

## SELECT DRUG LIST\*

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	Tier 1	Tier 2	Tier 3
<p>☺ <b>Best Buy Drug</b>  <b>ST:</b> Step Therapy  <b>PA:</b> Pre-Authorization  <b>QL:</b> Quantity Limit  <b>SP:</b> Fill at a specialty pharmacy  <b>MB:</b> Medical Benefit  <i>See last pg for explanation of these abbreviations</i></p>	<p>Most Tier 1 drugs are generics, and the name listed first below in lower case is the generic name. The branded names in ( ) are provided for reference only. Check your benefit materials to determine cost share if the brand is filled.</p>		
<b>ANESTHETICS</b>			
<b>Topical Anesthetics</b>	<p>lidocaine viscous                      lidocaine gel (Anamantle HC)                      lidocaine/prilocaine (Emla)                      tetracaine</p>	LIDODERM	<p>CETACAINE                      QUTENZA (PA/QL)</p>

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<b>ANTIINFECTIVES</b>			
<b>Oral Antibacterial Drugs</b>	<p>☺ amoxicillin (Amoxil)                      amoxicillin/clavulanate (Augmentin/Augmentin XR/Augmentin ES Susp)                      ampicillin (Principen)                      ☺ azithromycin (Zithromax)                      cefaclor (Ceclor/CD)                      cefadroxil (Duricef)                      cefdinir (Omnicef)                      cefpodoxime (Vantin)                      cefprozil tabs and susp (Cefzil)                      cefuroxime (Ceftin)                      ☺ cephalixin (Keflex)                      cephradine (Velosef)                      ☺ ciprofloxacin (Cipro)                      ciprofloxacin ER (Cipro XR)                      clarithromycin/ER (Biaxin/XL)                      clindamycin (Cleocin)                      dicloxacillin (Dycill)                      ☺ doxycycline (Vibramycin)                      ☺ erythromycin (Ery-Tab)                      erythromycin/sulfisoxazole (Pediazole)                      levofloxacin (Levaquin)                      minocycline (Dynacin)                      nitrofurantoin (Macrochantin)                      ofloxacin (Floxin)                      ☺ penicillin VK (Beepen VK)                      ☺ sulfamethoxazole/trimethoprim (Bactrim)                      sulfisoxazole (Gantrisin)                      tetracycline (Sumycin)                      trimethoprim (Trimpep)</p>	<p><i>Use Tier 1 anti-infective agent! i.e. <u>azithromycin (Zithromax)</u> for a lower copayment</i></p> <p>AVELOX                      MEPRON (PA)                      VANCOCIN</p>	<p>CEDAX                      COARTEM (PA)                      DIFICID (PA)                      FACTIVE                      KETEK                      MOXATAG                      NOROXIN                      SUPRAX                      ZMAX                      ZYVOX (QL)</p>
<b>Oral Antifungal Drugs</b>	<p>clotrimazole troche (Mycelex Troche)                      fluconazole (Diflucan)                      griseofulvin (Gris-PEG)                      itraconazole (Sporanox) (PA) (QL)                      ketoconazole (Nizoral)                      nystatin (Mycostatin)                      terbinafine (Lamisil)                      voriconazole (Vfend) (QL)</p>		<p>LAMISIL GRANULES (PA)                      NOXAFIL                      ORAVIG (ST/QL)</p>
<b>Oral Antiviral Drugs-Antiretrovirals for HIV</b>	<p>didanosine (Videx EC)                      lamivudine (EpiVir)                      stavudine (Zerit)                      zidovudine 300mg and 50mg/5ml syrup (Retrovir)</p>	<p>EMTRIVA                      ISENTRESS                      SUSTIVA                      VIRAMUNE                      VIREAD                      ZIAGEN</p>	<p>INTELENCE</p>
<b>Oral Antiviral Drugs-Protease Inhibitors</b>		<p>AGENERASE                      CRIXIVAN                      INVIRASE                      KALETRA                      NORVIR                      REYATAZ                      VIRACEPT</p>	<p>APTIVUS</p>

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<b>ANTIINFECTIVES</b>			
<b>Oral Antiviral Drugs-Combinations</b>		COMBIVIR TRIZIVIR	ATRIPLA EPZICOM PREZISTA TRUVADA
<b>CCR5 Antagonist</b>			SELZENTRY
<b>Other Antiviral Drugs</b>	acyclovir (Zovirax Capsules) amantadine (Symmetrel) famciclovir (Famvir) ribavirin (Rebetol) (PA) ribavirin (Copegus) (PA) valacyclovir (Valtrex)	CYTOVENE EPIVIR HBV INCIVEK (PA/SP)* RELENZA (QL) TAMIFLU (QL) VICTRELIS (PA/SP)*	BARACLUDE FUZEON (PA) HEPSERA RIBAPAK (PA) (*Pls use Ribavirin*) VALCYTE (QL)
<b>Other Anti-infective Drugs</b>	chloroquine (Aralen) (PA) ethambutol (Myambutol) hydroxychloroquine (Plaquenil) isoniazid mebendazole (Vermox) mefloquine (Lariam) (PA) metronidazole (Flagyl) neomycin paromomycin (Humatin) pyrazinamide quinine rifampin (Rifadin)	DAPSONE DARAPRIM MYCOBUTIN PRIMAQUINE	ALINIA (QL) CAYSTON (PA) COARTEM (PA) FANSIDAR MALARONE (PA) NEBUPENT QUALAQUIN (PA) STROMECTOL TINDAMAX (QL) XIFAXAN
<b>Topical Antibacterial Drugs</b>	gentamicin (Garamycin) mupirocin ointment (Bactroban) silver sulfadiazine (Silvadene)	BACTROBAN CREAM	ALTABAX
<b>Topical Antifungal Drugs</b>	ciclopirox 0.77% topical (Loprox) ciclopirox 8% (Penlac) clotrimazole/betamethasone (Lotrisone) econazole (Spectazole) ketoconazole (Nizoral) nystatin (Mycostatin) nystatin/triamcinolone (Mycolog) Terbinafine (Lamisil)		CNL Nail Kit (PA) ERTACZO EXELDERM EXTINA (ST) LOPROX NAFTIN OXISTAT VUSION (PA)
<b>Topical Antiviral Drugs</b>			DENAVIR ZOVIRAX

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<b>ANTINEOPLASTIC/IMMUNOSUPPRESSANT DRUGS</b>			
<b>Alkylating Agents/Antimetabolites</b>	cyclophosphamide (Cytoxan) Melphalan (Akeran) mercaptopurine (Purinethol) methotrexate	CEENU LEUKERAN MYLERAN THIOGUANINE	
<b>Androgens, Estrogens, Progestins and Related Drugs</b>	anastrozole (Arimidex) bicalutamide (Casodex) exemestane (Aromasin) flutamide (Eulexin) letrozole (Femara) megestrol (Megace) tamoxifen (Nolvadex)		HALOTESTIN (PA) MEGACE ES
<b>Immunosuppressant Drugs</b>	azathioprine (Imuran) cyclosporine (Neoral/Sandimmune) mycophenolate mofetil (Cellcept) prednisone (Deltasone) tacrolimus (Prograf)	MYFORTIC RAPAMUNE	
<p><b>Miscellaneous Antineoplastic Drugs</b></p> <p><b>*Dispensing limited to 30 days supply</b></p> <p><b>ConnectiCare has a pharmacy (Medmark) that specializes in these medications. Please call member services to inquire what they can provide you.</b></p>	anagrelide (Agrylin) (PA) hydroxyurea (hydrea) leucovorin	MATULANE TARGRETIN (SP) TEMODAR (PA/SP)*	AFINITOR (PA/SP)* ARZERRA (PA/MB) AVASTIN (PA/MB) CAPRELSA (PA/SP)* ERIVEDGE (PA/SP/QL)* FOLOTYN (PA/MB) GLEEVEC (PA/SP)* HYCANTIN (PA/SP)* INLYTA (PA/SP/QL) IRESSA (PA/SP)* ISTODAX (PA/SP)* JAKAFI (PA/SP/QL)* NEXAVAR (PA/SP)* OFORTA (PA/SP)* REVLIMID (PA/SP)* SPRYCEL (PA/SP)* SUTENT (PA/QL/SP)* SYLATRON (PA/SP)* TARCEVA (PA/QL/SP)* TASIGNA (PA/SP)* THALOMID (PA/QL/SP)* TORISEL (PA/SP)* TREANDA (PA/MB) TYKERB (PA/QL/SP)* VECTIBIX (PA/MB) VOTRIENT (PA/SP)* XALKORI (PA/SP)* XELODA (PA/SP)* ZELBORAF (PA/SP/QL)* ZOLINZA (PA/SP)* ZORTRESS (PA/SP)* ZYTIGA (PA/SP/QL)*

