



# PREFERRED NATIONAL FORMULARY

Effective January 1, 2010

## Introduction

The Catalyst Rx Preferred National Formulary was developed to serve as a guide for physicians, pharmacists, health care professionals and members in the selection of cost-effective drug therapy. Catalyst Rx recognizes that drug therapy is an integral part of effective health management. The vast availability of medication options; however, warrants a reasonable program for drug selection and use.

Catalyst Rx continually reviews new and existing medications to ensure the Formulary remains responsive to the needs of our members and health professionals. Criteria used to evaluate drug selection for the Formulary includes, but is not limited, to: safety, efficacy and cost-effectiveness data, as well as comparison of relevant benefits of similar prescription or over-the counter (OTC) agents while minimizing potential duplications.

The Formulary is a continually reviewed and modified document that represents the prevailing clinical opinion of Catalyst Rx. This dynamic process does not allow this document to be completely accurate at all times. To accommodate regular changes, an updated electronic version of the Formulary is available online at [www.catalystrx.com](http://www.catalystrx.com). Catalyst Rx welcomes your input and feedback on the information provided in this document.

## How to Read the Formulary

All drugs are listed by their generic names and most common proprietary (branded) name. Specific drug listings may be accessed either by generic (in lowercase) or proprietary name (in uppercase) and by therapeutic drug category. The brand names listed are for reference use only, and do not denote coverage, unless specifically noted. Any drug not found in this Formulary listing, or any Formulary updates published by Catalyst Rx, shall be considered a non-formulary drug.

### Sample Listing:

Tier	Generic Name – Reference Name	Generic Status	Preferred Alternatives/ Comments
<b>PENICILLINS</b>			
1	amoxicillin – AMOXIL, TRIMOX	generic	
1	amoxicillin/clavulanate – AUGMENTIN, AUGMENTIN ES	generic	
1	ampicillin – PRINCIPEN	generic	
1	dicloxacillin – DYNAPEN	generic	
1	penicillin v potassium – VEETIDS	generic	
2	amoxicillin/clavulanate – AUGMENTIN SUSPENSION 125/31.25		Some strengths available as generic
2	amoxicillin/clavulanate er – AUGMENTIN XR		
2	penicillin g benzathine – BICILLIN LA		
2	penicillin g benzathine/penicillin g procaine – BICILLIN CR		
3	amoxicillin er – MOXATAG		amoxicillin, amoxicillin/clavulanate, penicillin v potassium

Once the category or product is located, the following items can be viewed.

**Tier:** This section identifies if the product is a Tier 1 product (i.e. typically generic), Tier 2 product (i.e. typically preferred brand), or Tier 3 product (i.e. typically non-preferred brand or non-formulary) on the Catalyst Rx 2010 Preferred National Formulary. Generic products are considered to be Tier 1.

**Generic Name:** This lists the generic name for the product (lowercase).

**Reference Name:** This lists the brand name or common reference name for the product (UPPERCASE).

**Generic Status:** If the word “generic” is listed, the product is available as a generic and the tier listing provided refers to the generic version. The generic listed within the Drug Name section is considered to be a Tier 1 product and the brand listed will cost significantly more and, depending on the plan design, may require a significantly higher or 100% member copayment or co-insurance.

**Preferred Alternatives/Comments:** This field includes considerations for preferred Formulary alternatives for non-preferred products or may include comments regarding preferred options or OTC product availability.

For certain agents within the Formulary, a recommended prescribing guideline may apply. Please refer to your specific benefit design for details.

### ***Benefit Coverage and Limitations***

This printed Formulary does not define benefit coverage and limitations. Many members have specific benefit inclusions, exclusions, copayments, or a lack of coverage, which are not reflected in the Catalyst Rx Preferred National Formulary. Members should contact their Plan Sponsor or the Catalyst Rx Customer Service Department at 1-888-341-8578 if they have questions regarding their coverage. Please note that the formulary process is evolutionary and changes can occur throughout the year. The following topics may or may not be applicable to individual members depending on member-specific benefit parameter.

#### ***Tier Description***

The amount that plan participants pay when purchasing medications and the tier status of certain medications may vary depending on plan design and program. Three-tiered plan designs provide coverage of prescription drugs at different levels or tiers. Generally, generic drugs are available to plan participants at the lowest copayment (Tier 1). Brand-name drugs that are considered preferred (Tier 2) will cost plan participants more than generics, but less than non-preferred brands. Brand-name drugs that are considered non-preferred or non-formulary (Tier 3) will cost more than preferred brands.

#### ***Prescribing Guidelines***

Prescribing guidelines may apply to select drugs on the Catalyst Rx Preferred National Formulary. Prescribing guidelines may vary by benefit design but may include:

<b>Prior Authorization</b>	Requires specific physician request process
<b>Quantity Limit</b>	Coverage may be limited to specific quantities per prescription &/or time period
<b>Step Therapy</b>	Coverage may depend on previous use or trial of another drug
<b>Age Edit</b>	Coverage may depend on patient age
<b>Gender Edit</b>	Coverage may depend on patient gender

Prior authorization review of prescribing guidelines will be evaluated utilizing the established drug review criteria approved by Catalyst Rx. If the request does not meet the approved criteria, the request will not be approved and alternative therapy may be recommended along with the proper course of alternative action. A list of edits recommended by Catalyst Rx is available upon request. Members should contact their Plan

Sponsor or the Catalyst Rx Customer Service Department at 1-888-341-8578 if they have questions regarding their specific coverage.

### ***Non-Formulary Agents***

Drugs not found on the Catalyst Rx Preferred National Formulary, or any Preferred National Formulary updates published by Catalyst Rx, shall be considered a non-formulary drug. Requests for coverage of non-formulary agents may be requested by the health professional depending on specific coverage parameters. Review for non-formulary drug requests will require documentation of medical necessity. Generally, the following basic medical necessity guidelines are used in conducting a review:

- The patient has failed an appropriate trial of formulary or preferred agents.
- The use of preferred or formulary agent is contraindicated in the patient.
- The formulary drug or preferred agents are not suited for the present patient care need, and the drug selected is required for patient safety.

If the request does not meet the established guidelines request, it will not be approved and alternative therapy may be recommended along with the proper course of alternative action.

### ***Common Drug Exclusions***

Due to benefit design parameters, some plan sponsors may choose to exclude certain drug classes. Prior authorization is generally not available for drugs that are specifically excluded by benefit design. Common excluded coverages may include, but are not limited to:

- OTC medications or their equivalents unless otherwise specified in the Formulary listing.
- Smoking Cessation products (i.e. transdermal nicotine, nicotine gum, nicotine inhaler)
- Drug products used for cosmetic purposes
- Experimental drug products, or any drug product used in an experimental manner
- Replacement of lost or stolen medication
- Foreign drugs or drugs not approved by the United States Food & Drug Administration (FDA)

### ***Mandated Generic Substitution***

Catalyst Rx advocates the use of cost-effective generic drugs where FDA-labeled brand equivalent drugs are available. Generic products are listed in the Formulary and noted as “generic” wherever an FDA-approved generic drug product is available. If a member or physician requests a brand-name product in lieu of an approved generic, the member, based upon their coverage, will typically be required to pay the difference in cost between the brand and the generic drug. A physician can request coverage through the medication request process if he or she determines there is a documented medical need for the brand-drug equivalent.

Select drug products are excluded from generic substitution due to unique dosage form, complex pharmacokinetics and pharmacodynamics (what the body does to the drugs and what a drug does to the body, respectively), narrow therapeutic efficacy and/or where the critical maintenance of the drug blood level is crucial to its efficacy and prevention of adverse effects. This mandated generic substitution process is not intended to supersede any federal, state or local statues or regulations of the dispensing or generic substitution of any prescription agents. The drug list below is continuously reviewed to reflect current clinical standards and practices.

Products excluded for exclusion from the generic mandate are:

- Coumadin
- Dilantin
- Lanoxin
- Synthroid
- Tegretol/ XR
- Uniphyl
- Zarontin

## ***Medication Requests Procedure***

Medication requests, questions or information regarding the medication requests, formulary status or other coverage may be requested.

1. The appropriate forms for medication review are available at [www.catalystrx.com](http://www.catalystrx.com) or by calling the Catalyst Rx Customer Service Department at 1-888-341-8578.
2. Completed Catalyst Rx Prior Authorization Forms should be faxed to 1-888-852-1832.
3. Alternatively, the prior authorization process can be initiated by contacting Catalyst Rx directly at 1-888-341-8578.

The requesting provider will be provided written notification of Catalyst Rx review decisions. Non-approved requests may be appealed. The physician must provide information to support the appeal on the basis of medical necessity.

## ***Contact Information***

The Catalyst Rx Preferred National Formulary is designed to assist physicians, members and other health care professionals in the selection of cost-effective agents. Catalyst Rx encourages your input and feedback on how we can assist in improving this document and the formulary management process.

Please direct your communications to:

Chairperson, Pharmacy & Therapeutics Committee  
Catalyst Rx  
1650 Spring Gate Lane  
Las Vegas, NV 89134

In addition to the Catalyst Rx Preferred National Formulary booklet, other quick-reference guides are available on our Web site at [www.catalystrx.com](http://www.catalystrx.com), including pocket-sized *Preferred Drug Lists*. Requests for additional formulary materials should include the type of formulary materials requested, the quantity of each and the physician and/or medical group name, address and telephone number.

Please direct all requests to:

Formulary Management  
Catalyst Rx  
1650 Spring Gate Lane  
Las Vegas, NV 89134

Tier	Generic Name	-	Reference Name	Generic Status	Preferred Alternatives / Comments
<b>ANTI-INFECTIVES</b>					
<b>PENICILLINS</b>					
1	amoxicillin	-	AMOXIL, TRIMOX	generic	
1	amoxicillin/clavulanate	-	AUGMENTIN, AUGMENTIN ES	generic	
1	ampicillin	-	PRINCIPEN	generic	
1	dicloxacillin	-	DYNAPEN	generic	
1	penicillin v potassium	-	VEETIDS	generic	
2	amoxicillin/clavulanate	-	AUGMENTIN SUSPENSION 125/31.25		Some strengths available as generic
2	amoxicillin/clavulanate er	-	AUGMENTIN XR		
2	penicillin g benzathine	-	BICILLIN LA		
2	penicillin g benzathine/penicillin g procaine	-	BICILLIN CR		
3	amoxicillin er	-	MOXATAG		amoxicillin, amoxicillin/clavulanate, penicillin v potassium
<b>CEPHALOSPORINS</b>					
1	cefaclor	-	CECLOR	generic	
1	cefadroxil	-	DURICEF	generic	
1	cefdirir	-	OMNICEF	generic	
1	cefepime	-	VANTIN	generic	
1	cefprozil	-	CEFZIL	generic	
1	cefuroxime axetil	-	CEFTIN	generic	
1	cephalexin	-	KEFLEX, KEFTAB	generic	
3	cefaclor er	-	CECLOR CD		cefaclor, cefprozil, cefuroxime axetil
3	cefditoren	-	SPECTRACEF		cefdirir, cefepime
3	cefixime	-	SUPRAX		cefdirir, cefepime
3	ceftibuten	-	CEDAX		cefdirir, cefepime
<b>MACROLIDES</b>					
1	azithromycin	-	ZITHROMAX	generic	
1	clarithromycin	-	BIAXIN	generic	
1	clarithromycin er	-	BIAXIN XL	generic	
1	erythromycin ethylsuccinate	-	E.E.S 400	generic	
2	erythromycin base	-	ERYTHROMYCIN FILMTAB		
2	erythromycin ethylsuccinate	-	E.E.S GRANULES, ERYPED		
2	erythromycin stearate	-	ERYTHROCIN		
3	azithromycin	-	ZMAX		azithromycin, clarithromycin
3	erythromycin base, delayed release	-	ERY-TAB, PCE		erythromycin base, erythromycin ethylsuccinate, erythromycin stearate
<b>SULFONAMIDES &amp; COMBINATIONS</b>					
1	erythromycin/sulfisoxazole	-	PEDIAZOLE	generic	
1	sulfadiazine	-	SULFADIAZINE	generic	
1	sulfamethoxazole/trimethoprim	-	BACTRIM DS, SEPTRA DS	generic	
1	sulfisoxazole	-	GANTRISIN	generic	
3	sulfisoxazole	-	GANTRISIN PEDIATRIC		erythromycin/sulfisoxazole, sulfamethoxazole/trimethoprim
<b>TETRACYCLINES</b>					
1	demeclocycline	-	DECLOMYCIN	generic	
1	doxycycline hyclate	-	VIBRA-TABS, VIBRAMYCIN	generic	
1	doxycycline hyclate	-	PERIOSTAT	generic	
1	doxycycline monohydrate	-	ADOXA TABLETS	generic	
1	doxycycline monohydrate	-	MONODOX 50mg, 100mg CAPSULES	generic	
1	minocycline	-	DYNACIN, MINOCIN	generic	
1	tetracycline	-	ACHROMYCIN, SUMYCIN	generic	
2	doxycycline monohydrate	-	ADOXA 75mg, 150mg CAPSULES		
2	doxycycline monohydrate	-	ORACEA		
3	doxycycline hyclate	-	ORAXYL		doxycycline
3	doxycycline monohydrate	-	ADOXA CK KIT, ADOXA TT KIT		doxycycline
3	doxycycline monohydrate	-	VIBRAMYCIN SUSPENSION		doxycycline
3	minocycline	-	SOLODYN		minocycline
3	minocycline powder	-	ARESTIN		doxycycline, minocycline
<b>MISCELLANEOUS ANTI-BACTERIALS &amp; ANTI-MYCOBACTERIALS</b>					
1	chlorhexidine	-	PERIDEX, PERIOGARD	generic	
1	clindamycin hcl	-	CLEOCIN	generic	
1	metronidazole	-	FLAGYL	generic	
1	metronidazole er	-	FLAGYL ER	generic	
1	neomycin	-	NEOMYCIN	generic	
1	paromomycin	-	HUMATIN	generic	
1	vancomycin	-	VANCOCIN INJECTION	generic	
2	dapsone	-	DAPSONE		
2	linezolid	-	ZYVOX		
2	vancomycin	-	VANCOCIN CAPSULES		
3	clindamycin palmitate	-	CLEOCIN PEDIATRIC		clindamycin
3	rifaximin	-	XIFAXAN		ciprofloxacin, ciprofloxacin er
3	telithromycin	-	KETEK		azithromycin, cefprozil, cefuroxime axetil
4	tobramycin	-	TOBI		PA REQUIRED
<b>URINARY ANTI-INFECTIVES</b>					
1	methenamine hippurate	-	HIPREX	generic	
1	nitrofurantoin macrocrystals	-	MACRODANTIN	generic	
1	nitrofurantoin monohydrate/macrocrystals	-	MACROBID 50mg, 100mg	generic	
1	trimethoprim	-	PROLOPRIM, TRIMPEX	generic	
2	nitrofurantoin	-	FURADANTIN SUSPENSION		

Tier	Generic Name	-	Reference Name	Generic Status	Preferred Alternatives / Comments
<b>URINARY ANTI-INFECTIVES (cont.)</b>					
3	fosfomycin	-	MONUROL		ciprofloxacin, ciprofloxacin er, sulfamethoxazole/trimethoprim
3	nitrofurantoin	-	MACRODANTIN 25mg		nitrofurantoin macrocrystals
3	trimethoprim	-	PRIMSOL		ciprofloxacin, ciprofloxacin er, sulfamethoxazole/trimethoprim, trimethoprim
<b>QUINOLONES</b>					
1	ciprofloxacin	-	CIPRO	generic	
1	ciprofloxacin er	-	CIPRO XR	generic	
1	ofloxacin	-	FLOXIN	generic	
2	ciprofloxacin	-	CIPRO SUSPENSION		
2	levofloxacin	-	LEVAQUIN		
3	ciprofloxacin	-	PROQUIN XR		ciprofloxacin, ciprofloxacin er, ofloxacin, Levaquin
3	gemifloxacin	-	FACTIVE		ciprofloxacin, ciprofloxacin er, ofloxacin, Levaquin
3	moxifloxacin	-	AVELOX		ciprofloxacin, ciprofloxacin er, ofloxacin, Levaquin
3	norfloxacin	-	NOROXIN		ciprofloxacin, ciprofloxacin er, ofloxacin, Levaquin
<b>ORAL ANTIFUNGAL AGENTS</b>					
1	clotrimazole	-	MYCELEX TROCHE	generic	
1	fluconazole	-	DIFLUCAN	generic	QUANTITY LIMIT
1	griseofulvin microsize suspension	-	GRIFULVIN V SUSPENSION	generic	
1	itraconazole	-	SPORANOX	generic	
1	ketoconazole	-	NIZORAL TABLETS	generic	
1	nystatin	-	NILSTAT, MYCOSTATIN	generic	
1	terbinafine	-	LAMISIL	generic	STEP THERAPY
2	flucytosine	-	ANCOBON		
2	itraconazole	-	SPORANOX SOLUTION		STEP THERAPY, Generic Sporanox, Lamisil
2	posaconazole	-	NOXAFIL SUSPENSION		
2	terbinafine	-	LAMISIL ORAL GRANULES		
2	voriconazole	-	VFEND		
3	griseofulvin	-	GRIFULVIN		griseofulvin microsize, itraconazole, terbinafine
3	griseofulvin ultramicrosize	-	GRIS-PEG		griseofulvin microsize, itraconazole, terbinafine
3	nystatin	-	BIO-STATIN		nystatin
<b>ANTIVIRAL AGENTS</b>					
<b>ORAL ANTIVIRAL AGENTS - ANTI-INFLUENZA</b>					
1	amantadine	-	SYMMETREL CAPSULES	generic	
1	rimantadine	-	FLUMADINE	generic	
2	oseltamivir	-	TAMIFLU		
2	zanamivir	-	RELENZA		
3	amantadine	-	SYMMETREL TABLETS		amantadine capsules
<b>ANTIVIRAL AGENTS - HEPATITIS</b>					
2	ribavirin inhalation	-	VIRAZOLE		
4	ribavirin	-	COPEGUS, REBETOL, RIBASPHERE	generic	PA REQUIRED
4	adefovir	-	HEPSERA		PA REQUIRED
4	entecavir	-	BARACLUDE		PA REQUIRED
4	interferon alfacon-1	-	INFERGEN		PA REQUIRED
4	peginterferon alpha-2a	-	PEGASYS		PA REQUIRED
4	peginterferon alpha-2b	-	PEG INTRON		PA REQUIRED
4	ribavirin oral solution	-	REBETOL ORAL SOLUTION		PA REQUIRED
4	telbivudine	-	TYZEKA		PA REQUIRED
<b>ANTIVIRAL AGENTS - HERPES</b>					
1	acyclovir	-	ZOVIRAX	generic	
1	famciclovir	-	FAMVIR	generic	
2	valacyclovir	-	VALTREX		
<b>ANTIVIRAL AGENTS - OTHER</b>					
2	valganciclovir	-	VALCYTE		
3	ganciclovir	-	CYTOVENE		Valcyte
<b>ANTIRETROVIRAL AGENTS - COMBINATION PRODUCTS</b>					
2	abacavir/lamivudine	-	EPZICOM		
2	abacavir/lamivudine/zidovudine	-	TRIZIVIR		
2	efavirenz/emtricitabine/tenofovir	-	ATRIPLA		
2	emtricitabine/tenofovir	-	TRUVADA		
2	lamivudine/zidovudine	-	COMBIVIR		
2	lopinavir/ritonavir	-	KALETRA		
<b>ANTIRETROVIRAL AGENTS - OTHER PRODUCTS</b>					
2	maraviroc	-	SELZENTRY		
2	raltegravir	-	ISENTRESS		
4	enfuvirtide	-	FUZEON		PA REQUIRED
<b>ANTIRETROVIRAL AGENTS - PROTEASE INHIBITORS</b>					
2	atazanavir	-	REYATAZ		
2	darunavir	-	PREZISTA		
2	fosamprenavir	-	LEXIVA		
2	indinavir	-	CRIXIVAN		
2	nelfinavir	-	VIRACEPT		
2	ritonavir	-	NORVIR		
2	saquinavir	-	INVIRASE		
2	tipranavir	-	APTIVUS		
<b>ANTIRETROVIRAL AGENTS - REVERSE TRANSCRIPTASE INHIBITORS</b>					
1	didanosine	-	VIDEX EC	generic	
1	stavudine	-	ZERIT	generic	
1	zidovudine	-	RETROVIR	generic	

