

# PRESCRIPTION DRUG PROGRAM FORMULARY UPDATES

**Generic Additions** 

# These generic drugs recently became available in the marketplace. When these generic drugs became available, we began covering them at the appropriate generic formulary level of cost-sharing:

Generic drug	Brand drug	Formulary chapter	Effective date	
adapalene 0.3% gel	Differin <sup>®</sup> 0.3% gel	Chapter 5. Skin Medications	April 14, 2014	
atovaquone	Mepron®	Chapter 1. Antibiotics & Other Drugs Used for Infection	March 24, 2014	
calcipotriene- betamethasone dp	Taclonex®	Chapter 5. Skin Medications	April 7, 2014	
capecitabine	Xeloda®	Chapter 2. Cancer & Organ Transplant Drugs	March 17, 2014	
carbidopa	Lodosyn®	Chapter 3. Pain, Nervous System, & Psych	March 17, 2014	
clocortolone pivalate	Cloderm®	Chapter 5. Skin Medications	February 24, 2014	
desvenlafaxine er	Khedezla®	Chapter 3. Pain, Nervous System, & Psych	April 14, 2014	
doxercalciferol	Hectorol®	Chapter 7. Diabetes, Thyroid, Steroids, & Other Miscellaneous Hormones	February 24, 2014	
eszopiclone	Lunesta®	Chapter 3. Pain, Nervous System, & Psych	April 21, 2014	
morphine sulf er	Avinza®	Chapter 3. Pain, Nervous System, & Psych	February 10, 2014	
moxifloxacin hcl	Avelox®	Chapter 1. Antibiotics & Other Drugs Used for Infection	February 24, 2014	
nevirapine	Viramune <sup>®</sup> XR™	Chapter 1. Antibiotics & Other Drugs Used for Infection	April 21, 2014	
omega-3 acid ethyl esters	Lovaza®	Chapter 4. Heart, Blood Pressure, & Cholesterol	April 14, 2014	
raloxifene hcl	Evista®	Chapter 9. Bone, Joint, & Muscle	April 7, 2014	
rifabutin	Mycobutin®	Chapter 1. Antibiotics & Other Drugs Used for Infection	April 7, 2014	
sevelamer carbonate	Renvela®	Chapter 15. Diagnostics & Miscellaneous Agents	April 28, 2014	
telmisartan/ hydrochlorothiazide	Micardis <sup>®</sup> HCT	Chapter 4. Heart, Blood Pressure, & Cholesterol	March 3, 2014	
Xulane	Ortho Evra®	Chapter 10. Female, Hormone Replacement, & Birth Control	April 28, 2014	
Brand Additions				
These brand drugs were added to the formulary as of the dates indicated below				

These brand drugs were added to the formulary as of the dates indicated below and are covered at the appropriate brand formulary level of cost-sharing:

Brand drug	Formulary chapter	Effective date
Axiron®	Chapter 7. Diabetes, Thyroid, Steroids, & Other Miscellaneous Hormones	August 1, 2014
Creon®	Chapter 8. Stomach, Ulcer, & Bowel Meds	August 1, 2014
Sovaldi™	Chapter 1. Antibiotics & Other Drugs Used for Infection	July 1, 2014
Victoza®	Chapter 7. Diabetes, Thyroid, Steroids, & Other Miscellaneous Hormones	August 1, 2014
Zenpep®	Chapter 8. Stomach, Ulcer, & Bowel Meds	August 1, 2014

#### **Brand Deletions**

#### These brand drugs will be covered at the appropriate non-formulary level of cost-sharing: *Effective October 1, 2014*

