



***EnvisionRx Plus Silver (PDP)***  
**2010 Formulary**  
**(List of Covered Drugs)**

**PLEASE READ: THIS DOCUMENT CONTAINS INFORMATION ABOUT THE DRUGS WE COVER IN THIS PLAN**

**Note to existing members:** This formulary has changed since last year. Please review this document to make sure that it still contains the drugs you take.

This document includes *EnvisionRx Plus Silver's* partial formulary as of January 1, 2010. For a complete, updated formulary, please visit our Web site at [www.envisionrxplus.com](http://www.envisionrxplus.com) or call 1-866-250-2005, 24 hours a day, 7 days a week. TTY/TDD users should call 1-866-763-9630.

Last Updated September 9, 2009

## **What is the *EnvisionRx Plus* Formulary?**

A formulary is a list of covered drugs selected by *EnvisionRx Plus* in consultation with a team of health care providers, which represents the prescription therapies believed to be a necessary part of a quality treatment program. *EnvisionRx Plus* will generally cover the drugs listed in our formulary as long as the drug is medically necessary, the prescription is filled at a *EnvisionRx Plus* network pharmacy, and other plan rules are followed. For more information on how to fill your prescriptions, please review your Evidence of Coverage.

This document is a partial formulary and includes only some of the drugs covered by *EnvisionRx Plus*. For a complete listing of all prescription drugs covered by *EnvisionRx Plus*, please visit our Web site at [www.envisionrxplus.com](http://www.envisionrxplus.com) or call 1-866-250-2005, 24 hours a day, 7 days a week. TTY/TDD users should call 1-866-763-9630.

## **Can the Formulary change?**

Generally, if you are taking a drug on our 2010 formulary that was covered at the beginning of the year, we will not discontinue or reduce coverage of the drug during the 2010 coverage year except when a new, less expensive generic drug becomes available or when new adverse information about the safety or effectiveness of a drug is released. Other types of formulary changes, such as removing a drug from our formulary, will not affect members who are currently taking the drug. It will remain available at the same cost-sharing for those members taking it for the remainder of the coverage year. We feel it is important that you have continued access for the remainder of the coverage year to the formulary drugs that were available when you chose our plan, except for cases in which you can save additional money or we can ensure your safety.

If we remove drugs from our formulary, or add prior authorization, quantity limits and/or step therapy restrictions on a drug, we must notify affected members of the change at least 60 days before the change becomes effective, or at the time the member requests a refill of the drug, at which time the member will receive a 60-day supply of the drug. If the Food and Drug Administration deems a drug on our formulary to be unsafe or the drug's manufacturer removes the drug from the market, we will immediately remove the drug from our formulary and provide notice to members who take the drug. The enclosed formulary is current as of January 1, 2010. To get updated information about the drugs covered by *EnvisionRx Plus*, please visit our Web site at [www.envisionrxplus.com](http://www.envisionrxplus.com) or call Member Services at 1-866-250-2005, 24 hours a day, 7 days a week. TTY/TDD users should call 1-866-763-9630. If we make certain non-routine changes to coverage for drugs, we will send members an errata sheet to update the formulary they received.

## **How do I use the Formulary?**

There are two ways to find your drug within the formulary:

### **Medical Condition**

The formulary begins on page 1. The drugs in this formulary are grouped into categories depending on the type of medical conditions that they are used to treat. For example, drugs used to treat a heart condition are listed under the category, "cardiovascular agents." If you know what your drug is used for, look for the category name in the list that begins on page 1. Then look under the category name for your drug.

## **Alphabetical Listing**

If you are not sure what category to look under, you should look for your drug in the Index that begins on page 17. The Index provides an alphabetical list of all of the drugs included in this document. Both brand name drugs and generic drugs are listed in the Index. Look in the Index and find your drug. Next to your drug, you will see the page number where you can find coverage information. Turn to the page listed in the Index and find the name of your drug in the first column of the list.

## **What are generic drugs?**

*EnvisionRx Plus* covers both brand name drugs and generic drugs. A generic drug is approved by the FDA as having the same active ingredient as the brand name drug. Generally, generic drugs cost less than brand name drugs.

## **Are there any restrictions on my coverage?**

Some covered drugs may have additional requirements or limits on coverage. These requirements and limits may include:

- **Prior Authorization:** *EnvisionRx Plus* requires you or your physician to get prior authorization for certain drugs. This means that you will need to get approval from *EnvisionRx Plus* before you fill your prescriptions. If you don't get approval, *EnvisionRx Plus* may not cover the drug.
- **Quantity Limits:** For certain drugs, *EnvisionRx Plus* limits the amount of the drug that *EnvisionRx Plus* will cover. For example, *EnvisionRx Plus* provides 30 capsules per prescription for a 30 day-supply of Cymbalta 60 MG. This may be in addition to a standard one month or three month supply.
- **Step Therapy:** In some cases, *EnvisionRx Plus* requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, *EnvisionRx Plus* may not cover drug B unless you try Drug A first. If Drug A does not work for you, *EnvisionRx Plus* will then cover Drug B.

You can find out if your drug has any additional requirements or limits by looking in the formulary that begins on page 1. You can also get more information about the restrictions applied to specific covered drugs by visiting our Web site at [www.envisionrxplus.com](http://www.envisionrxplus.com).

You can ask *EnvisionRx Plus* to make an exception to these restrictions or limits. See the section, "How do I request an exception to the *EnvisionRx Plus*'s formulary?" on page iv for information about how to request an exception.

## What if my drug is not on the Formulary?

If your drug is not included in this list of covered drugs, you should first contact Member Services and ask if your drug is covered. This document includes only a partial list of covered drugs, so *EnvisionRx Plus* may cover your drug. You can contact Member Services at 1-866-250-2005, 24 hours a day, 7 days a week. TTY/TDD users should call 1-866-763-9630.

If you learn that *EnvisionRx Plus* does not cover your drug, you have two options:

- You can ask Member Services for a list of similar drugs that are covered by *EnvisionRx Plus*. When you receive the list, show it to your doctor and ask him or her to prescribe a similar drug that is covered by *EnvisionRx Plus*.
- You can ask *EnvisionRx Plus* to make an exception and cover your drug. See below for information about how to request an exception.

## How do I request an exception to the *EnvisionRx Plus*'s Formulary?

You can ask *EnvisionRx Plus* to make an exception to our coverage rules. There are several types of exceptions that you can ask us to make.

- You can ask us to cover your drug even if it is not on our formulary.
- You can ask us to waive coverage restrictions or limits on your drug. For example, for certain drugs, *EnvisionRx Plus* limits the amount of the drug that we will cover. If your drug has a quantity limit, you can ask us to waive the limit and cover more.

Generally, *EnvisionRx Plus* will only approve your request for an exception if the alternative drugs included on the plan's formulary, or additional utilization restrictions would not be as effective in treating your condition and/or would cause you to have adverse medical effects.

You should contact us to ask us for an initial coverage decision for a formulary, or utilization restriction exception. **When you are requesting a formulary, or utilization restriction exception you should submit a statement from your physician supporting your request.** Generally, we must make our decision within 72 hours of getting your prescribing physician's supporting statement. You can request an expedited (fast) exception if you or your doctor believe that your health could be seriously harmed by waiting up to 72 hours for a decision. If your request to expedite is granted, we must give you a decision no later than 24 hours after we get your prescribing physician's supporting statement.

## What do I do before I can talk to my doctor about changing my drugs or requesting an exception?

As a new or continuing member in our plan you may be taking drugs that are not on our formulary. Or, you may be taking a drug that is on our formulary but your ability to get it is limited. For example, you may need a prior authorization from us before you can fill your prescription. You should talk to your doctor to decide

if you should switch to an appropriate drug that we cover or request a formulary exception so that we will cover the drug you take. While you talk to your doctor to determine the right course of action for you, we may cover your drug in certain cases during the first 90 days you are a member of our plan.

For each of your drugs that is not on our formulary or if your ability to get your drugs is limited, we will cover a temporary 30-day supply (unless you have a prescription written for fewer days) when you go to a network pharmacy. After your first 30-day supply, we will not pay for these drugs, even if you have been a member of the plan less than 90 days.

If you are a resident of a long-term care facility, we will cover a temporary 31-day transition supply (unless you have a prescription written for fewer days). We will cover more than one refill of these drugs for the first 90 days you are a member of our plan. If you need a drug that is not on our formulary or if your ability to get your drugs is limited, but you are past the first 90 days of membership in our plan, we will cover a 31-day emergency supply of that drug (unless you have a prescription for fewer days) while you pursue a formulary exception.

Current members experiencing level of care changes will follow the transition policy as outlined above.

### **For more information**

For more detailed information about your *EnvisionRx Plus* prescription drug coverage, please review your Evidence of Coverage and other plan materials.

If you have questions about *EnvisionRx Plus*, please call Member Services at 1-866-250-2005, 24 hours a day, 7 days a week. TTY/TDD users should call 1-866-763-9630.) Or visit [www.envisionrxplus.com](http://www.envisionrxplus.com).

If you have general questions about Medicare prescription drug coverage, please call Medicare at 1-800-MEDICARE (1-800-633-4227) 24 hours a day/7 days a week. TTY/TDD users should call 1-877-486-2048. Or, visit [www.medicare.gov](http://www.medicare.gov).

