Quality health plans & benefits
Healthier living
Financial well-being
Intelligent solutions

aetna℠

2013 Aetna Preferred Drug Guide

4-Tier/Open Formulary Plan

www.aetna.com

Includes generic and brand-name drugs on Aetna's Preferred Drug List

05.05.315.1 E (9/12)

Do you have questions?

Call the toll-free number on your member ID card.
Or visit **www.aetna.com/formulary** for the most up-to-date information.

Dear Member:

To help you know how drugs are covered by your plan, we are pleased to provide you with a copy of our **2013 Preferred Drug Guide**.

This guide provides helpful information on the Aetna Preferred Drug List and your pharmacy benefit plan. You may want to take this guide with you when you see your doctor to talk about what is covered under your plan.

Many commonly prescribed drugs are listed in this guide. Please remember this is not a complete list of drugs covered under your plan. Because thousands of drugs are included in your pharmacy benefits plan, we only list the most commonly prescribed ones.

Want to learn more about the drug coverage for your plan? It's easy to find out. Just visit **www.aetna.com** and log in to Aetna Navigator®, your secure member website. Then take these steps:

1. Select "Aetna Pharmacy" from the top of the page.
2. In the "Your Drug Coverage" section, select "Plan Summary". Then, "Medication Search" and enter your pharmacy benefits plan type.

Table of Contents

2 What pharmacy benefits plan do I have?
2 What you pay
3 What is the Aetna Preferred Drug List?
3 Where can I find more Preferred Drug List information?
3 How is the Preferred Drug List developed?
4 Why is the Preferred Drug List subject to change?
4 Why do some drugs require prior authorization or precertification?
5 Why do some drugs have quantity limits?
5 What is step-therapy?
5 What is therapeutic duplication?
5 Learn more about drug coverage reviews
5 You may be able to save with generic drugs
6 Saving on prescriptions
6 What is Aetna Rx Home Delivery®?
7 What is Aetna Specialty Pharmacy®?
7 Therapeutic Class List key
8 PREFERRED DRUG LIST MEDICATION CLASSES
8 Antineoplastic Agents
9 Blood Products – Modifiers – Volume Expanders
10 Cardiovascular System
14 Central Nervous System
19 Dermatological Agents
22 Endocrine System
27 Gastrointestinal System
28 Genitourinary System
29 Infections and Infestations
32 Musculoskeletal System
33 Ophthalmic Agents
35 Otic Agents
35 Respiratory Tract Agents
37 Toxicologic Agents
37 Vaccines, Toxoids and Biologics
37 Miscellaneous
38 PRECERTIFICATION LIST
42 QUANTITY LIMIT LIST
51 STEP-THERAPY LIST
56 Index

What pharmacy benefits plan do I have?

You are enrolled in a four-tier/ open formulary plan.

Here's what those terms mean:

Think of **tier** as a level. **Four-tier** means you could pay four different amounts, depending on the drug you take.

A **formulary** is a list of generic and brand-name drugs that your health plan covers. An **open formulary** means your plan covers most prescription drugs. But it may not cover some others.

What you pay

The amount you pay (your copay) depends on the drug your doctor prescribes. Your copay is either a flat fee or a percent of the prescription's price.

Tier 1

You pay the **lowest copay** for drugs in this level.

Tier 2

You pay a **higher copay** for drugs in this level.

Tier 3

You pay the **highest copay** for drugs in this level.

Tier 4

You pay a **specific amount** for specialty drugs in this level. Specialty drugs may be injected, infused or taken by mouth.

To find your copay and what your plan covers

Check your Plan Design and Benefits summary. This should be in your enrollment kit. Ask your employer if you don't have one.

Your pharmacy benefits plan may include a program that encourages you to choose a generic drug over a brand-name drug, in order to help reduce what you pay. This means that if you fill a brand-name drug when a generic is available, that in addition to your standard copay or coinsurance, you must also pay the difference in cost between the brand-name and generic drug.

For a summary of your pharmacy benefits plan, including out-of-pocket costs, visit **www.aetna.com** and log in to Aetna Navigator. Or call the toll-free number on your member ID card.

What is the Aetna Preferred Drug List?

You might also see this referred to as our formulary. It's not a guarantee of coverage. But you can refer to it to see a list of generic and brand-name, and preferred and non-preferred drugs that your health plan mostly covers. You may pay less for drugs on this list. Keep in mind that it is up to you and your doctor to decide what drug(s) are right for you.

Where can I find more Preferred Drug List information?

You and your doctor can search for a drug, find out if it's covered and see what tier it falls under. You can also see if there are alternatives that cost less. **Make sure your doctor knows that you pay more for tier 4 drugs.** He or she can consider this before writing a prescription.

How to search:

- Go to **www.aetna.com/formulary**
- Pull down **Four Tier Open Formulary** in the drop-down box
- Click on **Medication Search**
- Type in the **drug's name** and **click Submit Search**

How is the Preferred Drug List developed?

Aetna's Pharmacy and Therapeutics (P&T) Committee meets regularly to review new drugs and new information about drugs that are already on the market. It reviews available information concerning safety, effectiveness and current use in therapy. The P&T Committee reviews scientific evidence, including relevant findings of federal government agencies, pharmaceutical manufacturers, medical professional associations, national commissions and peer-reviewed journals.

Our P&T Committee includes licensed pharmacists and doctors, including those who are currently in practice and others who are Aetna employees. All committee members must tell us if they are in a situation that can create a conflict of interest or if they have a financial stake that might affect their decisions.

Once the P&T Committee completes its clinical review, we also consider overall value (including cost and manufacturer rebate arrangements) and other factors before adding or removing a drug from the Preferred Drug List. This committee can make recommendations to change the tier level of a drug or to place it on our Formulary Exclusions List, designating it as a drug that is no longer covered.

Why is the Preferred Drug List subject to change?

We may add or remove drugs from the Preferred Drug List for certain reasons. We might also move a drug from one coverage tier to another.

Here are some reasons why we may make changes to the Preferred Drug List.

- As brand-name drugs lose their patents and generic versions become available, the brand-name may be covered at a higher out-of-pocket cost while the generic may be covered at a lower out-of-pocket cost.
- The Food and Drug Administration (FDA) approves many new drugs throughout the year.
- Drugs can be withdrawn from the market or may become available without a prescription. Over-the-counter (OTC) drugs are not generally covered under a prescription plan, unless required by law.

Our website, **www.aetna.com/formulary**, reflects the most up-to-date Preferred Drug List – so please visit it often.

Why do some drugs require prior authorization or precertification?

This drug coverage review encourages appropriate and cost-effective use of prescription drugs by allowing coverage only when certain conditions are met.

Reasons for precertification include:

- Compliance with dosing guidelines
- Avoiding duplicate therapies
- Helping health care providers check that a drug is being used based on generally accepted medical criteria

The precertification program is based upon current medical findings, FDA-approved manufacturer labeling information, and cost and manufacturer rebate arrangements.

If your plan requires precertification, you will find a list of drugs that are subject to precertification with this guide. Please keep the following in mind:

- Your doctor must contact Aetna to request approval of coverage for these drugs.
- If we approve the request, we will notify your doctor. The drug will then be covered at the applicable out-of-pocket cost under your plan. You will also be notified of approvals where the state requires notification to members.

If the request is denied, you and your doctor will be notified. You can still purchase the drug, but for the full price.

Why do some drugs have quantity limits?

This drug coverage review limits coverage of quantities for certain drugs. These limits help your doctor and pharmacist check that your prescribed drug is used correctly and safely.

We use medical guidelines and FDA-approved recommendations from drug makers to set these coverage limits. The quantity limit program includes:

- **Dose Efficiency Edits** – Limit coverage of prescriptions to one dose per day for drugs that are approved for once-daily dosing.
- **Maximum Daily Dose** – A message is sent to the pharmacy if a prescription is less than the minimum or higher than the maximum allowed dose.
- **Quantity Limits Over Time** – Limit coverage of prescriptions to a specific number of units in a defined amount of time.

What is step-therapy?

This drug coverage review promotes the appropriate use of equally effective but lower-cost drugs first. Prerequisite drugs are FDA-approved and treat the same condition as the corresponding step-therapy drugs.

What is therapeutic duplication?

Therapeutic duplication means that two or more drugs of the same type are prescribed at the same time. This can occur when two doctors prescribe similar drugs or when your doctor switches from one drug to another drug in the same class without cancelling the first prescription.

It is rare that you should ever need two drugs from the same class to treat a medical condition. Since serious side effects may occur, we help bring such duplications to your pharmacist's and doctor's attention.

Learn more about drug coverage reviews

If you have a medical need for a drug that requires precertification, quantity limits or step therapy, your doctor can ask for a medical exception. The list of drugs requiring precertification, quantity limits or step-therapy is subject to change. Find the most up-to-date information at **www.aetna.com/formulary**.

You may be able to save with generic drugs

Generic drugs are approved by the U.S. Food and Drug Administration (FDA) and proven to be just as safe and effective as brand-name drugs. They contain the same active ingredients in the same amounts as the brand-name products. The difference is that generics may be a different color, shape or size.

When appropriate, your doctor may decide to prescribe, or allow substitution with, a generic drug. Please talk to your doctor to find out if a generic is right for you.

Saving on prescriptions

Here are some other tips to pay less out of pocket for your prescription drugs:

- Ask your doctor to consider prescribing drugs that are on the Preferred Drug List.
- Ask your doctor to consider prescribing generic drugs instead of brand-name drugs.
- Check to see if your plan includes our mail-order pharmacy service. Depending upon your plan, mail order may save you money. See Aetna Rx Home Delivery in this guide for details.
- Remind your doctor to check your plan to make sure you get maximum coverage.

What is Aetna Rx Home Delivery?

Check your plan documents to see if your plan includes our Aetna Rx Home Delivery mail-order pharmacy. It fills prescriptions for maintenance medicine. This type of medicine is used regularly, to treat conditions like arthritis, asthma, diabetes or high cholesterol. If you need this type of drug, you can get up to a 90-day supply, or the maximum supply allowed by your plan, and free delivery right to your mailbox.

You also get:

- Quick, confidential service
- Free standard shipping
- Pharmacists who check all prescriptions for accuracy and can answer questions any time

It's easy and fast to order – choose one of these ways:

1. **Mail** – Get a new prescription from your doctor. Mail your new prescription to Aetna Rx Home Delivery with a completed order form. You can access the form online. Visit **www.aetna.com** and log in to Aetna Navigator, your secure member website. Or you can go right to **www.aetnanavigator.com**. Once logged in, click the link to "Aetna Pharmacy".
2. **Fax** – Give your doctor the Aetna Rx Home Delivery fax number: 1-877-270-3317. Your doctor can fax in the prescription. Make sure your doctor includes your member ID number, your date of birth and your mailing address on the fax cover sheet. Only a doctor may fax a prescription.
3. **Phone** – Call the appropriate toll-free number on your member ID card. With our Aetna Rx Courtesy Start℠ program, we will contact your doctor to attempt to get a new prescription. Your doctor may require you to schedule a visit before he or she will write you a new prescription. After we reach out to your doctor, please allow adequate time (up to 7 days) for us to receive a reply. To help this process move quickly, we highly recommend you alert your doctor to expect our outreach.

If your prescription is for a controlled medicine, a written prescription from your doctor may be needed.

Generally, if your order is complete, you will receive your medicine within 10-14 days from when Aetna Rx Home Delivery receives your order. You can request expedited delivery for an additional charge.

What is Aetna Specialty Pharmacy?

Aetna Specialty Pharmacy is Aetna's in-house specialty pharmacy. It can fill your prescription specialty medicine. These types of drugs may be injected, infused or taken by mouth. Specialty medicine often needs special storage and handling. It must be delivered quickly. And a nurse or pharmacist should monitor you during your treatment. Use Aetna Specialty Pharmacy to get this medicine sent right to your mailbox. You also get:

- Free delivery that is reliable, secure and sent anywhere you choose
- Extra help when you need it – like injection training and side effect monitoring
- Proactive outreach to confirm your refills
- Free standard supplies
- Nurses and pharmacists who can help you 24 hours a day, every day

It's easy and fast to order – choose one of these ways:

- **Fax** – Your doctor may fax your prescription to **1-866-FAX-ASRX (1-866-329-2779)**.
- **Mail** – You or your doctor may mail your prescription order to: Aetna Specialty Pharmacy, 503 Sunport Lane, Orlando, FL 32809. If you mail in your own prescription, please send it along with a completed Patient Profile Form. To access this form, visit **www.AetnaSpecialtyRx.com** and click "Enroll."
- **Phone** – Your doctor may also call and speak to one of our registered pharmacists at **1-866-782-ASRX (1-866-782-2779)** during normal business hours of 8 a.m. until 7 p.m. ET.

To transfer an existing prescription order to be filled by Aetna Specialty Pharmacy, call toll-free at **1-866-353-1892**.

Therapeutic Class List key

UPPERCASE – Brand-name medication

lower case italics – Generic medication

FE – Formulary excluded medication

NC – Not covered

PR – Precertification required under most plans

ST – Step-therapy applies under most plans

QL – Quantity limit applies under most plans

PMED – Preferred injectable medication that may be covered under the medical benefit

MED – Injectable medication that may be covered under the medical benefit

– Brand-name drug expected to become available generically in the near future. After the generic drug becomes available, the brand-name drug may be covered at a higher non-preferred copay and/or added to the Formulary Exclusion List. The brand-name drug may also be subject to precertification and/or step-therapy.

****** – May be obtained through Aetna Specialty Pharmacy or a retail pharmacy

******* – May not be available through Aetna Specialty Pharmacy

1, 2, 3, 4 – The numbers found in the drug lists represent copay tiers.

4-Tier Member Guide

Medication Name	Pharmacy Benefit Plans			
	4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Antineoplastic Agents				
Alkylating Agents				
ALKERAN	2			
CEENU	2			
cyclophosphamide	1			
HEXALEN	2			
LEUKERAN	2			
MYLERAN	2			
TEMODAR caps #	4		✓	
TEMODAR inj	MED			
Antimetabolites				
mercaptopurine	1			
methotrexate	1			
PURINETHOL	3			
TABLOID	2			
TREXALL	3			
XELODA	4		✓	
Antineoplastic – Antibodies				
ERBITUX	MED	✓		
RITUXAN	MED	✓		
VECTIBIX	MED	✓		
YERVOY	MED	✓		
Antineoplastic – Cellular Immunotherapy				
PROVENGE	MED	✓		
Antineoplastic – Enzyme Inhibitors				
AFINITOR	4	✓	✓	
CAPRELSA	4	✓	✓	
GLEEVEC	4	✓	✓	
INLYTA	4	✓	✓	
IRESSA ❊❊❊	4			
JAKAFI	4	✓	✓	
NEXAVAR	4	✓	✓	
SPRYCEL	4	✓	✓	
SUTENT	4	✓	✓	
TARCEVA	4	✓	✓	
TASIGNA	4	✓	✓	
TYKERB	4	✓	✓	
VOTRIENT	4	✓	✓	
XALKORI	4	✓	✓	
ZELBORAF	4	✓	✓	
ZOLINZA	4	✓	✓	
Antineoplastic – Hormonal Agents				
anastrozole	1	✓		

Medication Name	Pharmacy Benefit Plans			
	4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Antineoplastic – Hormonal Agents (continued)				
ARIMIDEX	3	✓		✓
AROMASIN	3	✓		
bicalutamide	1	✓		
CASODEX	3	✓		
DEPO-PROVERA	3			
ELIGARD	4			
EMCYT	2			
exemestane	1	✓		
FARESTON	3			
FASLODEX	4			
FEMARA	3	✓		✓
FIRMAGON	4	✓		
flutamide	1			
letrozole	1	✓		
leuprolide	4			
LUPRON	4			
LUPRON DEPOT	4			
LYSODREN	3			
MEGACE	3			
MEGACE ES	3			
megestrol	1			
NILANDRON	2			
tamoxifen	1			
TRELSTAR DEPOT	4			
TRELSTAR LA	4			
VANTAS	4			
ZOLADEX	4			
ZYTIGA	4	✓	✓	
Antineoplastics – Miscellaneous				
ACTIMMUNE	4			
ALFERON N	4			
ERIVEDGE	4	✓	✓	
HYDREA	3			
hydroxyurea	1			
INTRON-A	4			
MATULANE	2			
SYLATRON	4	✓	✓	
TARGRETIN	2			
tretinoin 10 mg	4		✓	
Chemotherapy Rescue/Antidote Agents				
leucovorin calcium	1			
MESNEX	3			

Pharmacy Benefit Plans

Medication Name	4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Immunomodulators				
REVLIMID	4	✓		
THALOMID	4			
Mitotic Inhibitors				
etoposide	1			
JEVTANA	MED	✓		
Topoisomerase I Inhibitors				
HYCAMTIN	4		✓	
topotecan	MED			
Blood Products – Modifiers – Volume Expanders				
Anticoagulants – Coumarin				
COUMADIN	3			
jantoven	1			
warfarin	1			
Anticoagulants – Direct Thrombin Inhibitors/Factor Xa Inhibitor				
IPRIVASK **	4			
PRADAXA	2	✓	✓	
XARELTO	2	✓	✓	
Anticoagulants – Heparins				
ARIXTRA **	4			
fondaparinux	4			
FRAGMIN **	4			
heparin sodium	PMED			
LOVENOX **	4			✓
enoxaparin	4			
Antiinhibitor Coagulant Complex				
FEIBA VH IMMUNO	4	✓		
Blood Clotting Factor VIIa				
NOVOSEVEN	4	✓		
NOVOSEVEN RT	4	✓		
Blood Clotting Factor VIII Human				
ALPHANATE	4	✓		
CORIFACT	4	✓		
HEMOFIL M	4	✓		
HUMATE-P	4	✓		
KOATE-DVI	4	✓		
MONOCLATE-P	4	✓		
WILATE	4	✓		
Blood Clotting Factor VIII Recombinant				
ADVATE	4	✓		
HELIXATE FS	4	✓		
KOGENATE FS	4	✓		

Pharmacy Benefit Plans

Medication Name	4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Blood Clotting Factor VIII Recombinant (continued)				
RECOMBINATE	4	✓		
REFACTO	4	✓		
XYNTHA	4	✓		
Blood Clotting Factor IX Complex				
BEBULIN VH	4	✓		
PROFILNINE	4	✓		
Blood Clotting Factor IX Recombinant				
ALPHANINE SD	4	✓		
BENEFIX	4	✓		
MONONINE	4	✓		
Fibrinogen concentrate (human)				
RIASTAP	4			
Hematopoietic Growth Factors				
ARANESP	4	✓		
EPOGEN	4	✓		
LEUKINE	4			
NEULASTA	4			
NEUMEGA	4			
NEUPOGEN	4			
NPLATE	4			
OMONTYS	4	✓		
PROCRIT	4	✓		
PROMACTA	4			
Hemostatics – Systemic				
AMICAR	3			
aminocaproic acid	1			
LYSTEDA	2		✓	
Hereditary Angioedema				
BERINERT	4	✓		
CINRYZE ****	4	✓		
FIRAZYR	4	✓		
KALBITOR	4	✓		
Paroxysmal Nocturnal Hemoglobinuria (PNH)				
SOLIRIS	4	✓		
Platelet Aggregation Inhibitors				
AGGRENOX	2			
AGRYLIN	3			
anagrelide	1			
BRILINTA	3	✓	✓	
cilostazol	1			
clopidogrel	1			

4-Tier Member Guide

Medication Name	Pharmacy Benefit Plans: 4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Platelet Aggregation Inhibitors (continued)				
dipyridamole	1			
EFFIENT	2	✓	✓	
PERSANTINE	3			
PLAVIX	3			✓
PLETAL	3			
ticlopidine	1			
Cardiovascular System				
Alpha-Beta Blockers				
carvedilol	1			
COREG	3			
COREG CR #	2			
labetalol	1			
TRANDATE	3			
Anaphylaxis Therapy Agents				
ADRENACLICK	3			
epinephrine	1			
EPIPEN	2			
EPIPEN-JR	2			
TWINJECT	3			
Angiotensin Converting Enzyme (ACE) Inhibitors and Combinations				
ACCUPRIL	3			
ACCURETIC	3			
ACEON	3			
ALTACE	3			
benazepril	1			
benazepril/hydro-chlorothiazide	1			
captopril	1			
captopril/hydro-chlorothiazide	1			
enalapril	1			
enalapril/hydro-chlorothiazide	1			
fosinopril	1			
fosinopril/hydro-chlorothiazide	1			
lisinopril	1			
lisinopril/hydro-chlorothiazide	1			
moexipril	1			
moexipril/hydro-chlorothiazide	1			
LOTENSIN	3			

Medication Name	Pharmacy Benefit Plans: 4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Angiotensin Converting Enzyme (ACE) Inhibitors and Combinations (continued)				
LOTENSIN HCT	3			
MAVIK	3			
perindopril	1			
PRINIVIL	3			
PRINZIDE	3			
quinapril	1			
quinapril/hydro-chlorothiazide	1			
ramipril	1			
trandolapril	1			
UNIRETIC	3			
UNIVASC	3			
VASERETIC	3			
VASOTEC	3			
ZESTORETIC	3			
ZESTRIL	3			
Angiotensin II Receptor Antagonists and Combinations				
ATACAND #	3		✓	✓
ATACAND HCT #	3		✓	✓
AVALIDE	3		✓	✓
AVAPRO	3		✓	✓
AZOR	3		✓	
BENICAR	3		✓	✓
BENICAR HCT	3		✓	✓
COZAAR	3		✓	✓
DIOVAN #	3		✓	✓
DIOVAN HCT #	3		✓	✓
EDARBI	3		✓	✓
EDARBYCLOR	3		✓	✓
eprosartan	1		✓	
EXFORGE #	2		✓	
EXFORGE HCT #	2		✓	
HYZAAR	3		✓	✓
irbesartan	1		✓	
irbesartan-hydro-chlorothiazide	1		✓	
losartan	1		✓	
losartan/hydro-chlorothiazide	1		✓	
MICARDIS	2		✓	
MICARDIS HCT	2		✓	

Medication Name	4-Tier Open	Pharmacy Benefit Plans: Precertification	Quantity Limits	Step-Therapy
Angiotensin II Receptor Antagonists and Combinations (continued)				
TEVETEN	3		✓	✓
TEVETEN HCT	3			✓
TRIBENZOR	3		✓	✓
TWYNSTA	3		✓	✓
VALTURNA	3		✓	
Antiadrenergic Antihypertensives				
CARDURA	3			
CATAPRES	3			
CATAPRES-TTS	3			
clonidine	1			
doxazosin	1			
guanabenz	1			
guanfacine	1			
methyldopa	1			
MINIPRESS	3			
NEXICLON	3			✓
prazosin	1			
reserpine	1			
TENEX	3			
terazosin	1			
Antianginals – Nitrates				
amyl nitrite	1			
DILATRATE SR	3			
IMDUR	3			
ISORDIL	3			
isosorbide dinitrate	1			
isosorbide mononitrate	1			
MONOKET	3			
NITRO-BID	3			
NITRO-DUR	3			
nitroglycerin	1			
nitroglycerin CR	1			
nitroglycerin SL	1			
NITROLINGUAL	3			
NITROMIST	3			
NITROSTAT	2			
Antianginals – Other				
RANEXA	2		✓	✓
Antiarrhythmics Type I-A				
disopyramide	1			
NORPACE	3			
procainamide	1			

Medication Name	4-Tier Open	Pharmacy Benefit Plans: Precertification	Quantity Limits	Step-Therapy
Antiarrhythmics Type I-A (continued)				
quinidine gluconate	1			
quinidine sulfate	1			
Antiarrhythmics Type I-B				
mexiletine	1			
Antiarrhythmics Type I-C				
flecainide	1			
propafenone	1			
RYTHMOL	3			
RYTHMOL SR	3			
TAMBOCOR	3			
Antiarrhythmics Type III				
amiodarone	1			
CORDARONE	3			
MULTAQ	2			
PACERONE	3			
TIKOSYN	3			
Antihyperlipidemics – Bile Sequestrants				
cholestyramine	1			
cholestyramine light	1			
COLESTID	3			
colestipol	1			
prevalite	1			
QUESTRAN	3			
QUESTRAN LITE	3			
WELCHOL	2			
Antihyperlipidemics – Fibric Acid Derivatives				
ANTARA	2			
fenofibrate	1			
fenofibrate micronized	1			
fenofibric acid	1			
FENOGLIDE	3			✓
FIBRICOR	3			✓
gemfibrozil	1			
LOFIBRA	3			✓
LOPID	3			✓
LIPOFEN	3			✓
TRICOR #	3			
TRIGLIDE	3			✓
TRILIPIX #	2			
Antihyperlipidemics – HMG CoA Reductase Inhibitors				
ADVICOR #	3		✓	

