

WELLCARE OF OHIO - AGED, BLIND, OR DISABLED PREFERRED DRUG LIST							
Some drugs listed on the Preferred Drug List require a Prior Authorization.							
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Cost Index	Quality Indicator	Quantity / Therapy Limitation	Specific Limitations (Optional Info)	Generic Name	Brand Name	Updates	
<b>ANALGESICS</b>							
<b>Opioid Analgesics</b>							
G				Aspirin/Caffeine/Butalbital	BUTALBITAL COMPOUND		
G				Propoxyphene/APAP	DARVOCET-N, N-100		
G				Propoxyphene	DARVON		
G				Propoxyphene HCL/ASA/Caffeine	DARVON COMPOUND 65		
G				Meperidine	DEMEROL		
G				Hydromorphone	DILAUDID		
G				Metadone	DOLOPHINE		
G				Codeine/ASA	EMPIRIN/CODEINE		
G				APAP/Butalbital/Caffeine	ESGIC, FIORICET		
G				Acetaminophen/Caffeine/Butalb	FIORICET		
G				ASA/Butalbital/Caffeine	FIORINAL		
G				Butalbital/ASA/Codeine	FIORINAL/CODEINE		
G				APAP/Hydrocodone	LORCET, LORTAB- 2.5/500, 5/500, 7.5/500, 7.5/650, 10/650, 10/500, ELIXIR, VICODIN 10/660, 7.5/750		
G				Metadone HCL	METHADONE		
G				Morphine Sulfate	MSIR TABS, MSIR ORAL CONC, MS CONTIN, ORAMORPH		
G				Oxycodone IR	ROXICODONE		updated 6-29-06
G	QL	#248 / 31 DS		Oxycodone/APAP	PERCOCET, TYLOX, ROXILOX, ROXICET, ENDOCET 5/325, 7.5/500		
G				Oxycodone/ASA	PERCODAN		
G				Butalbital W/Acetaminophen	PHRENILIN		
G				APAP/Butalbital	PHRENILIN, FORTE		
G	QL	3 ml / 31 DS		Butorphanol NS	STADOL NS		
G				Pentazocine/Naloxone HCl	TALWIN NX		
G				APAP/Codeine tablets, liquid	TYLENOL/CODEINE TABLET, LIQUID		
G				Tramadol	ULTRAM		
\$\$				Oxycodone	ROXICODONE		
\$\$\$\$				Codeine Phosphate, Sulfate	CODEINE		
<b>Non-Opioid Analgesics</b>							
G				Naproxen sodium	ANAPROX		
G				Flurbiprofen	ANSAID		
OTC	COVERED W/RX			Acetylsalicylic Acid	ASPIRIN		
G				Diclofenac Potassium	CATAFLAM		
G				Sulindac	CLINORIL		
G				Oxaprozin	DAYPRO		
G				Salsalate SR	DISALCID, SALFLEX		
G				Diffunisal	DOLOBID		
G				Piroxicam	FELDENE		
G				Indomethacin, SR	INDOCIN, SR		
G				Etodolac	LODINE		

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G	OTC: COVERED W/RX			Ibuprofen, OTC	MOTRIN	
G				Fenoprofen	NALFON	
G				Naproxen	NAPROSYN	
G				Ketoprofen	ORUDIS	
G				Nabumetone	RELAFEN	
G				Tolmetin	TOLECTIN	
G	QL	#20 / 31 DS	5 day supply/rx	Ketorolac	TORADOL	
G				Choline Magnesium Trisalicylate	TRILISATE	
G				Diclofenac	VOLTAREN	
\$\$\$\$\$\$\$\$	PA, ST, QL	#31 / 31 DS	History use of 2 generic NSAIDS	Celecoxib	CELEBREX	
<b>ANESTHETICS</b>						
G				Benzocaine/Antipyrine Otic	AURALGAN, OTIC, A/B OTIC, AUROTO & RX-OTIC	
G				Phenazopyridine	PYRIDIUM	
G				Lidocaine Topical	XYLOCAINE	
G				Lidocaine Viscous	XYLOCAINE VISCOUS	
\$				Lidocaine/Prilocaine	EMLA	
<b>ANTIBACTERIALS - ORAL</b>						
<b>Beta-Lactam, Cephalosporins</b>						
G				Cephalexin	KEFLEX - 1st GENERATION	
G				Cefadroxil Hydrate	DURICEF - 1st GENERATION	
G				Cefaclor	CECLOR - 2nd GENERATION	
G				Cefuroxime	CEFTIN - 2nd GENERATION	
\$\$\$\$\$\$				Cefnidir	OMNICEF - 3rd GENERATION	
<b>Beta-Lactam, Penicillins</b>						
G				Amoxicillin	AMOXIL	
G				Amoxicillin/Clavulanate	AUGMENTIN	
G				Ampicillin	OMNIPEN, PRINCIPEN	
G				Cloxacillin Sodium	CLOXACILLIN SODIUM	
G				Dicloxacillin	DYNAPEN	
G				Oxacillin Sodium	OXACILLIN SODIUM	
G				Penicillin	VEETIDS, BEEPEN VK	
<b>Macrolides</b>						
G				Erythromycin (All Salts)	E-MYCIN, ERY-TAB, ILOSONE, E.E.S., ERYTHROCIN,	
G				Erythromycin/Sulfisoxazole	PEDIAZOLE	
\$				Erythromycin, delayed-release	PCE	
G				Azithromycin	ZITHROMAX	
<b>Quinolones</b>						
G				Ciprofloxacin	CIPRO	
\$	QL	#14/31 DS		Moxifloxacin	AVELOX	
<b>Sulfonamides</b>						
G				Sulfamethoxazole/Trimethoprim	BACTRIM, DS	
G				Sulfasalazine	AZULFIDINE	
G				Sulfisoxazole	GANTRISIN	

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G				Erythromycin/Sulfisoxazole	PEDIAZOLE		
<b>Tetracyclines</b>							
G				Doxycycline capsules	VIBRAMYCIN, VIBRATABS		
G				Minocycline	MINOCIN		
G				Tetracycline	ACHROMYCIN, SUMYCIN		
<b>Antibacterials, Other</b>							
G	QL	Granules=200mls/31DS		Clindamycin	CLEOCIN, GRANULES	Updated June 2006	
G	250 & 500 mg tabs only			Metronidazole	FLAGYL		
G				Nitrofurantoin	MACRODANTIN		
G				Trimethoprim	PROLOPRIM		
\$\$				Nitrofurantoin	MACROBID		
\$\$\$\$\$\$\$\$				Atovaquone	MEPRON		
\$\$\$\$\$\$\$\$	PA			Vancomycin oral	VANCOCIN		
<b>ANTI-CONVULSANTS</b>							
<b>Benzodiazepines</b>							
\$\$\$\$\$				Diazepam	DIASTAT		
<b>Calcium Channel Modifying Agents</b>							
\$\$\$\$				Ethosuximide	ZARONTIN		
\$\$\$\$\$				Zonisamide	ZONEGRAN		
<b>GABA Augmenting Agents</b>							
G				Valproic Acid	DEPAKENE		
G				Primidone	MYSOLINE		
\$\$\$\$\$				Divalproex	DEPAKOTE, ER, SPRINKLES	UPDATED JUNE 2006	
\$\$\$\$\$				Tiagabine	GABITRIL		
\$\$\$\$\$	FDA APPROVED INDICATIONS ONLY			Gabapentin	NEURONTIN		
\$\$\$\$\$	FDA APPROVED INDICATIONS ONLY			Lamotrigene	LAMICTAL		
\$\$\$\$\$	FDA APPROVED INDICATIONS ONLY			Topiramate	TOPAMAX		
<b>Sodium Channel Inhibitors</b>							
G				Phenytoin	DILANTIN		
G				Carbamazepine	TEGRETOL		
\$\$\$\$\$				Carbamazepine XR	CARBATROL		
\$\$\$\$\$				Levetiracetam	KEPPRA		

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\$\$\$\$				Ethotoin	PEGANONE		
\$\$\$\$				Oxcarbazepine	TRILEPTAL		
<b>ANTIDEMENTIA</b>							
<b>Cholinesterase Inhibitors</b>							
\$\$\$\$				Donepezil Hcl	ARICEPT		
\$\$\$\$				Rivastigmine	EXELON		
<b>Antidementia Agents, Other</b>							
G				Ergoloid Mesylates	HYDERGINE		
<b>ANTIDEPRESSANTS</b>							
<b>MAO Inhibitors</b>							
\$\$\$\$				Phenelzine	NARDIL		
\$\$\$\$				Tranylcypromine	PARNATE		
<b>Reuptake Inhibitors</b>							
G				Citalopram	CELEXA		
G				Paroxetine 20 MG	PAXIL		
G	QL	10mg=#31 / 31 DS; 20mg=#62/31 DS	10mg & 20 mg Capsules ONLY	Fluoxetine	PROZAC		
\$\$\$\$	QL	#31 / 31 DS		Escitalpram Oxalate	LEXAPRO		
\$\$\$\$	QL	50mg=#16 / 31 DS	100mg=#62 / 31 DS	Sertraline	ZOLOFT		
\$\$\$\$	QL	#31 / 31 DS		Paroxetine (extended release)	PAXIL CR		
<b>Antidepressants, Other</b>							
G				Ciomiapramine	ANAFRANIL		
G				Amoxapine	ASENDIN		
G				Trazodone	DESYREL		
G				Amitriptyline	ELAVIL		
G				Perphenazine/Amitriptyline	ETRAFON, TRIAVIL		
G	QL	#93 / 31 DS		Amitriptyline/Chlordiazepoxide	LIMBITROL & LIMBITROL DS		
G				Maprotiline	LUDIOMIL		
G				Desipramine	NORPRAMIN		
G				Nortriptyline	PAMELOR		
G				Mirtazapine (immediate release)	REMERON		
G				Nefazodone Hcl	SERZONE		
G				Doxepin	SINEQUAN		
G				Imipramine	TOFRANIL		
G	QL	#248 / 31 DS		Bupropion (immediate and sustained release)	WELLBUTRIN, WELLBUTRIN SR		
\$\$\$\$	QL	#62 / 31 DS		Bupropion (extended release)	WELLBUTRIN XL		
<b>ANTIEMETICS</b>							
G	OTC: COVERED W/RX			Medizine	ANTIVERT		
G				Hydroxyzine HCl, Pamoate	ATARAX, VISTARIL		
G	OTC: COVERED W/RX			Diphenhydramine 25 mg, 50mg	BENADRYL (OTC)		
G				Prochlorperazine Tablets	COMPAZINE TABLETS		
G				Promethazine	PHENERGAN		
G				Metoclopramide	REGLAN		

