxine HCl	Vitamin B6		Tablet	On Formulary	May be dispensed as 100 day supply
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Therapeutic Class: Antineoplastics and Immunosuppressants

Therapeutic Subclass: Antineoplastic Agent

Megestrol Acetate	Megace	20mg, 40mg	Tablet	On Formulary	
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Therapeutic Subclass: Aromatase Inhibitors

Anastrozole	Arimidex	1mg	Tablet	On Formulary	
Letrozole	Femara	2.5mg	Tablet	On Formulary	

Therapeutic Subclass: Immunosuppressants

Cyclosporine Modified	Neoral	25mg, 100mg, 100mg/ml	Cap / Solution	On Formulary	
Mycophenolate Mofetil	Cellcept	250mg, 500mg	Tab / Cap	Prior Authorization	

Therapeutic Subclass: Selective Estrogen Receptor Modulator (SERM)

Tamoxifen	Nolvadex	10mg, 20mg	Tablet	On Formulary	
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GENERIC NAME	BRAND NAME	STRENGTH	FORMULATION	FORMULARY STATUS	NOTE
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Therapeutic Class: Cardiovascular Medications

Therapeutic Subclass: Angiotensin Converting Enzyme Inhibitor Combinations

Benazepril-HCTZ	Lotensin HCT	5-6.25mg, 10-12.5mg, 20-12.5mg, 20-25mg	Tablet	On Formulary	
Captopril-HCTZ	Capozide	25-15mg, 50-15mg, 25-25mg, 50-25mg	Tablet	On Formulary	
Lisinopril-HCTZ	Zestoretic / Prinizide	10-12.5mg, 20-12.5mg, 20-25mg	Tablet	On Formulary	

Therapeutic Subclass: Angiotensin Converting Enzyme Inhibitors

Benazepril HCl	Lotensin	5mg, 10mg, 20mg, 40mg	Tablet	On Formulary	
Captopril	Capoten	12.5mg, 25mg, 50mg, 100mg	Tablet	On Formulary	
Enalapril	Vasotec	2.5mg, 5mg, 10mg, 20mg	Tablet	On Formulary	
Fosinopril	Monopril	10mg, 20mg, 40mg	Tablet	On Formulary	
Lisinopril	Zestril / Prinivil	5mg, 10mg, 20mg, 30mg, 40mg	Tablet	On Formulary	
Quinapril HCl	Accupril	5mg, 10mg, 20mg, 40mg	Tablet	On Formulary	
Ramipril	Altace	1.25mg, 2.5mg, 5mg, 10mg	Capsule	On Formulary	
Trandolapril	Mavik	1mg, 2mg, 4mg	Tablet	On Formulary	

Therapeutic Subclass: Angiotensin Converting Enzyme Inhibitors / Calcium Channel Blocker Combination

Benazepril / Amlodipine	Lotrel	2.5-10mg, 5-10mg, 5-20mg, 5-40mg, 10-20mg, 10-40mg	Capsule	On Formulary	
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Therapeutic Subclass: Angiotensin II Antagonist Combination

Losartan-HCTZ	Hyzaar	50-12.5mg, 100-25mg	Tablet	On Formulary	
Valsartan-Hydrochlorothiazide	Diovan HCT	80-12.5mg, 160-12.5mg, 160-25mg, 320-12.5mg, 320-25mg	Tablet	Step Therapy	Step Therapy: Required use of losartan or losartan HCT in the last 30 days.

Therapeutic Subclass: Angiotensin II Antagonists

Losartan	Cozaar	25mg, 50mg, 100mg	Tablet	On Formulary	
Valsartan	Diovan	40mg, 80mg, 160mg, 320mg	Tablet	Step Therapy	Step Therapy: Required use of losartan or losartan HCT in the last 30 days.

Therapeutic Subclass: Antiadrenergic Agents, Centrally Acting

Clonidine HCl	Catapres	0.1mg, 0.2mg, 0.3mg	Tablet	On Formulary	
Guanabenz	Wytensin	4mg, 8mg	Tablet	On Formulary	
Guanfacine HCl	Tenex	1mg, 2mg	Tablet	On Formulary	
Methyldopa	Aldomet	250mg, 500mg	Tablet	On Formulary	

Therapeutic Subclass: Antiadrenergic Agents, Peripherally Acting

Doxazosin Mesylate	Cardura	1mg, 2mg, 4mg, 8mg	Tablet	On Formulary	
Prazosin HCl	Minipress	1mg, 2mg	Capsule	On Formulary	
Reserpine	Serapsil	0.25mg, 0.1mg	Tablet	On Formulary	
Terazosin HCl	Hytrin	1mg, 2mg, 5mg, 10mg	Capsule	On Formulary	

Therapeutic Subclass: Antiarrhythmic Drugs

Amiodarone HCl	Cordarone	200mg	Tablet	On Formulary	
Flecainide Acetate	Tambocor	50mg, 100mg, 150mg	Tablet	On Formulary	
Mexiletine HCl	Mexitil	150mg, 200mg, 250mg	Capsule	On Formulary	

GENERIC NAME	BRAND NAME	STRENGTH	FORMULATION	FORMULARY STATUS	NOTE
Procainamide HCl	Procanbid	500mg, 1000mg	SR Tablet	On Formulary	
Procainamide HCl	Pronestyl	250mg, 325mg, 500mg	Capsule	On Formulary	
Propafenone HCl	Rythmol	150mg, 225mg, 300mg	Tablet	On Formulary	
Quinidine Gluconate	Quinaglute Dura-Tabs	324mg	SA Tablet	On Formulary	
Quinidine Sulfate	Quinidex Extentabs	300mg	SA Tablet'	On Formulary	
Quinidine Sulfate	Quinidine Sulfate	100mg, 200mg, 300mg	Tablet	On Formulary	

Therapeutic Subclass: Beta Blockers, Beta 1 Specific

Atenolol	Tenormin	25mg, 50mg, 100mg	Tablet	On Formulary	
Atenolol-Chlorthalidone	Tenoretic	50-25mg, 100-25mg	Tablet	On Formulary	
Metoprolol Succinate	Toprol XL	25mg, 50mg, 100mg, 200mg	Tablet	On Formulary	
Metoprolol Tartrate	Lopressor	25mg, 50mg, 100mg	Tablet	On Formulary	

Therapeutic Subclass: Beta Blockers, Non-Selective

Bisoprolol-HCTZ	Ziac	2.5mg, 5mg, 10mg	Tablet	On Formulary	
Carvedilol	Coreg	3.125mg, 6.25mg, 12.5mg, 25mg	Tablet	On Formulary	
Labetalol HCl	Normodyne	100mg, 200mg	Tablet	On Formulary	
Nadolol	Corgard	20mg, 40mg, 80mg, 160mg	Tablet	On Formulary	
Pindolol	Visken	10mg, 20mg	Tablet	On Formulary	
Propranolol HCl	Inderal	10mg, 20mg, 40mg, 60mg, 80mg	Tablet	On Formulary	
Propranolol HCl	Inderal LA	60mg, 80mg, 120mg, 160mg	Capsule	On Formulary	
Sotalol HCl	Betapace	80mg, 120mg, 160mg, 240mg	Tablet	On Formulary	
Sotalol HCl	Betapace AF	80mg, 120mg, 160mg	Tablet	On Formulary	

Therapeutic Subclass: Calcium Antagonists

Amlodipine Besylate	Norvasc	2.5mg, 5mg, 10mg	Tablet	On Formulary	
Diltiazem HCl	Cardizem	30mg, 60mg, 90mg, 120mg	Tablet	On Formulary	
Diltiazem HCl	Cardizem CD	120mg, 180mg, 240mg, 300mg	Capsule	On Formulary	
Diltiazem HCl	Tiazac	120mg, 180mg, 240mg, 300mg, 360mg	Capsule	On Formulary	
Felodipine	Plendil	2.5mg, 5mg, 10mg	Tablet	On Formulary	
Nicardipine HCl	Cardene	20mg, 30mg	Capsule	On Formulary	
Nicardipine HCl	Cardene SR	30mg, 45mg, 60mg	Capsule	On Formulary	
Nifedipine	Adalat CC	30mg, 60mg, 90mg	Tablet	On Formulary	
Nifedipine	Procardia XL	30mg, 60mg, 90mg	Tablet	On Formulary	
Nisoldipine	Sular	10mg, 20mg, 30mg, 40mg	Tablet	On Formulary	
Verapamil HCl	Calan	40mg, 80mg, 120mg	Tablet	On Formulary	
Verapamil HCl	Calan SR	120mg, 180mg, 240mg	Tablet	On Formulary	

Therapeutic Subclass: Carbonic Anhydrase Inhibitors

Acetazolamide	Diamox	125mg, 250mg	Tab / Cap	On Formulary	
Methazolamide	Neptazane	25mg, 50mg	Tablet	On Formulary	