Tier	Generic Name	-	Reference Name	Generic Status	Preferred Alternatives / Comments
<b>ANTIRETROVIRAL AGENTS - REVERSE TRANSCRIPTASE INHIBITORS (cont.)</b>					
2	abacavir sulfate	-	ZIAGEN		
2	delavirdine mesylate	-	RESCRIPTOR		
2	didanosine	-	VIDEX SOLUTION		
2	efavirenz	-	SUSTIVA		
2	emtricitabine	-	EMTRIVA		
2	etravirine	-	INTELENCE		
2	lamivudine	-	EPIVIR/HBV		
2	nevirapine	-	VIRAMUNE		
2	tenofovir	-	VIREAD		
<b>ANTI-MALARIAL AGENTS</b>					
1	chloroquine phosphate	-	ARALEN	generic	
1	hydroxychloroquine	-	PLAQUENIL	generic	
1	mefloquine	-	LARIAM	generic	
2	artemether/lumefantrine	-	COARTEM		
2	atovaquone/proguanil	-	MALARONE		
2	primaquine	-	PRIMAQUINE		
2	pyrimethamine	-	DARAPRIM		
2	quinine sulfate	-	QUALAQUIN		
<b>ANTI-AMEBIC, ANTI-HELMINTHIC &amp; ANTI-PROTOZOAL AGENTS</b>					
1	mebendazole	-	VERMOX	generic	
2	albendazole	-	ALBENZA		
2	atovaquone	-	MEPRON		
2	diiodohydroxyquin	-	YODOXIN		
2	ivermectin	-	STROMEKTOL		
2	nitazoxanide	-	ALINIA		
2	pentamidine	-	NEBUPENT		
2	praziquantel	-	BILTRICIDE		
2	pyrimethamine/sulfadoxine	-	FANSIDAR		
2	tinidazole	-	TINDAMAX		
<b>ANTI-TUBERCULOSIS AGENTS</b>					
1	ethambutol	-	MYAMBUTOL	generic	
1	isoniazid	-	NIAZID, NYDRAZID	generic	
1	pyrazinamide	-	PYRAZINAMIDE	generic	
1	rifampin	-	RIFADIN, RIMACTANE	generic	
2	aminosalicylic acid	-	PASER		
2	cycloserine	-	SEROMYCIN		
2	ethionamide	-	TRECTOR		
2	rifabutin	-	MYCOBUTIN		
2	rifampin/inh/pyrazinamide	-	RIFATER		
2	rifampin/isoniazid	-	RIFAMATE		
3	rifapentine	-	PRIFITIN		rifampin, Rifamate, Rifater
<b>IMMUNOSUPPRESSANT AGENTS</b>					
1	azathioprine	-	IMURAN	generic	
1	cyclosporine	-	NEORAL, SANDIMMUNE	generic	
1	leflunomide	-	ARAVA	generic	
1	methotrexate	-	RHEUMATREX 2.5mg	generic	
1	mycophenolate mofetil	-	CELLCEPT CAPSULES	generic	
1	tacrolimus	-	PROGRAF	generic	
2	auranofin	-	RIDAURA		
2	cyclosporine	-	SANDIMMUNE		
2	methotrexate	-	TREXALL		
2	mycophenolate mofetil	-	CELLCEPT SUSPENSION		
2	penicillamine	-	CUPRIMINE, DEPEN TITRATABS		
2	sirolimus	-	RAPAMUNE		
3	mycophenolate sodium	-	MYFORTIC		mycophenolate mofetil
<b>ANTI-NEOPLASTIC AGENTS</b>					
1	anagrelide	-	AGRYLIN	generic	
1	bicalutamide	-	CASODEX	generic	
1	etoposide	-	VEPESID INJECTION	generic	
1	flutamide	-	EULEXIN	generic	
1	hydroxyurea	-	HYDREA 500mg	generic	
1	leucovorin	-	LEUCOVORIN	generic	
1	megestrol	-	MEGACE	generic	
1	mercaptopurine	-	PURINETHOL	generic	
1	mesna	-	MESNEX INJECTION	generic	
1	tamoxifen	-	NOLVADEX	generic	
1	tretinoin	-	VESANOID	generic	
1	vinorelbine	-	NAVELBINE	generic	
2	altretamine	-	HEXALEN		
2	anastrozole	-	ARIMIDEX		
2	azacitidine	-	VIDAZA		
2	azathioprine	-	AZASAN		
2	bevacizumab	-	AVASTIN		
2	bortezomib	-	VELCADE		
2	busulfan	-	MYLERAN		
2	capecitabine	-	XELODA		
2	cetuximab	-	ERBITUX		
2	chlorambucil	-	LEUKERAN		
2	cyclophosphamide	-	CYTOXAN		

Tier	Generic Name	-	Reference Name	Generic Status	Preferred Alternatives / Comments
<b>ANTI-NEOPLASTIC AGENTS (cont.)</b>					
2	degarelix	-	DEGARELIX		
2	estramustine	-	EMCYT		
2	etoposide	-	VEPESID CAPSULES		
2	exemestane	-	AROMASIN		
2	hydroxyurea	-	DROXIA		
2	ixabepilone	-	IXEMPRA		
2	letrozole	-	FEMARA		
2	lomustine	-	CEENU		
2	melphalan	-	ALKERAN		
2	mesna	-	MESNEX B		
2	methoxsalen	-	OXSORALEN-ULTRA, 8-MOP		
2	mitotane	-	LYSODREN		
2	procarbazine	-	MATULANE		
2	rituximab	-	RITUXAN		
2	temsirolimus	-	TORISEL		
2	thioguanine	-	TABLOID		
2	topotecan	-	HYCANTIN		
2	trastuzumab	-	HERCEPTIN		
3	megestrol	-	MEGACE ES		megestrol
3	nilutamide	-	NILANDRON		
3	tamoxifen	-	SOLTAMOX		tamoxifen
3	toremifene	-	FARESTON		
4	aldesleukin	-	PROLEUKIN		PA REQUIRED
4	bendamustine	-	TREANDA		PA REQUIRED
4	bexarotene	-	TARGRETIN		PA REQUIRED
4	dasatinib	-	SPRYCEL		PA REQUIRED
4	erlotinib	-	TARCEVA		PA REQUIRED
4	erlotinib	-	TASIGNA		PA REQUIRED
4	everolimus	-	AFINITOR		PA REQUIRED
4	gefitinib	-	IRESSA		PA REQUIRED - LIMITED DISTRIBUTION DRUG
4	goserelin	-	ZOLADEX		PA REQUIRED
4	histrelin	-	SUPPRELIN LA, VANTAS		PA REQUIRED - VANTAS IS A LIMITED DISTRIBUTION DRUG
4	imatinib	-	GLEEVEC		PA REQUIRED
4	interferon alpha-2b	-	INTRON A		PA REQUIRED
4	lapatinib	-	TYKERB		PA REQUIRED - LIMITED DISTRIBUTION DRUG
4	lenalidomide	-	REVLIMID		PA REQUIRED - LIMITED DISTRIBUTION DRUG
4	leuprolide	-	LUPRON	generic	PA REQUIRED
4	leuprolide	-	LUPRON DEPOT/PED, ELIGARD		PA REQUIRED
4	mitoxantrone	-	NOVANTRONE	generic	PA REQUIRED
4	octreotide	-	SANDOSTATIN	generic	PA REQUIRED
4	octreotide	-	SANDOSTATIN LAR DEPOT		PA REQUIRED
4	sorafenib	-	NEXAVAR		PA REQUIRED - LIMITED DISTRIBUTION DRUG
4	sunitinib malate	-	SUTENT		PA REQUIRED
4	temozolomide	-	TEMODAR		PA REQUIRED
4	thalidomide	-	THALOMID		PA REQUIRED
4	pazopanib	-	VOTRIENT		PA REQUIRED
4	vorinostat	-	ZOLINZA		PA REQUIRED
<b>HEMATOPOETIC GROWTH FACTORS</b>					
4	filgrastim	-	NEUPOGEN		PA REQUIRED
4	oprelvekin	-	NEUMEGA		PA REQUIRED
4	pegfilgrastim	-	NEULASTA		PA REQUIRED
4	sargramostim	-	LEUKINE		PA REQUIRED
<b>ANTIPSORIASIS AGENTS</b>					
2	acitretin	-	SORIATANE CK KIT		
<b>CARDIOVASCULAR MEDICATIONS</b>					
<b>CARDIAC GLYCOSIDES</b>					
1	digoxin	-	LANOXIN	generic	
2	digoxin	-	LANOXIN		
<b>CALCIUM ANTAGONISTS</b>					
1	amlodipine	-	NORVASC	generic	
1	diltiazem	-	CARDIZEM	generic	
1	diltiazem er	-	CARDIZEM CD, CARTIA XT	generic	Cardizem 360mg not available in Generic - Tier 3 Copay
1	diltiazem er	-	DILACOR XR	generic	
1	diltiazem er	-	DILTZAC, TAZTIA XT, TIAZAC	generic	
1	felodipine	-	PLENDIL	generic	
1	isradipine	-	DYNACIRC	generic	
1	nicardipine	-	CARDENE	generic	
1	nifedipine	-	PROCARDIA	generic	
1	nifedipine er	-	ADALAT CC	generic	
1	nifedipine er	-	PROCARDIA XL	generic	
1	nimodipine	-	NIMOTOP	generic	
1	verapamil	-	CALAN, ISOPTIN	generic	
1	verapamil er	-	CALAN SR, ISOPTIN SR	generic	
1	verapamil er	-	VERELAN PM	generic	
2	diltiazem er	-	CARDIZEM LA		
2	nisoldipine er	-	SULAR		
3	isradipine er	-	DYNACIRC CR		amlodipine, felodipine, isradipine, nifedipine er
3	nicardipine er	-	CARDENE SR		amlodipine, felodipine, nicardipine, nifedipine er
3	verapamil er	-	COVERA-HS		verapamil er

Tier	Generic Name	-	Reference Name	Generic Status	Preferred Alternatives / Comments
<b>DIURETICS</b>					
1	acetazolamide	-	DIAMOX	generic	
1	amiloride	-	MIDAMOR	generic	
1	amiloride/hydrochlorothiazide	-	MODURETIC	generic	
1	bumetanide	-	BUMEX	generic	
1	chlorothiazide	-	DIURIL	generic	
1	chlorthalidone	-	HYGROTON	generic	
1	eplerenone	-	INSPIRA	generic	
1	furosemide	-	LASIX	generic	
1	hydrochlorothiazide	-	ESIDRIX, HYDRODIURIL	generic	
1	indapamide	-	LOZOL	generic	
1	methyclothiazide	-	AQUATENSEN, ENDURON	generic	
1	metolazone	-	ZAROXOLYN	generic	
1	spironolactone	-	ALDACTONE	generic	
1	spironolactone/hydrochlorothiazide	-	ALDACTAZIDE	generic	
1	torsemide	-	DEMADEX	generic	
1	triamterene/hydrochlorothiazide	-	DYAZIDE, MAXZIDE, MAXZIDE-25	generic	
3	ethacrynate	-	EDECIN		
<b>BETA-ADRENERGIC ANTAGONIST AGENTS &amp; COMBINATIONS</b>					
1	acebutolol	-	SECTRAL	generic	
1	atenolol	-	TENORMIN	generic	
1	atenololchlorthalidone	-	TENORETIC	generic	
1	betaxolol	-	KERLONE	generic	
1	bisoprolol	-	ZEBETA	generic	
1	bisoprolol/hydrochlorothiazide	-	ZIAC	generic	
1	carvedilol	-	COREG	generic	
1	labetalol	-	NORMODYNE, TRANDATE	generic	
1	metoprolol succinate	-	TOPROL XL	generic	
1	metoprolol tartrate	-	LOPRESSOR	generic	
1	metoprolol/hydrochlorothiazide	-	LOPRESSOR HCT 100/25	generic	
1	nadolol	-	CORGARD	generic	
1	nadolol/bendroflumethiazide	-	CORZIDE	generic	
1	pindolol	-	VISKEN	generic	
1	propranolol	-	INDERAL	generic	
1	propranolol er	-	INDERAL LA	generic	
1	propranolol/hydrochlorothiazide	-	INDERIDE 40/25	generic	
2	carvedilol	-	COREG CR		
2	propranolol	-	PROPANOLOL SOLUTION		
3	metoprolol/hydrochlorothiazide	-	LOPRESSOR HCT 100/50		metoprolol/hydrochlorothiazide
3	nebivolol	-	BYSTOLIC		atenolol, bisoprolol, metoprolol succinate
3	penbutolol	-	LEVATOL		nadalol, pindolol
3	propranolol er	-	INNOPRAN XL		propranolol er
3	propranolol/hydrochlorothiazide	-	INDERIDE 80/25		propranolol/hydrochlorothiazide
3	timolol	-	BLOCADREN		nadalol, pindolol
<b>ACE INHIBITORS &amp; COMBINATIONS</b>					
1	benazepril	-	LOTENSIN	generic	
1	benazepril/amlodipine besylate	-	LOTREL	generic	
1	benazepril/hydrochlorothiazide	-	LOTENSIN HCT	generic	
1	captopril	-	CAPOTEN	generic	
1	captopril/hydrochlorothiazide	-	CAPOZIDE	generic	
1	enalapril	-	VASOTEC	generic	
1	enalapril/hydrochlorothiazide	-	VASERETIC	generic	
1	fosinopril	-	MONOPRIL	generic	
1	fosinopril/hydrochlorothiazide	-	MONOPRIL HCT	generic	
1	lisinopril	-	PRINIVIL	generic	
1	lisinopril	-	ZESTRIL	generic	
1	lisinopril/hydrochlorothiazide	-	PRINZIDE	generic	
1	lisinopril/hydrochlorothiazide	-	ZESTORETIC	generic	
1	moexipril	-	UNIVASC	generic	
1	moexipril/hydrochlorothiazide	-	UNIRETIC	generic	
1	quinapril	-	ACCUPRIL	generic	
1	quinapril/hydrochlorothiazide	-	ACCURETIC	generic	
1	ramipril	-	ALTACE CAPSULES	generic	
1	trandolapril	-	MAVIK	generic	
2	benazepril/amlodipine besylate	-	LOTREL 5/40, 10/40		
2	ramipril	-	ALTACE TABLETS		
3	enalapril maleate/felodipine	-	LEXXEL		benazepril/amlodipine besylate, enalapril, felodipine, Lotrel
3	perindopril	-	ACEON		benazepril, fosinopril, lisinopril, quinapril
3	trandolapril/verapamil	-	TARKA		benazepril/amlodipine besylate, trandolapril, verapamil, Lotrel
<b>ANGIOTENSIN II RECEPTOR ANTAGONISTS &amp; COMBINATIONS</b>					
2	candesartan	-	ATACAND		STEP THERAPY
2	candesartan/hydrochlorothiazide	-	ATACAND HCT		STEP THERAPY
2	losartan	-	COZAAR		STEP THERAPY
2	losartan/hydrochlorothiazide	-	HYZAAR		STEP THERAPY
2	olmesartan	-	BENICAR		STEP THERAPY
2	olmesartan/hydrochlorothiazide	-	BENICAR HCT		STEP THERAPY
2	telmisartan	-	MICARDIS		STEP THERAPY