4-Tier Member Guide

Medication Name	Pharmacy Benefit Plans: 4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Antihyperlipidemics – HMG CoA Reductase Inhibitors (continued)				
ALTOPREV	3		✓	✓
amlodipine/ atorvastatin	1		✓	
atorvastatin	1		✓	
CADUET	3		✓	✓
CRESTOR	2		✓	
fluvastatin	1		✓	
LESCOL	3		✓	
LESCOL XL	2		✓	
LIPITOR	3		✓	✓
LIVALO	3		✓	
lovastatin	1		✓	
MEVACOR	3		✓	
PRAVACHOL	3		✓	
pravastatin	1		✓	
SIMCOR	2		✓	
simvastatin	1		✓	
VYTORIN	2		✓	
ZOCOR	3		✓	
Antihyperlipidemics – Intestinal Cholesterol Absorption Inhibitors				
ZETIA	2	✓	✓	
Antihyperlipidemics – Miscellaneous				
LOVAZA	2			
Antihyperlipidemics – Nicotinic Acid Derivatives				
NIASPAN #	2			
Beta Blockers Cardioselective and Combinations				
acebutolol	1			
atenolol	1			
atenolol/ chlorthalidone	1			
betaxolol	1			
bisoprolol	1			
bisoprolol/hydro-chlorothiazide	1			
BYSTOLIC	2			
DUTOPROL	2			
KERLONE	3			
LOPRESS HCT	3			
LOPRESSOR	3			
metoprolol	1			
metoprolol ER	3			

Medication Name	Pharmacy Benefit Plans: 4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Beta Blockers Cardioselective and Combinations (continued)				
metoprolol/hydro-chlorothiazide	1			
SECTRAL	3			
TENORETIC	3			
TENORMIN	3			
TOPROL XL	3			
ZEBETA	3			
ZIAC	3			
Beta Blockers Non-Selective and Combinations				
BETAPACE	3			
BETAPACE AF	3			
CORGARD	3			
CORZIDE	3			
INDERAL LA	3			
INNOPRAN XL	3			
LEVATOL	3			
nadolol	1			
nadolol/bendro-flumethiazide	1			
pindolol	1			
propranolol	1			
propranolol SR	1			
propranolol/hydro-chlorothiazide	1			
sorine	1			
sotalol	1			
sotalol AF	1			
timolol	1			
Calcium Blockers				
ADALAT CC	3			
afeditab	1			
amlodipine	1			
CALAN	3			
CALAN SR	3			
CARDENE SR	3			
CARDIZEM	3			
CARDIZEM CD	3			
CARDIZEM LA	3			
cartia XT	1			
COVERA-HS	3			
DILACOR XR	3			
dilt-CD	1			

Medication Name	Pharmacy Benefit Plans 4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Calcium Blockers (continued)				
dilt-XR	1			
diltiazem	1			
diltiazem CD/ER/CR/XT	1			
diltiazem SR extended release beads	1			
DYNACIRC CR	3			
felodipine	1			
ISOPTIN SR	3			
isradipine	1			
matzim LA	1			
nicardipine	1			
nifediac CC	1			
nifedical XL	1			
nifedipine	1			
nifedipine CR/ER/SR	1			
nimodipine	1			
nisoldipine	1			
NIMOTOP	3			
NORVASC	3			✓
PROCARDIA	3			
PROCARDIA XL	3			
SULAR	3			
taztia XT	1			
TIAZAC	3			
verapamil	1			
verapamil CR/ER/SR	1			
VERELAN	3			
VERELAN PM	3			
VERELAN SR	3			
Cardiac Glycosides				
digoxin	1			
LANOXIN	3			
Cardiovascular Combinations – Miscellaneous				
amlodipine/benazepril	1			
BIDIL	3			
CLORPRES	3			
hydralazine/hydro-chlorothiazide	1			
LOTREL	3			✓
methyldopa/hydro-chlorothiazide	1			
rauwolfia/bendro-flumethiazide	1			
TARKA	3			

Medication Name	Pharmacy Benefit Plans 4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Direct Renin Inhibitor and Combinations				
AMTURNIDE	3		✓	
TEKAMLO	3		✓	
TEKTURNA	3		✓	
TEKTURNA HCT	3		✓	
Diuretics – Carbonic Anhydrase Inhibitors				
acetazolamide	1			
DIAMOX	3			
methazolamide	1			
Diuretics – Loop				
bumetanide	1			
DEMADEX	3			
EDECRIN	3			
furosemide	1			
LASIX	3			
torsemide	1			
Diuretics – Potassium Sparing and Combinations				
ALDACTAZIDE	3			
ALDACTONE	3			
amiloride	1			
amiloride/hydro-chlorothiazide	1			
DYAZIDE	3			
DYRENIUM	3			
MAXZIDE	3			
MIDAMOR	3			
spironolactone	1			
spironolactone/hydro-chlorothiazide	1			
triamterene/hydro-chlorothiazide	1			
Diuretics – Selective Aldosterone Receptor Antagonists (SARAs)				
eplerenone	1			
INSPRA	3			
Diuretics – Thiazide and Thiazide-Like				
chlorothiazide	1			
chlorthalidone	1			
DIURIL	3			
hydrochlorothiazide	1			
indapamide	1			
methychlothiazide	1			
metolazone	1			
MICROZIDE	3			

4-Tier Member Guide

Pharmacy Benefit Plans

Medication Name	4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Diuretics – Thiazide and Thiazide-Like (continued)				
THALITONE	3			
ZAROXOLYN	3			
Pheochromocytoma Agents				
DEMSER	3			
DIBENZYLINE	2			
Pulmonary Hypertension Agents				
ADCIRCA	4	✓		
epoprostenol	4	✓		
FLOLAN ****	4	✓		
LETAIRIS	4	✓		
REMODULIN ****	4	✓		
REVATIO	4	✓		
sildenafil	1	✓		
TRACLEER	4	✓		
TYVASO ****	4	✓		
VELETRI	4	✓		
VENTAVIS	4	✓		
Vasodilators				
hydralazine	1			
isoxsuprine	1			
minoxidil	1			
papaverine ER	1			
Central Nervous System				
ALS Agents				
RILUTEK #	2	✓		
Analgesic – Non-Narcotic				
PRIALT	4			
Alzheimer's Disease – Antidementia				
ARICEPT 5 and 10 mg	3			✓
ARICEPT 23 mg	3			✓
ARICEPT ODT	3			✓
donepezil	1			
donepezil ODT	1			
EXELON capsules	3			
EXELON patch, soln	2			
galantamine	1			
galantamine SR	1			
NAMENDA	2			
RAZADYNE	3			
RAZADYNE ER	3			
rivastigmine	1			

Pharmacy Benefit Plans

Medication Name	4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Antianxiety – Benzodiazepines				
alprazolam	1			
alprazolam ER	1			
alprazolam ODT	1			
chlordiazepoxide	1			
clorazepate	1			
diazepam	1			
lorazepam	1			
NIRAVAM	3			
oxazepam	1			
XANAX XR	3			
Antianxiety – Miscellaneous				
buspirone	1			
hydroxyzine hcl	1			
hydroxyzine pamoate	1			
meprobamate	1			
Anticonvulsants – Benzodiazepines				
clonazepam	1			
clonazepam orally disintegrating tab	1			
DIASTAT	3			
diazepam rectal gel	1			
KLONOPIN	3			
ONFI	3	✓		
Anticonvulsants – Carbamates				
felbamate	1			
FELBATOL	3			
Anticonvulsants – GABA Modulators				
GABITRIL	3	✓		
SABRIL powder ****	4			
SABRIL tablets ****	4	✓		
Anticonvulsants – Hydantoins				
DILANTIN	3			
phenytoin extended	1			
phenytoin sodium	1			
Anticonvulsants – Miscellaneous				
BANZEL	3	✓		
carbamazepine	1			
carbamazepine SR	1			
carbamazepine XR	1			
CARBATROL	3			
gabapentin	1		✓	
KEPPRA	3			✓

Medication Name	Pharmacy Benefit Plans 4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Anticonvulsants – Miscellaneous (continued)				
KEPPRA XR	3			✓
LAMICTAL	3			
LAMICTAL ODT	3			
LAMICTAL XR #	3			✓
lamotrigine	1			
levetiracetam	1			
levetiracetam ER	1			
LYRICA	2		✓	
NEURONTIN	3		✓	
oxcarbazepine	1			
POTIGA	3	✓	✓	
primidone	1			
TEGRETOL	3			
TEGRETOL XR	3			
TOPAMAX	3			✓
topiramate	1			
TRILEPTAL	3			
VIMPAT	3	✓	✓	
ZONEGRAN	3			
zonisamide	1			
Anticonvulsants – Succinimides				
CELONTIN	3			
ethosuximide	1			
ZARONTIN	3			
Anticonvulsants – Valproic Acid				
DEPAKENE	3			
DEPAKOTE	3			✓
DEPAKOTE ER	3			✓
DEPAKOTE SPRINKLE	3			✓
divalproex sodium delayed release	1			
divalproex sodium sprinkle	1			
divalproex sodium SR	1			
STAVZOR	3			
valproic acid	1			
Antidepressants – Alpha-2 Receptor Antagonists				
mirtazapine	1		✓	
mirtazapine ODT	1		✓	
REMERON	3		✓	✓
REMERON SOLUTAB	3		✓	✓

Medication Name	Pharmacy Benefit Plans 4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Antidepressants – MAO Inhibitors				
EMSAM	3		✓	
MARPLAN	3			
NARDIL	3			
PARNATE	3			
phenelzine	1			
tranylcypromine sulfate	1			
Antidepressants – Miscellaneous				
APLENZIN	3		✓	✓
budeprion	1		✓	
budeprion XL	1		✓	
bupropion	1		✓	
bupropion SR	1		✓	
maprotiline	1		✓	
WELLBUTRIN	3		✓	✓
WELLBUTRIN SR	3		✓	✓
WELLBUTRIN XL	2		✓	✓
Antidepressants – Modified Cyclics				
nefazodone	3			✓
OLEPTRO	3		✓	✓
trazodone	1			
VIIBRYD	2		✓	✓
VIIBRYD KIT	2		✓	✓
Antidepressants – Serotonin-Norepinephrine Reuptake Inhibitors				
CYMBALTA #	2		✓	✓
EFFEXOR XR	3		✓	✓
PRISTIQ	2		✓	✓
venlafaxine	1		✓	
venlafaxine ER (cap)	1		✓	
VENLAFAXINE ER (tab)	3		✓	✓
venlafaxine SR (tab)	1		✓	
Antidepressants – Selective Serotonin Reuptake Inhibitors				
CELEXA	3		✓	✓
citalopram	1		✓	
escitalopram	1		✓	
fluoxetine	1		✓	
FLUOXETINE 60 MG	3		✓	✓
fluoxetine delayed release	1		✓	
fluvoxamine	1		✓	

4-Tier Member Guide

Medication Name	Pharmacy Benefit Plans			
	4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Antidepressants – Selective Serotonin Reuptake Inhibitors (continued)				
LEXAPRO	3		✓	✓
LUVOX CR	3		✓	✓
paroxetine	1		✓	
paroxetine ER	1		✓	
PAXIL	3		✓	✓
PAXIL CR	3		✓	✓
PEXEVA	3		✓	✓
PROZAC	3		✓	✓
PROZAC WEEKLY	3		✓	✓
sertraline	1		✓	
ZOLOFT	3		✓	✓
Antidepressants – Tricyclic Agents				
ANAFRANIL	3			
amitriptyline	1			
amoxapine	1			
clomipramine	1			
desipramine	1			
doxepin	1			
imipramine	1			
NORPRAMIN	3			
nortriptyline	1			
PAMELOR	3			
protriptyline	1			
SURMONTIL	3			
TOFRANIL	3			
TOFRANIL-PM	3			
trimipramine	1			
VIVACTIL	3			
Antiparkinsonian Adjuvants				
LODOSYN	3			
Antiparkinsonian Anticholinergic				
benztropine	1			
trihexyphenidyl	1			
Antiparkinsonian COMT Inhibitors				
COMTAN	3			
entacapone	1			
TASMAR	3			
Antiparkinsonian Dopaminergic				
amantadine	1			
bromocriptine	1			
carbidopa/levodopa	1			

Medication Name	Pharmacy Benefit Plans			
	4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Antiparkinsonian Dopaminergic (continued)				
carbidopa/ levodopa ODT	1			
carbidopa/ levodopa SR	1			
carbidopa/levodopa/ entacapone	1			
MIRAPEX	3			✓
MIRAPEX ER	2			✓
NEUPRO	3			
PARCOPA	3			
PARLODEL	3			
pramipexole	1			
REQUIP	3			
REQUIP XL	3			✓
ropinirole	1			
ropinirole er	1			
SINEMET	3			
SINEMET CR	3			
STALEVO	3			
Antiparkinsonian Monoamine Oxidase Inhibitor				
AZILECT	2			
ELDEPRYL	3			
selegiline	1			
Antipsychotics – Atypical				
ABILIFY	3		✓	
ABILIFY DISC	3		✓	
clozapine	1		✓	
CLOZARIL	3		✓	
FANAPT	3		✓	✓
FAZACLO	3		✓	
GEODON	3		✓	✓
INVEGA	3		✓	✓
LATUDA	3		✓	✓
olanzapine	1		✓	
olanzapine ODT	1		✓	
quetiapine	1		✓	
RISPERDAL	3		✓	✓
RISPERDAL M	3		✓	✓
risperidone	1		✓	
risperidone ODT	1		✓	
SAPHRIS	3		✓	✓
SEROQUEL	3		✓	✓
SEROQUEL XR	2		✓	

Medication Name	4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Antipsychotics – Atypical (continued)				
ZYPREXA	3		✓	✓
ZYPREXA ZYDIS	3		✓	✓
ziprasidone	1		✓	
Antipsychotics – Combinations				
chlordiazepoxide/ amitriptyline	1			
olanzapine/fluoxetine	1		✓	
perphenazine/ amitriptyline	1			
SYMBYAX	3		✓	
Antipsychotics – First Generation				
chlorpromazine	1			
compro	1			
fluphenazine	1			
haloperidol	1			
loxapine	1			
perphenazine	1			
prochlorperazine	1			
thioridazine	1			
thiothixene	1			
trifluoperazine	1			
Antipsychotics – Miscellaneous				
EQUETRO	3			
Attention Deficit Disorder				
ADDERALL	3	✓	✓	
ADDERALL XR	3	✓	✓	
amphetamine/dextro-amphetamine	1	✓	✓	
amphetamine/dextro-amphetamine SR	1	✓	✓	
CONCERTA	3	✓	✓	
DAYTRANA	2	✓	✓	
DESOXYN	3	✓	✓	
DEXEDRINE	3	✓	✓	
dexmethylphenidate	1	✓	✓	
dextroamphetamine	1	✓	✓	
dextroampheta-mine CR	1	✓	✓	
FOCALIN	3	✓	✓	
FOCALIN XR	3	✓	✓	
INTUNIV	3		✓	
KAPVAY	3		✓	
METADATE CD	3	✓	✓	

Pharmacy Benefit Plans

Medication Name	4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Attention Deficit Disorder (continued)				
metadate ER	1	✓	✓	
methamphetamine	1	✓	✓	
methylin	1	✓	✓	
METHYLIN chew/soln	3	✓	✓	
methylin ER	1	✓	✓	
methylphenidate	1	✓	✓	
methylphenidate SR	1	✓	✓	
PROCENTRA	3	✓	✓	
RITALIN	3	✓	✓	
RITALIN LA	3	✓	✓	
RITALIN SR	3	✓	✓	
STRATTERA	2		✓	
VYVANSE	2	✓	✓	
Chemical Dependency				
ANTABUSE	3			
CAMPRAL	3			
naltrexone	1			
Fibromyalgia				
CYMBALTA #	2		✓	
LYRICA	2		✓	
SAVELLA	2		✓	
Huntington's Disease – Chorea				
XENAZINE ***	4	✓	✓	
Lithium				
lithium carbonate	1			
lithium carbonate CR	1			
lithium citrate	1			
LITHOBID	3			
Migraine Products				
ALSUMA	3		✓	✓
AMERGE	3		✓	✓
AXERT	3		✓	✓
CAMBIA	3		✓	
FROVA	3		✓	✓
IMITREX	3		✓	✓
MAXALT #	3		✓	✓
MAXALT MLT #	3		✓	✓
MIGRANAL	3		✓	✓
naratriptan	1		✓	
RELPAX	3		✓	✓
sumatriptan	1		✓	

4-Tier Member Guide

Medication Name	Pharmacy Benefit Plans			
	4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Migraine Products (continued)				
SUMAVEL	3		✓	✓
TREXIMET	3		✓	✓
ZOMIG #	3		✓	✓
ZOMIG ZMT #	3		✓	✓
Multiple Sclerosis Agents				
AMPYRA	4	✓	✓	
AVONEX	4	✓		
BETASERON	4	✓		
COPAXONE	4	✓		
EXTAVIA	4	✓		
GILENYA	4	✓	✓	
REBIF	4	✓		
TYSABRI	4	✓		
Narcotic Agonists				
ABSTRAL	3	✓	✓	✓
ACTIQ	3	✓	✓	
AVINZA	3		✓	✓
codeine phosphate	1			
codeine sulfate	1			
CONZIP	3		✓	✓
DEMEROL	3			
DILAUDID	3			
DURAGESIC	3		✓	✓
EXALGO #	3		✓	✓
fentanyl lozenge	1	✓	✓	
fentanyl patch	1		✓	
FENTORA	3	✓	✓	
hydromorphone	1			
KADIAN	3		✓	✓
LAZANDA	3	✓	✓	✓
levorphanol	1			
meperidine	1			
methadone	1		✓	
methadose	1		✓	
morphine sulfate	1			
morphine sulfate CR	1		✓	
MS CONTIN	3		✓	
NUCYNTA	2		✓	✓
NUCYNTA ER	2		✓	
ONSOLIS	3	✓	✓	
OPANA	3			✓

Medication Name	Pharmacy Benefit Plans			
	4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Narcotic Agonists (continued)				
OPANA ER #	2		✓	
ORAMORPH SR	3		✓	
OXECTA	3			
oxycodone	1			
OXYCONTIN CR #	2		✓	
oxymorphone ER	1		✓	
RYBIX ODT	3			
SUBSYS SPRAY	3	✓	✓	✓
tramadol	1			
tramadol ER	1		✓	
ULTRAM	3			
ULTRAM ER	3		✓	
XOLOX	3			
Narcotic Combinations				
acetaminophen/ codeine	1			
butalbital/ acetaminophen/ caffeine/codeine	1			
butalbital/aspirin/ caffeine/codeine	1			
CAPITAL/CODEINE	3			
COCET	3			
COCET PLUS	3			
FIORICET/CODEINE	3			
FIORINAL/CODEINE	3			
hydrocodone/ acetaminophen	1			
hydrocodone/ ibuprofen	1			
IBUDONE	3			
LIQUICET	3			
LORCET	3			
LORCET PLUS	3			
LORTAB	3			
MAGNACET	3			
MAXIDONE	3			
NORCO	3			
oxycodone/ acetaminophen	1			
oxycodone/aspirin	1			
oxycodone/ibuprofen	1		✓	
ORBIVAN	3			

Medication Name	4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Narcotic Combinations (continued)				
ORBIVAN CF	3			
pentazocine/ acetaminophen	1			
PERCOCET	3			
PERCODAN	3			
PHRENILIN	3			
REPREXAIN	3			
ROXICET	3			
STAGESIC	1			
STAFLEX	3			
SYNALGOS DC	3			
TYLENOL/CODEINE	3			
TYLOX	3			
ULTRACET	3			
VICODIN	3			
VICODIN ES	3			
vicodin HP	1			
VICOPROFEN	3			
XODOL	3			
ZOLVIT	3			
ZYDONE	3			
Narcotic Partial Agonists				
buprenorphine	1	✓	✓	
butorphanol	1		✓	
BUTRANS	2	✓	✓	
pentazocine/naloxone	1		✓	
SUBOXONE film	2	✓	✓	
SUBOXONE sublingual tablet	3	✓	✓	
SUBUTEX	3	✓	✓	✓
Postherpetic Neuralgia (PHN) Agents				
GRALISE	3	✓	✓	✓
Premenstrual Dysphoric Disorder				
SARAFEM	3		✓	
Psychotherapeutic and Neurological Agents				
ergoloid mesylate	1			
ORAP	3			
modafinil	1	✓	✓	
NUVIGIL	3	✓	✓	
PROVIGIL	3	✓	✓	
XYREM	3	✓	✓	
Restless Leg Syndrome				
HORIZANT	3	✓	✓	

Pharmacy Benefit Plans

Medication Name	4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Sedative/Hypnotics – Barbiturate				
BUTISOL SODIUM	3			
MEBARAL	3			
phenobarbital	1			
SECONAL	3			
Sedative/Hypnotics – Nonbarbiturates				
AMBIEN	3		✓	✓
AMBIEN CR	3		✓	✓
chloral hydrate	1			
DORAL	3			
EDLUAR	3		✓	✓
estazolam	1			
flurazepam	1			
HALCION	3			
INTERMEZZO	3	✓	✓	✓
LUNESTA	3		✓	
midazolam	1			
ROZEREM	3		✓	✓
SILENOR	3		✓	✓
SONATA	3		✓	✓
temazepam	1			
triazolam	1			
zaleplon	1		✓	
zolpidem	1		✓	
zolpidem ER	1		✓	
ZOLPIMIST	3		✓	✓
Miscellaneous				
CUVPOSA	3			
NUEDEXTA	3	✓	✓	
Dermatological Agents				
Acne Products				
ACANYA	3			✓
ACZONE	3			
adapalene	1	✓		
AKNE-MYCIN	3			
amnesteem	1	✓		
ATRALIN	3	✓		✓
avita	1	✓		
AZELEX	3			
BENZACLIN	3			✓
BENZAMYCIN	3			✓
BENZEFOAM	3			
BENZEFOAM ULTRA	3			✓

4-Tier Member Guide

Medication Name	Pharmacy Benefit Plans			
	4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Acne Products (continued)				
BENZIQ	3			
BENZIQ LS	3			
BENZIQ wash	3			
benzoyl peroxide	1			
claravis	1	✓		
CLARIFOAM EF	3			
clindamax	1			
clindamycin	1			
clindamycin/ benzoyl peroxide	1			
DIFFERIN 0.1% cream/gel/lotion	3	✓		✓
DIFFERIN 0.3% gel	2	✓		
DUAC	3			✓
clindamycin/ benzoyl peroxide 1.2-5% gel	1			
EPIDUO	2	✓		
erythromycin	1			
erythromycin/ benzoyl peroxide	1			
EVOCLIN	3			
isotretinoin	1	✓		
KLARON	3			
lavoclen	1			
METROCREAM	3			
METROGEL 1% only	3			
METROLOTION	3			
metronidazole	1			
myorisan	1	✓		
NEOBENZ	3			
NORITATE	3			
NUOX	3			
pacnex wash	1			
PACNEX HP	3			
PACNEX LP	3			
PACNEX MX	3			
PLEXION cloth	3			
PLEXION emulsion	3			
PLEXION SCT	3			
RETIN-A	3	✓		✓
RETIN-A MICRO	2	✓		
sodium sulfacet-amide/sulfur	1			

Medication Name	Pharmacy Benefit Plans			
	4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Acne Products (continued)				
sotret	1	✓		
SSS 10-4	3			
SUMADAN WASH	3			
SUMAXIN	3			
SUMAXIN TS	3			
tretinoin	1	✓		
TRETIN-X	3	✓		✓
TRIAZ	3			
VANOXIDE	3			
VELTIN	3	✓		✓
ZACARE	3			
Z-CLINZ	3			
ZIANA	2	✓		
Antibiotics – Topical				
ALTABAX	3			
BACTROBAN	3			
centany	3			
gentamicin	1			
mupirocin	1			
Antifungals – Topical				
ALOQUIN	3			
ciclopirox	1	✓		
clotrimazole/ betamethasone	1			
econazole	1			
ERTACZO	3			
EXELDERM	3			
HALOTIN	3			
hydrocortisone/ iodoquinol	1			
ketoconazole	1			
LOPROX	3			
LOTRISONE	3			
NAFTIN	3			
nystatin	1			
nystatin/ triamcinolone	1			
OXISTAT	3			
PENLAC	3	✓		
VUSION	3			
XOLEGEL	3			
Antineoplastics and Keratolytics – Topical				
CARAC	3			

Medication Name	4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Antineoplastics and Keratolytics – Topical (continued)				
EFUDEX	3			
FLUOROPLEX	3			
fluorouracil	1			
LEVULAN KERA	3			
METVIXIA	3			
PANRETIN	2			
PICATO	3	✓	✓	
SOLARAZE	3			
TARGRETIN	2			
Antipruritics and Topical Anesthetics				
cocaine hcl	1			
lidocaine	1			
lidocaine/prilocaine	1			
LIDODERM #	2			✓
prudoxin	1			
QUTENZA	3			
SYNERA	3			
ZONALON	3			
Antipsoriatics				
8-MOP	3			
AMEVIVE	4	✓		
calcipotriene	1			
CALCITRENE	3			✓
calcitriol	1			
DOVONEX	3			
DRITHO-SCALP	3			
ENBREL	4	✓		
HUMIRA	4	✓		
KINERET	4	✓		
OXSORALEN-UL	3			
REMICADE	4	✓		
SORIATANE	2			
SORILUX	3			✓
STELARA	4	✓		
TACLONEX	3			
TAZORAC #	2	✓		
SIMPONI	4	✓		
VECTICAL	3			
Antiseborrheic Products				
EXTINA	3			
ketoconazole foam	1			