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G				Chlorpromazine	THORAZINE	
G				Trimethobenzamide	TIGAN	
\$\$\$\$\$				Prochlorperazine	COMPAZINE SPANSULES	
\$\$\$\$\$\$	QL	4mg or 8mg=#12/ 31 DS; 24mg=#1/31 DS	Soln=100ml/ 31 DS	Ondansetron	ZOFRAN	Updated June 2006
<b>ANTIFUNGALS</b>						
G	QL	150MG = #1 / 31DS; 100MG = #14/ 31DS	200MG = #14/ 31DS	Fluconazole	DIFLUCAN 150mg	
G				Nystatin oral	MYCOSTATIN	
\$\$\$				Griseofulvin	GRISPEG, SUSP., MICROSIZE	
\$\$\$\$\$				Clotrimazole	MYCELEX TROCHE	
G				Ketoconazole	NIZORAL	
OTC	Covered with Rx			Terbinafine	LAMISIL AT(OTC)	
\$\$\$\$\$\$\$\$	PA			Terbinafine	LAMISIL	
<b>ANTIGOUT</b>						
G				Probenecid	BENEMID	
G				Colchicine/Probenecid	COL-BENEMID	
G				Colchicine	COLCHICINE	
G				Allopurinol	ZYLOPRIM	
<b>ANTIHISTAMINE DRUGS, ANTITUSSIVES, EXPECTORANTS, AND MUCOLYTIC AGENTS</b>						
<b>Antihistamine</b>						
G				Hydroxyzine HCl, Pamoate	ATARAX, VISTARIL	
OTC	COVERED WRX			Diphenhydramine 25 mg, 50mg	BENADRYL (OTC)	
				Loratadine	CLARITIN, REDITABS, SYRUP OTC; LORATADINE-OTC, LORATADINE-D, ALAVERT (OTC)	
OTC	COVERED WRX					
G				Carbinoxamine	PEDIOX SYR	
G				Cyproheptadine	PERIACTIN	
<b>Decongestant</b>						
OTC	Covered with Rx			Pseudoephedrine	SUDAFED(OTC)	
G				Phenylephrine	LUSONAL	
<b>Decongestant/ Expectorant</b>						
G				Guafenesin/Pseudoephedrine	DURASAL II, ENTEX PSE & GUAIFEN-PSE	
<b>Antihistamine/Decongestant</b>						
G				Brompheniramine/Pseudoephedrine	BROMFENEX PD, BROMAXEFED RF	
G				Brompheniramine/Phenylephrine	BROMFENEX PE, BROMFED, PD	
G				Carbinoxamine/Pseudoephedrine	CARDEC, ANDEHIST NR, PHENCLOR TANNATE	
OTC	COVERED WRX			Loratadine/Pseudoephedrine	CLARITIN-D OTC (RX required)	

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G				Chlorpheniramine / Phenylephrine	NUHIST , R-TANNA		
G				Promethazine/Phenylephrine	PHENERGAN VC		
G				Chlorpheniramine / Pseudoephedrine	SUDAL -12, PEDIOX CHEWABLE, DE-CONGESTINE, CARBAXEFED RF		
<b>Antitussives (Non-Narcotic)</b>	G			Promethazine/ Dextromethorphan	PHENERGAN DM		
	G			Benzonatate	TESSALON PERLES		
<b>Antitussives (Non Narcotic) / Expectorant</b>							
	OTC	COVERED W/RX		Dextromethorphan / Guaifenesin	SUDAL DM, ROBITUSSIN DM (OTC)		
<b>Antitussives (Non-Narcotic) / Antihistamine / Decongestant / Expectorant</b>							
	G			Brompheniramine/Pseudoephedrine/Dextromethorphan	ANDEHIST DM, BROMATANE DX, BROMAXEFED DM		
	G			Carbinoxamine/Pseudoephedrine/Dextromethorphan	CARDEC DM, CARBAXEFED DM, CARBOFED DM, RONDAMINE		
	G			Chlorpheniramine/Phenylephrine/Dextromethorphan	TRI-VENT DPC, ATUSS DR		
	\$\$\$			dextromethorphan /guaifenesin /phenylephrine HCl/ chlorpheniramine maleate	DONATUSSIN		
<b>Antitussives - Narcotic</b>	G			Hydrocodone	HYCODAN, TUSSIGON		
<b>Antitussives (Narcotic) / Antihistamine</b>	G			Codeine/ Promethazine liquid	PHENERGAN/CODEINE		
<b>Antitussives (Narcotic) / Decongestant</b>	G			Hydrocodone/Pseudoephedrine	DETUSSIN SOLUTION		
	G			Hydrocodone/Phenylephrine	LORTUSS HC LIQUID		
<b>Antitussives (Narcotic) / Antihistamine / Decongestant</b>							
	G			Hydrocodone/ Chlorpheniramine/ Phenylephrine	ATUSS HC, ATUSS MS, HISTUSSIN HC		
	G			Hydrocodone/ Chlorpheniramine/ Pseudoephedrine	HISTIMEX PV, HYDRON PSC LIQUID		
	G			Codeine/Chlorpheniramine/Pseudoephedrine	NOVAHIST DH		
	G			Codeine/ Promethazine /Phenylephrine/	PHENERGAN VC CODEINE		
<b>Antitussives (Narcotic) / Expectorant</b>	G			Hydrocodone / Pot. Guaiacolsulfate	ATUSS EX		
	G			Hydrocodone / Guaifenesin	HYCOSIN, HYCOTUSS & VI-Q-TUSS, CODICLEAR DH, ROBITUSSIN A-C, CHERATUSSIN AC, GANI- TUSS NR, HALOTUSSIN AC & MYTUSSIN AC		
	G			Codeine / Guaifenesin			

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<b>Antitussives (Narcotic) / Decongestant/ Expectorant</b>	G				Hydrocodone /Phenylephrine / Guaifenesin	ATUSS G, DONATUSSIN DC	
	G				Hydrocodone / Pseudoephedrine/ Guaifenesin	DRITUSS HD, MYTUSSIN DAC	
	G				Codeine / Pseudoephedrine/ Guaifenesin	ROBITUSSIN DAC, CHERATUSSIN DAC, HALOTUSSIN DAC & MYTUSSIN AC	
	G				Codeine / Phenylephrine/ Guaifenesin	EXETUSS-HC	
<b>ANTI-INFLAMMATORIES</b>							
<b>Glucocorticoids</b>							
G					Hydrocortisone	CORTEF	
G					Cortisone Acetate	CORTONE	
G					Dexamethasone	DECADRON	
G					Prednisone	DELTASONE	
G					Methylprednisolone	MEDROL	
G					Prednisolone Sodium Phosphate	ORAPRED, PEDIAPRED	
G					Prednisolone	PREDNISOLONE, PRELONE SYRUP	
\$\$\$\$					Betamethasone	CELESTONE	
\$\$\$\$\$					Fludrocortisone	FLORINEF	
<b>NSAIDS</b>							
G					Naproxen sodium	ANAPROX	
G					Flurbiprofen	ANSAID	
G					Diclofenac Potassium	CATAFLAM	
G					Sulindac	CLINORIL	
G					Oxaprozin	DAYPRO	
G					Salsalate SR	DISALCID, SALFLEX	
G					Diflunisal	DOLOBID	
G					Piroxicam	FELDENE	
G					Indomethacin, SR	INDOCIN, SR	
G					Etodolac	LODINE	
G		OTC: COVERED W/RX			Ibuprofen	MOTRIN	
G					Fenoprofen	NALFON	
G					Naproxen	NAPROSYN	
G					Ketoprofen	ORUDIS	
G					Nabumetone	RELAFEN	
G					Tolmetin	TOLECTIN	
G	QL		#20 / 31 DS	5 day supply/rx	Ketorolac	TORADOL	
G					Choline Magnesium Trisalicylate	TRILISATE	
G					Diclofenac	VOLTAREN	
<b>ANTIMIGRAINES</b>							
<b>Abortive</b>							
G					Ergotamine w/PB Belladonna	BEL-PHEN-ERGOT S	
G					Ergotamine/Caffeine	CAFERGOT	
G					Ergotamine Tartrate	ERGOSTAT	
G					APAP/Dichloralphenazone/Isometheptene	MIDRIN	
\$\$\$\$\$	QL		#12 / 31 DS	2 boxes of 6 tablets	Rizatriptan	MAXALT	
\$\$\$\$\$			8ml / 31 DS	2 boxes of 4ml	Dihydroergotamine mesylate	MIGRANAL	