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<b>CARDIOVASCULAR MEDICATIONS</b>			
<b>Antiarrhythmics</b>	<p>digitek                      digoxin (Lanoxin)</p>		
<b>Calcium Antagonists</b>	<p>☺ amlodipine (Norvasc)                      ☺ diltiazem (Cardizem)                      diltiazem er/sr/xr (Cardizem SR)                      diltiazem LA (Cardizem LA)                      Felodipine/er (Plendil)                      nifedipine (Procardia)                      nifedipine er/xl (Procardia XL/Adalat CC)                      nimodipine (Nimotop) (PA)                      nisoldipine (Sular)                      ☺ verapamil (Calan)                      verapamil sr (Calan SR)</p>	<p><i>Consider Best Buy options first!</i></p>	<p><i>Consider Best Buy options first!</i>                      CARDENE SR                      DYNACIRC CR</p>
<b>Diuretics</b>	<p>amiloride (Midamor)                      amiloride/hctz (Moduretic)                      bumetanide (Bumex)                      ☺ chlorthalidone (Hygroton)                      eplerenone (Inspra)                      ☺ furosemide (Lasix)                      ☺ hydrochlorothiazide                      indapamide (Lozol)                      metolazone (Zaroxolyn)                      spironolactone (Aldactone)                      spironolactone/hctz (Aldactazide)                      torsemide (Demadex)                      ☺ triamterene/hctz (Dyazide)</p>		EDECRIN
<b>Beta-Adrenergic Antagonist Drugs</b>	<p>acebutolol (Sectral)                      ☺ atenolol (Tenormin)                      atenolol/chlorthalidone (Tenoretic)                      bisoprolol (Zebeta)                      Bisoprolol/hctz (Ziac)                      ☺ metoprolol (Lopressor)                      metoprolol/hctz (Lopressor HCT)                      metoprolol succinate (Toprol XL)                      nadolol (Corgard)                      pindolol (Visken)                      propranolol/propranolol ER (Inderal/LA)                      sotalol (Betapace)</p>	<p><i>Consider Tier 1 &amp; Best Buy options first!</i>                       BYSTOLIC                      INNOPRAN XL</p>	
<b>Alpha-Beta Antagonists</b>	<p>carvedilol (Coreg)                      labetalol (Trandate)</p>	<p>COREG CR (PA) <i>Use generic carvedilol</i></p>	
<b>Other Antihypertensive Drugs</b>	<p>clonidine (Catapres/TTS)                      doxazosin (Cardura)                      guanabenz (Wytensin)                      guanfacine (tenex)                      methyl dopa (Aldomet)                      hydralazine (Apresoline)                      prazosin (Minipres)                      terazosin (Hytrin)</p>		<p>NEXICLON XR                      TEKAMLO (ST)                      TEKTURNA (ST)                      VALTURNA (ST)</p>

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<b>CARDIOVASCULAR MEDICATIONS</b>			
<p><b>Angiotensin Converting Enzyme Inhibitors And Angiotensin II Receptor Antagonists</b></p>	<p>captopril (Capoten)  benazepril (Lotensin)  enalapril (Vasotec)  fosinopril (Monopril)  ☺lisinopril (Prinivil, Zestril)  ☺losartan (Cozaar)  ☺losartan HCTZ (Hyzaar)  moexipril (Univasc)  quinapril (Accupril)  ramipril (Altace)  trandolapril (Mavik)</p>	<p><i>Use Tier 1 ACE inhibitors for a lower copayment</i>  BENICAR (ST)  DIOVAN (ST)</p>	<p><i>Use Tier 1 ACE inhibitors for a lower copayment</i>  ALTACE TABLETS (PA)  ATACAND (ST)  EDARBI (ST)  MICARDIS (ST)  TEVETEN (ST)</p>
<p><b>Antihypertensive Combinations</b></p>	<p>☺amlodipine/benazepril (Lotrel)  atenolol/chlorthalidone (Tenoretic)  benazepril/HCTZ (Lotensin HCT)  bisoprolol/hctz (Ziac)  captopril/hctz (Capozide)  enalapril/HCTZ (Vaseretic)  hydralazine/hctz (Apresazide)  irbesartan (Avapro) (ST)  irbesartan/HCTZ (Avalide) (ST)  ☺lisinopril/hctz (Prinzide, Zestoretic)  methyldopa/hctz (Aldoril)  metoprolol/HCTZ (Lopressor HCT)  moexipril/HCTZ (Uniretic)  propranolol/hctz (Inderide)  quinaretic (Accuretic)  trandolapril/verapamil (Tarka)</p>	<p><i>Use Tier 1 Combo products for a lower copayment!</i>  AZOR (ST)  BENICAR/HCT (ST)  DIOVAN HCT (ST)  EXFORGE (ST)  EXFORGE HCT (ST)  TRIBENZOR (ST)</p>	<p><i>Use Tier 1 Combo products for a lower copayment!</i>  AMTURNIDE (ST)  ATACAND HCT (ST)  BIDIL  EDARBYCLOR (ST)  MICARDIS HCT (ST)  TEVETEN HCT (ST)  TWINSTA (ST)</p>
<p><b>Vasodilating Drugs</b></p>	<p>dipyridamole (Persantine)  isosorbide dinitrate (Isordil)  isosorbide mononitrate (Ismo)  nitroglycerin (Nitrobid, Nitro-Dur)  papaverine (Pavabid)</p>	<p>NITROLINGUAL SPRAY  RANEXA</p>	
<p><b>Antidysrhythmic Drugs</b></p>	<p>amiodarone (Cordarone)  disopyramide/CR (Norpace/CR)  flecainide (Tambacor)  mexiletine (Mexitil)  procainamide/SR (Procan/SR)  propafenone (Rythmol)  sotalol (Betapace)</p>		<p>MULTAQ  RYTHMOL SR  TIKOSYN</p>
<p><b>Antilipidemic Drugs-HMG-CoA Reductase Inhibitors/Combinations</b></p> <p><b>(ST) Step Therapy= prior use of simvastatin, pravastatin or lovastatin required.</b></p>	<p>atorvastatin (Lipitor)  atorvastatin/amlodipine (Caduet)  ☺lovastatin (Mevacor)  ☺pravastatin (Pravachol)  ☺simvastatin (Zocor)</p>	<p><i>Use generic options first!</i>  ADVICOR  CRESTOR (QL)  LIPITOR (QL)</p>	<p><i>Use generic options first!</i>  ALTOPREV (ST)  LESCOL/XL (ST/QL)  LIVALO (ST/QL)  VYTORIN (ST/QL)</p>