Pharmacy Benefit Plans

Medication Name	4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Antiseborrheic Products (continued)				
SCALACORT DK	3			
selenium sulfide	1			
sulfacetamide sodium	1			
Antiviral – Topical				
acyclovir	1			
DENAVIR	3			
XERESE	3			
ZOVIRAX	3			
Corticosteroids – Topical				
alclometasone	1			
amcinonide	1			
augmented betamethasone dipropionate	1			
betamethasone valerate	1			
clobetasol	1			
CLOBEX spray	2			
CLOBEX lotion/ shampoo	3			✓
CLODERM	3			✓
CORDRAN	3			
CUTIVATE	3			✓
DERMATOP	3			
DESONATE	3			✓
desonide	1			
desoximetasone	1			
diflorasone	1			
DIPROLENE AF	3			
ELOCON	3			
fluocinolone acetonide	1			
fluocinonide	1			
fluticasone	1			
HALOG	3			
hydrocortisone	1			
hydrocortisone butyrate	1			
hydrocortisone valerate	1			
hydrocortisone/ pramoxine	1			
lidocaine/ hydrocortisone	1			
LOCOID	3			✓

4-Tier Member Guide

Medication Name	4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Corticosteroids – Topical (continued)				
LOCOID LIPOCREAM #	3			✓
LUXIQ #	3			✓
mometasone	1			
NUZON	3			
OLUX	3			✓
OLUX-E #	3			✓
prednicarbate	1			
TACLONEX	3			
triamcinolone	1			
ULTRAVATE	3			
VANOS #	3			✓
VERDESO	3			✓
Keratolytic/Antimitotic Agents				
CONDYLOX	3			
podofilox	1			
Immunomodulating Agents – Topical				
ALDARA	3	✓	✓	
ELIDEL	2	✓		
imiquimod	1	✓	✓	
PROTOPIC	2	✓		
ZYCLARA	3	✓	✓	
Rosacea Agents				
FINACEA	3			
metronidazole	1			
ORACEA	2	✓	✓	
Scabicides & Pediculicides				
EURAX	3			
lindane	1			
NATROBA	3			
permethrin	1			
SKLICE	3			
spinosad	1			
ULESFIA	3			
Sinecatechins				
VEREGEN	3			
Endocrine System				
Acromegaly				
octreotide	4			
SANDOSTATIN	4			
SANDOSTATIN LAR	4			
SOMATULINE	4			
SOMAVERT	4			

Medication Name	4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Antidiuretic Agents				
DDAVP PR ≤ 17 yr old	3	✓		✓
desmopressin PR ≤ 17 yr old	1	✓		
minirin PR ≤ 17 yr old	1	✓		
STIMATE PR ≤ 17 yr old	3	✓		
Contraceptives – Emergency				
ELLA	3			
next choice	1			
PLAN B	3			
levonorgesterol tab 0.75 mg	1			
Contraceptives – Injectable Progestins				
medroxyprogesterone	1			
DEPO-PROVERA	3			
Contraceptives – Oral				
altavera	1			
amethia lo	1			
amethyst	1			
apri	1			
aranelle	1			
aviane	1			
BEYAZ	3			
BREVICON	3			
briellyn	1			
camrese	1			
camrese lo	1			
cesia	1			
cryselle	1			
CYCLESSA	3			
DESOGEN	3			
ELLA	3			
emoquette	1			
enpresse	1			
ESTROSTEP FE	3			
FEMCON	3			
GENERESS FE	3			
gianvi	1			
gildess FE	1			
jolessa	1			
junel 1.5/30	1			
junel 1/20	1			

Medication Name	Pharmacy Benefit Plans 4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Contraceptives – Oral (continued)				
junel FE 1.5/30	1			
junel FE 1/20	1			
kariva	1			
kelnor	1			
leena	1			
lessina	1			
levora	1			
LO LOESTRIN FE	3			
LO/OVRAL	3			
LOESTRIN 1.5/30	3			
LOESTRIN 1/20	3			
LOESTRIN FE	3			
LOESTRIN FE 1.5/30	3			
LOESTRIN-24	3			
loryna	1			
LOSEASONIQUE	2			
low-ogestrel	1			
lutera	1			
LYBREL	3			
microgestin 1.5/30	1			
microgestin 1/20	1			
microgestin FE 1.5/30	1			
microgestin FE 1/20	1			
MIRCETTE	3			
MODICON 0.5/35	3			
mononessa	1			
NATAZIA	3			
necon 0.5/35	1			
necon 1/35	1			
necon 1/50	1			
necon 10/11	1			
necon 7/7/7	1			
NORDETTE	3			
NORINYL 1+35	3			
NORINYL 1+50	3			
nortrel 0.5/35	1			
nortrel 1/35	1			
nortrel 7/7/7	1			
ocella	3			
ogestrel	1			
ORTHO TRI-CYCLEN	3			
ORTHO TRI-CYCLEN LO	3			

Medication Name	Pharmacy Benefit Plans 4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Contraceptives – Oral (continued)				
ORTHO-CEPT	3			
ORTHO-CYCLEN	3			
ORTHO-NOVUM 1/35	3			
ORTHO-NOVUM 7/7/7	3			
OVCON 35	3			
OVCON 50	3			
portia	1			
previfem	1			
quasense	1			
reclipsen	1			
SEASONALE	3			
SEASONIQUE	2			
amethia	1			
solia	1			
sprintec	1			
sronyx	1			
syedah	1			
trinessa	1			
TRI-NORINYL	3			
tri-previfem	1			
tri-sprintec	1			
trivora	1			
velivet	1			
YASMIN	3			
YAZ	3			
zarah	1			
zenchent FE	1			
zeosa	1			
zovia 1/35E	1			
zovia 1/50E	1			
Contraceptives – Oral Progestins				
camila	1			
errin	1			
jolivette	1			
nora-be	1			
NOR-QD	3			
ORTHO MICRONOR	3			
Contraceptives – Transdermal				
ORTHO EVRA	3			
Contraceptives – Vaginal				
NUVARING	3			

4-Tier Member Guide

Medication Name	Pharmacy Benefit Plans			
	4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Corticotropin				
ACTHAR HP	4	✓		
Diabetes – Alpha-Glucosidase Inhibitors				
acarbose	1			
GLYSET #	3			
PRECOSE	3			
Diabetes – Amylin Analogs				
SYMLIN	2	✓		
SYMLINPEN	2	✓		
Diabetes – Biguanides and Combinations				
FORTAMET	3			
glipizide/metformin	1			
GLUCOPHAGE	3			
GLUCOPHAGE XR	3			
GLUCOVANCE	3			
GLUMETZA	3			
glyburide/metformin	1			
METAGLIP	3			
metformin	1			
metformin ER	1			
RIOMET	3			
Diabetes – Dopamine Receptor Agonists				
CYCLOSET	2			
Diabetes – DPP-IV Inhibitors and Combinations				
JANUMET	2			
JANUMET XR	2			
JANUVIA	2			
JENTADUETO	2			
KOMBIGLYZE	2			
ONGLYZA	2			
TRADJENTA	2			
Diabetes – Glucocorticoid Receptor Antagonist				
KORLYM	4	✓	✓	
Diabetes – Incretin Mimetic Agents				
BYDUREON	2		✓	
BYETTA	3		✓	
VICTOZA	2		✓	
Diabetes – Insulin				
APIDRA	3			
HUMALOG products	2			
HUMULIN products	2			
LANTUS	2			
LANTUS SOLOSTAR	2			

Medication Name	Pharmacy Benefit Plans			
	4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Diabetes – Insulin (continued)				
LEVEMIR	2			
LEVEMIR FLEXPEN	2			
NOVOLIN products	3			✓
NOVOLOG products	2			
RELION products	3			✓
Diabetes – Meglitinides and Combinations				
nateglinide	1			
PRANDIMET	3			
PRANDIN #	2			
STARLIX	3			
Diabetes – Sulfonylureas				
AMARYL	3			
chlorpropamide	1			
DIABETA	3			
glimepiride	1			
glipizide	1			
glipizide ER	1			
glipizide XL	1			
GLUCOTROL	3			
GLUCOTROL XL	3			
glyburide	1			
glyburide micronized	1			
GLYNASE	3			
tolazamide	1			
tolbutamide	1			
Diabetic Supplies				
BD insulin syringes	2			
BD lancets	2			
BD pen needles	2			
FREESTYLE glucose test strips	2		✓	
FREESTYLE LITE glucose test strips	2		✓	
FREESTYLE INSULINX	2		✓	
glucose test strips (any other brand name)	3		✓	✓
insulin syringes (any brand name other than BD)	3			
insulin syringes (any generic)	1			
lancets (any brand name other than BD)	3			
Diabetic Supplies (continued)				

Medication Name	4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
lancets (any generic)	1			
ONE TOUCH FAST TAKE glucose test strips	2		✓	
ONE TOUCH ULTRA glucose test strips	2		✓	
ONE TOUCH VERIO IQ glucose test strips	2		✓	
pen needles (any brand name other than BD)	3			
pen needles (any generic)	1			
PRECISION QID glucose test strips	2		✓	
PRECISION SOF-TACT glucose test strips	2		✓	
PRECISION XTRA glucose test strips	2		✓	
PRECISION XTRA ketone test strips	2			
Diabetes – Thiazolidinediones (TZDs) and Combinations				
ACTOPLUS MET	3			✓
pioglitazone/ metformin	1			
ACTOPLUS MET XR	3			✓
ACTOS	3			✓
pioglitazone	1			
AVANDAMET #	3	✓		
AVANDARYL #	3	✓		
AVANDIA #	3	✓		
DUETACT #	3			✓
JUVISYNC	2			
Diagnostic Drug				
THYROGEN	4			
Fabry Disease				
FABRAZYME	4	✓		
Fertility Agents				
BRAVELLE	4	✓		
CETROTIDE	4	✓		
chorionic gonadotropin	4	✓		
FOLLISTIM AQ	4	✓		
GANIRELIX	4	✓		
Fertility Agents (continued)				
GONAL-F	4	✓		
GONAL-F RFF	4	✓		
leuprolide	4			
MENOPUR	4	✓		
novarel	4	✓		
OVIDREL	4	✓		
pregnyl	4	✓		
REPRONEX	4	✓		
Gaucher Disease				
CERADASE ****	4	✓		
CEREZYME	4	✓		
ELELYSO	4	✓		
VPRIV	4	✓		
ZAVESCA ****	4	✓		
Glucose Elevating Agents				
GLUCAGON	3			
PROGLYCEM	2			
Gout Agents				
allopurinol	1			
COLCRYS	2			
KRYSTEXXA	4	✓		
probenecid	1			
probenecid/colchicine	1			
ULORIC	3			✓
ZYLOPRIM	3			
Growth Factors, Insulin-like				
INCRELEX	4	✓		
Growth Hormone Agents				
GENOTROPIN	4	✓		
HUMATROPE	4	✓		
NORDITROPIN	4	✓		
NUTROPIN	4	✓		
NUTROPIN AQ	4	✓		
NUTROPIN NUSPIN	4	✓		
OMNITROPE	4	✓		
SAIZEN	4	✓		
SEROSTIM	4	✓		
SOMAVERT	4	✓		
TEV-TROPIN	4	✓		
ZORBTIVE	4	✓		
Hereditary Tyrosinemia				
ORFADIN ****	4			
Homocystinuria				

4-Tier Member Guide

Medication Name	Pharmacy Benefit Plans: 4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
CYSTADANE	4			
Hormone Replacement – Androgens				
ANDRODERM	2			
ANDROGEL	2			
AXIRON	3			✓
danazol	1			
FORTESTA	3			
STRIANT	3			✓
TESTIM	3			✓
testosterone inj.	PMED			
Hormone Replacement – Estrogens				
ALORA	3		✓	
CENESTIN #	2			
CLIMARA	3		✓	
DIVIGEL	2			
ELESTRIN	3			
ENJUVIA	2			
ESTRACE	3			
ESTRADERM	3		✓	
estradiol patch	1		✓	
estradiol tab	1			
ESTRASORB	3			
ESTROGEL	3			
estropipate	1			
EVAMIST	2			
MENEST	2			
MENOSTAR	3		✓	
ortho-est	1			
PREMARIN	3			
VIVELLE-DOT #	3		✓	
Hormone Replacement – Estrogen Combinations				
ACTIVELLA	3			
ANGELIQ	3			
CLIMARA PRO	3		✓	
COMBIPATCH	3		✓	
estradiol/norethindrone acetate	1			
FEMHRT	3			
FEMHRT LOW DOSE	3			
FEMTRACE	3			
jinteli	1			
PREFEST	3			

Medication Name	Pharmacy Benefit Plans: 4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Hormone Replacement – Estrogen Combinations (continued)				
PREMPHASE	3			
PREMPRO	3			
Hormone Replacement – Progestins				
medroxyprogesterone acetate	1			
norethindrone acetate	1			
MAKENA	4	✓	✓	
progesterone micronized cap	1			
PROMETRIUM	4			
Hunter Syndrome				
ELAPRASE ****	4	✓		
Hyperammonemia				
AMMONUL	4			
BUPHENYL	4			
Hyperparathyroidism				
HECTOROL	4			
SENSIPAR	4			
ZEMPLAR	4			
LHRH/GnRH Agonist Analog Pituitary Suppressants				
SUPPRELIN LA	4			
SYNAREL	4			
Metabolic Modifiers				
CARNITOR	3			
SUCRAID	3			
Mucopolysaccharidosis I				
ALDURAZYME	4	✓		
Mucopolysaccharidosis VI				
NAGLAZYME	4	✓		
Phenylketonuria				
KUVAN	4			
Pompe Disease				
LUMIZYME	4	✓		
MYOZYME	4	✓		
Steroids – Glucocorticosteroids				
budesonide SR	1		✓	
cortisone AC	1			
dexamethasone	1			
ENTOCORT EC	3		✓	✓
FLO-PRED	3			
hydrocortisone	1			

Medication Name	4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Steroids – Glucocorticosteroids (continued)				
methylprednisolone	1			
MILLIPRED	3			
ORAPRED	3			
prednisolone	1			
prednisone	1			
VERIPRED	3			
Steroids – Mineralocorticoids				
fludrocort	1			
Thyroid Hormones				
ARMOUR THYROID	3			
CYTOMEL	3			
levothroid	1			
levothyroxine	1			
levoxyl	1			
liothyronine sodium	1			
SYNTHROID	3			
THYROLAR	3			
TIROSINT	3			
unithroid	1			
Thyroid – Antithyroid Agents				
methimazole	1			
propylthiouracil	1			
TAPAZOLE	3			
Vasopressin Receptor Antagonists				
SAMSCA	4	✓		
Gastrointestinal System				
Acid Supressants – H-2 Antagonists				
AXID	3			
cimetidine	1			
famotidine	1			
nizatidine	1			
PEPCID	3			
ranitidine	1			
ZANTAC	3			
Acid Suppressants – Proton Pump Inhibitors				
ACIPHEX #	3	✓	✓	✓
DEXILANT	2	✓	✓	
lansoprazole	1	✓	✓	
lansoprazole / ODT	1	✓	✓	
NEXIUM	2	✓	✓	
omeprazole	1	✓	✓	
omeprazole/ bicarbonate	1	✓	✓	

Pharmacy Benefit Plans

Medication Name	4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Acid Suppressants – Proton Pump Inhibitors (continued)				
pantoprazole	3	✓	✓	
PREVACID	3	✓	✓	✓
PREVACID SOLUTAB	3	✓	✓	✓
PRILOSEC	3	✓	✓	✓
PROTONIX	3	✓	✓	✓
ZEGERID	3	✓	✓	✓
Anal Fissures				
RECTIVE	3	✓		
Antiemetics – 5-HT3 Receptor Antagonists				
ALOXI	MED	✓		
ANZEMET injectable	MED	✓		
ANZEMET tablets	3		✓	
granisetron	1		✓	
GRANISOL	3		✓	
ondansetron	1		✓	
ondansetron ODT	1		✓	
SANCUSO PAD	3		✓	
ZOFRAN	3		✓	
ZOFRAN ODT	3		✓	
ZUPLENZ	3		✓	
Antiemetics – Anticholinergic				
TRANSDERM-SCOP	3			
trimethobenzamide	1			
Antiemetics – Miscellaneous				
CESAMET	3		✓	
dronabinol	1	✓		
EMEND capsules	3		✓	
EMEND injectable	MED	✓		
MARINOL	3	✓		
Anti-Ulcer Drugs				
misoprostol	1			
sucralfate	1			
Bowel Evacuants				
COLYTE	3			
gavilyte-g	1			
GOLYTELY	3			
HALFLYTELY	3			
MOVIPREP	2			
NULYTELY	3			
OSMOPREP	2			
peg 3350	1			

4-Tier Member Guide

Medication Name	Pharmacy Benefit Plans			
	4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Bowel Evacuants (continued)				
polyethylene glycol	1			
trilyte	1			
SUPREP	3			
VISICOL	3			
Crohn's Disease				
CIMZIA	4	✓		
HUMIRA	4	✓		
REMICADE	4	✓		
Chronic Constipation Agent				
AMITIZA	3	✓		
Gallstone Solubilizing Agents				
CHENODAL	3			
URSO 250	3			
URSO FORTE	3			
ursodiol	1			
GI Antiallergy Agents				
cromolyn sodium concentrate	1			
GASTROCROM	3			
GI Stimulants				
metoclopramide	1			
METOZOLV ODT	3			
H. pylori Agents				
HELIDAC	3			
OMECLAMOX	3		✓	
PREVPAC	3		✓	
PYLERA	2			
Inflammatory Bowel Agents				
APRISO	2		✓	
ASACOL	2		✓	
ASACOL HD	2		✓	
AZULFIDINE	3		✓	
AZULFIDINE ENTABS	3		✓	
balsalazide	1		✓	
CANASA	2		✓	
COLAZAL	3		✓	
DIPENTUM	3		✓	
LIALDA	2		✓	
mesalamine	1			
PENTASA	3		✓	
sulfasalazine	1		✓	
sulfasalazine ER	1		✓	

Medication Name	Pharmacy Benefit Plans			
	4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Inflammatory Bowel Agents (continued)				
sulfazine	1		✓	
sulfazine EC	1		✓	
Irritable Bowel Syndrome (IBS) Agents				
LOTRONEX	3	✓		
Laxatives				
KRISTALOSE	3			
lactulose	1			
Opioid Induced Constipation				
RELISTOR	2	✓	✓	
Pancreatic Enzymes				
CREON	2			
DIGEX	3			
PANCRELIPASE	3			
PANCREAZE	3			
PERTZYE	3			✓
VIOKACE	3			✓
ZENPEP	2			
Rectal Steroids				
colocort	1			
CORTIFOAM	3			
Genitourinary System				
Cystinosis Agents				
CYSTAGON	3			
Erectile Dysfunction (applies only to plans with ED coverage)				
CAVERJECT	3		✓	
CIALIS	2		✓	
EDEX	3		✓	
LEVITRA	3		✓	✓
MUSE	3		✓	
STAXYN	3		✓	✓
VIAGRA #	3		✓	✓
Interstitial Cystitis Agents				
ELMIRON	2	✓	✓	
RIMSO	MED			
Phosphate Binders				
calcium acetate	1			
ELIPHOS	3			
FOSRENOL #	2			
PHOSLO	3			✓
PHOSLYRA	2			
RENAGEL	3			✓
RENVELA	2			

Medication Name	4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Prostatic Hypertrophy Agents				
alfuzosin	1	✓		
AVODART	2	✓		
CARDURA XL	3			
CIALIS 2.5 mg, 5 mg	2	✓	✓	
finasteride	1	✓		
FLOMAX	3	✓		✓
JALYN	2	✓		
PROSCAR	3	✓		
RAPAFLO	2	✓		
tamsulosin	1	✓		
UROXATRAL	3	✓		✓
Urinary Antispasmodics				
bethanechol	1			
DETROL	3			✓
DETROL LA	3			✓
DITROPAN XL	3			✓
ENABLEX	2			
flavoxate	1			
hyoscyamine	1			
oxybutynin	1			
oxybutynin ER	1			
GELNIQUE	2			
OXYTROL	3			✓
SANCTURA	3			✓
SANCTURA XR	3			✓
tolterodine	1			
TOVIAZ	3			✓
trospium	1			
URECHOLINE	3			
VESICARE	2			
Urinary Anti-infectives and Combinations				
MACROBID	3			
methenamine hippurate	1			
methenamine mandelate	1			
MONUROL	3			
nitrofurantoin	1			
nitrofurantoin monohydrate macrocrystal	1			
UREX	3			
URIBEL	3			
UTA	3			

Pharmacy Benefit Plans

Medication Name	4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Vaginal Anti-infectives				
CLEOCIN VAGINAL	3			
clindamax	1			
METROGEL VAGINAL	3			
nystatin vaginal	1			
TERAZOL	3			
terconazole	1			
tioconazole	1			
vandazole	1			
zazole	1			
Vaginal Estrogens				
ESTRACE VAGINAL	3			
ESTRING	3			
FEMRING	2			
PREMARIN VAGINAL	3			
VAGIFEM	3			
Vaginal Progestins				
CRINONE	2			
ENDOMETRIN	2			
PROGESTERONE VAGINAL	3			
Infections and Infestations				
Antibacterials – Aminoglycosides				
neomycin	1			
paromomycin	1			
Antibacterials – Ampicillins and Combinations				
amoxicillin	1			
amoxicillin/K clavulanate	1			
amoxicillin/K clavulanate SR	1			
ampicillin	1			
AUGMENTIN	3			
AUGMENTIN ES	3			
AUGMENTIN XR	3			
MOXATAG	3			
Antibacterials – Cephalosporins, 1st Generation				
cefadroxil	1			
cephalexin	1			
Antibacterials – Cephalosporins, 2nd Generation				
cefaclor	1			
cefaclor ER	1			
cefprozil	1			
CEFTIN	3			
cefuroxime	1			

4-Tier Member Guide

Medication Name	Pharmacy Benefit Plans: 4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Antibacterials – Cephalosporins, 3rd Generation				
CEDAX	3			
cefdinir	1			
cefditoren	1			
cefpodoxime	1			
SPECTRACEF	3			
SUPRAX	3			
Antibacterials – Fluoroquinolones				
AVELOX	2	✓		
AVELOX ABC	2	✓		
CIPRO	3	✓		
ciprofloxacin	1	✓		
ciprofloxacin ER	1	✓		
FACTIVE	3	✓		
LEVAQUIN	3	✓		
levofloxacin	1	✓		
NOROXIN	3	✓		
ofloxacin	1	✓		
Antibacterials – Ketolides				
KETEK	3			
Antibacterials – Macrolides				
azithromycin	1			
BIAXIN	3			
BIAXIN XL	3			
clarithromycin	1			
clarithromycin SR	1			
DIFICID	3	✓	✓	
e.e.s.	1			
erythrocin	1			
erythromycin	1			
erythromycin delayed release particles	1			
erythromycin ethylsuccinate	1			
PCE	3			
ZITHROMAX	3			
ZMAX	3			
Antibacterials – Miscellaneous				
clindamycin	1			
metronidazole	1			
NEBUPENT	2			
tinidazole	1			
TINDAMAX	3			
trimethoprim	1			
XIFAXAN	3	✓	✓	
ZYVOX	2	✓		

Medication Name	Pharmacy Benefit Plans: 4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Antibacterials – Penicillins				
dicloxacillin sodium	1			
penicillin VK	1			
Antibacterials – Sulfonamides				
sulfadiazine	1			
Antibacterials – Tetracyclines				
ADOXA	3	✓		
avidoxy	1	✓		
demeclocycline	1	✓		
DORYX	3	✓		
doxycycline hyclate	1	✓		
doxycycline monohydrate	1	✓		
DYNACIN	3	✓		
MINOCIN	3	✓		
minocycline	1	✓		
MONODOX	3	✓		
NUTRIDOX	3	✓		
ORAXYL	3	✓		
SOLODYN	3	✓		
tetracycline	1	✓		
VIBRAMYCIN	3	✓		
Antifungals				
ANCOBON	3			
BIO-STATIN	3			
clotrimazole troche	1			
DIFLUCAN (all other strengths)	3	✓		
DIFLUCAN 150 mg	3		✓	
fluconazole (all other strengths)	1	✓		
fluconazole 150 mg	1		✓	
flucytosine	1			
GRIFULVIN V	3			
GRIS-PEG	3			
itraconazole	1	✓		
ketoconazole	1			
LAMISIL	3	✓		
NOXAFIL	3			
nystatin	1			
ORAVIG	3		✓	
SPORANOX	3	✓		
terbinafine	1	✓		
VFEND	3			
voriconazole	1			

Medication Name	4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Antiinfective Agents – Miscellaneous				
colistimethate sodium	4			
COLY-MYCIN M	4			
Antimalarials and Combinations				
ARALEN	3	✓		
atovaquone/proguanil	1	✓		
chloroquine	1	✓		
COARTEM	3	✓		
DARAPRIM	3	✓		
hydroxychloroquine	1	✓		
MALARONE	3	✓		
mefloquine	1	✓		
PLAQUENIL	3	✓		
primaquine	1			
QUALAQUIN	3	✓	✓	
quinine sulfate	1	✓	✓	
Antimycobacterial Agents				
dapsone	1			
ethambutol	1			
isonarif	1			
isoniazid	1			
MYAMBUTOL	2			
pyrazinamide	1			
RIFAMATE	3			
rifampin	1			
RIFATER	3			
Antiprotozoal Agents				
ALINIA	3			
MEPRON	2			
Antiretrovirals – Chemokine Receptor Antagonist				
SELZENTRY	3			
Antiretrovirals – Fusion Inhibitors				
FUZEON	4			
Antiretrovirals – Integrase Inhibitors				
ISENTRESS	3			
Antiretrovirals – NRTI/NNRTI Combination				
ATRIPLA	3			
Antiretrovirals – Non-Nucleoside Reverse Transcriptase Inhibitors (NNRTIs)				
EDURANT	3			
INTELENCE	3			
nevirapine	1			
RESCRIPTOR	3			