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\$\$\$\$\$	QL	#12 / 31 DS	2 boxes of 6 tablets	Eletriptan	RELPAK	
\$\$\$\$\$\$	QL	#6 cartridges/ 31DS	3 boxes of 2 cartridges	Sumatriptan	IMITREX Inj	
\$\$\$\$\$\$	QL	#6 spray units/ 31 DS	1 box of 6 spray units	Sumatriptan	IMITREX Nasal Spray	
\$\$\$\$\$\$	QL	#9 / 31 DS	1 box of 9 tablets	Sumatriptan	IMITREX Tabs	
<b>Prophylactic</b>	G			Propranolol, SR	INDERAL, LA	
	\$\$\$\$\$			Divalproex	DEPAKOTE, ER	
<b>ANTIMYCOBACTERIALS</b>						
<b>Antituberculars</b>	G			Isoniazid	INH, ISONIAZID	
	G			Pyrazinamide	PYRAZINAMIDE	
	\$\$\$\$\$			Rifampin	RIFADIN	
<b>Antimycobacterials, Other</b>	\$\$\$\$\$			Dapsone	DAPSONE	
	\$\$\$\$\$			Rifabutin	MYCOBUTIN	
<b>ANTINEOPLASTICS</b>						
	The most common antineoplastics are listed below. Additional drugs may also be covered, please check with the plan.					
<b>Aromatase Inhibitors</b>	\$\$\$\$\$			Anastrozole	ARIMIDEX	
<b>Antimetabolites</b>	G			Hydroxyurea	HYDREA	
	G			Methotrexate	RHEUMATREX	
<b>Miscellaneous Antineoplastics</b>	\$\$\$			Mitotane	LYSODREN	
<b>Alkylating Agents</b>	G			Procarbazine	MATULANE	
	\$\$\$\$			Busulfan	MYLERAN, BUSULFEX	
	\$\$\$\$\$			Estramustine Phosphate Sodium	EMCYT	
	\$\$\$\$\$\$			Altretamine	HEXALEN	
	\$\$\$\$\$\$			Chlorambucil	LEUKERAN	
	\$\$\$\$\$\$			Cyclophosphamide	CYTOXAN	
	\$\$\$\$\$\$			Melphalan	ALKERAN	
	\$\$\$\$\$\$\$\$			Lomustine	CEENU	
<b>Antibiotics</b>	\$\$\$\$\$			Bleomycin	BLENOXANE	
	\$\$\$\$\$\$			Dactinomycin	COSMEGEN	
	\$\$\$\$\$\$			Mitomycin	MUTAMYCIN	
	\$\$\$\$\$\$\$\$			Daunorubicin Citrate Liposomal	DAUNOXOME	
<b>Antimetabolites</b>	G			Allopurinol	ZYLOPRIM	
	\$\$\$\$			Mercaptopurine	PURINETHOL	

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\$\$\$\$				Thioguanine	TABLOID		
\$\$\$\$\$				Cytarabine			
\$\$\$\$\$\$				Fluorouracil	ADRUCIL		
\$\$\$\$\$\$	PA			Capecitabine	XELODA		
<b>Antimitotic Agents</b>							
\$\$\$\$				Vinblastine Sulfate	VELBAN		
\$\$\$\$				Vincristine Sulfate	VINCASAR		
\$\$\$\$				Vinorelbine Tartrate	NAVELBINE		
<b>Biological Response Modifiers</b>							
\$				Levamisole HCl	ERGAMISOL		
<b>Epipodophyllotoxins</b>							
\$\$\$\$\$				Etoposide	VEPESID, TOPOSAR, ETOPOPHOS		
<b>Platinum Coordination Complex</b>							
\$\$\$\$				Carboplatin	PARAPLATIN		
\$\$\$\$				Cisplatin	PLATINOL		
\$\$\$\$\$				Oxaliplatin	ELOXATIN		
<b>Misc.</b>							
G				Leucovorin Calcium	WELLCOVORIN		
\$\$\$\$\$				IMMU GLOBULIN,GAMMA (IGG)	BAYGAM		
\$\$\$\$\$				HEPATITIS B IMMUNE GLOBULIN	BAYHEP B		
\$\$\$\$\$				RABIES IMMUNE GLOBULIN/THIM	BAYRAB		
\$\$\$\$\$				RHO(D) IMMUNE GLOBULIN	BAYRHO-D, WINRHO		
\$\$\$\$\$				TETANUS IMMUNE GLOBULIN	BAYTET		
<b>ANTIPARASITICS</b>							
<b>Anthelmintics</b>							
\$\$\$				Pyrantel pamoate	ANTIMINTH		
\$\$\$	QL	#2 tablets / 31 DS		Mebendazole	VERMOX		
\$\$\$\$\$				Thiabendazole	MINTEZOL		
<b>Antiprotozoals</b>							
G				Hydroxychloroquine	PLAQUENIL		
\$				Pyrimethamine	DARAPRIM		
\$\$\$				Primaquine	PRIMAQUINE		
\$\$\$\$\$\$				Mefloquine	LARIAM		
\$\$\$\$\$\$				Atovaquone/Proguanil	MALARONE		
<b>Pediculicides/Scabicides</b>							
G				Permethrin	NIX, RID- COVERED WITH A RX		
\$\$\$	QL	#60 ml / 31 DS		Malathion	OVIDE		
\$\$\$\$				Permethrin	ELIMITE		
\$\$\$\$\$				Crotamiton	EURAX LOTION		
<b>ANTIPARKINSON AGENTS</b>							
<b>COMT Inhibitors</b>							
<b>Dopamine Agonists</b>							
G				Carbidopa/Levodopa	SINEMET		
G				Carbidopa/Levodopa CR	SINEMET, -CR		

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G	QL	#62 / 31 DS		Amantadine	SYMMETREL	
\$\$\$\$				Pramipexole Di-Hcl	MIRAPEX	
\$\$\$\$				Ropinirole Hcl	REQUIP	
\$\$\$\$				Pergolide	PERMAX	
<b>Antiparkinson Agents, Other</b>						
G				Trihexyphenidyl	ARTANE	
G				Benzotropine	COGENTIN	
G				Selegiline	ELDEPRYL	
G				Bromocriptine	PARLODEL	
<b>ANTIPSYCHOTICS</b>						
<b>Non-Phenothiazines</b>						
G				Haloperidol	HALDOL, HALDOL DECANOATE	
G				Loxapine	LOXITANE	
G				Thiothixene	NAVANE	
\$\$\$\$				Molindone	MOBAN	
\$\$\$\$				Pimozide	ORAP	
<b>Non-Phenothiazines, Atypical</b>						
\$\$\$\$				Aripiprazole	ABILIFY	
\$\$\$\$				Clozapine	CLOZARIL	
\$\$\$\$				Ziprasidone	GEODON	
\$\$\$\$				Risperidone	RISPERDAL	
\$\$\$\$\$\$				Quetiapine	SEROQUEL	
\$\$\$\$\$\$				Olanzapine	ZYPREXA	
<b>Phenothiazines</b>						
G				Prochlorperazine Tablets	COMPAZINE TABLETS	
G				Thioridazine	MELLARIL	
G				Fluphenazine Decanoate	PROLIXIN	
G				Trifluoperazine	STELAZINE	
G				Chlorpromazine	THORAZINE	
G				Perphenazine	TRILAFON	
\$\$\$\$				Mesoridazine	SERENTIL	
<b>ANTIVIRALS</b>						
<b>CMV Agents</b>						
\$\$\$\$				Ganciclovir	CYTOVENE	
<b>Antiherpetic Agents</b>						
G				Acyclovir	ZOVIRAX	
\$\$\$\$				Valacyclovir	VALTREX	

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<b>Anti-HIV Agents, Fusion Inhibitors</b>	\$\$\$\$\$	QL	1 kit / 31 DS		Enfuvirtide	FUZEON	
<b>Anti-HIV Agents, Non-nucleoside Reverse Transcriptase Inhibitors</b>	\$\$\$\$				Delavirdine Mesylate	RESCRIPTOR	
	\$\$\$\$\$				Nevirapine	VIRAMUNE	
	\$\$\$\$\$				Efavirenz	SUSTIVA	
<b>Non-nucleoside Reverse Transcriptase Inhibitors</b>	\$\$\$\$\$				Lamivudine (3TC)	EPIVIR	
	\$\$\$\$\$				Zalcitabine (DDC)	HIVID	
	\$\$\$\$\$				Zidovudine (AZT)	RETROVIR	
	\$\$\$\$\$				Didanosine (DDI)	VIDEX	
	\$\$\$\$\$				Tenofovir Disoproxil Fumarate	VIREAD	
	\$\$\$\$\$				Stavudine (D4T)	ZERIT	
	\$\$\$\$\$				Abacavir	ZIAGEN	
	\$\$\$\$\$				Zidovudine/Lamivudine	COMBIVIR	
	\$\$\$\$\$	QL	#31 / 31 DS		Emtricitabine	EMTRIVA	
	\$\$\$\$\$	QL	#62 / 31 DS		Abacavir Sulfate/Lamivudine/Zidovudine	TRIZIVIR	
	\$\$\$\$\$	QL	#31 / 31 DS		Emtricitabine/ Tenofovir	TRUVADA	
	\$\$\$\$\$	QL	#31 / 31 DS		Abacavir/ Lamivudine	EPZICOM	
<b>Anti-HIV Agents, Protease Inhibitors</b>	\$\$\$\$\$				Indinavir	CRIVAN	
	\$\$\$\$\$				Saquinavir	FORTOVASE	
	\$\$\$\$\$				Saquinavir	INVIRASE	
	\$\$\$\$\$	QL	#124 / 31 DS		Lopinavir/ritonavir	KALETRA	
	\$\$\$\$\$				Ritonavir	NORVIR	
	\$\$\$\$\$	QL	#310 / 31 DS		Nelfinavir Mesylate	VIRACEPT	
	\$\$\$\$\$				Amprenavir	AGENERASE	
	\$\$\$\$\$	QL	#124 / 31 DS		Fosamprenavir	LEXIVA	
	\$\$\$\$\$	QL	#62 / 31 DS		Atazanavir Sulfate	REYATAZ	
<b>Anti-Influenza Agents</b>	G				Rimantadine HCL	FLUMADINE	
	G				Amantadine	SYMMETREL	
	G	PA, QL	#10 capsules/31 DS; 75ml/31 DS	#20caps/6 months; 150ml/6 months	Oseltamivir	TAMIFLU	
<b>Antivirals, Other</b>	\$\$\$				Ribavirin	COPEGUS	
<b>ANXIOLYTICS</b>							