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<b>CARDIOVASCULAR MEDICATIONS</b>			
<b>Antilipidemic Drugs-Other</b>	<p>cholestyramine (Questran)                      colestipol (Colestid)                      ☺fenofibrate 160mg or 200mg                      ☺gemfibrozil (Lopid)</p>	<p>LOVAZA(formerly OMACOR)                      (PA)                      NIASPAN                      SIMCOR                      TRICOR                      TRILIPIX                      WELCHOL (ST)</p>	<p>ANTARA (ST)                      FIBRICOR (ST)                      LIPOFEN                      LOFIBRA (ST)                      TRIGLIDE (ST)                      ZETIA (QL)</p>
<p><b>Other Cardiovascular Drugs</b>                       *Dispensing limited to 30 days supply</p>	<p>midodrine (Proamatine)                      pentoxifylline (Trental)</p>	<p>LETAIRIS (PA/QL/SP)*</p>	<p>ADCIRCA (PA/SP)*                      REMODULIN (PA/SP)*                      REVATIO (PA/QL/SP)*                      TRACLEER (ST/QL/SP)*                      TYVASO (PA/QL)*                      VENTAVIS (PA/SP)*</p>

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<b>AUTONOMIC &amp; CNS MEDICATIONS</b>			
<b>Non-narcotic Analgesics</b>	<p>tramadol (Ultram)                      tramadol/acetaminophen (Ultracet)</p>		<p>PRIALT                      RYBIX ODT (PA)                      tramadol ER (Ultram ER) (PA) <i>Use tramadol first</i></p>
<b>Class II Narcotics</b>	<p>codeine                      fentanyl patch (Duragesic)                      fentanyl lozenge (Actiq) (PA/QL)                      hydromorphone (Dilaudid)                      meperidine (Demerol)                      methadone                      morphine sulfate                      oxycodone (Roxicodone)                      oxycodone/acetaminophen (Percocet/Tylox)                      oxycodone/aspirin (Percodan)                      oxycodone/ibuprofen (Combunox) (QL)                      oxymorphone (Opana)</p>	<p>MSIR                      OPANA ER                      OXYCONTIN (QL)</p>	<p>ABSTRAL (PA/QL)                      AVINZA (ST)                      EMBEDA                      EXALGO (ST/QL)                      FENTORA (PA)                      KADIAN (ST)                      LAZANDA (PA/QL)                      LEVORPHANOL                      NUCYNTA                      ONSOLIS (PA/QL)                      ORAMORPH                      OXECTA</p>
<b>Class III Narcotics</b>	<p>acetaminophen/codeine (Tylenol #2/#3/#4)                      aspirin/codeine (Empirin #2/#3/#4)                      buprenorphine (Subutex)                      hydrocodone/apap (Vicodin/Lortab)                      hydrocodone/aspirin (Lortab ASA)                      hydrocodone/ibuprofen (Vicoprofen)</p>	<p>SUBOXONE FILM (ST)                      SUBOXONE TABS</p>	<p>BUTRANS (QL)                      VOPAC (QL)</p>
<b>Class IV Narcotics</b>	<p>pentazocine/apap (Talwin)                      pentazocine/naloxone (Talwin NX)</p>		
<b>Drugs To Treat and Prevent Headaches</b>	<p>acetaminophen/butalbital (Phrenilin)                      acetaminophen/caff/butalbital (Fioricet)                      aspirin/caffeine/butalbital (Fiorinal)                      butorphanol (Stadol) (QL)                      ergotamine/caffeine (Cafergot)                      isometh/dicloral/acetaminophen (Midrin)                      naratriptan (Amerge) (QL)                      sumatriptan (Imitrex) (QL)</p>	<p>MAXALT/MAXALT MLT (ST/QL)                      MIGRANAL (QL)                      ZOMIG/ZOMIG ZMT (ST/QL)</p>	<p>ALSUMA (PA/QL)                      AXERT (ST/QL)                      CAMBIA (PA/QL)                      FROVA (ST/QL)                      RELPAX (ST/QL)                      SUMAVEL DosePro (PA/QL)                      TREXIMET (ST/QL)</p>
<b>Anxiolytics</b>	<p>alprazolam (Xanax, Niravam) (PA)                      alprazolam ER (Xanax XR)                      buspirone (Buspar)                      chlordiazepoxide (Librium)                      clonazepam (Klonopin)                      clonazepam wafer (Klonopin Wafers) (PA)                      diazepam (Valium)                      lorazepam (Ativan)                      meprobamate (Equanil)                      oxazepam (Serax)</p>		<p>ALPRAZOLAM INTENSOL                      ONFI</p>

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<b>AUTONOMIC &amp; CNS MEDICATIONS</b>			
<b>Sedative Hypnotic Drugs</b>	chloral hydrate estazolam (Prosom) flurazepam (Dalmane) hydroxyzine (Atarax/Vistaril) temazepam (Restoril) triazolam (Halcion) zalepon (Sonata) ☺ zolpidem (Ambien) zolpidem CR (Ambien CR) (PA/QL)		<i>Use generic Ambien-Tier 1!</i> EDLUAR (PA) INTERMEZZO (PA) LUNESTA (PA/QL) ROZEREM (QL) SILENOR (PA) ZOLPIMIST (PA)
<b>Antimania Drugs</b>	lithium carbonate (Eskalith/Lithobid)		
<b>Anticonvulsant Drugs</b>	carbamazepine (Tegretol, Carbatrol) Carbamazepine Ext Rel (Tegretol XR) clonazepam (Klonopin) divalproex sodium (Depakote/ER) ethosuximide (Zarontin) felbamate (Felbatol) gabapentin (Neurontin) lamotrigine (Lamictal) levetiracetam (Keppra) oxcarbazepine (Trileptal) phenobarbital phenytoin (Dilantin) primidone (Mysoline) topiramate (Topamax) valproic acid (Depakene) zonisamide capsules (Zonegran)	CELONTIN DIASTAT GABTRIL PHENYTEK	EQUETRO HORIZANT (ST/QL) KEPPRA XR (PA) LAMICTAL ODT (PA) LAMICTAL XR (PA) LYRICA (PA) SABRIL STAVZOR (PA) VIMPAT
<b>Antidepressant Drugs-</b>	amitriptyline (Elavil) amitriptyline/perphenazine (Triavil) amoxapine (Ascendin) clomipramine (Anafranil) desipramine (Norpramin) doxepin (Sinequan) imipramine (Tofranil) imipramine pamoate (Tofranil PM) (PA) nortriptyline (Pamelor) protriptyline (Vivactil)		
<b>Antidepressant Drugs-SSRIs</b>  ST=Prior use of a generic SSRI is required	☺ citalopram (Celexa) escitalopram (Lexapro) (QL) ☺ fluoxetine (Prozac) fluvoxamine (Luvox) paroxetine (Paxil) paroxetine CR (Paxil CR) (ST) ☺ sertraline (Zoloft)	<i>Use Tier 1 choice (i.e. generic Celexa) for a lower copayment</i> VIIBRYD (ST)	LUVOX CR (ST) PEXEVA (ST) PROZAC WEEKLY (ST) SARAFEM (ST)