Medication Name	4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Antiretrovirals – Non-Nucleoside Reverse Transcriptase Inhibitors (NNRTIs)				
SUSTIVA	2			
VIRAMUNE	3			✓
VIRAMUNE XR	3			
Antiretrovirals – Nucleoside (NRTI) and Nucleotide (NtRTI) Analogs				
abacavir	1			
COMBIVIR	3			
COMPLERA	3			
didanosine delayed release	1			
EMTRIVA	2			
EPIVIR	2			
EPZICOM	3			
lamivudine	1			
lamivudine/zidovudine	1			
RETROVIR	3			
stavudine	1			
TRIZIVIR	3			
TRUVADA	2			
VIDEX	2			
VIDEX EC	3			
VIREAD	2			
ZERIT	3			
ZIAGEN	3			✓
zidovudine	1			
Antiretrovirals – Protease Inhibitors				
APTIVUS	2			
CRIXIVAN	3			
INVIRASE #	3			
KALETRA	2			
LEXIVA	2			
NORVIR	2			
PREZISTA	2			
REYATAZ	2			
VIRACEPT	3			
Antivirals – CMV Agents				
CYTOGAM	4			
CYTOVENE	4			
foscarnet	4			
ganciclovir	4			
VALCYTE	4		✓	
VISTIDE	4			

4-Tier Member Guide

Medication Name	Pharmacy Benefit Plans 4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Antivirals – Hepatitis Agents				
BARACLUDE	4			
COPEGUS	4			
EPIVIR HBV	4			
HEPSERA	3			
INCIVEK	4	✓	✓	
INFERGEN	4	✓		
PEGASYS	4	✓		
PEG-INTRON	4	✓		
REBETOL	4			
ribapak	4			
ribasphere	4			
ribavirin	4			
TYZEKA	3			
VICTRELIS	4	✓	✓	
Antivirals – Herpes Agents				
acyclovir	1			
FAMVIR	3		✓	
famciclovir	1		✓	
valacyclovir	1			
VALTREX	3			✓
ZOVIRAX	3			
Antivirals – Influenza Agents				
FLUMADINE	3			
RELENZA	3		✓	
rimantadine	1			
TAMIFLU	3		✓	
Antivirals – Respiratory Syncytial Virus (RSV) Agents				
VIRAZOLE	3			
Musculoskeletal System				
Antimyasthenic Agents				
MESTINON	2			
MESTINON TIMESPAN	2			
pyridostigmine	1			
Antirheumatic Agents				
ARAVA	3	✓		
leflunomide	1	✓		
RHEUMATREX	3			
RIDAURA	3			
Enzymes				
XIAFLEX	4			

Medication Name	Pharmacy Benefit Plans 4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Interleukin – 1 Beta Blockers				
ILARIS	4	✓		
Interleukin – 1 Blockers				
ARCALYST	4	✓		
Muscle Relaxants and Combinations				
AMRIX	3			✓
baclofen	1			
carisoprodol	1			
carisoprodol/aspirin	1			
carisoprodol/ aspirin/codeine	1			
chlorzoxazone	1			
cyclobenzaprine	1			
cyclobenzaprine ER	1			
DANTRIUM	3			
dantrolene	1			
FEXMID	3			✓
LORZONE	3			
metaxalone	1			
methocarbamol	1			
orphenadrine ER	1			
orphenadrine/ aspirin/caffeine	1			
SKELAXIN	3			
tizanidine	1			
ZANAFLEX	3			
Neuromuscular Blocking Agent – Neurotoxins				
BOTOX	4	✓		
DYSPORT	4	✓		
MYOBLOC	4	✓		
XEOMIN	4	✓		
NSAIDs				
ARTHROTEC	3			
CELEBREX	3	✓	✓	
DAYPRO	3			
DUEXIS	3		✓	✓
diclofenac	1			
diclofenac potassium	1			
diclofenac sodium XR	3			
etodolac	1			
etodolac ER	3			
fenoprofen	1			
FLECTOR patch	3	✓	✓	
flurbiprofen	1			

Medication Name	4-Tier Open	Pharmacy Benefit Plans: Precer-tification	Quantity Limits	Step-Therapy
NSAIDs (continued)				
ibuprofen	1			
indomethacin	1			
indomethacin ER	1			
ketoprofen	1			
ketoprofen ER	3			
ketorolac	1		✓	
meclofenamate sodium	1			
mefenamic acid	1		✓	
meloxicam	1			
MOBIC	3			
nabumetone	3			
NAPRELAN	3			
naproxen	1			
oxaprozin	3			
piroxicam	1			
PENNSAID	3		✓	✓
PONSTEL	3		✓	
SPRIX	3		✓	
sulindac	1			
tolmetin sodium	3			
VIMOVO	2		✓	✓
VOLTAREN	3			
VOLTAREN GEL	2		✓	✓
VOLTAREN XR	3			
ZIPSOR	3			
Osteoarthritis				
EUFLEXXA	4	✓		
HYALGAN	4	✓		
ORTHOVISC	4	✓		
SUPARTZ	4	✓		
SYNVISC	4	✓		
SYNVISC ONE	4	✓		
Osteoporosis/Bone Modifying Agents				
ACTONEL	2		✓	
alendronate	1		✓	
AREDIA	4	✓		
ATELVIA	2		✓	
BONIVA (inj only)	4	✓		
BONIVA (tab only)	3		✓	✓
calcitonin salmon nasal	1			
DIDRONEL	3			

Medication Name	4-Tier Open	Pharmacy Benefit Plans: Precer-tification	Quantity Limits	Step-Therapy
Osteoporosis/Bone Modifying Agents (continued)				
etidronate	1			
FORTEO	4	✓		
fortical	1			
FOSAMAX	3		✓	
FOSAMAX PLUS D	3		✓	✓
GANITE	4			
ibandronate (tab only)	1		✓	
MIACALCIN (inj only)	3	✓		
MIACALCIN NASAL	3			
pamidronate	4	✓		
PROLIA	4	✓		
RECLAST #	4	✓		
SKELID	3			
XGEVA	4	✓		
ZOMETA #	4	✓		
Rheumatoid Arthritis				
ACTEMRA	4	✓		
CIMZIA	4	✓		
ENBREL	4	✓		
HUMIRA	4	✓		
KINERET	4	✓		
ORENCIA	4	✓		
REMICADE	4	✓		
SIMPONI	4	✓		
Selective Estrogen Receptor Modulator (SERM)				
EVISTA	2			
Ophthalmic Agents				
Glaucoma – Adrenergic Agents				
ALPHAGAN P	2			
apraclonidine	1			
brimonidine	1			
COMBIGAN	3			
IOPIDINE	3			
Glaucoma – Beta-blockers				
betaxolol	1			
BETIMOL	3			
BETOPTIC-S	3			
carteolol	1			
ISTALOL	3			
levobunolol	1			
metipranolol	3			

4-Tier Member Guide

Medication Name	Pharmacy Benefit Plans: 4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Glaucoma – Beta-blockers (continued)				
OPTIPRANOLOL	3			
timolol	1			
timolol maleate ophth	1			
Glaucoma – Carbonic Anhydrase Inhibitors				
AZOPT	2			
dorzolamide	1			
dorzolamide/timolol	1			
COSOPT	3			
COSOPT PF	3			
TRUSOPT	3			
Glaucoma – Miotics				
ISO CARBACHOL	3			
ISOPTO CARPINE	3			
PHOSPHOLINE	3			
pilocarpine	1			
PILOPINE HS	3			
Glaucoma – Prostaglandins				
latanoprost	1			
LUMIGAN	2			
TRAVATAN Z	2			
XALATAN	3			✓
ZIOPTAN	3			✓
Macular Degeneration				
EYLEA	4			
LUCENTIS	4			
MACUGEN	4			
VISUDYNE ***	4			
Macular Edema				
OZURDEX	4			
Ophthalmic Antihistamines and NSAIDs				
ACULAR	3			
ACULAR LS	3			
ACUVAIL	3			
ALAMAST	3			
ALOCRIL	3			
ALOMIDE	3			
azelastine ophth	1			
BEPREVE	3			
BROMDAY #	3			
bromfenac	1			
cromolyn sodium ophth	1			

Medication Name	Pharmacy Benefit Plans: 4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Ophthalmic Antihistamines and NSAIDs (continued)				
diclofenac ophth	1			
ELESTAT	3			
EMADINE	3			
epinastine	1			
flurbiprofen ophth	1			
ketorolac trometh-amine ophth	1			
LASTACAFT	3			
NEVANAC	3			
OPTIVAR	3			
PATADAY	2			
PATANOL	3			✓
VOLTAREN	3			
Ophthalmic Anti-infectives				
AZASITE	2			
bacitracin	1			
bacitracin/neomycin/ polymyxin	1			
bacitracin/polymyxin	1			
BESIVANCE	3			
ciprofloxacin	1			
erythromycin	1			
gentamicin	1			
IQUIX	3			
levofloxacin	1			
neomycin/polymyxin/ gramicidin	1			
ofloxacin	1			
polymyxin B/ trimethoprim	1			
QUIXIN	3			
sulfacetamide sodium	1			
tobramycin	1			
trifluridine	1			
triple antibiotic	1			
VIGAMOX	3			
ZIRGAN	3			
ZYMAXID	3			
Ophthalmic Immunomodulators				
RESTASIS	2			
Ophthalmic Steroidal Anti-inflammatory Drugs				
ALREX	2			
bacitracin/polymyxin/ neomycin/ hydrocortisone	1			

Medication Name	4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Ophthalmic Steroidal Anti-inflammatory Drugs (continued)				
BLEPHAMIDE S.O.P.	3			
dexamethasone phosphate	1			
dexamethasone/ neomycin/polymyxin	1			
DUREZOL	3			
fluorometholone	1			
fluor-op	1			
FML FORTE	3			
FML LIQUIFILM	3			
FML S.O.P.	3			
LOTEMAX OINT	3			
LOTEMAX SUS	3			
neomycin/polymyxin/ hydrocortisone	1			
poly-dex	1			
PRED-G	3			
PRED-G S.O.P	3			
prednisolone	1			
sulfacetamide sodium/prednisolone	1			
tobramycin/ dexamethasone	1			
TOBRADEX	3			
TOBRADEX ST	3			
VEXOL	3			
ZYLET	3			
Otic Agents				
Otic Analgesics				
PINNACAINE	3			
Otic Anti-infectives				
ciprofloxacin otic	1			
ofloxacin otic	1			
Otic Combinations				
acetic acid/antipyrine/ benzocaine/ polycosanol	1			
antipyrine/benzocaine	1			
CETRAXAL	3			
CIPRO HC	3			
CIPRODEX	2			
COLY-MYCIN S	3			
cortomycin	1			

Pharmacy Benefit Plans

Medication Name	4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Otic Combinations (continued)				
myoxin	1			
neomycin/polymyxin/ hydrocortisone	1			
NEOTIC	3			
otozin	1			
TREAGAN	3			
TRIOXIN	3			
ZINOTIC	3			
ZINOTIC ES	3			
Respiratory Tract Agents				
Alpha-Proteinase Inhibitors				
ARALAST	4	✓		
ARALAST NP	4	✓		
GLASSIA ****	4	✓		
PROLASTIN ****	4	✓		
PROLASTIN-C ****	4	✓		
ZEMAIRA ****	4	✓		
Antiasthmatics – Anticholinergics				
ATROVENT HFA	3			
ipratropium inhaler	1			
SPIRIVA	2			
Antiasthmatic – Monoclonal Antibodies				
XOLAIR	4	✓		
Anti-Inflammatory Agents (nebulizer)				
cromolyn sodium nebulizer	1			
Bronchodilators – Sympathomimetics				
ACCUNEB	3			
ADVAIR DISKUS	2			
ADVAIR HFA	2			
albuterol	1			
ARCAPTA	3	✓		
BROVANA	3	✓		
COMBIVENT RESPIMAT	2			
COMBIVENT	3	✓		
DULERA	2			
DUONEB	3			
FORADIL	2	✓		
ipratropium/albuterol	1			
levalbuterol	1			
MAXAIR AUTOHALER	3			✓

4-Tier Member Guide

Medication Name	Pharmacy Benefit Plans 4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Bronchodilators – Sympathomimetics (continued)				
metaproterenol	3			
PERFOROMIST	2	✓		
PROAIR HFA	2			
PROVENTIL HFA	2			
SEREVENT DISKUS	2	✓		
SYMBICORT	2			
terbutaline	1			
VENTOLIN HFA	3			
VOSPIRE ER	3			
XOPENEX	3			✓
XOPENEX HFA	3			
Bronchodilators – Xanthines				
aminophylline	1			
THEO-24	3			
theochron	1			
theophylline ER	1			
Cystic Fibrosis Agents				
CAYSTON ※※※	4			
colistimethate sodium	4			
COLY-MYCIN M	4			
KALYDECO	4	✓	✓	
PULMOZYME	4	✓		
TOBI	4			
Inhaled Corticosteroids				
ALVESCO	3			
ASMANEX	2			
budesonide inhalation susp	1			
FLOVENT DISKUS	2			
FLOVENT HFA	2			
PULMICORT FLEXHALER	3			
PULMICORT RESPULES	3			
QVAR	2			
Leukotriene Modulators				
ACCOLATE	3		✓	
zafirlukast	1		✓	
SINGULAIR	3		✓	✓
montelukast	1		✓	
ZYFLO	3		✓	
ZYFLO CR	3		✓	
Mouth and Throat Products				
cevimeline	1			
EVOXAC	3			

Medication Name	Pharmacy Benefit Plans 4-Tier Open	Precer-tification	Quantity Limits	Step-Therapy
Mouth and Throat Products (continued)				
pilocarpine	1			
SALAGEN	3			
Nasal Antiallergy				
ASTELIN NASAL	3			
ASTEPRO	2			
azelastine nasal	1			
DYMISTA	3			
PATANASE #	3			
Nasal Anti-infectives				
BACTROBAN NASAL	3			
Nasal Anticholinergics				
ATROVENT NASAL	3			
ipratropium nasal	1			
Nasal Steroids				
BECONASE AQ	3			
FLONASE	3			
flunisolide	1			
fluticasone nasal	1			
NASACORT AQ	3			✓
NASONEX	2			
QNASL	3			✓
OMNARIS	3			
RHINOCORT AQ	3			✓
triamcinolone nasal	1			
VERAMYST	2			
ZETONNA	3			✓
Non-Sedating Antihistamines and Combinations				
CLARINEX	3	✓	✓	
CLARINEX-D #	3	✓	✓	
CLARINEX REDITAB	3	✓	✓	
desloratidine	1	✓	✓	
levocetirizine	1	✓	✓	
XYZAL	3	✓	✓	
Respiratory Syncytial Virus – Monocolonal Antibodies				
SYNAGIS	4	✓		
Selective Phosphodiesterase 4 (PDE4) Inhibitors				
DALIRESP	2	✓		
Upper Respiratory – Cough/Cold/Allergy Combinations				
hydrocodonepolistirex/ chlorpheniramine polistirex	1			

Medication Name	4-Tier Open	Pharmacy Benefit Plans: Precer-tification	Quantity Limits	Step-Therapy
Upper Respiratory – Cough/Cold/Allergy Combinations (continued)				
SEMPREX-D	3	✓	✓	
TUSSICAPS	3			
TUSSIONEX	3			
Therapeutic Nutrients-Minerals-Electrolytes				
FERRLECIT	4			
nulecit	4			
VENOFER	4			
Toxicologic Agents				
Alcohol Dependence				
VIVITROL	4			
Antidotes				
deferoxamine mesylate	1			
DESFERAL	4			
EXJADE	4			
FERRIPROX	4			
Vaccines, Toxoids and Biologics				
Immune Globulin – Cytomegalovirus (CMV)				
CYTOGAM	4			
Immune Globulin – Immune Disorders				
ADAGEN	4	✓		
CARIMUNE NANOFILTERED	4	✓		
FLEBOGAMMA	4	✓		
GAMASTAN S/D	4	✓		
GAMMAGARD	4	✓		
GAMMAGARD S/D	4	✓		
GAMMAKED	4	✓		
GAMMAPLEX	4	✓		
GAMUNEX	4	✓		
GAMUNEX-C	4	✓		
HIZENTRA	4	✓		
OCTAGAM	4	✓		
PRIVIGEN	4	✓		
VIVAGLOBIN	4	✓		
Immune Globulin – Hepatitis B				
HEPAGAM B	4			
HYPERHEP B	4			
NABI-HB	4			
Immune Globulin – Rabies				
HYPERRAB S/D	4			
IMOGAM RABIE	4			

Medication Name	4-Tier Open	Pharmacy Benefit Plans: Precer-tification	Quantity Limits	Step-Therapy
Immune Globulin – Rh isoimmunization				
HYPERRHO S/D	4			
MICRHOGAM ULTRA-FILTERED	4			
RHOGAM ULTRA-FILTERED PLUS	4			
RHOPHYLAC	4			
WINRHO SDF	4			
Immune Globulin – Tetanus				
HYPERTET S/D	4			
Wilson's Disease				
DEPEN TITRATABS	2			
SYPRINE	3			
CUPRIMINE	3			
Miscellaneous				
Immunosuppressive Agents				
ATGAM	4			
AZASAN	3			
azathioprine	1			
SANDIMMUNE	4			
CELLCEPT	3			
cyclosporine	1			
cyclosporine (inj only)	4			
cyclosporine modified	1			
gengraf	1			
IMURAN	3			
MYFORTIC	4			
mycophenolate	1			
NEORAL	4			
NULOJIX	4			
ORTHOCLONE OKT3	4			
PROGRAF	4			
RAPAMUNE	4			
SANDIMMUNE	4			
SIMULECT	4			
tacrolimus	4			
THYMOGLOBULIN	4			
ZORTRESS	4			
Systemic Lupus Erythematosus Agents				
BENLYSTA	4	✓		

Precertification List

Most of Aetna's pharmacy benefits plans include our precertification program. Precertification encourages appropriate and cost-effective use of drugs by allowing coverage only when certain conditions are met.

Therapeutic Class	Drug(s)
Acne	*adapalene* PR ≥ 36 yr old *amnesteem* ATRALIN PR ≥ 36 yr old *avita* PR ≥ 36 yr old *claravis* DIFFERIN PR ≥ 36 yr old EPIDUO PR ≥ 36 yr old *isotretinoin* *myorisan* RETIN-A PR ≥ 36 yr old RETIN-A MICRO PR ≥ 36 yr old *sotret* TRETIN-X PR ≥ 36 yr old *tretinoin* PR ≥ 36 yr old VELTIN PR ≥ 36 yr old ZIANA PR ≥ 36 yr old
Actinic Keratosis	PICATO
Alpha-Proteinase Inhibitors	ARALAST ARALAST NP GLASSIA PROLASTIN PROLASTIN-C ZEMAIRA
ALS Agents	RILUTEK
Antiasthmatic – Monoclonal Antibodies	XOLAIR
Anticoagulants	PRADAXA XARELTO
Anticonvulsants	BANZEL GABITRIL ONFI POTIGA SABRIL tablets only VIMPAT
Antiemetics – 5-HT3 Receptor Antagonists	ALOXI ANZEMET injectable EMEND injectable
Antiemetics – Miscellaneous	*dronabinol* MARINOL
Antihyperlipidemics – Intestinal Cholesterol Absorption Inhibitors	ZETIA
Antipsoriatics	TAZORAC PR ≥ 36 yr old

Therapeutic Class	Drug(s)
Antirheumatic Agents	ARAVA *leflunomide*
Bacterial Infections	ADOXA DIFICID DORYX DYNACIN MINOCIN MONODOX ORACEA ZYVOX
	Fluoroquinolone – age edit PR < 10 yr old AVELOX CIPRO CIPRO XR *ciprofloxacin* FACTIVE LEVAQUIN *levofloxacin* NOROXIN *ofloxacin*
	Tetracycline – age edit PR ≤ 8 yr old ADOXA *avidoxy* *demeclocycline* DORYX *doxycycline* DYNACIN MINOCIN *minocycline* MONODOX ORACEA ORAXYL SOLODYN *tetracycline* *vibramycin*
Benign Prostatic Hyperplasia *PR for females only	*alfuzosin* * AVODART * *bicalutamide* * CASODEX * CIALIS 2.5 mg; 5 mg *finasteride* PR ≤ 50 yr old FLOMAX * JALYN * PROSCAR PR ≤ 50 yr old RAPAFLO * *tamsulosin* * UROXATRAL *

Therapeutic Class	Drug(s)
Biologics	ACTEMRA AMEVIVE CIMZIA ENBREL HUMIRA KINERET ORENCIA REMICADE SIMPONI STELARA
Blood Clotting Factors	Antiinhibitor Coagulant Complex FEIBA VH IMMUNO
	Blood Clotting Factor VIIa NOVOSEVEN
	Blood Clotting Factor VIII Human ALPHANATE HEMOFIL M HUMATE-P KOATE-DVI MONARC-M MONOCLATE-P WILATE
	Blood Clotting Factor VIII Recombinant ADVATE CORIFACT HELIXATE FS KOGENATE FS RECOMBINATE REFACTO XYNTHA
	Blood Clotting Factor IX Complex BEBULIN VH PROFILNINE
	Blood Clotting Factor IX Recombinant ALPHANINE SD BENEFIX MONONINE
Bronchodilators – Sympathomimetics	ARCAPTA BROVANA COMBIVENT FORADIL PERFOROMIST SEREVENT DISKUS
Cataplexy	XYREM
Corticotropin	ACTHAR HP
Cough/Cold/Allergy/ Combinations	CLARINEX CLARINEX-D *desloratidine* *levocetirizine* SEMPREX-D XYZAL

Therapeutic Class	Drug(s)
Cough/Cold/Allergy/ Combinations (continued)	All *promethazine/codeine* and *phenylephrine/promethazine/ codeine* containing products PR <6 yr old
	All other *promethazine* containing products PR < 2 yr old
Cystic Fibrosis Agents	KALYDECO PULMOZYME
Diabetes – Amylin Analogs	SYMLIN SYMLINPEN
Diabetes - Thiazolidinediones (TZDs) and Combinations	AVANDAMET AVANDARYL AVANDIA
Diabetes - Glucocorticoid Receptor Antagonist	KORLYM
Fabry Disease	FABRAZYME
Fertility Agents	BRAVELLE CETROTIDE *chorionic gonadotropin* FOLLISTIM AQ GANIRELIX GONAL-F GONAL-F RFF LUVERIS MENOPUR *novarel* OVIDREL *pregnyl* REPRONEX
Fungal Infections	*ciclopirox nail lacquer* DIFLUCAN *fluconazole* *itraconazole* LAMISIL PENLAC SPORANOX *terbinafine*
Gaucher Disease	CEREDASE CEREZYME ELELYSO VPRIV ZAVESCA
Gout	KRYSTEXXA
Growth Hormone	GENOTROPIN HUMATROPE INCRELEX NORDITROPIN NUTROPIN NUTROPIN AQ OMNITROPE SAIZEN SEROSTIM TEV-TROPIN ZORBTIVE

Precertification List

Therapeutic Class	Drug(s)
Hematopoietic Growth Factor	ARANESP EPOGEN OMONTYS PROCRIT
Hereditary Angioedema	BERINERT CINRYZE FIRAZYR KALBITOR
Hormone Replacement – Progestins	MAKENA
Hunter Syndrome	ELAPRASE
Huntington's Disease – Chorea	XENAZINE
Immune Globulin – Immune Disorders	ADAGEN CARIMUNE NANOFILTERED FLEBOGAMMA GAMASTAN S/D GAMMAGARD GAMMAGARD S/D GAMMAKED GAMMAPLEX GAMUNEX GAMUNEX-C HIZENTRA OCTAGAM PRIVIGEN VIVAGLOBIN
Immunomodulating Agents - Topical	ALDARA ELIDEL *imiquimod* PROTOPIC ZYCLARA
Interleukin-1 Blockers	ARCALYST ILARIS
Interstitial Cystitis Agents	ELMIRON
Irritable Bowel	LOTRONEX
Laxatives	AMITIZA
Malaria (covered for active treatment only – not covered for prophylactic treatment)	ARALEN *atovaquone/proguanil* *chloroquine* COARTEM DARAPRIM *hydroxychloroquine* MALARONE *mefloquine* PLAQUENIL QUALAQUIN *quinine sulfate*
Miscellaneous Anti-Infectives	XIFAXAN

Therapeutic Class	Drug(s)
Miscellaneous Endocrine PR ≤ 17 yr old	DDAVP (all forms) *desmopressin* *minirin* STIMATE
Mucopoly-saccharidosis I	ALDURAZYME
Mucopoly-saccharidosis VI	NAGLAZYME
Multiple Sclerosis	AMPYRA AVONEX BETASERON COPAXONE EXTAVIA GILENYA REBIF TYSABRI
Neuromuscular Blocking Agent - Neurotoxins	BOTOX DYSPORT MYOBLOC XEOMIN
Oncology	AFINITOR *anastrozole* ARIMIDEX AROMASIN CAPRELSA ERBITUX ERIVEDGE *exemestane* FEMARA FIRMAGON GLEEVEC INLYTA JAKAFI JEVTANA *letrozole* NEXAVAR OFORTA PROVENGE REVLIMID RITUXAN SPRYCEL SUTENT SYLATRON TARCEVA TASIGNA TYKERB VECTIBIX VOTRIENT XALKORI YERVOY ZELBORAF ZOLINZA ZYTIGA
Opioid Dependence	*buprenorphine* SUBOXONE SUBUTEX

Therapeutic Class	Drug(s)
Opioid Induced Constipation	RELISTOR
Osteoporosis/Bone Modifying Agents	AREDIA BONIVA (inj only) FORTEO MIACALCIN (inj only) *pamidronate* PROLIA RECLAST XGEVA ZOMETA
Pain (Analgesics) and Inflammation	ABSTRAL ACTIQ BUTRANS CELEBREX PR < 60 *fentanyl lozenge* FENTORA FLECTOR patch LAZANDA ONSOLIS SUBSYS SPRAY
Paroxysmal Nocturnal Hemoglobinuria (PNH)	SOLIRIS
Pompe Disease	LUMIZYME MYOZYME
Postherpetic Neuralgia (PHN) Agents	GRALISE
Platelet Aggregation Inhibitors	BRILINTA EFFIENT
Pseudobulbar Affect	NUEDEXTA
Pulmonary Hypertension Agents	ADCIRCA *epoprostenol* FLOLAN LETAIRIS REMODULIN REVATIO *sildenafil* TRACLEER TYVASO VELETRI VENTAVIS
Respiratory Syncytial Virus	SYNAGIS
Restless Leg Syndrome	HORIZANT
Sedative/Hypnotics	INTERMEZZO
Selective Phosphodiesterase 4 (PDE4) Inhibitors	DALIRESP

Therapeutic Class	Drug(s)
Stimulant/ Attention Deficit	ADDERALL ADDERALL XR *amphetamine/ dextroamphetamine* *amphetamine/ dextroamphetamine SR* CONCERTA DAYTRANA DESOXYN DEXEDRINE *dexmethylphenidate* *dextroamphetamine* *dextroamphetamine CR* FOCALIN FOCALIN XR METADATE CD *metadate ER* *methamphetamine* *methylin* METHYLIN chew/soln *methylin ER* *methylphenidate* *methylphenidate SR* *modafinil* NUVIGIL PROCENTRA PROVIGIL RITALIN RITALIN LA RITALIN SR VYVANSE
Systemic Lupus Erythematosus Agents	BENLYSTA
Typhoid	VIVOTIF BERNA EC
Ulcer/Heartburn/ Reflux	ACIPHEX DEXILANT *lansoprazole* NEXIUM *omeprazole* *omeprazole/bicarbonate* *pantoprazole* PREVACID PREVACID SOLUTAB PRILOSEC PROTONIX ZEGERID
Vasopressin Receptor Antagonists	SAMSCA
Viral Infections/ Immune System Enhancers	INCIVEK INFERGEN INTRON-A PEGASYS PEG-INTRON VICTRELIS

Quantity Limit List

The precertification program limits coverage of quantities for certain drugs. These limits are designed to help promote appropriate and efficient drug use and enhance patient safety.

