

Quick Reference Formulary - Reid Hospital and Health Care Services Formulary

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Reading the Drug List

Generic drugs are listed in all lower case letters. Brand name drugs are listed in all upper case letters. Each drug product is assigned a coverage tier, shown to the right of each drug product.

		Relative Cost to Member
Tier 1	Formulary generics and some lower cost brand products	\$
Tier 2	Formulary, brand products	\$\$
Tier 3	Non-preferred formulary products	\$\$\$

Cases where drug products are followed by parentheses indicate that the entry relates to a certain dosage form, e.g. ESTRACE (vaginal cream) or more than one form of the drug, e.g. ZOMIG (ZMT). Quantity limits are for prescriptions filled at retail pharmacies. Please consult the complete version of the formulary for mail order quantity limits.

All newly approved drugs on the market will initially NOT be covered, pending further review by the Navitus P&T Committee.

A complete version of the Navitus Formulary, as well as information on prior authorization and clinical programs, are available at www.navitus.com

ADHD/ ANTI-NARCOLEPSY/ ANTI-OBESITY/ ANOREXIANTS

amphetamine/	1
dextroamphetamine tab	
dexamethylphenidate ER	1
cap	
dexamethylphenidate tab	1
guanfacine ER tab	1
methylphenidate ER cap	1
methylphenidate tab	1
VYVANSE CAP	2
ADDERALL XR CAP	NC
DAYTRANA PATCH	NC

AMINOGLYCOSIDES

TOBI PODHALER	MSP, PA	3
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ANALGESICS - ANTI-INFLAMMATORY

celecoxib cap	QL	1
diclofenac sodium EC tab		1
diclofenac sodium XR tab		1
diclofenac/ misoprostol DR		1
tab		
ibuprofen tab		1
ketorolac tab	QL	1
meloxicam tab		1
nabumetone tab		1
piroxicam cap		1
sulindac tab		1

ANALGESICS - OPIOID

acetaminophen/ codeine	1
tab	
fentanyl patch	1
hydrocodone/	1
acetaminophen tab	
morphine sulfate ER tab	1
oxycodone/	1
acetaminophen tab	
tramadol tab	1
OXYCODONE ER TAB,	NC
OXYCONTIN CR TAB	
OXYCONTIN CR TAB	NC

ANTI-ANXIETY AGENTS

alprazolam tab	1
buspirone tab	1
hydroxyzine tab	1
lorazepam tab	1

ANTIARRHYTHMICS

MULTAQ TAB	2
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ANTI-ASTHMATIC AND BRONCHODILATOR AGENTS

albuterol/ ipratropium neb	1
soln	
ARNUITY ELLIPTA	1
INHALER	
ASMANEX HFA INHALER	1
ASMANEX INHALER	1
budesonide inh susp	1

FLOVENT DISKUS	1
INHALER	
FLOVENT HFA INHALER	1
ipratropium neb soln	1
montelukast chew tab	1
montelukast tab	1
ADVAIR HFA INHALER	2
ANORO ELLIPTA	2
INHALER	
BREO ELLIPTA INHALER	2
COMBIVENT INHALER	2
COMBIVENT RESPIMAT	2
INHALER	
DULERA INHALER	2
INCRUSE ELLIPTA	2
INHALER	
SEREVENT DISKUS	2
INHALER	
PULMICORT FLEXHALER	NC
QVAR INHALER	NC
TUDORZA PRESSAIR	NC
INHALER	

ANTICOAGULANTS

warfarin tab	1
PRADAXA CAP	3

ANTICONVULSANTS

carbamazepine ER tab	1
carbamazepine tab	1
clonazepam tab	1
divalproex sodium DR tab	1
gabapentin cap	QL
lamotrigine ER tab	1
lamotrigine tab	1
levetiracetam tab	1
phenytoin cap	1
topiramate tab	1

ANTIDEPRESSANTS

amitriptyline tab	1
bupropion ER tab	1
bupropion XL tab	1
citalopram soln	1
citalopram tab	1
duloxetine EC cap	1
escitalopram tab	1
fluoxetine cap	1
fluoxetine tab	1
mirtazapine tab	1
NEFAZODONE TAB	1
nefazodone tab 50mg,	1
250mg	
nortriptyline cap	1
paroxetine tab	1
sertraline conc	1
sertraline tab	1
trazodone tab	1
venlafaxine ER cap	1
venlafaxine tab	1
PEXEVA TAB	NC
venlafaxine ER tab	NC