GENERIC NAME	BRAND NAME	STRENGTH	FORMULATION	FORMULARY STATUS	NOTE
<i>Therapeutic Subclass: Cardiac Glycosides</i>					
Digoxin	Lanoxin	0.125mg, 0.25mg	Tablet	On Formulary	May be dispensed as 100 day supply
<i>Therapeutic Subclass: Cholesterol Lowering Agents, HMG-CoA Reductase</i>					
Atorvastatin Calcium	Lipitor	40mg, 80mg	Tablet	On Formulary	
Lovastatin	Mevacor	10mg, 20mg, 40mg	Tablet	On Formulary	Quantity Limit: One (1) tablet per day
Pravastatin	Pravachol	10mg, 20mg, 40mg, 80mg	Tablet	On Formulary	
Simvastatin	Zocor	5mg, 10mg, 20mg, 40mg	Tablet	On Formulary	Quantity Limit: One (1) tablet per day
<i>Therapeutic Subclass: Cholesterol Lowering Agents, Other Cholesterol Lowering Agents</i>					
Cholestyramine	Questran	4g	Powder	On Formulary	Dispense can only
Cholestyramine	Questran Light	4g	Powder	On Formulary	Dispense can only
Colestipol HCl	Colestid	1g	Tab, Granules, Packets	On Formulary	
Ezetimibe	Zetia	10mg	Tablet	Prior Authorization	
Niacin (Antihyperlipidemic)	Niacin	50mg, 100mg, 250mg, 500mg	Tablet	On Formulary	May be dispensed as 100 day supply
<i>Therapeutic Subclass: Diuretics, Loop Diuretics</i>					
Bumetanide	Bumex	0.5mg, 1mg, 2mg	Tablet	On Formulary	
Furosemide	Lasix	20mg, 40mg, 80mg	Tablet	On Formulary	May be dispensed as 100 day supply
<i>Therapeutic Subclass: Diuretics, Potassium Sparing Diuretics</i>					
Amiloride	Midamor	5mg	Tablet	On Formulary	
Amiloride-HCTZ	Moduretic	5-50mg	Tablet	On Formulary	
Spironolactone	Aldactone	25mg, 50mg, 100mg	Tablet	On Formulary	
Spironolactone-HCTZ	Aldactazide	25-25mg	Tablet	On Formulary	
Triamterene-HCTZ	Dyazide	37.5-25mg, 50-25mg	Capsule	On Formulary	
Triamterene-HCTZ	Maxzide	25-37.5mg, 50-75mg	Tablet	On Formulary	
<i>Therapeutic Subclass: Diuretics, Thiazides and Related Diuretics</i>					
Chlorothiazide	Diuril	250mg, 500mg	Tablet	On Formulary	
Chlorthalidone	Hygroton	25mg, 50mg, 100mg	Tablet	On Formulary	
Hydrochlorothiazide	HydroDiuril	25mg, 50mg	Tablet	On Formulary	May be dispensed as 100 day supply
Hydrochlorothiazide	Microzide	12.5mg	Capsule	On Formulary	
Indapamide	Lozol	1.25mg, 2.5mg	Tablet	On Formulary	
Methyclothiazide	Enduron	2.5mg, 5mg	Tablet	On Formulary	
Metolazone	Zaroxolyn	2.5mg, 5mg, 10mg	Tablet	On Formulary	
<i>Therapeutic Subclass: Lipotropics</i>					
Fenofibrate (micronized)	Lofibra	54mg, 67mg, 134mg, 160mg, 200mg	Tab / Cap	Step Therapy	Step Therapy: Requires use of a statin for 60 days in the last 120 days
Gemfibrozil	Lopid	600mg	Tablet	On Formulary	
<i>Therapeutic Subclass: Nitrates</i>					
Isosorbide Dinitrate	Isordil	2.5mg, 5mg, 10mg, 20mg, 30mg, 40mg	Tablet	On Formulary	
Isosorbide Mononitrate	Imdur	30mg, 60mg, 120mg	Tablet	On Formulary	

GENERIC NAME	BRAND NAME	STRENGTH	FORMULATION	FORMULARY STATUS	NOTE
Nitroglycerin	Nitro-Bid	2%	Ointment	On Formulary	
Nitroglycerin	Nitro-Dur	0.1mg/hr, 0.2mg/hr, 0.3mg/hr, 0.4mg/hr, 0.6mg/hr, 0.8mg/hr	Patch	On Formulary	
Nitroglycerin	Nitroglyn	2.5mg, 6.5mg, 9mg	Capsule	On Formulary	
Nitroglycerin	Nitrolingual	0.4mg/Dose	Aerosol Soln	On Formulary	
Nitroglycerin	Nitrostat	0.3mg, 0.4mg, 0.6mg	Tablet	On Formulary	
Nitroglycerin	Transderm-Nitro	0.1mg/hr, 0.2mg/hr, 0.4mg/hr, 0.6mg/hr	Patch	On Formulary	

Therapeutic Subclass: Pulmonary Hypertension

Sildenafil Citrate	Revatio	20mg	Tablet	Non-Formulary	Not a covered benefit for ED.
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Therapeutic Subclass: Vasodilators

Hydralazine HCl	Apresoline	10mg, 25mg, 50mg, 100mg	Tablet	On Formulary	
Minoxidil	Loniten	2.5mg, 10mg	Tablet	On Formulary	

Therapeutic Class: Central Nervous System

Therapeutic Subclass: Antianxiety Drugs

Alprazolam	Xanax	0.25mg, 0.5mg, 1mg, 2mg	Tablet	On Formulary	Quantity Limit: 100 tablets in 30 days
Buspirone HCl	Buspar	5mg, 10mg, 15mg, 30mg	Tablet	On Formulary	
Diazepam	Valium	2mg, 5mg, 10mg	Tablet	On Formulary	Quantity Limit: 100 tablets in 30 days
Lorazepam	Ativan	0.5mg, 1mg, 2mg	Tablet	On Formulary	Quantity Limit: 100 tablets in 30 days
Oxazepam	Serax	10mg, 15mg, 30mg	Capsule	On Formulary	

Therapeutic Subclass: Antidepressants

Amitriptyline HCl	Elavil	10mg, 25mg, 50mg, 75mg, 100mg	Tablet	On Formulary	
Amoxapine	Asendin	25mg, 50mg, 100mg, 150mg	Tablet	On Formulary	
Bupropion HCl	Wellbutrin	75mg, 100mg	Tablet	On Formulary	
Bupropion SA	Wellbutrin SR	100mg, 150mg, 200mg	Tablet	On Formulary	
Bupropion XL	Wellbutrin XL	150mg, 300mg	Tablet	On Formulary	Age Limit: >= 18 yrs; Qty limit: #30 per 30 days
Citalopram	Celexa	10mg, 20mg, 40mg	Tablet	On Formulary	Quantity Limit: 30 tablets per 30 days
Clomipramine HCl	Anafranil	25mg, 50mg, 75mg	Tablet	Prior Authorization	
Desipramine HCl	Norpramin	10mg, 25mg, 50mg, 75mg, 100mg, 150mg	Tablet	On Formulary	
Doxepin HCl	Sinequan	10mg, 25mg, 50mg, 75mg, 100mg, 150mg	Capsule	On Formulary	
Fluoxetine HCl	Prozac	10mg, 20mg	Tab, Cap	On Formulary	Quantity Limit: # 30 (10mg) per 30 days / #90 (20mg) per 30 days
Fluvoxamine	Luvox	25mg, 50mg, 100mg	Tablet	On Formulary	Age Limit: >= 8 yrs
Imipramine HCl	Tofranil	10mg, 25mg, 50mg	Tablet	On Formulary	
Mirtazapine	Remeron	15mg, 30mg, 45mg	Tablet / Sol Tabs	On Formulary	Age Limit >= 18 yrs; Qty Limit: #30 per 30 days
Nortriptyline HCl	Pamelor	10mg, 25mg, 50mg, 75mg	Capsule	On Formulary	
Paroxetine HCl	Paxil	10mg, 20mg, 30mg, 40mg	Tablet	On Formulary	Quantity Limit: 30 tablets per 30 days
Sertraline HCl	Zoloft	25mg, 50mg, 100mg	Tablet	On Formulary	Quantity Limit: 60 tablets per 30 days
Trazodone HCl	Desyrel	50mg, 100mg, 150mg	Tablet	On Formulary	

GENERIC NAME	BRAND NAME	STRENGTH	FORMULATION	FORMULARY STATUS	NOTE
Venlafaxine HCl	Effexor	25mg, 37.5mg, 50mg, 75mg, 100mg	Tablet	On Formulary	Quantity Limit: 60 tablets per 30 days
Venlafaxine HCl	Effexor XR	37.5mg, 75mg, 150mg	Capsule	On Formulary	Quantity Limit: 30 capsules per 30 days

Therapeutic Subclass: Antimania Drugs

Lithium Carbonate	Eskalith	150mg, 300mg	Tab/Cap	On Formulary	MediCal carve out
Lithium Carbonate	Eskalith CR	450mg	Tablet	On Formulary	MediCal carve out
Lithium Carbonate	Lithonate	300mg	Tablet	On Formulary	MediCal carve out

Therapeutic Subclass: Antipsychotics

Aripiprazole	Abilify	10mg, 15mg, 20mg, 30mg	Tablet	On Formulary	MediCal carve out
Benzotropine Mesylate	Cogentin	0.5mg, 1mg, 2mg	Tablet	On Formulary	MediCal carve out
Biperiden Lactate	Akineton	2mg	Tablet	On Formulary	MediCal carve out
Chlorpromazine HCl	Thorazine	10mg, 25mg, 50mg, 100mg, 200mg	Tablet	On Formulary	MediCal carve out
Clozapine	Clozaril	25mg, 100mg	Tablet	On Formulary	MediCal carve out
Fluphenazine HCl	Prolixin	1mg, 2.5mg, 5mg, 10mg	Tablet	On Formulary	MediCal carve out
Haloperidol	Haldol	0.5mg, 1mg, 2mg, 5mg, 10mg	Tablet	On Formulary	MediCal carve out
Isocarboxazid	Marplan	10mg	Tablet	On Formulary	MediCal carve out
Loxapine HCl	Loxitane	5mg, 10mg, 25mg, 50mg	Capsule	On Formulary	MediCal carve out
Loxapine Succinate	Loxitane	5mg, 10mg, 25mg, 50mg	Capsule	On Formulary	MediCal carve out
Mesoridazine Besylate	Serentil	10mg, 25mg, 50mg, 100mg		On Formulary	MediCal carve out
Molindone HCl	Moban	5mg, 10mg, 25mg, 50mg, 100mg	Tablet	On Formulary	MediCal carve out
Olanzapine	Zyprexa	2.5mg, 5mg, 7.5mg, 10mg, 15mg, 20mg	Tablet	On Formulary	MediCal carve out
Olanzapine Fluoxetine HCl	Symbyax	6-25mg, 6-50mg, 12-25mg, 12-50mg	Capsule	On Formulary	MediCal carve out
Perphenazine	Trilafon	2mg, 4mg, 8mg, 16mg	Tablet	On Formulary	MediCal carve out
Pimozide	Orap	1mg, 2mg	Tablet	On Formulary	MediCal carve out
Quetiapine Fumarate	Seroquel	25mg, 100mg, 200mg, 300mg	Tablet	On Formulary	MediCal carve out
Risperidone	Risperdal	0.25mg, 0.5mg, 1mg, 2mg, 3mg, 4mg	Tablet	On Formulary	MediCal carve out
Risperidone Micospheres	Risperdal Consta	25mg/2ml, 37.5mg/2ml, 50mg/2ml	Syringe	On Formulary	MediCal carve out
Thioridazine HCl	Mellaril	10mg, 25mg, 50mg, 100mg, 150mg, 200mg	Tablet	On Formulary	MediCal carve out
Thiothixene HCl	Navane	1mg, 2mg, 5mg, 10mg, 20mg	Capsule	On Formulary	MediCal carve out
Trifluoperazine HCl	Stelazine	1mg, 2mg, 5mg, 10mg	Tablet	On Formulary	MediCal carve out
Triflupromazine HCl	Vesprin			On Formulary	MediCal carve out
Ziprasidone HCl	Geodon	20mg, 40mg, 60mg, 80mg	Capsule	On Formulary	MediCal carve out
Ziprasidone Mesylate	Geodon	20mg	Vial	On Formulary	MediCal carve out

