Prescription Program

Formulary — To be used by members who have a formulary drug plan.

Anthem Blue Cross and Blue Shield prescription drug benefits include medications available on the Anthem Drug List/Formulary. Our prescription drug benefits can offer potential savings when your physician prescribes medications on the drug list/formulary.

MBCEBRO-10
Effective 11/10

Anthem
Health. **Join In.**

For more information, please visit anthem.com.

- **If you have additional questions about your prescription benefits please call the Member Services number on your ID card**
- **Speech and hearing impaired (TDD/TTY users) should call 800-221-6915, Monday – Friday, 8:30 a.m. – 5:00 p.m., ET**
- **For the most current version of this prescription drug list, please visit anthem.com**
- **Bring a copy of this drug list/formulary to your next doctor's visit to assist in selecting the lowest cost medications**

QUESTIONS AND ANSWERS

Q. What is a Drug List/Formulary?

A. The Anthem Drug List/Formulary is a list of FDA-approved brand-name and generic medications that have been reviewed and recommended for their quality and effectiveness by the National Pharmacy and Therapeutics (P&T) Committee. The P&T Committee is an independent group of practicing doctors and pharmacists responsible for the research and decisions surrounding our drug list. This group meets regularly to review new and existing drugs and choose the top medications for our drug list—based on their safety, effectiveness and value.

Because the medications on the drug list/formulary are subject to periodic review, please ask your physician about the most current drug list additions and deletions or visit anthem.com.

Brand-name: A brand-name drug is usually available from only one manufacturer and may have patent protection.

Generic: A generic drug is required by the FDA to have the same active ingredients as its brand-name counterpart, but is normally only available after the patent protection expires on a brand-name drug. Although it may look different, a generic drug works the same as its brand-name counterpart. You can save money by using generic medications.

Q. *What are 'clinically equivalent' medications? How does this affect my drug coverage?*

A. The P&T Committee reviews the most current research available to determine if multiple drugs used to treat a disease/condition produce the same clinical effect. When this is the case, the committee may recommend that we cover only the lower cost drug(s) as part of our effort to help reduce the overall cost of care. This means your specific prescription plan may not cover some drugs (indicated by a ^ symbol next to the drug name) in classes with 'clinically equivalent' alternatives.

Q. *What if my medication is not on the drug list/formulary?*

A. An open drug list allows members and their physicians to choose from a wide variety of prescription medications. Please talk with your doctor about prescribing a medication that is on the drug list/formulary. If a medication is selected that is not on the drug list/formulary, you will be responsible for the applicable non-formulary copayment.

You or your physician may submit a request to add a drug to the drug list/formulary either in writing or on our web site. Requests are taken into consideration by the P&T Committee during the drug list/formulary review process.

Inclusion of a medication on the drug list/formulary is not a guarantee of coverage. Some drugs, such as those used for cosmetic purposes, may be excluded from your benefits. Please refer to your Certificate or Evidence of Coverage for coverage limitations and exclusions.

KEY

Generic Medications – (lowest copay) – listed in all lower-case letters

Brand-name Medications – (middle copay) – listed with a leading capital letter

† - A generic equivalent of this drug recently became available or will be available soon. After the generic drug becomes available and notification requirements are met, this brand-name drug will become non-formulary/Tier 3 or may no longer be covered by your prescription drug plan. Check anthem.com to find out about changes in formulary status.

* - Brand versions of these drugs are non-formulary (highest copay)

^ - This product has clinically equivalent alternatives included on the formulary and, as a consequence, such product may not be covered under your pharmacy benefit. Please consult your on-line pharmacy account through your health plan website, anthem.com, for details on coverage.

