



Phoenix Health Plan

Serving AHCCCS members for over 25 years

Drug Formulary

APRIL 2011

The PHP Formulary is also available for printing at www.phoenixhealthplan.com

PHOENIX HEALTH PLAN DRUG FORMULARY

The Phoenix Health Plan (PHP) Drug Formulary was created to ensure safe, appropriate and cost-effective utilization of medications. With a primary consideration to provide comprehensive drug coverage for patients, the Formulary was evaluated in all therapeutic categories and contains those agents that offer the greatest value in each class. Provider's utilization of the PHP Drug Formulary ensures our member's pharmaceutical needs are met in a high quality, cost-effective manner. Formulary development and maintenance is a dynamic process and is subject to periodic changes.

THE PHP PHARMACY AND THERAPEUTICS COMMITTEE

PURPOSE AND GOALS

The PHP Pharmacy and Therapeutic (P & T) Committee consists of physicians, pharmacists, and other professionals representing various medical specialties, whose primary purpose is to develop and monitor the PHP Drug Formulary and to establish programs and procedures to ensure high quality, cost-effective drug therapy. The PHP P & T regularly reviews new and existing medications to ensure the Formulary meets the needs of both members and providers.

FUNCTION AND SCOPE:

The P & T has the following primary functions:

1. To serve in an advisory capacity in all matters pertaining to use of drugs and drug therapy.
2. To perform a periodic review of the PHP Drug Formulary and to provide advice to the plan regarding modifications of the formulary based upon an objective analysis of the safety, efficacy, and cost-effectiveness of each medication.
3. To develop educational programs and materials for health plan participants, physicians, and provider pharmacies related to drug use.
4. To evaluate and recommend drug therapy guidelines and prior authorization criteria based upon safety, efficacy, and cost-effectiveness.
5. To manage and review appropriateness of drug utilization.
6. To make recommendations for policies and procedures relating to drug handling and administration for health plan members.

PROCEDURES FOR AMENDING FORMULARY

Physicians may request a formulary addition, deletion, or change in prior authorization criteria for the PHP Drug Formulary by submitting a Drug Formulary Change Request form to the plan. A request form may be obtained on our website www.phoenixhealthplan.com or by contacting a Network Management Representative directly at 602.824.3720. Requests should contain at least two (2) supporting documents that are randomized, controlled, clinical trials written in peer review journals. No marketing materials will be accepted. Requests will be forwarded to Pharmacy Services, researched and presented to the P & T Committee. Mail or fax requests to:

Phoenix Health Plan
C/O P & T Committee Pharmacy Director
7878 N. 16th St. Suite 105
Phoenix, AZ 85020
Fax: (602) 674-6652, (888) 887-9982

THE PHP DRUG FORMULARY

The PHP Drug Formulary is a list of medications eligible for coverage by PHP. The covered medications are organized by therapy class and are summarized in the Table of Contents. Both brands and generics are available, however, if a medication is available generically, only the generic formulation is covered. If a generic formulation becomes available sometime in the year, the brand formulation will no longer be covered and the generic will automatically process. For specific information about the medication, please refer to a comprehensive drug information resource and the product package insert.

If a drug name does not appear on the list of Formulary Medications, then the drug requires a prior authorization. *There are some drugs listed that have restrictions, please note any comments.* A list of preferred drugs that require prior authorization immediately follows the Formulary.

Please look to the website www.phoenixhealthplan.com for the most up-to-date Formulary.

NON-COVERED MEDICATIONS

Please note that certain medications are excluded by AHCCCS and thus are **not** covered by the plan. In order to reduce the risk of adverse effects to our patients, PHP will not cover drugs when prescribed for experimental or investigational uses. These medications include but are not limited to the following:

- Erectile dysfunction drugs and products
- Topical Minoxidil
- Retinoic Acid for Cosmetic Purposes
- Experimental or Investigational Medications
- Medications purchased outside of the United States
- DESI (Drug Efficacy Study Implementation) drugs – drugs not deemed effective by the FDA.

INJECTABLE MEDICATIONS

Injectable medications obtained by prescription, other than Insulin, Insulin Supplies, and those specifically listed on the PHP formulary, are eligible for coverage. Please see the J code guide for prior authorization requirements for coverage of injectable medications. PHP may elect to provide coverage for other injectable medications and will advise our pharmacy benefit manager (PBM) that an exception is to be made. Intramuscular administered medications will need to be procured by the medical office/clinic. Members may not be asked to fill the prescription at a community pharmacy and bring it to the medical offices for administration.