Therapeutic Subclass: Cholinesterase Inhibitors

Donepezil	Aricept ODT	5mg, 10mg	Tablet	On Formulary	
Donepezil Hydrochloride	Aricept	5mg, 10mg	Tablet	On Formulary	

Therapeutic Subclass: CNS Non-Stimulants

Atomoxetine	Strattera	10mg, 18mg, 25mg, 40mg, 60mg	Capsule	Prior Authorization	
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GENERIC NAME	BRAND NAME	STRENGTH	FORMULATION	FORMULARY STATUS	NOTE
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Therapeutic Subclass: CNS Stimulants

Amphetamine/Dextroamphetamine	Adderall	5mg, 7.5mg, 10mg, 12.5mg, 15mg, 20mg, 30mg	Tablet	On Formulary	Limited to ages 3-16 only
Amphetamine/Dextroamphetamine	Adderall XR	5mg, 10mg, 15mg, 20mg, 25mg, 30mg	Capsule	Step Therapy	Step Therapy: Trial of Ritalin / Dexedrine / Adderall. Limited to ages 3-16. Quantity Limit: One (1) capsule per day.
Dextroamphetamine Sulfate	Dexedrine	5mg, 10mg, 15mg	Tab/Cap	On Formulary	Limited to ages 3-16 only
Methylphenidate HCl	Concerta	18mg, 27mg, 36mg, 54mg	Tablet	Step Therapy	Step Therapy: Trial of Ritalin / Dexedrine / Adderall. Limited to ages 6-16. Quantity Limit: One (1) tablet per day.
Methylphenidate HCl	Metadate ER	10mg, 20mg	Tablet	Step Therapy	Step Therapy: Trial of Ritalin / Dexedrine / Adderall. Limited to ages 6-16 only; Quantity Limit: One (1) tablet per day.
Methylphenidate HCl	Ritalin	5mg, 10mg, 20mg	Tablet	On Formulary	Limited to ages 6-16 only
Methylphenidate HCl	Ritalin SR	20mg	Tablet	Step Therapy	Step Therapy: Trial of Ritalin / Dexedrine / Adderall. Limited to ages 6-16 only; Quantity Limit: One (1) tablet per day.

Therapeutic Subclass: Miscellaneous

Milnacipran	Savella	12.5mg, 25mg, 50mg, 100mg	Tablet	Prior Authorization	
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Therapeutic Subclass: Monoamine Oxidase Inhibitors

Phenelzine Sulfate	Nardil	15mg	Tablet	On Formulary	MediCal carve out
Tranlycypromine Sulfate	Parnate	10mg		On Formulary	MediCal carve out

Therapeutic Subclass: Other Central Nervous System Drugs

Disulfiram	Antabuse	250mg, 500mg	Tablet	On Formulary	
Ergoloid Mesylates	Hydergine	0.5mg, 1mg		On Formulary	

Therapeutic Subclass: Sedatives and Hypnotics

Flurazepam HCl	Dalmane	15mg, 30mg	Capsule	On Formulary	
Temazepam	Restoril	7.5mg, 15mg, 30mg	Capsule	On Formulary	
Triazolam	Halcion	0.125mg, 0.25mg	Tablet	On Formulary	Quantity Limit: Fourteen (14) tablets in 30 days
Zolpidem Tartrate	Ambien	5mg, 10mg	Tablet	On Formulary	

Therapeutic Subclass: Smoking Cessation Products

Bupropion SR	Zyban	150mg	Tablet	Prior Authorization	Smoking Cessation Certificate Required
Nicotine	Nicoderm CQ	7mg/24hrs, 14mg/24hrs, 21mg/24hrs	Patch 24 HR	Prior Authorization	Smoking Cessation Certificate Required
Nicotine Inhaler	Nicotrol	10mg	Cartridge	Prior Authorization	Smoking Cessation Certificate Required
Nicotine Nasal	Nicotrol NS	10mg/ml	Spray	Prior Authorization	Smoking Cessation Certificate Required
Nicotine Polacrilex	Nicorette	2mg, 4mg	Gum	Prior Authorization	Smoking Cessation Certificate Required
Varenicline Tartrate	Chantix	0.5mg, 1mg	Tablet	Prior Authorization	Smoking Cessation Certificate Required

Therapeutic Class: Dermatologicals

Therapeutic Subclass: Anorectals

Hydrocortisone (Intrarectal)	Cortenema	100mg/60ml	Enema	On Formulary	
Hydrocortisone Acetate (Rectal)	Anusol-HC	2.5%	Cream	On Formulary	
Hydrocortisone Acetate-Pramoxine	Proctofoam HC	1-1%	Foam	On Formulary	
Pramoxine-HC	ProctoCream-HC	1%	Cream	On Formulary	
Pramoxine-HC	ProctoCream-HC 2.5%	2.5%	Cream	On Formulary	

GENERIC NAME	BRAND NAME	STRENGTH	FORMULATION	FORMULARY STATUS	NOTE
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Therapeutic Subclass: Antipsoriatics

Anthralin	Drithocrema	1%	Cream	On Formulary	
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Therapeutic Subclass: Antiseborrheic Agents

Selenium Sulfide	Selsun	1%, 2.5%	Shampoo	On Formulary	
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Therapeutic Subclass: Keratolytics

Benzoyl Peroxide	Desquam-E	2.5%, 5%, 10%	Gel	On Formulary	
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Benzoyl Peroxide	Desquam-X	2.5%, 4%, 5%, 10%	Liquid	On Formulary	
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Benzoyl Peroxide-Erythromycin	Benzamycin	3-5%	Gel	On Formulary	
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Podofilox	Condylox	0.5%	Solution	On Formulary	
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Therapeutic Subclass: Miscellaneous Topicals

Aluminum Chloride	Drysol	20%	Solution	On Formulary	
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Ammonium Lactate	Lac-Hydrin	12%	Cream / Lotion	On Formulary	
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Therapeutic Subclass: Scabicides and Pediculocides

Permethrin	Elimite	5%	Cream	On Formulary	
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Permethrin	Nix Creme Rinse	1%	Shampoo	On Formulary	
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Piperonyl butoxide/pyrethrins	Rid	4-0.33%	Shampoo	On Formulary	
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Therapeutic Subclass: Topical Antibiotic

Clindamycin Phosphate(Topical)	Cleocin-T	1%	Solution, Lotion, Gel, Swabs	On Formulary	
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Erythromycin	Erycette	2%	Solution	On Formulary	
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Erythromycin	T-Stat	2%	Pledget	On Formulary	
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Therapeutic Subclass: Topical Antifungals

Ciclopirox Olamine	Loprox	0.77%	Cream	Prior Authorization	
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Clotrimazole	Lotrimin	1%	Cream / Solution	On Formulary	
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Ketoconazole	Nizoral	2%	Shampoo / Cream	On Formulary	
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Nystatin (Topical)	Mycostatin	100MU/G	Cream/Ointment	On Formulary	
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Terbinafine	Lamisil AT	1%	Cream, Spray	On Formulary	
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Tolnaftate	Tinactin	1%	Cream	On Formulary	
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Therapeutic Subclass: Topical Anti-Infectives

Bacitracin	Bacitracin	500U/G	Cream, Ointment	On Formulary	
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Gentamicin Sulfate (Topical)	Garamycin	0.1%	Cream	On Formulary	
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Mupirocin Calcium	Bactroban	2%	Cream / Ointment	Prior Authorization	
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Neomycin-Polymyxin B-Bacitracin	Neosporin		Cream	On Formulary	
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Polymyxin B-Bacitracin	Polysporin		Cream	On Formulary	
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Silver Sulfadiazine	Silvadene	1%	Cream	On Formulary	
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Therapeutic Subclass: Topical Antipruritics

Calamine, Calamine Clear			Lotion	On Formulary	
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Therapeutic Subclass: Topical Corticosteroids in Combination

GENERIC NAME	BRAND NAME	STRENGTH	FORMULATION	FORMULARY STATUS	NOTE
Nystatin-Triamcinolone	Mycolog II	100000-0.1	Cream	On Formulary	
<i>Therapeutic Subclass: Topical Corticosteroids: Group I (Very High Potency)</i>					
Aug Betamethasone Dipropionate	Diprolene	0.05%	Ointment, Lotion	On Formulary	
Clobetasol Propionate	Temovate	0.05%	Cream/Oint/Gel/Sol'n	On Formulary	
<i>Therapeutic Subclass: Topical Corticosteroids: Group II (High Potency)</i>					
Betamethasone Dipropionate	Diprosone	0.05%, 0.1%	Cream/Ointment/Lotion	On Formulary	
Betamethasone Valerate	Valisone	0.1%	Cream	On Formulary	
Desoximetasone	Topicort	0.25%	Cream	On Formulary	
Fluocinonide	Lidex	0.05%	Cream/Oint/Sol'n	On Formulary	
<i>Therapeutic Subclass: Topical Corticosteroids: Group III (Medium Potency)</i>					
Desoximetasone	Topicort LP	0.05%	Cream	On Formulary	
Fluocinolone Acetonide	Synalar	0.025%, 0.01%	Cream	On Formulary	
Hydrocortisone Valerate	Westcort	0.2%	Cream	On Formulary	
Mometasone Furoate	Elocon	0.1%	Ointment	On Formulary	
Mometasone Furoate	Elocon	0.1%	Cream	On Formulary	
Prednicarbate	Dermatop	0.1%	Cream	On Formulary	
Triamcinolone Acetonide (Top)	Kenalog	0.025%, 0.1%, 0.5%	Cream	On Formulary	
<i>Therapeutic Subclass: Topical Corticosteroids: Group IV (Low Potency)</i>					
Desonide	Desowen	0.05%	Lotion	On Formulary	
Desonide	Tridesilon	0.05%	Cream / Ointment	On Formulary	
Hydrocortisone (Topical)	Hytone	1%, 2.5%	Cream / Lotion	On Formulary	
<i>Therapeutic Subclass: Topical Immunomodulator</i>					
Pimecrolimus	Elidel	0.1%	Cream	Prior Authorization	
<i>Therapeutic Subclass: Topical Rosacea Agents</i>					
Metronidazole	MetroCream	0.75%	Cream	On Formulary	
Metronidazole	MetroGel	0.75%, 1%	Gel	On Formulary	
<i>Therapeutic Subclass: Vitamin A Derivatives</i>					
Tretinoin	Retin A	0.025%, 0.05%, 0.1%	Cream / Gel	On Formulary	Restricted for ages 18 years and younger