Tier	Generic Name	-	Reference Name	Generic Status	Preferred Alternatives / Comments
<b>ANGIOTENSIN II RECEPTOR ANTAGONISTS &amp; COMBINATIONS (cont.)</b>					
2	telmisartan/hydrochlorothiazide	-	MICARDIS HCT		STEP THERAPY
2	valsartan	-	DIOVAN		STEP THERAPY
2	valsartan/amlodipine	-	EXFORGE		STEP THERAPY
2	valsartan/amlodipine/ hydrochlorothiazide	-	EXFORGE HCT		STEP THERAPY
2	valsartan/hydrochlorothiazide	-	DIOVAN HCT		STEP THERAPY
3	amlodipine besylate/olmesartan	-	AZOR		STEP THERAPY, amlodipine, Benicar, Exforge
3	eprosartan	-	TEVETEN		STEP THERAPY, Atacand, Cozaar, Benicar, Diovan, Micardis
3	eprosartan/hydrochlorothiazide	-	TEVETEN HCT		STEP THERAPY, Atacand HCT, Benicar HCT, Diovan HCT, Micardis HCT
3	irbesartan	-	AVAPRO		STEP THERAPY, Atacand, Cozaar, Benicar, Diovan,
3	irbesartan/hydrochlorothiazide	-	AVALIDE		STEP THERAPY, Atacand HCT, Benicar HCT, Diovan HCT, Micardis HCT
<b>OTHER ANTIHYPERTENSIVES</b>					
1	clonidine	-	CATAPRES	generic	
1	clonidine transdermal	-	CATAPRES TTS	generic	
1	clonidine/chlorthalidone	-	CLORPRES	generic	
1	doxazosin	-	CARDURA	generic	
1	guanfacine	-	TENEX	generic	
1	hydralazine	-	APRESOLINE	generic	
1	hydralazine/hydrochlorothiazide	-	APRESAZIDE	generic	
1	methyl dopa	-	ALDOMET	generic	
1	methyl dopa/hydrochlorothiazide	-	ALDORIL	generic	
1	midodrine	-	PROAMATINE	generic	
1	minoxidil	-	LONITEN	generic	
1	prazosin	-	MINIPRESS	generic	
1	terazosin	-	HYTRIN	generic	
2	aliskiren	-	TEKTURNA		
2	aliskiren/hydrochlorothiazide	-	TEKTURNA HCT		
2	reserpine	-	RESERPINE		
3	guanabenz	-	WYTENSIN		clonidine, guanfacine, methyl dopa
<b>PHEOCHROMOCYTOMA AGENTS</b>					
2	metirosine	-	DEMSEK		
2	phenoxybenzamine	-	DIBENZYLINE		
<b>VASODILATING AGENTS</b>					
1	isosorbide dinitrate	-	ISORDIL, SORBITRATE	generic	
1	isosorbide dinitrate er	-	ISOCHRON	generic	
1	isosorbide mononitrate	-	IMDUR, MONOKET	generic	
1	nitroglycerin er	-	NITRO-BID CAPSULES	generic	
1	nitroglycerin sublingual	-	NITROSTAT	generic	
1	nitroglycerin transdermal	-	MINITRAN, NITREK, NITRO-DUR	generic	
2	isosorbide dinitrate	-	DILATRATE-SR		
2	isosorbide dinitrate/hydrochlorothiazide	-	BIDIL		
2	nitroglycerin ointment	-	NITRO-BID OINTMENT		
2	nitroglycerin spray	-	NITROLINGUAL PUMP SPRAY		
2	ranolazine er	-	RANEXA		
3	isosorbide dinitrate er	-	ISORDIL TITRADOSE 40mg		isosorbide dinitrate, isosorbide mononitrate
3	nitroglycerin transdermal	-	NITRO-DUR 0.3mg, 0.8mg		nitroglycerin transdermal, nitroglycerin er
<b>ANTIDYSRHYTHMIC AGENTS</b>					
1	amiodarone	-	CORDARONE, PACERONE 200mg, 400mg	generic	
1	disopyramide	-	NORPACE	generic	
1	flecainide	-	TAMBOCOR	generic	
1	propafenone	-	RYTHMOL	generic	
1	quinidine gluconate	-	QUINAGLUTE DURA-TAB	generic	
1	quinidine sulfate	-	QUINIDINE	generic	
1	sotalol	-	BETAPACE, BETAPACE AF	generic	
2	amiodarone	-	PACERONE 100mg, 300mg		
2	dofetilide	-	TIKOSYN		
2	mexiletine	-	MEXITIL		
2	morizine	-	ETHMOZINE		
2	propafenone er	-	RYTHMOL SR		
3	disopyramide er	-	NORPACE CR		
3	dronedarone	-	MULTAQ		
3	quinidine sulfate er	-	QUINIDEX		
<b>ANTILIPEMIC AGENTS</b>					
<b>HMG-COA REDUCTASE INHIBITORS</b>					
1	lovastatin	-	MEVACOR	generic	QUANTITY LIMIT
1	pravastatin	-	PRAVACHOL	generic	QUANTITY LIMIT
1	simvastatin	-	ZOCOR	generic	QUANTITY LIMIT
2	lovastatin er	-	ALTOPREV		QUANTITY LIMIT, STEP THERAPY, lovastatin, pravastatin, simvastatin
2	lovastatin/niacin	-	ADVICOR		QUANTITY LIMIT, STEP THERAPY, lovastatin, pravastatin, simvastatin
2	rosuvastatin	-	CRESTOR		QUANTITY LIMIT, STEP THERAPY, lovastatin, pravastatin, simvastatin
3	atorvastatin calcium	-	LIPITOR		QUANTITY LIMIT, STEP THERAPY, lovastatin, pravastatin, simvastatin
3	simvastatin/ezetimibe	-	VYTORIN		QUANTITY LIMIT, STEP THERAPY, lovastatin, pravastatin, simvastatin

Tier	Generic Name	-	Reference Name	Generic Status	Preferred Alternatives / Comments
<b>HMG-COA REDUCTASE INHIBITORS (cont.)</b>					
3	fluvastatin	-	LESCOL		QUANTITY LIMIT, STEP THERAPY, lovastatin, pravastatin, simvastatin
3	fluvastatin er	-	LESCOL XL		QUANTITY LIMIT, STEP THERAPY, lovastatin, pravastatin, simvastatin
<b>ANTILIPEMIC AGENTS, OTHER</b>					
1	cholestyramine/aspartame	-	QUESTRAN LIGHT	generic	
1	cholestyramine/sucrose	-	QUESTRAN	generic	
1	colestimol	-	COLESTID	generic	
1	fenofibrate micronized	-	LOFIBRA	generic	
1	gemfibrozil	-	LOPID	generic	
1	niacin	-	NIACOR	generic	
2	colesevelam	-	WELCHOL		
2	ezetimibe	-	ZETIA		QUANTITY LIMIT
2	niacin er	-	NIASPAN		
2	omega-3-acid ethyl esters	-	LOVAZA		
2	simvastatin/niacin	-	SIMCOR		
3	fenofibrate	-	TRICOR		STEP THERAPY
3	choline fenofibrate	-	TRILIPIX		STEP THERAPY
3	fenofibrate	-	FENOGLIDE		STEP THERAPY
3	fenofibrate	-	TRIGLIDE		STEP THERAPY
3	amlodipine/atorvastatin	-	CADUET		amlodipine, Lipitor
3	fenofibrate	-	LIPOFEN		STEP THERAPY, fenofibrate micronized, Fenoglide, Tricor, Triglide, Trilipix
3	fenofibrate micronized	-	ANTARA		STEP THERAPY, fenofibrate micronized, Fenoglide, Tricor, Triglide, Trilipix
3	fenofibric acid	-	FIBRICOR		STEP THERAPY, fenofibrate micronized, Fenoglide, Tricor, Triglide, Trilipix
<b>AUTONOMIC AND CNS MEDICATIONS</b>					
<b>ANALGESICS</b>					
1	fentanyl citrate lozenges	-	ACTIQ	generic	
1	fentanyl patch	-	DURAGESIC	generic	
1	hydromorphone	-	DILAUDID	generic	
1	meperidine	-	DEMEROL INJECTION, TABLETS	generic	
1	methadone	-	DOLOPHINE	generic	
1	morphine	-	MSIR	generic	
1	morphine	-	ROXANOL	generic	
1	morphine er	-	MS CONTIN	generic	
1	oxycodone	-	OXYIR, ROXICODONE 5mg, 15mg, 30mg	generic	
1	tramadol	-	ULTRAM	generic	
2	buprenorphine	-	SUBUTEX		
2	codeine sulfate	-	CODEINE		
2	hydromorphone	-	DILAUDID LIQUID		
2	meperidine	-	DEMEROL SOLUTION		
2	methadone	-	DOLOPHINE 5mg/5ml, 10mg/5ml SOLUTION		
2	morphine	-	MORPHINE SOLUTION		
2	morphine	-	MORPHINE SUPPOSITORIES		
2	morphine er	-	AVINZA		
2	oxycodone er	-	OXYCONTIN		
3	fentanyl citrate effervescent	-	FENTORA		fentanyl citrate lozenges, morphine, oxycodone
3	levorphanol	-	LEVO-DROMORAN		hydromorphone, methadone, morphine, oxycodone
3	morphine er	-	KADIAN		morphine er, Avinza
3	morphine er	-	ORAMORPH		morphine er, Avinza
3	morphine er/naltrexone	-	EMBEDA		morphine er, Avinza
3	oxycodone	-	DAZIDOX 10mg, 20mg		oxycodone
3	oxymorphone	-	OPANA		hydromorphone, morphine, oxycodone
3	oxymorphone er	-	OPANA ER		hydromorphone, methadone, morphine er, Avinza, OxyContin
3	tapentadol	-	NUCYNTA		morphine, oxycodone, tramadol
3	tramadol er	-	RYZOLT, ULTRAM ER		tramadol
<b>ANALGESIC COMBINATIONS</b>					
1	codeine/acetaminophen	-	TYLENOL/CODEINE	generic	
1	codeine/aspirin	-	EMPIRIN/CODEINE	generic	
1	hydrocodone/acetaminophen	-	LORTAB, VICODIN, VICODIN ES	generic	
1	hydrocodone/ibuprofen	-	VICOPROFEN	generic	
1	oxycodone/acetaminophen	-	PERCOCET	generic	
1	oxycodone/aspirin	-	PERCODAN	generic	
1	oxycodone/ibuprofen	-	COMBUNOX	generic	
1	pentazocine/acetaminophen	-	TALACEN	generic	
1	tramadol/acetaminophen	-	ULTRACET	generic	
3	dihydrocodeine/aspirin/caffeine	-	SYNALGOS DC		
3	meprobamate/aspirin	-	EQUAGESIC		
3	opium/belladonna alkaloids	-	B & O		
<b>NARCOTIC PARTIAL AGONISTS / ANTAGONISTS</b>					
1	pentazocine/naloxone	-	TALWIN NX	generic	
2	buprenorphine/naloxone	-	SUBOXONE		
<b>NARCOTIC ANTAGONISTS</b>					
1	naltrexone	-	REVia	generic	
3	naltrexone	-	VIVITROL		naltrexone

Tier	Generic Name	-	Reference Name	Generic Status	Preferred Alternatives / Comments
<b>AGENTS TO PREVENT &amp; TREAT HEADACHES</b>					
1	butalbital/acetaminophen	-	PHRENILIN, PHRENILIN FORTE	generic	
1	butalbital/acetaminophen/caffeine	-	ESGIC/PLUS, FIORICET	generic	
1	butalbital/aspirin/caffeine	-	FIORINAL	generic	
1	butalbital/codeine/acetaminophen	-	FIORICET/CODEINE	generic	
1	butalbital/codeine/aspirin/caffeine	-	FIORINAL/CODEINE	generic	
1	butorphanol	-	STADOL NS	generic	
1	dihydroergotamine	-	DHE-45	generic	
1	ergotamine/caffeine	-	CAFERGOT	generic	
1	isometheptene/dichlorophenazone/acetaminophen	-	MIDRIN	generic	
2	divalproex	-	DEPAKOTE ER		
2	ergotamine tartrate	-	ERGOMAR		
2	ergotamine/caffeine suppositories	-	MIGERGOT		
3	dihydroergotamine	-	MIGRANAL		sumatriptan, Amerge, Frova, Maxalt, Relpax, Zomig
<b>TRIPTAN AGENTS</b>					
1	sumatriptan tablets	-	IMITREX TABLETS	generic	QUANTITY LIMIT - 18/30 DAYS FOR ENTIRE CLASS
1	sumatriptan vial	-	IMITREX INJECTION 6mg/0.5ml VIAL	generic	QUANTITY LIMIT - 8/30 DAYS FOR ENTIRE CLASS
2	eletriptan	-	RELPAK		QUANTITY LIMIT - 18/30 DAYS FOR ENTIRE CLASS
2	frovatriptan	-	FROVA		QUANTITY LIMIT - 18/30 DAYS FOR ENTIRE CLASS
2	naratriptan	-	AMERGE		QUANTITY LIMIT - 18/30 DAYS FOR ENTIRE CLASS
2	rizatriptan	-	MAXALT, MAXALT MLT		QUANTITY LIMIT - 18/30 DAYS FOR ENTIRE CLASS
2	sumatriptan injection, nasal spray	-	IMITREX INJECTION 4mg/0.5ml,		QUANTITY LIMIT - 8/30 DAYS FOR ENTIRE CLASS
2	zolmitriptan	-	ZOMIG, ZOMIG ZMT		QUANTITY LIMIT - 18/30 DAYS FOR ENTIRE CLASS
3	almotriptan	-	AXERT		QUANTITY LIMIT - 18/30 DAYS FOR ENTIRE CLASS, sumatriptan, Amerge, Frova, Maxalt, Relpax, Zomig
3	sumatriptan/naproxen	-	TREXIMET		QUANTITY LIMIT - 18/30 DAYS FOR ENTIRE CLASS, naproxen, sumatriptan, Amerge, Frova, Maxalt, Relpax, Zomig
<b>ANXIOLYTICS</b>					
1	alprazolam	-	XANAX	generic	
1	alprazolam er	-	XANAX XR	generic	
1	alprazolam odt	-	NIRAVAM	generic	
1	buspirone	-	BUSPAR 5mg, 10mg, 15mg, 30mg	generic	
1	chlordiazepoxide	-	LIBRIUM	generic	
1	clorazepate	-	TRANXENE	generic	
1	diazepam	-	VALIUM	generic	
1	lorazepam	-	ATIVAN	generic	
1	midazolam	-	VERSED	generic	
1	oxazepam	-	SERAX	generic	
3	buspirone	-	BUSPAR 7.5mg		buspirone
3	clorazepate	-	TRANXENE SD		clorazepate
3	diazepam	-	DIAZEPAM 1mg/ml, 5mg/ml SOLUTION		diazepam, lorazepam
<b>SEDATIVE / HYPNOTIC AGENTS</b>					
1	estazolam	-	PROSOM	generic	
1	flurazepam	-	DALMANE	generic	
1	temazepam	-	RESTORIL	generic	
1	triazolam	-	HALCION	generic	
1	zaleplon	-	SONATA	generic	QUANTITY LIMIT OF 15/30 DAYS FOR ENTIRE CLASS
1	zolpidem	-	AMBIEN	generic	QUANTITY LIMIT OF 15/30 DAYS FOR ENTIRE CLASS
3	butabarbital	-	BUTISOL		temazepam, zaleplon, zolpidem
3	chloral hydrate	-	SOMNOTE		temazepam, zaleplon, zolpidem
3	eszopiclone	-	LUNESTA		QUANTITY LIMIT OF 15/30 DAYS FOR ENTIRE CLASS, temazepam, zaleplon, zolpidem
3	pentobarbital	-	NEMBUTAL INJECTION		temazepam, zaleplon, zolpidem
3	ramelteon	-	ROZEREM		QUANTITY LIMIT OF 15/30 DAYS FOR ENTIRE CLASS, temazepam, zaleplon, zolpidem
3	secobarbital	-	SECONAL		temazepam, zaleplon, zolpidem
3	zolpidem er	-	AMBIEN CR		QUANTITY LIMIT OF 15/30 DAYS FOR ENTIRE CLASS, zolpidem
3	zolpidem sl	-	EDLUAR		zolpidem
<b>ANTI-MANIA AGENTS</b>					
1	lithium carbonate	-	LITHONATE, ESKALITH	generic	
1	lithium carbonate er	-	LITHOBID	generic	
1	lithium citrate	-	LITHIUM CITRATE SYRUP	generic	
3	lithium carbonate	-	LITHIUM CARBONATE 300mg TABLETS		lithium carbonate, lithium citrate
<b>ANTICONVULSANT AGENTS</b>					
1	carbamazepine	-	TEGRETOL	generic	
1	carbamazepine er	-	TEGRETOL XR 200mg, 400mg	generic	
1	clonazepam	-	KLONOPIN	generic	
1	divalproex	-	DEPAKOTE	generic	
1	divalproex er	-	DEPAKOTE ER	generic	
1	ethosuximide	-	ZARONTIN	generic	
1	gabapentin	-	NEURONTIN	generic	
1	lamotrigine	-	LAMICTAL CHEWABLE DISPERSABLE 5mg, 25mg	generic	
1	lamotrigine	-	LAMICTAL	generic	
1	levetiracetam	-	KEPPRA	generic	
1	mephobarbital	-	MEBARAL	generic	
1	oxcarbazepine	-	TRILEPTAL	generic	