## ***EnvisionRx Plus's Formulary***

The abridged formulary that begins on the next page provides coverage information about some of the drugs covered by ***EnvisionRx Plus***. If you have trouble finding your drug in the list, turn to the Index that begins on page 17. Remember: This is only a partial list of drugs covered by ***EnvisionRx Plus***. If your prescription is not in this partial formulary, please visit our Web site at [www.envisionrxplus.com](http://www.envisionrxplus.com) or call Member Services at 1-866-250-2005, 24 hours a day, 7 days a week. TTY/TDD users should call 1-866-763-9630 for additional help.

The first column of the chart lists the drug name. Brand name drugs are capitalized (e.g., CYMBALTA) and generic drugs are listed in lower-case italics (e.g., *ibuprofen*).

The information in the Notes column tells you if ***EnvisionRx Plus*** has any special requirements for coverage of your drug.

ST *Step Therapy*

PA *Prior Authorization*

QL *Quantity Limit*

SP *This prescription may be available only at certain pharmacies. For more information consult your Pharmacy Directory or call Member Services at 1-866-250-2005, 24 hours a day, 7 days a week. TTY/TDD users should call 1-866-763-9630.*

*\*All drugs in Tiers 1 through 4 are available via mail-order with a 90-day supply prescription. Specialty Drugs (Tier 5) are limited to a 30-day supply at mail-order.*

**Below is a chart showing your co-insurance by drug tier after you have met your deductible but prior to entering the coverage gap for the Silver Plan.**

<b>Formulary Drug Tier</b>	<b>Co-insurance at retail, Mail Order and 90 day at retail pharmacies</b>
Tier 1	25%
Tier 2	25%
Tier 3	25%
Tier 4	25%
Tier 5	25%, limited to a 30 day supply.

Drug Name	Tier	Notes	Drug Name	Tier	Notes
<b>ANALGESICS</b>					
<b>Non-opioid Analgesics</b>					
<i>diflunisal</i>	1		<i>fenoprofen calcium</i>	1	
EQUAGESIC	4		FLECTOR	4	
<b>Opioid Analgesics</b>			<i>ibuprofen</i>	1	
<i>apap / oxycodone 2.5mg/325mg</i>	2		<i>indomethacin</i>	1	
<i>apap/codeine</i>	1		<i>ketoprofen</i>	1	
<i>duramorph</i>	1		<i>meloxicam</i>	2	
<i>endocet</i>	1		<i>meloxicam 1.5mg/ml</i>	3	
<i>hydrocodone/apap</i>	1		<i>nabumetone</i>	1	
<i>hydrocodone/ibuprofen</i>	1		<i>naproxen</i>	1	
<i>hydromorphone hcl</i>	2		<i>piroxicam</i>	1	
KADIAN	3		<i>sulindac</i>	1	
<i>methadone</i>	1		VOLTAREN GEL	4	
<i>morphine sulfate</i>	1		<b>ANTIBACTERIALS</b>		
OPANA	3		<b>Aminoglycosides</b>		
OPANA ER	3		<i>gentamicin sulfate</i>	1	
<i>oxycodone</i>	2		<i>kanamycin sulfate</i>	1	
<i>oxycodone er</i>	2		<i>tobramycin sulfate</i>	1	
<i>oxycodone/apap</i>	1		<b>Antibacterials, Other</b>		
<i>oxycodone/aspirin</i>	1		<i>clindamycin hcl</i>	1	
<i>oxycodone/ibuprofen</i>	2		<i>colistimethate sodium</i>	1	
OXYCONTIN	4		LINCOCIN	4	
SUBUTEX	4		<i>metronidazole</i>	1	
<i>tramadol</i>	1	QL	<i>trimethoprim</i>	1	
<i>tramadol/apap</i>	1	QL	<i>vancomycin hcl</i>	4	
<b>ANESTHETICS</b>			ZYVOX	4	
<b>Local Anesthetics</b>			<b>Beta-lactam, Cephalosporins</b>		
<i>lidocaine hcl</i>	1		<i>cefaclor</i>	1	
<b>ANTI-INFLAMMATORY AGENTS</b>			<i>cefdinir</i>	1	
<b>Nonsteroidal Anti-inflammatory Drugs</b>			<i>cefepime</i>	2	
<i>diclofenac potassium</i>	1		<i>ceftriaxone sodium</i>	2	
<i>etodolac</i>	1		<i>cefuroxime axetil</i>	1	
<i>etodolac er</i>	2		<i>cephalexin</i>	1	
			ZINACEF	4	
			<b>Beta-lactam, Other</b>		
			AZACTAM	5	

Drug Name	Tier	Notes	Drug Name	Tier	Notes
MERREM	4		<i>ethosuximide</i>	1	
<b>Beta-lactam, Penicillins</b>			LYRICA	4	
<i>amoxicillin</i>	1		<i>zonisamide</i>	1	
<i>amoxicillin/clavulanate</i>	1		<b>Gamma-aminobutyric Acid (GABA) Augmenting Agents</b>		
<i>ampicillin</i>	1		<i>divalproex sodium</i>	2	
<i>ampicillin sodium</i>	1		<i>gabapentin</i>	1	
<i>dicloxacillin sodium</i>	1		GABITRIL	4	
<i>nafcillin sodium</i>	1		NEURONTIN 100MG/ML	4	
<i>penicillin v potassium</i>	1		<i>valproate sodium</i>	1	
<i>pfizerpen-g</i>	1		<i>valproic acid</i>	1	
<i>piperacillin sodium</i>	4		<b>Glutamate Reducing Agents</b>		
<b>Macrolides</b>			FELBATOL	4	
<i>azithromycin</i>	1		<i>lamotrigine</i>	2	
<i>erythromycin/sulfisoxazole</i>	1		<i>topiramate</i>	2	
KETEK	4		<b>Sodium Channel Inhibitors</b>		
<b>Quinolones</b>			BANZEL	4	
<i>ciprofloxacin</i>	1		<i>carbamazepine</i>	1	
LEVAQUIN	3		<i>carbamazepine er</i>	2	
<i>ofloxacin</i>	1		CARBATROL	4	
<b>Sulfonamides</b>			DILANTIN INFATABS	4	
<i>sulfadiazine</i>	4		<i>epitol</i>	1	
<i>sulfamethoxazole/trimethoprim</i>	1		<i>fosphenytoin sodium</i>	2	
<i>sulfatrim</i>	1		<i>oxcarbazepine</i>	2	
<b>Tetracyclines</b>			PEGANONE	4	
<i>doxycycline</i>	1		<i>phenytoin</i>	1	
<i>myrac</i>	2		<b>ANTIDEMENTIA AGENTS</b>		
<i>tetracycline</i>	1		<b>Cholinesterase Inhibitors</b>		
<b>ANTICONVULSANTS</b>			ARICEPT	4	
<b>Anticonvulsants, Other</b>			ARICEPT ODT	4	
KEPPRA 100MG/ML	3		EXELON (ALL FORMS)	3	
<i>levetiracetam</i>	2		<i>galantamine</i>	2	
<i>primidone</i>	1		<b>Glutamate Pathway Modifiers</b>		
VIMPAT	4		NAMENDA	3	
<b>Calcium Channel Modifying Agents</b>			<b>ANTIDEPRESSANTS</b>		
CELONTIN	4				

Drug Name	Tier	Notes	Drug Name	Tier	Notes
<b>Antidepressants, Other</b>					
APLENZIN	4		<i>protriptyline hcl</i>	2	
<i>budeprion xl 300mg</i>	2		SURMONTIL	4	
<i>bupropion</i>	1		<i>trimipramine maleate</i>	1	
<i>maprotiline hcl</i>	1		<b>ANTIDOTES, DETERRENTS, AND TOXICOLOGIC AGENTS</b>		
<i>mirtazapine</i>	1		<b>Antidotes</b>		
<i>nefazodone hcl</i>	1		EXJADE	5	
SYMBYAX	4		<i>sodium polystyrene</i>	1	
<i>trazodone hcl</i>	1		<b>Deterrents</b>		
<b>Monoamine Oxidase Inhibitors</b>			ANTABUSE	4	
EMSAM	4		<i>bupropion hcl sr</i>	1	
MARPLAN	4		CHANTIX	4	QL
NARDIL	3		NICOTROL INHALER	4	QL
<i>tranylcypromine sulfate</i>	1		<b>Toxicologic Agents</b>		
<b>Serotonin/ Norepinephrine Reuptake Inhibitors</b>			<i>naloxone hcl</i>	1	
<i>citalopram</i>	1		<i>naltrexone</i>	1	
CYMBALTA	4	QL	<b>ANTIEMETICS</b>		
<i>fluoxetine</i>	1		<b>Antiemetics</b>		
<i>fluvoxamine</i>	1		EMEND	4	QL
LEXAPRO	3		<i>granisetron</i>	2	PA
<i>paroxetine</i>	1		<i>meclizine</i>	1	
PRISTIQ	4		<i>ondansetron</i>	2	PA QL
SAVELLA	4		SANCUSO	4	PA
<i>sertraline</i>	1		<b>ANTIFUNGALS</b>		
<i>venlafaxine</i>	2		<b>Antifungals</b>		
<b>Tricyclics</b>			ANCOBON	5	
<i>amitriptyline</i>	1		ERAXIS	4	
<i>amoxapine</i>	1		<i>fluconazole</i>	2	
<i>chlordiazepox/amitriptyline</i>	1		GRIFULVIN V	4	
<i>clomipramine</i>	1		MYCAMINE	5	
<i>desipramine</i>	1		NAFTIN	4	
<i>doxepin</i>	1		<i>nystatin</i>	1	
<i>imipramine</i>	1		<b>Antifungals (Other)</b>		
<i>nortriptyline</i>	1		<i>ciclopirox</i>	2	
<i>perphenazine/amitriptyline</i>	1				