Therapeutic Class: Ear, Nose and Throat Medications

Therapeutic Subclass: Corticosteroids, Nasal Inhaled

Flunisolide	Nasalide	0.025%	Spray	On Formulary	
Fluticasone Acetate	Flonase	50mcg	Spray	On Formulary	

Therapeutic Subclass: Ear Preparations, Anti-infectives

Acetic Acid / Aluminium Acetate	Domeboro	2%	Drops	On Formulary	
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Therapeutic Subclass: Miscellaneous Nasal Products

Ipratropium Bromide	Atrovent	21mcg, 42mcg	Spray	On Formulary	
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Therapeutic Subclass: Miscellaneous Otic Products

GENERIC NAME	BRAND NAME	STRENGTH	FORMULATION	FORMULARY STATUS	NOTE
Acetic Acid	VoSol	2%	Drops	On Formulary	
Benzocaine-Antipyrine	Auralgan	5.4-1.4%	Drops	On Formulary	
Benzo-Phenyleph-Antipyrine	Tympagesic	0.25-5-5%	Drops	On Formulary	
Carbamide Peroxide (Otic)	Debrox	6.5%	Drops	On Formulary	
Hydrocortisone-Acetic Acid	VoSol-HC	2-1%	Drops	On Formulary	

Therapeutic Subclass: Nasal Antihistamine

Azelastine	Astelín Nasal	137mcg	Spray	On Formulary	
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Therapeutic Subclass: Nasal Mast Cell Stabilizers Agents

Cromolyn Sodium	NasalCrom	40mg/ml	Spray	On Formulary	
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Therapeutic Subclass: Otic Anti-Infectives

Ofloxacin	Floxin	0.3%	Drops	On Formulary	Fill Limit: 1 fill per 30 days
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Therapeutic Subclass: Otic Steroid/Anti-Infective Combinations

Neomycin-Polymyxin-HC (Otic)	Cortisporin	3.5-10M-1	Susp / Solution	On Formulary	
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Therapeutic Subclass: Throat Medications

Chlorhexidine Gluconate	Peridex	1.2mg/ml	Rinse	On Formulary	
Clotrimazole	Mycelex	10mg	Troche	On Formulary	
Lidocaine HCl	Xylocaine Viscous		Solution	On Formulary	
Nystatin	Mycostatin		Lozenge	On Formulary	
Nystatin	Mycostatin		Suspension	On Formulary	
Triamcinolone Acetonide	Kenalog in Orabase		Paste	On Formulary	

Therapeutic Class: Electrolyte regulation

Therapeutic Subclass: Electrolyte Depletors

Calcium Acetate	Phoslo	667mg	Tabs / Caps	On Formulary	
Lanthanum	Fosrenol	250mg, 500mg, 750mg, 1000mg	Chew Tabs	Prior Authorization	
Sodium Polystyrene Sulfonate	Kayexalate	15g/60ml	Suspension	On Formulary	Quantity limit: 240ml per 30 days

Therapeutic Class: Endocrine Medications

Therapeutic Subclass: Antithyroid Drugs

Methimazole	Tapazole	5mg, 10mg	Tablet	On Formulary	
Propylthiouracil	Propylthiouracil	50mg	Tablet	On Formulary	

Therapeutic Subclass: Contraceptives, Biphasic Oral Contraceptives

Desogestrel-Ethinyl Estradiol	Mircette		Tablet	On Formulary	May be dispensed as a three (3) months supply
Desogestrel-Ethinyl Estradiol	Ortho-Cept (28)	0.15-0.03mg	Tablet	On Formulary	May be dispensed as a three (3) months supply
Norethin-Eth Estrad Biphasic	Ortho-Novum 10/11 (21)		Tablet	On Formulary	May be dispensed as a three (3) months supply
Norethin-Eth Estrad Biphasic	Ortho-Novum 10/11 (28)		Tablet	On Formulary	May be dispensed as a three (3) months supply

Therapeutic Subclass: Contraceptives, Monophasic Oral Contraceptives

Ethinodiol-Ethinyl Estradiol	Demulen 1/35		Tablet	On Formulary	May be dispensed as a three (3) months supply
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GENERIC NAME	BRAND NAME	STRENGTH	FORMULATION	FORMULARY STATUS	NOTE
Ethinodiol-Ethinyl Estradiol	Demulen 1/50		Tablet	On Formulary	May be dispensed as a three (3) months supply
Levonorgestrel-Ethinyl Estrad	Alesse (21)		Tablet	On Formulary	May be dispensed as a three (3) months supply
Levonorgestrel-Ethinyl Estrad	Alesse (28)		Tablet	On Formulary	May be dispensed as a three (3) months supply
Levonorgestrel-Ethinyl Estrad	Nordette (21)		Tablet	On Formulary	May be dispensed as a three (3) months supply
Levonorgestrel-Ethinyl Estrad	Nordette (28)		Tablet	On Formulary	May be dispensed as a three (3) months supply
Norethin Ace-Eth Estrad-FE	Loestrin Fe 1.5/30		Tablet	On Formulary	May be dispensed as a three (3) months supply
Norethin Ace-Eth Estrad-FE	Loestrin Fe 1/20		Tablet	On Formulary	May be dispensed as a three (3) months supply
Norethindrone Acet-Ethinyl Est	Loestrin 1.5/30 (21)		Tablet	On Formulary	May be dispensed as a three (3) months supply
Norethindrone Acet-Ethinyl Est	Loestrin 1/20 (21)		Tablet	On Formulary	May be dispensed as a three (3) months supply
Norethindrone-Eth Estradiol	Modicon (21)		Tablet	On Formulary	May be dispensed as a three (3) months supply
Norethindrone-Eth Estradiol	Modicon (28)		Tablet	On Formulary	May be dispensed as a three (3) months supply
Norethindrone-Eth Estradiol	Ortho-Novum 1/35 (21)		Tablet	On Formulary	May be dispensed as a three (3) months supply
Norethindrone-Eth Estradiol	Ortho-Novum 1/35 (28)		Tablet	On Formulary	May be dispensed as a three (3) months supply
Norethindrone-Eth Estradiol	Ovcon-35 (21)		Tablet	On Formulary	May be dispensed as a three (3) months supply
Norethindrone-Eth Estradiol	Ovcon-35 (28)		Tablet	On Formulary	May be dispensed as a three (3) months supply
Norethindrone-Eth Estradiol	Ovcon-50		Tablet	On Formulary	May be dispensed as a three (3) months supply
Norethindrone-Mestranol	Ortho-Novum 1/50 (21)		Tablet	On Formulary	May be dispensed as a three (3) months supply
Norethindrone-Mestranol	Ortho-Novum 1/50 (28)		Tablet	On Formulary	May be dispensed as a three (3) months supply
Norgestimate-Eth Estradiol	Ortho-Cyclen (21)		Tablet	On Formulary	May be dispensed as a three (3) months supply
Norgestimate-Eth Estradiol	Ortho-Cyclen (28)		Tablet	On Formulary	May be dispensed as a three (3) months supply
Norgestrel-Ethinyl Estradiol	Lo/Ovral (21)		Tablet	On Formulary	May be dispensed as a three (3) months supply
Norgestrel-Ethinyl Estradiol	Lo/Ovral (28)		Tablet	On Formulary	May be dispensed as a three (3) months supply
Norgestrel-Ethinyl Estradiol	Ovral (21)		Tablet	On Formulary	May be dispensed as a three (3) months supply
Norgestrel-Ethinyl Estradiol	Ovral (28)		Tablet	On Formulary	May be dispensed as a three (3) months supply

Therapeutic Subclass: Contraceptives, Other Contraceptive Devices

Condoms - Female	Generic			On Formulary	
Condoms - Male	Generic			On Formulary	
Diaphragms	Ortho Diaphragm All-Flex 55			On Formulary	
Diaphragms	Ortho Diaphragm All-Flex 60			On Formulary	
Diaphragms	Ortho Diaphragm All-Flex 65			On Formulary	
Diaphragms	Ortho Diaphragm All-Flex 70			On Formulary	
Diaphragms	Ortho Diaphragm All-Flex 75			On Formulary	
Diaphragms	Ortho Diaphragm All-Flex 80			On Formulary	
Diaphragms	Ortho Diaphragm All-Flex 85			On Formulary	
Diaphragms	Ortho Diaphragm All-Flex 90			On Formulary	
Diaphragms	Ortho Diaphragm All-Flex 95			On Formulary	