- Non-formulary in Indiana only

Drugs are listed alphabetically by brand name

A

A/T/S Topical Solution (erythromycin)*
Abilify
Acanya
Accu-Check product line
Accutane (isotretinoin)*
Aceon (perindopril)*
Aci-Jel Jelly (acetic acid vaginal)*
Actigall (ursodiol)*
Activella 0.1-0.5
Activella 1.0-0.5 (estradiol/norethindrone)*
Actonel
ActoPlus Met, XR
Actos
Acular, LS (ketorolac)*
Akne-Mycin
Adalat CC (nifedipine ER)*
Adderall (amphetamine/dextroamphetamine)*
Adderall XR (amphetamine/dextroamphetamine^#)
Advair
Advicor
Agenerase
Akne-Mycin
Albalon (naphazoline)*
Aldactazide (spironolactone/HCTZ)*
Aldactone (spironolactone)*
Aldara†
Aldomet (methyldopa)*
Aldoril (methyldopa/HCTZ)*
Alesse (aviane)*
Alkeran
Allegra (fexofenadine)*
Allegra D^ (fexofenadine/PSE 12hr)*
Alphagan, P (brimonidine)*
Altace (ramipril)*
Altabax
Alupent (metaproterenol)*
Amaryl (glimepiride)*
Ambien (zolpidem)*
Amerge (naratriptan)*
Amevive*
Amicar (aminocaproic acid)*
amitriptyline
amitriptyline/perphenazine
Amoxil (amoxicillin)*
Anafranil (clomipramine)*
Analpram HC lotion
Anaprox, DS (naproxen sodium, DS)*
Androderm
Androgel
Anexsia (hydrocodone/APAP)*
Ansaid (flurbiprofen)*
Antabuse
Antivert (meclizine)*
Anturane (sulfinpyrazone)*
Anusol HC 25mg Suppositories (hydrocortisone)*
Apresazide (hydralazine/HCTZ)*
Apresoline (hydralazine)*
apri
Arava (leflunomide)*
Aricept
Arimidex (anastrozole)†
Aristocort Topical (triamcinolone-acetonide)*
Armour Thyroid
Aromasin†
Artane (trihexyphenidyl)*
Asacol, HD
Asendin (amoxapine)*
Asmanex
Astelin (azelastine)†
Astepro
Atarax (hydroxyzine HCL)*
Ativan (lorazepam)*
Atrovent HFA
Atrovent (ipatropiumbromide)*
Augmentin, XR (amoxicillin/clavulanic acid)*
Auralgan (antipyrine/benzocaine)*
Avandamet
Avandaryl
Avandia
Avinza
Avodart
Axid (nizatidine)*
Aygestin (norethindrone)*
Azasan
AzaSite
Azilect
Azopt
Azulfidine, Entabs (sulfasalazine, EC)*

B

Bactrim DS (Sulfamethoxazole/trimethoprim, DS)*
Bactroban
Baraclude
Benadryl (diphenhydramine 50mg)*
Bentyl (dicyclomine)*
Benzac, AC, W (benzoyl peroxide)*
Benzaclin (benxoyl peroxide/clindamycin)*
Benzagel, Wash (benzoyl peroxide)*
Benzamycin (benzoyl peroxide/erythromycin)*
Betagan (levobunolol)*
Betimol
Betoptic S
Biaxin, XL (clarithromycin, er)*
Bicitra (sodium citrate & citric acid)*
BiDil
Bleph-10 (sulfacetamide-sodium solution)*
Blephamide
Brethine (terbutaline)*
Bumex (bumetanide)*
Buspar (buspirone)*
Byetta

C

Cafergot
Canasa
Cardizem, CD, LA, SR (diltiazem)*
Casodex (bicalutamide)*
Catapres, TTS (clonidine)*
Colazol
colchicine
Colyte (polyethylene glycol-electrolyte solution)*
CombiPatch
Combipres (clonidine/chlorthalidone)*
Combivent
Combivir
Compazine Supp 25mg (prochlorperazine supp 25mg)*
Compazine Tab (prochlorperazine)*
Comtan
Concerta
Condylox Solution (podofilox solution)*
Cordarone (amiodarone)*
Coreg (carvedilol)*
Coreg CR
Corgard (nadolol)*
Cortef (hydrocortisone)*
Cortenema (hydrocortisone enema)*
Cortifoam
Cortisporin Ophth (bacitracin - polymyxin/neomycin- hc opth oint)*
Cortisporin Otic (neomycin/polymixin/hydrocortisone)*
Cosopt (dorzolamide/timolol)*
Coumadin (warfarin)
Cozaar (losartan)*
Creon
Crestor
Crixivan
Crolom (cromolyn sodium)*
Cuprimine
Cyclocort (amcinonide)*
Cyclogyl (cyclopentolate)*
Cylert (pemoline)*
Cymbalta
cyproheptadine
Cytomel (liothyronine)*
Cytotec (misoprostol)*
Cytovene (ganciclovir)*
Cytoxan (cyclophosphamide)*
Cytra-2, Cytra-3
Cytra-K

D

Dalmane (flurazepam)*
Danocrine (danazol)*
Dantrium (dantrolene)*
Dapsone
Daraprim
Darvocet-N (propoxyphene/APAP)*
Darvon Compound (propoxyphene/aspirin/caffeine)*
Daypro (oxaprozin)*
DDAVP (desmopressin acetate)*
Decadron (dexamethasone)*
Deconamine S.R. (chlorpheniramine/pseudoephedrine)*
Demadex (torsemide)*
Demerol (meperidine)*
Demulen 28 day (ethinyl estradiol/ethynodiol diacetate-zovia)*
Depakene (valproic acid)*
Depakote (divalproex)
Depakote ER
Depo-Provera 150mg (medroxyprogesterone)*
Derma-Smoothe/FS
Desogen (apri)*
Desowen Cream (desonide)*
Desoxyn (methamphetamine)*
Desquam, E, X (benzoyl peroxide)*
Desyrel (trazodone)*
Detrol, LA
Dexedrine, CR (dextroamphetamine)*
Dextrostat (dextroamphetamine)*
Diabeta (glyburide)*
Diamox (acetazolamide)*
Diastat†
Dibenzyline
Differin (adapalene)†
Diflucan (fluconazole)*
diflunisal
Dilacor XR (diltiazem CR)*
Dilantin (phenytoin)
Dilaudid (hydromorphone)*
diltia XT
Diovan
Diovan HCT
Diprolene Ointment (betamet diprop/prop gyl)*
Diprosone (betamethasone dipropionate)*
Disalcid (salsalate)*
Ditropan (oxybutynin)*
Dolophine (methadone)*
Domeboro (acetic acid/aluminum acetate)*
Donnatal (belladonna/phenobarbital)*
Dostinex (cabergoline)*
Dovonex cream
Dovonex soln (calcipotriene)*
Duac CS
Duetact
Dulera
Duragesic (fentanyl)*
Duratuss G (guaifenesin SR)*
Duricef Caps/Tabs (cefadroxil)*
Dyazide (triamterene/HCTZ)*
Dynacin (minocycline)*
Dynapen (dicloxacillin)*