Drug Name	Tier	Notes	Drug Name	Tier	Notes
<i>griseofulvin microsize</i>	1		<b>ANTINEOPLASTICS</b>		
<b>ANTIGOUT AGENTS</b>			<b>Alkylating Agents</b>		
<b>Antigout Agents</b>			CEENU	4	
<i>allopurinol</i>	1		CYTOXAN	4	
<i>colchicine</i>	1		HEXALEN	4	
<i>probenecid</i>	1		LEUKERAN	3	
<i>probenecid/colchicine</i>	1		MATULANE	4	
<b>ANTIMIGRAINE AGENTS</b>			<b>Antiangiogenic Agents</b>		
<b>Abortive</b>			REVLIMID	5	SP
<i>dihydroergotamine</i>	1		THALOMID	5	
ERGOMAR	4		<b>Antiestrogens/Modifiers</b>		
RELPAK	3	QL	EMCYT	4	
<i>sumatriptan</i>	1	QL	FARESTON	4	
<i>sumatriptan 8mg/ml</i>	2		<i>tamoxifen citrate</i>	1	
<b>ANTIMYASTHENIC AGENTS</b>			<b>Antimetabolites</b>		
<b>Parasympathomimetics</b>			<i>fludarabine phosphate</i>	5	
MESTINON	4		<i>hydroxyurea</i>	1	
MYTELASE	4		<i>mercaptopurine</i>	1	
<i>pyridostigmine bromide</i>	1		TABLOID	4	
<b>ANTIMYCOBACTERIALS</b>			<b>Antineoplastics, Other</b>		
<b>Antimycobacterials, Other</b>			<i>bleomycin sulfate</i>	2	
<i>dapsone</i>	4		ELITEK	5	
MYCOBUTIN	3		MESNEX	4	
<b>Antituberculars</b>			<i>mitoxantrone hcl</i>	1	
CAPASTAT SULFATE	5		ONTAK	5	
<i>ethambutol hcl</i>	1		PROLEUKIN	5	
<i>isonarif</i>	1		TASIGNA	5	
<i>isoniazid</i>	1		TRISENOX	4	
PASER	4		VELCADE	5	
PRIFTIN	4		VIDAZA	5	
<i>pyrazinamide</i>	3		ZOLINZA	5	
<i>rifampin</i>	1		<b>Aromatase Inhibitors, 3rd Generation</b>		
<i>seromycin</i>	4		ARIMIDEX	3	
TRECTOR	4		AROMASIN	4	
			FEMARA	3	

Drug Name	Tier	Notes	Drug Name	Tier	Notes
<b>Molecular Target Inhibitors</b>					
AFINITOR	5		<i>benztropine mesylate</i>	1	
GLEEVEC	5		<i>bromocriptine mesylate</i>	2	
IRESSA	5		<i>carbidopa/levodopa</i>	1	
NEXAVAR	5	SP	<i>carbidopa/levodopa odt</i>	2	
SPRYCEL	5		<i>carbidopa/levodopa sr</i>	1	
SUTENT	5		COMTAN	3	
TARCEVA	5		MIRAPEX	4	
TYKERB	5		<i>ropinirole hcl</i>	1	
<b>Monoclonal Antibodies</b>			<i>selegiline hcl</i>	1	
CAMPATH	5		STALEVO	3	
RITUXAN	5		<i>trihexyphenidyl hcl</i>	1	
<b>Retinoids</b>			<b>ANTIPSYCHOTICS</b>		
PANRETIN	4		<b>Atypicals</b>		
<i>tretinoin 10mg</i>	1		ABILIFY	4	
<b>ANTIPARASITICS</b>			ABILIFY DISCMELT	4	
<b>Anthelmintics</b>			<i>clozapine</i>	2	
<i>mebendazole</i>	1		FAZACLO	4	
STROMECTOL	4		GEODON	4	
<b>Antiprotozoals</b>			INVEGA	4	
<i>chloroquine phosphate</i>	1		RISPERDAL CONSTA	4	
DARAPRIM	4		<i>risperidone</i>	2	
<i>hydroxychloroquine</i>	1		SEROQUEL	3	
MEPRON	4		SEROQUEL XR	3	
NEBUPENT	3		ZYPREXA	4	
<b>Pediculicides/ Scabicides</b>			ZYPREXA ZYDIS	4	
<i>acticin</i>	1		<b>Conventional</b>		
EURAX	4		<i>chlorpromazine</i>	1	
<i>lindane</i>	3		<i>compro</i>	1	
<i>permethrin</i>	1		<i>fluphenazine 5 mg/ml</i>	4	
<b>ANTIPARKINSON AGENTS</b>			<i>fluphenazine hcl</i>	1	
<b>Antiparkinson Agents</b>			<i>haloperidol</i>	1	
<i>amantadine hcl</i>	1		<i>loxapine succinate</i>	2	
AZILECT	4		MOBAN	4	
			ORAP	4	
			<i>perphenazine</i>	1	

Drug Name	Tier	Notes	Drug Name	Tier	Notes
<i>prochlorperazine</i>	1		<i>zidovudine</i>	1	
<i>thioridazine</i>	1		<b>Anti-HIV Agents, Protease Inhibitors</b>		
<i>thiothixene</i>	1		APTIVUS	4	
<i>trifluoperazine</i>	1		CRIXIVAN	3	
<b>ANTISPASTICITY AGENTS</b>			INVIRASE	3	
<b>Antispasticity Agents</b>			ISENTRESS	5	
<i>baclofen</i>	1		KALETRA	3	
<i>tizanidine hcl</i>	1		LEXIVA	3	
<b>ANTIVIRALS</b>			NORVIR	3	
<b>Anti-cytomegalovirus (CMV) Agents</b>			PREZISTA	5	
<i>foscarnet sodium</i>	4		REYATAZ	3	
<i>ganciclovir</i>	1		SELZENTRY	5	
VALCYTE	5		VIRACEPT	3	
<b>Anti-HIV Agents, Non-nucleoside Reverse Transcriptase Inhibitors</b>			<b>Anti-human Immunodeficiency Virus (HIV) Agents, Fusion Inhibitors</b>		
ATRIPLA	3		FUZEON	5	
INTELENCE	4		<b>Anti-influenza Agents</b>		
RESCRIPTOR	3		<i>rimantadine</i>	1	
SUSTIVA	3		TAMIFLU	4	
VIRAMUNE	4		<b>Antihepatitis Agents</b>		
<b>Anti-HIV Agents, Nucleoside and Nucleotide Reverse Transcriptase Inhibitors</b>			BARACLUDGE	5	
COMBIVIR	3		HEPSERA	5	
<i>didanosine</i>	2		<i>ribavirin</i>	2	
EMTRIVA	3		TYZEKA	4	
EPIVIR	3		<b>Antiherpetic Agents</b>		
EPIVIR HBV	3		<i>acyclovir</i>	1	
EPZICOM	4		<i>famciclovir</i>	2	
RETROVIR IV INFUSION	3		<b>ANXIOLYTICS</b>		
<i>stavudine</i>	2		<b>Anxiolytics, Other</b>		
TRIZIVIR	4		<i>bupirone</i>	1	
TRUVADA	4		<i>meprobamate</i>	1	
VIDEX	3		<b>BIPOLAR AGENTS</b>		
VIREAD	4		<b>Bipolar Agents</b>		
ZIAGEN	4		<i>lithium carbonate</i>	1	
			<i>lithium citrate</i>	1	

Drug Name	Tier	Notes	Drug Name	Tier	Notes
<b>BLOOD GLUCOSE REGULATORS</b>					
<b>Antidiabetic Agents</b>					
<i>acarbose</i>	1		NOVOLIN PEN	3	
ACTOPLUS MET	3		NOVOLOG	3	
ACTOS	3		NOVOLOG MIX	3	
<i>alcohol swabs</i>	1		NOVOLOG MIX PEN	3	
BYETTA	4		NOVOLOG PEN	3	
<i>diabetic supplies, gauze pads</i>	1		<b>BLOOD PRODUCTS/ MODIFIERS/ VOLUME EXPANDERS</b>		
DIABETIC SUPPLIES, PEN NEEDLE	3		<b>Anticoagulants</b>		
DIABETIC SUPPLIES, SYRINGES	3		ARIXTRA	4	
<i>glimepiride</i>	1		<i>heparin sodium</i>	1	
<i>glipizide</i>	1		LOVENOX	4	
<i>glipizide/metformin</i>	1		<i>warfarin sodium</i>	1	
<i>glyburide</i>	1		<b>Blood Formation Products</b>		
<i>glyburide/metformin</i>	1		NEUPOGEN	5	
JANUMET	3		PROCRT	5	PA
JANUVIA	3		<b>Coagulants</b>		
<i>metformin</i>	1		CYKLOKAPRON	3	
PRANDIN	4		<b>Platelet Aggregation Inhibitors</b>		
SYMLIN	4		AGGRENOX	4	
<b>Glycemic Agents</b>			<i>cilostazol</i>	1	
PROGLYCEM	3		<i>dipyridamole</i>	1	
<b>Insulins</b>			PLAVIX	4	
APIDRA	3		<i>ticlopidine hcl</i>	1	
HUMALOG	3		<b>CARDIOVASCULAR AGENTS</b>		
HUMALOG MIX	3		<b>Alpha-adrenergic Agonists</b>		
HUMALOG MIX PEN	3		<i>clonidine hcl</i>	1	
HUMALOG PEN	3		<i>methyldopa</i>	1	
HUMULIN	3		<i>methyldopa/hctz</i>	1	
HUMULIN PEN	3		<i>reserpine</i>	1	
LANTUS	3		<b>Alpha-adrenergic Blocking Agents</b>		
LANTUS PEN	3		<i>doxazosin mesylate</i>	1	
LEVEMIR	3		<i>prazosin hcl</i>	1	
LEVEMIR PEN	3		<i>terazosin hcl</i>	1	
NOVOLIN	3		<b>Antiarrhythmics</b>		