Therapeutic Subclass: Contraceptives, Other Intravaginal Contraceptive Devices

GENERIC NAME	BRAND NAME	STRENGTH	FORMULATION	FORMULARY STATUS	NOTE
Etonogestrel/Ethinyl Estradiol	Nuvaring	0.12-0.015	Vag Ring	Step Therapy	Step Therapy: Requires trial of oral contraceptives in past 90 days
Nonoxynol-9	Nonoxynol-9		Cream/Jelly	On Formulary	
Nonoxynol-9	Nonoxynol-9		Foam	On Formulary	
<i>Therapeutic Subclass: Contraceptives, Other Transdermal Contraceptive Devices</i>					
Norelgestromin-Eth Estradiol	Ortho Evra	150mcg-20mcg/hr	Patch	On Formulary	May be dispensed as a three (3) months supply
<i>Therapeutic Subclass: Contraceptives, Progestin Only Oral Contraceptives</i>					
Norethindrone (Contraceptive)	Ortho Micronor		Tablet	On Formulary	May be dispensed as a three (3) months supply
Norgestrel	Ovrette		Tablet	On Formulary	May be dispensed as a three (3) month supply
<i>Therapeutic Subclass: Contraceptives, Triphasic Oral Contraceptives</i>					
Levonorg-Eth Estrad Triphasic	Triphasil (21)		Tablet	On Formulary	May be dispensed as a three (3) months supply
Levonorg-Eth Estrad Triphasic	Triphasil (28)		Tablet	On Formulary	May be dispensed as a three (3) months supply
Norethin-Eth Estrad Triphasic	Estrostep Fe		Tablet	On Formulary	May be dispensed as a three (3) months supply
Norethin-Eth Estrad Triphasic	Ortho-Novum 7/7/7 (21)		Tablet	On Formulary	May be dispensed as a three (3) months supply
Norethin-Eth Estrad Triphasic	Ortho-Novum 7/7/7 (28)		Tablet	On Formulary	May be dispensed as a three (3) months supply
Norgestimate-Ethinyl Estradiol	Ortho Tri-Cyclen (21)		Tablet	On Formulary	May be dispensed as a three (3) months supply
Norgestimate-Ethinyl Estradiol	Ortho Tri-Cyclen (28)		Tablet	On Formulary	May be dispensed as a three (3) months supply
<i>Therapeutic Subclass: Contraceptives, Triphasic Oral Contraceptives</i>					
Norethin-Eth Estrad Triphasic	Tri-Norinyl		Tablet	On Formulary	May be dispensed as a three (3) months supply
<i>Therapeutic Subclass: Diabetic Supplies</i>					
Insulin Syringes (Disposable)	Insulin Syringes (Disposable)		Syringe	On Formulary	
Test strips	Freestyle Test Strips		Strip	On Formulary	
<i>Therapeutic Subclass: Endometriosis Therapy</i>					
Nafarelin Acetate	Synarel			On Formulary	
<i>Therapeutic Subclass: Estrogens</i>					
Estrogens Conjugated	Premarin	0.3mg, 0.45mg, 0.625mg, 0.9mg, 1.25mg, 2.5mg	Tablet	On Formulary	
<i>Therapeutic Subclass: Estrogens/Progestin Combinations</i>					
Conj Estrog-Medroxyprogesterone Ace	Premphase		Tablet	On Formulary	
Conj Estrog-Medroxyprogesterone Ace	Prempro	0.625-2.5mg, 0.625-5.0mg, 0.45-1.5mg, 0.3-1.5mg	Tablet	On Formulary	
<i>Therapeutic Subclass: Glucagon</i>					
Glucagon	Glucagon Kit		Kit	On Formulary	
<i>Therapeutic Subclass: Insulins</i>					
Insulin glargine	Lantus		Vial	On Formulary	
Insulin Isophane Human	Humulin N		Vial	On Formulary	
Insulin Lispro (Human)	Humalog		Vial	On Formulary	
Insulin Lispro (Human)	Humalog Mix 75/25		Vial	On Formulary	
Insulin Reg & Isophane (Human)	Humulin 50/50		Vial	On Formulary	

GENERIC NAME	BRAND NAME	STRENGTH	FORMULATION	FORMULARY STATUS	NOTE
Insulin Reg & Isophane (Human)	Humulin 70/30		Vial	On Formulary	
Insulin Regular Human	Humulin R		Vial	On Formulary	
Insulin Zinc Extended Human	Humulin U		Vial	On Formulary	
Insulin Zinc Human	Humulin L		Vial	On Formulary	

Therapeutic Subclass: Oral Hypoglycemics

Glimepiride	Amaryl	1mg, 2mg, 4mg, 8mg	Tablet	On Formulary	
Glipizide	Glucotrol	5mg, 10mg	Tablet	On Formulary	May be dispensed as 100 day supply
Glipizide ER	Glucotrol XL	2.5mg, 5mg, 10mg	Tablet	On Formulary	
Glyburide	Micronase	1.25mg, 2.5mg, 5mg	Tablet	On Formulary	May be dispensed as 100 day supply
Glyburide-Metformin	Glucovance	1.25/250mg, 2.5/500mg, 5/500mg	Tablet	On Formulary	
Metformin ER	Glucophage XR	500mg, 750mg	Tablet	On Formulary	
Metformin HCl	Glucophage	500mg, 850mg, 1000mg	Tablet	On Formulary	
Nateglinide	Starlix	60mg, 120mg	Tablet	Step Therapy	Step Therapy: Requires use of Metformin or a Sulfonylurea within last 90 days
Pioglitazone	Actos	15mg, 30mg, 45mg	Tablet	Step Therapy	Step Therapy: Requires concomitant use of Sulfonylurea or Metformin
Rosiglitazone	Avandia	2mg, 4mg, 8mg	Tablet	Prior Authorization	
Tolbutamide	Orinase	500mg	Tablet	On Formulary	

Therapeutic Subclass: Other Endocrine Drugs

Alendronate Sodium	Fosamax	5mg, 35mg, 70mg	Tablet	On Formulary	Age restriction: PA required < 65 yrs of age
Alendronate Sodium / Vitamin D	Fosamax Plus D	70-2800mg	Tablet	Prior Authorization	
Calcitonin (Salmon)	Miacalcin	200U/dose	Spray	Prior Authorization	
Desmopressin Acetate	DDAVP	0.1mg, 0.2mg	Tabs	On Formulary	Limited to 8-14 years of age for a duration of 90 days.
Desmopressin Acetate	DDAVP	0.1mg/ml	Spray	Prior Authorization	
Ergonovine Maleate	Ergonovine Maleate			On Formulary	
Methylergonovine Maleate	Methergine	0.2mg	Tablet	On Formulary	
Ritodrine	Yutopar			On Formulary	

Therapeutic Subclass: Pituitary Suppressive Agents

Danazol	Danocrine	50mg, 100mg, 200mg	Capsule	On Formulary	
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Therapeutic Subclass: Pituitary Suppressive Agents

Bromocriptine Mesylate	Parlodel	2.5mg	Tablet	On Formulary	
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Therapeutic Subclass: Post-Coital Contraception

Levonorgestrel	Plan B	0.75mg	Tablet	On Formulary	Quantity Limit: 1 pack (2 tablets) per prescription.
Levonorgestrel	Preven		Tablet	On Formulary	Quantity Limit: 1 pack (4 tablets) per prescription.

Therapeutic Subclass: Progestins

Medroxyprogesterone Acetate	Provera	2.5mg, 5mg, 10mg	Tablet	On Formulary	
Norethindrone Acetate	Aygestin	5mg	Tablet	On Formulary	

Therapeutic Subclass: Systemic Corticosteroids, Androgens

Fluoxymesterone	Halotestin	10mg	Tablet	On Formulary	
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GENERIC NAME	BRAND NAME	STRENGTH	FORMULATION	FORMULARY STATUS	NOTE
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Therapeutic Subclass: Systemic Corticosteroids, Estrogens

Esterified Estrogens-Methyltestosterone	Estrate		Tablet	On Formulary	
Esterified Estrogens-Methyltestosterone	Estrate H.S.		Tablet	On Formulary	
Estradiol	Estrace	0.5mg, 1mg, 2mg	Tablet	On Formulary	
Estradiol	Estraderm		Transdermal Sys	On Formulary	
Estradiol	Vivelle		Transdermal Sys	On Formulary	

Therapeutic Subclass: Systemic Corticosteroids, Glucocorticoids

Dexamethasone	Decadron	0.25mg, 0.5mg, 0.75mg, 1mg, 1.5mg, 2mg, 4mg, 6mg	Tablet	On Formulary	
Methylprednisolone	Medrol	2mg, 4mg, 8mg, 16mg, 24mg, 32mg	Tab / Dose Pak	On Formulary	
Prednisolone	Generic	5mg	Tablet	On Formulary	
Prednisolone	Prelone	5mg/5ml, 15mg/5ml	Syrup	On Formulary	
Prednisone	Liquid Pred	5mg/ml	Syrup	On Formulary	
Prednisone	Orasone	1mg, 2.5mg, 5mg, 10mg, 20mg, 50mg	Tablet	On Formulary	

Therapeutic Subclass: Systemic Corticosteroids, Mineralocorticoids

Fludrocortisone Acetate	Florinef		Tablet	On Formulary	
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Therapeutic Subclass: Thyroid Hormones

Levothyroxine Sodium	Levothroid	25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	Tablet	On Formulary	May be dispensed as 100 day supply
Levothyroxine Sodium	Levoxyl	25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	Tablet	On Formulary	May be dispensed as 100 day supply
Levothyroxine Sodium	Synthroid	25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	Tablet	On Formulary	May be dispensed as 100 day supply; Generic substitution not mandatory
Thyroid	Armour Thyroid	15mg, 30mg, 60mg, 90mg, 120mg, 180mg, 240mg, 300mg	Tablet	On Formulary	Generic substitution not mandatory

Therapeutic Class: Gastrointestinal Medications

Therapeutic Subclass: Antacids

Alum Hydroxide	Amphojel			On Formulary	
Alum Hydroxide-Mag Carbonate	Gaviscon		Suspension	On Formulary	
Alum Hydroxide-Mag Trisilicate	Gaviscon		Suspension	On Formulary	
Aluminum & Magnesium Hydroxide	Maalox		Suspension	On Formulary	
Aluminum & Magnesium Hydroxide	Mylanta		Suspension	On Formulary	
Calcium Carbonate Antacid	Tums		Tablet	On Formulary	

Therapeutic Subclass: Anticholinergic, Antispasmodics

Clindinium-Chlordiazepoxide	Librax	2.5-5mg	Capsule	On Formulary	
Dicyclomine HCl	Bentyl	10mg, 20mg, 10mg/5ml	Tab / Cap / Syrup	On Formulary	