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<b>AUTONOMIC &amp; CNS MEDICATIONS</b>			
<b>Antidepressant Drugs-Other</b>	<p>bupropion                      ☺bupropion SR/XL (Wellbutrin SR/XL) (PA for smoking cessation)                      maprotiline (Ludiomil)                      mirtazapine (Remeron/Soltab)                      nefazodone (Serzone)                      trazodone (Desyrel)                      ☺ venlafaxine Extended Release Caps (Effexor XR)</p>	<p>CYMBALTA (ST/QL)                      PRISTIQ (ST/QL)</p>	<p>APLENZIN (PA)                      OLEPTRO (PA)                      Venlafaxine Extended Release Tabs (ST)</p>
<b>Antidepressant Drugs-MAO Inhibitors</b>	<p>phenelzine (Nardil)                      tranylcypromine (Parnate)</p>		<p>EMSAM</p>
<p><b>Antivertigo and Antiemetic Drugs</b>                       ST= Prior use of ondansetron is required</p>	<p>dronabinol (Marinol) (PA)                      meclizine (Antivert)                      granisetron (Kytril) (PA/QL)                      ☺ondansetron (Zofran)                      prochlorperazine (Compazine)                      promethazine (Phenergan)                      trimethobenzamide (Tigan)</p>	<p><i>Use ondansetron first-Tier 1!</i></p>	<p><i>Use ondansetron first-Tier 1!</i>                      ANZEMET (ST/QL)                      CESAMET (PA)                      EMEND (QL)                      SANCUSO (ST/QL)                      ZUPLENZ (PA/QL)</p>
<p><b>Antiparkinson Drugs</b>                       *Dispensing limited to 30 days supply</p>	<p>amantadine (Symmetrel)                      benzotropine (Cogentin)                      bromocriptine (Parlodel)                      carbidopa/levodopa (Sinemet)                      pramipexole (Mirapex)                      ropinirole (Requip) (QL)                      selegiline (Eldepryl)                      trihexyphenidyl (Artane)</p>	<p>AZILECT                      COMTAN</p>	<p>APOKYN (PA/QL)*                      MIRAPEX ER                      REQUIP XL (ST)                      STALEVO                      TASMAR                      ZELAPAR</p>
<b>Misc. Neurologic</b>		<p>SAVELLA</p>	<p>GRALISE (ST)                      XENAZINE (PA)</p>
<b>Conventional (Typical) Antipsychotic Drugs</b>	<p>chlorpromazine (Thorazine)                      fluphenazine (Prolixin)                      haloperidol (Haldol)                      loxapine (Loxitane)                      perphenazine (Trilafon)                      thioridazine (Mellaril)                      thiothixene (Navane)                      trifluoperazine (Stelazine)</p>		
<b>Novel (Atypical) Antipsychotic Drugs</b>	<p>clozapine (Clozaril)                      olanzapine (Zyprexa) (QL)                      quetiapine (Seroquel) (QL)                      risperidone (Riperdal)                      ziprasidone (Geodon) (QL)</p>	<p>ABILIFY (QL on Tablets)                      SEROQUEL XR (QL)</p>	<p>FANAPT (QL)                      INVEGA (QL)                      INVEGA SUSTENNA                      LATUDA (QL)                      RISPERDAL CONSTA / M-TAB (QL)                      SAPHRIS (QL)                      ZYPREXA (QL)</p>
<b>Antipsychotic/Depression</b>			<p>SYMBYAX</p>

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<b>AUTONOMIC &amp; CNS MEDICATIONS</b>			
<b>CNS Stimulants/ADHD Drugs</b>	amphetamine salts (Adderall) Amphetamine salts ER (Adderall XR) dextroamphetamine (Dexadrine) dexamethylphenidate (Focalin) methamphetamine (Desoxyn) methylphenidate/ER (Ritalin/SR) methylphenidate ER (Concerta) modafinil (Provigil) (PA/QL) pemoline (Cylert)	NUVIGIL (PA/QL)	DAYTRANA FOCALIN XR INTUNIV(ST) KAPVAY ER (ST) METADATE CD RITALIN LA STRATTERA (PA) VYVANSE
<b>Other CNS/Autonomic Drugs</b>	bupropion (Zyban) PA disulfiram (Antabuse) naltrexone (Revia) Pyridostigmine (Mestinon)		CAMPRAL (PA) CHANTIX (PA after initial 30 days) GUANIDINE NUEDEXTA (PA) VIVITROL (PA) XYREM (PA)
<b>Alzheimer's Drugs</b>	donepezil (Aricept) (PA for age<50) galantamine (Razadyne/ER) (PA for age <50) rivastigmine (Exelon) (PA for age<50)	NAMENDA (PA for age<50)	ARICEPT 23 (PA) EXELON PATCH (ST)
<b>Drugs to Treat Multiple Sclerosis</b> <b>*Drugs limited to 30 days</b>		*AVONEX (PA/QL/SP) *BETASERON (PA/QL/SP) *COPAXONE (PA/QL/SP)	*AMPYRA (PA/QL) *EXTAVIA (PA/SP) (*Pls use Betaseron) *GILENYA (PA/SP) *REBIF (PA/QL/SP) *TYSABRI (PA/SP) Rx benefit

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<b>DERMATOLOGICAL MEDICATIONS</b>			
<b>Topical Corticosteroid Drugs-Very High Potency</b>	augmented betamethasone (Diprolene AF) clobetasol (Temovate) clobetasol foam (Olux) (ST/QL) diflorasone acetate (Psorcon) halobetasol (Ultravate)		CLOBEX (ST) (Use clobetasol first) PSORCON-E OLUX E (ST)
<b>Topical Corticosteroid Drugs- High Potency</b>	amcinonide (Cyclocort) betamethasone dipropionate (Diprolene) betamethasone valerate (Valisone) desoximetasone (Topicort) diflorasone (Florone) fluocinolone (Synalar) fluocinonide (Lidex)		HALOG/HALOG E LUXIQ (ST) (Use betamethasone first) VANOS
<b>Topical Corticosteroid Drugs-Medium Potency</b>	Flurandrenolide (Cordran lotion) fluticasone (Cutivate) hydrocortisone butyrate (Locoid) hydrocortisone valerate (Westcort) mometasone (Elocon) Prednicarbate (Dermatop E) triamcinolone (Kenalog)		CLODERM CORDRAN Tape (QL) PANDEL
<b>Topical Corticosteroid Drugs- Low Potency</b>	alclometasone dipropionate (Aclovate) desonide (DesOwen) hydrocortisone (Hytone) Note: 0.5% and 1% available without a prescription-OTC		VERDESO (ST) (Use desonide first)
<b>Oral Antipruritic Agents</b>	cyproheptadine (Periactin) hydroxyzine (Atarax/Vistaril)		
<b>Drugs to treat Psoriasis and Eczema</b>  *Dispensing limited to 30 days supply	calcipotriene (Dovonex) (QL) methotrexate selenium sulfide (Selsun)	SORIATANE	AMEVIVE (PA/QL/SP)* ATOPICLAIR ENBREL (PA/QL/SP)* HUMIRA (PA/QL/SP)* STELARA (PA/QL/SP)* TACLONEX (QL) TAZORAC VECTICAL (QL)
<b>Oral Dermatological Drugs</b>	AMNESTEEM CLARAVIS doxycycline (Adoxa) (PA) minocycline (Dynacin) (PA) Minocycline ER (Solodyn) (PA)	OXSORALEN-ULTRA	DORYX (PA) ORACEA (PA) SOLODYN ER (PA)