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<b>Benzodiazepines</b>	G				Lorazepam	ATIVAN	
	G				Clonazepam	KLONOPIN	
	G				Chlordiazepoxide	LIBRIUM	
	G				Oxazepam	SERAX	
	G				Diazepam	VALIUM	
	G				Alprazolam	XANAX	
	G				Clorazepate	TRANXENE	
<b>Anxiolytics, Other</b>	G				Buspirone	BUSPAR	
<b>AUTONOMIC AGENTS</b>							
<b>Parasympatholytics</b>	\$\$\$\$\$				Pyridostigmine	MESTINON	
<b>Parasympathomimetics</b>	G				Bethanechol	URECHOLINE	
	\$\$\$\$\$				Neostigmine Bromide	PROSTIGMIN	
<b>Sympathomimetics</b>	G				Methyldopa	ALDOMET	
	G				Methyldopa/HCTZ	ALDORIL	
	G				Clonidine	CATAPRES	
	G				Clonidine HCL/Chlorthalidone	CLORPRES	
	G				Guanfacine	TENEX	
	\$\$\$\$\$	QL	#2 injectors/ 31 DS		Epinephrine	EPIPEN, Jr	
<b>BIPOLAR AGENTS</b>							
	G				Lithium Carbonate	ESKALITH, LITHOBID	
	\$				Lithium Carbonate	ESKALITH CR	
	\$\$\$\$\$				Divalproex	DEPAKOTE, ER	
<b>BLOOD GLUCOSE REGULATORS</b>							
<b>Antihypoglycemics</b>	G				Glyburide	DIABETA, MICRONASE	
	G				Glyburide/Metformin	GLUCOVANCE	
	G				Chlorpropamide	DIABINESE	
	G				Glipizide	GLUCOTROL	
	G				Glyburide, micronized	GLYNASE PRESTAB	
	\$				Glimepiride	AMARYL	
	\$	QL	#248 / 31 DS		Metformin	GLUCOPHAGE, XR, FORTAMET	
	\$				Glipizide XL	GLUCOTROL XL	
	\$\$\$\$				Acarbose	PRECOSE	
	\$\$\$\$				Repaglinide	PRANDIN	
	\$\$\$\$\$\$				Rosiglitazone/Metformin HCL	AVANDAMET	
	\$\$\$\$\$\$				Rosiglitazone	AVANDIA	
	\$\$\$\$\$\$				Rosiglitazone/Glimeprimide	AVANDARYL	
<b>Insulins</b>	\$\$\$				Human Insulin	NOVOLIN, PENS	

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\$\$\$\$				Insulin Gargine	LANTUS	
\$\$\$\$				Human Insulin	NOVOLOG	
<b>Glucose Meters and Strips</b>						
G	QL	#100 / 31 DS		Lancets	ACCU-CHEK, ASCENSIA	
G	QL	#100 / 31 DS		Syringes	ACCUSURE, AIMSCO, B-L, CARE ONE ULTIGUARD, EXEL, FIRST CHOICE, RELION, SURE-JECT, STORE BRAND	
\$\$\$\$	QL	#100 / 31 DS		Test strips	ACCU-CHEK, ASCENSIA	
\$\$\$\$	Also available thru mail order: Accu-Chek 1-888-744-3671; Ascensia 1-877-229-3777			Glucometer	ACCU-CHEK, ASCENSIA	
<b>Diabetic Miscellaneous</b>						
\$\$\$\$\$	QL	#2 syringes / 31 DS		Glucagon	GLUCAGON	
OTC	QL	#100 / 31 DS		Urine Glucose Test Strips	CHEMSTRIP BG, CLINISTIX, DIASTIX	
<b>BLOOD PRODUCTS, MODIFIERS, EXPANDERS</b>						
<b>Anticoagulants</b>						
G				Warfarin Sodium	COUMADIN	
\$\$\$\$\$\$\$	QL	#20 syringes/ 31 DS		Enoxaparin	LOVENOX	
<b>Blood Formation Products</b>						
<b>Platelet Aggregation Inhibitors</b>						
G				Aspirin	ASPIRIN	
G				Dipyridamole	PERSANTINE	
\$\$\$\$\$\$\$\$				Anagrelide	AGRYLIN	
\$\$\$\$\$\$\$\$				Clopidogrel	PLAVIX* (try aspirin first)	
<b>Hematological Agent, Other</b>						
G				Pentoxifylline	TRENTAL	
<b>CARDIOVASCULAR AGENTS</b>						
<b>ACE Inhibitors</b>						
G				Captopril	CAPOTEN	
G				Captopril/HCTZ	CAPOZIDE	
G				Benazepril	LOTENSIN	
G				Benazepril/ HCT	LOTENSIN HCT	
G				Lisinopril	PRINIVIL/ZESTRIL	
G				Lisinopril/HCTZ	PRINIZIDE	
\$\$				Enalapril / HCTZ	VASORETIC	
\$\$				Enalapril	VASOTEC	
<b>Angiotensin II Receptor Blocker</b>						
\$\$\$	Use ACE-I 1st			Olmesartan	BENICAR	
\$\$\$	Use ACE-I 1st			Olmesartan	BENICAR HCT	
\$\$\$\$	Use ACE-I 1st; QL	#31 / 31 DS		Telmisartan	MICARDIS	
\$\$\$\$	Use ACE-I 1st; QL	#62 / 31 DS		Telmisartan	MICARDIS HCT	
<b>Alpha-Adrenergic Agonists</b>						
G				Methyldopa/HCTZ	ALDORIL	
G				Clonidine	CATAPRES	

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G				Clondine HCL/Chlorthalidone	CLOPRES		
G				Guanfacine	TENEX		
<b>Alpha-Adrenergic Blocking Agents</b>							
G				Doxazosin	CARDURA		
G				Terazosin	HYTRIN		
G				Prazosin	MINIPRESS		
<b>Antiarrhythmics</b>							
G				Amiodarone	CORDARONE, PACERONE		
G				Mexiletine	MEXITIL		
G				Disopyramide, CR	NORPACE, CR		
G				Procainamide, SR	PRONESTYL, PROCAN SR		
G				Quinidine Gluconate	QUINAGLUTE		
G				Propafenone	RHYTHMOL		
\$\$\$				Quinidine Sulfate SR	QUINIDEX		
\$\$\$\$\$				Sotalol	BETAPACE/AF		
\$\$\$\$\$	QL	#248 / 31 DS		Flecainide	TAMBOCOR		
\$\$\$\$\$				Tocainide	TONOCARD		
<b>Beta-adrenergic Blocking Agents</b>							
G				Timolol	BLOCADREN		
G				Nadolol	CORGARD		
G				Propranolol/HCTZ	INDERIDE		
G				Metoprolol Tartrate	LOPRESSOR		
G				Labetalol Hcl	NORMODYNE, TRANDATE		
G				Atenolol / Chlorthalidone	TENORETIC		
G				Atenolol	TENORMIN		
G				Pindolol	VISKEN		
G				Bisoprolol Fumarate	ZEBETA		
G				Bisoprolol/HCTZ	ZIAC		
\$\$\$	CHF ONLY			Metoprolol SR	TOPROL XL		
\$\$\$\$\$	CHF ONLY			Carvedilol	COREG		
<b>Calcium Channel Blocking Agents</b>							
G				Verapamil, SR	CALAN, CALAN SR		
G				Nifedipine, SR	PROCARDIA, XL; ADALAT CC		
\$				Nisoldipine	SULAR		
\$\$\$				Diltiazem, ER, HCL	CARTIA XT,DILTIA XT,DILTIAZEM ER,HCL		
\$\$\$\$\$				Amlodipine	NORVASC		
\$\$\$\$\$				Amlodipine/Benazepril	LOTREL		
<b>Direct Cardiac Inotropics</b>							
G				Digoxin	LANOXICAPS, LANOXIN		
<b>Diuretics</b>							
G				Spironolactone/HCTZ	ALDACTAZIDE		
G	QL	#248 / 31 DS		Spironolactone	ALDACTONE		
G				Bumetanide	BUMEX		
G				Triamterene/HCTZ	DYAZIDE, MAXZIDE, -25		

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G	12.5mg capsules also covered			Hydrochlorothiazide	HYDRODIURIL	
G				Chlorthalidone	HYGROTON	
G				Furosemide	LASIX	
G				Indapamide	LOZOL	
G				Amiloride/HCTZ	MODURETIC	
<b>Dyslipidemics</b>						
G				Gemfibrozil	LOPID	
G	QL	20mg=#31 / 31 DS	40mg=#62 / 31 DS	Lovastatin	MEVACOR	
G				Cholestyramine	QUESTRAN, QUESTRAN LIGHT	
OTC	COVERED W/RX			Niacin OTC	SLO NIACIN-OTC SUSTAINED RELEASE	
\$\$\$	QL	#31 / 31 DS		Fluvastatin	LESCOL, LESCOL XL	
\$\$\$\$\$	QL	#31 / 31 DS		Simvastatin	ZOCOR	
<b>Vasodilators</b>						
G				Hydralazine	APRESOLINE	
G				Isosorbide mononitrate (extended release)	IMDUR, MONOKET	
G				Isosorbide Dinitrate, SR	ISORDIL, DILATRATE SR	
G	ORAL FORM ONLY			Minoxidil	LONITEN	
G				Prazosin	MINIPRESS	
G				Nitroglycerin ointment, patches, SR, tablets, sublingual	NITROGLYCERIN, NITREK, NITRO-DUR, NITROQUICK, NITRO-BID, NITROL OINTMENT, DEPONIT, MINITRAN, NITREK, MINITRAN, TRANSDERM-NITRO, NITRODISC, NITROSTAT	
<b>Miscellaneous</b>						
\$\$				Mecamylamine	INVERSINE	
<b>CENTRAL NERVOUS SYSTEM AGENTS</b>						
<b>Amphetamines</b>						
G				Amphet Asp/Amphet/D-Amphet	ADDERALL	
\$\$\$\$\$	QL	#31 / 31 DS		Amphet Asp/Amphet/D-Amphet	ADDERALL XR	
G				Pemoline	CYLERT	
G				Dextroamphetamine	DEXEDRINE	
\$\$\$\$\$				Dextroamphetamine	DEXEDRINE SPANSULE	
G				D-Amphetamine Sulfate	DEXTRORSTAT	
G				Methylphenidate	RITALIN, METHYLIN (TABS ONLY)	
\$\$\$\$\$	QL	#31 / 31 DS		Methylphenidate - extended release	CONCERTA, RITALIN SR	
<b>Other</b>						
G				Phenobarbital	PHENOBARBITAL	
<b>Smoking Cessation Agents</b>						
G				Nicotine Gum	NICORETTE	
G				Nicotine Transdermal	NICOTROL	
G				Bupropion ER/SR	ZYBAN	