Drug Name	Tier	Notes	Drug Name	Tier	Notes
<i>amiodarone hcl</i>	1		<i>taztia xt</i>	1	
<i>disopyramide phosphate</i>	1		<i>verapamil</i>	1	
<i>flecainide acetate</i>	1		<i>verapamil hcl er</i>	2	
<i>mexiletine hcl</i>	1		<b>Cardiovascular Agents, Others</b>		
<i>pacerone</i>	1		<i>amlodipine/benazapril</i>	1	
<i>procainamide hcl</i>	1		<i>digoxin</i>	1	
<i>propafenone hcl</i>	1		RANEXA	3	
<i>quinidine</i>	1		<b>Diuretics</b>		
<i>sorine</i>	1		<i>acetazolamide</i>	2	
<i>sotalol hcl</i>	1		<i>amiloride hcl</i>	1	
TIKOSYN	3		<i>amiloride/hctz</i>	1	
<b>Beta-adrenergic Blocking Agents</b>			<i>bumetanide</i>	1	
<i>acebutolol hcl</i>	1		<i>chlorothiazide</i>	1	
<i>atenolol</i>	1		<i>chlorthalidone</i>	1	
<i>atenolol/chlorthalidone</i>	1		DYRENIUM	4	
<i>bisoprolol</i>	1		<i>furosemide</i>	1	
<i>bisoprolol /hctz</i>	1		<i>hydrochlorothiazide</i>	1	
BYSTOLIC	3		<i>indapamide</i>	1	
<i>carvedilol</i>	1		<i>methazolamide</i>	1	
<i>labetalol</i>	1		<i>methyclothiazide</i>	1	
<i>metoprolol</i>	1		<i>metolazone</i>	1	
<i>metoprolol/hctz</i>	1		<i>spironolactone</i>	1	
<i>nadolol</i>	1		<i>spironolactone/hctz</i>	1	
<i>pindolol</i>	1		<i>toremide</i>	1	
<i>propranolol</i>	1		<i>triamterene/hctz</i>	1	
<i>propranolol/hctz</i>	1		<b>Dyslipidemics</b>		
<b>Calcium Channel Blocking Agents</b>			<i>cholestyramine</i>	1	
<i>amlodipine</i>	1		<i>colestipol hcl</i>	1	
<i>diltiazem</i>	1		<i>gemfibrozil</i>	1	
<i>felodipine er</i>	1		LOVAZA	4	
<i>isradipine</i>	1		NIASPAN	4	
<i>nicardipine</i>	1		<i>pravastatin sodium</i>	1	
<i>nifedipine</i>	1		<i>prevalite</i>	1	
<i>nimodipine</i>	2		<i>simvastatin</i>	1	
<i>nisoldipine</i>	1		ZETIA	4	

Drug Name	Tier	Notes	Drug Name	Tier	Notes
<b>Renin-angiotensin-aldosterone System Inhibitors</b>			<i>dextroamphetamine sulfate</i>	2	
<i>benazepril</i>	1		<b>Non-amphetamines, ADHD</b>		
<i>benazepril/hctz</i>	1		<i>methylphenidate</i>	1	
<i>captopril</i>	1		STRATTERA	4	
<i>captopril/hctz</i>	1		<b>Non-amphetamines, Other</b>		
DIOVAN	3		PROVIGIL	3	PA
DIOVAN HCT	3		XYREM	4	SP
<i>enalapril</i>	1		<b>DENTAL AND ORAL AGENTS</b>		
<i>enalapril/hctz</i>	1		<b>Dental and Oral Agents</b>		
<i>eplerenone</i>	2		<i>chlorhexadine gluconate</i>	1	
<i>fosinopril</i>	1		<i>pilocarpine hcl</i>	1	
<i>fosinopril/hctz</i>	1		<i>triamcinolone in orabase</i>	1	
<i>lisinopril</i>	1		<b>DERMATOLOGICAL AGENTS</b>		
<i>lisinopril/hctz</i>	1		<b>Dermatological Agents</b>		
MICARDIS	3		8-MOP	4	
MICARDIS HCT	3		<i>alclometasone dipropionate</i>	1	
<i>moexipril</i>	1		ALDARA	3	
<i>moexipril/hctz</i>	1		<i>amcinonide</i>	1	
<i>quinapril</i>	1		<i>aug betamethasone dip</i>	1	
<i>quinapril/hctz</i>	1		<i>betamethasone dipropionat</i>	1	
<i>ramipril</i>	1		<i>betamethasone valerate</i>	1	
TEKTURNA	3		<i>calcipotriene</i>	2	
<i>trandolapril</i>	1		<i>clindamycin phosphate</i>	1	
<b>Vasodilators</b>			<i>clobetasol propionate</i>	1	
<i>hydralazine hcl</i>	1		<i>clotrimazole</i>	1	
<i>isosorbide</i>	1		<i>clotrimazole/betamethasone</i>	1	
<i>minitran</i>	1		CONDYLOX	4	
<i>minoxidil</i>	1		<i>desonide</i>	1	
<i>nitroglycerin</i>	1		<i>desoximetasone</i>	1	
<i>nitroglycerin transdermal</i>	1		<i>diflorasone diacetate</i>	1	
NITROLINGUAL PUMPSPRAY	3		DOVONEX	3	
NITROSTAT	4		<i>econazole nitrate</i>	1	
<b>CENTRAL NERVOUS SYSTEM AGENTS</b>			<i>erythromycin</i>	1	
<b>Amphetamines, ADHD</b>					
<i>amphetamine salts combo</i>	1				

Drug Name	Tier	Notes	Drug Name	Tier	Notes
<i>fluocinolone acetonide</i>	1		<b>Enzyme Replacements/ Modifiers</b>		
<i>fluocinonide</i>	1		ADAGEN	5	SP
<i>fluorouracil</i>	2		ALDURAZYME	5	SP
<i>gentamicin sulfate</i>	1		BUPHENYL	4	
<i>halobetasol propionate</i>	1		CEREDASE	5	
<i>hydrocortisone</i>	1		CEREZYME	5	SP
<i>isovate</i>	1		CYSTADANE	3	
<i>ketoconazole</i>	1		CYSTAGON	3	
<i>laclotion</i>	1		ELAPRASE	5	
<i>lidocaine</i>	1		FABRAZYME	5	SP
<i>lidocaine/prilocaine</i>	1		NAGLAZYME	5	
LIDODERM	4		ORFADIN	5	SP
<i>lokara</i>	1		SUCRAID	5	
<i>metronidazole</i>	1		ZAVESCA	5	
<i>момetasone furoate</i>	1		<b>GASTROINTESTINAL AGENTS</b>		
<i>mupirocin</i>	1		<b>Antispasmodics, Gastrointestinal</b>		
<i>nystatin</i>	1		<i>atropine sulfate</i>	1	
<i>nystatin/triamcinolone</i>	1		<i>dicyclomine hcl</i>	1	
<i>nystop</i>	1		<b>Gastrointestinal Agents, Others</b>		
OXSORALEN ULTRA	4		<i>constulose</i>	1	
<i>pedi-dri</i>	1		<i>diphenoxylate/atropine</i>	1	
<i>podofilox</i>	1		<i>enulose</i>	1	
<i>prednicarbate</i>	1		<i>lactulose</i>	1	
PROTOPIC	3		<i>loperamide hcl</i>	1	
REGRANEX	3		<i>metoclopramide hcl</i>	1	
SANTYL	3		<i>pancrelipase</i>	2	
<i>selenium sulfide</i>	1		<i>peg 3350/electrolytes</i>	1	
<i>silver sulfadiazine</i>	1		ULTRASE	3	
SOLARAZE	3		ULTRASE MT	3	
<i>ssd</i>	1		<i>ursodeoxycholate</i>	2	
TARGRETIN	4		<b>Histamine2 (H2) Blocking Agents</b>		
<i>texacort</i>	1		<i>famotidine</i>	1	
<i>thermazene</i>	1		<i>nizatidine</i>	1	
<i>triamcinolone acetonide</i>	1		<i>ranitidine</i>	1	
<b>ENZYME REPLACEMENTS/MODIFIERS</b>			<b>Irritable Bowel Syndrome Agents</b>		