NON-PRESCRIPTION DRUGS

If an over-the-counter (OTC) product is listed on the formulary and a prescription is written and presented to the pharmacy, the product is covered by the PHP. Insulin and insulin syringes are available to plan members with a prescription. OTC medications that are *not* listed in the formulary are not available for coverage by the Health Plan unless prior authorization was obtained first.

LIMITATIONS AND RESTRICTIONS

The plan may have restrictions on certain formulary medications. Restrictions are limitations on quantities, dosages or certain criteria. Drugs that require prior authorization or have special status (exempt for certain providers) may have quantity/dose restrictions. Unless indicated otherwise on the formulary, all dosage forms and strengths of a listed medication are covered.

Benzodiazepines

Benzodiazepines are limited to #60 per month and concurrent benzodiazepine use is not covered. Only one benzodiazepine prescription per month will be allowed; if switching from one to another in the same month, a prior authorization will be required.

Step Therapy

Some formulary medications that usually require prior authorization may process via step therapy, a step-wise process in the pharmacy claims processing system. The pharmacy claims processing system detects first step medication fills in the past (up to 90 days) of a member's prescription fills. If a member has been compliant, a prior authorization request submission is not necessary or required. The following medications may process in that manner:

Budesonide/Formoterol (Symbicort®): Available if member is compliant in refilling his/her inhaled corticosteroid for at least two months.

Clarithromycin (Biaxin®): Available with concomitant prescription fills of Amoxicillin or Metronidazole and Prilosec OTC up to 80mg/day (#4, 20mg tablets for H. pylori treatment. Indicate on the prescription "For H. pylori."

Fluticasone/salmeterol (Advair®): Available if member is compliant in refilling his/her inhaled corticosteroid for at least two months.

Lansoprazole (Prevacid®) 24 HR OTC: Available after failure of documented and compliant omeprazole OTC therapy written with your prescription. Omeprazole 20mg OTC tablets may be filled for #120 per month.

Montelukast (Singulair®): Available if member continues to be compliant refilling his/her Inhaled corticosteroids (i.e., Flovent, QVAR, Advair, Symbicort, Pulmicort Respules).

Mometasone (Nasonex®): Available after at least two fills of first line nasal steroids (fluticasone, flunisolide.)

Oxycodone ER (Oxycontin®): Quantity 60 per month may be available after documented trial and failure of Kadian® and generic MS Contin therapy due to intolerance as documented by an FDA MedWatch 3500 form submission and medical records.

Tamsulosin (Flomax®): Available after failure of documented and compliant terazosin, prazosin or doxazosin therapy.

Sumatriptan (Imitrex®) Spray / Injection: Available after a documented and compliant Imitrex tablets therapy and concomitant migraine prophylaxis.

Simvastatin/ezetimibe (Vytorin®): Available after a documented and compliant trial of maximum of 80mg generic Zocor (simvastatin.)

Telmisartan (Micardis®): Available after at least one recent fill of losartan.

Valsartan (Diovan®): Available after at least one recent fill of losartan.

SMOKING CESSATION PRODUCTS: Per AHCCCS, coverage is only for Title XIX members. Members are encouraged to enroll in ASH Line by calling 1-800-556-6222. Maximum supply is 12 weeks in six months.

Prior Authorizations and Formulary Exceptions

Physicians are encouraged to consult the PHP Drug Formulary when prescribing medications for plan members. Formulary medications are available for plan members for the vast majority of therapeutic needs. If the patient requires medication that is not covered, the physician may submit a request through the Prior Authorization or Formulary Exception process using a Drug Prior Authorization or Formulary Exception Request Form. Documentation to support the request and the completed request form should be faxed to **PHP c/o Pharmacy Services at (602) 674-6652 or (888) 887-9982**. The information submitted must have the diagnosis for therapy requested, past therapeutic failures on formulary drugs and other pertinent patient information such as cholesterol panels, iron studies and other lab work supporting the request, according to PHP Policies & Procedures. To maintain continuity of care and drug safety, samples are not considered a therapeutic trial. However trial quantities of medications on the Formulary or authorized through the health plan will be considered for continuity of care.

Prescription Quantities

Prescriptions should be written for a therapeutic supply of medications. The amount to appropriately treat a medical condition may be 2, 7, or 14 days, up to a maximum of a 30-day supply. Trial quantities may be used when trying new treatments, if appropriate.