ABD - Preferred Drug List 2006

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Cost Index	Quality Indicator	Quantity / Therapy Limitation	Specific Limitations (Optional Info)	Generic Name	Brand Name	Updates	
<b>DENTAL AND ORAL AGENTS</b>							
G				Triamcinolone Acetate	KENALOG IN ORABASE		
G				Sodium Fluoride drops, tablets	LURIDE		
G				Chlorhexidine	PERIDEX & PERIOGARD		
G				Sodium Fluoride	PREVIDENT 5000 PLUS & SF 5000 PLUS		
\$\$\$\$				Pilocarpine oral	SALAGEN		
<b>DERMATOLOGICAL AGENTS</b>							
<b>Dermatological Anesthetics</b>							
G				Lidocaine Topical	XYLOCAINE		
\$\$				Lidocaine/Prilocaine	EMLA		
<b>Dermatological Antibacterials</b>							
G				Bacitracin	AK-TRACIN		
G				Clindamycin lotion, gel, solution	CLEOCIN T		
G				HC/Neosporin/Polymyxin	CORTISPORIN CREAM, OINTMENT		
G				Hydrocortisone/Iodoquinol	DERMAZENE		
G				Erythromycin 2% gel, solution	EMGEL, A/T/S		
G				Gentamicin	GARAMYCIN CREAM, OINTMENT		
G				Mupirocin Ointment	BACTROBAN OINTMENT		
G	QL	240gm / 31DS		Silver Sulfadiazine 1%	SILVADENE CREAM		
G				Erythromycin pads, solution	T-STAT		
\$\$				Sulfacetamide/Sulfur	SULFACET-R		
OTC	COVERED W/RX			Topical Antibiotic	NEOSPORIN (OTC) creams, ointments		
OTC	COVERED W/RX			Iodine	BETADINE		
<b>Dermatological Antifungals</b>							
G	QL	150MG = #1 / 31DS; 100MG = #14/ 31DS	200MG = #14/ 31DS	Fluconazole 150mg	DIFLUCAN		
OTC	COVERED W/RX			Clotrimazole	LOTRIMIN, OTC		
G				Clotrimazole/Betamethasone	LOTRISONE		
G				Nystatin/Triamcinolone	MYCOLOG TOPICAL		
G				Nystatin topical	MYCOSTATIN TOPICAL		
G				Econazole	SPECTAZOLE		
\$\$				Sulconazole cream, solution	EXELDERM		
OTC	COVERED W/RX			Ketoconazole	NIZORAL CREAM (USE OTC)		
OTC	Covered with Rx			Tolnaftate	TINACTIN(OTC)		
OTC	Covered with Rx			Miconazole	MONISTAT DERM(OTC)		
<b>Group 1 Anti-Inflammatory Agents</b>							
G				Clobetasol emollient, cream, oint, gel 0.05%	CORMAX, TEMOVATE		
G				Betamethasone Dipropionate	DIPROLENE		
G				Betamethasone Diprop/Prop Gly	DIPROLENE AF		
G				Diflorasone Diacetate Cream	PSORCON		
<b>Group 2 Anti-Inflammatory Agents</b>							
G				Amcinonide	CYCLOCORT		
G				Betamethasone dipropionate cream, oint 0.05%	DIPROSONE		
G				Triamcinolone acetone oint 0.1%	KENALOG		

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	G				Fluocinonide 0.05%	LIDEX	
	G				Diforasono Diacetate Cream	MAXIFLOR	
	G				Fluocinolone cream 0.2%	SYNALAR HP	
	G				Betamethasone valerate oint 0.1%	VALISONE	
<b>Group 3 Anti-Inflammatory Agents</b>	G				Triamcinolone cream, oint 0.1%	ARISTOCORT	
	G				Mometasone Furoate	MOMETASONE	
	G				Fluocinolone cream, oint 0.025%	SYNALAR	
	G				Desoximetasone cream 0.05%	TOPICORT	
	G				Betamethasone valerate cream 0.1%	VALISONE	

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G				Fluticasone Propionate	CUTIVATE		
G				Hydrocortisone valerate cream, oint 0.2%	WESTCORT		
<b>Group 4 Anti-Inflammatory Agents</b>							
G				Triamcinolone 0.025%	ARISTOCORT		
G				Fluocinolone cream, soln 0.01%	SYNALAR		
G				Betamethasone valerate 0.01%	VALISONE LP		
G				Hydrocortisone	WESTCORT		
<b>Group 5 Anti-Inflammatory Agents</b>							
G				Desonide	DESOWEN		
G				Hydrocortisone	HYTONE		
G				Alclometasone dipropionate cream, oint	ACLOVATE		
G				Triamcinolone	ARISTOCORT		
<b>Dermatological Antipruritic</b>							
\$\$\$\$				Hydrocortisone intrarectal foam	PROCTOFOAM		
\$\$\$\$				Pramoxine/ Hydrocortisone	PROCTOFOAM HC		
<b>Dermatological Keratolytics</b>							
G				Benzoyl Peroxide	BENZAC AC, DESQUAM		
G				Erythromycin/Benzoyl Peroxide	BENZAMYCIN		
G	OTC: COVERED WITH RX			Benzoyl Peroxide Topical	BENZOYL PEROXIDE, ACNE-10 (OTC)		
OTC	OTC: COVERED WITH RX			Salicylic Acid	SALAC (OTC)		
<b>Dermatological Miotic Inhibitors</b>							
G				Selenium Sulfide 2%	SELSUN		
\$\$\$				Cloroxine	CAPITROL		
\$\$\$\$				Podoflox	CONDYLOX		
\$\$\$\$\$				Fluorouracil	EFUDEX, FLUOROPLEX		
<b>Dermatological Retinoids</b>							
G	ST, QL, AGE	#62 / 31 DS. Must use 1st line topical acne products, i.e. Cleocin-T, Emgel, T-Stat	Duration of Therapy: 20 weeks. Not FDA indicated for < 12 years old	Isotretinoin	AMNESTEEM		
\$\$\$\$\$	Age	Covered for <21 years of age ONLY		Tretinoin Topical	AVITA		
\$\$\$\$\$\$\$\$\$				Acitretin	SORIATANE		
<b>Dermatological Tar Derivatives</b>							
\$\$\$\$\$				Anthralin	DRITHOCREME		
OTC	OTC: COVERED WITH RX			Coal tar	DOAK (OTC0)		
<b>Dermatological Vitamin D Analogs</b>							
\$\$\$\$\$				Calcipotriene	DOVONEX		
<b>Dermatological Agents, Other</b>							
G				Lactic Acid Lotion	AMLACTIN (OTC)		
G				Capsaicin	CAPSAICIN		

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G				Hydrocortisone/Iodoquinol	DERMAZENE	
G				Aluminum Chloride Hexahydrate	DRYSOL	
G				Hydroquinone	LUSTRA	
\$\$\$\$				Podofilox	CONDYLOX	
\$\$\$\$\$				Fluorouracil	EFUDEX, FLUOROPLEX	
\$\$\$\$\$				Nitrofurazone	FURACIN	
\$\$\$\$\$				Beta-Carotene	SOLATENE	
\$\$\$\$\$	QL	#30gm/ 31 DS		Tazarotene	TAZORAC	
\$\$\$\$\$\$\$\$	ST, QL	#30gm/ 31 DS	First try a steroid for 4 weeks	Pimecrolimus	ELIDEL	
\$\$\$\$\$\$\$\$				Acitretin	SORIATANE	
\$\$\$\$\$\$\$\$	PA			Imiquimod	ALDARA	
\$\$\$\$\$\$\$\$	PA			Methoxsalen	OXSORALEN	
\$\$\$\$\$\$\$\$	PA			Methoxsalen	OXSORALEN-ULTRA	
\$				Urea	GLADASE,C	
<b>DETERRENENTS / REPLACEMENTS</b>						
<b>Alcohol Deterrents</b>						
G				Disulfiram	ANTABUSE	
<b>ENZYME REPLACEMENTS / MODIFIERS</b>						
G				Pancreatin	LIPASE	
G				Pancrelipase	LIPRAM, PANCREASE MT, CREON, KU-ZYME, ULTRASE, PANCREASE, PANOKASE, VIOKASE, PANCRELIPASE & PANCREATIC ENZYME, CREON	
<b>EYE, EAR, NOSE, AND THROAT (EENT) PREPARATIONS</b>						