Drug Name	Tier	Notes	Drug Name	Tier	Notes
LOTRONEX	3		<i>hydrocortisone</i>	1	
<b>Protectants</b>			<i>methylprednisolone</i>	1	
CARAFATE	3		<i>prednisone</i>	1	
<i>misoprostol</i>	1		<i>proctocream-hc</i>	1	
<i>sucralfate</i>	1		<b>HORMONAL AGENTS, STIMULANT (PITUITARY)</b>		
<b>Proton Pump Inhibitors</b>			<b>Hormonal Agents, Stimulant (Pituitary)</b>		
<i>omeprazole</i>	2		<i>chorionic gonadotropin</i>	3	
<i>omeprazole 20mg</i>	1		<i>desmopressin acetate</i>	2	
<i>pantoprazole</i>	2		<b>HORMONAL AGENTS, STIMULANT (SEX HORMONES/ MODIFIERS)</b>		
<b>GENITOURINARY AGENTS</b>			<b>Anabolic Steroids</b>		
<b>Antispasmodics, Urinary</b>			ANADROL-50	4	
DETROL	4		<i>oxandrolone</i>	1	
DETROL LA	4		<b>Androgens</b>		
<i>oxybutynin</i>	1		ANDRODERM	4	
<b>Benign Prostatic Hypertrophy Agents</b>			<i>danazol</i>	2	
<i>finasteride</i>	1		<i>megestrol acetate</i>	2	
FLOMAX	3		<i>testosterone</i>	1	
<b>Genitourinary Agents, Others</b>			<b>Estrogens</b>		
CUPRIMINE	3		<i>estradiol</i>	1	
ESTRACE VAG CR	4		PREMARIN	3	
<i>miconazole 3</i>	1		PREMPHASE	3	
<i>neomycin/polymyxin b sulf</i>	1		PREMPRO	3	
<i>nitrofurantoin</i>	1		<b>Progestins</b>		
<i>potassium citrate</i>	1		<i>medroxyprogesterone acetate</i>	1	
<i>terconazole</i>	1		<i>norethindrone acetate</i>	1	
THIOLA	4		<b>Selective Estrogen Receptor Modifying Agents</b>		
<i>vandazole</i>	1		EVISTA	3	
<i>zazole</i>	1		<b>HORMONAL AGENTS, STIMULANT (THYROID)</b>		
<b>Phosphate Binders</b>			<b>Hormonal Agents, Stimulant (Thyroid)</b>		
<i>calcium acetate</i>	1		<i>levothyroxine sodium</i>	1	
FOSRENOL	4		<i>triiodothyronine</i>	2	
<b>HORMONAL AGENTS, STIMULANT (ADRENAL)</b>			<i>unithroid</i>	1	
<b>Glucocorticoids/ Mineralocorticoids</b>			<b>HORMONAL AGENTS, SUPPRESSANT (ADRENAL)</b>		
<i>dexamethasone</i>	1				

Drug Name	Tier	Notes	Drug Name	Tier	Notes
<b>Hormonal Agents, Suppressant (Adrenal)</b>			ENGERIX-B	4	
LYSODREN	3		GARDASIL	4	
<b>HORMONAL AGENTS, SUPPRESSANT (PARATHYROID)</b>			HAVRIX	4	
<b>Hormonal Agents, Suppressant (Parathyroid)</b>			HIBTITER	4	
SENSIPAR	3		IMOVAX RABIES (H.D.C.V.)	4	
<b>HORMONAL AGENTS, SUPPRESSANT (PITUITARY)</b>			INFANRIX	4	
<b>Hormonal Agents, Suppressant (Pituitary)</b>			IPOL INACTIVATED IPV	3	
<i>leuprolide acetate</i>	2		JE-VAX	4	
LUPRON DEPOT	3		M-M-R II W/DILUENT 10 DOS	3	
<i>octreotide acetate</i>	5		MENACTRA	4	
SANDOSTATIN LAR DEPOT	5		MENOMUNE-A/C/Y/W-135	4	
SOMAVERT	5	SP	MERUVAX II W/DILUENT 10 D	4	
<b>HORMONAL AGENTS, SUPPRESSANT (SEX HORMONES/ MODIFIERS)</b>			PEDIARIX	4	
<b>Antiandrogens</b>			PEDVAX HIB	4	
<i>bicalutamide</i>	2		PROQUAD	4	
<i>flutamide</i>	2		RABAVERT	4	
NILANDRON	4		RECOMBIVAX HB	4	
<b>HORMONAL AGENTS, SUPPRESSANT (THYROID)</b>			ROTATEQ	3	
<b>Antithyroid Agents</b>			TETANUS TOXOID ADSORBED	3	
<i>methimazole</i>	1		TETANUS/DIPHThERIA TOXOID	4	
<i>propylthiouracil</i>	1		TRIHIBIT	4	
<b>IMMUNOLOGICAL AGENTS</b>			TRIPEDIA	4	
<b>Immune Stimulants</b>			TWINRIX	4	
ACTHIB	4		TYPHIM VI	4	
ADACEL	4		VAQTA	4	
ATTENUVAX	4		VARIVAX	4	
BOOSTRIX	3		VIVOTIF BERNA	4	
COMVAX	4		YF-VAX	4	
DAPTACEL	4		ZOSTAVAX	4	
DECAVAC	4		<b>Immune Suppressants</b>		
DIPHThERIA/TETANUS TOXOID	4		<i>azathioprine</i>	1	PA
			CELLCEPT 200MG/ML	3	PA
			<i>cyclosporine</i>	2	PA
			<i>cyclosporine, modified</i>	4	
			<i>gengraf</i>	2	PA

Drug Name	Tier	Notes
<i>methotrexate</i>	1	PA
<i>mycophenolate mofetil</i>	2	PA
ORTHOCLONE OKT3	5	PA
PROGRAF	4	PA
RAPAMUNE	3	PA
<b>Immunizing Agents, Passive</b>		
ATGAM	5	PA
CARIMUNE NANOFILTERED	5	PA
GAMASTAN S/D	4	PA
GAMMAGARD LIQUID	5	PA
OCTAGAM	5	PA
POLYGAM S/D	5	PA
THYMOGLOBULIN	5	PA
VIVAGLOBIN	5	PA
<b>Immunomodulators</b>		
ACTIMMUNE	5	SP
ARCALYST	5	
AVONEX	5	
BETASERON	5	
COPAXONE	5	
ENBREL	5	
HUMIRA	5	
INTRON-A	5	
KINERET	5	
<i>leflunomide</i>	1	
ORENCIA	5	
PEGASYS	5	
REMICADE	5	
<b>INFLAMMATORY BOWEL DISEASE AGENTS</b>		
<b>Salicylates</b>		
APRISO	4	
ASACOL	3	
<i>balsalazide disodium</i>	2	
<i>mesalamine</i>	1	
<b>Sulfonamides</b>		

Drug Name	Tier	Notes
<i>sulfasalazine</i>	1	
<i>sulfazine</i>	1	
<b>METABOLIC BONE DISEASE AGENTS</b>		
<b>Metabolic Bone Disease Agents</b>		
<i>alendronate sodium</i>	1	
<i>calcitonin-salmon</i>	1	
FORTEO	5	
FOSAMAX PLUS D	3	
ZEMPLAR	3	
ZOMETA	5	
<b>MISCELLANEOUS THERAPEUTIC AGENTS</b>		
<b>Miscellaneous Therapeutic Agents</b>		
<i>levocarnitine</i>	1	
<i>pentoxifylline er</i>	1	
<i>pentoxil</i>	1	
XENAZINE	5	
<b>OPHTHALMIC AGENTS</b>		
<b>Ophthalmic Agents, Other</b>		
<i>bac/poly/neomy/hc</i>	1	
<i>bacitracin</i>	1	
<i>bacitracin/neomycin/polym</i>	1	
<i>bacitracin/polymyxin b</i>	1	
<i>ciprofloxacin hcl</i>	1	
<i>dorzolamide/timolol maleate</i>	2	
<i>gentamicin sulfate</i>	1	
LACRISERT	4	
<i>mydral</i>	1	
<i>naphazoline hcl</i>	1	
<i>neomycin/polymyxin/gramic</i>	1	
<i>ocusulf-10</i>	1	
<i>ofloxacin</i>	1	
<i>parcaine</i>	1	
<i>polycin b</i>	1	
RESTASIS	3	

Drug Name	Tier	Notes	Drug Name	Tier	Notes
<i>romycin</i>	1		<b>Ophthalmic Prostaglandin and Prostanoid Analogs</b>		
<i>sodium sulfacetamide</i>	1		TRAVATAN Z	3	
<i>tobramycin sulfate</i>	1		XALATAN	3	
<i>tobrasol</i>	1		<b>OTIC AGENTS</b>		
<i>trifluridine</i>	1		<b>Otic Agents</b>		
<i>trimethoprim/polymix</i>	1		<i>acetazol hc</i>	1	
<i>tropicacyl</i>	1		<i>acetic acid</i>	1	
<i>tropicamide</i>	1		<i>acetic acid/hydrocortisone</i>	1	
<b>Ophthalmic Anti-allergy Agents</b>			<i>borofair</i>	1	
PATADAY	4		<i>cortomycin</i>	1	
PATANOL	4		DERMOTIC	3	
<b>Ophthalmic Anti-inflammatories</b>			<i>neomycin/polymyxin/hydrocort</i>	1	
ACULAR	4		<i>ofloxacin</i>	1	
ACULAR LS	4		<b>RESPIRATORY TRACT AGENTS</b>		
<i>dexamethasone</i>	1		<b>Anti-inflammatories, Inhaled Corticosteroids</b>		
<i>dexasporin</i>	1		AZMACORT	3	
<i>fluorometholone</i>	1		QVAR	3	
<i>neomycin/polymyxin/dex</i>	1		<b>Antihistamines</b>		
NEVANAC	4		ALLEGRA-D	3	
<i>poly-dex</i>	1		ASTELIN	4	
<i>prednisolone</i>	1		ASTEPRO	3	
<i>sulfacetamide/prednisone</i>	1		<i>cetirizine 1mg/ml</i>	1	
<i>tobramycin/dexamethasone</i>	1		<i>clemastine fumarate</i>	1	
<b>Ophthalmic Antiglaucoma Agents</b>			<i>dexchlorpheniramine malea</i>	1	
AZOPT	4		<i>diphenhydramine hcl</i>	1	
<i>betaxolol hcl</i>	1		<i>fexofenadine hcl</i>	1	
<i>brimonidine tartrate</i>	1		<i>hydroxyzine hcl</i>	1	
<i>carteolol hcl</i>	1		<i>palgic</i>	1	
COMBIGAN	4		<b>Antileukotrienes</b>		
<i>dipivefrin hcl</i>	1		ACCOLATE	3	
<i>dorzolamide</i>	1		SINGULAIR	4	PA ST
<i>levobunolol hcl</i>	1		ZYFLO CR	4	
<i>metipranolol</i>	1		<b>Bronchodilators, Anticholinergic</b>		
PILOPINE HS	3		ATROVENT HFA	3	
<i>timolol maleate</i>	1				