E

E.E.S. (erythromycin ethylsuccinate)*
EC-Naprosyn (naproxen EC)*
Econopred Plus 1% Eye Drops (prednisolone)*
Effexor (velafaxine)*

Effexor XR (velafaxine ER)†
Effient
Efudex (fluorouracil)*
Eldepryl (selegiline)*
Elidel
Elimite (permethrin)*
Elixophyllin (theophylline syrup)*
Elocon (mometasone)*
Emcyt
Empirin w/Cod (asa/codeine)*
Emtriva
Endal HD (phenyleph hcl/hydrocod bit/cp)*
Entex PSE (guaifenesin/pseudoephedrine)*
Entocort EC
Epifrin (epinephrine HCl)*
Epipen, JR
Epivir
Eryc (erythromycin base)*
Erycette 2% Pledgets (erythromycin)*
Eryderm 2% Topical Solution (erythromycin)*
Erymax 2% Topical Solution (erythromycin)*
EryPed 200 Susp (erythromycin ethylsuccinate)*
Esgic (acetaminophen/caffeine/butalb)*
Eskalith, CR (lithium)*
Estrace (estradiol)*
Estraderm
Estring
Ethmozine
Eulexin (flutamide)*
Evamist
Evista
Evoxac
Exelon (rivastgmine)†
Exforge, HCT

F

Famvir (famciclovir)*
Fansidar
Fast Take Product Line
FazoClo ODT
Felbatol
Feldene (piroxicam)*
Femara†
Fem HRT
Fibricor (fenofibric acid)*
Finacea
Fioricet (APAP/caffeine/butalbital)*
Fiorinal (aspirin/caffeine/butalbital)*
Fiorinal w/Codeine (butalbital compound w/codeine)*
Flagyl (metronidazole)*
Flexeril (cyclobenzaprine)*
Flomax (tamsulosin)†
Flonase (fluticasone)*
Florinef (fludrocortisone)*
Flovent HFA
Floxin Otic (ofloxacin)*
Floxin tablet (ofloxacin)*
Fluoroplex
fluvoxamine
FML Forte
FML Liquifilm (fluorometholone)*
Folate (folic acid)*
Foradil
Fosamax (alendronate)*
Fosamax Solution
Fosrenol
Furadantin
Furoxone
Fuzeon

G

Gabitril
Gantrisin
Garamycin (gentamicin)*
Gel-Kam Gel (stannous fluoride)*
Geodon
Gleevec
Glucagon
Glucophage (metformin)*
Glucophage XR (metformin ER)*
Glucotrol XL (glipizide XL)*
Glucovance (glyburide/metformin)*
Glynase PresTab (glyburide micronized)*
Glyset
Golytely Solution (PEG- electrolyte for solution)*
Granulex (trypsin/balsam peru/castor oil)*
Gynodiol (estradiol)*

H

Halcion (triazolam)*
Halflytely
haloperidol
Hectorol
Histussin HC (phenyleph/chlorphen/hydrocodone)*
Humalog
Humibid DM (dextromethorphan/guaifenesin)*
Humibid LA (guaifenesin)*
Humulin R, N, 50/50, 70/30
Hycodan Syrup (hydrocodone w/homatropine)*
Hydrea (hydroxyurea)*
hydrochlorothiazide
Hytone (hydrocortisone 2.5% cream, ointment, lotion)*
Hytrin (terazosin)*
Hyzaar (losartan/hctz)*

I, J

Ilotycin (erythromycin)*
Imdur (isosorbide mononitrate)*
Imitrex (sumatriptan tab & inj)*
Imitrex Nasal Spray
Imodium (loperamide)*
Imuran (azathioprine)*
Inderal (propranolol)*
Inderal LA (propranolol la)*
Inderide (propranolol/HCTZ)*
Indocin, SR (indomethacin, SR)*
Inflamase Mild, Forte (prednisolone)*
Intal Inhaler
Intal Solution (cromolyn)*
Invirase
ISMO (isosorbide mononitrate)*
isoniazid
Isoptin, SR (verapamil, SR)*
Isopto Atropine (atropine sulfate)*
Isopto Carpine (pilocarpine HCl)*
Isopto Homatropine (homatropine)*
isosorbide dinitrate
Jalyn
Janumet
Januvia