Tier	Generic Name	-	Reference Name	Generic Status	Preferred Alternatives / Comments
<b>ANTICONVULSANT AGENTS (cont.)</b>					
1	phenobarbital	-	PHENOBARBITAL	generic	
1	phenytoin	-	DILANTIN	generic	
1	primidone	-	MYSOLINE	generic	
1	topiramate	-	TOPAMAX	generic	
1	valproic acid	-	DEPAKENE	generic	
1	zonisamide	-	ZONEGRAN	generic	
2	carbamazepine	-	CARBATROL		
2	carbamazepine	-	TEGRETOL		
2	carbamazepine er	-	TEGRETOL XR		
2	diazepam	-	DIASTAT		
2	ethosuximide	-	ZARONTIN		
2	ethotoin	-	PEGANONE		
2	felbamate	-	FELBATOL		
2	gabapentin	-	NEURONTIN SOLUTION		
2	lamotrigine	-	LAMICTAL CHEWABLE DISPERSABLE 2mg		
2	lamotrigine er	-	LAMICTAL XR		
2	methsuximide	-	CELONTIN		
2	phenacemide	-	PHENURONE		
2	phenytoin	-	DILANTIN		
2	phenytoin	-	PHENYTEK		
2	phenytoin chewable	-	DILANTIN INFATABS		
2	pregabalin	-	LYRICA		
2	rufinamide	-	BANZEL		
2	tiagabine	-	GABITRIL		
3	carbamazepine er	-	EQUETRO		carbamazepine er
3	divalproex	-	DEPAKOTE SPRINKLES		divalproex tablets, valproic acid
3	gabapentin	-	GABARONE		gabapentin
3	lacosamide	-	VIMPAT		
3	lamotrigine odt	-	LAMICTAL ODT		lamotrigine
3	levetiracetam er	-	KEPPRA XR		levetiracetam
3	oxcarbazepine	-	TRILEPTAL SUSPENSION		oxcarbazepine tablets
3	valproic acid er	-	STAVZOR		divalproex, divalproex er, valproic acid
3	vigabatrin	-	SABRIL		
<b>TRICYCLIC ANTIDEPRESSANTS</b>					
1	amitriptyline	-	ELAVIL	generic	
1	amitriptyline/chlordiazepoxide	-	LIMBITROL 12.5mg/5mg	generic	
1	clomipramine	-	ANAFRANIL	generic	
1	desipramine	-	NORPRAMIN	generic	
1	doxepin	-	SINEQUAN	generic	
1	imipramine	-	TOFRANIL	generic	
1	nortriptyline	-	AVENTYL, PAMELOR	generic	
1	protriptyline	-	VIVACTIL	generic	
1	trazodone	-	DESYREL	generic	
2	amoxapine	-	ASENDIN		
2	imipramine	-	TOFRANIL PM		
2	maprotiline	-	LUDIOMIL		
2	trimipramine	-	SURMONTIL		
3	amitriptyline/chlordiazepoxide	-	LIMBITROL 25mg/10mg		amitriptyline/chlordiazepoxide
3	amitriptyline/perphenazine	-	ETRAFON, ETRAFON FORTE, TRIAVIL		amitriptyline, perphenazine
<b>SSRI ANTIDEPRESSANTS</b>					
1	citalopram	-	CELEXA	generic	QUANTITY LIMIT, Generic available for \$0 copay
1	fluoxetine capsules	-	PROZAC	generic	QUANTITY LIMIT, Generic Celexa available for \$0 copayment
1	fluvoxamine	-	LUVOX	generic	QUANTITY LIMIT, Generic Celexa available for \$0 copayment
1	paroxetine hydrochloride	-	PAXIL	generic	QUANTITY LIMIT, Generic Celexa available for \$0 copayment
1	paroxetine hydrochloride er	-	PAXIL CR	generic	QUANTITY LIMIT, Some strengths available as generic, Generic Celexa available for \$0 copayment
1	sertraline	-	ZOLOFT	generic	QUANTITY LIMIT, Generic Celexa available for \$0 copayment
3	escitalopram	-	LEXAPRO		QUANTITY LIMIT, Generic Celexa available for \$0
3	fluoxetine er	-	PROZAC ONCE WEEKLY		QUANTITY LIMIT, Generic Celexa available for \$0 copayment, citalopram, fluoxetine, paroxetine, sertraline
3	fluoxetine tablets	-	SARAFEM		QUANTITY LIMIT, Generic Celexa available for \$0 copayment, citalopram, fluoxetine, paroxetine, sertraline
3	fluvoxamine	-	LUVOX CR		QUANTITY LIMIT, Generic Celexa available for \$0 copayment, fluvoxamine
3	paroxetine hydrochloride	-	PAXIL CR 37.5mg		QUANTITY LIMIT, Generic Celexa available for \$0 copayment, citalopram, fluoxetine, paroxetine, sertraline
3	paroxetine mesylate	-	PEXEVA		QUANTITY LIMIT, Generic Celexa available for \$0 copayment, citalopram, fluoxetine, paroxetine, sertraline
<b>OTHER ANTIDEPRESSANTS</b>					
1	bupropion	-	WELLBUTRIN	generic	PA REQUIRED, QUANTITY LIMIT
1	bupropion er	-	WELLBUTRIN SR	generic	PA REQUIRED, QUANTITY LIMIT
1	bupropion er	-	WELLBUTRIN XL	generic	PA REQUIRED, QUANTITY LIMIT
1	mirtazapine	-	REMERON	generic	
1	mirtazapine	-	REMERON SOLTAB	generic	
1	venlafaxine	-	EFFEXOR	generic	

Tier	Generic Name	-	Reference Name	Generic Status	Preferred Alternatives / Comments
<b>OTHER ANTIDEPRESSANTS (cont.)</b>					
2	desvenlafaxine	-	PRISTIQ		
2	duloxetine	-	CYMBALTA		
2	venlafaxine er	-	VENLAFAXINE ER		
3	venlafaxine er	-	EFFEXOR XR		
3	bupropion er	-	APLENZIN		bupropion er
3	nefazodone	-	SERZONE		
<b>MAO INHIBITORS</b>					
1	tranylcypromine	-	PARNATE	generic	
2	phenelzine	-	NARDIL		
3	isocarboxazid	-	MARPLAN		tranylcypromine, Nardil
3	selegiline transdermal	-	EMSAM		tranylcypromine, Nardil
<b>ANTIVERTIGO AND ANTIEMETIC AGENTS</b>					
1	dronabinol	-	MARINOL	generic	
1	granisetron	-	KYTRIL	generic	
1	meclizine	-	ANTIVERT 12.5mg, 25mg, 32mg	generic	
1	ondansetron	-	ZOFRAN	generic	
1	prochlorperazine	-	COMPAZINE	generic	
1	promethazine	-	PHENERGAN	generic	
1	trimethobenzamide	-	TIGAN	generic	
2	aprepitant	-	EMEND		
2	dolasetron	-	ANZEMET		
2	scopolamine transdermal	-	TRANSDERM SCOP		
3	granisetron transdermal	-	SANCUSO		granisetron, ondansetron
3	meclizine	-	ANTIVERT 50mg		meclizine, prochlorperazine, promethazine
3	nabilone	-	CESAMET		dronabinol
<b>ANTIPARKINSON AGENTS</b>					
1	benztropine	-	COGENTIN	generic	
1	bromocriptine mesylate	-	PARLODEL	generic	
1	carbidopa/levodopa	-	PARCOPA	generic	
1	carbidopa/levodopa	-	SINEMET/CR	generic	
1	ropinirole	-	REQUIP	generic	
1	selegiline	-	ELDEPRYL CAPSULES	generic	
1	trihexyphenidyl	-	ARTANE	generic	
2	carbidopa	-	LODOSYN		
2	entacapone	-	COMTAN		
2	pramipexole	-	MIRAPEX		
2	rasagiline mesylate	-	AZILECT		
2	ropinirole er	-	REQUIP XL		
3	carbidopa/levodopa/entacapone	-	STALEVO		carbidopa/levodopa, Comtan
3	levodopa	-	LARODOPA		carbidopa/levodopa
3	selegiline	-	ELDEPRYL TABLETS		selegiline capsules
3	selegiline odt	-	ZELAPAR		selegiline capsules
3	tolcapone	-	TASMAR		Comtan
4	apomorphine	-	APOKYN		PA REQUIRED - LIMITED DISTRIBUTION DRUG
<b>ANTIPSYCHOTICS</b>					
1	chlorpromazine	-	THORAZINE	generic	
1	clozapine	-	CLOZARIL 25mg, 50mg, 100mg	generic	
1	fluphenazine	-	PERMITIL, PROLIXIN	generic	
1	haloperidol	-	HALDOL	generic	
1	loxapine	-	LOXITANE	generic	
1	perphenazine	-	TRILAFON	generic	
1	risperidone	-	RISPERDAL	generic	
1	risperidone	-	RISPERDAL M-TAB 0.5mg, 2mg, 3mg, 4mg	generic	
1	thioridazine	-	MELLARIL, MELLARIL-S	generic	
1	thiothixene	-	NAVANE 1mg, 2mg, 5mg, 10mg CAPSULES	generic	
1	trifluoperazine	-	STELAZINE	generic	
2	clozapine	-	CLOZARIL 200mg		
2	fluphenazine	-	PROLIXIN 2.5mg/5ml ELIXIR, 5mg/ml CONCENTRATE		
2	molindone	-	MOBAN		
2	olanzapine	-	ZYPREXA		
2	olanzapine odt	-	ZYPREXA ZYDIS		
2	pimozide	-	ORAP		
2	quetiapine	-	SEROQUEL		
2	quetiapine er	-	SEROQUEL XR		
2	ziprasidone	-	GEODON		
3	aripirazole	-	ABILIFY, ABILIFY DISCMELT		PA REQUIRED, risperidone, Seroquel, Seroquel XR, Zyprexa
3	asenapine	-	SAPHRIS		risperidone, Seroquel, Seroquel XR, Zyprexa
3	clozapine	-	FAZACLO		clozapine
3	olanzapine/fluoxetine	-	SYMBYAX		
3	paliperidone	-	INVEGA		risperidone
3	risperidone	-	RISPERDAL CONSTA		risperidone
3	risperidone	-	RISPERDAL M-TAB 1mg		risperidone
3	risperidone odt	-	RISPERDAL 0.25mg ODT		risperidone
3	thiothixene	-	NAVANE 20mg CAPSULES		thiothixene

Tier	Generic Name	-	Reference Name	Generic Status	Preferred Alternatives / Comments
<b>CNS STIMULANTS FOR ATTENTION DEFICIT HYPERACTIVITY DISORDER</b>					
1	amphetamine/dextroamphetamine	-	ADDERALL	generic	PA > age 18
1	dexmethylphenidate	-	FOCALIN	generic	PA > age 18
1	dextroamphetamine	-	DEXEDRINE, DEXTROSTAT 5mg TABLET	generic	PA > age 18
1	methylphenidate	-	METHYLIN, RITALIN	generic	PA > age 18
1	methylphenidate er	-	METADATE ER	generic	PA > age 18
2	atomoxetine	-	STRATTERA		PA > age 18
2	lisdexamfetamine	-	VYVANSE		PA > age 18
2	methylphenidate	-	CONCERTA		PA > age 18
2	methylphenidate er	-	METADATE CD		PA > age 18
2	methylphenidate transdermal	-	DAYTRANA		PA > age 18
3	amphetamine/dextroamphetamine er	-	ADDERALL XR		PA > age 18, amphetamine/dextroamphetamine, methylphenidate ER, Concerta, Metadate CD, Vyvanse
3	dexmethylphenidate	-	FOCALIN XR		PA > age 18, amphetamine/dextroamphetamine, methylphenidate ER, Concerta, Metadate CD, Vyvanse
3	dextroamphetamine	-	DEXEDRINE 10mg TABLET		PA > age 18, dextroamphetamine
3	dextroamphetamine	-	PROCENTRA		PA > age 18, dextroamphetamine
3	guanfacine er	-	INTUNIV		PA > age 18, amphetamine/dextroamphetamine, methylphenidate ER, Concerta, Metadate CD, Strattera, Vyvanse
3	methamphetamine	-	DESOXYN		PA > age 18, dextroamphetamine
3	methylphenidate	-	METHYLIN 2.5mg, 5mg, 10mg, CHEWABLE TABLETS, SOLUTION		PA > age 18, methylphenidate
3	methylphenidate er	-	RITALIN LA		PA > age 18, methylphenidate er, Metadate CD
<b>AGENTS TO TREAT ALZHEIMER'S DISEASE</b>					
1	galantamine	-	RAZADYNE	generic	
1	galantamine er	-	RAZADYNE ER	generic	
2	donepezil	-	ARICEPT		
2	rivastigmine tartrate	-	EXELON		
3	memantine	-	NAMENDA		
3	tacrine	-	COGNEX		galantamine, Aricept, Exelon
<b>AGENTS TO TREAT MULTIPLE SCLEROSIS</b>					
4	glatiramer	-	COPAXONE		PA REQUIRED
4	interferon beta-1a	-	AVONEX		PA REQUIRED
4	interferon beta-1a	-	REBIF		PA REQUIRED
4	interferon beta-1b	-	BETASERON		PA REQUIRED
4	interferon beta-1b	-	EXTAVIA		PA REQUIRED
4	natalizumab	-	TYSABRI		PA REQUIRED - LIMITED DISTRIBUTION DRUG
<b>OTHER CNS / AUTONOMIC AGENTS</b>					
1	pyridostigmine	-	MESTINON	generic	
2	armodafinil	-	NUVIGIL		PA REQUIRED
2	modafinil	-	PROVIGIL		PA REQUIRED
2	neostigmine bromide	-	PROSTIGMIN		
2	pyridostigmine	-	MESTINON SYRUP		
2	pyridostigmine er	-	MESTINON TIMESPAN		
3	amibenonium chloride	-	MYTELEASE		
3	milnacipran	-	SAVELLA		gabapentin, Cymbalta, Lyrica
4	sodium oxybate	-	XYREM		PA REQUIRED - LIMITED DISTRIBUTION DRUG
4	tetrabenazine	-	XENAZINE		PA REQUIRED - LIMITED DISTRIBUTION DRUG
<b>BIOTECHNOLOGY AGENTS</b>					
4	interferon gamma-1b, recombinant	-	ACTIMMUNE		PA REQUIRED
4	rilonacept	-	ARCALYST		PA REQUIRED - LIMITED DISTRIBUTION DRUG
4	alefacept	-	AMEVIVE		PA REQUIRED
4	interferon alfa-n3	-	ALFERON N		PA REQUIRED
<b>DERMATOLOGICAL AGENTS</b>					
<b>TOPICAL ANESTHETICS</b>					
1	lidocaine	-	XYLOCAINE	generic	
1	lidocaine/prilocaine	-	EMLA	generic	
2	lidocaine patch	-	LIDODERM		
3	lidocaine/prilocaine	-	EMLA with TEGADERM		lidocaine/prilocaine
3	lidocaine/tetracaine	-	SYNERA		lidocaine/prilocaine
<b>ANTI-ACNE AGENTS</b>					
1	benzoyl peroxide gel	-	BENZAC, BREVOXYL	generic	
1	benzoyl peroxide lotion	-	TRIAZ	generic	
1	benzoyl peroxide pad	-	TRIAZ	generic	
1	benzoyl peroxide wash	-	BENZI, DESQUAM	generic	
1	benzoyl peroxide/urea	-	ZODERM CLEANSER, GEL, PADS	generic	
1	clindamycin phosphate	-	CLEOCIN T, CLINDA-DERM	generic	
1	clindamycin phosphate/benzoyl peroxide	-	BENZACLIN	generic	
1	erythromycin gel	-	EMGEL, ERYGEL	generic	
1	erythromycin pledgets	-	ERY PADS	generic	
1	erythromycin solution	-	A/T/S	generic	
1	erythromycin/benzoyl peroxide	-	BENZAMYCIN	generic	
1	isotretinoin	-	AMNESTEEM, CLARAVIS, SOTRET	generic	
1	isotretinoin	-	SOTRET	generic	
1	sulfacetamide/sulfur	-	CLENIA, PLEXION, ROSAC WASH, ROSULA, SULFACET-R	generic	
1	tretinoin	-	AVITA	generic	
1	tretinoin	-	RETIN-A	generic	PA REQUIRED > age 24
2	adapalene	-	DIFFERIN		

Tier	Generic Name	-	Reference Name	Generic Status	Preferred Alternatives / Comments
<b>ANTI-ACNE AGENTS (cont.)</b>					
2	azelaic acid	-	AZELEX		
2	benzoyl peroxide/clindamycin	-	DUAC		
2	benzoyl peroxide/urea	-	ZODERM 4.5% CREAM		
2	sulfacetamide/sulfur	-	ROSULA		
2	sulfacetamide/sulfur	-	ROSULA NS		
2	tretinoin	-	RETIN-A MICRO		PA REQUIRED > age 24
3	benzoyl peroxide cream	-	BENZASHAVE 5%		benzoyl peroxide
3	benzoyl peroxide foaming cloth	-	TRIAZ		benzoyl peroxide
3	benzoyl peroxide gel	-	CLINAC BPO 7%		benzoyl peroxide gel
3	benzoyl peroxide wash	-	BENZOYL PEROXIDE WASH 2.5%		benzoyl peroxide wash
3	benzoyl peroxide/hydrocortisone	-	VANOXIDE-HC		benzoyl peroxide, hydrocortisone
3	clindamycin	-	EVOCLIN FOAM		clindamycin phosphate
3	clindamycin phosphate/tretinoin	-	ZIANA		clindamycin phosphate, tretinoin
3	clindamycin phosphate/benzoyl peroxide	-	ACANYA GEL		clindamycin phosphate/benzoyl peroxide
3	erythromycin ointment	-	A/T/S		erythromycin gel, erythromycin solution
<b>TOPICAL ANTIBACTERIAL AGENTS</b>					
1	bacitracin	-	BACITRACIN	generic	
1	gentamicin	-	GARAMYCIN	generic	
1	mupirocin	-	BACTROBAN OINTMENT	generic	
1	nystatin	-	MYCOSTATIN	generic	
1	silver sulfadiazine	-	SILVADENE	generic	
3	mafenide	-	SULFAMYLON		silver sulfadiazine
3	mupirocin	-	BACTROBAN CREAM, NASAL, CENTANY		mupirocin ointment
3	retapamulin	-	ALTABAX		mupirocin ointment
<b>TOPICAL ANTIFUNGAL AGENTS</b>					
1	ciclopirox	-	LOPROX CREAM, GEL, LOTION, SUSPENSION	generic	
1	clotrimazole	-	LOTRIMIN, MYCELEX	generic	
1	econazole nitrate	-	SPECTAZOLE	generic	
1	ketoconazole	-	NIZORAL CREAM, SHAMPOO	generic	
1	miconazole	-	MONISTAT-DERM	generic	
2	butenafine	-	MENTAX		
2	sertaconazole	-	ERTACZO		
3	ciclopirox	-	PENLAC		itraconazole, terbinafine
3	ciclopirox	-	LOPROX SHAMPOO		ketoconazole shampoo
3	ketoconazole	-	EXTINA		ciclopirox, econazole, ketoconazole cream
3	ketoconazole	-	XOLEGEL		ciclopirox, econazole, ketoconazole cream
3	naftifine	-	NAFTIN		ciclopirox, econazole, ketoconazole cream
3	oxiconazole	-	OXISTAT		ciclopirox, econazole, ketoconazole cream
3	sulfoconazole	-	EXELDERM		ciclopirox, econazole, ketoconazole cream
<b>TOPICAL ANTIFUNGAL &amp; CORTICOSTEROID COMBINATIONS</b>					
1	clotrimazole/betamethasone	-	LOTRISONE	generic	
1	nystatin/triamcinolone	-	MYCOLOG	generic	
<b>TOPICAL ANTIVIRAL AGENTS</b>					
2	acyclovir	-	ZOVIRAX CREAM, OINTMENT		
3	penciclovir	-	DENAVIR		acyclovir
<b>KERATOLYTIC AGENTS</b>					
1	podofilox	-	CONDYLOX SOLUTION	generic	
2	podofilox	-	CONDYLOX GEL		
<b>TOPICAL ANTIPSORIASIS &amp; ANTI-ECZEMA AGENTS</b>					
1	calcipotriene	-	DOVONEX SOLUTION	generic	
1	sulfacetamide sodium	-	KLARON	generic	
2	anthralin	-	DRITHO-SCALP, PRORiatec		
2	calcipotriene	-	DOVONEX CREAM		
2	sulfacetamide sodium	-	CARMOL SCALP, SEB-PREV		
2	tazarotene	-	TAZORAC		
2	urea	-	KERALAC		
3	calcipotriene/betamethasone dipropionate	-	TACLONEX		betamethasone, calcipotriene, Dovonex
3	calcitriol	-	VECTICAL		calcipotriene, Dovonex
3	sulfacetamide sodium	-	OVACE		sulfacetamide sodium
<b>TOPICAL IMMUNOMODULATORS</b>					
1	tacrolimus	-	PROTOPIC	generic	
2	pimecrolimus	-	ELIDEL		
<b>TOPICAL CORTICOSTEROID AGENTS</b>					
1	aclometasone	-	ACLOVATE OINTMENT, CREAM	generic	
1	amcinonide	-	CYCLOCORT CREAM	generic	
1	betamethasone dipropionate	-	DIPROSONE, MAXIVATE	generic	
1	betamethasone dipropionate augmented	-	DIPROLENE, DIPROLENE AF	generic	
1	betamethasone valerate	-	VALISONE	generic	
1	clobetasol	-	TEMOVATE	generic	
1	desonide	-	DESOWEN, TRIDESILON	generic	
1	desoximetasone	-	TOPICORT, TOPICORT LP	generic	
1	diflorasone	-	FLORONE, FLORONE E, PSORCON E	generic	
1	fluocinolone acetonide	-	SYNALAR	generic	
1	fluocinonide	-	LIDEX, LIDEX E	generic	
1	fluticasone propionate	-	CUTIVATE	generic	
1	halobetasol	-	ULTRAVATE	generic	
1	hydrocortisone	-	HYTONE	generic	
1	hydrocortisone butyrate	-	LOCOID	generic	
1	hydrocortisone valerate	-	WESTCORT	generic	