Therapeutic Class	Drug(s)	Limit(s)
Actinic Keratosis	PICATO	0.015% gel = 18 tubes (6 boxes) per year 0.05% gel = 12 tubes (6 boxes) per year
Antianginal	RANEXA	500 mg = 3 tablets/day 1000 mg = 2 tablets/day
Antibacterials – Macrolides	DIFICID	20 tablets/ 30 day supply
Anticoagulants	PRADAXA	2 capsules/day
	XARELTO	10 mg = up to 35 tablets/year 15 mg; 20 mg = up to 30 tablets/30 day supply
Anticonvulsants	LYRICA	25, 50, 75, 100, 150 and 200 mg = 3 caps/day 225 and 300 mg = 2 capsules/day
	NEURONTIN *gabapentin*	All strengths = 180 tablets/30 day supply
	POTIGA	200, 300, 400 mg = 3 tablets/day
	VIMPAT	50 mg = 6 tablets/day 100 mg, 150 mg and 200 mg = 2 tablets/day 10 mg/ml = 40 ml per day
Antifungal	ORAVIG	50 mg = 14 tablets per 30 day supply
Antihistamines and Decongestants	CLARINEX *desloratidine*	2.5 mg and 5 mg = 1 tablet or reditab/day Syrup = 10 ml/day
	CLARINEX-D	2.5 mg/120 mg = 2 tablets/day 5 mg/240 mg = 1 tablet/day
	levocetirizine XYZAL	Limit = 1 tablet/day 2.5 mg/5 ml solution = 10 ml/day
	SEMPREX-D	4 capsules/day
Antivirals	FAMVIR *famciclovir*	125 mg, 250 mg = 2 tablets/day 500 mg = 21 tablets/30 day supply
	VALCYTE	450 mg tablet = 102 tablets/30 day supply 50 mg/ml solution = 1000 ml/30 day supply
Asthma	ACCOLATE *zafirlukast*	10 mg and 20 mg = 2 tablets/day
	SINGULAIR *montelukast*	4 mg granules = 1 packet/day 10 mg = 1 tablet/day 4 mg and 5 mg chewable = 1 tablet/day
	ZYFLO ZYFLO CR	Limit = 4 tablets/day
BPH	CIALIS 2.5 mg, 5 mg	1 tablet/day
Blood Pressure and Heart Failure	AMTURNIDE	All strengths = 1 tablet/day
	ATACAND	4 mg, 8 mg and 16 mg = 2 tablets/day
	ATACAND HCT	16 - 12.5 mg = 2 tablets/day
	AVALIDE *irbesartan-hydrochlorothiazide*	150 - 12.5 mg = 1 tablet/day
	AVAPRO *irbesartan*	75 mg and 150 mg = 2 tablets/day
	AZOR	All strengths = 1 tablet/day
	BENICAR	5 mg and 20 mg = 1 tablet/day
	BENICAR HCT	20 - 12.5 mg = 1 tablet/day
	COZAAR *losartan*	25 mg and 50 mg = 2 tablets/day

Therapeutic Class	Drug(s)	Limit(s)
Blood Pressure and Heart Failure (continued)	DIOVAN	40 mg, 80 mg and 160 mg = 2 tablets/day
	DIOVAN HCT	80 - 12.5 mg, 160 - 12.5 mg, and 160 - 25 mg = 1 tablet/day
	EDARBI	All strengths = 2 tablets/day
	EDARBYCLOR	All strengths = 1 tablet /day
	eprosartan TEVETEN	400 mg = 2 tablets/day
	EXFORGE	All strengths = 1 tablet/day
	EXFORGE HCT	All strengths = 1 tablet/day
	HYZAAR *losartan/hydrochlorothiazide*	50 - 12.5 mg = 1 tablet/day
	MICARDIS	20 mg and 40 mg = 1 tablet/day
	MICARDIS HCT	40 - 12.5 mg = 1 tablet/day
	TEKAMLO	Limit = 1 tablet/day
	TEKTURNA	150 mg and 300 mg = 1 tablet/day
	TEKTURNA HCT	150/12.5 mg and 150/25 mg = 1 tablet/day
	TRIBENZOR	All strengths = 1 tablet/day
	TWYNSTA	Limit = 1 tablet/day
	VALTURNA	Limit = 1 tablet/day
Cataplexy	XYREM	Limit = 9 gm/day (540ml/30 day supply)
Cholesterol Lowering	ADVICOR	All strengths = 2 tablets/day
	ALTOPREV	10 mg, 20 mg, and 60 mg = 1 tablet/day 40 mg = 2 tablets/day
	amlodipine/atorvastatin CADUET	All strengths = 1 tablet/day
	atorvastatin LIPITOR	All strengths= 1 tablet/day
	CRESTOR	All strengths = 1 tablet/day
	LESCOL *fluvastatin*	All strengths = 2 tablets/day
	LESCOL XL	80 mg = 1 tablet /day
	LIVALO	All strengths= 1 tablet/day
	lovastatin MEVACOR	All strengths = 2 tablets/day
	PRAVACHOL *pravastatin*	All strengths = 1 tablet/day
	SIMCOR	1000 - 40 mg = 1 tablet /day 500 - 40 mg = 1 tablet/day 1000 - 20 mg = 2 tablets/day 750 - 20 mg = 2 tablets/day 500 - 20 mg = 2 tablets/day
	VYTORIN	All strengths = 1 tablet/day
	ZETIA	10 mg = 1 tablet/day
	ZOCOR *simvastatin*	All strengths = 1 tablet/day
Colon/Rectal	APRISO	0.375 gm = 4 capsules/day
	ASACOL	400 mg = 12 tablets/day
	ASACOL HD	6 tablets/day
	AZULFIDINE AZULFIDINE ENTABS *sulfasalazine* *sulfasalazine EC* *sulfazine* *sulfazine EC*	500 mg = 8 tablets/day

Quantity Limit List

Therapeutic Class	Drug(s)	Limit(s)
Colon/Rectal (continued)	CANASA	1000 mg = 1 suppository/day
	COLAZAL *balsalazide*	750 mg = 9 capsules/day
	DIPENTUM	250 mg = 4 capsules/day
	LIALDA	4 tablets/day
	PENTASA	250 mg = 16 capsules/day 500 mg = 8 capsules/day
Cystic Fibrosis	KALYDECO	150 mg = 2 tablets/day
Depression	APLENZIN	All strengths = 1 tablet/day
	budeprion *bupropion* WELLBUTRIN	75 mg = 6 tablets/day 100 mg = 6 tablets/day
	budeprion SR *bupropion SR* WELLBUTRIN SR	100 mg, 150 mg and 200 mg = 2 tablets/day
	budeprion XL WELLBUTRIN XL	All strengths = 1 tablet/day
	CELEXA *citalopram*	10 mg, 20 mg and 40 mg = 1 tablet/day
	CYMBALTA	20 mg and 30 mg = 2 capsules/day 60 mg = 1 capsule/day
	EFFEXOR XR *venlafaxine ER (cap)* *venlafaxine SR (tab)* VENLAFAXINE ER (tab)	37.5 mg and 75 mg = 1/day 150 mg = 2/day 225 mg = 1/day
	EMSAM	All strengths = 1 patch/day
	escitalopram LEXAPRO	5 mg, 10 mg and 20 mg = 1 tablet/day 5 mg/5 ml solution = 20 ml/day
	fluoxetine PROZAC	10 mg = 1 tablet or capsule/day 20 mg = 4 tablets or capsules/day 40 mg = 2 tablets or capsules/day Liquid 20 mg/5 ml = 10 ml/day Weekly = 4 tablets/28 day supply
	fluoxetine (PMDD) 10 mg	14 capsules/30 days
	FLUOXETINE 60 mg	60 mg = 1 capsule/day
	fluvoxamine	25 mg and 50 mg = 1 tablet/day 100 mg = 3 tablets/day
	LUVOX CR	100 mg and 150 mg = 2 capsules/day
	maprotiline	25 mg = 1 tablet/day 50 mg = 2 tablets/day 75 mg = 3 tablets/day
	OLEPTRO	150 mg = 1 ½ tablets/day 300 mg = 1 tablet/day
	PAXIL PEXEVA *paroxetine*	10 mg and 20 mg = 1 tablet/day 30 mg and 40 mg = 2 tablets/day Suspension 10 mg/5 ml = 30 ml/day
	PAXIL CR *paroxetine ER*	All strengths = 2 tablets/day
	PRISTIQ	50 mg and 100 mg = 1 tablet/day

Therapeutic Class	Drug(s)	Limit(s)
Depression (continued)	*mirtazapine* *mirtazapine ODT* REMERON REMERON SOLUTAB	All strengths = 1 tablet/day
	SARAFEM	All strengths = 14 tablets/30 days
	sertraline ZOLOFT	25 mg = 1 tablet/day 50 mg = 1 ½ tablets/day 100 mg = 2 tablets/day Liquid = 10 ml/day
	VIIBRYD	All strengths = 1 tablet/day
	VIIBRYD KIT	1 Kit/30 days
	venlafaxine	25 mg and 100 mg = 3 tablets/day 37.5 mg = 4 tablets/day 50 mg = 6 tablets/day 75 mg = 5 tablets/day
Diabetes – Incretin Mimetic Agents	BYDUREON BYETTA	Limit = 4 trays/30 day supply Limit = 1 pen/30 day supply
	VICTOZA	1.2 mg/day = 2 pens/30 day supply 1.8 mg/day = 3 pens/30 day supply
Diabetes – Glucocorticoid Receptor Antagonist	KORLYM	300 mg = 4 tablets/day
Erectile Dysfunction	CAVERJECT CIALIS EDEX LEVITRA MUSE STAXYN VIAGRA	Refer to plan documents. If a covered benefit, quantities may vary depending on your specific plan. Most plans that cover will limit to 6/month.
Estrogen/ Combinations	ALORA COMBIPATCH ESTRADERM VIVELLE-DOT	All strengths = 8 patches/28 day supply
	CLIMARA CLIMARA PRO *estradiol patch* MENOSTAR	All strengths = 4 patches/28 day supply
Fibromyalgia	SAVELLA	12.5 mg, 25 mg, 50 mg, and 100 mg = 2 tabs/day Titration pack = 1 kit/30 day
Flu	RELENZA	2 treatments (units)/year
	TAMIFLU	All strengths = 2 treatments (20 capsules)/year 6 mg/ml suspension = 8 bottles (480 ml)/year 12 mg/ml suspension = 6 bottles (150 ml)/year
Hemostatics – Systemic	LYSTEDA	30 tablets/30 day supply
Hormone Replacement – Progestins	MAKENA	Up to 5 vials per year
Huntington's Disease – Chorea	XENAZINE	12.5 mg = 4 tablets/day 25 mg = 2 tablets/day
Immunomodulating Agents – Topical	ALDARA *imiquimod*	16 weeks treatment/year
	ZYCLARA	56 packets/year

Quantity Limit List

Therapeutic Class	Drug(s)	Limit(s)
Interstitial Cystitis Agents	ELMIRON	3 capsules/day
Malaria	QUALAQUIN *quinine sulfate*	42 capsules/year
	ARALEN *chloroquine* *hydroxychloroquine* PLAQUENIL	All strengths = 1 tablet/day
Mania and Psychosis	ABILIFY ABILIFY DISC	All strengths = 1 tablet/day Solution = 30 ml/day
	CLOZARIL *clozapine* FAZACLO	12.5 mg = 1 tablet/day 25 mg and 50 mg = 3 tablets/day 100 mg = 9 tablets/day 150 mg = 6 tablets/day 200 mg = 4 tablets/day
	FANAPT	All strengths = 2 tablets/day Titration pak = 1 pak/30 day supply
	GEODON *ziprasidone*	All strengths = 2 capsules/day
	INVEGA	1.5 mg, 3 mg and 6 mg = 2 tablets/day 9 mg = 1 tablet/day
	LATUDA	20 mg; 40 mg = 1 tablet/day 80 mg = 2 tablet/day
	olanzapine *olanzapine ODT* ZYPREXA ZYPREXA ZYDIS	2.5 mg = 2 tablets/day All other strengths = 1 tablet/day
	RISPERDAL RISPERDAL M *risperidone* *risperidone ODT*	4 mg = 4 tablets/day All other strengths = 2 tablets/day
	SAPHRIS	All strengths = 2 tablets/day
	SEROQUEL *quetiapine*	25 mg = 6 tablets/day 50 mg and 100 mg = 3 tablets/day 200 mg = 4 tablets/day 300 mg and 400 mg = 2 tablets/day
	SEROQUEL XR	50 mg = 6 tablets/day 150 mg and 200 mg = 1 tablet/day 300 mg and 400 mg = 2 tablets/day
	SYMBYAX *olanzapine/fluoxetine*	All strengths = 1 tablet/day
Migraine	ALSUMA	Injection = 4 kits/30 day supply
	AMERGE *naratriptan*	Total quantity any strength = 9 tablets/30 day supply
	AXERT	All strengths = 6 tablets/30 day supply
	CAMBIA	9 powder packets/month
	FROVA	2.5 mg = 9 tablets/30 day supply
	IMITREX *sumatriptan*	Nasal = 6 sprays/30 day supply Injection = 4 kits/30 days or 10 vials/30 day supply Total quantity any strength = 9 tablets/30 day supply
	MAXALT MAXALT MLT	Total quantity any strength = 12 tabs/30 day supply
	MIGRANAL	1 box/30 day supply
	RELPAX	Total quantity any strength = 6 tablets/30 day supply
	SUMAVEL	6 pre-filled syringes/30 day supply

Therapeutic Class	Drug(s)	Limit(s)
Migraine (continued)	TREXIMET	Total quantity any strength = 9 tablets/30 day supply
	ZOMIG ZOMIG ZMT	Total quantity any strength = 6 tablets/30 day supply Nasal = 6 sprays/30 day supply
Misc. Anti-Infectives	XIFAXAN	200 mg = 9 tablets/30 day supply 550 mg = 2 tablets/day
Multiple Sclerosis	AMPYRA	2 tablets/day
	GILENYA	1 capsule/day
Nausea/Vomiting	ANZEMET	Total quantity any strength = 5 tablets/30 day supply
	CESAMET	1 mg = 20 capsules/30 day supply
	EMEND	40, 80 mg, 125 mg = 5 tablets/30 day supply 125 mg/80 mg combo pack = 2 packages (6 tablets)/ 30 day supply
	GRANISOL *granisetron* KYTRIL	1 mg = 10 tablets/30 day supply Liquid = 5 (10ml) doses/30 day supply
	SANCUSO PAD	1 patch/21 day supply
	ondansetron *ondansetron ODT* ZOFRAN ZOFRAN ODT	4 mg and 8 mg = 12 tablets/30 day supply 24 mg = 5 tablets/30 day supply Liquid = 1 bottle (50 ml)/30 day supply
	ZUPLENZ	12 films per month
Oncology	AFINITOR CAPRELSA GLEEVEC HYCAMTIN INLYTA NEXAVAR OFORTA SPRYCEL SUTENT SYLATRON TARCEVA TASIGNA TEMODAR *tretinoin capsules* TYKERB VOTRIENT XELODA ZOLINZA	All strengths = 30 day supply
	ERIVEDGE	All strengths = 30 day supply (up to 60 tablets)
	XALKORI	All strengths = 30 day supply (up to 60 tablets)
	ZELBORAF	All strengths = 30 day supply (up to 240 tablets)
	ZYTIGA	All strengths = 30 day supply (up to 120 tablets)
Opioid Induced Constipation	RELISTOR	Inj = 10 syringes per month Kit = 1 kit (7 syringes) per month
Osteoporosis/ Paget Disease	ACTONEL	35 mg = 4 tablets/28 day supply 75 mg = 2 tablets/month 150 mg = 3 tablets/90 day supply
	ATELVIA	4 tablets/28 day supply
	BONIVA *ibandronate*	2.5 mg = 1 tablet/day 150 mg = 3 tablets/90 day supply
	FOSAMAX *alendronate*	35 mg = 4 tablets/28 day supply 70 mg = 4 tablets/28 day supply 70 mg/75ml solution = 4 doses (75ml each)/ 28 day supply
	FOSAMAX PLUS D	4 tablets/28 day supply

Quantity Limit List

Therapeutic Class	Drug(s)	Limit(s)
Pain (Analgesics) & Inflammation	ABSTRAL	All strengths = 15 tablets/30 day supply
	ACTIQ *fentanyl lozenges*	All strengths = 15 lollipops/30 day supply
	AVINZA	All strengths = 2 capsules/day
	butorphanol nasal	2 vials/30 day supply
	buprenorphine SUBUTEX	2 mg = 24 tablets/30 day supply 8 mg = 8 tablets/30 day supply
	BUTRANS	Limit = 4 patches/30 day supply
	CELEBREX	50 mg and 100 mg = 60 capsules/30 day supply 200 mg = 30 capsules/30 day supply 400 mg = 60 capsules/30 day supply
	CONZIP	All strengths = 2 capsules/day
	DUEXIS	800 mg - 26.6 mg = 3 tablets/day
	DURAGESIC *fentanyl patch*	20 patches/30 day supply
	EXALGO	All strengths = 2 tablets/day
	FENTORA	All strengths = 15 buccal tablets/30 day supply
	FLECTOR patch	Limit = 2 patches/day
	KADIAN	All strengths = 2 capsules/day
	ketorolac TORADOL	20 tablets/30 day supply
	LAZANDA	100 mcg, 400 mcg = 4 bottles per 30 day supply
	mefenamic acid PONSTEL	30 capsules/30 day supply
	methadone	All strengths = 4 tablets/day
	methadose	All strengths = 4 tablets/day
	morphine sulfate	All strengths = 4 tablets/day
	morphine sulfate CR	All strengths = 2 tablets/day
	MS CONTIN	All strengths = 4 tablets/day
	NUCYNTA	All strengths = 6 tablets/day
	NUCYNTA ER	All strengths = 4 tablets/day
	ONSOLIS	Quantities up to 15 tabs/30 day supply
	OPANA ER	All strengths = 4 tablets/day
	ORAMORPH SR	All strengths = 4 tablets/day
	oxycodone/ibuprofen	28 tablets/30 day supply
	oxycodone SR OXYCONTIN CR	All strengths = 4 tablets/day
	oxymorphone ER	All strengths = 4 tablets/day
	PENNSAID	2 bottles/30 day supply
	RYZOLT	All strengths = 2 tablets/day
	SPRIX	5 dose units/30 day supply
	SUBUTEX	8 mg = 8 tablets/30 day supply
	SUBOXONE	3 films or tablets/day
	SUBSYS SPRAY	Up to 15 units/30 day supply
	tramadol ER ULTRAM ER	All strengths = 2 tablets/day
	VIMOVO	All strengths = 2 tablets/day
	VOLTAREN GEL	500 gm (5 tubes)/30 day supply

Therapeutic Class	Drug(s)	Limit(s)
Platelet Aggregation Inhibitors	BRILINTA	2 tablets/day
	EFFIENT	1 tablet/day
Postherpetic Neuralgia (PHN) Agents	GRALISE	300 mg= 150 tablets/30 day supply 600 mg = 90 tablets/30 day supply Starter pack = 1 pack per 365 days
Pseudobulbar Affect	NUEDEXTA	2 capsules/day
Restless Leg Syndrome	HORIZANT	1 tablet/day
Rosacea Agents	ORACEA	1 capsule/day
Sedatives and Hypnotics	AMBIEN *zolpidem*	5 mg = 2 tablets/day 10 mg = 1 tablet/day
	AMBIEN CR *zolpidem ER*	6.25 mg and 12.5 mg = 1 tablet/day
	EDLUAR INTERMEZZO	All strengths = 1 tablet/day
	LUNESTA	All strengths = 1 tablet/day
	ROZEREM	8 mg = 1 tablet/day
	SILENOR	All strengths = 1 tablet/day
	SONATA *zaleplon*	5 mg = 4 capsules/day 10 mg = 2 capsules/day
	ZOLPIMIST	1 bottle/30 day supply
Steroids – Gluco-corticosteroids	ENTOCORT EC *budesonide SR*	3 capsules/day
Stimulant/ Attention Deficit	ADDERALL *amphetamine/dextroamphetamine*	5, 7.5, 10, 12.5, 15 and 30 mg = 2 tablets/day 20 mg = 3 tablets/day
	ADDERALL XR *amphetamine/ dextroamphetamine SR*	All strengths = 1 capsule/day
	CONCERTA *methylphenidate ER*	18 mg, 27 mg and 54 mg = 1 tablet/day 36 mg = 2 tablets/day
	DAYTRANA	1 patch/day
	DESOXYN DEXEDRINE *dextroamphetamine* *methamphetamine*	All strengths = 4 tablets/day
	DEXEDRINE CR *dextroamphetamine CR*	All strengths = 3 capsules/day
	FOCALIN *dexmethylphenidate*	2.5 mg, 5 mg and 10 mg = 2 tablets/day
	FOCALIN XR METADATE CD	All strengths = 1 capsule/day
	INTUNIV	All strengths = 1 tablet/day
	KAPVAY	4 tablets/day
	METHYLIN chew/soln *methylphenidate*	2.5 mg, 5 mg and 10 mg = 6 tablets/day 5 mg/5 ml solution = 60 ml/day 10 mg/5 ml solution = 30 ml/day
	NUVIGIL	50 mg = 2 tablets/day 150 mg, 250 mg = 1 tablet/day
	PROCENTRA	40 ml/day
	PROVIGIL *modafanil*	100 mg and 200 mg = 2 tablets/day

Quantity Limit List

Therapeutic Class	Drug(s)	Limit(s)
Stimulant/ Attention Deficit (continued)	*metadate ER* *methylin* *methylin ER* *methylphenidate* *methylphenidate SR* RITALIN RITALIN SR	5 mg, 10 mg and 20 mg = 3 tablets/day
	RITALIN LA *methylphenidate ER*	10 mg, 20 mg, 40 mg = 1 capsule/day 30 mg = 2 capsules/day
	STRATTERA	10 mg, 18 mg, 25 mg, 40 mg and 60 mg = 2 capsules/day 80 mg and 100 mg = 1 capsule/day
	VYVANSE	All strengths = 1 capsule/day
Test Strips	FREESTYLE glucose test strips FREESTYLE LITE glucose test strips FREESTYLE INSULINX glucose test strips (any other brand name) ONE TOUCH FAST TAKE glucose test strips ONE TOUCH ULTRA glucose test strips ONE TOUCH VERIO IQ glucose test strips PRECISION QID glucose test strips PRECISION SOF-TACT glucose test strips PRECISION XTRA glucose test strips	300 strips for 30 days; 900 strips for 90 days
Ulcer/Heartburn/ Reflux	ACIPHEX DEXILANT *lansoprazole* *lansoprazole / ODT* NEXIUM *omeprazole* *pantoprazole* PREVACID PREVACID SOLUTAB PRILOSEC PROTONIX	All strengths = 1 tablet, capsule or packet/day
	OMECLAMOX PAK	1 pack/day for 10 days
	PREVPAC	1 pack/day for 14 days
	PRILOSEC powder	All strengths = 2 packets/day
	ZEGERID *omeprazole/bicarbonate*	20 mg/1680 mg and 40 mg/1680 mg packets = 1 packet/day 20 mg/1100 mg and 40 mg/1100 mg = 1 capsule/day
Vaginal Anti-Infectives	DIFLUCAN *fluconazole*	150 mg only = 1 dose/30 day supply
Viral Infections/ Immune System Enhancers	INCIVEK	6 tablets/day
	VICTRELIS	12 capsules/day

Step-Therapy List

Many of Aetna's pharmacy benefits plans include our step-therapy program. With this program, members are required to try one or more prerequisite drugs before a step-therapy drug will be covered under a member's pharmacy benefit.