K

K-Lor (potassium chloride 20mEq)*
K-Lyte CL (potassium bicar/chloride 25mEq)
K-Phos
K-Phos Neutral (phospha 250)*
K-Tab (potassium chloride sr)*
Kaletra
Kayexalate (sodium polystyrene sulfonate)*
Keflex (cephalexin)*
Kenalog in Orabase (triamcinolone acetonide)*
Keppra (levetiracetam)
Keppra XR
Kerlone (betaxolol)*
Klonopin (clonazepam)*
Klor-con
Kuzyme
Kytril (granisetron)*

L

Lamictal chewables 2mg
Lamictal chewables 5 & 25mg (lamotrigine)*
Lamictal tabs (lamotrigine)
Lamisil tablet (terbinafine)*
Lanoxin
Lanoxicaps
Lantus
Lariam (mefloquine)*
Lasix (furosemide)*
leflunimide
leucovorin
Leukeran
Leukine
Levaquin
Levbid (hyoscyamine)*
Levemir
Levlen (levonorgestrel & ethinyl estradiol)*
Levo-Dromoran (levorphanol tartrate)*
levora
Levothroid
Levoxyl
Levsin (hyoscyamine)*
Levsinex (hyoscyamine)*
Lexapro
Lexiva
Lialda
Librium (chlordiazepoxide)*
Lidex, E (fluocinonide)*
Lidoderm
Limbitrol DS (amitriptyline/chlordiazepoxide)*
Lioresal (baclofen)*
Lipitor
Lithobid (lithium)*
Lo/Ovral (low-ogestrel)*
Lodine (etodolac)*
Lodine XL (etodolac ER)*
Loestrin FE (microgestin 1-20, 1.5/30)*
Lomotil (diphenoxylate/atropine sulfate)
Loniten (minoxidil)*
Lopid (gemfibrozil)*
Lopressor (metoprolol)*
Lopressor HCT (metoprolol/HCTZ)*
Loprox gel (ciclopirox)*
Loprox Shampoo (ciclopirox)†
Lorcet (hydrocodone/apap)*
Lortab (hydrocodone/apap)*
Lotemax
Lotensin (benazepril)*
Lotensin HCT (benazepril HCTZ)*
Lotrel 2.5/10, 5/10, 5/20 & 10/20 (amlodipine/benazepril)*
Lorel 5/40 & 10/40mg
Lotrisone (clotrimazole/betamethasone)*
Lovaza
Lovenox (enoxaparin)*
Loxitane (loxapine)*
Lozol (indapamide)*
Lufyllin (dyphylline)*
Lupron (leuprolide)*
Lumigan
Luride (sodium flouride)*

M

Macrobid (nitrofurantoin mono)*
Macrodantin (nitrofurantoin)*
Marinol (dronabinol)*
Materna (multi-vitamins w/folic acid)*
Matulane
Mavik (trandolapril)*
Maxalt, MLT
Maxidex
Maxitrol (neomycin/polymyxin/dexamethasone)*
Maxzide (triamterene/HCTZ)*
Mebaral (mephobarbital)*
Meclomen (meclofenamate)*
Medrol 4mg, 8mg (methylprednisolone)*
Medrol 2 mg, 16mg, 32mg
Megace (megestrol)*
Mellaril (thioridazine)*
Menest
meperidine w/promethazine
Mephyton
Mepron
Mestinon timespan
Metaglip (glipizide/metformin)*
methyclothiazide
MetroCream (metronidazole)*
MetroGel
MetroGel Vaginal (metronidazole vag)*
Metrolotion (metronidazole lot)*
Mevacor (lovastatin)*
Mexitil (mexiletine)*
Micro-K (potassium chloride)*

Micronase (glyburide)*
Microzide (hydrochlorothiazide caps)*
Midamor (amiloride)*
Midrin (isometh/dichlphen/APAP)*
Minipress (prazosin)*
Minocin Capsule (minocycline)*
Mintezol
Miralax (glycolax)*
Mirapex (pramipexole)*
Mircette (kariva)*
Mobic (meloxicam)*
Modicon (ethinyl estradiol/norethindrone)*
Monistat-Derm (miconazole nitrate)*
Monodox (doxycycline monohydrate)*
Monoket (isosorbide mononitrate)*
Monopril (fosinopril)*
Motrin (ibuprofen)*
MS Contin (morphine SR)*
MSIR (morphine sulfate)*
Mucomyst (acetylcysteine)*
Myambutol (ethambutol)*
Mycobutin
Mycolog II (nystatin/triamcinolone)*
Mycostatin (nystatin)*
Mydriacyl (tropicamide)*
Myleran
Mysoline (primidone)*