Tier	Generic Name	-	Reference Name	Generic Status	Preferred Alternatives / Comments
<b>TOPICAL CORTICOSTEROID AGENTS (cont.)</b>					
1	mometasone	-	ELOCON OINTMENT, CREAM, LOTION	generic	
1	prednicarbate	-	DERMATOP	generic	
1	triamcinolone acetonide	-	KENALOG	generic	
2	clobetasol	-	CLOBEX		
2	fluocinolone	-	CAPEX SHAMPOO		
2	hydrocortisone butyrate	-	LOCROID LIPOCREAM		
3	amcinonide	-	CYCLOCORT LOTION, OINTMENT		amcinonide cream, betamethasone dipropionate augmented, diflorasone, fluocinolone
3	betamethasone valerate	-	LUXIQ		amcinonide cream, betamethasone dipropionate augmented, diflorasone, fluocinolone
3	clobetasol propionate	-	OLUX-E		betamethasone dipropionate augmented, clobetasol, diflorasone, halobetasol
3	clocortolone	-	CLODERM		betamethasone dipropionate, desoximetasone, fluocinolone acetonide, triamcinolone acetonide
3	desonide	-	DESONATE		aclometasone, fluocinolone acetonide, hydrocortisone
3	desonide	-	VERDESO		aclometasone, fluocinolone acetonide, hydrocortisone
3	fluocinolone acetonide	-	DERMA-SMOOTH, DERMA-SMOOTH FS		betamethasone dipropionate, desoximetasone, fluocinolone acetonide, triamcinolone acetonide
3	fluocinolone	-	VANOS		amcinonide cream, betamethasone dipropionate augmented, diflorasone, fluocinolone
3	flurandrenolide	-	CORDRAN		betamethasone dipropionate, desoximetasone, fluocinolone acetonide, triamcinolone acetonide
3	halcinonide	-	HALOG, HALOG E		amcinonide cream, betamethasone dipropionate augmented, diflorasone, fluocinolone
3	hydrocortisone probutate	-	PANDEL		betamethasone dipropionate, desoximetasone, fluocinolone acetonide, triamcinolone acetonide
3	triamcinolone acetonide	-	KENALOG AEROSOL		betamethasone dipropionate, desoximetasone, fluocinolone acetonide, triamcinolone acetonide
<b>TOPICAL CORTICOSTEROID COMBINATION AGENTS</b>					
1	clioquinol/hydrocortisone	-	HYSONE	generic	
1	hydrocortisone acetate/urea	-	CARMOL HC, U-CORT	generic	
1	iodoquinol/hydrocortisone	-	VYTON	generic	
2	pramoxine/hydrocortisone	-	EPIFOAM, PRAMOSONE		
3	iodoquinol/hydrocortisone/aloe	-	ALCORTIN		iodoquinol/hydrocortisone
<b>TOPICAL OB/GYN ANTI-INFECTIVES</b>					
1	clindamycin phosphate	-	CLEOCIN VAGINAL CREAM	generic	
1	metronidazole	-	METROGEL-VAGINAL	generic	
2	clindamycin phosphate	-	CLINDESSE		
2	metronidazole	-	VANAZOLE		
2	sulfanilamide	-	AVC		
3	clindamycin phosphate	-	CLEOCIN VAGINAL SUPPOSITORY		clindamycin phosphate vaginal cream, Clindesse
<b>TOPICAL VAGINAL ANTIFUNGALS</b>					
1	clotrimazole	-	GYNE-LOTRMIN, MYCELEX	generic	
1	miconazole nitrate	-	MONISTAT 7	generic	
1	terconazole	-	TERAZOL 3 SUPP	generic	
1	terconazole	-	TERAZOL 3, TERAZOL 7 CREAM	generic	
2	buconazole nitrate	-	GYNAZOLE-1		
2	nystatin	-	NYSTATIN VAGINAL TABLETS		
3	miconazole nitrate	-	MICONAZOLE-3		miconazole nitrate, terconazole
3	miconazole nitrate	-	MONISTAT 1 COMBINATION PACK		miconazole nitrate, terconazole
<b>TOPICAL RECTAL AGENTS</b>					
1	hydrocortisone	-	ANUSOL-HC	generic	
1	hydrocortisone	-	PROCTOCORT HC, CORTENEMA	generic	
1	hydrocortisone/pramoxine	-	ANALPRAM-HC	generic	
2	hydrocortisone	-	ANUSOL-HC		
2	hydrocortisone	-	CORTIFOAM		
2	hydrocortisone/lidocaine	-	ANAMANTLE HC, ANAMANTLE HC FORTE		
2	hydrocortisone/pramoxine	-	ANALPRAM-HC		
2	hydrocortisone/pramoxine	-	PROCTOFOAM-HC		
<b>TOPICAL NON-STEROIDAL ANTI-INFLAMMATORY AGENTS</b>					
2	diclofenac gel	-	SOLARAZE GEL 3%		
3	diclofenac gel	-	VOLTAREN GEL 1%		
3	diclofenac patch	-	FLECTOR PATCH		
<b>OTHER DERMATOLOGICAL AGENTS</b>					
1	aluminum chloride hexahydrate	-	DRYSOL	generic	
1	ammonium lactate	-	LAC-HYDRIN	generic	
1	doxepin	-	ZONALON	generic	
1	fluorouracil	-	EFUDEX	generic	
1	hyaluronate sodium	-	HYLIRA	generic	
1	hydroquinone	-	ELDOQUIN FORTE	generic	
1	lactic acid	-	LACTINOL	generic	
1	lactic acid/vitamin e	-	LACTINOL-E	generic	
1	lindane	-	KWELL	generic	
1	metronidazole	-	METROCREAM	generic	
1	metronidazole	-	METROLOTION	generic	
1	permethrin	-	ELIMITE	generic	
1	trypsin/balsam peru/castor oil	-	GRANULEX	generic	
1	urea	-	CARMOL, UMECTA	generic	
2	alitretinoin	-	PANRETIN		

Tier	Generic Name	-	Reference Name	Generic Status	Preferred Alternatives / Comments
<b>OTHER DERMATOLOGICAL AGENTS (cont.)</b>					
2	azelaic acid	-	FINACEA		
2	azelaic acid	-	FINACEA PLUS		
2	becaplermin	-	REGRANEX		
2	benzyl alcohol	-	ULESFIA		
2	crotamiton	-	EURAX		
2	fluorouracil	-	CARAC, FLUOROPLEX		
2	imiquimod	-	ALDARA		
2	malathion	-	OVIDE		
2	metronidazole	-	METROGEL		
3	aluminum chloride	-	XERAC AC		
3	collagenase	-	COLLAGENASE SANTYL		
3	emollient cream	-	MIMYX		
3	mequinol/tretinoin	-	SOLAGE		
3	metronidazole	-	NORITATE		metronidazole cream, metronidazole lotion
3	miconazole/zinc oxide/white petrolatum	-	VUSION		
3	sinecatechins	-	VEREGEN		
<b>EAR, NOSE &amp; THROAT AGENTS</b>					
<b>NASAL CORTICOSTEROIDS</b>					
1	flunisolide	-	NASAREL	generic	
1	fluticasone propionate	-	FLONASE	generic	
2	budesonide	-	RHINOCORT AQUA		
2	fluticasone furoate	-	VERAMYST		
2	mometasone	-	NASONEX		
2	triamcinolone	-	NASACORT AQ		
3	beclomethasone	-	BECONASE AQ		flunisolide, fluticasone propionate, Nasonex, Rhinocort Aqua, Veramyst
3	ciclesonide	-	OMNARIS		flunisolide, fluticasone propionate, Nasonex, Rhinocort Aqua, Veramyst
<b>AGENTS AFFECTING THE EAR</b>					
1	acetic acid/aluminum acetate	-	BOROFAIR OTIC, OTIC DOMEORO	generic	
1	acetic acid/antipyrine/benzocaine	-	AURALGAN	generic	
1	acetic acid/hydrocortisone	-	VOSOL HC	generic	
1	hydrocortisone/pramoxine/chloroxylenol	-	CORTANE-B	generic	
1	neomycin sulfate/polymyxin/hydrocortisone	-	CORTISPORIN	generic	
1	neomycin sulfate/polymyxin/hydrocortisone	-	PEDIOTIC	generic	
1	ofloxacin	-	FLOXIN OTIC	generic	
2	acetic acid/polycosanol/ trolamine polypeptide	-	CERUMENEX		
2	ciprofloxacin/dexamethasone	-	CIPRODEX		
2	ciprofloxacin/hydrocortisone	-	CIPRO HC		
3	hydrocortisone/neomycin sulfate	-	COLY-MYCIN S		neomycin sulfate/polymyxin/hydrocortisone
3	neomycin/colistin/hydrocortisone/thonzonium	-	CORTISPORIN TC		neomycin sulfate/polymyxin/hydrocortisone
<b>AGENTS AFFECTING THE NOSE</b>					
1	ipratropium	-	ATROVENT	generic	
2	azelastine	-	ASTELIN		
2	azelastine	-	ASTEPRO		
3	olopatadine	-	PATANASE		ipratropium, Astelin, Astepro
<b>AGENTS AFFECTING THE MOUTH</b>					
1	pilocarpine	-	SALAGEN	generic	
1	triamcinolone dental paste	-	KENALOG IN ORABASE	generic	
2	cevimeline	-	EVOXAC		
3	amlexanox	-	APHTHASOL		
<b>ENDOCRINE MEDICATIONS</b>					
<b>ANTIDIABETIC AGENTS - BIGUANIDES</b>					
1	metformin	-	GLUCOPHAGE	generic	
1	metformin er	-	GLUCOPHAGE XR	generic	
3	metformin	-	FORTAMET		metformin, metformin er
3	metformin	-	GLUMETZA		metformin, metformin er
3	metformin	-	RIOMET		metformin, metformin er
<b>ANTIDIABETIC AGENTS - SULFONYLUREAS</b>					
1	chlorpropamide	-	DIABENESE	generic	
1	glimepiride	-	AMARYL	generic	
1	glipizide	-	GLUCOTROL	generic	
1	glipizide er	-	GLUCOTROL XL	generic	
1	glyburide	-	DIABETA, GLYNASE, MICRONASE	generic	
3	glyburide	-	GLYCRON 4.5mg		glimepiride, glipizide, glipizide er, glyburide
3	tolazamide	-	TOLINASE		glimepiride, glipizide, glipizide er
3	tolbutamide	-	ORINASE		glimepiride, glipizide, glipizide er
<b>ANTIDIABETIC AGENTS - THIAZOLIDINEDIONES</b>					
2	pioglitazone	-	ACTOS		
2	rosiglitazone	-	AVANDIA		
<b>ANTIDIABETIC AGENTS - DPP-IV INHIBITORS</b>					
2	saxagliptin	-	ONGLYZA		
2	sitagliptin	-	JANUVIA		
<b>ANTIDIABETIC AGENTS - COMBINATIONS</b>					
1	glipizide/metformin	-	METAGLIP	generic	
1	glyburide/metformin	-	GLUCOVANCE	generic	
2	pioglitazone/glimepiride	-	DUETACT		
2	pioglitazone/metformin	-	ACTOPLUS MET		
2	repaglinide/metformin	-	PRANDIMET		

Tier	Generic Name	Reference Name	Generic Status	Preferred Alternatives / Comments
<b>ANTI-DIABETIC AGENTS - COMBINATIONS (cont.)</b>				
2	rosiglitazone/glimepiride	AVANDARYL		
2	rosiglitazone/metformin	AVANDAMET		
2	sitagliptin/metformin	JANUMET		
<b>ANTI-DIABETIC AGENTS - OTHERS</b>				
1	acarbose	PRECOSE	generic	
1	nateglinide	STARLIX	generic	
2	exenatide	BYETTA		
2	migliolol	GLYSET		
2	pramlintide	SYMLIN		
2	repaglinide	PRANDIN		
<b>DIABETIC AGENTS - OTHER</b>				
2	glucagon	GLUCAGON		QUANTITY LIMIT
<b>INSULIN</b>				
2	insulin detemir	LEVEMIR		
2	insulin glulisine	APIDRA		
2	insulin, glargine	LANTUS		
2	insulin, human	HUMULIN, HUMULIN PEN		
2	insulin, human aspart	NOVOLOG, NOVOLOG PENFILL		
2	insulin, human aspart & protamine	NOVOLOG MIX, NOVOLOG MIX PENFILL		
2	insulin, human lispro	HUMALOG, HUMALOG PEN		
2	insulin, human lispro & protamine	HUMALOG MIX, HUMALOG MIX PEN		
3	insulin, human	NOVOLIN		Humulin, Humulin Pen
<b>BISPHOSPHONATES &amp; RELATED AGENTS</b>				
1	alendronate	FOSAMAX	generic	QUANTITY LIMIT
1	calcitonin-salmon nasal spray	FORTICAL, MIACALCIN	generic	QUANTITY LIMIT
1	etidronate	DIDRONEL	generic	QUANTITY LIMIT
2	alendronate	FOSAMAX plus D		QUANTITY LIMIT
2	alendronate	FOSAMAX SOLUTION		QUANTITY LIMIT
2	calcitonin injection	MIACALCIN INJECTION		
2	ibandronate	BONIVA		QUANTITY LIMIT
2	raloxifene	EVISTA		
3	risedronate	ACTONEL		QUANTITY LIMIT, alendronate, Boniva tablets
3	risedronate	ACTONEL with CALCIUM		QUANTITY LIMIT, alendronate, Boniva tablets
3	tiludronate	SKELID		QUANTITY LIMIT, alendronate, Boniva tablets
4	ibandronate	BONIVA INJECTION		PA REQUIRED, alendronate tablets, Boniva tablets
4	teriparatide	FORTEO		PA REQUIRED
4	zoledronic acid	RECLAST		PA REQUIRED, QUANTITY LIMIT, alendronate, Boniva tablets
<b>ADRENAL CORTICOSTEROID AGENTS</b>				
1	cortisone	CORTISONE	generic	
1	dexamethasone	DECADRON ELIXIR, 0.5mg, 0.75mg, 1.5mg, 4mg, 6mg TABLETS	generic	
1	fludrocortisone	FLORINEF	generic	
1	hydrocortisone	CORTEF	generic	
1	methylprednisolone	MEDROL	generic	
1	prednisolone	PRELONE SYRUP	generic	
1	prednisolone sodium phosphate	ORAPRED, PEDIAPRED	generic	
1	prednisone	DELTASONE 1mg, 2.5mg, 5mg, 10mg, 20mg	generic	
2	prednisone	DELTASONE CONCENTRATE, SOLUTION, 50mg TABLETS		
3	betamethasone	CELESTONE SOLUTION		dexamethasone elixir, dexamethasone tablets
3	dexamethasone	DECADRON SOLUTION, 1mg, 2mg TABLETS		dexamethasone elixir, dexamethasone tablets
3	dexamethasone	DEXPAK		dexamethasone tablets
3	dexamethasone drops	DEXAMETHASONE INTENSOL		dexamethasone elixir
3	prednisolone	MILLIPRED		prednisolone, prednisolone sodium phosphate
3	prednisolone	VERIPRED		prednisolone, prednisolone sodium phosphate
3	prednisolone sodium phosphate	ORAPRED ODT		prednisolone, prednisolone sodium phosphate
<b>THYROID AGENTS</b>				
1	levothyroxine	LEVOTHROID, LEVOXYL	generic	
1	thyroid	ARMOUR THYROID, WESTHROID 32.5mg, 65mg, 130mg, 195mg	generic	
2	levothyroxine	SYNTHROID		
2	thyroid	ARMOUR THYROID, NATURE THYROID 15mg, 16.25mg, 30mg, 60mg, 90mg, 120mg, 180mg, 240mg, 300mg		
3	levothyroxine	UNITHROID		levothyroxine
3	liothyronine	CYTOMEL		levothyroxine
3	liotrix	THYROLAR		levothyroxine
3	thyroid, pork	BIO-THROID		levothyroxine
<b>ANTI-THYROID AGENTS</b>				
1	methimazole	TAPAZOLE	generic	
1	propylthiouracil	PTU	generic	
<b>OTHER ENDOCRINE AGENTS / ENZYME REPLACEMENT</b>				
1	cabergoline	DOSTINEX	generic	
1	desmopressin	DDAVP	generic	
2	cinacalcet	SENSIPAR		
2	sacrosidase	SUCRAID		
2	tolvaptan	SAMSCA		