GENERIC NAME	BRAND NAME	STRENGTH	FORMULATION	FORMULARY STATUS	NOTE
<i>Therapeutic Subclass: Antidiarrheal Preparations</i>					
Attapulgite	Kaopectate		Suspension	On Formulary	
Bismuth Subsalicylate	Pepto Bismol	262mg, 525mg/15ml	Tab / Susp	On Formulary	
Diphenoxylate-Atropine	Lomotil	2.5-0.025mg	Tablet	On Formulary	
Loperamide HCl	Imodium A-D		Suspension	On Formulary	First line agent
<i>Therapeutic Subclass: Antiemetics</i>					
Granisetron HCl	Kytril	1mg	Tablet	Prior Authorization	
Meclizine HCl	Antivert	12.5mg, 25mg	Tablet	On Formulary	First line agent
Ondansetron	Zofran	4mg, 8mg	Tablet	On Formulary	Quantity Limit: 12 tablets/4 days and 2 fills per 30 days
Prochlorperazine	Compazine	5mg, 10mg	Tablet	On Formulary	
Promethazine HCl	Phenergan	12.5mg, 25mg, 50mg	Tab / Supp	On Formulary	
Promethazine HCl	Phenergan	6.25mg/5ml	Syrup	On Formulary	Age Restriction: PA required < 2 yrs of age
Trimethobenzamide HCl	Tigan	300mg	Capsule	On Formulary	
<i>Therapeutic Subclass: Antiflatulents</i>					
Simethicone	Mylicon		Drops	On Formulary	
<i>Therapeutic Subclass: Antiulcer Drugs, H2 Antagonists</i>					
Cimetidine	Tagamet	200mg, 300mg, 400mg, 800mg, 300mg/5ml	Tablet / Solution	On Formulary	
Famotidine	Pepcid	20mg, 40mg	Tablet	On Formulary	
Ranitidine HCl	Zantac	75mg, 150mg, 300mg, 15mg/ml	Tab / Cap / Syrup	On Formulary	
<i>Therapeutic Subclass: Antiulcer Drugs, Other Antiulcer and Gastrointestinal Products</i>					
Sucralfate	Carafate	1g	Tablet	On Formulary	
<i>Therapeutic Subclass: Antiulcer Drugs, Proton Pump Inhibitors</i>					
Lansoprazole	Prevacid 24HR (OTC)	15mg	Capsules	Step Therapy	Step Therapy: Requires a trial on omeprazole for 30 days in the last 90 days
Omeprazole	Prilosec	10mg, 20mg, 40mg	Capsule	On Formulary	Quantity Limit: 30 capsules per 30 days; 60 capsules per 30 days for 20mg dose only
Pantoprazole	Protonix	20mg, 40mg	Tablet	On Formulary	
<i>Therapeutic Subclass: Belladonna Alkaloids</i>					
Hyoscyamine Sulfate	Levsin	0.125mg, 0.125mg/5ml	Tab / Syrup	On Formulary	
Hyoscyamine Sulfate	Levsinex	0.375mg	Capsule, Tablet	On Formulary	
Phenobarbital-Belladonna Alk	Donnatal	16.2mg, 48.6mg, 16.2mg/5ml	Tablet / Elixir	On Formulary	
<i>Therapeutic Subclass: Bile Salts</i>					
Ursodiol	Actigall	300mg	Capsule	On Formulary	
<i>Therapeutic Subclass: Bowel Antiinflammatory Agents</i>					
Sulfasalazine	Azulfidine	500mg, 500mg DR	Tablet	On Formulary	
<i>Therapeutic Subclass: Chronic Inflammatory Colon Drug Treatment</i>					
Balsalazide	Colazal	750mg	Capsule	On Formulary	
Mesalamine	Delzicol	400mg	Capsule	On Formulary	
Mesalamine	Pentasa	250mg SA	Capsule	On Formulary	

GENERIC NAME	BRAND NAME	STRENGTH	FORMULATION	FORMULARY STATUS	NOTE
Mesalamine Rectal	Rowasa	4g/60mL	Enema	On Formulary	
Olsalazine Sodium	Dipentum	250mg	Capsules	On Formulary	
<i>Therapeutic Subclass: Intestinal Motility Stimulants</i>					
Metoclopramide HCl	Reglan	5mg, 10mg, 5mg/5ml	Tablet / Syrup	On Formulary	
<i>Therapeutic Subclass: Laxative and Cathartics</i>					
Bisacodyl	Ducolax	5mg, 10mg	Tab / Supp	On Formulary	
<i>Therapeutic Subclass: Laxatives and Cathartics</i>					
Docusate Sodium	Colace	100mg, 250mg	Capsule	On Formulary	
Lactulose Encephalopathy	Cephulac	10g/15ml	Syrup	On Formulary	
PEG-Electrolyte Soln	Colyte			On Formulary	
PEG-Electrolyte Soln	Colyte with Flavor Packs			On Formulary	
Polyethylene Glycol	Miralax	17g/dose	Powder	On Formulary	Quantity Limit: 527 grams per 30 days
<i>Therapeutic Subclass: Lower Gastrointestinal Disorder</i>					
Lubiprostone	Amitiza	24mcg	Capsule	Prior Authorization	
<i>Therapeutic Class: Genitourinary</i>					
<i>Therapeutic Subclass: Anticholinergic, Antispasmodics</i>					
Oxybutynin Chloride	Ditropan	5mg/5ml, 5mg	Syrup / Tab	On Formulary	
Propantheline Bromide	Pro-Banthine	15mg	Tablet	On Formulary	
<i>Therapeutic Subclass: Benign Prostatic Hypertrophy / Micturition Agents</i>					
Alfuzosin HCl	Uroxatral	10mg	Tablet	Prior Authorization	
Finasteride	Proscar	5mg	Tablet	On Formulary	
Tamsulosin HCl	Flomax	0.4mg	Capsule	On Formulary	
<i>Therapeutic Subclass: Cholinergic Drugs</i>					
Bethanechol Chloride	Urecholine	5mg, 10mg, 25mg, 50mg	Tablet	On Formulary	
<i>Therapeutic Subclass: Miscellaneous Genitourinary</i>					
Doxazosin Mesylate	Cardura	1mg, 2mg, 4mg, 8mg	Tablet	On Formulary	
Terazosin HCl	Hytrin	1mg, 2mg, 5mg, 10mg	Capsule	On Formulary	
<i>Therapeutic Subclass: Urinary Analgesics</i>					
Phenazopyridine HCl	Pyridium	100mg, 200mg	Tablet	On Formulary	
<i>Therapeutic Subclass: Urinary pH Modifiers</i>					
Citric Acid / Sodium Citrate	Bictra	334-500mg	Solution	On Formulary	
Sod / Potass / K Cit / Sodium Cit / Ca	PolyCitra	500-550/5	Solution / Syrup	On Formulary	
<i>Therapeutic Subclass: Vaginal Anti-Infectives</i>					
Butoconazole Nitrate Vaginal	Femstat		Cream	On Formulary	
Clindamycin Phosphate Vaginal	Cleocin	2%, 100mg	Cream / Supp	On Formulary	
Clotrimazole	Gyne-Lotrimin	1%, 100mg	Cream / Supp	On Formulary	
Fluconazole	Diflucan	150mg	Tablet	On Formulary	Quantity Limit: Two (2) 150mg tablets in 30 days

GENERIC NAME	BRAND NAME	STRENGTH	FORMULATION	FORMULARY STATUS	NOTE
Metronidazole Vaginal	Metrogel Vaginal	0.75%	Gel	On Formulary	
Miconazole	Monistat	2%, 3%, 100mg	Cream / Supp	On Formulary	
Tioconazole-1	Monistat-1	6.5%	Ointment	On Formulary	

Therapeutic Subclass: Vaginal, Estrogen

Conjugated Estrogen Vaginal	Premarin Vaginal	0.625mg/gram	Vag. Cream	On Formulary	
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Therapeutic Class: Hematological Agents

Therapeutic Subclass: Anticoagulant Drugs

Warfarin Sodium	Coumadin	1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg	Tablet	On Formulary	Generic substitution not mandatory
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Therapeutic Subclass: Platelet Aggregation Inhibitors

Cilostazol	Pletal	50mg, 100mg	Tablet	On Formulary	
Clopidogrel Bisulfate	Plavix	75mg	Tablet	On Formulary	
Dipyridamole	Persantine	25mg, 50mg, 75mg	Tablet	On Formulary	

Therapeutic Class: Miscellaneous

Therapeutic Subclass: Miscellaneous

Chlorambucil	Leukeran		Tablet	Prior Authorization	
Leucovorin Calcium	Leucovorin		Tablet	Prior Authorization	
Pediatric Vitamin ACD-FI	Generic		Tablet	On Formulary	May be dispensed as 100 day supply
Thermometer	Generic			On Formulary	
Vitamins A D C	Generic		Tablet	On Formulary	May be dispensed as 100 day supply

Therapeutic Class: Neuromuscular

Therapeutic Subclass: Anticonvulsants

Carbamazepine	Tegretol	100mg, 200mg, 100mg/5ml	Tab / Susp	On Formulary	Generic substitution not mandatory
Carbamazepine	Tegretol XR	100mg, 200mg	Tablet	On Formulary	Generic substitution not mandatory
Carbamazepine SR	Carbatrol	100mg, 200mg, 300mg	Capsule	On Formulary	
Clonazepam	Klonopin	0.5mg, 1mg, 2mg	Tablet	On Formulary	Quantity Limit: 120 tablets in 30 days.
Divalproex Sodium	Depakote	125mg, 250mg, 500mg	Tablet / Sprinkles	On Formulary	
Divalproex Sodium	Depakote ER	250mg, 500mg	Tablet	On Formulary	
Ethosuximide	Zarontin	250mg, 250mg/5ml	Capsule / Syrup	On Formulary	
Gabapentin	Neurontin	100mg, 300mg, 400mg, 600mg, 800mg	Capsule	On Formulary	
Lamotrigine	Lamictal	25mg, 100mg, 150mg, 200mg	Tablet	On Formulary	
Levetiracetam	Keppra	250mg, 500mg, 750mg, 1000mg, 100mg/ml	Tablet/Solution	On Formulary	
Levetiracetam ER	Keppra XR	500mg, 750mg	Tablet	On Formulary	Quantity Limit: #180 per 30 days (500mg) / #120 per 30 days (750mg)
Methsuximide	Celontin	300mg	Capsule	On Formulary	
Oxcarbazepine	Trileptal	150mg, 300mg, 600mg	Tablet	On Formulary	
Phenobarbital	Phenobarbital	15mg, 30mg, 60mg, 100mg	Tablet	On Formulary	

GENERIC NAME	BRAND NAME	STRENGTH	FORMULATION	FORMULARY STATUS	NOTE
Phenytoin	Dilantin	125mg / 5ml	Liquid	On Formulary	Generic substitution not mandatory
Phenytoin	Dilantin Infatabs	50mg	Tablet	On Formulary	Generic substitution not mandatory
Phenytoin Sodium Extended	Dilantin	30mg, 100mg	Capsule	On Formulary	Generic substitution not mandatory
Primidone	Mysoline	50mg, 250mg	Tablet	On Formulary	
Topiramate	Topamax	15mg, 25mg, 50mg, 100mg, 200mg	Tablet / Sprinkle	On Formulary	
Valproic Acid	Depakene	250mg, 250mg/5ml	Capsule / Solution	On Formulary	
Zonisamide	Zonegran	25mg, 50mg, 100mg	Capsule	On Formulary	