N

Naldecon (decongestabs)*
Nalfon 600mg (fenoprofen)*
Namenda
Naprosyn (naproxen)*
Nardil
Nasarel (flunisolide)*
Nasonex
Natafort (prenatal vitamin)*
Natalins (prenatal multivitamins and minerals/iron/fa)*
Navane (thiothixene)*
Nebupent
necon
NeoDecadron (neomycin/dexamethasone)*
neomycin
Neoral
Neosporin soln (neomycin/polymyxin/gramicidin)*
Neosporin oint (neomycin/polymyxin/bacitracin)*
NeoSynephrine (phenylephrine)*
Neptazane (methazolamide)*
Neurontin (gabapentin)*
Neurontin Soln
Nexium
Niaspan
Niferex-150 Forte (iron/B12/folic acid)*
Nilandron
Nitro-Bid (nitroglycerin SR)*
Nitro-Dur
Nitrol (nitroglycerin ointment)*
Nitrolingual spray
Nitrostat (nitroglycerin)*
Nizoral (ketoconazole)*
Noctec (chloral hydrate)*
Nolvadex (tamoxifen)*
Nor-QD (norethindrone)*
Nordette (levora)*
Norflex (orphenadrine)*
Norgesic (orphenadrine cpd)*
Norgesic Forte (orphenadrine cpd Forte)*
Norinyl (necon)*
Normodyne (labetalol)*
Norpace (disopyramide)*
Norpace CR 100mg
Norpace CR 150mg (disopyramide CR 150mg)*
Norpramin (desipramine)*
nortriptyline
Norvasc (amlodipine)*
Norvir
Novafed A (pseudo-ephedrine hcl/chlor-mal)*
NuLev (neosol)*
Nuvigil
Nystatin

O

Ocufen (flurbiprofen sodium)*
Ocuflox (ofloxacin)*
Ocupress (carteolol hcl)*
Oforta
Ogen (estropipate)*
Omnicef (cefdinir)*
Omnipen (ampicillin)*
One Touch Product Line
Onglyza
Opticrom (cromolyn)*
Optivar^ (azelastine)*
Orencia*
Ortho-Cept (apri, reclipsen)*
Ortho-Est (estropipate)*
Ortho Evra
Ortho-Novum (necon)*
Ortho Tri-Cyclen (tri-nessa)*
Ortho Tri-Cyclen Lo
Orudis (ketoprofen)*
Oruvail (ketoprofen SA)*
Ovral (ogestrel)*
OxyContin (oxycodone ER)

P

Pamelor (nortriptyline)*
Pancrease
Panoxyl, AQ (benzoyl peroxide)*
Parafon Forte (chlorzoxazone)*
Paregoric
Parlodel Tab (bromocriptine)*
Parnate (tranylcypromine)*
Pataday
Patanol
Paxil (paroxetine)*
Paxil CR (paroxetine SR)*
Pediapred (prednisolone sodium prosphate)*
Pediazole (erythromycin/sulfisoxazole)*
Pentam (pentamidine isethionate)*
Pentasa
Pepcid (famotidine)*
Percocet (oxycodone/APAP)*
Percodan (oxycodone/aspirin)*
Perforomist
Peridex (chlorhexidine gluconate)*
Periostat (doxycycline)*
Persantine (dipyridamole)*
Phenergan DM (promethazine/dextromethorphan)*
Phenergan VC syrup (promethazine/phenylephrine)*
Phenergan/Codeine (promethazine/codeine)*
Phenergan (promethazine)*
Phenergan VC/Codeine (phenylephrine/promethazine/codeine)*
phenobarbital
Phoslo (calcium acetate)*
Pilocar (pilocarpine HCl)*
pindolol
Plan B 0.75mg (levonorgestrel)*
Plan B 1.5mg
Plaquenil (hydroxychloroquine)*
Plavix
Plexion SCT
Plexion TS (sulfacet sod w/sulfur10/5%)*
Poly-Vi-Flor (multi-vitamins w/fluoride)*
Polycitra (potassium citrate-citric acid)*
Polycitra-K (Pot. & Sod. Citrates w/citric acid)*
Polysporin (bacitracin zinc/polymyxin B)*
Polytrim (polymyxin B/trimethoprim)*
Potaba Tab (aminobenzoate tab)*
potassium chloride
Pramosone 1% cream only, lotion, oint
Prandin
Pravachol (pravastatin)*
Precose (acarbose)*
Pred Forte 1% (prednisolone)*
prednisone
Pred Mild 0.12%
Prelone (prednisolone)*
Premarin oral, vaginal cream
Premphase
Prempro
Prenate Advance (prenatal w/docusate, iron, folic acid)*
Prenate Elite
Prenate Ultra (multi-vitamins w/folic acid)*
Prevacid^ (lansoprazole)*
Prevident (sodium fluoride)*
Priftin
Prilosec^ (omeprazole)*
Primaquine
Prinivil (lisinopril)*
Prinzide (lisinopril/hctz)*
Pristiq
ProAmatine (midodrine)*
ProAir HFA
Pro-Banthine (propantheline)*
probenecid
Procanbid
Procardia (nifedipine)*
Procardia XL (nifedipine ER)*
Proctocort (hydrocortisone)*
Proctocream-HC (hemorhoidal cream)*
Profasi 10,000 (chorionic gonadotropin)*
Prograf (tacrolimus)
Prolixin (fluphenazine)*
Proloprim (trimethoprim)*
Prometrium
Pronestyl, SR (procainamide, SR)*
Propine (dipivefrin HCl)*
propylthiouracil
Proscar (finasteride)*
Protonix^ (pantoprazole)*
Protopic
Proventil HFA
Proventil, Tab, Syrup (albuterol)*
Provera (medroxy-progesterone)*
Prozac (fluoxetine)*
Psorcon (diflorasone diacetate)*
Pulmicort Respules
Purinethol (mercaptopurine)*
pyrazinamide
Pyridium (phenazopyridine)*