Therapeutic Class	Drug(s)	Required Prerequisite Drug(s)
Acne	ACANYA BENZACLIN BENZAMYCIN DUAC	*benzoyl peroxide/clindamycin* or *benzoyl peroxide/erythromycin*
	DIFFERIN 0.1% cream/gel/lotion	*adalapene cream* or *gel* 1%
	ATRALIN RETIN-A TRETIN-X VELTIN	Try *tretinoin* **and** Try one of: *adapalene, benzoyl peroxide, topical clindamycin, topical erythromycin, sulfacetamide w/sulfur,* DIFFERIN 0.3% GEL or EPIDUO or RETIN-A MICRO or ZIANA
	BENZEFOAM ULTRA	*benzoyl peroxide foam*
Alzheimer's Disease – Antidementia	ARICEPT 5 mg, 10 mg and 23 mg	*donepezil*
	ARICEPT ODT	*donepezil ODT*
Antianginal	RANEXA	Nitrates or *amlodipine* or Beta Blockers (except *sotalol*)
Anticoagulants – Heparins	LOVENOX	*enoxaparin*
Anticonvulsant	DEPAKOTE	*divalproex sodium delayed release*
	DEPAKOTE ER	*divalproex sodium SR*
	DEPAKOTE SPRINKLE	*divalproex sodium sprinkle*
	KEPPRA	*levitiracetam*
	KEPPRA XR	*levitiracetam xr*
	LAMICTAL XR	*lamotrigine*
	TOPAMAX	*topiramate*
Antineoplastic – Hormonal Agents	ARIMIDEX	*anastrozole*
	FEMARA	*letrozole*
Antiparkinson	MIRAPEX MIRAPEX ER	*pramipexole*
	REQUIP XL	*ropinirole er*
Antiretrovirals – Non-Nucleoside Reverse Transcriptase Inhibitors (NNRTIs)	VIRAMUNE	*nevirapine*
	ZIAGEN	*abacavir*
Antipsoriatics	CALCITRENE SORILUX	*calcipotriene*
Antiviral	VALTREX	*valacyclovir*
Blood Pressure and Heart Failure	ATACAND AVAPRO BENICAR COZAAR DIOVAN EDARBI TEVETEN	Any two from the following: *eprosartan*, *irbesartan* or *irbesartan-hydrochlorothiazide* or *losartan*, *losartan/hydrochlorothiazide* or EXFORGE or EXFORGE HCT or MICARDIS or MICARDIS HCT

Step-Therapy List

Therapeutic Class	Drug(s)	Required Prerequisite Drug(s)
Blood Pressure and Heart Failure (continued)	ATACAND HCT AVALIDE BENICAR HCT DIOVAN HCT EDARBYCLOR HYZAAR TEVETEN HCT	Any two from the following: *eprosartan*, *irbesartan* or *irbesartan-hydrochlorothiazide* or *losartan*, *losartan/hydrochlorothiazide* or EXFORGE or EXFORGE HCT or MICARDIS or MICARDIS HCT
	NEXICLON	*clonidine*
	LOTREL	*amlodipine/benazepril*
	TRIBENZOR	Any two from the following: *amlodipine*, *eprosartan*, *irbesartan* or *irbesartan-hydrochlorothiazide* or *losartan*, *losartan/hydrochlorothiazide* or EXFORGE or EXFORGE HCT or MICARDIS or MICARDIS HCT
	TWYNSTA	EXFORGE or EXFORGE HCT
Bronchodilators - Sympathomimetics	MAXAIR AUTOHALER	PROAIR HFA or PROVENTIL HFA
	XOPENEX soln/conc.	*albuterol* or *levalbuterol*
Calcium Blockers	NORVASC	*amlodipine*
Cholesterol Lowering	ALTOPREV	*lovastatin*
	CADUET	*atorvastatin/amlodipine*
	FENOGLIDE FIBRICOR LOFIBRA LOPID LIPOFEN TRIGLIDE	*gemfibrozil*, *fenofibrate*, ANTARA, TRILIPIX
	LIPITOR	*atorvastatin* and CRESTOR or VYTORIN
Corticosteroids – Topical	CLOBEX lotion/shampoo	*clobetasol lotion/shampoo*
	CLODERM	Any 1 of the following: *hydrocortisone valerate*, *mometasone* or *triamcinolone*
	CUTIVATE LOCOID LOCOID LIPOCREAM	Any 1 of the following: *betamethasone*, *desonide*, *desoximetasone*, *fluticasone*, *fluocinonide*, *hydrocortisone*, *mometasone*, *prednicarbate* or *triamcinolone*
	DESONATE VERDESO	*desonide*
	LUXIQ	*beclomethasone valerate*
	OLUX OLUX-E VANOS	*clobetasol*
Depression	APLENZIN CYMBALTA FLUOXETINE 60 MG LEXAPRO LUVOX CR *nefazodone* PRISTIQ VENLAFAXINE ER (tab) VIIBRYD VIIBRYD KIT WELLBUTRIN XL PEXEVA	Any one from the following: *budeprion*, *budeprion XL*, *bupropion*, *bupropion SR*, *bupropion XL*, *citalopram*, *escitalopram*, *fluoxetine*, *fluvoxamine*, *mirtazapine*, *paroxetine*, *paroxetine ER*, *sertraline*, *venlafaxine*, *venlafaxine ER (cap)* or *venlafaxine SR (tab)* first

Therapeutic Class	Drug(s)	Required Prerequisite Drug(s)
Depression (continued)	CELEXA	*citalopram*
	EFFEXOR XR	*venlafaxine ER (cap)* or *venlafaxine SR (tab)*
	LEXAPRO solution	*citalopram solution, escitalopram sol, fluoxetine liquid, paroxetine liquid* or *sertraline concentrate*
	OLEPTRO	*trazodone*
	PAXIL	*paroxetine*
	PAXIL CR	*paroxetine ER*
	PROZAC PROZAC WEEKLY	*fluoxetine*
	REMERON	*mirtazapine*
	REMERON SOLUTAB	*mirtazapine ODT*
	WELLBUTRIN	*bupropion*
	WELLBUTRIN SR	*bupropion SR*
	ZOLOFT	*sertraline*
Diabetes – Insulin	NOVOLIN 70/30 RELION 70/30	HUMULIN 70/30
	NOVOLIN N RELION N	HUMULIN N
	NOVOLIN R RELION R	HUMULIN R
Diabetic Supplies	Diabetic test strips (all but those made by Abbott Diabetes Care or Lifescan)	Any two preferred blood glucose test strips: FREESTYLE, FREESTYLE INSULINX, FREESTYLE LITE, ONE TOUCH FAST TAKE, ONE TOUCH ULTRA, ONE TOUCH VERIO IQ, PRECISION QID, PRECISION SOF-TACT or PRECISION XTRA
Diabetes – Thiazolidinediones (TZDs) and Combinations	ACTOS	*pioglitazone*
	ACTOPLUS MET	*pioglitazone/metformin*
	ACTOPLUS MET XR	*pioglitazone/metformin*
	DUETACT	*pioglitazone/glimepiride*
Erectile Dysfunction (applies only to plans with ED coverage)	LEVITRA STAXYN VIAGRA	CIALIS
Glaucoma	XALATAN ZIOPTAN	*latanoprost*
Gout	ULORIC	*allopurinol*
Leukotriene Modulators	SINGULAIR	*montelukast*
Mania and Psychosis	FANAPT GEODON LATUDA SAPHRIS SEROQUEL	Any one of: *olanzapine, olanzapine ODT, quetiapine, risperidone, risperidone ODT, ziprasidone*
	INVEGA RISPERDAL RISPERDAL M	*risperidone* or *risperidone ODT*
	ZYPREXA	*olanzapine*
	ZYPREXA ZYDIS	*olanzapine ODT*

Step-Therapy List

Therapeutic Class	Drug(s)	Required Prerequisite Drug(s)
Migraine	ALSUMA AXERT FROVA IMITREX MIGRANAL RELPAX SUMAVEL ZOMIG ZOMIG ZMT	*sumatriptan*
	AMERGE	*naratriptan* or *sumatriptan*
	MAXALT MAXALT MLT	*rizatriptan benzoate* *rizatriptan benzoate mlt*
	TREXIMET	*naproxen* and *sumatriptan*
Misc. Endocrine	DDAVP (all forms)	*desmopressin*
Muscle Relaxants	AMRIX FEXMID	*cyclobenzaprine* **or** *cyclobenzaprine ER* and any one of: *baclofen, carisoprodol, carisoprodol w/ASA, carisoprodol w/codeine, chlorzoxazone, methocarbamol, orphenadrine ER, orphenadrine cpd, tizanidine*
Narcotic Partial Agonists	SUBUTEX	*buprenorphine*
Nasal Steroids	NASACORT AQ QNASL RHINOCORT AQ ZETONNA	Any two of: *flunisolide, fluticasone, triamcinolone*, NASONEX or VERAMYST
Non-Barbiturate Hypnotics	AMBIEN AMBIEN CR EDLUAR INTERMEZZO ROZEREM SONATA ZOLPIMIST	*zolpidem* or *zolpidem ER*
	SILENOR	*doxepin* and *zolpidem* or *zolpidem ER*
Ophthalmic Antihistamines and NSAIDs	PATANOL	PATADAY
Osteoporosis/ Paget's Disease	BONIVA FOSAMAX PLUS D	*alendronate* and ACTONEL or ACTONEL with calcium or ATELVIA
Pain (Analgesics) and Inflammation	ABSTRAL	*fentanyl lozenge*
	AVINZA	*morphine sulfate CR*
	DUEXIS	Use of one (1) preferred *generic* NSAID
	DURAGESIC	*fentanyl patch*
	EXALGO	*morphine sulfate CR*
	KADIAN	*morphine sulfate CR*
	LAZANDA	*fentanyl transmucosal lozenge*
	NUCYNTA OPANA	Any preferred generic *morphine* or *oxycodone immediate release*
	PENNSAID VIMOVO VOLTAREN GEL	Use of one (1) preferred *generic* NSAID
	SUBSYS SPRAY	*fentanyl transmucosal lozenge*

Therapeutic Class	Drug(s)	Required Prerequisite Drug(s)
Pancreatic Enzymes	VIOKACE PERTZYE	Any 1 of the following: CREON or ZENPEP
Platelet Aggregation Inhibitors	PLAVIX	*clopidogrel*
Phosphate Binders	PHOSLO	*calcium acetate*
	RENAGEL	RENVELA
Prostatic Hypertrophy Agents	FLOMAX	*tamsulosin*
	UROXATRAL	*alfuzosin*
Steroids - Gluco-corticosteroids	ENTOCORT EC	*budesonide SR*
Stimulant/ Attention Deficit	INTUNIV KAPVAY	Any one of: *clonidine, guanfacine, amphetamine/dextroamphetamine, amphetamine/dextroamphetamine SR, dexmethylphenidate, metadate ER, methamphetamine, methylin tab, methylin ER, methylphenidate, methylphenidate SR*
Testosterone Replacement	AXIRON STRIANT TESTIM	ANDROGEL or ANDRODERM
Topical Anesthetics	LIDODERM	*gabapentin*
Ulcer/Heartburn/ Reflux	ACIPHEX PREVACID PRILOSEC PROTONIX PREVACID SOLUTAB ZEGERID	Any two of: *lansoprazole, lansoprazole / ODT*, DEXILANT, NEXIUM
Urinary Pain/ Spasm	DETROL DETROL LA DITROPAN XL SANCTURA SANCTURA XR TOVIAZ	Any one of: *oxybutynin, oxybutynin XL, tolterodine,* ENABLEX, VESICARE, GELNIQUE
	OXYTROL	GELNIQUE

Index

Symbols

8-MOP 21

A

abacavir 31, 51
ABILIFY 16, 46
ABILIFY DISC 16, 46
ABSTRAL 18, 41, 48, 54
ACANYA 19, 51
acarbose 24
ACCOLATE 36, 42
ACCUNEB 35
ACCUPRIL 10
ACCURETIC 10
acebutolol 12
ACEON 10
acetaminophen/codeine 18
acetazolamide 13
acetic acid/antipyrine/benzocaine/polycosanol 35
ACIPHEX 27, 41, 50, 55
ACTEMRA 33, 39
ACTHAR HP 24, 39
ACTIMMUNE 8
ACTIQ 18, 41, 48
ACTIVELLA 26
ACTONEL 33, 47, 54
ACTONEL with calcium 54
ACTOPLUS MET 25, 53
ACTOPLUS MET XR 25, 53
ACTOS 25, 53
ACULAR 34
ACULAR LS 34
ACUVAIL 34
acyclovir 21, 32
ACZONE 19
ADAGEN 37, 40
adalapene cream or gel 51
ADALAT CC 12
adapalene 19, 38, 51
ADCIRCA 14, 41
ADDERALL 17, 41, 49
ADDERALL XR 17, 41, 49
ADOXA 30, 38
ADRENACLICK 10
ADVAIR DISKUS 35
ADVAIR HFA 35
ADVATE 9, 39
ADVICOR 11, 43
afeditab 12
AFINITOR 8, 40, 47
AGGRENOX 9
AGRYLIN 9
AKNE-MYCIN 19
ALAMAST 34
albuterol 35, 52
alclometasone 21
ALDACTAZIDE 13
ALDACTONE 13
ALDARA 22, 40, 45
ALDURAZYME 26, 40
alendronate 33, 47, 54
ALFERON N 8
alfuzosin 29, 38, 55
ALINIA 31
ALKERAN 8
allopurinol 25, 53
ALOCRIL 34
ALOMIDE 34
ALOQUIN 20
ALORA 26, 45
ALOXI 27, 38
ALPHAGAN P 33
ALPHANATE 9, 39
ALPHANINE SD 9, 39
alprazolam 14
alprazolam ER 14
alprazolam ODT 14
ALREX 34
ALSUMA 17, 46, 54
ALTABAX 20
ALTACE 10
altavera 22
ALTOPREV 12, 43, 52
ALVESCO 36
amantadine 16
AMARYL 24
AMBIEN 19, 49, 54
AMBIEN CR 19, 49, 54
amcinonide 21
AMERGE 17, 46, 54
amethia 23
amethia lo 22
amethyst 22
AMEVIVE 21, 39
AMICAR 9
amiloride 13
amiloride/hydrochlorothiazide 13
aminocaproic acid 9
aminophylline 36
amiodarone 11
AMITIZA 28, 40
amitriptyline 16
amlodipine 12, 51, 52
amlodipine/atorvastatin 12, 43
amlodipine/benazepril 13, 52
AMMONUL 26
amnesteem 19, 38
amoxapine 16
amoxicillin 29
amoxicillin/K clavulanate 29
amoxicillin/K clavulanate SR 29
amphetamine/dextroamphetamine .17, 41, 49, 55
amphetamine/dextroamphetamine SR 17, 41, 49, 55
ampicillin 29
AMPYRA 18, 40, 47
AMRIX 32, 54
AMTURNIDE 13, 42
amyl nitrite 11
ANAFRANIL 16
anagrelide 9
anastrozole 8, 40, 51
ANCOBON 30
ANDRODERM 26, 55
ANDROGEL 26, 55
ANGELIQ 26
ANTABUSE 17
ANTARA 11, 52
antipyrine/benzocaine 35
ANZEMET 27, 38, 47
APIDRA 24
APLENZIN 15, 44, 52
apraclonidine 33
apri 22
APRISO 28, 43
APTIVUS 31
ARALAST 35, 38
ARALAST NP 35, 38
ARALEN 31, 40, 46
aranelle 22
ARANESP 9, 40
ARAVA 32, 38
ARCALYST 32, 40
ARCAPTA 35, 39
AREDIA 33, 41
ARICEPT 14, 51
ARICEPT ODT 14, 51
ARIMIDEX 8, 40, 51
ARIXTRA 9
ARMOUR THYROID 27
AROMASIN 8, 40
ARTHROTEC 32
ASACOL 28, 43
ASACOL HD 28, 43
ASMANEX 36
ASTELIN NASAL 36
ASTEPRO 36
ATACAND 10, 42, 51
ATACAND HCT 10, 42, 52
ATELVIA 33, 47, 54
atenolol 12
atenolol/chlorthalidone 12
ATGAM 37
atorvastatin 12, 43, 52
atorvastatin/amlodipine 52
atovaquone/proguanil 31, 40
ATRALIN 19, 38, 51
ATRIPLA 31
ATROVENT HFA 35
ATROVENT NASAL 36
augmented betamethasone dipropionate 21
AUGMENTIN 29
AUGMENTIN ES 29
AUGMENTIN XR 29
AVALIDE 10, 42, 52
AVANDAMET 25, 39
AVANDARYL 25, 39
AVANDIA 25, 39
AVAPRO 10, 42, 51
AVELOX 30, 38
AVELOX ABC 30
aviane 22
avidoxy 30, 38
AVINZA 18, 48, 54
avita 19, 38

AVODART 29, 38
AVONEX 18, 40
AXERT 17, 46, 54
AXID 27
AXIRON 26, 55
AZASAN 37
AZASITE 34
azathioprine 37
azelastine nasal 36
azelastine ophth 34
AZELEX 19
AZILECT 16
azithromycin 30
AZOPT 34
AZOR 10, 42
AZULFIDINE 28, 43
AZULFIDINE ENTABS 28, 43

B

bacitracin 34
bacitracin/neomycin/polymyxin 34
bacitracin/polymyxin 34
bacitracin/polymyxin/neomycin/hydrocortisone 34
baclofen 32, 54
BACTROBAN 20
BACTROBAN NASAL 36
balsalazide 28, 44
BANZEL 14, 38
BARACLUDE 32
BD insulin syringes 24
BD lancets 24
BD pen needles 24
BEBULIN VH 9, 39
beclomethasone valerate 52
BECONASE AQ 36
benazepril 10
benazepril/hydrochlorothiazide 10
BENEFIX 9, 39
BENICAR 10, 42, 51
BENICAR HCT 10, 42, 52
BENLYSTA 37, 41
BENZACLIN 19, 51
BENZAMYCIN 19, 51
BENZEFOAM 19
BENZEFOAM ULTRA 19, 51
BENZIQ 20
BENZIQ LS 20
BENZIQ wash 20
benzoyl peroxide 20, 51
benzoyl peroxide/clindamycin 51
benzoyl peroxide/erythromycin 51
benzoyl peroxide foam 51
benztropine 16
BEPREVE 34
BERINERT 9, 40
BESIVANCE 34
Beta Blockers 51
betamethasone 52
betamethasone valerate 21
BETAPACE 12
BETAPACE AF 12
BETASERON 18, 40
betaxolol 12, 33
bethanechol 29
BETIMOL 33
BETOPTIC-S 33
BEYAZ 22
BIAXIN 30
BIAXIN XL 30
bicalutamide 8, 38
BIDIL 13
BIO-STATIN 30
bisoprolol 12
bisoprolol/hydrochlorothiazide 12
BLEPHAMIDE S.O.P. 35
BONIVA 33, 41, 47, 54
BOTOX 32, 40
BRAVELLE 25, 39
BREVICON 22
briellyn 22
BRILINTA 9, 41, 49
brimonidine 33
BROMDAY 34
bromfenac 34
bromocriptine 16
BROVANA 35, 39
budeprion 15, 44, 52
budeprion SR 44
budeprion XL 15, 44, 52
budesonide inhalation susp 36
budesonide SR 26, 49, 55
bumetanide 13
BUPHENYL 26
buprenorphine 19, 40, 48, 54
bupropion 15, 44, 52, 53
bupropion SR 15, 44, 52, 53
bupropion XL 52
buspirone 14
butalbital/acetaminophen/caffeine/codeine 18
butalbital/aspirin/caffeine/codeine 18
BUTISOL SODIUM 19
butorphanol 19
butorphanol nasal 48
BUTRANS 19, 41, 48
BYDUREON 24, 45
BYETTA 24, 45
BYSTOLIC 12

C

CADUET 12, 43, 52
CALAN 12
CALAN SR 12
calcipotriene 21, 51
calcitonin salmon nasal 33
CALCITRENE 21, 51
calcitriol 21
calcium acetate 28, 55
CAMBIA 17, 46
camila 23
CAMPRAL 17
camrese 22
camrese lo 22
CANASA 28, 44
CAPITAL/CODEINE 18
CAPRELSA 8, 40, 47
captopril 10
captopril/hydrochlorothiazide 10
CARAC 20
carbamazepine 14
carbamazepine SR 14
carbamazepine XR 14
CARBATROL 14
carbidopa/levodopa 16
carbidopa/levodopa/entacapone 16
carbidopa/levodopa ODT 16
carbidopa/levodopa SR 16
CARDENE SR 12
CARDIZEM 12
CARDIZEM CD 12
CARDIZEM LA 12
CARDURA 11
CARDURA XL 29
CARIMUNE NANOFILTERED 37, 40
carisoprodol 32, 54
carisoprodol/aspirin 32
carisoprodol/aspirin/codeine 32
carisoprodol w/ASA 54
carisoprodol w/codeine 54
CARNITOR 26
carteolol 33
cartia XT 12
carvedilol 10
CASODEX 8, 38
CATAPRES 11
CATAPRES-TTS 11
CAVERJECT 28, 45
CAYSTON 36
CEDAX 30
CEENU 8
cefaclor 29
cefaclor ER 29
cefadroxil 29
cefdinir 30
cefditoren 30
cefpodoxime 30
cefprozil 29
CEFTIN 29
cefuroxime 29
CELEBREX 32, 41, 48
CELEXA 15, 44, 53
CELLCEPT 37
CELONTIN 15
CENESTIN 26
centany 20
cephalexin 29
CEREDASE 25, 39
CEREZYME 25, 39
CESAMET 27, 47
cesia 22
CETRAXAL 35
CETROTIDE 25, 39
cevimeline 36
CHENODAL 28
chloral hydrate 19
chlordiazepoxide 14

Index

chlordiazepoxide/amitriptyline 17
chloroquine 31, 40, 46
chlorothiazide 13
chlorpromazine 17
chlorpropamide 24
chlorthalidone 13
chlorzoxazone 32, 54
cholestyramine 11
cholestyramine light 11
chorionic gonadotropin 25, 39
CIALIS 28, 29, 38, 42, 45, 53
ciclopirox 20
ciclopirox nail lacquer 39
cilostazol 9
cimetidine 27
CIMZIA 28, 33, 39
CINRYZE 9, 40
CIPRO 30, 38
CIPRODEX 35
ciprofloxacin 30, 34, 38
ciprofloxacin ER 30
ciprofloxacin otic 35
CIPRO HC 35
CIPRO XR 38
citalopram 15, 44, 52, 53
citalopram solution 53
claravis 20, 38
CLARIFOAM EF 20
CLARINEX 36, 39, 42
CLARINEX-D 36, 39, 42
CLARINEX REDITAB 36
clarithromycin 30
clarithromycin SR 30
CLEOCIN VAGINAL 29
CLIMARA 26, 45
CLIMARA PRO 26, 45
clindamax 20, 29
clindamycin 20, 30
clindamycin/benzoyl peroxide 20
clobetasol 21, 52
clobetasol lotion/shampoo 52
CLOBEX lotion/shampoo ..21, 52
CLOBEX spray 21
CLODERM 21, 52
clomipramine 16
clonazepam 14
clonazepam orally disintegrating tab 14
clonidine 11, 52, 55
clopidogrel 9, 55
clorazepate 14
CLORPRES 13
clotrimazole/betamethasone 20
clotrimazole troche 30
clozapine 16, 46
CLOZARIL 16, 46
COARTEM 31, 40
cocaine hcl 21
COCET 18
COCET PLUS 18
codeine phosphate 18
codeine sulfate 18
COLAZAL 28, 44
COLCRYS 25
COLESTID 11
colestipol 11
colistimethate sodium 31, 36
colocort 28
COLY-MYCIN M 31, 36
COLY-MYCIN S 35
COLYTE 27
COMBIGAN 33
COMBIPATCH 26, 45
COMBIVENT 35, 39
COMBIVENT RESPIMAT 35
COMBIVIR 31
COMPLERA 31
compro 17
COMTAN 16
CONCERTA 17, 41, 49
CONDYLOX 22
CONZIP 18, 48
COPAXONE 18, 40
COPEGUS 32
CORDARONE 11
CORDRAN 21
COREG 10
COREG CR 10
CORGARD 12
CORIFACT 9, 39
CORTIFOAM 28
cortisone AC 26
cortomycin 35
CORZIDE 12
COSOPT 34
COSOPT PF 34
COUMADIN 9
COVERA-HS 12
COZAAR 10, 42, 51
CREON 28, 55
CRESTOR 12, 43, 52
CRINONE 29
CRIXIVAN 31
cromolyn sodium concentrate 28
cromolyn sodium nebulizer 35
cromolyn sodium ophth 34
cryselle 22
CUPRIMINE 37
CUTIVATE 21, 52
CUVPOSA 19
CYCLESSA 22
cyclobenzaprine 32, 54
cyclobenzaprine ER 32, 54
cyclophosphamide 8
CYCLOSET 24
cyclosporine 37
cyclosporine modified 37
CYMBALTA 15, 17, 44, 52
CYSTADANE 26
CYSTAGON 28
CYTOGAM 31, 37
CYTOMEL 27
CYTOVENE 31