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<b>Nasal Corticosteroids</b>	G				Fluticasone Propionate	FLONASE	Updated June 2006
	\$\$\$\$\$				Mometasone Furate	NASONEX	
<b>Other Nasal Products</b>	\$\$\$				Cromolyn Sodium (OTC)	NASALCROM SPRAY (OTC)	
	\$\$\$\$\$				Azelastine	ASTELIN	
<b>GASTROINTESTINAL AGENTS</b>							
<b>Antispasmodics, Gastrointestinal</b>	G				Dicyclomine	BENTYL	
	G				Hyoscyamine, Hyoscyamine Sulfate	HYOSPAZ, LEVIBID	
	G				Loperamide	IMODIUM A-D	
	G				L-Hyoscyamine	LEVSIN, LEVSINEX	
	G				Diphenoxylate/Atropine	LOMOTIL	
	G				Paregoric	PAREGORIC	
	G				Proprantheline	PROBANTHINE	
	G				Bethanechol	URECHOLINE	
<b>H2 Blocking Agents</b>	G				Famotidine	PEPCID	
	G				Cimetidine	TAGAMET	
	G				Ranitidine Tablets ONLY	ZANTAC TABLETS, SYRUP	UPDATED JUNE 2006
<b>Protectants</b>	G				Sucralfate	CARAFATE	
	\$\$\$\$\$				Misoprostol	CYTOTEC	
<b>Proton Pump Inhibitors</b>	OTC	COVERED W/RX			Omeprazole	PRILOSEC TABLETS OTC	
<b>Gastrointestinal Agents, Others</b>	G				Ursodiol	ACTIGALL	
	G				Lactulose	CHRONULAC, ENULOSE, CEPHULAC & CONSTULOSE	
	G				Oral Colon Lavage Solution	GOLYTELY, NULYTELY	
	G	QL	#527gm / 31 DS		Polyethylene Glycol	GLYCOLAX, MIRALAX	
	OTC	COVERED W/RX			Docusate Sodium	COLACE	
	OTC	COVERED W/RX			Antacids	MAALOX, MYLANTA (OTC)	
	OTC	COVERED W/RX			Laxatives	DUCOLAX, EXLAX (OTC)	
	OTC	COVERED W/RX			Lactase	LACTAID	
<b>GENITOURINARY AGENTS</b>							
<b>Antispasmodics, Urinary</b>	G				Oxybutynin	DITROPAN	
	G				Belladonna/Methylene Blue	URISED	
	\$\$\$\$\$				Tolteronide	DETROL LA	
	\$\$\$\$\$				Solifenacin	VESICARE	Updated June 2006
<b>Benign Prostatic Hypertrophy Agents</b>	G				Doxazosin	CARDURA	

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G				Terazosin	HYTRIN		
G				Prazosin	MINIPRESS		
G				Finasteride	PROSCAR		
\$\$\$				Dutasteride	AVODART		
<b>HORMONAL AGENTS, STIMULANT / REPLACEMENT / MODIFYING</b>							
<b>Adrenal Topical</b>							
<b>Group 1 Anti-Inflammatory Agents</b>							
G				Clobetasol emollient, cream, oint, gel 0.05%	CORMAX, TEMOVATE		
G				Betamethasone Dipropionate	DIPROLENE		
G				Betamethasone Diprop/Prop Gly	DIPROLENE AF		
G				Diforason Diacetate Cream	PSORCON		
<b>Group 2 Anti-Inflammatory Agents</b>							
G				Amcinonide	CYCLOCORT		
G				Betamethasone dipropionate cream, oint 0.05%	DIPROSONE		
G				Triamcinolone acetonide oint 0.1%	KENALOG		
G				Fluocinonide 0.05%	LIDEX		
G				Diforason Diacetate Cream	MAXIFLOR		
G				Fluocinolone cream 0.2%	SYNALAR HP		
G				Betamethasone valerate oint 0.1%	VALISONE		
<b>Group 3 Anti-Inflammatory Agents</b>							
G				Triamcinolone cream, oint 0.1%	ARISTOCORT		
G				Mometasone Furoate	MOMETASONE		
G				Fluocinolone cream, oint 0.025%	SYNALAR		
G				Desoximetasone cream 0.05%	TOPICORT		
G				Betamethasone valerate cream 0.1%	VALISONE		
G				Fluticasone Propionate	CUTIVATE		
G				Hydrocortisone valerate cream, oint 0.2%	WESTCORT		
<b>Group 4 Anti-Inflammatory Agents</b>							
G				Triamcinolone 0.025%	ARISTOCORT		
G				Fluocinolone cream, soln 0.01%	SYNALAR		
G				Betamethasone valerate 0.01%	VALISONE LP		
G				Hydrocortisone	WESTCORT		
<b>Group 5 Anti-Inflammatory Agents</b>							
G				Desonide	DESOWEN		
G				Hydrocortisone	HYTONE		
G				Alclometasone dipropionate cream, oint	ACLOVATE		

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	G				Triamcinolone	ARISTOCORT	
<b>Adrenal Oral</b>	G				Hydrocortisone	CORTEF	
	G				Cortisone Acetate	CORTONE	
	G				Dexamethasone	DECADRON	
	G				Prednisone	DELTASONE	
	G				Methylprednisolone	MEDROL	
	G				Prednisolone Sodium Phosphate	ORAPRED, PEDIAPRED	
	G				Prednisolone	PREDNISOLONE, PRELONE SYRUP	
	\$\$\$\$				Betamethasone	CELESTONE	
	\$\$\$\$\$				Fludrocortisone	FLORINEF	
<b>Parathyroid / Metabolic Bone Disease Agents/Osteoarthritis</b>						DIDRONEL	
	\$\$\$\$\$				Etidronate Disodium		
	\$\$\$\$\$				Alendronate	FOSAMAX	
	\$\$\$\$\$\$				Risedronate	ACTONEL	
	\$\$\$\$\$\$				Calcitonin	MIACALCIN	
	\$\$\$\$\$\$\$\$				Raloxifene	EVISTA	
<b>Pituitary</b>	\$\$\$\$\$				Desmopressin	DDAVP NASAL SPRAY	
	\$\$\$\$\$\$\$\$	PA			Desmopressin	DDAVP TABLETS	
<b>Prostaglandins</b>	\$\$\$\$\$				Misoprostol	CYTOTEC	
<b>Androgens</b>	G				Danazol	DANOCRINE	
	G				Fluoxymesterone	HALOTESTIN	
	G				Testosterone Cypionate/Enanthate	DEPO-TESTOSTERONE	
	G				Methyltestosterone	METANDREN	
	\$\$\$\$\$	PA, QL	62 packets/31 DS		Topical Testosterone	ANDROGEL	
	\$\$\$\$\$				Testolactone	TESLAC	
	\$\$\$\$\$\$\$\$	PA			Oxandrolone	OXANDRIN	
<b>Estrogens</b>	G				Estradiol patch	CLIMARA	
	G				Estradiol tablets	ESTRACE, ESTINYL	
	G				Esterified Estrogens	ESTRATAB, MENEST	
	G				Estropipate	OGEN & ORTHO-EST	
	\$\$\$				Conjugated Estrogens	PREMARIN, PREMARIN CREAM	
<b>Estrogen/Progestin combination</b>							
	\$\$\$				Conjugated Estrogens/Medroxyprogesterone	PREMPHASE, PREMPRO	
<b>Estrogen/Androgen combination</b>							
	G				Methyltestosterone/Estrogen	ESTRATEST, H.S.	
<b>Oral Contraceptives</b>							
	G				Desogestrel 0.15/Ethinyl Estradiol 0.03	APRI	
	G				Levonorgestrel .1/Ethinyl Estradiol .02	AVIANE, LESSINA	
	G				Norethindrone	CAMILA, ERRIN, NORA-BE	

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Cost Index	Quality Indicator	Quantity / Therapy Limitation	Specific Limitations (Optional Info)	Generic Name	Brand Name	Updates
G				Ethinyl estradiol/ Desogestrel .15	KARIVA	
G				Levonorgestrel .15/Ethinyl Estrodiol .03	LEVORA, PORTIA	
G				Norgestrel 0.3/Ethinyl Estradiol 0.03	LOW-OGESTREL, CRYSELLE	
G				Ethinyl estradiol/ Norethindrone acetate	MICROGESTIN Fe 1/20, JUNEL Fe 1/20	
G				Ethinyl estradiol/ Norethindrone acetate	MICROGESTIN Fe 1.5/30; 1/20, JUNEL Fe 1.5/30; 1/20	
G				Norethindrone/Ethinyl Estradiol	NECON 1/35, NORTREL 1/35,	
G				Norethindrone/Ethinyl estradiol	NECON 10/11	
G				Ethinyl Estradiol/ Norethindrone	NECON 7/7/7, NORTREL 7/7/7	
G				Ethinyl estradiol/ Norgestimate	SPRINTEC	
G				Ethinyl Estradiol/ Norgestimate	TRINESSA, TRI-SPRINTEC	
G				Levonorgestrel/Ethinyl Estradiol	TRIVORA, ENPRESSE	
G				Ethinyl Estradiol/Desogestrel	VELIVET	
G				Ethinyl Estradiol/Desogestrel	ZOVIA 1/35	
\$\$\$				Norethindrone Acetate/Ethinyl Estradiol	LOESTRIN, FE	
<b>Contraceptives, Other</b>						
\$\$\$	QL	#2 / 365 DS		Diaphragm	KORO-FLEX	
\$\$\$				Etonogestrol/Ethinyl Estradiol	NUVARING	
\$\$\$				6 mg Norelgestromin/0.75 mg ethinyl estradiol	ORTHO EVRA PATCH	
\$\$\$	QL	1 syringe(vial) / 93 DS		Medroxyprogesterone Acetate	DEPO- PROVERA	
OTC	COVERED WITH RX			Nonoxynol 9	DELFIN	
<b>Thyroid</b>						
G				Levothyroxine	LEVOXYL	
\$				Thyroid Dessicated	ARMOUR THYROID	
\$				Thyroid, Dessicated	ARMOUR THYROID	
\$\$\$\$				Liothyronine	CYTOMEL	
\$\$\$\$				Liotrix	THYROLAR	
<b>HORMONAL AGENTS, SUPPRESSANT</b>						
<b>Adrenal</b>						
\$\$\$\$\$				Aminoglutethimide	CYTADREN	
<b>Pituitary</b>						
G	2.5 mgs Tabs Only			Bromocriptine	PARLODEL	
<b>Sex Hormones / Modifiers</b>						
G				Tamoxifen	NOLVADEX	
<b>Thyroid</b>						
G				Propylthiouracil	PROPYLTHIOURACIL & PTU	
\$\$\$\$				Methimazole	TAPAZOLE	
<b>IMMUNOLOGICAL AGENTS</b>						
<b>Immune Suppressants</b>						
G				Azathioprine	IMURAN	
\$\$\$\$\$				Penicillamine	CUPRIMINE	
\$\$\$\$\$\$\$				Mycophenolate mofetil	CELLCEPT	
\$\$\$\$\$\$\$				Tacrolimus	PROGRAF	