Tier	Generic Name	-	Reference Name	Generic Status	Preferred Alternatives / Comments
<b>OTHER ENDOCRINE AGENTS / ENZYME REPLACEMENT (cont.)</b>					
4	agalsidase beta	-	FABRAZYME		PA REQUIRED
4	alglucosidase alfa	-	MYOZYME		PA REQUIRED
4	galsulfase	-	NAGLAZYME		PA REQUIRED - LIMITED DISTRIBUTION DRUG
4	idursulfase	-	ELAPRASE		PA REQUIRED - LIMITED DISTRIBUTION DRUG
4	imiglucerase	-	CEREZYME		PA REQUIRED
4	laronidase	-	ALDURAZYME		PA REQUIRED
4	miglustat	-	ZAVESCA		PA REQUIRED - LIMITED DISTRIBUTION DRUG
4	sapropterin	-	KUVAN		PA REQUIRED - LIMITED DISTRIBUTION DRUG
<b>GROWTH HORMONES</b>					
4	mecasermin	-	INCRELEX		PA REQUIRED - LIMITED DISTRIBUTION DRUG
4	pegvisomert	-	SOMAVERT		PA REQUIRED - LIMITED DISTRIBUTION DRUG
4	somatropin	-	GENOTROPIN, GENOTROPIN MINIQUICK		PA REQUIRED
4	somatropin	-	HUMATROPE		PA REQUIRED
4	somatropin	-	NORDITROPIN		PA REQUIRED
4	somatropin	-	NUTROPIN, NUTROPIN AQ		PA REQUIRED
4	somatropin	-	OMNITROPE		PA REQUIRED
4	somatropin	-	SAIZEN		PA REQUIRED
4	somatropin	-	SEROSTIM		PA REQUIRED
4	somatropin	-	TEV-TROPIN		PA REQUIRED
4	somatropin	-	ZORBITIVE		PA REQUIRED - LIMITED DISTRIBUTION DRUG
<b>GASTROINTESTINAL MEDICATIONS</b>					
<b>ANTISPASMODICS / AGENTS AFFECTING GI MOTILITY</b>					
1	belladonna alkaloids/phenobarbital	-	DONNATAL	generic	
1	clidinium/chlordiazepoxide	-	LIBRAX	generic	
1	dicyclomine	-	BENTYL	generic	
1	diphenoxylate/atropine sulfate	-	LOMOTIL	generic	
1	glycopyrrolate	-	ROBINUL, ROBINUL FORTE	generic	
1	hyoscyamine	-	ANASPAZ, LEVSIN, LEVSIN SL, NULEV	generic	
1	hyoscyamine er	-	LEVSINEX	generic	
1	loperamide	-	IMODIUM	generic	
1	methscopolamine	-	PAMINE, PAMINE FORTE	generic	
1	metoclopramide	-	REGLAN	generic	
1	opium	-	PAREGORIC	generic	
2	alosetron	-	LOTROXEX		
2	hyoscyamine	-	LEVSIN, LEVSIN SL		
2	hyoscyamine	-	NULEV		
2	hyoscyamine er	-	LEVBID, LEVSINEX		
2	lubiprostone	-	AMITIZA		
2	methscopolamine	-	PAMINE, PAMINE FORTE		
2	methylnaltrexone	-	RELISTOR		
2	propantheline	-	PRO-BANTHINE		
2	atropine sulfate	-	SAL-TROPINE		hyoscyamine, hyoscyamine er
3	belladonna alkaloids/phenobarbital	-	DONNATAL EXTENTAB		belladonna alkaloids/phenobarbital, dicyclomine
3	difenoxin	-	MOTOFEN		diphenoxylate/atropine sulfate, loperamide
3	homatropine	-	HOMAPINE		hyoscyamine, hyoscyamine er
3	mepenzolate	-	CANTIL		
3	opium tincture	-	OPIUM TINCTURE		
<b>H-2 ANTAGONIST AGENTS</b>					
1	cimetidine	-	TAGAMET	generic	
1	famotidine	-	PEPCID	generic	
1	nizatidine	-	AXID	generic	
1	ranitidine	-	ZANTAC	generic	
3	famotidine	-	PEPCID SUSPENSION		famotidine tablets, nizatidine, ranitidine
3	nizatidine	-	AXID ORAL SOLUTION		famotidine tablets, nizatidine, ranitidine
3	ranitidine	-	ZANTAC EFFERDOSE		famotidine tablets, nizatidine, ranitidine
<b>PROTON PUMP INHIBITORS</b>					
1	lansoprazole	-	PREVACID 24HR	OTC	STEP THERAPY
1	omeprazole	-	PRILOSEC OTC	OTC	
1	omeprazole	-	PRILOSEC 20mg	generic	
1	omeprazole	-	PRILOSEC 40MG	generic	QUANTITY LIMIT
2	lansoprazole	-	PREVACID, PREVACID SUSPENSION	generic	STEP THERAPY, QUANTITY LIMIT
Excl	rabeprazole sodium	-	ACIPHEX		EXCLUDED BY PLAN, omeprazole, Prilosec OTC, Prevacid 24HR
Excl	esomeprazole	-	NEXIUM		EXCLUDED BY PLAN, omeprazole, Prilosec OTC, Prevacid 24HR
Excl	omeprazole	-	PRILOSEC 40MG		EXCLUDED BY PLAN, omeprazole, Prilosec OTC, Prevacid 24HR
Excl	pantoprazole sodium	-	PROTONIX		EXCLUDED BY PLAN, omeprazole, Prilosec OTC, Prevacid 24HR
Excl	omeprazole	-	ZEGERID		EXCLUDED BY PLAN, omeprazole, Prilosec OTC, Prevacid 24HR
<b>BOWEL PREPARATION AGENTS</b>					
1	polyethylene glycol/electrolyte solution	-	COLYTE, GOLYTELY, NULYTELY	generic	
2	bisacodyl/polyethylene glycol/electrolyte solution	-	HALFLYTELY		
3	polyethylene glycol/electrolyte solution	-	MOVIPREP		polyethylene glycol/electrolyte solution
3	polyethylene glycol/electrolyte solution	-	TRILYTE		polyethylene glycol/electrolyte solution
3	sodium phosphate monobasic monohydrate/sodium phosphate dibasic	-	OSMOPREP		polyethylene glycol/electrolyte solution
3	sodium phosphate monobasic monohydrate/sodium phosphate dibasic	-	VISICOL		polyethylene glycol/electrolyte solution

Tier	Generic Name	-	Reference Name	Generic Status	Preferred Alternatives / Comments
<b>DIGESTIVE ENZYMES</b>					
2	amylase/lipase/protease	-	CREON, PANCREASE, ULTRASE, ZENPEP		
<b>AGENTS TO TREAT CROHN'S DISEASE &amp; ULCERATIVE COLITIS</b>					
1	balsalazide	-	COLAZAL	generic	
1	mesalamine enema	-	ROWASA	generic	
1	sulfasalazine	-	AZULFIDINE	generic	
2	budesonide	-	ENTOCORT EC		
2	mesalamine capsules er	-	PENTASA		
2	mesalamine suppositories	-	CANASA		
2	mesalamine tablets er	-	ASACOL		
2	mesalamine tablets er	-	LIALDA		
3	mesalamine capsules er	-	APRISO		Asacol, Lialda, Pentasa
3	olsalazine	-	DIPENTUM		Asacol, Lialda, Pentasa
<b>OTHER GASTROINTESTINAL AGENTS</b>					
1	lactulose	-	CEPHULAC	generic	
1	misoprostol	-	CYTOTEC	generic	
1	sucralfate	-	CARAFATE TABLETS	generic	
1	ursodiol	-	ACTIGALL, URSO, URSO FORTE	generic	
2	bismuth/metronidazole/tetracycline	-	PYLERA		
2	cromolyn sodium	-	GASTROCROM		
2	sucralfate	-	CARAFATE SUSPENSION		
3	bismuth/metronidazole/tetracycline	-	HELIDAC		
3	lactulose	-	KRISTALOSE		lactulose
3	naproxen/lansoprazole	-	PREVACID NAPRAPAC		lansoprazole, naproxen
<b>IMMUNOLOGICALS</b>					
4	abatacept	-	ORENCIA		PA REQUIRED - LIMITED DISTRIBUTION DRUG
4	adalimumab	-	HUMIRA		PA REQUIRED
4	anakinra	-	KINERET		PA REQUIRED, Cimzia, Enbrel, Humira
4	certolizumab	-	CIMZIA		PA REQUIRED - LIMITED DISTRIBUTION DRUG
4	etanercept	-	ENBREL		PA REQUIRED
4	infliximab	-	REMICADE		PA REQUIRED
4	golimumab	-	SIMPONI		PA REQUIRED, Cimzia, Enbrel, Humira
<b>MUSCULOSKELETAL MEDICATIONS</b>					
<b>SALICYLATES &amp; RELATED AGENTS</b>					
1	choline/magnesium salicylate	-	TRILISATE	generic	
1	diflunisal	-	DOLOBID	generic	
1	salsalate	-	DISALCID, SALFLEX	generic	
<b>NON-STEROIDAL ANTI-INFLAMMATORY AGENTS</b>					
1	diclofenac potassium	-	CATAFLAM	generic	
1	diclofenac sodium	-	VOLTAREN 50mg, 75mg	generic	
1	diclofenac sodium er	-	VOLTAREN XR	generic	
1	etodolac	-	LODINE	generic	
1	etodolac er	-	LODINE XL	generic	
1	fenoprofen	-	NALFON 600MG	generic	
1	flurbiprofen	-	ANSAID	generic	
1	ibuprofen	-	MOTRIN	generic	
1	indomethacin	-	INDOCIN	generic	
1	indomethacin er	-	INDOCIN SR	generic	
1	ketoprofen	-	ORUDIS	generic	
1	ketorolac	-	TORADOL	generic	
1	meloxicam	-	MOBIC	generic	
1	nabumetone	-	RELAFEN	generic	
1	naproxen	-	NAPROSYN	generic	
1	naproxen er	-	EC-NAPROSYN	generic	
1	naproxen sodium	-	ANAPROX, ANAPROX DS	generic	
1	oxaprozin	-	DAYPRO	generic	
1	piroxicam	-	FELDENE	generic	
1	sulindac	-	CLINORIL	generic	
1	tolmetin	-	TOLECTIN 400mg	generic	
2	celecoxib	-	CELEBREX		
3	diclofenac potassium	-	ZIPSOR		diclofenac potassium
3	diclofenac sodium	-	VOLTAREN 25mg		diclofenac sodium
3	diclofenac sodium/misoprostol	-	ARTHROTEC		diclofenac sodium, misoprostol
3	fenoprofen	-	NALFON 200mg		fenoprofen, ibuprofen, naproxen
3	indomethacin	-	INDOCIN SUPPOSITORIES, SUSPENSION		indomethacin, indomethacin er
3	ketoprofen er	-	ORUVAIL		ketoprofen, ibuprofen, naproxen
3	meclofenamate	-	MECLOMEN		ibuprofen, meloxicam, naproxen
3	mefenamic acid	-	PONSTEL		ibuprofen, meloxicam, naproxen
3	meloxicam	-	MOBIC SUSPENSION		meloxicam tablets
3	naproxen er	-	NAPRELAN		naproxen er
3	tolmetin	-	TOLECTIN 200mg, 600mg		ibuprofen, naproxen, tolmetin
<b>ARTHRITIS AGENTS, OTHER</b>					
1	gold sodium thiomalate	-	MYOCHRYSSINE	generic	
4	hyaluronic acid	-	SYNVISC		PA REQUIRED
4	hyaluronic acid	-	EUFLEXXA, HYALGAN, ORTHOVISC, SUPARTZ		PA REQUIRED, Synvisc

Tier	Generic Name	-	Reference Name	Generic Status	Preferred Alternatives / Comments
<b>GOUT AGENTS</b>					
1	allopurinol	-	ZYLOPRIM	generic	
1	colchicine	-	COLCHICINE	generic	
1	colchicine & probenecid	-	COL-BENEMID	generic	
1	probenecid	-	BENEMID	generic	
3	febuxostat	-	ULORIC		allopurinol
<b>SKELETAL MUSCLE AGENTS</b>					
1	baclofen	-	LIORESAL	generic	
1	carisoprodol	-	SOMA	generic	
1	carisoprodol/aspirin	-	SOMA COMPOUND	generic	
1	chlorzoxazone	-	PARAFON FORTE DSC	generic	
1	cyclobenzaprine	-	FLEXERIL	generic	
1	dantrolene	-	DANTRIUM	generic	
1	methocarbamol	-	ROBAXIN	generic	
1	orphenadrine	-	NORFLEX	generic	
1	orphenadrine/aspirin/caffeine	-	NORGESIC	generic	
1	tizanidine	-	ZANAFLEX TABLETS	generic	
2	metaxalone	-	SKELAXIN		
2	riluzole	-	RILUTEK		
3	carisoprodol	-	SOMA 250mg		baclofen, carisoprodol, cyclobenzaprine
3	cyclobenzaprine	-	FEXMID		baclofen, carisoprodol, cyclobenzaprine
3	cyclobenzaprine er	-	AMRIX		baclofen, carisoprodol, cyclobenzaprine
3	tizanidine	-	ZANAFLEX CAPSULES		tizanidine tablets
<b>NUTRITION &amp; ELECTROLYTE AGENTS</b>					
<b>VITAMINS, MINERALS &amp; RELATED AGENTS</b>					
1	calcitriol	-	ROCALTROL	generic	
1	cyanocobalamin injection	-	VITAMIN B-12	generic	
1	ergocalciferol	-	DRISDOL	generic	
1	folic acid	-	FOLVITE	generic	
1	levocarnitine	-	CARNITOR	generic	
1	multivitamins w/fluoride	-	POLY-VI-FLOR	generic	
1	multivitamins w/fluoride & iron	-	POLY-VI-FLOR with IRON	generic	
1	polysaccharide iron complex	-	NIFEREX	generic	
1	triple vitamins w/fluoride	-	TRI-VI-FLOR	generic	
1	triple vitamins w/fluoride & iron	-	TRI-VI-FLOR with IRON	generic	
2	doxercalciferol	-	HECTOROL		
2	iron dextran	-	DEXFERRUM, INFED		
2	iron/vitamins b12 & c w/folic acid	-	REPLIVA 21/7		
2	paricalcitol	-	ZEMPLAR		
2	phytonadione	-	MEPHYTON		
3	cyanocobalamin nasal spray	-	CALOMIST, NASCOBAL		cyanocobalamin injection
3	iron sucrose	-	VENOFER		
3	sodium ferric gluconate complex	-	FERRLECIT		
3	zinc acetate	-	GALZIN		
<b>FLUORIDE PRODUCTS</b>					
1	sodium fluoride	-	KARDIUM, LURIDE	generic	
1	sodium fluoride	-	PHOS-FLUR	generic	
3	stannous fluoride	-	GEL-KAM		sodium fluoride
<b>POTASSIUM SUPPLEMENTS</b>					
1	potassium bicarbonate/citric acid	-	K-LYTE	generic	
1	potassium chloride liquid	-	KAY CIEL	generic	
1	potassium chloride powder	-	K-LOR, KLOR-CON	generic	
1	potassium chloride tablets	-	K-TAB, SLOW-K	generic	
3	potassium acetate/bicarbonate/citrate	-	TRI-K		potassium bicarbonate/citric acid
3	potassium bicarbonate/citric acid	-	EFFER-K		potassium bicarbonate/citric acid
3	potassium bicarbonate/potassium chloride/citric acid	-	K-LYTE CL 50		potassium bicarbonate/citric acid
3	potassium bicarbonate/potassium citrate/citric acid	-	K-LYTE DS		potassium bicarbonate/citric acid
3	potassium chloride capsules	-	MICRO-K		potassium chloride tablets, liquid
3	potassium chloride powder	-	KLOR-CON/25		potassium chloride powder, tablets, liquid
3	potassium gluconate	-	KAON		potassium chloride powder, tablets, liquid
<b>POTASSIUM-REMOVING RESINS</b>					
1	sodium polystyrene sulfonate	-	KAYEXELATE	generic	
<b>PHOSPHATE BINDERS</b>					
1	calcium acetate	-	PHOSLO	generic	
2	calcium acetate	-	PHOSLO		
2	lathanum carbonate	-	FOSRENOL		
2	sevelamer	-	RENAGEL		
2	sevelamer carbonate	-	REVELA		
3	calcium acetate	-	ELIPHOS		calcium acetate
<b>URINARY ALKINALYZERS</b>					
1	phosphorus	-	K PHOS NEUTRAL	generic	
1	sodium citrate/citric acid	-	BICITRA, CYTRA-2	generic	
2	phosphorus	-	K PHOS MF		
3	phosphorus	-	URO-KP-NEUTRAL		
3	sodium citrate/citric acid	-	CYTRA-3		sodium citrate/citric acid
3	sodium citrate/citric acid	-	ORACIT		sodium citrate/citric acid
3	sodium citrate/citric acid	-	TRICITRATES SOLUTION		sodium citrate/citric acid