TELEPHONE PRESCRIPTIONS

Whenever possible, the patient should be given the prescription of a formulary drug in writing. This will allow the patient to make use of the most convenient network pharmacy and enable the pharmacy to fill the prescription after normal office hours.

INDIVIDUAL PRESCRIPTIONS

Each prescription must legally be prescribed for one individual only. If prescribing for a family, each family member must receive a prescription.

**PHP Formulary
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D	Cardiovascular Agents	Drugs for Heart Conditions
E	Central Nervous System Agents	Drugs for the Brain and Nervous System
F	Ear, Nose And Throat Agents	Drugs for the Ear, Nose and Throat
G	Endocrine/Metabolic Agents	Drugs for Hormone Conditions
H	Gastrointestinal Agents	Drugs for Stomach Conditions
I	Genitourinary Agents	Drugs for Bladder Conditions
J	Hematological Agents	Drugs for Blood Conditions
K	Nutritional - Vitamins, Minerals, Electrolytes, Supplements	Vitamins, Minerals, Electrolytes, Supplements
L	Ophthalmic Agents	Drugs for the Eye
M	Respiratory Agents	Drugs for Breathing Conditions
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P	Preferred Prior Authorization Medications	Selected List of Drugs That Require Prior Authorization
	Index by Generic Name	Index by Generic Name
	Behavioral Health Medications	Drugs for Attention Deficit Hyperactivity, Anxiety and Depression

PHP Formulary

Section	DRUG CLASS	Sub- Class	Generic Name	Reference Brand Name	Limitations / Restrictions
A	ANALGESICS				
A		Opioid Agonists	acetaminophen/codeine	TYLENOL/CODEINE	
A			acetaminophen/hydrocodone	LORTAB, VICODIN	
A			acetaminophen/oxycodone	PERCOCET	5/325, 7.5/325 are covered
A			butalbital/ASA/caffeine/codeine	FIORINAL/COD	
A			butalbital/APA/caffeine/codeine	FIORICET/COD	
A			hydromorphone	DILAUDED	
A			meperidine	DEMEROL	
A			methadone 5mg, 10mg	DOLOPHINE	5mg, 10mg only
A			morphine sulfate IR, CR	MSIR, MS CONTIN	
A			oxycodone	OXY IR	
A			propoxyphene HCl	DARVON	
A			propoxyphene napsylate/acetaminophen	DARVOCET-N	
A			morphine sulfate CR	KADIAN	
A		Non-Steroidal Anti-Inflammatory Drugs			
A			aspirin – OTC	ASPIRIN	
A			aspirin E.C. tab – OTC	ECOTRIN	
A			diclofenac	VOLTAREN	
			etodolac	LODINE	
A			piroxicam	FELDENE	
A			ibuprofen	MOTRIN	
A			ibuprofen – OTC	CHILDREN'S MOTRIN SUSP	
A			indomethacin	INDOCIN	
A			meloxicam	MOBIC	
A			naproxen	NAPROSYN	
A			sulindac	CLINORIL	
A			diclofenac/misoprostol	ARTHROTEC	
A		Anti-rheumatics			
A			hydroxychloroquine	PLAQUENIL	
A			methotrexate	RHEUMATREX	
A		Drugs To Prevent And Treat Gout			
A			allopurinol	ZYLOPRIM	
A			indomethacin	INDOCIN	
A			probenecid	BENEMID	
A		Migraine Medications			
A			aspirin/caffeine/APAP – OTC	EXCEDRIN MIGRAINE	