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<b>DERMATOLOGICAL MEDICATIONS</b>			
<b>Topical Acne and Rosacea Drugs</b>	<p>adapalene (Differin 0.1% cream or gel)                      benzoyl peroxide/clindamycin (Benzacilin)                      clindamycin (Cleocin)                      erythromycin (Emgel)                      erythromycin/benzamycin (Benzamycin)                      metronidazole (Metrogel 0.75%)                      tretinoin (Retin-A)</p>	<p>EPIDUO                      NORITATE                      RETIN-A MICRO</p>	<p>ACANYA                      ACZONE                      AZELEX                      CLINAC BPO                      CLINDAGEL (ST)                      DIFFERIN LOTION, 0.3% GEL (ST)                      DUAC                      FINACEA                      METROGEL/METROLOTION                      PLEXION                      ROSAC                      ZIANA</p>
<b>Topical Dermatological Drugs</b>	<p>aluminum chloride                      Hydroquinone (Lustra/AF)                      imiquimod (Aldara) (QL)                      lindane (Qwell)                      permethrin (Acticin)                      podofilox ) topical solution (Condylox)                      urea (Carmol, Keralac)</p>	<p>CONDYLOX GEL                      EURAX</p>	<p>CARAC                      DERMA-CAS                      DERMA-SMOOTHIE/FS (QL)                      ELIDEL (QL) (PA age&lt;2years old)                      EVOCLIN (ST)                      NATROBA                      OXSORALEN                      PICATO (QL)                      PROTOPIC (QL) (PA age &lt;2 years)                      REGRANEX (PA)                      SANTYL                      SILVER NITRATE                      SOLARAZE                      XERAC AC                      ZYCLARA (QL)</p>

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<b>EAR-NOSE-THROAT MEDICATIONS</b>			
<b>Drugs Affecting The Ear</b>	<p>acetic acid                      acetic acid/hydrocortisone (VoSol HC Otic)                      antipyrine/benzocaine (Auralgan Otic)                      neomycin/polymix/hc otic (Cortisporin Otic)                      ofloxacin otic</p>		<p>CIPRO HC                      CIPRODEX                      COLY-MYCIN</p>
<b>Drugs Affecting The Nose</b>	<p>azelastine (Astelin)                      flunisolide (Nasalide)                      ☺ fluticasone (Flonase)                      triamcinolone nasal (Nasacort AQ)</p>	<p>NASONEX                      VERAMYST</p>	<p>ASTEPRO (ST)                      BECONASE/AQ (ST)                      NASAREL (ST)                      OMNARIS (ST)                      PATANASE (ST)                      QNASL (ST)                      RHINOCORT AQUA (ST)</p>
<b>Drugs Affecting The Mouth</b>	<p>triamcinolone (Kenalog in Orabase)</p>	<p>EVOXAC</p>	

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<b>ENDOCRINE MEDICATIONS</b>			
<b>Insulin</b>		HUMALOG VIALS/PENS HUMULIN VIALS LANTUS VIALS LEVEMIR VIALS/PENS NOVOLIN VIALS/PENS NOVOLOG VIALS/PENS	APIDRA HUMULIN PENS HUMALOG CARTRIDGE LANTUS SOLOSTAR NOVOLIN INNOLET/PENFILL
<b>Misc. Diabetic Drugs</b>		BYETTA (QL/ST)	BYDUREON (ST/QL) SYMLIN (QL/PA) VICTOZA (QL/ST)
<b>Oral Diabetic Drugs</b>  <b>ST=Use metformin first</b>	acarbose (Precose) acetohexamide (Dymelor) chlorpropamide (Diabinese) glimepiride (Amaryl) ☺glipizide/ER (Glucotrol/XL) glipizide/metformin (Metaglip) glyburide/metformin (Glucovance) ☺gluburide (Diabeta/Micronase) ☺metformin/XR (Glucophage/XR) nateglinide (Starlix) tolazamide (Tolinase) tolbutamide (Orinase)	ACTOS (QL/ST) ACTOPLUSMET/XR (QL/ST) DUETACT (QL/ST) JANUVIA JANUMET/XR JENTADUETO TRADJENTA WELCHOL (ST)	AVANDIA (QL/ST) AVANDAMET (QL/ST) AVANDARYL (QL/ST) CYCLOSET FORTAMET ER (ST) GLUMETZA (ST) GLYSET JUVISYNC KOMBIGLYZE XR (ST) ONGLYZA (ST) PRANDIN PRANDIMET (ST)
<b>Glucocorticoid and Mineralcorticoid Drugs</b>	dexamethasone (Decadron) fludrocortisone acetate (Florinef) hydrocortisone (Hydrocortone) methylprednisolone (Medrol) prednisolone (Orapred/Prelone) prednisone (Deltasone) triamcinolone (Aristocort)		ACTHAR GEL (PA)
<b>Osteoporosis Drugs</b>	☺alendronate (Fosamax) calcitonin-salmon (Miacalcin) etidronate disodium tabs (Didronel) ibandronate (Boniva tablet/injection) (ST)	<i>Use alendronate 1<sup>st</sup>-Tier 1!</i> ACTONEL (ST) ACTONEL + CALCIUM (ST) FORTEO	<i>Use alendronate 1<sup>st</sup>-Tier 1!</i> ATELVIA (ST) BONISTO (ST) EVISTA FOSAMAX PLUS D 2800/5600 (PA) FOSAMAX Solution PROLIA (PA/QL) RECLAST (PA)
<b>Thyroid and Antithyroid Drugs</b>	levothyroxine (Synthroid, Levoxy)l liothyronine (Cytomel) methimazole (Tapazole) propylthiouracil (PTU) thyroid (Armour Thyroid)	SYNTHROID	
<b>Androgen Drugs</b>	danazol (Danocrine) fluoxymesterone (PA/QL) methyltestosterone (Methitest) (PA/QL)	ANDRODERM (PA/QL) ANDROGEL (PA/QL)	AXIRON (PA) FORTESTA (PA) STRIANT (PA/QL) TESTIM (PA/QL) TESTOPEL (PA)

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<b>ENDOCRINE MEDICATIONS</b>			
<b>Other Endocrine Drugs</b>	<p>cabergoline tablets (Dostinex) (PA/QL)                      desmopressin (DDAVP)</p>		<p>ALDURAZYME (PA)                      ARCALYST (PA)                      CEREZYME (PA)                      FABRAZYME (PA)                      ILARIS (PA/QL/SP)*                      KALYDECO (PA/QL/SP)*                      KORLYM (PA)                      KUVAN (PA)                      MYOZYME (PA)                      NAGLAZYME (PA)                      SAMSCA (PA)                      SUCRAID (PA)                      VPRIV (PA)                      ZAVESCA (PA)</p>