Brand drug	Generic drug	Formulary chapter		
Aromasin®	exemestane	Chapter 2. Cancer & Organ Transplant Drugs		
Avinza®	morphine sulf er	Chapter 3. Pain, Nervous System, & Psych		
Differin <sup>®</sup> 0.3% gel	adapalene 0.3% gel	Chapter 5. Skin Medications		
Evista®	raloxifene hcl	Chapter 9. Bone, Joint, & Muscle		
Gastrocrom®	cromolyn sodium solution	Chapter 8. Stomach, Ulcer, & Bowel Meds		
Lovaza®	omega-3 acid ethyl esters	Chapter 4. Heart, Blood Pressure, & Cholesterol		
Lunesta®	eszopiclone	Chapter 3. Pain, Nervous System, & Psych		
Mycobutin <sup>®</sup>	rifabutin	Chapter 1. Antibiotics & Other Drugs Used for Infection		
Ortho Evra®	Xulane	Chapter 10. Female, Hormone Replacement, & Birth Control		
Viramune <sup>®</sup> XR™	nevirapine	Chapter 1. Antibiotics & Other Drugs Used for Infection		
Xeloda <sup>®</sup>	capecitabine	Chapter 2. Cancer & Organ Transplant Drugs		

The generic drugs for the above brand drugs are on our formulary and available at the generic formulary level of cost-sharing.

#### **Brand Deletions**

#### These brand drugs will be covered at the appropriate non-formulary level of cost-sharing:

Effective	October	1, 2014
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Brand drug	Formulary Therapeutic Alternatives	Formulary chapter
Fragmin <sup>®</sup>	enoxaparin	Chapter 4. Heart, Blood Pressure, & Cholesterol
Nexium®	pantoprazole, rabeprazole	Chapter 8. Stomach, Ulcer & Bowel Meds
Rescriptor®	Edurant <sup>®</sup> , Sustiva <sup>®</sup>	Chapter 1. Antibiotics & Other Drugs Used for Infection
Videx <sup>®</sup> solution	Emtriva® 10 mg/ml, zidovudine 10 mg/ml	Chapter 1. Antibiotics & Other Drugs Used for Infection
Vimovo®	pantoprazole and naproxen	Chapter 8. Stomach, Ulcer, & Bowel Meds

There is no generic equivalent for the above brand drugs; however, there are formulary therapeutic alternative drugs. These therapeutic alternative drugs are available at the appropriate formulary level of cost-sharing. Contact your doctor to discuss formulary alternatives.

#### **Drugs Requiring Prior Authorization**

## The prior authorization requirement for the following non-formulary drugs was effective at the time the drugs

became	available	in the	marketplace.
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Brand drug	Generic drug	Formulary chapter	Effective date
Alprolix™	N/A	Chapter 15. Diagnostics & Miscellaneous Agents	April 28, 2014
Anoro™ Ellipta™	N/A	Chapter 12. Allergy, Cough & Cold, Lung Meds	March 3, 2014
Grastek®	N/A	Chapter 12. Allergy, Cough & Cold, Lung Meds	April 28, 2014
Hetlioz™	N/A	Chapter 3. Pain, Nervous System, & Psych	March 17, 2014
Myalept™	N/A	Chapter 7. Diabetes, Thyroid, Steroids, & Other Miscellaneous Hormones	April 28, 2014
Oralair <sup>®</sup>	N/A	Chapter 12. Allergy, Cough & Cold, Lung Meds	April 14, 2014
Orenitram™	N/A	Chapter 4. Heart, Blood Pressure, & Cholesterol	March 31, 2014
Otezla™	N/A	Chapter 9. Bone, Joint, & Muscle	March 31, 2014
Ragwitek™	N/A	Chapter 12. Allergy, Cough & Cold, Lung Meds	April 28, 2014
Tretten®	N/A	Chapter 15. Diagnostics & Miscellaneous Agents	March 17, 2014