D

DALIRESP 36, 41
danazol 26
DANTRIUM 32
dantrolene 32
dapsone 31
DARAPRIM 31, 40
DAYPRO 32
DAYTRANA 17, 41, 49
DDAVP 22, 40, 54
deferoxamine mesylate 37
DEMADEX 13
demeclocycline 30, 38
DEMEROL 18
DEMSER 14
DENAVIR 21
DEPAKENE 15
DEPAKOTE 15, 51
DEPAKOTE ER 15, 51
DEPAKOTE SPRINKLE 15, 51
DEPEN TITRATABS 37
DEPO-PROVERA 8, 22
DERMATOP 21
DESFERAL 37
desipramine 16
desloratidine 36, 39, 42
desmopressin 22, 40, 54
DESOGEN 22
DESONATE 21, 52
desonide 21, 52
desoximetasone 21, 52
DESOXYN 17, 41, 49
DETROL 29, 55
DETROL LA 29, 55
dexamethasone 26
dexamethasone/neomycin/polymyxin 35
dexamethasone phosphate 35
DEXEDRINE 17, 41, 49
DEXEDRINE CR 49
DEXILANT 27, 41, 50, 55
dexmethylphenidate ...17, 41, 49, 55
dextroamphetamine 17, 41, 49
dextroamphetamine CR ...17, 41, 49
DIABETA 24
DIAMOX 13
DIASTAT 14
diazepam 14
diazepam rectal gel 14
DIBENZYLINE 14
diclofenac 32
diclofenac ophth 34
diclofenac potassium 32
diclofenac sodium XR 32
dicloxacillin sodium 30
didanosine delayed release 31
DIDRONEL 33
DIFFERIN 20, 38, 51
DIFICID 30, 38, 42
diflorasone 21
DIFLUCAN 30, 39, 50
DIGEX 28
digoxin 13

DILACOR XR 12
DILANTIN 14
DILATRATE SR 11
DILAUDID 18
dilt-CD 12
diltiazem 13
diltiazem CD/ER/CR/XT 13
diltiazem SR extended release beads 13
dilt-XR 13
DIOVAN 10, 43, 51
DIOVAN HCT 10, 43
DIOVAN/HCT 52
DIPENTUM 28, 44
DIPROLENE AF 21
dipyridamole 10
disopyramide 11
DITROPAN XL 29, 55
DIURIL 13
divalproex sodium delayed release 15, 51
divalproex sodium sprinkle 15, 51
divalproex sodium SR 15, 51
DIVIGEL 26
donepezil 14, 51
donepezil ODT 14, 51
DORAL 19
DORYX 30, 38
dorzolamide 34
dorzolamide/timolol 34
DOVONEX 21
doxazosin 11
doxepin 16, 54
doxycycline 38
doxycycline hyclate 30
doxycycline monohydrate 30
DRITHO-SCALP 21
dronabinol 27, 38
DUAC 20, 51
DUETACT 25, 53
DUEXIS 32, 48, 54
DULERA 35
DUONEB 35
DURAGESIC 18, 48, 54
DUREZOL 35
DUTOPROL 12
DYAZIDE 13
DYMISTA 36
DYNACIN 30, 38
DYNACIRC CR 13
DYRENIUM 13
DYSPORT 32, 40

E

EDARBI 10, 43, 51
EDARBYCLOR 10, 43, 52
EDEX 28, 45
EDURANT 31
e.e.s. 30
econazole 20
EDECRIN 13
EDLUAR 19, 49, 54
EFFEXOR XR 15, 44, 53
EFFIENT 10, 41, 49
EFUDEX 21
ELAPRASE 26, 40
ELDEPRYL 16
ELELYSO 25, 39
ELESTAT 34
ELESTRIN 26
ELIDEL 22, 40
ELIGARD 8
ELIPHOS 28
ELLA 22
ELMIRON 28, 40, 46
ELOCON 21
EMADINE 34
EMCYT 8
EMEND 27, 38, 47
emoquette 22
EMSAM 15, 44
EMTRIVA 31
ENABLEX 29, 55
enalapril 10
enalapril/hydrochlorothiazide 10
ENBREL 21, 33, 39
ENDOMETRIN 29
ENJUVIA 26
enoxaparin 9, 51
enpresse 22
entacapone 16
ENTOCORT EC 26, 49, 55
EPIDUO 20, 38, 51
epinastine 34
epinephrine 10
EPIPEN 10
EPIPEN-JR 10
EPIVIR 31
EPIVIR HBV 32
eplerenone 13
EPOGEN 9, 40
epoprostenol 14, 41
eprosartan 10, 43, 51, 52
EPZICOM 31
EQUETRO 17
ERBITUX 8, 40
ergoloid mesylate 19
ERIVEDGE 8, 40, 47
errin 23
ERTACZO 20
erythrocin 30
erythromycin 20, 30, 34
erythromycin/benzoyl peroxide 20
erythromycin delayed release particles 30
erythromycin ethylsuccinate 30
escitalopram 15, 44, 52
escitalopram sol 53
estazolam 19
ESTRACE 26
ESTRACE VAGINAL 29
ESTRADERM 26, 45
estradiol/norethindrone acetate 26
estradiol patch 26, 45
estradiol tab 26
ESTRASORB 26
ESTRING 29
ESTROGEL 26
estropipate 26
ESTROSTEP FE 22
ethambutol 31
ethosuximide 15
etidronate 33
etodolac 32
etodolac ER 32
etoposide 9
EUFLEXXA 33
EURAX 22
EVAMIST 26
EVISTA 33
EVOCLIN 20
EVOXAC 36
EXALGO 18, 48, 54
EXELDERM 20
EXELON capsules 14
EXELON patch, soln 14
exemestane 8, 40
EXFORGE 10, 43, 51, 52
EXFORGE HCT 10, 43, 51, 52
EXJADE 37
EXTAVIA 18, 40
EXTINA 21
EYLEA 34

F

FABRAZYME 25, 39
FACTIVE 30, 38
famciclovir 32, 42
famotidine 27
FAMVIR 32, 42
FANAPT 16, 46, 53
FARESTON 8
FASLODEX 8
FAZACLO 16, 46
FEIBA VH IMMUNO 9, 39
felbamate 14
FELBATOL 14
felodipine 13
FEMARA 8, 40, 51
FEMCON 22
FEMHRT 26
FEMHRT LOW DOSE 26
FEMRING 29
FEMTRACE 26
fenofibrate 11, 52
fenofibrate micronized 11
fenofibric acid 11
FENOGLIDE 11, 52
fenoprofen 32
fentanyl lozenge 18, 41, 54
fentanyl lozenges 48
fentanyl patch 18, 48, 54
fentanyl transmucosal lozenge 54
FENTORA 18, 41, 48
FERRIPROX 37
FERRLECIT 37
FEXMID 32, 54
FIBRICOR 11, 52
FINACEA 22
finasteride 29, 38

Index

FIORICET/CODEINE 18
FIORINAL/CODEINE 18
FIRAZYR 9, 40
FIRMAGON 8, 40
flavoxate 29
FLEBOGAMMA 37, 40
flecainide 11
FLECTOR patch 32, 41, 48
FLOLAN 14, 41
FLOMAX 29, 38, 55
FLONASE 36
FLO-PRED 26
FLOVENT DISKUS 36
FLOVENT HFA 36
fluconazole 30, 39, 50
flucytosine 30
fludrocort 27
FLUMADINE 32
flunisolide 36, 54
fluocinolone acetonide 21
fluocinonide 21, 52
fluor-op 35
fluorometholone 35
FLUOROPLEX 21
fluorouracil 21
fluoxetine 15, 44, 52, 53
FLUOXETINE 15, 44, 52
fluoxetine delayed release 15
fluoxetine liquid 53
fluoxetine (PMDD) 44
fluphenazine 17
flurazepam 19
flurbiprofen 32
flurbiprofen ophth 34
flutamide 8
fluticasone 21, 52, 54
fluticasone nasal 36
fluvastatin 12, 43
fluvoxamine 15, 44, 52
FML FORTE 35
FML LIQUIFILM 35
FML S.O.P. 35
FOCALIN 17, 41, 49
FOCALIN XR 17, 41, 49
FOLLISTIM AQ 25, 39
fondaparinux 9
FORADIL 35, 39
FORTAMET 24
FORTEO 33, 41
FORTESTA 26
fortical 33
FOSAMAX 33, 47
FOSAMAX PLUS D 33, 47, 54
foscarnet 31
fosinopril 10
fosinopril/hydrochlorothiazide 10
FOSRENOL 28
FRAGMIN 9
FREESTYLE
glucose test strips 24, 50, 53
FREESTYLE INSULINX 24, 50, 53
FREESTYLE LITE
glucose test strips 24, 50, 53
FROVA 17, 46, 54
furosemide 13
FUZEON 31

G

gabapentin 14, 42, 55
GABITRIL 14, 38
galantamine 14
GAMASTAN S/D 37, 40
GAMMAGARD 37, 40
GAMMAGARD S/D 37, 40
GAMMAKED 37, 40
GAMMAPLEX 37, 40
GAMUNEX 37, 40
GAMUNEX-C 37, 40
ganciclovir 31
GANIRELIX 25, 39
GANITE 33
GASTROCROM 28
gavilyte-g 27
GELNIQUE 29, 55
gemfibrozil 11, 52
GENERESS FE 22
gengraf 37
GENOTROPIN 25, 39
gentamicin 20, 34
GEODON 16, 46, 53
gianvi 22
gildess FE 22
GILENYA 18, 40, 47
GLASSIA 35, 38
GLEEVEC 8, 40, 47
glimepiride 24
glipizide 24
glipizide/metformin 24
glipizide ER 24
glipizide XL 24
GLUCAGON 25
GLUCOPHAGE 24
GLUCOPHAGE XR 24
glucose test strips 24, 50
GLUCOTROL 24
GLUCOTROL XL 24
GLUCOVANCE 24
GLUMETZA 24
glyburide 24
glyburide/metformin 24
glyburide micronized 24
GLYNASE 24
GLYSET 24
GOLYTELY 27
GONAL-F 25, 39
GONAL-F RFF 25, 39
GRALISE 19, 41, 49
granisetron 27, 47
GRANISOL 27, 47
GRIFULVIN V 30
GRIS-PEG 30
guanabenz 11
guanfacine 11, 55

H

HALCION 19
HALFLYTELY 27
HALOG 21
haloperidol 17
HALOTIN 20
HECTOROL 26
HELIDAC 28
HELIXATE FS 9, 39
HEMOFIL M 9, 39
HEPAGAM B 37
heparin sodium 9
HEPSERA 32
HEXALEN 8
HIZENTRA 37, 40
HORIZANT 19, 41, 49
HUMALOG 24
HUMATE-P 9, 39
HUMATROPE 25, 39
HUMIRA 21, 28, 33, 39
HUMULIN 24
HUMULIN 70/30 53
HUMULIN N 53
HUMULIN R 53
HYALGAN 33
HYCAMTIN 9, 47
hydralazine 14
hydralazine/hydrochlorothiazide 13
HYDREA 8
hydrochlorothiazide 13
hydrocodone/acetaminophen 18
hydrocodone/ibuprofen 18
hydrocodone polistirex/
chlorpheniramine polistirex 36
hydrocortisone 21, 26, 52
hydrocortisone/iodoquinol 20
hydrocortisone/pramoxine 21
hydrocortisone butyrate 21
hydrocortisone valerate 21, 52
hydromorphone 18
hydroxychloroquine 31, 40, 46
hydroxyurea 8
hydroxyzine hcl 14
hydroxyzine pamoate 14
hyoscyamine 29
HYPERHEP B 37
HYPERRAB S/D 37
HYPERRHO S/D 37
HYPERTET S/D 37
HYZAAR 10, 43, 52

I

ibandronate 33, 47
IBUDONE 18
ibuprofen 33
ILARIS 32, 40
IMDUR 11
imipramine 16
imiquimod 22, 40, 45
IMITREX 17, 46, 54
IMOGAM RABIE 37
IMURAN 37

INCIVEK 32, 41, 50
INCRELEX 25, 39
indapamide 13
INDERAL LA 12
indomethacin 33
indomethacin ER 33
INFERGEN 32, 41
INLYTA 8, 40, 47
INNOPRAN XL 12
INSPRA 13
insulin syringes 24
INTELENCE 31
INTERMEZZO 19, 41, 49, 54
INTRON-A 8, 41
INTUNIV 17, 49, 55
INVEGA 16, 46, 53
INVIRASE 31
IOPIDINE 33
ipratropium/albuterol 35
ipratropium inhaler 35
ipratropium nasal 36
IPRIVASK 9
IQUIX 34
irbesartan 10, 42, 51, 52
irbesartan-hydrochlorothiazide 10, 42, 51, 52
IRESSA 8
ISENTRESS 31
ISO CARBACHOL 34
isonarif 31
isoniazid 31
ISOPTIN SR 13
ISOPTO CARPINE 34
ISORDIL 11
isosorbide dinitrate 11
isosorbide mononitrate 11
isotretinoin 20, 38
isoxsuprine 14
isradipine 13
ISTALOL 33
itraconazole 30, 39

J

JAKAFI 8, 40
JALYN 29, 38
jantoven 9
JANUMET 24
JANUMET XR 24
JANUVIA 24
JENTADUETO 24
JEVTANA 9, 40
jinteli 26
jolessa 22
jolivette 23
junel 22
junel FE 23
JUVISYNC 25

K

KADIAN 18, 48, 54
KALBITOR 9, 40
KALETRA 31
KALYDECO 36, 39, 44
KAPVAY 17, 49, 55
kariva 23
kelnor 23
KEPPRA 14, 51
KEPPRA XR 15, 51
KERLONE 12
KETEK 30
ketoconazole 20, 30
ketoconazole foam 21
ketoprofen 33
ketoprofen ER 33
ketorolac 33, 48
ketorolac tromethamine ophth 34
KINERET 21, 33, 39
KLARON 20
KLONOPIN 14
KOATE-DVI 9, 39
KOGENATE FS 9, 39
KOMBIGLYZE 24
KORLYM 24, 39, 45
KRISTALOSE 28
KRYSTEXXA 25, 39
KUVAN 26
KYTRIL 47

L

labetalol 10
lactulose 28
LAMICTAL 15
LAMICTAL ODT 15
LAMICTAL XR 15, 51
LAMISIL 30, 39
lamivudine 31
lamivudine/zidovudine 31
lamotrigine 15, 51
lancets 24, 25
LANOXIN 13
lansoprazole 27, 41, 50, 55
lansoprazole / ODT 27, 50, 55
LANTUS 24
LANTUS SOLOSTAR 24
LASIX 13
LASTACAFT 34
latanoprost 34, 53
LATUDA 16, 46, 53
lavoclen 20
LAZANDA 18, 41, 48, 54
leena 23
leflunomide 32, 38
LESCOL 12, 43
LESCOL XL 12, 43
lessina 23
LETAIRIS 14, 41
letrozole 8, 40, 51
leucovorin calcium 8
LEUKERAN 8
LEUKINE 9
leuprolide 8, 25
levalbuterol 35, 52
LEVAQUIN 30, 38
LEVATOL 12
LEVEMIR 24
LEVEMIR FLEXPEN 24
levetiracetam 15
levetiracetam ER 15
levitiracetam 51
levitiracetam xr 51
LEVITRA 28, 45, 53
levobunolol 33
levocetirizine 36, 39, 42
levofloxacin 30, 34, 38
levonorgesterol tab 22
levora 23
levorphanol 18
levothroid 27
levothyroxine 27
levoxyl 27
LEVULAN KERA 21
LEXAPRO 16, 44, 52, 53
LEXIVA 31
LIALDA 28, 44
lidocaine 21
lidocaine/hydrocortisone 21
lidocaine/prilocaine 21
LIDODERM 21, 55
lindane 22
liothyronine sodium 27
LIPITOR 12, 43, 52
LIPOFEN 11, 52
LIQUICET 18
lisinopril 10
lisinopril/hydrochlorothiazide 10
lithium carbonate 17
lithium carbonate CR 17
lithium citrate 17
LITHOBID 17
LIVALO 12, 43
LOCOID 21, 52
LOCOID LIPOCREAM 22, 52
LOESTRIN 23
LOFIBRA 11, 52
LO LOESTRIN FE 23
LO/OVRAL 23
LODOSYN 16
LOESTRIN-24 23
LOESTRIN FE 23
LOPID 11, 52
LOPRESS HCT 12
LOPRESSOR 12
LOPROX 20
lorazepam 14
LORCET 18
LORCET PLUS 18
LORTAB 18
loryna 23
LORZONE 32
losartan 10, 42, 51, 52
losartan/hydrochlorothiazide 10, 43, 51, 52
LOSEASONIQUE 23
LOTEMAX OINT 35
LOTEMAX SUS 35
LOTENSIN 10
LOTENSIN HCT 10
LOTREL 13, 52
LOTRISONE 20
LOTRONEX 28, 40

Index

lovastatin 12, 43, 52
LOVAZA 12
LOVENOX 9, 51
low-ogestrel 23
loxapine 17
LUCENTIS 34
LUMIGAN 34
LUMIZYME 26, 41
LUNESTA 19, 49
LUPRON 8
LUPRON DEPOT 8
lutera 23
LUVERIS 39
LUVOX CR 16, 44, 52
LUXIQ 22, 52
LYBREL 23
LYRICA 15, 17, 42
LYSODREN 8
LYSTEDA 9, 45

M

MACROBID 29
MACUGEN 34
MAGNACET 18
MAKENA 26, 40, 45
MALARONE 31, 40
maprotiline 15, 44
MARINOL 27, 38
MARPLAN 15
MATULANE 8
matzim LA 13
MAVIK 10
MAXAIR AUTOHALER 35, 52
MAXALT 17, 46, 54
MAXALT MLT 17, 46, 54
MAXIDONE 18
MAXZIDE 13
MEBARAL 19
meclofenamate sodium 33
medroxyprogesterone 22
medroxyprogesterone acetate 26
mefenamic acid 33, 48
mefloquine 31, 40
MEGACE 8
MEGACE ES 8
megestrol 8
meloxicam 33
MENEST 26
MENOPUR 25, 39
MENOSTAR 26, 45
meperidine 18
meprobamate 14
MEPRON 31
mercaptopurine 8
mesalamine 28
MESNEX 8
MESTINON 32
MESTINON TIMESPAN 32
METADATE CD 17, 41, 49
metadate ER 17, 41, 50, 55
METAGLIP 24
metaproterenol 36
metaxalone 32
metformin 24
metformin ER 24
methadone 18, 48
methadose 18, 48
methamphetamine 17, 41, 49, 55
methazolamide 13
methenamine hippurate 29
methenamine mandelate 29
methimazole 27
methocarbamol 32, 54
methotrexate 8
methychlothiazide 13
methyldopa 11
methyldopa/hydrochlorothiazide 13
methylin 17, 41, 50
METHYLIN chew/soln 17, 41, 49
methylin ER 17, 41, 50, 55
methylin tab 55
methylphenidate 17, 41, 49, 50, 55
methylphenidate ER 49, 50
methylphenidate SR 17, 41, 50, 55
methylprednisolone 27
metipranolol 33
metoclopramide 28
metolazone 13
metoprolol 12
metoprolol ER 12
metoprolol/hydrochlorothiazide 12
METOZOLV ODT 28
METROCREAM 20
METROGEL 20
METROGEL VAGINAL 29
METROLOTION 20
metronidazole 20, 22, 30
METVIXIA 21
MEVACOR 12, 43
mexiletine 11
MIACALCIN 33, 41
MIACALCIN NASAL 33
MICARDIS 10, 43, 51, 52
MICARDIS HCT 10, 43, 51, 52
MICRHOGAM ULTRA-FILTERED 37
microgestin 23
microgestin FE 23
MICROZIDE 13
MIDAMOR 13
midazolam 19
MIGRANAL 17, 46, 54
MILLIPRED 27
MINIPRESS 11
minirin 22, 40
MINOCIN 30, 38
minocycline 30, 38
minoxidil 14
MIRAPEX 16, 51
MIRAPEX ER 16, 51
MIRCETTE 23
mirtazapine 15, 45, 52, 53
mirtazapine ODT 15, 45, 53
misoprostol 27
MOBIC 33
modafanil 49
modafinil 19, 41
MODICON 23
moexipril 10
moexipril/hydrochlorothiazide 10
mometasone 22, 52
MONARC-M 39
MONOCLATE-P 9, 39
MONODOX 30, 38
MONOKET 11
mononessa 23
MONONINE 9, 39
montelukast 36, 42, 53
MONUROL 29
morphine 54
morphine sulfate 18, 48
morphine sulfate CR 18, 48, 54
MOVIPREP 27
MOXATAG 29
MS CONTIN 18, 48
MULTAQ 11
mupirocin 20
MUSE 28, 45
MYAMBUTOL 31
mycophenolate 37
MYFORTIC 37
MYLERAN 8
MYOBLOC 32, 40
myorisan 20, 38
myoxin 35
MYOZYME 26, 41

N

NABI-HB 37
nabumetone 33
nadolol 12
nadolol/bendroflumethiazide 12
NAFTIN 20
NAGLAZYME 26, 40
naltrexone 17
NAMENDA 14
NAPRELAN 33
naproxen 33, 54
naratriptan 17, 46, 54
NARDIL 15
NASACORT AQ 36, 54
NASONEX 36, 54
NATAZIA 23
nateglinide 24
NATROBA 22
NEBUPENT 30
necon 23
nefazodone 15, 52
NEOBENZ 20
neomycin 29
neomycin/polymyxin/gramicidin 34
neomycin/polymyxin/hydrocortisone 35
NEORAL 37
NEOTIC 35
NEULASTA 9
NEUMEGA 9
NEUPOGEN 9
NEUPRO 16

NEURONTIN 15, 42
NEVANAC 34
nevirapine 31, 51
NEXAVAR 8, 40, 47
NEXICLON 11, 52
NEXIUM 27, 41, 50, 55
next choice 22
NIASPAN 12
nicardipine 13
nifediac CC 13
nifedical XL 13
nifedipine 13
nifedipine CR/ER/SR 13
NILANDRON 8
nimodipine 13
NIMOTOP 13
NIRAVAM 14
nisoldipine 13
Nitrates 51
NITRO-BID 11
NITRO-DUR 11
NITROMIST 11
nitrofurantoin 29
nitrofurantoin monohydrate macrocrystal 29
nitroglycerin 11
nitroglycerin CR 11
nitroglycerin SL 11
NITROLINGUAL 11
NITROSTAT 11
nizatidine 27
NORDITROPIN 25, 39
NORINYL 23
NOROXIN 30, 38
NORPRAMIN 16
NOR-QD 23
nora-be 23
NORCO 18
NORDETTE 23
norethindrone acetate 26
NORITATE 20
NORPACE 11
nortrel 23
nortriptyline 16
NORVASC 13, 52
NORVIR 31
novarel 25, 39
NOVOLIN products 24, 53
NOVOLOG products 24
NOVOSEVEN 9, 39
NOVOSEVEN RT 9
NOXAFIL 30
NPLATE 9
NUCYNTA 18, 48, 54
NUCYNTA ER 18, 48
NUEDEXTA 19, 41, 49
nulecit 37
NULOJIX 37
NULYTELY 27
NUOX 20
NUTRIDOX 30
NUTROPIN 25, 39
NUTROPIN AQ 25, 39
NUTROPIN NUSPIN 25
NUVARING 23
NUVIGIL 19, 41, 49
NUZON 22
nystatin 20, 30
nystatin/triamcinolone 20
nystatin vaginal 29