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<b>GASTROINTESTINAL MEDICATIONS</b>			
<b>Antidiarrheal Drugs</b>	diphenoxylate/atropine (Lomotil) loperamide (Immodium) paregoric		
<b>Irritable Bowel Drugs</b>			LOTRONEX (QL) (PA for Males)
<b>Antispasmodics/Drugs Affecting GI Motility</b>	dicyclomine (Bentyl) hyoscyamine (Levsin) metoclopramide (Reglan)		METOZOLV (PA)
<b>H2 Antagonists</b> Note: All of the H2 drugs below are also available without a prescription (OTC)	cimetidine (Tagamet) famotidine (Pepcid) nizatidine (Axid) ranitidine (Zantac)		
<b>Proton Pump Inhibitors</b>  *PA for age>15; Use Prilosec or Prevacid OTC at generic copay first!	lansoprazole RX (Prevacid) omeprazole (Prilosec) pantoprazole (Protonix) Prevacid OTC Prilosec/omeprazole OTC covered! Zegerid OTC	<b>Use Tier 1 omeprazole, Prilosec OTC or Prevacid OTC first!</b>  NEXIUM* (QL on 20mg)	<b>Use Tier 1 omeprazole, Prilosec OTC or Prevacid OTC first!</b>  ACIPHEX* DEXILANT ( <b>preferred brand</b> ) (QL)* PROTONIX (brand name)* (QL on 20mg) Rx-PREVACID* (QL on 15mg) ZEGERID*
<b>Helicobacter Pylori Drugs</b>		PYLERA	HELIDAC PREVPAC
<b>Other Antiulcer Drugs</b>	misoprostol (Cytotec) sucralfate (Carafate)		
<b>Laxatives and Cathartics</b>	electrolyte solution (Golytely, Nulytely)		AMITIZA (QL) MOVIPREP RELISTOR (PA)
<b>Other GI Drugs</b>	balsalazide (Colazal) glycopyrrolate (Robinul) lipram pangestyme sulfasalazine (Azulfidine/EN) ursodiol (Actigall/Urso)	ASACOL/HD CREON LIALDA PANCREASE MT PANCRELIPASE ZENPEP	APRISO CUVPOSA (PA) DIPENTUM ENTOCORT EC GASTROCROM (PA) PENTASA SANDOSTATIN/LAR (PA/QL) SOMATULINE DEPOT ULTRASE/ULTRASE MT VIOKASE
<b>Blood Modifiers</b> *Dispensing limited to a 30 day supply		ARANESP (QL)* NEUPOGEN (QL)* PROCRIT (QL)*	EPOGEN (QL)* EXJADE (PA)* FERRIPROX NEULASTA (QL)* OMONTYS (PA/QL)* VIDAZA (PA)

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<b>GASTROINTESTINAL MEDICATIONS</b>			
<b>Growth Hormones and Related Drugs</b> *Dispensing limited to a 30 days supply		NORDITROPIN (PA/SP)*  <i>Norditropin is ConnectiCare's preferred somatropin product.</i>	EGRIFTA (PA) GENOTROPIN (PA/SP)* HUMATROPE (PA/SP)* INCRELEX (PA/SP)* NUTROPIN/AQ (PA/SP)* OMNITROPE (PA/SP)* SAIZEN (PA/SP)* SEROSTIM (PA/SP)* TEVTROPIN (PA/SP)* ZORBTIVE (PA/SP)*
<b>Interferons</b> *Dispensing limited to a 30 days supply		*ACTIMMUNE (PA/SP) *INTRON-A (PA/SP) *ROFERON-A (PA/SP)	*INFERGEN (PA/QL/SP) *PEGASYS (PA/QL/SP) <b>Preferred</b> *PEG-INTRON (PA/QL/SP) *REBETRON (PA/QL/SP)
<b>Interleukins</b>			PROLEUKIN (PA)

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<b>MUSCULOSKELETAL MEDICATIONS</b>			
<b>Salicylates and Related Drugs</b>	<p>choline mag trisalicylate (Trilisate)  diflunisal (Dolobid)  salsalate (Disalcid)</p>		
<b>Non-Steroidal Antiinflammatory Agents (NSAIDs)</b>	<p>☺diclofenac/ER (Voltaren/XR)  etodolac/XL (Lodine/XL)  ☺ibuprofen (Motrin) <i>suspension available OTC</i>  indomethacin/SR (Indocin/SR)  ketoprofen (Orudis)  ketorolac (Toradol) (QL)  meclofenamate (Meclomen)  ☺meloxicam (Mobic)  mefenamic acid (Ponstel) (PA)  nabumetone (Relafen)  ☺naproxen/CR (Anaprox/Naprosyn/EC)  naproxen ER (Naprelen)  oxaprozin (Daypro)  piroxicam (Feldene)  sulindac (Clinoril)</p>		<p><i>Try a Tier 1 choice first, like naproxyn or ibuprofen</i>  ARTHROTEC (PA)  CELEBREX (PA/QL)  DUEXIS (PA/QL)  FLECTOR PATCH (PA)  PENNSAID (ST/QL)  PREVACID NAPRAPAC (PA)  SPRIX NS (ST/QL)  VIMOVO (PA)  VOLTAREN GEL (PA)  ZIPSOR (PA)</p>
<b>Other Drugs for Arthritis</b> *Dispensing limited to a 30 day supply	<p>hydroxychloroquine (Plaquenil)  leflunamide (Arava)  methotrexate</p>	<p>CUPRIMINE  RIDAURA</p>	<p>ACTEMRA (PA/MB)*  CIMZIA (PA/QL/SP)  ENBREL (PA/QL/SP)*  HUMIRA (PA/QL/SP)*  KINERET (PA/QL)*  ORENCIA (PA/SP/MB)*  REMICADE (PA/MB)  RITUXAN RA (PA/SP/MB)*  SIMPONI (PA/SP)*</p>
<b>Hyaluronic Acids</b>			<p>EUFLEXXA (PA) <b>Preferred</b>  HYALGAN (PA/ST)  ORTHOVISC (PA/ST)  SUPARTZ (PA/ST)  SYNVISC (PA) <b>Preferred</b>  SYNVISC ONE (PA) <b>Preferred</b></p>
<b>Drugs to Treat and Prevent Gout</b>	<p>allopurinol (Zyloprim)  colchicine  probenacid (Benemid)  probenacid &amp; colchicine (Co-Benemid)</p>	<p>COLCRYS</p>	<p>KRYSTEXXA (PA)  ULORIC (ST)</p>

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<b>MUSCULOSKELETAL MEDICATIONS</b>			
<b>Skeletal Muscle Relaxants</b>	<p>baclofen (Lioresal) (QL)  carisoprodol (Soma) (250mg PA)  carisoprodol/aspirin (Soma Compound)  chlorzoxazone (Parafon Forte)  chlorzoxazone/acetaminophen (Flexaphen)  cyclobenzaprine (Flexeril)  dantrolene (Dantrium)  diazepam (Valium)  metaxalone (Skelaxin)  methocarbamol (Robaxin)  methocarbamol/aspirin (Robaxisal)  orphenadrine (Norflex)  tizanide tablets (Zanaflex tabs)</p>		<p>AMRIX (PA/QL)  FEXMID (ST)  ZANAFLEX CAPSULES (PA)</p>

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# SELECT DRUG LIST\*

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<b>NUTRITION, BLOOD MODIFIERS, ELECTROLYTES</b>			
<b>Therapeutic Vitamins and Minerals</b>	calcium acetate (Phoslo) calcitriol (Rocaltrol) cyanocobalamin (Vitamin B12) folbic (Foltx) ergocalciferol (Vitamin D) folic acid (Folate) sodium fluoride (Luride)		CALCIFEROL HECTOROL NASCOBAL ZEMPLAR
<b>Potassium Supplements</b>	potassium bicarbonate/chloride (K-lyte) potassium chloride (K-Dur) potassium gluconate (Kaon)		
<b>Potassium Removing Resins</b>	sodium polystyrene sulfonate (Kayexalate)		
<b>Calcimimetic Agent</b>			SENSIPAR
<b>Oral Anticoagulants and Vitamin K</b>	Warfarin (Coumadin)	MEPHYTON	LYSTEDA PRADAXA (PA/QL) XARELTO 10mg (QL) XARELTO 15mg/20mg (PA/QL)
<b>Injectible Anticoagulants</b> *Dispensing limited to 30 days supply	Enoxaparin (Lovenox) (QL)*		ARIXTRA (QL)* FRAGMIN (QL)* INNOHEP (QL)* IPRIVASK (QL)
<b>Antiplatelet Drugs</b>	cilostazol (Pletal) dipyridamole (Persantine) ticlopidine (Ticlid)	PLAVIX	AGGRENOX BRILINTA EFFIENT
<b>Platelet Stimulators</b>			NPLATE (PA/SP) PROMACTA (PA/SP)
<b>Blood Detoxicants</b>	lactulose (Cephulac)	RENAGEL (QL) RENEVELA (QL)	FOSRENOL
<b>Hemophilia Blood Factor Products</b> (zero copay applies)  *30 day max fill			ADVATE (PA/SP)* ALPHANATE (PA/SP)* BENEFIX (PA/SP)* HUMATE-P (PA/SP)* HYATE-C (PA/SP)* KOGENATE (PA/SP)* MONARC-M (PA/SP)* MONOCLATE-P (PA/SP)* NOVOSEVEN (PA/SP)* RECOMBINATE (PA/SP)* XYNTHA (PA/SP)*