ANTIDIABETICS

glipizide ER tab	1
glipizide tab	1

glyburide tab	1
metformin tab	1
ADMELOG INJ, INSULIN	2
LISPRO INJ	
AVANDAMET TAB	2
AVANDIA TAB	2
BYDUREON PEN INJ	PA, QL
FARXIGA TAB	QL
HUMULIN N INJ	OTC
HUMULIN R INJ	OTC
JANUMET TAB	QL
JANUMET XR TAB	QL
JANUVIA TAB	QL
JENTADUETO TAB	QL
LEVEMIR FLEXTOUCH	2
INJ	
LEVEMIR INJ	2
SEMGLEE INJ, INSULIN	2
GLARGINE INJ (LANTUS	
Equiv)	
SEMGLEE PEN, INSULIN	2
GLARGINE PEN	
(LANTUS Equiv)	
TOUJEO MAX	2
SOLOSTAR INJ	
TOUJEO SOLOSTAR INJ	2
TRADJENTA TAB	QL
TRESIBA FLEXTOUCH	2
INJ	
VICTOZA INJ	PA, QL
BASAGLAR INJ	NC
KOMBIGLYZE XR TAB	NC
LANTUS INJ	NC
LANTUS SOLOSTAR INJ	NC
NOVOLIN 70/ 30 INJ	OTC
NOVOLIN N INJ	OTC
NOVOLIN R INJ	OTC
ONGLYZA TAB	NC
pioglitazone/ metformin	NC
tab	

ANTIEMETICS

ondansetron tab	1
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ANTIFUNGALS

fluconazole susp	1
fluconazole tab	1
griseofulvin micro tab	1
griseofulvin susp	1
itraconazole cap	1
ketoconazole tab	1
nystatin tab	1
terbinafine tab	1
voriconazole tab	RS

ANTIHYPERLIPIDEMICS

lovastatin tab	\$0
pravastatin tab	\$0
simvastatin tab	\$0
cholestryamine powder	1
fluvastatin cap	1
gemfibrozil tab	1
NIASPAN ER TAB	3
TRILIFIX CAP	NC

ANTIHYPERTENSIVES

amlodipine/ benazepril cap	1
amlodipine/ valsartan tab	1
benazepril tab	1
benazepril/	1
hydrochlorothiazide tab	
bisoprolol/	1
hydrochlorothiazide tab	
candesartan tab	1
captopril tab	1
doxazosin tab	1
enalapril tab	1
enalapril/	1
hydrochlorothiazide tab	
irbesartan tab	1
irbesartan/	1
hydrochlorothiazide tab	
lisinopril tab	1
lisinopril/	1
hydrochlorothiazide tab	
losartan tab	1
losartan/	1
hydrochlorothiazide tab	
metoprolol/	1
hydrochlorothiazide tab	
phenoxybenzamine cap	1
terazosin cap	1
valsartan tab	1
valsartan/	1
hydrochlorothiazide tab	
candesartan/	NC
hydrochlorothiazide tab	

ANTI-INFECTIVE AGENTS - MISC.

clindamycin cap	1
erythromycin/ sulfisoxazole	1
susp	
metronidazole tab	1
nitrofurantoin monohydrate	1
cap	
smz/ tmp (DS) tab	1
metronidazole cap	NC

ANTIMALARIALS

hydroxychloroquine tab	1
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ANTIMYCOBACTERIAL AGENTS

rifampin cap	1
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ANTINEOPLASTICS

methotrexate tab	1
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ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

anastrozole tab	\$0
tamoxifen tab	\$0
bexarotene cap	LMSP, PA,
	SF
letrozole tab	1
BOSULIF TAB	MSP, PA, SF
ERIVEDGE CAP	LD, PA, SF

ANTIPARKINSON AGENTS

amantadine cap	1
carbidopa/ levodopa tab	1

NC Not Covered

EXC Plan Exclusion

LMSP Lumicera Mandatory Specialty Pharmacy Program

PA Prior Authorization

SF Limited to two 15 day fills per month for first 3 months

VAC Vaccine Program

generic =small letters

INF Infertility

MSP Mandatory Specialty Pharmacy Program

QL Quantity Limit

SMKG Smoking Cessation

BRANDS =CAPITAL LETTERS

LD Limited Distribution

OTC Over-the-Counter

RS Restricted to Specialist

ST Step Therapy

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pramipexole ER tab	1
ropinirole ER tab	1
ropinirole tab	1
selegiline cap	1

ANTIPSYCHOTICS/ ANTIMANIC AGENTS

aripiprazole tab	1
clozapine tab	1
lithium carbonate cap	1
lithium carbonate tab	1
olanzapine ODT	1
olanzapine tab	1
paliperidone ER tab	1
quetiapine tab	1
risperidone tab	1
ziprasidone cap	1