Drug Name	Tier	Notes	Drug Name	Tier	Notes
<i>ipratropium bromide</i>	1	PA	<b>SKELETAL MUSCLE RELAXANTS</b>		
SPIRIVA HANDIHALER	4		<b>Skeletal Muscle Relaxants</b>		
<b>Bronchodilators, Phosphodiesterase Inhibitors (Xanthines)</b>			<i>cyclobenzaprine hcl</i>	1	
<i>aminophylline</i>	1		<i>methocarbamol</i>	1	
<i>theochron</i>	1		<i>orphenadrine</i>	1	
<i>theophylline er</i>	2		<b>THERAPEUTIC NUTRIENTS/ MINERALS/ ELECTROLYTES</b>		
<b>Bronchodilators, Sympathomimetic</b>			<b>Electrolytes/ Minerals</b>		
<i>albuterol sulfate</i>	1	PA	AMINOSYN	4	PA
<i>albuterol sulfate 0.21 mg/ml</i>	2	PA	AMINOSYN II	4	PA
<i>albuterol sulfate/ipratropium</i>	2	PA	AMINOSYN II /DEXTROSE	4	PA
PROAIR HFA	1	QL	AMINOSYN/ELECTROLYTES	4	PA
PROVENTIL HFA	4	QL	<i>calcitriol</i>	1	
SEREVENT DISKUS	3		CLINIMIX E/DEXTROSE	3	PA
SYMBICORT	3		CLINIMIX/DEXTROSE	3	PA
<i>terbutaline sulfate</i>	1		<i>dextrose</i>	1	
<b>Mast Cell Stabilizers</b>			FREAMINE	3	PA
<i>cromolyn sodium</i>	1	PA	<i>hepatamine</i>	1	PA
INTAL INHALER	3	QL	<i>intralipid</i>	1	
<b>Pulmonary Antihypertensives</b>			ISOLYTE/DEXTROSE	3	
LETAIRIS	5		<i>kcl/d5w/nacl</i>	1	
REVATIO	5	PA	<i>klor-con</i>	1	
TRACLEER	5	SP	<i>lactated ringer's sol</i>	1	
<b>Respiratory Tract Agents, Other</b>			<i>magnesium sulfate</i>	1	
<i>flunisolide</i>	1		NEPHRAMINE	3	PA
<i>fluticasone propionate</i>	1	QL	<i>niacor</i>	1	
<i>ipratropium bromide</i>	1		NORMOSOL	3	
PROLASTIN	3	SP	<i>novamine</i>	1	PA
RHINOCORT AQUA	3	QL	<i>physiolyte</i>	1	
TYZINE	4		<i>physiosol irrigation</i>	1	
TYZINE PEDIATRIC NASAL DROPS	4		PLASMA-LYTE	3	
XOLAIR	5	SP	<i>potassium chloride</i>	1	
<b>SEDATIVES/ HYPNOTICS</b>			<i>premasol</i>	1	PA
<b>Sedatives/ Hypnotics</b>			PROCALAMINE	3	PA
<i>zaleplon</i>	2				
<i>zolpidem tartrate</i>	1				



## Medicare 2010 Part D Formulary

Drug Name	Tier	Notes	Drug Name	Tier	Notes
RENAMIN	3	PA			
<i>ringer's solt'n</i>	1				
<i>sodium bicarbonate</i>	1				
<i>sodium chloride</i>	1				
<i>sodium lactate</i>	1				
<i>sterile water irrigation</i>	1				
<i>tpn electrolytes ftv</i>	1				
TRAVASOL	3	PA			
TRAVASOL/DEXTROSE	3	PA			
<i>vitamin/mineral, fluoride</i>	1				
<b>Vitamins</b>					
VITAMIN/MINERAL, DUETACT	3				
<i>vitamin/mineral,prenatal</i>	1				

<b>8</b>		
8-mop .....	9	
<b>A</b>		
abilify .....	5	
abilify discmelt.....	5	
acarbose.....	7	
accolate .....	14	
acebutolol hcl .....	8	
acetazol hc .....	14	
acetazolamide.....	8	
acetic acid.....	14	
acetic acid/hydrocortisone .....	14	
acthib.....	12	
acticin.....	5	
actimmune.....	13	
actoplus met .....	7	
actos .....	7	
acular.....	14	
acular ls .....	14	
acyclovir.....	6	
adacel .....	12	
adagen .....	10	
afinitor.....	5	
aggrenox.....	7	
albuterol sulfate.....	15	
albuterol sulfate 0.21 mg/ml .....	15	
albuterol sulfate/ipratropium.....	15	
alclometasone dipropionate .....	9	
alcohol swabs .....	7	
aldara.....	9	
aldurazyme.....	10	
alendronate sodium .....	13	
allegra-d .....	14	
allopurinol.....	4	
amantadine hcl .....	5	
amcinonide.....	9	
amiloride hcl .....	8	
amiloride/hctz .....	8	
aminophylline .....	15	
aminosyn .....	15	
aminosyn ii.....	15	
aminosyn ii /dextrose .....	15	
aminosyn/electrolytes .....	15	
amiodarone hcl.....	8	
amitriptyline.....	3	
amlodipine.....	8	
amlodipine/benazapril.....	8	
amoxapine .....	3	
amoxicillin .....	2	
amoxicillin/clavulanate .....	2	
amphetamine salts combo .....	9	
ampicillin .....	2	
ampicillin sodium.....	2	
anadrol-50 .....	11	
ancobon .....	3	
androderm .....	11	
antabuse.....	3	
apap / oxycodone 2.5mg/325mg.....	1	
apap/codeine .....	1	
apidra.....	7	
aplenzin .....	3	
apriso.....	13	
aptivus.....	6	
arcalyst .....	13	
aricept.....	2	
aricept odt.....	2	
arimidex .....	5	
arixtra .....	7	
aromasin .....	5	
asacol.....	13	
astelin .....	14	
astepro.....	14	
atenolol.....	8	
atenolol/chlorthalidone .....	8	
atgam.....	13	
atripla .....	6	
atropine sulfate.....	10	
atrovent hfa .....	15	
attenuvax.....	12	
aug betamethasone dip.....	9	
avonex.....	13	
azactam .....	2	
azathioprine.....	12	
azilect .....	5	
azithromycin .....	2	
azmacort.....	14	
azopt.....	14	
<b>B</b>		
bac/poly/neomy/hc .....	13	
bacitracin.....	13	
bacitracin/neomycin/polym.....	13	
bacitracin/polymyxin b .....	13	
baclofen.....	6	
balsalazide disodium.....	13	
banzel .....	2	
baraclude .....	6	
benazepril .....	9	
benazepril/hctz .....	9	
benztropine mesylate .....	5	
betamethasone dipropionat .....	9	
betamethasone valerate .....	9	
betaseron .....	13	
betaxolol hcl.....	14	
bicalutamide .....	12	
bisoprolol .....	8	
bisoprolol /hctz.....	8	
bleomycin sulfate .....	4	
boostrix .....	12	