Q

Questran, Lite (cholestyramine, light)*
Quinaglute (quinidine gluconate)*
Quinidex (quinidine sulfate)*

R

Ranexa
Razadyne, ER (galantamine, sr)*
Rebetol (ribavirin)*
Reglan (metoclopramide)*
Relafen (nabumetone)*
Remeron, SolTab (mirtazapine)*
Remicade*
Renagel
Renvela tab
Requip* (ropinirole)
Rescriptor
Restasis
Restoril (temazepam)*
Retin-A Cream (tretinoin)*
Retin-A Gel (tretinoin)*
Retin-A Micro
Retrovir (zidovudine)
Revia (naltrexone hcl)*
Reyataz
Rheumatrex Tablets (methotrexate tablets)*
Ridaura
Rifadin (rifampin)*
Rifamate
Rifater
Rilutek

Risperdal (risperidone)*
Risperdal Consta
Risperdal ODT, M-tab (risperidone)*
Ritalin, SR (methylphenidate, SR)*
RMS Supp (morphine)*
Robaxin (methocarbamol)*
Rocaltrol (calcitriol 0.25, 0.5 mg caps)*
Rondec DM syrup (pseudoephed/bromphen-DM 45-4-15)*
Rondec, TR (pseudoephedrine/carbinoxamine)*
Roxicodone (oxycodone)*
Rynatan (chlorphen/pyrilamine/phenylephrine)*
Rynatuss tablets, pediatric susp (phenyleph- ephed-cpd w/carbetapentane)*
Rythmol (propafenone)*

S

Salagen (pilocarpine)*
Sanctura (trospium)*
Sandimmune*
Sandostatin (octreotide acetate)*
Savella
Seasonale (jolessa, quasense)*
Sectral (acebutolol)*
Selsun (selenium sulfide)*
Septra, DS (sulfamethoxazole/trimethoprim, DS)*
Serax (oxazepam)*
Serevent Diskus
Serophene (clomiphene)*
Seroquel, XR
Silvadene (silver sulfadiazine)*
Sinemet (carbidopa/levodopa)*
Sinemet CR (carbidopa/levodopa CR)*
Sinequan (doxepin)*
Singulair
Skelaxin (metaxolone)†
Slo-Bid (theophylline)*
Slo-Phyllin 80 Syrup (theophylline anhydrosl)*
Sodium Sulamyd (sulfacetamide solution)*
Solaquin Forte (hydroquinone)*
Soma (carisoprodol)*
Somavert
Somophyllin (aminophylline)*
Sonata (zaleplon)*
Sorbitrate (isosorbide dinitrate)*
Spectazole (econazole)*
Spectracef (cefditoren)*
Spiriva
Sporanox (itraconazole)*
Stadol N.S. (butorphanol tartrate 10 mg/ml N.S.)*
Starlix (nateglinide)
Stelazine (trifluoperazine)*
Strattera
Suboxone SL tab, SL film
Subutex (buprenorphine)*
Sular 20, 30 & 40mg (nisoldipine)*
Sular 8.5, 17, 25.5 & 34mg
Sulfacet-R (sodium sulfacetamide/sulfur)*
Sultrin (triple sulfa)*
Sustiva
Symbicort
Symbyax
Symlin
Symmetrel (amantadine)*
Synalar (fluocinolone acetonide)*
Synthroid (levothyroxine)