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<b>OBSTETRICAL &amp; GYNECOLOGICAL MEDICATIONS</b>			
<b>Prenatal Vitamins</b>	Cal-Nate Citranatal Rx Complete-RF Prenatal Duet Stuartnatal Edge OB Natalcare Rx Natalcare Plus Prenaplus Prenatal Plus Iron Tablets Prenatal 19 Prenatal AD Prenatal Rx 1 Prenatabs Rx Renate Select OB Ultra Natalcare Vinate GT Vinate M Vinate Ultra Vinate II Vitafof OB		Branded Prenatal Vitamins
<b>Specialized OB/GYN Drugs</b>	isoxsuprine (Vasodilan) leuprolide (Lupron) methylergonovine (Methergine) terbutaline (Brethine)	SYNAREL (PA)	LUPRON DEPOT
<b>OB/GYN Topical Antiinfectives</b>	clindamycin vaginal cream (Cleocin) triple sulfa vaginal MetroGel vaginal		
<b>Infertility</b>	chorionic gonadotropin (PA/SP) clomiphene citrate (Clomid) (PA) Novarel (PA/SP)	BRAVELLE (PA/SP) FOLLISTIM (PA/SP) GANIRELIX (PA/SP) MENOPUR (PA/SP) REPRONEX (PA/SP)	CETROTIDE (PA/SP) GONAL-F (PA/SP) LUVERIS (PA/SP) OVIDREL (PA/SP)
<b>Oral Estrogen Drugs</b>	estradiol (Estrace) estropipate (Ogen, Ortho-Est)	ESTRATEST/HS PREMARIN	CENESTIN ENJUVIA MENEST
<b>Topical Estrogen Drugs</b>	estradiol transdermal patch (Climara/Vivelle DOT)	ESTRACE VAGINAL CREAM EVAMIST PREMARIN VAGINAL CREAM VAGIFEM	DIVIGEL ELESTRIN ESTROGEL (2 copayments apply) ESTRASORB MENOSTAR
<b>Estrogen/Progestin Combinations</b>		COMBIPATCH PREMPHASE PREMPRO	ACTIVELLA CLIMARA PRO FEMHRT PREFEST

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# SELECT DRUG LIST\*

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<b>OBSTETRICAL &amp; GYNECOLOGICAL MEDICATIONS</b>			
<b>Progestin Drugs</b>	medroxyprogesterone (Provera)	MAKENA (PA)	CRINONE (PA) ENDOMETRIN (PA) PROMETRIUM
<b>Contraceptives</b>	aranelle (Tri-Norinyl) apri (Desogen) aviane (Alesse) balziva (Ovcon) camila (Nor-QD) cryselle (Lo/Ovral) enpresse (Tri-Levlen) errin (Ortho Micronor) GIANVI (generic Yaz) jolessa (Seasonale) jolivette (Ortho Micronor) junel/FE (Loestrin/Fe) kariva (Mircette) kelnor (Demulen) leena (Tri-Norinyl) lutera (Alesse) levora (Seasonale) low-ogestrel (Lo/Ovral) mononessa (Ortho-Cyclen) microgestin/FE (Loestrin/FE) necon (Ortho-Novum) nora be (Nor-QD) nortrel (Modicon) OCELLA (generic Yasmin) ogestrel (Ovral) reclipen (Desogen) solia (Ortho Cept) sprintec (Ortho Cyclen) sronyx (Alesse) tri-nessa (Ortho Tri-Cyclen) trivora (Tri-Levlen) tri-Lo-Sprintec (Ortho Tri-Cyclen Lo) tri-sprintec (Ortho Tri-Cyclen) velivet (Cyclessa) zovia (Demulen)	<p><i>Ask your doctor to try a Tier 1 choice first!</i>            LOESTRIN-24 FE            *ORTHO TRI-CYCLEN LO</p>	<p><i>Ask your doctor to try a Tier 1 choice first!</i>            BEYAZ            ESTROSTEP FE            GENERESS FE            IMPLANON (PA)            LYBREL            LoLOESTRIN            LOSEASONQUE            LYBREL            MIRENA (PA) (Medical Benefit)            *MODICON            NATAZIA            NUVARING            *ORTHO-CEPT            *ORTHO-CYCLEN            ORTHO DIAPHRAGM            ORTHO EVRA            *ORTHO MICRONOR            *ORTHO-NOVUM            *ORTHO TRI-CYCLEN            *OVCON            OVRETTE            SEASONIQUE            YASMIN            YAZ</p> <p>*See Tier 1 equivalent drug!</p>
<b>Emergency Contraception</b>	levonorgestrel (Plan B) OTC if age>17		PLAN B ONE STEP (OTC if age >17)

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<b>OPHTHALMIC MEDICATIONS</b>			
<b>Ophthalmic Topical Antibacterial Drugs</b>	bacitracin (AK-Tracin) chloramphenicol (AK-Chlor) ciprofloxacin (Ciloxan) erythromycin (Ilotycin) gentamicin (Garamycin) neomycin/bacitracin/polymixin (Neosporin) neomycin/gramicidin/polymixin (Neosporin) ofloxacin (Ocuflox) polymixin/trimethoprim (Polytrim) sulfacetamide (Bleph-10) tobramycin (Tobrex)		BESIVANCE MOXEZA QUIXIN VIGAMOX ZYMAR ZYMAXID
<b>Ophthalmic Topical Antiviral Drugs</b>	trifluridine (Viroptic)		
<b>Ophthalmic Corticosteroid Drugs</b>	dexamethasone (Decadron) fluorometholone (FML) prednisolone (AK-Pred, Pred-Forte)	VEXOL	LOTEMAX
<b>Ophthalmic antiinfective/ corticosteroid Drugs</b>	neomycin/bacitracin/polymixin/hydrocortisone (Cortisporin Ointment) neomycin/dexamethasone (NeoDecadron) neomycin/polymixin/dexamethasone (Maxitrol) neomycin/polymixin/hydrocortisone (Cortisporin Suspension) sulfacetamide/prednisolone (Blephamide) tobramycin-dexamethasone (Tobradex)	PRED-G ZYLET	DUREZOL TOBRADEX ST
<b>Oral Antiglaucoma Drugs</b>	acetazolamide (Diamox) methazolamide (Neptazane)		
<b>Topical Antiglaucoma Drugs</b>	betaxolol brimonidine (Alphagan) carteolol dipivefrin (Propine) dorzolamide (Trusopt) dorzolamide/timolol (Cosopt) latanoprost (Xalatan) levobunolol (Betagan) metipranolol (Optipranolol) pilocarpine (Pilocar) timolol (Timoptic/XE)	ALPHAGAN P LUMIGAN (ST)	AZOPT BETOPIC S COMBIGAN TRAVATAN (ST) TRAVATAN Z (ST) ZIOPTAN (ST)