O

ocella 23
OCTAGAM 37, 40
octreotide 22
ofloxacin 30, 34, 38
ofloxacin otic 35
OFORTA 40, 47
ogestrel 23
olanzapine 16, 46, 53
olanzapine/fluoxetine 17, 46
olanzapine ODT 16, 46, 53
OLEPTRO 15, 44, 53
OLUX 22, 52
OLUX-E 22, 52
OMECLAMOX 28
OMECLAMOX PAK 50
omeprazole 27, 41, 50
omeprazole/bicarbonate ..27, 41, 50
OMNARIS 36
OMNITROPE 25, 39
OMONTYS 9, 40
ondansetron 27, 47
ondansetron ODT 27, 47
ONE TOUCH FAST TAKE glucose test strips 50, 53
ONE TOUCH ULTRA glucose test strips 25, 50, 53
ONE TOUCH VERIO IQ glucose test strips 25, 50, 53
ONFI 14, 38
ONGLYZA 24
ONSOLIS 18, 41, 48
OPANA 18, 54
OPANA ER 18, 48
OPTIPRANOLOL 34
OPTIVAR 34
ORACEA 22, 38, 49
ORAMORPH SR 18, 48
ORAP 19
ORAPRED 27
ORAVIG 30, 42
ORAXYL 30, 38
ORBIVAN 18
ORBIVAN CF 19
ORENCIA 33, 39
ORFADIN 25
orphenadrine/aspirin/caffeine 32
orphenadrine cpd 54
orphenadrine ER 32, 54
ORTHO-CEPT 23
ORTHO-CYCLEN 23
ortho-est 26
ORTHO-NOVUM 23
ORTHOCLONE OKT3 37
ORTHO EVRA 23
ORTHO MICRONOR 23
ORTHO TRI-CYCLEN 23
ORTHO TRI-CYCLEN LO 23
ORTHOVISC 33
OSMOPREP 27
otozin 35
OVCON 35 23
OVCON 50 23
OVIDREL 25, 39
oxaprozin 33
oxazepam 14
oxcarbazepine 15
OXECTA 18
OXISTAT 20
OXSORALEN-UL 21
oxybutynin 29, 55
oxybutynin ER 29
oxybutynin XL 55
oxycodone 18
oxycodone/acetaminophen 18
oxycodone/aspirin 18
oxycodone/ibuprofen 18, 48
oxycodone immediate release 54
oxycodone SR 48
OXYCONTIN CR 18, 48
oxymorphone ER 18, 48
OXYTROL 29, 55
OZURDEX 34

P

PACERONE 11
PACNEX HP 20
PACNEX LP 20
PACNEX MX 20
pacnex wash 20
PAMELOR 16
pamidronate 33, 41
PANCREAZE 28
PANCRELIPASE 28
PANRETIN 21
pantoprazole 27, 41, 50
papaverine ER 14
PARCOPA 16
PARLODEL 16
PARNATE 15
paromomycin 29
paroxetine 16, 44, 52, 53
paroxetine ER 16, 44, 52, 53
paroxetine liquid 53
PATADAY 34, 54
PATANASE 36
PATANOL 34, 54
PAXIL 16, 44, 53
PAXIL CR 16, 44, 53
PCE 30
PEG-INTRON 32, 41
peg 3350 27
PEGASYS 32, 41
penicillin VK 30
PENLAC 20, 39
pen needles 25

Index

PENNSAID 33, 48, 54
PENTASA 28, 44
pentazocine/acetaminophen 19
pentazocine/naloxone 19
PEPCID 27
PERCOCET 19
PERCODAN 19
PERFOROMIST 36, 39
perindopril 10
permethrin 22
perphenazine 17
perphenazine/amitriptyline 17
PERSANTINE 10
PERTZYE 28, 55
PEXEVA 16, 44, 52
phenelzine 15
phenobarbital 19
phenylephrine/promethazine/codeine 39
phenytoin extended 14
phenytoin sodium 14
PHOSLO 28, 55
PHOSLYRA 28
PHOSPHOLINE 34
PHRENILIN 19
PICATO 21, 38, 42
pilocarpine 34, 36
PILOPINE HS 34
pindolol 12
PINNACAINE 35
pioglitazone 25, 53
pioglitazone/glimepiride 53
pioglitazone/metformin 25, 53
piroxicam 33
PLAN B 22
PLAQUENIL 31, 40, 46
PLAVIX 10, 55
PLETAL 10
PLEXION 20
PLEXION SCT 20
podofilox 22
poly-dex 35
polyethylene glycol 28
polymyxin B/trimethoprim 34
PONSTEL 33, 48
portia 23
POTIGA 15, 38, 42
PRADAXA 9, 38, 42
pramipexole 16, 51
PRANDIMET 24
PRANDIN 24
PRAVACHOL 12, 43
pravastatin 12, 43
prazosin 11
PRECISION QID glucose test strips 25, 50, 53
PRECISION SOF-TACT glucose test strips 25, 50, 53
PRECISION XTRA glucose test strips 25, 50, 53
PRECISION XTRA ketone test strips 25
PRECOSE 24
PRED-G 35
PRED-G S.O.P 35
prednicarbate 22, 52
prednisolone 27, 35
prednisone 27
PREFEST 26
pregnyl 25, 39
PREMARIN 26
PREMARIN VAGINAL 29
PREMPHASE 26
PREMPRO 26
PREVACID 27, 41, 50, 55
PREVACID SOLUTAB 27, 41, 50, 55
prevalite 11
previfem 23
PREVPAC 28, 50
PREZISTA 31
PRIALT 14
PRILOSEC 27, 41, 50, 55
PRILOSEC powder 50
primaquine 31
primidone 15
PRINIVIL 10
PRINZIDE 10
PRISTIQ 15, 44, 52
PRIVIGEN 37, 40
PROAIR HFA 36, 52
probenecid 25
probenecid/colchicine 25
procainamide 11
PROCARDIA 13
PROCARDIA XL 13
PROCENTRA 17, 41, 49
prochlorperazine 17
PROCRIT 9, 40
PROFILNINE 9, 39
progesterone micronized cap 26
PROGESTERONE VAGINAL 29
PROGLYCEM 25
PROGRAF 37
PROLASTIN 35, 38
PROLASTIN-C 35, 38
PROLIA 33, 41
PROMACTA 9
promethazine 39
promethazine/codeine 39
PROMETRIUM 26
propafenone 11
propranolol 12
propranolol/hydrochlorothiazide 12
propranolol SR 12
propylthiouracil 27
PROSCAR 29, 38
PROTONIX 27, 41, 50, 55
PROTOPIC 22, 40
protriptyline 16
PROVENGE 8, 40
PROVENTIL HFA 36, 52
PROVIGIL 19, 41, 49
PROZAC 16, 44, 53
PROZAC WEEKLY 16, 53
prudoxin 21
PULMICORT FLEXHALER 36
PULMICORT RESPULES 36
PULMOZYME 36, 39
PURINETHOL 8
PYLERA 28
pyrazinamide 31
pyridostigmine 32

Q

QNASL 36, 54
QUALAQUIN 31, 40, 46
quasense 23
QUESTRAN 11
QUESTRAN LITE 11
quetiapine 16, 46, 53
quinapril 10
quinapril/hydrochlorothiazide 10
quinidine gluconate 11
quinidine sulfate 11
quinine sulfate 31, 40, 46
QUIXIN 34
QUTENZA 21
QVAR 36

R

ramipril 10
RANEXA 11, 42, 51
ranitidine 27
RAPAFLO 29, 38
RAPAMUNE 37
rauwolfia/bendroflumethiazide 13
RAZADYNE 14
RAZADYNE ER 14
rbesartan-hydrochlorothiazide 52
REBETOL 32
REBIF 18, 40
RECLAST 33, 41
reclipsen 23
RECOMBINATE 9, 39
RECTIVE 27
REFACTO 9, 39
RELENZA 32, 45
RELION products 24, 53
RELISTOR 28, 41, 47
RELPAX 17, 46, 54
REMERON 15, 45, 53
REMERON SOLUTAB 15, 45, 53
REMICADE 21, 28, 33, 39
REMODULIN 14, 41
RENAGEL 28, 55
RENVELA 28, 55
REPREXAIN 19
REPRONEX 25, 39
REQUIP 16
REQUIP XL 16, 51
RESCRIPTOR 31
reserpine 11
RESTASIS 34
RETIN-A 20, 38, 51

RETIN-A MICRO 20, 38, 51
RETROVIR 31
REVATIO 14, 41
REVLIMID 9, 40
REYATAZ 31
RHEUMATREX 32
RHINOCORT AQ 36, 54
RHOGAM ULTRA-FILTERED PLUS 37
RHOPHYLAC 37
RIASTAP 9
ribapak 32
ribasphere 32
ribavirin 32
RIDAURA 32
RIFAMATE 31
rifampin 31
RIFATER 31
RILUTEK 14, 38
rimantadine 32
RIMSO 28
RIOMET 24
RISPERDAL 16, 46, 53
RISPERDAL M 16, 46, 53
risperidone 16, 46, 53
risperidone ODT 16, 46, 53
RITALIN 17, 41, 50
RITALIN LA 17, 41, 50
RITALIN SR 17, 41, 50
RITUXAN 8, 40
rivastigmine 14
rizatriptan benzoate 54
rizatriptan benzoate mlt 54
ropinirole 16
ropinirole er 16, 51
ROXICET 19
ROZEREM 19, 49, 54
RYBIX ODT 18
RYTHMOL 11
RYTHMOL SR 11
RYZOLT 48

S

SABRIL 14, 38
SAIZEN 25, 39
SALAGEN 36
SAMSCA 27, 41
SANCTURA 29, 55
SANCTURA XR 29, 55
SANCUSO PAD 27, 47
SANDIMMUNE 37
SANDOSTATIN 22
SANDOSTATIN LAR 22
SAPHRIS 16, 46, 53
SARAFEM 19, 45
SAVELLA 17, 45
SCALACORT DK 21
SEASONALE 23
SEASONIQUE 23
SECONAL 19
SECTRAL 12
selegiline 16
selenium sulfide 21
SELZENTRY 31
SEMPREX-D 37, 39, 42
SENSIPAR 26
SEREVENT DISKUS 36, 39
SEROQUEL 16, 46, 53
SEROQUEL XR 16, 46
SEROSTIM 25, 39
sertraline 16, 45, 52, 53
sertraline concentrate 53
sildenafil 14, 41
SILENOR 19, 49, 54
SIMCOR 12, 43
SIMPONI 21, 33, 39
SIMULECT 37
simvastatin 12, 43
SINEMET 16
SINEMET CR 16
SINGULAIR 36, 42, 53
SKELAXIN 32
SKELID 33
SKLICE 22
sodium sulfacetamide/sulfur 20
SOLARAZE 21
solia 23
SOLIRIS 9, 41
SOLODYN 30, 38
SOMATULINE 22
SOMAVERT 22, 25
SONATA 19, 49, 54
SORIATANE 21
SORILUX 21, 51
sorine 12
sotalol 12
sotalol AF 12
sotret 20, 38
SPECTRACEF 30
spinosad 22
SPIRIVA 35
spironolactone 13
spironolactone/hydrochlorothiazide 13
SPORANOX 30, 39
sprintec 23
SPRIX 33, 48
SPRYCEL 8, 40, 47
sronyx 23
SSS 10-4 20
STAFLEX 19
STAGESIC 19
STALEVO 16
STARLIX 24
stavudine 31
STAVZOR 15
STAXYN 28, 45, 53
STELARA 21, 39
STIMATE 22, 40
STRATTERA 17, 50
STRIANT 26, 55
SUBOXONE 19, 40, 48
SUBSYS SPRAY 18, 41, 48, 54
SUBUTEX 19, 40, 48, 54
SUCRAID 26
sucralfate 27
SULAR 13
sulfacetamide w/sulfur 51
sulfacetamide sodium 21, 34
sulfacetamide sodium/prednisolone 35
sulfadiazine 30
sulfasalazine 28, 43
sulfasalazine EC 43
sulfasalazine ER 28
sulfazine 28, 43
sulfazine EC 28, 43
sulindac 33
SUMADAN WASH 20
sumatriptan 17, 46, 54
SUMAVEL 18, 46, 54
SUMAXIN 20
SUMAXIN TS 20
SUPARTZ 33
SUPPRELIN LA 26
SUPRAX 30
SUPREP 28
SURMONTIL 16
SUSTIVA 31
SUTENT 8, 40, 47
syedah 23
SYLATRON 8, 40, 47
SYMBICORT 36
SYMBYAX 17, 46
SYMLIN 24, 39
SYMLINPEN 24, 39
SYNAGIS 36, 41
SYNALGOS DC 19
SYNAREL 26
SYNERA 21
SYNTHROID 27
SYNVISC 33
SYNVISC ONE 33
SYPRINE 37

T

TABLOID 8
TACLONEX 21, 22
tacrolimus 37
TAMBOCOR 11
TAMIFLU 32, 45
tamoxifen 8
tamsulosin 29, 38, 55
TAPAZOLE 27
TARCEVA 8, 40, 47
TARGRETIN 8, 21
TARKA 13
TASIGNA 8, 40, 47
TASMAR 16
TAZORAC 21, 38
taztia XT 13
TEGRETOL 15
TEGRETOL XR 15
TEKAMLO 13, 43
TEKTURNA 13, 43
TEKTURNA HCT 13, 43
temazepam 19
TEMODAR 8, 47
TENEX 11

Index

TENORETIC 12
TENORMIN 12
TERAZOL 29
terazosin 11
terbinafine 30, 39
terbutaline 36
terconazole 29
TESTIM 26, 55
testosterone inj. 26
tetracycline 30, 38
TEVETEN 11, 43, 51
TEVETEN HCT 11, 52
TEV-TROPIN 25, 39
THALITONE 14
THALOMID 9
THEO-24 36
theochron 36
theophylline ER 36
thioridazine 17
thiothixene 17
THYMOGLOBULIN 37
THYROGEN 25
THYROLAR 27
TIAZAC 13
ticlopidine 10
TIKOSYN 11
timolol 12, 34
timolol maleate ophth 34
TINDAMAX 30
tinidazole 30
tioconazole 29
TIROSINT 27
tizanidine 32, 54
TOBI 36
TOBRADEX 35
TOBRADEX ST 35
tobramycin 34
tobramycin/dexamethasone 35
TOFRANIL 16
TOFRANIL-PM 16
tolazamide 24
tolbutamide 24
tolmetin sodium 33
tolterodine 29, 55
TOPAMAX 15, 51
topical clindamycin 51
topical erythromycin 51
topiramate 15, 51
topotecan 9
TOPROL XL 12
TORADOL 48
torsemide 13
TOVIAZ 29, 55
TRACLEER 14, 41
TRADJENTA 24
tramadol 18
tramadol ER 18, 48
TRANDATE 10
trandolapril 10
TRANSDERM-SCOP 27
tranylcypromine sulfate 15
TRAVATAN Z 34
trazodone 15, 53
TREAGAN 35
TRELSTAR DEPOT 8
TRELSTAR LA 8
tretinoin 8, 20, 38, 47, 51
TRETIN-X 20, 38, 51
TREXALL 8
TREXIMET 18, 47, 54
triamcinolone 22, 52, 54
triamcinolone nasal 36
TRIBENZOR 11, 43, 52
TRIGLIDE 11, 52
TRILIPIX 11, 52
trimipramine 16
TRI-NORINYL 23
tri-previfem 23
tri-sprintec 23
triamterene/hydrochlorothiazide 13
TRIAZ 20
triazolam 19
TRICOR 11
trifluoperazine 17
trifluridine 34
trihexyphenidyl 16
TRILEPTAL 15
trilyte 28
trimethobenzamide 27
trimethoprim 30
trinessa 23
TRIOXIN 35
triple antibiotic 34
trivora 23
TRIZIVIR 31
trospium 29
TRUSOPT 34
TRUVADA 31
TUSSICAPS 37
TUSSIONEX 37
TWINJECT 10
TWYNSTA 11, 43, 52
TYKERB 8, 40, 47
TYLENOL/CODEINE 19
TYLOX 19
TYSABRI 18, 40
TYVASO 14, 41
TYZEKA 32

U

ULESFIA 22
ULORIC 25, 53
ULTRACET 19
ULTRAM 18
ULTRAM ER 18, 48
ULTRAVATE 22
UNIRETIC 10
unithroid 27
UNIVASC 10
URECHOLINE 29
UREX 29
URIBEL 29
UROXATRAL 29, 38, 55
URSO 250 28
ursodiol 28
URSO FORTE 28
UTA 29

V

VAGIFEM 29
valacyclovir 32, 51
VALCYTE 31, 42
valproic acid 15
VALTREX 32, 51
VALTURNA 11, 43
vandazole 29
VANOS 22, 52
VANOXIDE 20
VANTAS 8
VASERETIC 10
VASOTEC 10
VECTIBIX 8, 40
VECTICAL 21
VELETRI 14, 41
velivet 23
VELTIN 20, 38, 51
venlafaxine 15, 45, 52
venlafaxine ER 15, 44, 52, 53
VENLAFAXINE ER 15, 44, 52
venlafaxine SR 15, 44, 52, 53
VENOFER 37
VENTAVIS 14, 41
VENTOLIN HFA 36
VERAMYST 36, 54
verapamil 13
verapamil CR/ER/SR 13
VERDESO 22, 52
VEREGEN 22
VERELAN 13
VERELAN PM 13
VERELAN SR 13
VERIPRED 27
VESICARE 29, 55
VEXOL 35
VFEND 30
VIAGRA 28, 45, 53
vibramycin 38
VIBRAMYCIN 30
VICODIN 19
VICODIN ES 19
vicodin HP 19
VICOPROFEN 19
VICTOZA 24, 45
VICTRELIS 32, 41, 50
VIDEX 31
VIDEX EC 31
VIGAMOX 34
VIIBRYD 15, 45, 52
VIIBRYD KIT 15, 45, 52
VIMOVO 33, 48, 54
VIMPAT 15, 38, 42
VIOKACE 28, 55
VIRACEPT 31
VIRAMUNE 31, 51
VIRAMUNE XR 31
VIRAZOLE 32
VIREAD 31
VISICOL 28

VISTIDE 31
VISUDYNE 34
VIVACTIL 16
VIVAGLOBIN 37, 40
VIVELLE-DOT 26, 45
VIVITROL 37
VIVOTIF BERNA EC 41
VOLTAREN 33, 34
VOLTAREN GEL 33, 48, 54
VOLTAREN XR 33
voriconazole 30
VOSPIRE ER 36
VOTRIENT 8, 40, 47
VPRIV 25, 39
VUSION 20
VYTORIN 12, 43, 52
VYVANSE 17, 41, 50

W

warfarin 9
WELCHOL 11
WELLBUTRIN 15, 44, 53
WELLBUTRIN SR 15, 44, 53
WELLBUTRIN XL 15, 44, 52
WILATE 9, 39
WINRHO SDF 37

X

XALATAN 34, 53
XALKORI 8, 40, 47
XANAX XR 14
XARELTO 9, 38, 42
XELODA 8, 47
XENAZINE 17, 40, 45
XEOMIN 32, 40
XERESE 21
XGEVA 33, 41
XIAFLEX 32
XIFAXAN 30, 40, 47
XODOL 19
XOLAIR 35, 38
XOLEGEL 20
XOLOX 18
XOPENEX 36, 52
XOPENEX HFA 36
XYNTHA 9, 39
XYREM 19, 39, 43
XYZAL 36, 39, 42

Y

YASMIN 23
YAZ 23
YERVOY 8, 40

Z

zafirlukast 36, 42
zarah 23
Z-CLINZ 20
ZACARE 20
zaleplon 19, 49
ZANAFLEX 32
ZANTAC 27
ZARONTIN 15
ZAROXOLYN 14
ZAVESCA 25, 39
zazole 29
ZEBETA 12
ZEGERID 27, 41, 50, 55
ZELBORAF 8, 40, 47
ZEMAIRA 35, 38
ZEMPLAR 26
zenchent FE 23
ZENPEP 28, 55
zeosa 23
ZERIT 31
ZESTORETIC 10
ZESTRIL 10
ZETIA 12, 38, 43
ZETONNA 36, 54
ZIAC 12
ZIAGEN 31, 51
ZIANA 20, 38, 51
zidovudine 31
ZINOTIC 35
ZINOTIC ES 35
ZIOPTAN 34, 53
ziprasidone 17, 46, 53
ZIPSOR 33
ZIRGAN 34
ZITHROMAX 30
ZMAX 30
ZOCOR 12, 43
ZOFRAN 27, 47
ZOFRAN ODT 27, 47
ZOLADEX 8
ZOLINZA 8, 40, 47
ZOLOFT 16, 45, 53
zolpidem 19, 49, 54
zolpidem ER 19, 49, 54
ZOLPIMIST 19, 49, 54
ZOLVIT 19
ZOMETA 33, 41
ZOMIG 18, 47, 54
ZOMIG ZMT 18, 47, 54
ZONALON 21
ZONEGRAN 15
zonisamide 15
ZORBTIVE 25, 39
ZORTRESS 37
zovia 23
ZOVIRAX 21, 32
ZUPLENZ 27, 47
ZYCLARA 22, 40, 45
ZYDONE 19
ZYFLO 36, 42
ZYFLO CR 36, 42
ZYLET 35
ZYLOPRIM 25
ZYMAXID 34
ZYPREXA 17, 46, 53
ZYPREXA ZYDIS 17, 46, 53
ZYTIGA 8, 40, 47
ZYVOX 30, 38

A copayment is a flat fee. Coinsurance is a percentage of the rate that Aetna negotiates with the plan sponsor for covered prescriptions except as required by law to be otherwise. Some drugs on the Preferred Drug List are subject to manufacturer rebates. Coinsurance is calculated before any rebates are subtracted. That means it may be possible for your cost of a preferred drug to be higher than your cost of a non-preferred drug.

Please be aware of how current health care reform guidelines may impact you. Certain religious organizations or religious employers may be exempt from offering contraceptive services. Nongrandfathered plans effective or renewing after August 1, 2012 and subject to the Affordable Care Act, also known as the health care reform law, will comply with requirements for Women's Preventive Health Services. If these requirements apply to your plan, consult your plan documents for more information.

Health benefits and health insurance plans are offered, administered and/or underwritten by Aetna Health Inc., Aetna Health Insurance Company of New York, Aetna Health Insurance Company and/or Aetna Life Insurance Company (Aetna). In Florida, by Aetna Health Inc. and/or Aetna Life Insurance Company. In Maryland, by Aetna Health Inc., 151 Farmington Avenue, Hartford, CT 06156. Each insurer has sole financial responsibility for its own products.

Aetna Pharmacy Management refers to an internal business unit of Aetna Health Management, LLC. Aetna Rx Home Delivery refers to Aetna Rx Home Delivery, LLC, a subsidiary of Aetna Inc., which is a licensed pharmacy providing prescription services by mail. Aetna Specialty Pharmacy refers to Aetna Specialty Pharmacy, LLC, a subsidiary of Aetna Inc., which is a licensed pharmacy that operates through specialty pharmacy prescription fulfillment.

Not all health services are covered. See plan documents for a complete description of benefits, exclusions, limitations and conditions of coverage. Plan features and availability may vary by location and are subject to change.

Aetna receives rebates from drug manufacturers that may be taken into account in determining Aetna's Preferred Drug List. Rebates do not reduce the amount a member pays the pharmacy for covered prescriptions. Information is subject to change. For more information about Aetna plans, refer to **www.aetna.com**.

The drugs on the Preferred Drug List, Formulary Exclusions, Precertification, Quantity Limit and Step-therapy Lists are subject to change. The quantity limits and step-therapy drug coverage review programs are not available in all service areas. For example, step-therapy programs do not apply to fully-insured members in Indiana. Step-therapy does not apply to fully-insured members in New Jersey. However, these programs are available to self-funded plans.

Please be aware that there are edits to ensure safety and to comply with exclusions of coverage that are required for all commercial books of business in all states. Safety edits are a type of drug coverage review that applies to a limited list of drugs with the highest potential for abuse and harm to the member. Safety edits make sure that the prescribed medicine will be used within the guidelines set by the Food and Drug Administration and current medical findings. They are part of a commitment to quality pharmaceutical care. Safety edits are required, even when the plan sponsor elects an option to waive precertification.

To learn more, please refer to your plan documents or call the Member Services number on your ID card.

In accordance with state law, full-risk members in Texas who are receiving coverage for medications that are removed from the Preferred Drug List during the plan year will continue to have those medications covered at the same benefit level until their plan's renewal date.

In accordance with state law, California HMO member who are receiving coverage for medications that are added to the Step-therapy list will continue to have those medications covered, for as long as the treating physician continues prescribing them, provided that the drug is appropriately prescribed and is considered safe and effective for treating the enrollee's medical condition. Nothing in this section shall preclude the prescribing provider from prescribing another drug covered by the plan that is medically appropriate for the enrollee, nor shall anything in this section be construed to prohibit generic drug substitutions.

Not all health services are covered. This material is for information only. It contains only a partial, general description of plan benefits or programs and does not constitute a contract. See plan documents for a complete description of benefits, exclusions, limitations and conditions of coverage.

Plan features and availability may vary by location and are subject to change. Providers are independent contractors and are not agents of Aetna. Provider participation may change without notice. Aetna does not provide care or guarantee access to health services. Information is subject to change. For more information about Aetna plans, refer to **www.aetna.com**.

aetna℠

Postage

151 Farmington Avenue
Hartford, CT

www.aetna.com

05.05.315.1 E (9/12)