borofair.....	14	celontin.....	2	comvax.....	12
brimonidine tartrate.....	14	cephalexin.....	2	condylox.....	9
bromocriptine mesylate.....	5	ceredase.....	10	constulose.....	10
budeprion xl 300mg.....	3	cerezyme.....	10	copaxone.....	13
bumetanide.....	8	cetirizine 1mg/ml.....	14	cortomycin.....	14
buphenyl.....	10	chantix.....	3	crixivan.....	6
bupropion.....	3	chlordiazepox/amitriptyline.....	3	cromolyn sodium.....	15
bupropion hcl sr.....	3	chlorhexadine gluconate.....	9	cuprimine.....	11
bupirone.....	6	chloroquine phosphate.....	5	cyclobenzaprine hcl.....	15
byetta.....	7	chlorothiazide.....	8	cyclosporine.....	13
bystolic.....	8	chlorpromazine.....	5	cyclosporine, modified.....	13
<b>C</b>		chlorthalidone.....	8	cyklokapron.....	7
calcipotriene.....	9	cholestyramine.....	8	cymbalta.....	3
calcitonin-salmon.....	13	chorionic gonadotropin.....	11	cystadane.....	10
calcitriol.....	15	ciclopirox.....	4	cystagon.....	10
calcium acetate.....	11	cilostazol.....	7	cytoxan.....	4
campath.....	5	ciprofloxacin.....	2	<b>D</b>	
capastat sulfate.....	4	ciprofloxacin hcl.....	13	danazol.....	11
captopril.....	9	citalopram.....	3	dapsone.....	4
captopril/hctz.....	9	clemastine fumarate.....	14	daptacel.....	12
carafate.....	11	clindamycin hcl.....	1	daraprim.....	5
carbamazepine.....	2	clindamycin phosphate.....	9	decavac.....	12
carbamazepine er.....	2	clinimix e/dextrose.....	15	dermotoc.....	14
carbatrol.....	2	clinimix/dextrose.....	15	desipramine.....	3
carbidopa/levodopa.....	5	clobetasol propionate.....	9	desmopressin acetate.....	11
carbidopa/levodopa odt.....	5	clomipramine.....	3	desonide.....	9
carbidopa/levodopa sr.....	5	clonidine hcl.....	7	desoximetasone.....	9
carimune nanofiltered.....	13	clotrimazole.....	9	detrol.....	11
carteolol hcl.....	14	clotrimazole/betamethasone.....	9	detrol la.....	11
carvedilol.....	8	clozapine.....	5	dexamethasone.....	11, 14
ceenu.....	4	colchicine.....	4	dexasporin.....	14
cefaclor.....	1	colestipol hcl.....	8	dexchlorpheniramine malea.....	14
cefdinir.....	1	colistimethate sodium.....	1	dextroamphetamine sulfate.....	9
cefepime.....	1	combigan.....	14	dextrose.....	15
ceftriaxone sodium.....	1	combivir.....	6	diabetic supplies, gauze pads.....	7
cefuroxime axetil.....	1	compro.....	5	diabetic supplies, pen needle.....	7
cellcept 200mg/ml.....	12	comtan.....	5	diabetic supplies, syringes.....	7

diclofenac potassium.....	1
dicloxacillin sodium.....	2
dicyclomine hcl.....	10
didanosine.....	6
diflorasone diacetate.....	9
diflunisal.....	1
digoxin.....	8
dihydroergotamine.....	4
dilantin infatabs.....	2
diltiazem.....	8
diovan.....	9
diovan hct.....	9
diphenhydramine hcl.....	14
diphenoxylate/atropine.....	10
dipivefrin hcl.....	14
diphtheria/tetanus toxoid.....	12
dipyridamole.....	7
disopyramide phosphate.....	8
divalproex sodium.....	2
dorzolamide.....	14
dorzolamide/timolol maleate.....	13
dovonex.....	9
doxazosin mesylate.....	7
doxepin.....	3
doxycycline.....	2
duramorph.....	1
dyrenium.....	8
<b>E</b>	
econazole nitrate.....	10
elaprase.....	10
elitek.....	4
emcyt.....	4
emend.....	3
emsam.....	3
emtriva.....	6
enalapril.....	9
enalapril/hctz.....	9

enbrel.....	13
endocet.....	1
engerix-b.....	12
enulose.....	10
epitol.....	2
epivir.....	6
epivir hbv.....	6
eplerenone.....	9
epzicom.....	6
equagesic.....	1
eraxis.....	3
ergomar.....	4
erythromycin.....	10
erythromycin/sulfisoxazole.....	2
estrace vag cr.....	11
estradiol.....	11
ethambutol hcl.....	4
ethosuximide.....	2
etodolac.....	1
etodolac er.....	1
eurax.....	5
evista.....	11
exelon (all forms).....	2
exjade.....	3
<b>F</b>	
fabrazyme.....	10
famciclovir.....	6
famotidine.....	11
fareston.....	4
fazaclo.....	5
felbatol.....	2
felodipine er.....	8
femara.....	5
fenoprofen calcium.....	1
fexofenadine hcl.....	14
finasteride.....	11
flecainide acetate.....	8

flector.....	1
flomax.....	11
fluconazole.....	3
fludarabine phosphate.....	4
flunisolide.....	15
fluocinolone acetonide.....	10
fluocinonide.....	10
fluorometholone.....	14
fluorouracil.....	10
fluoxetine.....	3
fluphenazine 5 mg/ml.....	5
fluphenazine hcl.....	5
flutamide.....	12
fluticasone propionate.....	15
fluvoxamine.....	3
forteo.....	13
fosamax plus d.....	13
foscarnet sodium.....	6
fosinopril.....	9
fosinopril/hctz.....	9
fosphenytoin sodium.....	2
fosrenol.....	11
freamine.....	15
furosemide.....	8
fuzeon.....	6
<b>G</b>	
gabapentin.....	2
gabitril.....	2
galantamine.....	2
gamastan s/d.....	13
gammagard liquid.....	13
ganciclovir.....	6
gardasil.....	12
gemfibrozil.....	8
gengraf.....	13
gentamicin sulfate.....	1, 10, 13
geodon.....	5

gleevec .....	5	imovax rabies (h.d.c.v.).....	12	laclotion.....	10
glimepiride .....	7	indapamide.....	8	lacrisert.....	13
glipizide.....	7	indomethacin.....	1	lactated ringer's sol.....	15
glipizide/metformin.....	7	infanrix .....	12	lactulose .....	10
glyburide .....	7	intal inhaler .....	15	lamotrigine .....	2
glyburide/metformin .....	7	intelece .....	6	lantus .....	7
granisetron.....	3	intralipid.....	15	lantus pen .....	7
grifulvin v.....	3	intron-a.....	13	leflunomide .....	13
griseofulvin microsize.....	4	invega.....	5	letairis.....	15
<b>H</b>		invirase.....	6	leukeran.....	4
halobetasol propionate .....	10	ipol inactivated ipv.....	12	leuprolide acetate .....	12
haloperidol .....	5	ipratropium bromide .....	15	levaquin.....	2
havrix .....	12	iressa .....	5	levemir .....	7
heparin sodium.....	7	isentress.....	6	levemir pen.....	7
hepatamine .....	15	isolyte/dextrose .....	15	levetiracetam .....	2
hepsera .....	6	isonarif .....	4	levobunolol hcl.....	14
hexalen .....	4	isoniazid .....	4	levocarnitine.....	13
hibtiter .....	12	isosorbide .....	9	levothyroxine sodium.....	11
humalog.....	7	isovate .....	10	lexapro.....	3
humalog mix .....	7	isradipine.....	8	lexiva.....	6
humalog mix pen.....	7	<b>J</b>		lidocaine.....	10
humalog pen.....	7	janumet.....	7	lidocaine hcl .....	1
humira .....	13	januvia.....	7	lidocaine/prilocaine.....	10
humulin .....	7	je-vax.....	12	lidoderm .....	10
humulin pen .....	7	<b>K</b>		lincocin.....	1
hydralazine hcl .....	9	kadian .....	1	lindane.....	5
hydrochlorothiazide .....	8	kaletra.....	6	lisinopril .....	9
hydrocodone/apap .....	1	kanamycin sulfate .....	1	lisinopril/hctz .....	9
hydrocodone/ibuprofen .....	1	kcl/d5w/nacl.....	15	lithium carbonate .....	7
hydrocortisone.....	10, 11	keppra 100mg/ml .....	2	lithium citrate .....	7
hydromorphone hcl .....	1	ketek.....	2	lokara.....	10
hydroxychloroquine .....	5	ketoconazole .....	10	loperamide hcl.....	10
hydroxyurea .....	4	ketoprofen .....	1	lotronex .....	11
hydroxyzine hcl.....	14	kineret .....	13	lovaza .....	8
<b>I</b>		klor-con.....	15	lovenox.....	7
ibuprofen.....	1	<b>L</b>		loxapine succinate.....	5
imipramine .....	3	labetalol.....	8	lupron depot .....	12

lyrica .....	2
lysodren.....	12
<b>M</b>	
magnesium sulfate .....	15
maprotiline hcl .....	3
marplan .....	3
matulane .....	4
mebendazole .....	5
meclizine .....	3
medroxyprogesterone acetate.....	11
megestrol acetate.....	11
meloxicam.....	1
meloxicam 1.5mg/ml .....	1
menactra.....	12
menomune-a/c/y/w-135 .....	12
meprobamate.....	6
mepron .....	5
mercaptopurine .....	4
merrem .....	2
meruvax ii w/diluent 10 d .....	12
mesalamine .....	13
mesnex .....	4
mestinon.....	4
metformin.....	7
methadone .....	1
methazolamide .....	8
methimazole.....	12
methocarbamol.....	15
methotrexate.....	13
methyclothiazide.....	8
methyl dopa.....	7
methyl dopa/hctz.....	7
methylphenidate.....	9
methylprednisolone.....	11
metipranolol .....	14
metoclopramide hcl.....	10
metolazone .....	8

metoprolol.....	8
metoprolol/hctz .....	8
metronidazole.....	1, 10
mexiletine hcl.....	8
micardis.....	9
micardis hct.....	9
miconazole 3 .....	11
minitran .....	9
minoxidil.....	9
mirapex .....	5
mirtazapine.....	3
misoprostol.....	11
mitoxantrone hcl .....	4
m-m-r ii w/diluent 10 dos .....	12
moban.....	6
moexipril.....	9
moexipril/hctz .....	9
mometasone furoate .....	10
morphine sulfate.....	1
mupirocin .....	10
mycamine.....	3
mycobutin .....	4
mycophenolate mofetil.....	13
mydral .....	13
myrac.....	2
mytelase .....	4
<b>N</b>	
nabumetone .....	1
nadolol.....	8
nafcillin sodium .....	2
naftin .....	3
naglazyme .....	10
naloxone hcl .....	3
naltrexone.....	3
namenda .....	3
naphazoline hcl .....	13
naproxen.....	1