Therapeutic Subclass: Antiparkinson Drugs

Amantadine HCl	Symmetrel	100mg	Capsule	On Formulary	MediCal carve out
Benzotropine Mesylate	Cogentin	0.5mg, 1mg, 2mg	Tablet	On Formulary	MediCal carve out
Biperiden HCl	Akineton	2mg	Tablet	On Formulary	MediCal carve out
Bromocriptine Mesylate	Parlodel	2.5mg	Tablet	On Formulary	
Carbidopa-Levodopa	Sinemet	10-100mg, 25-100mg, 25-250mg	Tablet	On Formulary	
Carbidopa-Levodopa	Sinemet CR	25-100mg, 50-200mg	Tablet	On Formulary	
Pramipexole	Mirapex	0.125mg, 0.25mg, 0.5mg, 0.75mg, 1mg, 1.5mg	Tablet	On Formulary	
Procyclidine HCl	Kemadrin	5mg	Tablet	On Formulary	MediCal carve out
Ropinirole	Requip	0.25mg, 0.5mg, 1mg, 2mg, 3mg, 4mg, 5mg	Tablet	On Formulary	
Selegiline	Selegiline HCl	5mg	Tab / Cap	On Formulary	
Trihexyphenidyl HCl	Artane	2mg, 5mg	Tablet	On Formulary	MediCal carve out

Therapeutic Subclass: Cholinesterase Inhibitors

Pyridostigmine Bromide	Mestinon	60mg, 180mg, 60mg/5ml	Tab / Syrup	On Formulary	
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Therapeutic Subclass: Skeletal Muscle Relaxants

Baclofen	Lioresal	10mg, 20mg	Tablet	On Formulary	Quantity Limit: 90 tablets per 30 days
Carisoprodol	Soma	350mg	Tablet	On Formulary	Quantity Limit: 90 tablets per 30 days
Cyclobenzaprine HCl	Flexeril	10mg	Tablet	On Formulary	Quantity Limit: 90 tablets per 30 days
Methocarbamol	Robaxin	500mg, 750mg	Tablet	On Formulary	Quantity Limit: 90 tablets per 30 days

Therapeutic Class: Ophthalmic Medications

Therapeutic Subclass: Antibiotic / Steroid Combinations

Neomycin-Polymyxin-Dexameth	Maxitrol	0.1%	Drops / Oint	On Formulary	
Neomycin-Polymyxin-HC (Ophth)	Cortisporin	0.5%	Drops	On Formulary	
Tobramycin-Dexamethasone	TobraDex	0.3-0.1%	Drops / Oint	On Formulary	

Therapeutic Subclass: Antibiotics

Bacitracin	Bacitracin	500 U/G	Ointment	On Formulary	
Bacitracin / Polymyxin B Sulfate	Polysporin	500-10KU/G	Ointment	On Formulary	
Chloramphenicol	Chloroptic	0.5%, 1%	Drops / Oint	On Formulary	
Ciprofloxacin HCl	Ciloxan	0.3%	Drops / Oint	On Formulary	

GENERIC NAME	BRAND NAME	STRENGTH	FORMULATION	FORMULARY STATUS	NOTE
Erythromycin (Ophth)	Ilotycin	5mg/g	Ointment	On Formulary	
Gentamicin Sulfate (Ophth)	Genoptic	0.3%	Drops / Oint	On Formulary	
Neomycin-Polymyxin-Bacitracin	Neosporin	3.5-10K-10	Drops	On Formulary	
Ofloxacin	Ocuflox	0.3%	Drops	On Formulary	
Tobramycin Sulfate (Ophth)	Tobrex	0.3%	Drops / Oint	On Formulary	
Trimethoprim-Polymyxin B	Polytrim	10KU-0.1%	Drops	On Formulary	
<i>Therapeutic Subclass: Antiviral Agents</i>					
Trifluridine	Viroptic	1%	Drops	On Formulary	
Vidarabine	Vira-A	3%	Ointment	On Formulary	
<i>Therapeutic Subclass: Eye Antihistamines</i>					
Ketotifen	Zaditor OTC, Alaway	0.025%	Drops	On Formulary	
<i>Therapeutic Subclass: Eye Antiinflammatory Agents</i>					
Dexamethasone	Maxidex	0.1%	Solution	On Formulary	
Diclofenac Sodium	Voltaren	0.1%	Drops	On Formulary	
Fluorometholone Ophth Susp 0.1%	FML Liquifilm	0.1%	Suspension	On Formulary	
Flurbiprofen Sodium	Ocufen	0.03%	Drops	On Formulary	
Ketorolac Tromethamine	Acular	0.5%	Drops	On Formulary	
Prednisolone Acetate (Ophth)	Pred Forte	1%	Drops	On Formulary	
Prednisolone Acetate (Ophth)	Pred Mild	0.12%	Drops	On Formulary	
<i>Therapeutic Subclass: Eye Sulfonamides</i>					
Sulfacetamide Sodium	Bleph-10	10%, 30%	Drops / Oint	On Formulary	
Sulfacetamide Sodium	Isopto Cetamide	15%	Drops	On Formulary	
Sulfacetamide Sod-Pred	Vasocidin		Drops	On Formulary	
<i>Therapeutic Subclass: Eye Vasoconstrictors</i>					
Naphazoline HCl	Vasoclear	0.02%	Drops	On Formulary	
Phenylephrine HCL (Ophth)	Neo-Synephrine	0.12%	Drops	On Formulary	
<i>Therapeutic Subclass: Miotics / Other Intraocular Pressure Reducers</i>					
Apraclonidine HCl	Iopidine	1%, 0.5%	Drops	On Formulary	
Betaxolol HCl	Betoptic	0.5%	Drops	On Formulary	
Brimonidine Tartrate	Alphagan	0.2%	Drops	On Formulary	
Brimonidine Tartrate	Alphagan-P	0.1%	Drops	On Formulary	
Dorzolamide HCl	Trusopt	2%	Drops	On Formulary	
Dorzolamide-Timolol	Cosopt	2%-0.5%	Drops	On Formulary	Quantity Limit: 10ml per 30 days
Echothiophate Iodide	Phospholine Iodide	0.125%	Drops	On Formulary	
Latanoprost	Xalatan	0.005%	Drops	On Formulary	
Levobunolol HCl	Betagan	0.25%, 0.5%	Drops	On Formulary	
Timolol	Betimol	0.25%, 0.5%	Drops	On Formulary	

GENERIC NAME	BRAND NAME	STRENGTH	FORMULATION	FORMULARY STATUS	NOTE
Timolol Maleate	Timoptic	0.25%, 0.5%	Drops / Gel Sol	On Formulary	
<i>Therapeutic Subclass: Miscellaneous Ophthalmics</i>					
Sodium Chloride (Hypertonic)	Adsorbonac			On Formulary	
<i>Therapeutic Subclass: Mydriatics</i>					
Atropine	Isopto Atropine	1%	Drops / Oint	On Formulary	
Cyclopentolate HCl	Cyclogyl	0.5%, 1%, 2%	Drops	On Formulary	
Dipivefrin HCl	Propine	0.1%	Drops	On Formulary	
<i>Therapeutic Subclass: Ophthalmic Mast Cell Stabilizers</i>					
Cromolyn Sodium	Crolom	4%	Drops	On Formulary	
Pemirolast Potassium	Alamast	0.1%	Drops	On Formulary	
<i>Therapeutic Subclass: Sympathomimetics</i>					
Epinephrine HCl (Ophth)	Epifrin	0.5%, 1%, 2%	Drops	On Formulary	
<i>Therapeutic Class: Respiratory Medications</i>					
<i>Therapeutic Subclass: Antiasthmatics, Adrenergic Stimulants, Inhalers</i>					
Albuterol Sulfate	ProAir HFA	90mcg	Aerosol	On Formulary	Quantity limit: 2 inhalers per 30 days
Albuterol Sulfate	Ventolin HFA	90mcg	Aerosol	On Formulary	Quantity Limit: 2 inhalers per 30 days
Formoterol Fumarate	Foradil	12mcg	Aerolizer	Step Therapy	Step Therapy: Requires use of Inhaled Corticosteroids in past 30 days
Metaproterenol Sulfate	Alupent	650mcg	Aerosol	On Formulary	
Pirbuterol Acetate	Maxair Autohaler	0.2mg	Aerosol	On Formulary	
Salmeterol Xinafoate	Serevent	50mcg	Diskus	Step Therapy	Step Therapy: Requires use of Inhaled Corticosteroids in past 30 days
<i>Therapeutic Subclass: Antiasthmatics, Adrenergic Stimulants, Oral Formulation</i>					
Albuterol Sulfate	Proventil	2mg, 4mg, 2mg/5ml	Tablet / Syrup	On Formulary	
Albuterol Sulfate	Volmax	4mg, 8mg	Tablet ER	On Formulary	
Metaproterenol Sulfate	Alupent	10mg, 20mg, 10mg/5ml	Tablet / Syrup	On Formulary	
Terbutaline Sulfate	Brethine	2.5mg, 5mg	Tablet	On Formulary	
<i>Therapeutic Subclass: Antiasthmatics, Adrenergic Stimulants, Solutions</i>					
Albuterol Sulfate	Proventil	0.83mg/ml, 5mg/ml	Nebu Soln	On Formulary	
Metaproterenol Sulfate	Metaprel	6mg/ml, 4mg/ml	Nebu Soln	On Formulary	
<i>Therapeutic Subclass: Antiasthmatics, Combination Products, Inhalers</i>					
Albuterol-Ipratropium	Combivent	103-18mcg	Aerosol	On Formulary	
Budesonide/Formoterol	Symbicort	80/4.5mcg, 160/4.5mcg	Aerosol	Step Therapy	Step Therapy: Requires use of Dulera within the last 90 days
Mometasone/Formoterol	Dulera	100/5mcg, 200/5mcg	Aerosol	Step Therapy	Step Therapy: Requires use of Inhaled Corticosteroid within last 90 days
Salmeterol Xianfoate/Fluticasone	Advair Diskus	100/50mcg, 250/50mcg, 500/50mcg	Powder Inhalation	Step Therapy	Step Therapy: Requires use of Dulera within the last 90 days
<i>Therapeutic Subclass: Antiasthmatics, General Bronchodilator Agents</i>					
Ipratropium Bromide	Atrovent	17mcg, 0.2mg/mL	Aerosol Soln / Nebu Soln	On Formulary	
<i>Therapeutic Subclass: Antiasthmatics, Leukotriene Inhibitors</i>					
Montelukast	Singulair	4mg	Granules	Step Therapy	Step Therapy: Requires use of Inhaled Corticosteroid within last 120 days