Tier	Generic Name	-	Reference Name	Generic Status	Preferred Alternatives / Comments
<b>BLOOD MODIFIERS</b>					
<b>ANTIPLATELET AGENTS</b>					
1	cilostazol	-	PLETAL	generic	
1	dipyridamole	-	PERSANTINE	generic	
1	pentoxifylline	-	TRENTAL	generic	
1	ticlopidine	-	TICLID	generic	
2	aspirin/dipyridamole	-	AGGRENOX		
2	clopidogrel	-	PLAVIX		
2	prasugrel	-	EFFIENT		
<b>ANTICOAGULANTS &amp; RELATED AGENTS</b>					
1	heparin	-	HEPARIN	generic	
1	warfarin sodium	-	COUMADIN	generic	
2	warfarin sodium	-	COUMADIN		
4	dalteparin	-	FRAGMIN		NO PA REQ, AVAILABLE AT RETAIL PHARMACY
4	enoxaparin	-	LOVENOX		NO PA REQ, AVAILABLE AT RETAIL PHARMACY
4	fondaparinux	-	ARIXTRA		NO PA REQ, AVAILABLE AT RETAIL PHARMACY
4	tinzaparin	-	INNOHEP		NO PA REQ, AVAILABLE AT RETAIL PHARMACY
<b>HEMATOPOIETIC AGENTS</b>					
4	darbepoetin	-	ARANESP		PA REQUIRED
4	erythropoietin	-	PROCRIT		PA REQUIRED
4	erythropoietin	-	EPOGEN		PA REQUIRED
<b>HEMOSTATICS</b>					
1	aminocaproic acid	-	AMICAR 500mg TABLETS	generic	
2	aminocaproic acid	-	AMICAR 1000mg TABLETS		
4	antihemophilic factor VIII	-	ADVATE, COGENATE, HEMOFIL M, HELIXATE, KOATE-DVI, MONOCLATE-P, RECOMBINATE, REFACTO, XYNTHA		PA REQUIRED
4	antihemophilic factor/von willenbrand factor complex	-	ALPHANATE, HUMATE-P		PA REQUIRED
4	anti-inhibitor coagulant complex	-	FEIBA		PA REQUIRED
4	coagulation factor IX	-	ALPHANINE, MONONINE		PA REQUIRED
4	coagulation factor VIIa	-	NOVOSEVEN, NOVOSEVEN RT		PA REQUIRED
4	eltrombopag	-	PROMACTA		PA REQUIRED - LIMITED DISTRIBUTION DRUG
4	romiplostim	-	NPLATE		PA REQUIRED
<b>OBSTETRICAL &amp; GYNECOLOGICAL MEDICATIONS</b>					
<b>PRENATAL VITAMINS</b>					
All Prenatal Vitamins are on the Formulary					
<b>ANDROGEN AGENTS</b>					
1	danazol	-	DANAZOL	generic	PA REQUIRED
1	oxandrolone	-	OXANDRIN	generic	PA REQUIRED
1	testosterone cypionate	-	DELATESTRYL, DEPO-TESTOSTERONE	generic	PA REQUIRED
2	testosterone	-	ANDRODERM		PA REQUIRED
2	testosterone	-	ANDROGEL		PA REQUIRED
2	testosterone	-	TESTIM		PA REQUIRED
3	methyltestosterone	-	ANDROID, METHITEST		PA REQUIRED, testosterone
3	methyltestosterone	-	TESTRED		PA REQUIRED, testosterone
3	oxymetholone	-	ANADROL		PA REQUIRED
3	testosterone buccal	-	STRIANT		PA REQUIRED, testosterone
<b>ORAL ESTROGEN AGENTS</b>					
1	estradiol	-	ESTRACE	generic	
1	estropipate	-	OGEN, ORTHO-EST	generic	
2	estrogens, conjugated	-	PREMARIN		
2	estrogens, conjugated synthetic, a	-	CENESTIN		
2	estrogens, conjugated synthetic, b	-	ENJUVIA		
3	esterified estrogens	-	MENEST		estradiol, estropipate, Enjuvia, Menest, Premarin
3	estradiol	-	FEMTRACE		estradiol
3	estradiol	-	GYNODIOL 1.5mg		estradiol
<b>TRANSDERMAL ESTROGEN AGENTS</b>					
1	estradiol transdermal	-	CLIMARA	generic	
1	estradiol transdermal	-	ESTRADIOL TRANSDERMAL SYSTEM	generic	
2	estradiol transdermal	-	ESTRADERM		
2	estradiol transdermal	-	VIVELLE-DOT		
3	estradiol transdermal	-	ALORA		estradiol transdermal, Estraderm, Vivelle-Dot
3	estradiol transdermal	-	MENOSTAR		estradiol transdermal, Estraderm, Vivelle-Dot
<b>TOPICAL ESTROGEN PRODUCTS</b>					
2	estradiol gel	-	DIVIGEL		
2	estradiol spray	-	EVAMIST		
2	estradiol vaginal ring	-	ESTRING		QUANTITY LIMIT
2	estradiol vaginal tablets	-	VAGIFEM		
2	estrogens, conjugated vaginal cream	-	PREMARIN VAGINAL CREAM		
3	estradiol cream	-	ESTRACE VAGINAL CREAM		Divigel, Evamist, Premarin Vaginal Cream
3	estradiol emulsion	-	ESTRASORB		Divigel, Evamist, Premarin Vaginal Cream
3	estradiol gel	-	ELESTRIN, ESTROGEL		Divigel, Evamist, Premarin Vaginal Cream
3	estradiol vaginal ring	-	FEMRING		QUANTITY LIMIT, Estring
<b>ESTROGEN / PROGESTIN COMBINATION AGENTS</b>					
1	estradiol/norethindrone	-	ACTIVEVELLA 1-0.5mg	generic	
2	conjugated estrogen/medroxyprogesterone	-	PREMPHASE		
2	conjugated estrogen/medroxyprogesterone	-	PREMPRO		
2	estradiol/norethindrone	-	ACTIVEVELLA 0.5-0.1mg		
2	estradiol/norethindrone	-	COMBIPATCH		

Tier	Generic Name	-	Reference Name	Generic Status	Preferred Alternatives / Comments
<b>ESTROGEN / PROGESTIN COMBINATION AGENTS (cont.)</b>					
3	estradiol/drospirenone	-	ANGELIQ		estradiol/norethindrone, Premphase, Prempro
3	estradiol/levonorgestrel	-	CLIMARA PRO		estradiol/norethindrone, Premphase, Prempro
3	estradiol/norgestimate	-	PREFEST		estradiol/norethindrone, Premphase, Prempro
3	ethinyl estradiol/norethindrone	-	FEMHRT		estradiol/norethindrone, Premphase, Prempro
<b>PROGESTIN AGENTS</b>					
1	medroxyprogesterone	-	PROVERA	generic	
1	norethindrone	-	AYGESTIN	generic	
2	progesterone	-	PROMETRIUM		
2	progesterone vaginal gel	-	CRINONE, PROCHIEVE		
3	progesterone vaginal insert	-	ENDOMETRIN		Crinone, Prochieve, Prometrium
<b>CONTRACEPTIVE AGENTS</b>					
1	ethinyl estradiol/ norethindrone/ferrous fumarate	-	LOESTRIN, LOESTRIN FE	generic	
1	ethinyl estradiol/desogestrel	-	MIRCETTE	generic	
1	ethinyl estradiol/desogestrel	-	CYCLESSA	generic	
1	ethinyl estradiol/desogestrel	-	LO/OVRAL	generic	
1	ethinyl estradiol/desogestrel	-	ORTHO-CEPT, DESOGEN	generic	
1	ethinyl estradiol/ethynodiol diacetate	-	DEMULEN 1/35, ZOVIA 1/35	generic	
1	ethinyl estradiol/levonorgestrel	-	LEVLEN, NORDETTE	generic	
1	ethinyl estradiol/levonorgestrel	-	SEASONALE	generic	3x1 MONTH COPAYMENT APPLIES
1	ethinyl estradiol/levonorgestrel	-	TRI-LEVLEN, TRIPHASIL, TRIVORA	generic	
1	ethinyl estradiol/levonorgestrel	-	ALESSE, LEVLITE	generic	
1	ethinyl estradiol/norethindrone	-	BREVICON, MODICON	generic	
1	ethinyl estradiol/norethindrone	-	TRI-NORINYL	generic	
1	ethinyl estradiol/norethindrone	-	OVCON 35	generic	
1	ethinyl estradiol/norethindrone/ferrous fumarate	-	ESTROSTEP, ESTROSTEP FE	generic	
1	ethinyl estradiol/norgestimate	-	ORTHO CYCLEN	generic	
1	ethinyl estradiol/norgestimate	-	ORTHO TRI-CYCLEN	generic	
1	ethinyl estradiol/norgestimate	-	ORTHO TRI-CYCLEN LO	generic	
1	medroxyprogesterone acetate	-	DEPO-PROVERA	generic	
1	mestranol/norethindrone	-	ORTHO NOVUM, NORINYL	generic	
1	norethindrone	-	MICRONOR, NOR Q.D.	generic	
2	ethinyl estradiol/drospirenone	-	JOLESSA		
2	ethinyl estradiol/drospirenone	-	YAZ		
2	ethinyl estradiol/etonogestrel	-	NUVARING		QUANTITY LIMIT
2	ethinyl estradiol/levonorgestrel	-	LYBREL		
2	ethinyl-estradiol/levonorgestrel	-	SEASONIQUE		3x1 MONTH COPAYMENT APPLIES
2	medroxyprogesterone acetate	-	DEPO-PROVERA		3x1 MONTH COPAYMENT APPLIES
3	ethinyl estradiol/drospirenone	-	YASMIN		Jolessa, Yaz
3	ethinyl estradiol/ethynodiol diacetate	-	ZOVIA 1/50		ethinyl estradiol/ethynodiol diacetate
3	ethinyl estradiol/levonorgestrel	-	LOSEASONIQUE		3x1 MONTH COPAYMENT APPLIES, ethinyl estradiol/levonorgestrel
3	ethinyl estradiol/norelgestromin	-	ORTHO-EVRA		Jolessa, Lybrel, Seasonique, Yaz
3	ethinyl estradiol/norethindrone	-	OVCON 50		ethinyl estradiol/norethindrone
3	ethinyl estradiol/norethindrone acetate/ferrous fumarate	-	LOESTRIN 24 FE		Jolessa, Seasonique, Yaz
3	ethinyl estradiol/norethindrone chewable	-	FEMCON FE		ethinyl estradiol/norethindrone
3	ethinyl estradiol/norgestrel	-	OGESTREL		ethinyl estradiol/desogestrel
3	medroxyprogesterone acetate	-	DEPO-SUBQ PROVERA		3x1 MONTH COPAYMENT APPLIES, medroxyprogesterone acetate
3	mestranol/norethindrone	-	NECON 10/11		mestranol/norethindrone
<b>MISCELLANEOUS OB/GYN AGENTS</b>					
2	methylegonovine	-	METHERGINE		
2	nafarelin	-	SYNAREL		
<b>OPHTHALMIC MEDICATIONS</b>					
<b>OPHTHALMIC TOPICAL ANTI-INFECTIVE AGENTS</b>					
1	bacitracin/polymyxin b	-	POLYSPORIN	generic	
1	chloramphenicol	-	CHLOROMYCETIN	generic	
1	ciprofloxacin	-	CILOXAN SOLUTION	generic	
1	erythromycin	-	ILOTYCIN	generic	
1	gentamicin ophthalmic solution	-	GARAMYCIN, GENOPTIC	generic	
1	neomycin/bacitracin/polymyxin b	-	NEOSPORIN	generic	
1	neomycin/polymyxin b/gramicidin	-	AK-SPORE	generic	
1	ofloxacin	-	OCUFLOX	generic	
1	sulfacetamide sodium	-	BLEPH-10	generic	
1	tobramycin	-	TOBREX SOLUTION	generic	
1	trifluridine	-	VIROPTIC	generic	
2	bacitracin ophthalmic ointment	-	BACITRACIN OPHTHALMIC OINTMENT		
2	ciprofloxacin	-	CILOXAN OINTMENT		
2	gatifloxacin	-	ZYMAR		
2	gentamicin ophthalmic ointment	-	GARAMYCIN OPHTHALMIC OINTMENT		
2	levofloxacin	-	IQUIX		
2	levofloxacin	-	QUIXIN		
2	moxifloxacin	-	VIGAMOX		
2	natamycin	-	NATACYN		
2	tobramycin	-	TOBREX OINTMENT		
3	azithromycin	-	AZASITE		ciprofloxacin, erythromycin, ofloxacin
3	besifloxacin	-	BESIVANCE		ciprofloxacin, erythromycin, ofloxacin

Tier	Generic Name	-	Reference Name	Generic Status	Preferred Alternatives / Comments
<b>OPHTHALMIC CORTICOSTEROID AGENTS</b>					
1	dexamethasone sodium phosphate	-	DECADRON	generic	
1	fluorometholone	-	FML	generic	
1	prednisolone acetate	-	ECONOPRED PLUS, PRED FORTE	generic	
2	fluocinolone acetonide	-	RETISERT		
2	loteprednol	-	LOTEMAX		
2	loteprednol	-	ALREX		
2	prednisolone acetate	-	PRED MILD		
3	dexamethasone	-	MAXIDEX		dexamethasone sodium phosphate, prednisolone acetate
3	difluprednate	-	DUREZOL		dexamethasone sodium phosphate, prednisolone acetate
3	fluorometholone	-	FLAREX		dexamethasone sodium phosphate, prednisolone acetate
3	fluorometholone	-	FML FORTE, FML OINTMENT		dexamethasone sodium phosphate, prednisolone acetate
3	prednisolone sodium phosphate	-	INFLAMASE FORTE		dexamethasone sodium phosphate, prednisolone acetate
3	rimexolone	-	VEXOL		dexamethasone sodium phosphate, prednisolone acetate
<b>OPHTHALMIC ANTI-INFECTIVE /CORTICOSTEROID AGENTS</b>					
1	neomycin/bacitracin/polymyxin/hydrocortisone	-	CORTISPORIN	generic	
1	neomycin/polymyxin/dexamethasone	-	MAXITROL	generic	
1	polymyxin b/trimethoprim	-	POLYTRIM	generic	
1	sulfacetamide/prednisolone sodium phosphate	-	VASOCIDIN	generic	
1	tobramycin/dexamethasone	-	TOBRADEX	generic	
2	sulfacetamide/prednisolone acetate	-	BLEPHAMIDE		
2	tobramycin/loteprednol	-	ZYLET		
3	gentamicin/prednisolone	-	PRED-G		tobramycin/dexamethasone, Zylet
3	neomycin/polymyxin/prednisolone	-	POLY-PRED		neomycin/polymyxin/dexamethasone
<b>OPHTHALMIC ANTIHISTAMINES</b>					
otc	ketotifen fumarate	-	ALAWAY		
1	ketotifen fumarate	-	ZADITOR	generic	
1	azelastine	-	OPTIVAR	generic	
2	olopatadine	-	PATADAY		
2	olopatadine	-	PATANOL		
3	bepotastine	-	BEPREVE		ketotifen fumarate, azelastine, Pataday, Patanol
3	emedastine	-	EMADINE		ketotifen fumarate, azelastine, Pataday, Patanol
3	epinastine	-	ELESTAT		ketotifen fumarate, azelastine, Pataday, Patanol
<b>OPHTHALMIC MAST CELL STABILIZERS</b>					
1	cromolyn	-	CROLOM	generic	
2	pemirolast	-	ALAMAST		
3	lodoxamide	-	ALOMIDE		
3	nedocromil	-	ALOCRIL		cromolyn, Alamast
<b>OPHTHALMIC NON-STEROIDAL ANTI-INFLAMMATORY AGENTS</b>					
1	diclofenac	-	VOLTAREN	generic	
1	flurbiprofen	-	OCUFEN	generic	
3	bromfenac	-	XIBROM		diclofenac, flubiprofen
3	ketorolac	-	ACULAR, ACULAR LS, ACULAR PF		diclofenac, flubiprofen
3	ketorolac	-	ACUVAIL		diclofenac, flubiprofen
3	nepafenac	-	NEVANAC		diclofenac, flubiprofen
<b>GLAUCOMA AGENTS</b>					
1	acetazolamide	-	DIAMOX	generic	
1	acetazolamide er	-	DIAMOX SEQUELS	generic	
1	betaxolol	-	BETOPTIC	generic	
1	brimonidine	-	ALPHAGAN	generic	
1	brimonidine	-	ALPHAGAN P 0.15%	generic	
1	carteolol	-	OCUPRESS	generic	
1	dipivefrin	-	PROPINE	generic	
1	dorzolamide	-	TRUSOPT	generic	
1	dorzolamide/timolol	-	COSOPT	generic	
1	homatropine	-	ISOPTO HOMATROPINE	generic	
1	levobunolol	-	BETAGAN	generic	
1	metipranolol	-	OPTIPRANOLOL	generic	
1	pilocarpine	-	PILOCAR	generic	
1	timolol	-	TIMOPTIC, TIMOPTIC XE	generic	
2	betaxolol	-	BETOPTIC S		
2	bimatoprost	-	LUMIGAN		
2	brimonidine	-	ALPHAGAN P 0.1%		
2	brinzolamide	-	AZOPT		
2	carbachol	-	ISOPTO CARBACHOL		
2	echothiophate iodide	-	PHOSPHOLINE IODIDE		
2	latanoprost	-	XALATAN		
2	pilocarpine	-	PILOPINE H.S.		
2	timolol hemihydrate	-	BETIMOL		
2	travoprost	-	TRAVATAN, TRAVATAN Z		
3	apraclonidine	-	IOPIDINE		
3	brimonidine/timolol maleate	-	COMBIGAN		brimonidine, timolol
3	timolol maleate	-	ISTALOL		betaxolol, carteolol, levobunolol, timolol