nardil .....	3
nebupent.....	5
nefazodone hcl .....	3
neomycin/polymyxin b sulf .....	11
neomycin/polymyxin/dex .....	14
neomycin/polymyxin/gramic .....	13
neomycin/polymyxin/hydrocort.....	14
nephramine.....	15
neupogen.....	7
neurontin .....	2
nevanac .....	14
nexavar .....	5
niacor.....	15
niaspan .....	8
nicardipine.....	8
nicotrol inhaler.....	3
nifedipine .....	8
nilandron .....	12
nimodipine .....	8
nisoldipine.....	8
nitrofurantoin .....	11
nitroglycerin.....	9
nitroglycerin transdermal .....	9
nitrolingual pumpspray .....	9
nitrostat .....	9
nizatidine.....	11
norethindrone acetate .....	11
normosol .....	15
nortriptyline.....	3
norvir.....	6
novamine.....	15
novolin .....	7
novolin pen.....	7
novolog .....	7
novolog mix .....	7
novolog mix pen .....	7
novolog pen.....	7

nystatin.....	4, 10
nystatin/triamcinolone.....	10
nystop.....	10
<b>O</b>	
octagam.....	13
octreotide acetate.....	12
ocusulf-10.....	13
ofloxacin.....	2, 13, 14
omeprazole.....	11
omeprazole 20mg.....	11
ondansetron.....	3
ontak.....	4
opana.....	1
opana er.....	1
orap.....	6
orencia.....	13
orfadin.....	10
orphenadrine.....	15
orthoclone okt3.....	13
oxandrolone.....	11
oxcarbazepine.....	2
oxsoralen ultra.....	10
oxybutynin.....	11
oxycodone.....	1
oxycodone er.....	1
oxycodone/apap.....	1
oxycodone/aspirin.....	1
oxycodone/ibuprofen.....	1
oxycontin.....	1
<b>P</b>	
pacerone.....	8
palgic.....	14
pancrelipase.....	10
panretin.....	5
pantoprazole.....	11
parcaine.....	14
paroxetine.....	3

paser.....	4
pataday.....	14
patanol.....	14
pediarix.....	12
pedi-dri.....	10
pedvax hib.....	12
peg 3350/electrolytes.....	10
peganone.....	2
pegasys.....	13
penicillin v potassium.....	2
pentoxifylline er.....	13
pentoxil.....	13
permethrin.....	5
perphenazine.....	6
perphenazine/amitriptyline.....	3
pfizerpen-g.....	2
phenytoin.....	2
physiolyte.....	15
physiosol irrigation.....	15
pilocarpine hcl.....	9
pilopine hs.....	14
pindolol.....	8
piperacillin sodium.....	2
piroxicam.....	1
plasma-lyte.....	15
plavix.....	7
podofilox.....	10
polycin b.....	14
poly-dex.....	14
polygam s/d.....	13
potassium chloride.....	16
potassium citrate.....	11
prandin.....	7
pravastatin sodium.....	8
prazosin hcl.....	8
prednicarbate.....	10
prednisolone.....	14

prednisone.....	11
premarin.....	11
premasol.....	16
prempase.....	11
prempro.....	11
prevalite.....	9
prezista.....	6
priftin.....	4
primidone.....	2
pristiq.....	3
proair hfa.....	15
probenecid.....	4
probenecid/colchicine.....	4
procainamide hcl.....	8
procalamine.....	16
prochlorperazine.....	6
procrit.....	7
proctocream-hc.....	11
proglycem.....	7
prograf.....	13
prolactin.....	15
proleukin.....	4
propafenone hcl.....	8
propranolol.....	8
propranolol/hctz.....	8
propylthiouracil.....	12
proquad.....	12
protopic.....	10
protriptyline hcl.....	3
proventil hfa.....	15
provigil.....	9
pyrazinamide.....	4
pyridostigmine bromide.....	4
<b>Q</b>	
quinapril.....	9
quinapril/hctz.....	9
quinidine.....	8

qvar .....	14
<b>R</b>	
rabavert .....	12
ramipril.....	9
ranexa.....	8
ranitidine .....	11
rapamune.....	13
recombivax hb.....	12
regranex.....	10
relpax.....	4
remicade.....	13
renamin .....	16
rescriptor .....	6
reserpine.....	7
restasis.....	14
retrovir iv infusion .....	6
revatio .....	15
revlimid.....	4
reyataz.....	6
rhinocort aqua .....	15
ribavirin.....	6
rifampin.....	4
rimantadine .....	6
ringer's solt'n .....	16
risperdal consta .....	5
risperidone.....	5
rituxan .....	5
romycin .....	14
ropinirole hcl.....	5
rotateq .....	12
<b>S</b>	
sancuso.....	3
sandostatin lar depot .....	12
santyl.....	10
savella .....	3
selegiline hcl .....	5
selenium sulfide .....	10

selzentry .....	6
sensipar .....	12
serevent diskus.....	15
seromycin.....	4
seroquel.....	5
seroquel xr.....	5
sertraline.....	3
silver sulfadiazine .....	10
simvastatin .....	9
singulair.....	14
sodium bicarbonate .....	16
sodium chloride.....	16
sodium lactate .....	16
sodium polystyrene .....	3
sodium sulfacetamide.....	14
solaraze .....	10
somavert.....	12
sorine.....	8
sotalol hcl.....	8
spiriva handihaler.....	15
spironolactone .....	8
spironolactone/hctz .....	8
sprycel.....	5
ssd .....	10
stalevo .....	5
stavudine .....	6
sterile water irrigation.....	16
strattera.....	9
stromectol.....	5
subutex .....	1
sucraid.....	10
sucralfate.....	11
sulfacetamide/prednisone.....	14
sulfadiazine .....	2
sulfamethoxazole/trimethoprim .....	2
sulfasalazine.....	13
sulfatrim .....	2

sulfazine .....	13
sulindac .....	1
sumatriptan.....	4
sumatriptan 8mg/ml .....	4
surmontil .....	3
sustiva .....	6
sutent.....	5
symbicort.....	15
symbyax .....	3
symlin.....	7
<b>T</b>	
tabloid .....	4
tamiflu .....	6
tamoxifen citrate .....	4
tarceva.....	5
targretin.....	10
tasigna .....	4
taztia xt.....	8
tekturna .....	9
terazosin hcl .....	8
terbutaline sulfate.....	15
terconazole .....	11
testosterone .....	11
tetanus toxoid adsorbed.....	12
tetanus/diphtheria toxoid.....	12
tetracycline.....	2
texacort.....	10
thalomid .....	4
theochron.....	15
theophylline er .....	15
thermazene .....	10
thiola .....	11
thioridazine .....	6
thiothixene.....	6
thymoglobulin.....	13
ticlopidine hcl.....	7
tikosyn.....	8

timolol maleate.....	14	tropicacyl.....	14	vitamin/mineral, fluoride .....	16
tizanidine hcl.....	6	tropicamide .....	14	vitamin/mineral,prenatal .....	16
tobramycin sulfate.....	1, 14	truvada.....	6	vivaglobin .....	13
tobramycin/dexamethasone.....	14	twinrix .....	12	vivotif berna .....	12
tobrasol.....	14	tykerb .....	5	voltaren gel.....	1
topiramate .....	2	typhim vi.....	12	<b>W</b>	
torse mide.....	8	tyzeka .....	6	warfarin sodium .....	7
tpn electrolytes ftv.....	16	tyzine.....	15	<b>X</b>	
tracleer.....	15	tyzine pediatric nasal drops.....	15	xalatan .....	14
tramadol .....	1	<b>U</b>		xenazine .....	13
tramadol/apap.....	1	ultrase .....	10	xolair .....	15
trandolapril.....	9	ultrase mt.....	10	xyrem .....	9
tranlycypromine sulfate .....	3	unithroid.....	12	<b>Y</b>	
travasol.....	16	ursodeoxycholate .....	10	yf-vax .....	12
travasol/dextrose .....	16	<b>V</b>		<b>Z</b>	
travatan z.....	14	valcyte .....	6	zaleplon.....	15
trazodone hcl.....	3	valproate sodium.....	2	zavesca .....	10
trecator .....	4	valproic acid.....	2	zazole .....	11
tretinoin 10mg.....	5	vancomycin hcl .....	1	zemplar.....	13
triamcinolone acetonide .....	10	vandazole .....	11	zetia .....	9
triamcinolone in orabase .....	9	vaqta .....	12	ziagen .....	6
triamterene/hctz.....	8	varivax.....	12	zidovudine.....	6
trifluoperazine .....	6	velcade .....	4	zinacef.....	2
trifluridine .....	14	venlafaxine .....	3	zolinza .....	4
trihexyphenidyl hcl .....	5	verapamil.....	8	zolpidem tartrate .....	15
trihabit.....	12	verapamil hcl er.....	8	zometa .....	13
triiodothyronine.....	12	vidaza .....	4	zonisamide .....	2
trimethoprim .....	1	videx.....	6	zostavax.....	12
trimethoprim/polymix .....	14	vimpat .....	2	zyflo cr .....	15
trimipramine maleate .....	3	viracept.....	6	zyprexa.....	5
tripedia .....	12	viramune .....	6	zyprexa zydis .....	5
trisenox.....	4	viread.....	6	zyvox.....	1
trizivir.....	6	vitamin/mineral, duetact .....	16		