GENERIC NAME	BRAND NAME	STRENGTH	FORMULATION	FORMULARY STATUS	NOTE
Montelukast	Singulair	4mg, 5mg, 10mg	Tablet	On Formulary	
<i>Therapeutic Subclass: Antiasthmatics, Mast Cell Stabilizers</i>					
Cromolyn Sodium	Intal	800mcg, 20mg/2ml	Aerosol / Nebu Soln	On Formulary	
<i>Therapeutic Subclass: Antiasthmatics, Mycolytics</i>					
Acetylcysteine	Mucomyst	100mg/ml, 200mg/ml	Vial	On Formulary	
<i>Therapeutic Subclass: Antiasthmatics, Oral Inhaled Corticosteroids</i>					
Beclomethasone Dipropionate	Qvar	40mcg, 80mcg	Aerosol	On Formulary	
Budesonide	Pulmicort	0.25mg/2ml, 0.5mg/2ml	Nebu Soln	On Formulary	Age Restriction: < 6 yrs
Budesonide	Pulmicort	180mcg	Flexhaler	On Formulary	
Fluticasone	Flovent	50mcg, 100mcg, 250mcg	Rotadisk	On Formulary	
Fluticasone	Flovent HFA	44mcg, 110mcg, 220mcg	Aerosol	On Formulary	
<i>Therapeutic Subclass: Antiasthmatics, Other Respiratory Drugs and Devices</i>					
Respiratory Therapy Supplies	Spacer			On Formulary	All spacers and inhalation devices covered except the brand "Aerochamber"
Sodium Chloride (Inhalant)				On Formulary	
Warm Steam Vaporizers	Warm Steam Vaporizers			On Formulary	Call Care1st UM Department @ (800) 468-9935 for Authorization
<i>Therapeutic Subclass: Antiasthmatics, Xanthine Derivatives</i>					
Theophylline	Elixophylline	80mg/15ml	Suspension	On Formulary	
Theophylline	Slo-bid Gyrocaps	50mg, 75mg, 125mg, 200mg, 300mg	Capsule 12H	On Formulary	
Theophylline	Theo-24	100mg, 200mg, 300mg, 400mg	Capsule 24H	On Formulary	
Theophylline	Theo-Dur	100mg, 200mg, 300mg, 400mg	Tablet SR	On Formulary	
Theophylline	Uniphyll	400mg, 600mg	Tablet SA	On Formulary	
<i>Therapeutic Subclass: Antihistamines, Antitussives and Expectorants</i>					
Dextromethorphan-GG	Tussi-Organidin NR DM		Liquid	On Formulary	
Phenyleph-Chlorphen-Hydrocod	Histussin HC		Liquid	On Formulary	
Phenyleph-Promethazine-Cod	Phenergan VC/Codeine		Liquid	On Formulary	
Promethazine VC-Codeine	Phenergan VC/Codeine	6.25-5-10/5ml	Liquid	On Formulary	Age Restriction: PA required < 2 yrs of age
Promethazine-Codeine	Phenergan/Codeine		Liquid	On Formulary	Age Restriction: PA required < 2 yrs of age; Quantity Restriction: 8 ounces (240mls) per month
Promethazine-DM	Phenergan DM		Liquid	On Formulary	Age Restriction: PA required < 2 yrs of age
Promethazine-Phenylephrine	Phenergan VC		Liquid	On Formulary	Age Restriction: PA required < 2 yrs of age
Pseudoeph-Carbinox-DM	Rondec-DM		Drops / Syrup	On Formulary	
Pseudoeph-Chlorphen-Codeine	Novahistine DH		Liquid	On Formulary	
<i>Therapeutic Subclass: Antihistamines, Combination Products</i>					
Carbinoxamine-PSE	Rondec		Drops / Syrup	On Formulary	
Carbinoxamine-PSE	Rondec		Tablet	On Formulary	
<i>Therapeutic Subclass: Antihistamines, Decongestant Products</i>					
Pseudoephedrine-GG	Deconsal II		Tablet	On Formulary	
Pseudoephedrine-GG	Duratuss G	1200mg	Tablet	On Formulary	

GENERIC NAME	BRAND NAME	STRENGTH	FORMULATION	FORMULARY STATUS	NOTE
Pseudoephedrine-GG	Entex PSE		Tablet	On Formulary	
Pseudoephedrine-GG	GuaiMAX-D		Tablet	On Formulary	
Pseudoephedrine-GG	Zephrex LA		Tablet	On Formulary	

Therapeutic Subclass: Antihistamines, Pediatric Cough/Cold Products

Pseudoeph-Chlorphen-DM	PediaCare Cough/Cold		Drops	On Formulary	
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Therapeutic Subclass: Antihistamines, Single Entity Products

Brompheniramine Maleate	Brompheniramine Maleate			On Formulary	
Cetirizine	Zyrtec	5mg, 10mg	Tablet	On Formulary	
Cetirizine	Zyrtec	1mg/ml	Syrup	Step Therapy	Step Therapy: Requires trial of loratadine for 15 days in the last 90 days
Chlorpheniramine Maleate	Chlor-Trimeton		Tablet	On Formulary	
Clemastine Fumarate	Tavist		Tablet	On Formulary	
Cyproheptadine HCl	Periactin	4mg, 2mg/5ml	Tablet / Syrup	On Formulary	
Diphenhydramine HCl	Benadryl	12.5mg/5ml, 25mg, 50mg	Liquid / Tab / Cap	On Formulary	
Fexofenadine	Allegra	30mg, 60mg, 180mg	Tablet	Step Therapy	Step Therapy: Required use of Loratadine for 15 days in the last 90 days
Hydroxyzine HCl	Atarax	10mg, 25mg, 50mg, 100mg	Tablet	On Formulary	
Hydroxyzine Pamoate	Vistaril	25mg, 50mg, 25mg/5ml	Cap / Susp	On Formulary	
Loratadine	Claritin	10mg	Tablet	On Formulary	Quantity Limit: 30 tablets per 30 days
Loratadine	Claritin	5mg/5ml	Syrup	On Formulary	Quantity Limit: 150mls per 30 days, Age Limit <= 6 yrs of age

Therapeutic Subclass: Antitussives

Benzonatate	Tessalon Perles	100mg	Capsule	On Formulary	
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Therapeutic Subclass: Expectorants

Dextromethorphan-GG	Fenesin DM	600-30mg SA 12H, 1000-50mg SA 12H	Tablet	On Formulary	
Dextromethorphan-GG	Robitussin DM	100-5/2.5ml, 100-10mg/5ml	Drops / Syrup / Liquid	On Formulary	
Guaifenesin	Fenesin	600mg SA, 1000mg SA 12H	Tablet	On Formulary	
Guaifenesin	Robitussin	100mg/5ml	Syrup	On Formulary	
Guaifenesin / DM / P-ephedrine HCl	Dimetapp	200-10-30	Tablet	On Formulary	
Guaifenesin-Codeine	Robitussin AC	100-10mg/5ml	Syrup / Liquid	On Formulary	

Therapeutic Class: Sympathomimetics

Therapeutic Subclass: Sympathomimetics

Epinephrine	EpiPen	1:1000 (0.3ml)	Auto-injector	On Formulary	Quantity Limit: 2 injectors/6 months
Epinephrine	EpiPen Jr.	1:2000 (0.3ml)	Auto-injector	On Formulary	Quantity Limit: 2 injectors/6 months

Therapeutic Class: Vitamins/Minerals/Electrolytes/Supplements

Therapeutic Subclass: Electrolytes and Other Products

Levocarnitine (Metabolic Mod)	Carnitor			Prior Authorization	
Oral Electrolytes	Pedialyte		Solution	On Formulary	

Therapeutic Subclass: Minerals

GENERIC NAME	BRAND NAME	STRENGTH	FORMULATION	FORMULARY STATUS	NOTE
Sodium Fluoride	Luride		Drops	On Formulary	May be dispensed as 100 day supply
<i>Therapeutic Subclass: Potassium Supplements</i>					
Potassium Bicarb & Chloride	K-Lyte/Cl			On Formulary	
Potassium Chloride	Klotrix			On Formulary	
Potassium Chloride	Micro K	8mEq, 10mEq	Capsules	On Formulary	
Potassium Chloride	Potassium Chloride	20mEq/15ml, 40mEq/15ml	Liquid	On Formulary	
Potassium Chloride Tab	K-Dur	10mEq, 20mEq	Tab CR	On Formulary	
<i>Therapeutic Subclass: Prenatal Vitamins</i>					
Prenatal Vitamins	Prenatal Vitamins		Tablet	On Formulary	May be dispensed as 100 day supply
<i>Therapeutic Subclass: Vitamins</i>					
Calcitriol	Rocaltrol	0.25mg, 0.5mg	Capsule	On Formulary	
Calcium Carbonate / Vitamin D	Oysco + D	500-125mg, 250-125mg	Tablet	On Formulary	
Ferrous Sulfate	Feosol		Tablet	On Formulary	
Folic Acid	Folic Acid	1mg	Tablet	On Formulary	
Folic Acid	Folic Acid	0.4mg, 0.8mg	Tablet	On Formulary	May be dispensed as 100 day supply
Iron Combinations	Chromagen		Capsule	On Formulary	
Iron Combinations	Niferex-150 Forte		Capsule	On Formulary	
Pediatric Multivitamins-FI	Poly-Vi-Flor		Drops	On Formulary	May be dispensed as 100 day supply
Pediatric Multivitamins-FI/Fe	Poly-Vi-Flor/Fe		Drops / Tablet	On Formulary	May be dispensed as 100 day supply
Pediatric Vitamin ACD-FI	Tri-Vi-Flor		Drops	On Formulary	May be dispensed as 100 day supply
Phytonadione	Mephyton	5mg	Tablet	On Formulary	
Vitamin A	Aquasol A			On Formulary	
Vitamin D2	Vitamin D	50,000IU	Capsule	On Formulary	
Vitamin D2 tab/D3 cap	Vitamin D	400IU	Tab / Cap	On Formulary	

Therapeutic Class: Weight Reduction

Therapeutic Subclass: Fat Absorption Reducing Agent

Orlistat	Xenical	120mg	Capsule	Prior Authorization	
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