Tier	Generic Name	-	Reference Name	Generic Status	Preferred Alternatives / Comments
<b>OTHER OPHTHALMIC AGENTS</b>					
1	atropine sulfate	-	ISOPTO ATROPINE	generic	
1	cyclopentolate	-	CYCLOGYL 1%	generic	
1	naphazoline	-	AK-CON	generic	
1	phenylephrine	-	AK-DILATE, MYDFRIN	generic	
1	tetracaine	-	TETCAINE	generic	
1	tropicamide	-	MYDRIACYL	generic	
2	cyclopentolate	-	CYCLOGYL 0.5%, 2%		
2	cyclosporine	-	RESTASIS		
2	hydroxypropyl cellulose	-	LACRISERT		
4	pegaptanib	-	MACUGEN		PA REQUIRED - LIMITED DISTRIBUTION DRUG
4	ranibizumab	-	LUCENTIS		PA REQUIRED - LIMITED DISTRIBUTION DRUG
<b>RESPIRATORY AGENTS</b>					
<b>BRONCHODILATORS - BETA AGONISTS</b>					
1	albuterol solution	-	ACCUNEB	generic	
1	albuterol tablets	-	PROVENTIL	generic	
1	albuterol tablets er	-	VOSPIRE ER	generic	
1	levalbuterol	-	XOPENEX	generic	
1	metaproterenol	-	ALUPENT NEBULIZER SOL, SYRUP	generic	QUANTITY LIMIT
2	albuterol inhaler	-	PROAIR HFA		
2	formoterol	-	FORADIL		QUANTITY LIMIT
2	formoterol	-	PERFOROMIST		QUANTITY LIMIT
2	levalbuterol	-	XOPENEX, XOPENEX HFA		
2	pirbuterol	-	MAXAIR AUTOHALER		QUANTITY LIMIT
2	salmeterol	-	SEREVENT DISKUS		QUANTITY LIMIT
3	albuterol inhaler	-	PROVENTIL HFA, VENTOLIN HFA		QUANTITY LIMIT, ProAir HFA
3	arformoterol	-	BROVANA		QUANTITY LIMIT, Perforomist
<b>BRONCHODILATORS - COMBINATIONS</b>					
1	ipratropium/albuterol solution	-	DUONEB	generic	QUANTITY LIMIT
2	budesonide/formoterol	-	SYMBICORT		QUANTITY LIMIT
2	fluticasone/salmeterol	-	ADVAIR		QUANTITY LIMIT
2	ipratropium/albuterol inhaler	-	COMBIVENT		QUANTITY LIMIT
<b>PULMONARY AGENTS - OTHER</b>					
1	acetylcysteine	-	MUCOMYST	generic	
1	cromolyn	-	INTAL	generic	QUANTITY LIMIT ON INHALER
1	ipratropium aerosol	-	ATROVENT	generic	
1	terbutaline sulfate	-	BRETHINE	generic	
1	theophylline er	-	THEO-24, THEOCHRON	generic	
2	aminophylline	-	AMINOPHYLLINE		
2	c1 inhibitor, human	-	CINRYZE		
2	deoxyribonuclease	-	PULMOZYME		
2	ephedrine sulfate	-	EPHEDRINE SULFATE		
2	epinephrine	-	EPIPEN, EPIPEN JR		QUANTITY LIMIT
2	epinephrine	-	TWINJECT		QUANTITY LIMIT
2	ipratropium	-	ATROVENT HFA		QUANTITY LIMIT
2	nedocromil	-	TILADE		QUANTITY LIMIT
2	theophylline	-	ELIXOPHYLLIN ELIXIR		
2	theophylline er	-	UNIPHYL		
2	tiotropium	-	SPIRIVA HANDIHALER		
3	dyphylline	-	LUFYLLIN		aminophylline, theophylline er
3	theophylline er	-	THEO-24		theophylline er
3	theophylline/pseudoephedrine/guaifenesin	-	BRONCOMAR-1		
4	omalizumab	-	XOLAIR		PA REQUIRED - LIMITED DISTRIBUTION DRUG
4	palivizumab	-	SYNAGIS		PA REQUIRED - LIMITED DISTRIBUTION DRUG
<b>PULMONARY CORTICOSTEROIDS</b>					
2	beclomethasone	-	QVAR		QUANTITY LIMIT
2	budesonide	-	PULMICORT FLEXHALER		QUANTITY LIMIT
2	budesonide	-	PULMICORT RESPULES		QUANTITY LIMIT
2	fluticasone	-	FLOVENT		QUANTITY LIMIT
2	mometasone	-	ASMANEX		
3	ciclesonide	-	ALVESCO		QUANTITY LIMIT, Asmanex, Flovent, Pulmicort, Qvar
3	flunisolide	-	AEROBID, AEROBID-M		QUANTITY LIMIT, Asmanex, Flovent, Pulmicort, Qvar
3	triamcinolone	-	AZMACORT		QUANTITY LIMIT, Asmanex, Flovent, Pulmicort, Qvar
<b>LEUKOTRIENE MODIFIERS</b>					
2	montelukast	-	SINGULAIR		PA > age 12
3	zafirlukast	-	ACCOLATE		PA > age 12, Singulair
3	zileuton	-	ZYFLO		PA > age 12, Singulair
3	zileuton er	-	ZYFLO CR		PA > age 12, Singulair
<b>COUGH &amp; COLD THERAPY</b>					
<b>ANTITUSSIVE COMBINATIONS</b>					
1	benzonatate	-	TESSALON PERLE	generic	
1	dextromethorphan/pseudoephedrine/brompheniramine	-	BROMFED DM	generic	
1	guaifenesin/codeine	-	ROBTIUSSIN AC	generic	
1	guaifenesin/codeine	-	TUSSI-ORGANIDIN/S NR	generic	
1	guaifenesin/dextromethorphan	-	DURATUSS/GP	generic	
1	hydrocodone/homatropine	-	HYCODAN	generic	
1	phenylephrine/brompheniramine	-	BROMFED/PD	generic	
2	hydrocodone/chlorpheniramine	-	TUSSICAPS		
2	hydrocodone/chlorpheniramine	-	TUSSIONEX		

Tier	Generic Name	-	Reference Name	Generic Status	Preferred Alternatives / Comments
<b>EXPECTORANT COMBINATIONS</b>					
1	guaifenesin	-	LIQUIBID	generic	
1	guaifenesin/phenylephrine	-	SINUVENT PE	generic	
1	guaifenesin/pseudoephedrine	-	MAXIFED-G	generic	
<b>ANTIHISTAMINE DECONGESTANT COMBINATIONS</b>					
1	brompheniramine/pseudoephedrine	-	BROMFED	generic	
1	brompheniramine/pseudoephedrine er	-	BROMFED PD	generic	
1	carbetapentaine/pseudoephedrine	-	RESPI-TANN	generic	
1	chlorpheniramine/pseudoephedrine	-	HISTEX LIQUID	generic	
1	chlorpheniramine/pseudoephedrine er	-	DECONAMINE SR	generic	
2	chlorpheniramine/pseudoephedrine er	-	DECONAMINE SR		
2	chlorpheniramine/pseudoephedrine	-	HISTEX	generic	
2	chlorpheniramine/pseudoephedrine er	-	HISTEX SR		
2	loratadine/pseudoephedrine	-	CLARITIN-D 12	OTC	
2	loratadine/pseudoephedrine	-	CLARITIN-D 24	OTC	
3	cetirizine/pseudoephedrine	-	ZYRTEC-D	OTC	
<b>ANTIHISTAMINES</b>					
1	loratadine	-	CLARITIN	OTC	
1	hydroxyzine hcl	-	ATARAX	generic	
1	hydroxyzine pamoate	-	VISTARIL	generic	
2	cetirizine	-	ZYRTEC	OTC	
3	fexofenadine	-	ALLEGRA	generic	
<b>PULMONARY ARTERIAL HYPERTENSION AGENTS</b>					
4	ambrisentan	-	LETAIRIS		PA REQUIRED - LIMITED DISTRIBUTION DRUG
4	bosentan	-	TRACLEER		PA REQUIRED - LIMITED DISTRIBUTION DRUG
4	epoprostenol injection	-	FLOLAN	generic	PA REQUIRED - LIMITED DISTRIBUTION DRUG
4	iloprost	-	VENTAVIS		PA REQUIRED - LIMITED DISTRIBUTION DRUG
4	sildenafil	-	REVATIO		PA REQUIRED
4	tadalafil	-	ADCIRCA		PA REQUIRED
4	treprostinil	-	REMODULIN, TYVASO		PA REQUIRED - LIMITED DISTRIBUTION DRUG
<b>UROLOGICAL AGENTS</b>					
<b>OVERACTIVE BLADDER AGENTS</b>					
1	flavoxate	-	URISPAS	generic	
1	oxybutynin	-	DITROPAN	generic	
1	oxybutynin er	-	DITROPAN XL	generic	
2	darifenacin	-	ENABLEX		
2	oxybutynin transdermal	-	OXYTROL		
2	solifenacin	-	VESICARE		
2	tolterodine	-	DETROL		
2	tolterodine er	-	DETROL LA		
2	trospium er	-	SANCTURA XR		
3	fesoterodine	-	TOVIAZ		oxybutynin er, Detrol, Detrol LA, Enablex, Sanctura XR, Vesicare
3	oxybutynin gel	-	GELNIQUE		oxybutynin er, Detrol, Detrol LA, Enablex, Sanctura XR, Vesicare
3	trospium	-	SANCTURA		oxybutynin er, Detrol, Detrol LA, Enablex, Sanctura XR, Vesicare
<b>BENIGN PROSTATIC HYPERTROPHY AGENTS</b>					
1	doxazosin	-	CARDURA	generic	
1	finasteride	-	PROSCAR	generic	
1	terazosin	-	HYTRIN	generic	
2	alfuzosin	-	UROXATRAL		
2	dutasteride	-	AVODART		
2	tamsulosin	-	FLOMAX		
3	doxazosin er	-	CARDURA XL		doxazosin, terazosin, Flomax
3	sildosin	-	RAPAFLO		doxazosin, terazosin, Flomax
<b>OTHER GENITOURINARY AGENTS</b>					
1	bethanechol	-	URECHOLINE	generic	
1	citric acid/potassium citrate	-	CYTRA-K, POLYCITRA-K	generic	
1	methenamine/methylene blue/hyoscamine/phenyl salicylate/sodium phosphate	-	UTIRA-C	generic	
1	phenazopyridine	-	PYRIDIUM	generic	
1	potassium citrate	-	UROCIT-K	generic	
1	sodium citrate/citric acid solution	-	BICITRA	generic	
2	betaine	-	CYSTADANE		
2	citric acid/potassium sodium citrates	-	CYTRA-3		
2	dibasic sodium phosphate monobasic potassium phosphate monobasic sodium phosphate	-	K-PHOS NEUTRAL		
2	gluconic acid/citric acid	-	RENACIDIN		
2	pentosan polysulfate sodium	-	ELMIRON		
2	potassium acid phosphate/sodium acid phosphate	-	K-PHOS M.F., K-PHOS NO. 2		
4	cysteamine	-	CYSTAGON		PA REQUIRED - LIMITED DISTRIBUTION DRUG
<b>ERECTILE DYSFUNCTION AGENTS</b>					
2	alprostadil	-	CAVERJECT		PA REQUIRED, QUANTITY LIMIT
2	alprostadil	-	MUSE		PA REQUIRED, QUANTITY LIMIT
2	sildenafil	-	VIAGRA		PA REQUIRED, QUANTITY LIMIT
2	tadalafil	-	CIALIS		PA REQUIRED, QUANTITY LIMIT
3	alprostadil	-	EDEX		PA REQUIRED, QUANTITY LIMIT, Caverject, Muse
3	vardeafil	-	LEVITRA		PA REQUIRED, QUANTITY LIMIT, Cialis, Viagra

Tier	Generic Name	-	Reference Name	Generic Status	Preferred Alternatives / Comments
<b>DIABETIC SUPPLIES</b>					
<b>GLUCOSE MONITORS</b>					
2	blood glucose monitor	-	ACCU-CHEK ACTIVE SYSTEMS		
2	blood glucose monitor	-	ACCU-CHEK ADVANTAGE SYSTEMS		
2	blood glucose monitor	-	ACCU-CHEK AVIA SYSTEMS		
2	blood glucose monitor	-	ACCU-CHEK COMPACT SYSTEMS		
2	blood glucose monitor	-	ACCU-CHEK COMPLETE SYSTEMS		
2	blood glucose monitor	-	ASCENSIA BREEZE SYSTEMS		
2	blood glucose monitor	-	ASCENSIA CONTOUR SYSTEMS		
2	blood glucose monitor	-	PRECISION SYSTEMS		
3	blood glucose monitor	-	ONE TOUCH ULTRA SYSTEMS		Accu-Chek Systems, Ascensia Systems
3	blood glucose monitor	-	ONE TOUCH ULTRAMINI SYSTEMS		Accu-Chek Systems, Ascensia Systems
3	blood glucose monitor	-	ONE TOUCH ULTRASMART SYSTEMS		Accu-Chek Systems, Ascensia Systems
3	blood glucose monitor	-	SURE STEP PRO		Accu-Chek Systems, Ascensia Systems
<b>GLUCOSE TEST STRIPS</b>					
2	blood glucose test strip	-	ACCU-CHEK ACTIVE STRIPS		
2	blood glucose test strip	-	ACCU-CHEK ADVANTAGE STRIPS		
2	blood glucose test strip	-	ACCU-CHEK AVIA STRIPS		
2	blood glucose test strip	-	ACCU-CHEK COMFORT CURVE STRIPS		
2	blood glucose test strip	-	ACCU-CHEK COMPACT STRIPS		
2	blood glucose test strip	-	ACCU-CHEK INSTANT STRIPS		
2	blood glucose test strip	-	ACCU-CHEK SIMPLICITY STRIPS		
2	blood glucose test strip	-	CHEMSTRIP BG STRIPS		
2	blood glucose test strip	-	CHEMSTRIP K		
2	blood glucose test strip	-	ASCENSIA ELITE STRIPS		
2	blood glucose test strip	-	ASCENSIA AUTODISC STRIPS		
2	blood glucose test strip	-	ASCENSIA BREEZE STRIPS		
2	blood glucose test strip	-	ASCENSIA CONTOUR STRIPS		
2	blood glucose test strip	-	PRECISION STRIPS		
3	blood glucose test strip	-	ONE TOUCH BASIC STRIPS		Accu-Chek Strips, Ascensia Strips
3	blood glucose test strip	-	ONE TOUCH FASTTAKE STRIPS		Accu-Chek Strips, Ascensia Strips
3	blood glucose test strip	-	ONE TOUCH PROFILE STRIPS		Accu-Chek Strips, Ascensia Strips
3	blood glucose test strip	-	ONE TOUCH SURESTEP STRIPS		Accu-Chek Strips, Ascensia Strips
3	blood glucose test strip	-	ONE TOUCH ULTRA STRIPS		Accu-Chek Strips, Ascensia Strips
<b>MISCELLANEOUS DIABETIC SUPPLIES</b>					
2	blood testing alcohol swab	-	BD ALCOHOL SWABS		
2	blood testing lancet	-	ACCU-CHEK LANCETS		
2	blood testing lancet	-	BD LANCETS, BD PEN NEEDLES, BD LANCET DEVICE		
2	blood testing lancet	-	ASCENSIA LANCETS		
2	blood testing lancet	-	PRECISION LANCETS		
2	diabetic syringes	-	BD MICROFINE, BD MICROFINE ULTRA FINE SYRINGES		
2	diabetic syringes	-	NOVOFINE		
3	blood testing lancet	-	ONE TOUCH LANCETS		Accu-Chek Lancets, BD Lancets, Ascensia Lancets, Precision Lancets
3	blood testing lancet	-	SURE STEP LANCETS		Accu-Chek Lancets, BD Lancets, Ascensia Lancets, Precision Lancets
<b>MISCELLANEOUS AGENTS</b>					
<b>ANOREXIANTS</b>					
1	benzphetamine	-	DIDREX	generic	EXCLUDED BY PLAN
1	diethylpropion	-	TENUATE	generic	EXCLUDED BY PLAN
1	phendimetrazine	-	BONTRIL PDM	generic	EXCLUDED BY PLAN
1	phentermine hcl	-	IONAMIN	generic	EXCLUDED BY PLAN
1	phentermine tartrate	-	ADIPEX-P	generic	EXCLUDED BY PLAN
3	phendimetrazine er	-	MELFIAT-105, PRELU-2		EXCLUDED BY PLAN
3	sibutramine	-	MERIDA		EXCLUDED BY PLAN
<b>FERTILITY</b>					
1	clomiphene citrate	-	CLOMID	generic	EXCLUDED BY PLAN
1	clomiphene citrate	-	SEROPHENE	generic	EXCLUDED BY PLAN
4	cetorelix	-	CETROTIDE		EXCLUDED BY PLAN
4	choriogonadotropin alfa	-	OVIDREL		EXCLUDED BY PLAN
4	follitropin alpha, recombinant	-	GONAL-F, GONAL-F RFF		EXCLUDED BY PLAN
4	follitropin beta	-	FOLLISTIM AQ		EXCLUDED BY PLAN
4	ganirelix acetate	-	GANIRELIX ACETATE		EXCLUDED BY PLAN
4	lutropin alfa	-	LUVERIS		EXCLUDED BY PLAN
4	menotropins	-	MENOPUR		EXCLUDED BY PLAN
4	menotropins	-	REPRONEX		EXCLUDED BY PLAN
4	urofollitropin	-	BRAVELLE		EXCLUDED BY PLAN
<b>MISCELLANEOUS AGENTS</b>					
2	deferasirox	-	EXJADE		
2	disulfiram	-	ANTABUSE		
2	nitisinone	-	ORFADIN		
2	pegademase bovine	-	ADAGEN		PA REQUIRED
2	phenylbutyrate sodium	-	BUPHENYL		
2	riluzole	-	RILUTEK		
2	succimer	-	CHEMET		
3	acamprosate	-	CAMPRAL		

Tier	Generic Name	-	Reference Name	Generic Status	Preferred Alternatives / Comments
<b>MISCELLANEOUS AGENTS (cont.)</b>					
4	alpha 1 proteinase inhibitor	-	ARALAST		PA REQUIRED - LIMITED DISTRIBUTION DRUG
4	alpha 1 proteinase inhibitor	-	PROLASTIN		PA REQUIRED - LIMITED DISTRIBUTION DRUG
4	alpha 1 proteinase inhibitor	-	ZEMAIRA		PA REQUIRED - LIMITED DISTRIBUTION DRUG
4	eculizumab	-	SOLIRIS		PA REQUIRED
<b>SMOKING CESSATION AGENTS</b>					
otc	nicotine gum	-	NICORETTE	generic	EXCLUDED BY PLAN
otc	nicotine transdermal	-	NICODERM	generic	EXCLUDED BY PLAN
2	nicotine inhaler	-	NICOTROL INHALER		EXCLUDED BY PLAN
2	varenicline	-	CHANTIX		COVERED UNDER DIRECT CARE PLAN ONLY. QTY LIMITS APPLY