ANTIVIRALS

acyclovir cap	1
acyclovir susp	1
entecavir tab	QL
nevirapine tab	1
valacyclovir tab	1
zidovudine cap	1
FUZEON INJ	LMSP
PEG-INTRON INJ	LMSP
PEGASYS INJ	LMSP
RELENZA DISKHALER	QL

ASSORTED CLASSES

azathioprine tab	1
cyclosporine cap	1
mycophenolate mofetil tab	1

BETA BLOCKERS

atenolol tab	1
carvedilol tab	1
labetalol tab	1
metoprolol ER tab	1
metoprolol tab	1
nadolol tab	1
propranolol tab	1

CALCIUM CHANNEL BLOCKERS

amlodipine tab	1
diltiazem ER cap	1
diltiazem ER tab	1
diltiazem tab	1
felodipine ER tab	1
nifedipine cap	1
nifedipine ER tab	1
nisoldipine ER tab	1
verapamil SR tab	1
COVERA-HS TAB	3

CEPHALOSPORINS

cefaclor cap	1
cefadroxil cap	1
cefdinir cap	1
cefdinir susp	1
cefepime proxetil tab	1
cefprozil susp	1
cefprozil tab	1
cefuroxime susp	1
cephalexin cap	1

CONTRACEPTIVES

tri-sprintec tab	\$0
YAZ TAB	NC

CORTICOSTEROIDS

prednisolone soln	1
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COUGH/ COLD/ ALLERGY

guaifenesin/ codeine syrup	OTC, QL
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DERMATOLOGICALS

adapalene cream	1
adapalene gel	1

amnesteam cap, claravis cap, isotretinoin cap,	1
myorisan cap, zenatane cap	1

calcipotriene cream	1
clindamycin gel	1
clindamycin/ benzoyl peroxide gel	1
clotrimazole/ betamethasone cream	1
erythromycin gel	1
imiquimod cream	1
ketoconazole cream	1
lidocaine patch	QL
lidocaine/ prilocaine cream	1
metronidazole cream	1
metronidazole gel	1
mupirocin oint	1
nystatin/ triamcinolone oint	1
pimecrolimus cream	1
tacrolimus oint	1
tretinoin cream	1
tretinoin gel	1
ELIDEL CREAM	3
TAZORAC CREAM 0.05%	3
AZELEX CREAM	NC
mupirocin cream	NC
TAZORAC GEL	NC
ZOVIRAX OINT	NC

DIAGNOSTIC PRODUCTS

ACCU-CHEK TEST STRIP	OTC	\$0
FREESTYLE LITE TEST STRIP	OTC	\$0
FREESTYLE TEST STRIP	OTC	\$0
PRECISION XTRA TEST STRIP	OTC	\$0
TEST STRIP (all other test strips)	OTC	3

DIURETICS

acetazolamide ER cap	1
amiloride/ hydrochlorothiazide tab	1
furosemide tab	1
hydrochlorothiazide tab	1
spironolactone tab	1
triamterene/ hydrochlorothiazide cap	1
triamterene/ hydrochlorothiazide tab	1
THALITONE TAB	NC

ENDOCRINE AND METABOLIC AGENTS - MISC.

raloxifene tab	\$0
alendronate tab	1
ibandronate tab 150mg	QL
FORTEO INJ	LMSP
FORTICAL NASAL SPRAY	1
ACTONEL TAB	3

ESTROGENS

estradiol patch	1
estradiol tab	1
estradiol/ norethindrone tab	1
PREMARIN TAB	2
PREMPHASE TAB,	2
PREMPRO TAB	2

FLUOROQUINOLONES

ciprofloxacin tab	1
levofloxacin tab	1
moxifloxacin tab	1
ofloxacin tab	1

GENITOURINARY AGENTS - MISCELLANEOUS

alfuzosin SR tab	1
finasteride tab	1
tamsulosin cap	1

GOUT AGENTS

allopurinol tab	1
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HEMATOLOGICAL AGENTS - MISC.

clopidogrel tab 75mg	1
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HYPNOTICS/ SEDATIVES/ SLEEP DISORDER AGENTS

phenobarbital tab	1
temazepam cap 15mg	1
temazepam cap 30mg	1
zaleplon cap	1
ramelteon tab	NC
ROZEREM TAB	NC