T

Tagamet (cimetidine)*
Talacen (pentazocine/apap)*
Talwin NX (pentazocine nx)*
Tambocor (flecainide)*
Tarka (trandolapril/verapamil)*
Tavist syrup, 2.68mg tabs (clemastine fumarate)*
Tazorac
Tegretol (carbamazepine)
Tegretol XR (carbamazepine ER)
Tekturna, HCT
Temodar†
Temovate (clobetasol)*
Tenex (guanfacine)*
Tenoretic (atenolol/chlorthalidone)*
Tenormin (atenolol)*
Terazol (terconazole)*
Teslac
Tessalon Perles (benzonatate)*
Testim
Theo-24
Theochron (theophylline)*
Thorazine Tab (chlorpromazine tab)*
Ticlid (ticlopidine)*
Tigan (trimethobenzamide)*
Tilade
Timoptic (timololophthalmic)*
Timoptic XE (timolol)*
Tobi
Tobradex oint.
Tobradex susp. (tobramycin/dexamethasone)*
Tobrex Soln (tobramycin)*
Tofranil (imipramine)*
Tolectin (tolmetin)*
Topamax
Topicort (desoximetasone)*
Toprol XL (metoprolol)*
Toradol (ketorolac tromethamine)*
Toviaz
Trandate (labetalol)*
Transderm-Scop
Tranxene (clorazepate)*
Trental (pentoxifylline)*
Treximet
Tricor (fenofibrate)*
TriLeven (levo norgestrel)*
Tri-Vi-Flor (triple vitamins w/fluoride)*
Tridesilon (desonide)*
Trilafon (perphenazine)*
Trileptal (oxcarbazepine)*
Trilipix
Trimox (amoxicillin)*
Trimpex (trimethoprim)*
Trinsicon (iron/intrinsic factor/B12)*
Triphasil (trivora)*
Trizivir
Trusopt (dorzolamide)*
Tussi-12 (phenyleph/chlorphen/carbeta)*
Tussi-Organidin NR (guaifenesin/codeine)*
Tussi-Organidin NR DM (guaifenesin/dextromethorphan)*
TussiCaps
Tussionex Pennkinetic ER
Twinject
Tylenol w/Cod (codeine/APAP)*
Tylox (oxycodone w/acetaminophen)*
Tympagesic (pramoxine/hc/chloroxylenol)*

U

Ultracet (tramadol/APAP)*
Ultram, ER (tramadol)*
Ultrase (pancrelipase)
Ultravate (halobetasol)*
Uniphyl (theophylline SR)
Uniretic (moexipril/hctz)*
Unithroid (levothyroxine)
Univasc (moexipril)*
Urecholine (bethanechol)*
Urised (meth/salicylate/atropine/hyos benzoic)*
Urocit-K (potassium citrate)*
Urogesic Blue (methenamine/hyosc-meth blue/sod biphos-phenyl sal)*
Uroxatral

V

V-Cillin K (penicillin V.K.)*
Vagifem
Valcyte tabs
Valisone (betamethasone valerate)*
Valium (diazepam)*
Valtrex (valacyclovir)†
Vantin (cefpodoxime)*
Vaseretic (enalapril/hydrochlorothiazide)*
Vasocidin (sulfacetamide sodium-prednisolone ophth sol.)*
Vasocon (naphazoline)*
Vasotec (enalapril)*
Veltin
Venlafaxine ER (velafaxine er)†
Vepesid (etoposide)*
Veramyst
Verelan (verapamil SR)*
Vermox (mebendazole)*
VESIcare
Vibramycin (doxycycline)*
Vicodin (hydrocodone/APAP)*
Vicodin E.S. (hydrocodone/apap)*
Videx
Videx EC (didanosine)*
Vigamox
Viokase
Viracept
Viramune
Viread
Viroptic (trifluridine)*
Vistaril (hydroxyzine pamoate)*
Vivelle
Vivelle Dot
Voltaren Gel
Voltaren Ophth (diclofenac sodium)*
Voltaren, XR (diclofenac, ER)*
Vosol (acetic acid)*
Vosol HC (acetic acid/hydrocortisone)*
Vyvanse

W, X

Welchol
Wellbutrin, SR (bupropion)*
Wellbutrin XL (budeprion XL)*
Westcort (hydrocortisone)*
Xalatan†
Xanax (alprazolam)*
Xeloda
Xopenex Neb Soln 1.25/0.5ml (levalbuterol)*
Xopenex Neb Soln except 1.25/0.5ml
Xylocaine (lidocaine)*
Xylocaine viscous (lidocaine viscous)*

Y, Z

Yasmin (ocella)*
Yaz (gianvi)†
Yodoxin
Yocon (yohimbine)*
Zanaflex (tizanidine)*
Zantac (ranitidine)*
Zarontin (ethosuximide)*
Zaroxolyn (metolazone)*
Zebeta (bisoprolol)*
Zegerid^ (omeprazole/bicarb)*
Zenate (multi-vitamins w/folic acid)*
Zephrex LA (pseudo-ephedrine/guaifenesin)*
Zerit (stavudine)*
Zestril (lisinopril)*
Zestoretic (lisinopril/hctz)*
Zetacet (sulfacetsod w/sulfur 10/5%)*
Ziac (bisoprolol/HCTZ)*
Ziagen
Zithromax (azithromycin)*
Zocor (simvastatin)*
Zofran (ondansetron)*
Zoloft (sertraline)*
Zomig, ZMT
Zonegran (zonisamide)*
Zortress
zovia
Zovirax Cap (acyclovir)*
Zovirax Oint
Zylet
Zyloprim (allopurinol)*
Zyprexa

Anthem is committed to helping you to manage your prescription benefits. Prior Authorization, Quantity Limits, Step Therapy and Dose Optimization are some of the edits recommended by the P&T Committee and approved by your health plan. These edits help ensure you have access to safe, appropriate and effective prescription medications.