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<b>OPHTHALMIC MEDICATIONS</b>			
<b>Other Ophthalmic Drugs</b>	<p>Zaditor OTC                      Alaway OTC                      atropine                      cromolyn (Crolom) (QL)                      cyclopentolate (Cyclogyl)                      flurbiprofen (Ocufen)                      ketoralac (Acular)                      ketotifen fumarate (Zaditor) (QL)                      naphazoline (AK-Con)                      phenylephrine (Neo-Synephrine)                      tropicamide (Mydracyl)</p>	<p>ALOCRI (QL)                      ALOMIDE (QL)                      PATANOL (QL)</p>	<p>ACUVAIL                      ALAMAST (QL)                      ALREX (QL)                      BEPREVE                      ELESTAT (QL)                      EMADINE (QL)                      LASTACAFT                      PATADAY (QL)                      LUCENTIS (PA)                      MACUGEN (PA)                      OPTIVAR (QL)                      RESTASIS (QL)                      VOLTAREN                      XIBROM</p>

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<b>RESPIRATORY MEDICATIONS</b>			
<b>Oral Beta-2 Adrenergic Drugs</b>	albuterol (Proventil/Ventolin) albuterol sa (Proventil) terbutaline (Brethine)		
<b>Inhaled Beta-2 Adrenergic Drugs</b>	albuterol solution (Proventil/Ventolin) albuterol CFC(Proventil/Ventolin) metaproterenol (Alupent)	PROAIR HFA PROVENTIL HFA SEREVENT XOPENEX NEB (QL) XOPENEX HFA	FORADIL MAXAIR/AUTOHALER VENTOLIN HFA
<b>Methylxanthine Drugs</b>	aminophylline theophylline (Theodur)		
<b>Other Drugs for Asthma</b>	cromolyn (Crolom)	ADVAIR (QL) SYMBICORT	DULERA XOLAIR (PA/SP)*
<b>Corticosteroid Inhalers</b>	budesonide neb (Pulmicort Respule) (QL)	FLOVENT DISKUS FLOVENT HFA PULMICORT (QL) QVAR	ALVESCO ASMANEX (QL) AZMACORT
<b>Spacer Devices</b>		AEROCHAMBER INSPIREASE	
<b>Leukotriene Modifiers</b>	Zafirlukast (Accolate)	SINGULAIR	ZYFLO ZYFLO CR (PA)
<p><b>Antihistamines</b>  <b>*OTC= over-the-counter</b></p>	<p>☺<b>Cetirizine OTC (Zyrtec)</b>            cyproheptadine (Periactin)            Fexofenadine (Allegra) (QL)            hydroxyzine (Atarax/Vistaril)            levocetirizine (Xyzal)            ☺<b>Loratadine OTC(Claritin)</b>            promethazine (Phenergan)</p>	ALAVERT (Brand) OTC ALLEGRA (Brand) OTC CLARITIN (Brand) OTC ZYRTEC (Brand) OTC	<p><b>Try loratadine/cetirizine OTC first Tier 1!</b>            ALLERX (PA)            CLARINEX (PA/QL)</p>
<b>Antihistamine/Decongestant Combinations</b>	all generic antihistamine/decongestant combinations, including cetirizine-D (Zyrtec-D) (OTC) fexofenadine-D (Allegra-D) (QL) loratadine-D (Claritin-D) (OTC)	ALAVERT D (OTC) ALLEGRA-D (Brand) OTC CLARITIN D (OTC) ZYRTEC D (OTC)	CLARINEX-D (PA/QL)
<b>Antitussive and expectorant Drugs</b>	all generic narcotic and non-narcotic containing antitussive and expectorant drugs		TUSSIONEX
<p><b>Other Respiratory Drugs</b>            * Limited to a 30 day supply</p>	acetylcysteine (Mucomyst) ipratropium nebulizer solution and nasal spray(Atrovent)	ANA-KIT ATROVENT HFA INHALER EPI AUTO-JECT (Greenstone) (QL) PULMOZYME* TOBI*	ANA-GUARD ARALAST (PA) ARCAPTA EPIPEN (QL) GLASSIA (PA) PROLASTIN (PA) TWINJECT (QL) ZEMAIRA (PA)
<b>Drugs for COPD</b>		COMBIVENT SPIRIVA (QL)	BROVANA (PA) DALIRESP (ST/QL)

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<b>UROLOGICAL MEDICATIONS</b>			
<p><b>Anticholinergic Antispasmodics</b></p> <p>ST=Prior use of oxybutynin is required</p>	<p>flavoxate (Urispas)  hyoscamine (Levsin)  oxybutynin (Ditropan)  oxybutynin XL (Ditropan XL)  trospium (Sanctura) (ST)</p>	<p>DETROL LA (ST)  VESICARE (ST)</p>	<p>DETROL (ST)  ENABLEX (ST)  GELNIQUE (ST)  OXYTROL (ST)  SANCTURA XR (ST)  TOVIAZ (ST)</p>
<p><b>Other Genitourinary Products</b></p>	<p>bethanachol (Urecholine)  generic Bicitra  generic Polycitra  phenazopyridine (Pyridum)</p>		<p>ELMIRON  RENACIDIN</p>
<p><b>Drugs for BPH</b></p>	<p>alfuzosin (Uroxatral) (QL)  doxazosin (Cardura)  prazosin (Minipres)  finasteride (Proscar)  tamsulosin (Flomax)  terazosin (Hytrin)</p>	<p>AVODART (QL) (PA &lt;age 55)  CIALIS (PA/QL)  RAPAFLO (ST)</p>	<p>CARDURA XL (PA) use doxazosin 1<sup>st</sup>  JALYN</p>
<p><b>Erectile Dysfunction</b>  (if covered by plan)</p>	<p>yohimbine (QL)</p>	<p>CIALIS (QL)  LEVITRA (QL)</p>	<p>CAVERJECT (QL)  EDEX (QL)  MUSE (QL)  STAXYN (QL)  VIAGRA (QL)</p>

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<b>DIAGNOSTIC &amp; MISCELLANEOUS MEDICATIONS</b>			
<b>Miscellaneous Medications</b>	ergoloid mesylates		CHEMET ORFADIN (PA) <b>ALL COMPOUNDED DRUGS (PA)</b> <b>MOST INJECTABLE DRUGS (PA)</b>
<b>Diabetic Test Strips</b>		ACCU-CHEK (QL) FREESTYLE (QL) ONE TOUCH (PA/QL) PRECISION (QL) SOF-TACT (QL)	<i>Use Tier 2 Meter/Strips First</i> ASCENSIA (PA/QL) SURESTEP (QL) TRACER BG (QL)
<b>Misc Diabetic Supplies</b>		GLUCAGON KIT NOVOFINE NEEDLES/SYRINGES PRODIGY NEEDLES/SYRINGES SOFT TOUCH LANCETS SOFTCLIX LANCETS	

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### **ABBREVIATIONS GUIDE:**

**ST: Step Therapy**—For medications marked with “ST,” members are encouraged to try a less expensive, similar drug first. Your doctor can request authorization of the stepped (ST) medication and it will be approved if it meets our criteria.

**PA: Pre-Authorization**—ConnectiCare requires these drugs to be submitted for authorization to ensure that the medication is being prescribed and used appropriately.

**QL: Quantity Limit**—These medications have restrictions on the number of tablets/capsules/packages that are dispensed, to ensure they are being prescribed in the correct quantities and/or dosages.

**SP: Fill at a specialty pharmacy**—These medications are best filled at a designated Specialty Pharmacy, which has more knowledge of the clinical use and handling of these lesser used, more costly drugs.

**MB: Medical Benefit**—These prescriptions are typically supplied and administered by a physician in their office, and are not filled by the member at a pharmacy.