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\$\$\$\$\$\$				Cyclosporine	SANDIMMUNE, NEORAL		
<b>Immunomodulators</b>							
\$\$\$\$\$\$				Leflunomide	ARAVA		
\$\$\$\$\$\$				Auranofin	RIDAURA		
\$\$\$\$\$\$\$\$	PA			Imiquimod	ALDARA		
<b>INFLAMMATORY BOWEL DISEASE AGENTS</b>							
<b>Glucocorticoids</b>							
G				Hydrocortisone hemorrhoid cream, supp	ANUSOL-HC		
\$\$\$\$				Hydrocortisone intrarectal foam	PROCTOFOAM		
\$\$\$\$				Pramoxine/ Hydrocortisone	PROCTOFOAM HC		
<b>Salicylates</b>							
\$\$\$\$	ST		Sulfasalazine is the first line of treatment for ulcerative colitis	Mesalamine	ASACOL		
<b>Sulfonamides</b>							
G				Sulfasalazine, Enteric Coated	AZULFIDINE, ENTABS		
<b>INFUSION PRODUCTS</b>							
All TPN and Infusion products require a PA.							
<b>JOINT/CONNECTIVE TISSUE/ MUSCULARSKELETAL AGENTS</b>							
<b>Antirheumatics</b>							
\$\$\$\$\$\$				Leflunomide	ARAVA		
\$\$\$\$\$\$				Auranofin	RIDAURA		
<b>MISCELLANEOUS THERAPEUTIC</b>							
G				Naltrexone	REVIA		
G				Naltrexone	REVIA		
\$\$\$\$				Ergonovine Maleate	ERGOTRATE		
<b>OPHTHALMIC AGENTS</b>							
<b>Ophthalmic Anti-allergy Agents</b>							
\$\$\$				Cromolyn Sodium	OPTICROM		
<b>Ophthalmic Antibacterials</b>							
G				Bacitracin	BACITRACIN O.O		
G				Sulfacetamide Sodium	BLEPH-10		
G				Ciprofloxacin	CILOXAN SOL		
G				HC/Neosporin/Polymyxin	CORTISPORIN		
G				Gentamicin	GARAMYCIN		

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G				Erythromycin	ILOTYCIN O.O.	
G				Neomycin/Gramcidin/Polymyxin	NEOSPORIN	
G				Neomycin/Polymyxin/Bacitracin	NEOSPORIN O.O.	
G				Bacitracin and Polymyxin B Ophthalmic	POLYSPORIN	
G				Sulfacetamide Sodium	SULAMYD	
G				Tobramycin	TOBREX	
\$\$				Polymyxin B/Trimethoprim	POLYTRIM	
\$\$\$\$\$				Gentamicin/Prednisolone	PRED-G Ophthalmic	
\$\$\$\$\$				Tobramycin/dexamethasone	TOBRADEX	
<b>Ophthalmic Antiglaucoma Agents</b>						
G				Bromonidine	ALPHAGAN	
G				Levobunolol	BETAGAN	
G				Timolol	BETIMOL	
G				Cyclopentolate 1% soln	CYCLOGYL	
G				Acetazolamide	DIAMOX	
G				Methazolamide	NEPTAZANE	
G				Carteolol HCL	OCUPRESS	
G				Metipranolol	OPTIPRANOLOL	
G				Dipivefrin	PROPINE	
G				Timolol	TIMOPTIC	
\$\$\$				Scopolamine	ISOPTO-ATROPINE	
\$\$\$\$				Betaxolol HCL	BETOPTIC	
\$\$\$\$				Betaxolol	BETOPTIC-S	
\$\$\$\$				Timolol Maleate/Dorzolam HCL	COSOPT	
\$\$\$\$\$				Bromonidine	ALPHAGAN P	
\$\$\$\$\$				Brinzolamide	AZOPT	
\$\$\$\$\$	QL	3 ml / 31 DS		Bimatoprost	LUMIGAN	
\$\$\$\$\$				Dorzolamide	TRUSOPT	
\$\$\$\$\$				Travoprost	TRAVATAN	Updated June 2006
<b>Ophthalmic Anti-inflammatories</b>						
G				HC/Neomycin/Polymyxin/Bacitracin	CORTISPORIN O.O.	
G				Dexamethasone	DECADRON	
G				Fluoromethalone Acetate	FLAREX	
G				Fluorometholone	FML	
G				Fluorometholone Sulfacetamide	FML-S Liquifilm	
G				Prednisone Phosphate	INFLAMASE, FORTE	
G				Dexamethasone/Neomycin/Polymyxin	MAXITROL	
G				Prednisolone / Sulfacetamide	METIMYD, VASOCIDIN, ISOPTO CETAPRED	
G				Dexamethasone/Neomycin Ophthalmic	NEODECADRON	
G				Flurbiprofen Sodium	OCUFEN	
G				Prednisolone Acetate	PRED MILD, FORTE	
\$\$\$				Cromolyn Sodium	OPTICROM	
\$\$\$				Prednisolone/Neomycin/Polymyxin	POLYPRED Suspension	
\$\$\$\$				Ketorolac	ACULAR, LS	
\$\$\$\$				Loteprednol	LOTEMAX	
\$\$\$\$				Rimexolone	VEXOL SUSP	

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<b>Ophthalmic Antivirals</b>							
G				Trifluridine	VIROPTIC		
<b>Ophthalmic Antihistamine/Decongestant Combo</b>							
G				Naphazoline	NAPHCN (OTC)		
G				Naphazoline/Pheniramine	NAPHCN-A (OTC), OCUHIST		
G				Naphazoline/Antazoline	VASOCON-A (OTC)		
\$\$\$\$\$				Vidarabine	VIRA-A O.O.		
<b>Ophthalmics, Other</b>							
OTC	COVERED W/RX			Artificial Tears	REFRESH, TEARS PLUS, VISINE (OTC) soln,oint		
<b>OBSTETRICAL &amp; GYNECOLOGICAL AGENTS</b>							
<b>Monophasic Oral Contraceptives</b>							
G				Desogestrel 0.15/Ethinyl Estradiol 0.03	APRI		
G				Levonorgestrel .1/Ethinyl Estradiol .02	AVIANE, LESSINA		
G				Ethinyl estradiol/ Desogestrel .15	KARIVA		
G				Levonorgestrel .15/Ethinyl Estrodiol .03	LEVORA, PORTIA		
G				Norgestrel 0.3/Ethinyl Estradiol 0.03	LOW-OGESTREL, CRYSELLE		
G				Ethinyl estradiol/ Norethindrone acetate	MICROGESTIN Fe 1/20, JUNEL Fe 1/20		
G				Ethinyl estradiol/ Norethindrone acetate	MICROGESTIN Fe 1.5/30; 1/20, JUNEL Fe 1.5/30; 1/20		
G				Norethindrone/Ethinyl Estradiol	NECON 1/35, NORTREL 1/35,		
G				Ethinyl estradiol/ Norgestimate	SPRINTEC		
G				Ethinyl estradiol/Ethinyl Estradiol	ZOVIA 1/35		
\$\$\$				Norethindrone Acetate/Ethinyl Estradiol	LOESTRIN, FE		
\$\$\$				6 mg Norelgestromin/0.75 mg ethinyl estradiol	ORTHO EVRA PATCH		
\$\$\$\$\$	QL	#91 / 91 DS		Ethinyl estradiol 30 / Levonorgestrel .15	SEASONALE		
\$\$\$\$\$				Etonogestrel / Ethinyl estradiol	NUVARING	Updated June 2006	
<b>Biphasic Oral Contraceptives</b>							
G				Norethindrone/Ethinyl estradiol	NECON 10/11		
<b>Triphasic Oral Contraceptives</b>							
G				Ethinyl Estradiol/ Norethindrone	NECON 7/7/7, NORTREL 7/7/7		
G				Ethinyl Estradiol/ Norgestimate	TRINESSA, TRI-SPRINTEC		
G				Levonorgestrel/Ethinyl Estradiol	TRIVORA, ENPRESSE		
G				Ethinyl Estradiol/Desogestrel	VELIVET		
<b>Progestin Only Oral Contraceptives</b>							
G				Norethindrone	CAMILA, ERRIN, NORA-BE		
<b>Progestin Agents</b>							
G				Megesterol	MEGACE		
G				Medroxyprogesterone	PROVERA		
\$\$	QL	#1 syringe(vial)/93DS		Medroxyprogesterone Acetate	DEPO-PROVERA		
<b>OB/GYN Anti-infectives</b>							
OTC	COVERED W/RX			Clotrimazole	GYNE-LOTTRIMIN (OTC)		