PRIOR AUTHORIZATION: medications which require pharmacy benefit manager or plan approval before you may receive benefits.

Actiq (fentanyl citrate)*
Amevive*
Androderm
AndroGel
Botox*
Enbrel*
Fentora*
Forteo*
Genotropin*
Gleevec
Humatrope*
Humira*
Lamisil tablet (terbinafine)*
Lyrica*
Norditropin*
Nutropin, AQ*
Nuvigil
Oforta
Orencia*
Pegasys*
Peg-Intron*
Penlac*
Provigil*
Remicade*
Saizen*
Serostim*
Sporanox (itraconazole)*
Temodar†
Testim
Tev-Tropin*
Xeloda
Xolair*
Xyzal*^
Zorbtive*
Zyvox*

QUANTITY LIMIT: affects the frequency or dosage of certain medications for which you receive benefits.

Aciphex*^
Actiq (fentanyl citrate)*
Advicor
Allegra^ (fexofenadine)*
Allegra D^ (fexofenadine/PSE 12hr)*
Ambien (zolpidem)*
Ambien CR*
Amerge (naratriptan)*
AndroGel
Anzemet*
Astelin (azelastine)†
Astepro
Avinza
Axert*
Byetta
Bepreve^*
Clarinex, D*^
Crestor
Cymbalta
Dexilant* (formerly Kapidex)
Diabetic Test Strips (Accu-Chek and One Touch brand products are formulary)
Effient
Elestat*^
Emend*
Enbrel*
Fentora*
Flonase (fluticasone)*
Forteo*
Frova*
Genotropin*
Humatrope*
Humira*
Imitrex (sumatriptan tab & inj)*
Imitrex Nasal Spray
Kytril (granisetron)*
Lunesta*
Maxalt, MLT
Migranal*
Nasarel (flunisolide)*
Nasonex
Nexium
Norditropin*
Nutropin, AQ*
Nuvigil
Optivar^ (azelastine)*
Pataday
Patanol
Plavix
Prevacid^ (lansoprazole)*
Prilosec^ (omeprazole)*
Pristiq
Protonix^ (pantoprazole)*
Relpax*
Rozerem*
Saizen*
Savella
Serostim*
Simcor*
Sonata (zaleplon)*
Stadol N.S. (butorphanol)*
Symbicort
Testim
Tev-Tropin*
Treximet
Veramyst
Xyzal*^
Zegerid^ (omeprazole/bicarb)*
Zofran (ondansetron)*
Zomig, ZMT
Zorbtive*

STEP THERAPY: requires that you first use a specific medication before alternatives therapies may be tried or prescribed.

Adderall (amphetamine/dextroamphetamine^#) - generic only
Aciphex*^
Ambien CR*
Apidra*
Arthrotec*
Beconase AQ*
Betaseron*
Byetta
Celebrex*
Dexilant* (formerly Kapidex)
Diabetic Test Strips (Accu-Chek and One Touch brand products are formulary)
Elidel
Nasacort AQ*
Nasarel (flunisolide)*
Omnaris*
Prevacid*^
Prilosec*^
Protonix*^
Protopic
Rhinocort Aqua*
Rozerem*
Sonata (zaleplon)*
Vytorin*
Xyzal*^
Zegerid*^
Zetia*

DOSE OPTIMIZATION: normally involves the conversion from twice-daily dosing to a once-daily dosing schedule. A once-daily dosing schedule may increase compliance and decrease expenses for you and your health plan.

Medications in the following categories are included in the dose optimization edits.

Antidepressants
Cholesterol reducing medications
Certain blood pressure medications

Not all medications and not all plans are subject to prior authorization and quantity limits. For more information regarding prior authorization or quantity limits, contact Member Services at the telephone number listed on your identification card.

For Kentucky Residents Only:

In selecting medications for the prescription drug formulary, the therapeutic efficacy and cost effectiveness are addressed for each category. All therapeutic categories are represented on the formulary by at least one medication. When a closed formulary is in effect, only medications that are included on the formulary are a covered service. In certain clinical situations, a member may require use of a non-formulary product. Anthem has criteria that permits a member to obtain a non-formulary medication in a closed formulary plan. If specific criteria are met, a member can receive a non-formulary drug for a formulary copay. The criteria preserves the clinical integrity of the drug formulary and provides a process by which deviations from the formulary may be allowed. An appeals process is in place for any medications that do not meet the criteria.

Anthem
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For more information, please visit anthem.com.

- **If you have additional questions about your prescription benefits please call the Member Services number on your ID card**
- **Speech and hearing impaired (TDD/TTY users) should call 800-221-6915, Monday – Friday, 8:30 a.m. – 5:00 p.m., ET**
- **For the most current version of this prescription drug list, please visit anthem.com**
- **Bring a copy of this drug list/formulary to your next doctor's visit to assist in selecting the lowest cost medications**

Effective 11/10

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