MACROLIDES

azithromycin susp	1
azithromycin tab	1
clarithromycin tab	1
DIFICID TAB	QL, ST

MEDICAL DEVICES AND SUPPLIES

ACCU-CHEK AVIVA PLUS	OTC	\$0
METER		
FREESTYLE FREEDOM	OTC	\$0
LITE METER		
PRECISION XTRA	OTC	\$0
METER		
B-D INSULIN SYRINGE	OTC	1
B-D PEN NEEDLE	OTC	1
NOVOFINE PEN NEEDLE	OTC	1
NOVOTWIST PEN	OTC	1
NEEDLE		

MIGRAINE PRODUCTS

naratriptan tab	QL	1
rizatriptan ODT	QL	1
rizatriptan tab	QL	1
sumatriptan inj	QL	1
sumatriptan tab	QL	1
sumatriptan vial inj	QL	1
zolmitriptan ODT	QL	1
zolmitriptan tab	QL	1
SUMATRIPTAN INJ 6MG/ 0.5ML	QL	2
acetaminophen/ isometheptene/ dichloral cap		NC
SUMAVEL DOSEPRO INJ		NC

MOUTH/ THROAT/ DENTAL AGENTS

clotrimazole troches	1
nystatin susp	1

MULTIVITAMINS

PRENATAL VITAMINS (PRENATAL PLUS, PREPLUS, PRENAPLUS)	1
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NASAL AGENTS - SYSTEMIC AND TOPICAL

fluticasone nasal spray	QL	1
BECONASE AQ NASAL SPRAY		NC

OPHTHALMIC AGENTS

azelastine ophth soln	1	
bacitracin/ polymyxin b ophth oint	1	
ciprofloxacin ophth soln	1	
dorzolamide/ timolol (pf) ophth soln	1	
gentamicin ophth soln	1	
ketorolac ophth soln	1	
latanoprost ophth soln	QL	1
ofloxacin ophth soln	1	
pilocarpine ophth soln	1	
timolol maleate ophth soln	1	
tobramycin ophth soln	1	

tobramycin/ dexamethasone ophth soln	1
ALPHAGAN P OPTH SOLN 0.1%	2
ALREX OPTH SUSH	2
BETIMOL OPTH SOLN	2
LUMIGAN OPTH SOLN QL	2
PROLENSA OPTH SOLN	2

OTIC AGENTS

acetic acid otic soln	1
neomycin/ polymixin/ hydrocortisone otic susp	1
ofloxacin otic soln	1

PENICILLINS

amoxicillin cap	1
amoxicillin/ clavulanate ER tab	1
amoxicillin/ clavulanate tab	1
penicillin vk tab	1

PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.

bupropion SR tab	QL, SMKG	\$0
CHANTIX PAK	QL, SMKG	\$0
CHANTIX TAB	QL, SMKG	\$0
nicotine gum	OTC, QL, SMKG	\$0
nicotine lozenge	OTC, QL, SMKG	\$0
nicotine patch	OTC, QL, SMKG	\$0
NICOTROL INHALER	QL, SMKG	\$0
NICOTROL NASAL SPRAY	QL, SMKG	\$0
donepezil ODT	QL	1
donepezil tab	QL	1
galantamine ER cap		1
galantamine tab		1
mementine tab		1
rivastigmine cap		1
NAMENDA XR		2

TETRACYCLINES

doxycycline hyclate cap	1
minocycline cap	1

THYROID AGENTS

liothyronine tab	1
methimazole tab	1
THYROLAR TAB	2
SYNTHROID TAB	3

ULCER DRUGS

cimetidine tab	OTC	1
famotidine susp		1
famotidine tab	OTC	1
misoprostol tab		1
pantoprazole EC tab		1
rabeprazole EC tab		1
PREVACID OTC CAP	OTC	EXC
ZEGERID CAP OTC	OTC	EXC

ULCER DRUGS/ ANTISPASMODICS/ ANTICHOLINERGICS

DEXILANT DR CAP	NC
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URINARY ANTISPASMODICS

oxybutynin ER tab	1
oxybutynin tab	1
tolterodine SR cap	1
tolterodine tab	1
TOVIAZ TAB	NC

VAGINAL PRODUCTS

NC Not Covered generic =small letters BRANDS =CAPITAL LETTERS
 EXC Plan Exclusion INF Infertility LD Limited Distribution
 LMSP Lumicera Mandatory Specialty Pharmacy Program MSP Mandatory Specialty Pharmacy Program OTC Over-the-Counter
 PA Prior Authorization QL Quantity Limit RS Restricted to Specialist
 SF Limited to two 15 day fills per month for first 3 months SMKG Smoking Cessation ST Step Therapy
 VAC Vaccine Program

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PREMARIN VAGINAL
CREAM

2

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