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OTC	COVERED W/RX			Miconazole vaginal	MONISTAT (OTC)	
OTC	COVERED W/RX			Ticonazole	VAGISTAT-1 (OTC)	
G				Sulfanilamide Compound	AVC CREAM	
G				Miconazole	MONISTAT-DERM	
G				Nystatin Vaginal Tablets	MYCOSTATIN VAGINAL	
G				Triple Sulfa Vaginal	SULTRIN	
\$\$	QL	150MG = #1 / 31DS; 100MG = #14/ 31DS	200MG = #14/ 31DS	Fluconazole 150mg	DIFLUCAN	
\$\$\$				Metronidazole	METRO-GEL VAGINAL	
\$\$\$\$				Ciindamycin	CLEOCIN VAGINAL	
\$\$\$\$				Terconazole	TERAZOL	
<b>Miscellaneous - OB/GYN</b>						
\$\$	QL	#2 tablets / 31 DS		Levonorgestrel 0.75 mg	PLAN B	
\$\$\$				Methylergonovine Maleate	METHERGINE	
\$\$\$\$				Ergonovine Maleate	ERGOTRATE	
<b>OTIC AGENTS</b>						
<b>Otic Antibacterials</b>						
G				HC/Neosporin/Polymyxin Otic soln, susp	CORTISPORIN OTIC	
G				Acetic Acid 2%/HC 1% Otic	VOSOL-HC OTIC	
<b>Otic Anti-inflammatories</b>						
\$\$				HCL/Chloroxlylenol	CORTANE-B & ZOTO-HC	
<b>Otic, Other</b>						
G				Benzocaine/Antipyrine Otic	AURALGAN, OTIC, A/B OTIC, AUROTO & RX-OTIC	
G				Carbamide Peroxide	DEBROX-OTC	
G				Acetic Acid/Aluminum Acetate	DOMEBORO OTIC	
G				Phenylephrine/Antipy/B-caine	TYMPAGESIC	
<b>PHARMACEUTICAL AIDS</b>						
Products are covered with a prescription.						
<b>RESPIRATORY TRACT AGENTS</b>						
<b>Antileukotrienes</b>						
\$\$\$\$	ASTHMA ONLY			Montelukast	SINGULAIR	UPDATED JUNE 2006
<b>Bronchodilators, Anticholinergic</b>						
G				Ipratropium	ATROVENT	
\$\$\$\$				Ipratropium/albuterol	COMBIVENT	
<b>Bronchodilators, Anti-inflammatories</b>						
\$\$\$				Beclomethasone	QVAR	
\$\$\$\$				Triamcinolone Acetate	AZMACORT	

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\$\$\$\$				Mometasone	ASMANEX	Updated June 2006
\$\$\$\$\$				Fluticasone Propionate	FLOVENT	
\$\$\$\$\$\$\$\$				Fluticasone/Salmeterol	ADVAIR	
\$\$\$\$\$\$\$\$\$\$	QL, AGE	#120 mls / 31 DS	Indicated only for ≤ 8 years old	Budesonide	PULMICORT RESP	
\$\$\$\$\$\$\$\$\$\$	QL, AGE	#1 / 31 DS	Indicated for ≥ 6 years old	Budesonide	PULMICORT TURB.	
<b>Bronchodilators, Xanthines</b>						
G				Aminophylline	AMINOPHYLLINE, SOMOPHYLLIN	
G				Theophylline	THEOPHYLLINE, SLO-BID, THEO DUR	
G				Theophylline SR	UNIPHYL	
<b>Bronchodilators, Sympathomimetic</b>						
G				Metaproterenol Inhaler, Solution	ALUPENT INHALER, SOLUTION	
G				Terbutaline sulfate tablets	BRETHINE	
G				Albuterol	PROVENTIL	
G				Albuterol 5% Solution, Inhaler	PROVENTIL	
\$\$\$				Pirbuterol	MAXAIR AUTOHALER	
\$\$\$\$\$				Salmeterol	SEREVENT	
<b>Mast Cell Stabilizers</b>						
G				Cromolyn Sodium (all forms)	INTAL	
\$\$\$\$				Nedocromil	TILADE	
<b>Mucolytics</b>						
G				Acetylcysteine	MUCOMYST	
<b>Respiratory Tract Agents, Other</b>						
G				Sodium Cl for Inhalation	BRONCHO SALINE	
G				Guafenesin	HUMBID LA, HUMIBID, AMIBID LA, MUCO-FEN	
G				Potassium Iodide	SSKI	
\$	QL	#1 / 365 DS		Peak Flow Meter		
\$\$\$\$\$	QL	#2 / 365 DS		Spacer	E-Z SPACER, OPTI CHAMBER, AEROCHAMBER, ECLIPSE COMPACT, MICROCHAMBER, MICROSPACER, OPTICHAMBER, OPITHALER	

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<b>SEDATIVES / HYPNOTICS</b>							
G				Estazolam	PROSOM		
G				Temazepam	RESTORIL		
\$\$\$\$\$	ST, QL	#14 / 31 DS	History use of 2: generic Prosom or Restoril	Zolpidem	AMBIEN		
<b>SKELETAL MUSCLE RELAXANTS</b>							
G				Cyclobenzaprine	FLEXERIL		
G				Baclofen	LIORESAL		
G				Chlorzoxazone	PARAFON FORTE DSC		
G				Methocarbamol	ROBAXIN		
G				Methocarbamol / ASA	ROBAXSIL		
G				Carisoprodol	SOMA		
G				Carisoprodol/ ASA	SOMA COMPOUND		
G				Diazepam	VALIUM		
G				Tizanidine	ZANAFLEX		
\$\$\$\$				Dantrolene Sodium	DANTRIVM		
<b>SPECIALTY MEDICATIONS</b>							
<b>Colony Stimulating Factors</b>							
\$\$\$\$\$	SP			Epoetin alfa	PROCRIT		
\$\$\$\$\$	SP			Filgrastim	NEUPOGEN		
<b>Cystic Fibrosis Agents</b>							
\$\$\$\$\$	SP			Dornase alfa	PULMOZYME		
\$\$\$\$\$	SP			Tobramycin	TOBI		
<b>Rheumatoid Arthritis Agents</b>							
\$\$\$\$\$	SP			Adalimumab	HUMIRA		
\$\$\$\$\$	SP			Etanercept	ENBREL		
<b>Growth Hormone Agents</b>							
\$\$\$\$\$	SP			Somatropin	NORDITROPIN, TEV-TROPIN		
<b>Hepatitis</b>							
\$\$\$\$\$	SP			Peginterferon alfa-2a	COPEGUS, PEGASYS		
<b>Multiple Sclerosis</b>							
\$\$\$\$\$	SP			Interferon beta-1a	AVONEX		
\$\$\$\$\$	SP			Interferon beta-1b	BETASERON		
\$\$\$\$\$	SP			Glatiramer acetate	COPAXONE		
<b>Other</b>							
\$\$\$\$\$	SP			Teriparatide	FORTEO		
\$\$\$\$\$	SP			Omalizumab	XOLAIR		
\$\$\$\$\$	SP			Sodium hyaluronate	HYALGAN		
\$\$\$\$\$	SP			Imatinib (STI-571),	GLEEVEC		
\$\$\$\$\$	SP			Gefitinib	IRESSA		
\$\$\$\$\$	SP			Leuprolide	ELIGARD		
\$\$\$\$\$	SP			Deferasirox	EXJADE		

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<b>THERAPEUTIC NUTRIENTS / MINERALS / ELECTROLYTES</b>							
<b>Electrolytes / Minerals</b>							
G				Sodium Polystyrene Sulfonate	KAYEXALATE		
G				Sodium Citrate	SODIUM CITRATE		
G				Potassium Chloride Effervescent tablets, powder, 8 mEq	K-LOR, KLOR-CON, K-LYTE, MICRO-K, SLOW-K		
G				Potassium Chloride 10% soln.	KAON-CL, KAY CIEL		
G				Potassium Phosphate	NEUTRA-PHOS		
G				Sodium Polystyrene	SODIUM POLYSTYRENE		
\$\$				Calcium acetate	PHOSLO		
\$\$\$\$\$\$\$				Sevelamer HCL	RENAGEL		
OTC	COVERED W/RX			Calcium Carbonate	OSCAL, TUMS		
OTC	COVERED W/RX			Ferrous Sulfate	FEO-SOL		
<b>Miscellaneous</b>							
G				Levocarnitine	LEVOCARNITINE		
G				Electrolyte solution	PEDIALYTE, ORALYTE		
<b>Vitamins</b>							
G				Vitamin A	AQUASOL A		
G				Vitamin B & C	BEROCA		
G				Vitamin B & C w/ Folic Acid	BEROCA PLUS		
G				FE Fumarate/Vitamin	CHROMAGEN		
G				Folic Acid	FOLVITE		
G				Prenatal Vitamins with 1mg Folic Acid	ULTRA NATALCARE, ULTRA NATAL, MYNATE 90 PLUS, PRENATAL MR 90 Fe, PRENATAL PLUS, PRENATAL Z, PREMESIS RX, PRIMACARE ONE, PRIMACARE COMBO, PRENATAL RX 1, PRENATAL -U, CAL-NATE,PRENATAL -H ,NATALCARE, NUTRINATE,PRENATAL RX, VINATE GT, VINATE II,ADVANCED NATALCARE,VITAFOL-OB, PRENATAL FORMULA 3,ADVANCED-RF NATALCARE,NUTRISPIRE, PRENATAVITE,PRENATAL 1 PLUS 1, PRENATAL LOW IRON, PRENATABS OBN,VINATE-M,UNI-KAR PLUS C, NATALCARE PIC, ANEMAGEN OB, TRINATE,	UPDATED APRIL 2006	
G				Multivitamins/fluoride	POLY-VI-FLOR		
G				Multivitamins/fluoride/iron	POLY-VI-FLOR with IRON		
OTC	COVERED W/RX			Multivitamin	ONE-A-DAY (OTC), POLY-VI-SOL		
OTC	COVERED W/RX			Multivitamin/ Minerals	CENTRUM (OTC)		
G				Vitamins ADC/fluoride	TRI-VI-FLOR		
G				Vitamins ADC/fluoride/iron	TRI-VI-FLOR with IRON		
G				Cyanocobalamin Injection	VITAMIN B-12 INJECTION		
\$\$\$				Ergocalciferol	CALCIFEROL		
\$\$\$				Phytonadione	MEPHYTON		
\$\$\$\$\$				Calcifediol	CALDEROL		
\$\$\$\$\$				Calcitriol	ROCALTRON		