### **Drugs Requiring Prior Authorization**

The following non-formulary drugs have been added to the list of drugs requiring prior authorization.			
Brand drug	Generic drug	Formulary chapter	Effective date
Absorica™	N/A	Chapter 5. Skin Medications	October 1, 2014
Factive®	N/A	Chapter 1. Antibiotics & Other Drugs Used for Infection	October 1, 2014
First <sup>®</sup> Lansoprazole	N/A	Chapter 8. Stomach, Ulcer, & Bowel Meds	October 1, 2014
First <sup>®</sup> Omeprazole	N/A	Chapter 8. Stomach, Ulcer, & Bowel Meds	October 1, 2014
Khedezla®	desvenlafaxine er	Chapter 3. Pain, Nervous System, & Psych	October 1, 2014
Nexium®	N/A	Chapter 8. Stomach, Ulcer & Bowel Meds	October 1, 2014
Prilosec®	omeprazole	Chapter 8. Stomach, Ulcer, & Bowel Meds	October 1, 2014
Qualaquin®	quinine sulfate*	Chapter 1. Antibiotics & Other Drugs Used for Infection	October 1, 2014
Vimovo®	N/A	Chapter 8. Stomach, Ulcer, & Bowel Meds	October 1, 2014
Zavesca®	N/A	Chapter 15. Diagnostics & Miscellaneous Agents	October 1, 2014
*Generic requires prior authorization			

# Drugs With Quantity Limits

	Quantity limits will be added or up	dated to the following drugs:	
Brand drug	Generic drug	Quantity limit	Effective date
Actonel® 150 mg	risedronate	1 tab per 28 days	October 1, 2014
Actonel <sup>®</sup> 35 mg	N/A	4 tabs per 28 days	October 1, 2014
Amerge <sup>®</sup> 1 mg	naratriptan	9 tabs per 30 days	October 1, 2014
Atelvia®	N/A	4 tabs per 28 days	October 1, 2014
Avinza®	morphine sulfate er	30 tabs per 30 days	February 24, 2014
Binosto®	N/A	4 tabs per 28 days	October 1, 2014
Boniva®	ibandronate	1 tab per 30 days	October 1, 2014
First <sup>®</sup> Lansoprazole	N/A	600 ml per 30 days	October 1, 2014
First <sup>®</sup> Omeprazole	N/A	600 ml per 30 days	October 1, 2014
N/A	alendronate solution	300 ml per 28 days	October 1, 2014
Fosamax <sup>®</sup> , Fosamax <sup>®</sup> Plus D	alendronate	4 tabs per 28 days	October 1, 2014
Hetlioz®	N/A	30 caps per 30 days	October 1, 2014
Imitrex® 25 mg, 50 mg tabs	sumatriptan	18 tabs per 30 days	October 1, 2014
Imitrex® 5 mg nasal spray	sumatriptan	36 units per 30 days	October 1, 2014
Lunesta® 1 mg	eszopiclone 1 mg	60 tabs per 30 days	April 21, 2014
Lunesta® 2 mg, 3 mg	eszopiclone 2 mg, 3 mg	30 tabs per 30 days	April 21, 2014
Maxalt® (MLT) 5 mg	rizatriptan	12 tabs per 30 days	October 1, 2014
Noxafil®	N/A	93 tabs per 30 days	October 1, 2014
Ortho Evra®	Xulane	3 patches per 28 days	April 28, 2014
Relpax <sup>®</sup> 20 mg	N/A	12 tabs per 30 days	October 1, 2014
Xartemis™ XR	N/A	120 tabs per 30 days	March 24, 2014
Zenzedi™ 10 mg	dextroamphetamine	90 tabs per 30 days	October 1, 2014
Zenzedi™ 15, 20 mg	N/A	90 tabs per 30 days	October 1, 2014
Zenzedi™ 30 mg	N/A	60 tabs per 30 days	October 1, 2014
Zomig <sup>®</sup> (ODT) 2.5 mg	zolmitriptan	9 tabs per 30 days	October 1, 2014
*Quantity limits currently exist for br	rand drugs and will apply to generics at	the dates indicated above	

\*Quantity limits currently exist for brand drugs and will apply to generics at the dates indicated above

# Drugs No Longer Requiring Prior Authorization

Prior authorization has been removed for the following drugs:

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