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Section	DRUG CLASS	Sub- Class	Generic Name	Reference Brand Name	Limitations / Restrictions
A			<i>sumatriptan</i>	IMITREX TABS	#9 tabs. per month covered
B	ANTI-INFECTIVES				
B		Penicillins			
B			amoxicillin	TRIMOX	
B			amoxicillin/clavulanate	AUGMENTIN	
B			ampicillin	PRINCIPEN	
B			dicloxacillin	DYNAPEN	
B			penicillin VK	VEETIDS	
B		Cephalosporins			
B			cefaclor	CECLOR	
B			cefdinir	OMNICEF	
B			cefuroxime	CEFTIN	Tablets and Suspension
B			cephalexin	KEFLEX	
B		Macrolides			
B			erythromycin base, enteric coated	ERY-TAB	
B			erythromycin-ethylsuccinate	E.E.S.	
B			erythromycin stearate	ERYTHROCIN	
B			azithromycin	ZITHROMAX	
B			<i>clarithromycin</i>	BIAXIN	for <i>H. pylori</i> therapy: use 500mg concomitant Amoxicillin 1gm and Prilosec OTC 40mg, up to 80mg/d
B		Tetracyclines			
B			doxycycline	VIBRAMYCIN	
B			tetracycline	SUMYCIN	
B			demeclocycline HCL	DECLOMYCIN	
B		Amino-glycosides			
B			neomycin	NEOMYCIN	
B		Sulfonamides			
B			SMZ/TMP, DS	BACTRIM, SEPTRA, DS	
B			sulfisoxazole	GANTRISIN	
B			sulfisoxazole/erythromycin	PEDIAZOLE	
B		Anti-tuberculosis			
B			ethambutol	MYAMBUTOL	
B			isoniazid	INH	
B			pyrazinamide	PYRAZINAMIDE	
B			pyridoxine - OTC	Vitamin B-6	
B			rifampin	RIFADIN	
B			rifabutin	MYCOBUTIN	

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Section	DRUG CLASS	Sub- Class	Generic Name	Reference Brand Name	Limitations / Restrictions
B		Antifungals			
B		Oral			
B			fluconazole	DIFLUCAN	
B			<i>fluconazole 150mg</i>	<i>DIFLUCAN 150mg</i>	#2 tablet per fill
B			griseofulvin	GRIFULVIN V/SUSP+E35	
B			nystatin	MYCOSTATIN	
B			<i>clotrimazole</i>	<i>MYCELEX</i>	<i>troches only</i>
B		Antivirals			
B			acyclovir	ZOVIRAX	
B			amantadine	SYMMETREL	
B			didanosine EC	VIDEX EC	
B			zidovudine	RETROVIR	
B			abacavir	ZIAGEN	
B			abacavir/lamivudine/zidovudine	TRIZIVIR	
B			amprenavir	AGENERASE	
B			delavirdine mesylate	RESCRIPTOR	
B			didanosine (ddl)	VIDEX	
B			efavirenz	SUSTIVA	
B			emtricitabine	EMTRIVA	
B			emtricitabine/Tenofovir	TRUVADA	
B			fosamprenavir	LEXIVA	
B			indinavir	CRIXIVAN	
B			lamivudine	EPIVIR	
B			lamivudine/Abacavir	EPZICOM	
B			lamivudine/Zidovudine	COMBIVIR	
B			lopinavir/Ritonavir	KALETRA	
B			nelfinavir mesylate	VIRACEPT	
B			nevirapine	VIRAMUNE	
B			ritonavir	NORVIR	
B			saquinavir	FORTOVASE	
B			saquinavir	INVIRASE	
B			stavudine (d4T)	ZERIT	
B			tenofovir	VIREAD	
B			valacyclovir	VALTREX	
B			zalcitabine (ddC)	HIVID	
B		Antimalarials			
B			chloroquine	ARALEN	
B			primaquine Phosphate	PRIMAQUINE	
B			pyrimethamine	DARAPRIM	
B		Amebicides			

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Section	DRUG CLASS	Sub- Class	Generic Name	Reference Brand Name	Limitations / Restrictions
B			iodoquinol	YODOXIN	
B		Anthelmintics			
B			mebendazole	VERMOX	
B			piperazine	VERMIZINE	
B			niclosamide	NICLOCIDE	
B		Misc.			
B		Anti-Infectives			
B			<i>clindamycin</i>	CLEOCIN	150mg covered
B			<i>metronidazole</i>	FLAGYL	250mg, 500mg covered
B			<i>nitrofurantoin</i>	FURADANTIN	suspension covered
B			nitrofurantoin	MACROBID	
B			nitrofurantoin Macrocrystals	MACRODANTIN	
B			trimethoprim	TRIMPEX	
B			dapsone	DAPSONE	
B			furazolidone	FUROXONE	
B		Quinolones			
B			ciprofloxacin	CIPRO	
B			levofloxacin	LEVAQUIN	
C	ANTI-NEOPLASTICS AND IMMUNOLOGIC AGENTS				
C		Anti-neoplastics			
C			altretamine	HEXALEN	
C			anastrozole	ARIMIDEX	
C			azathioprine	IMURAN	
C			bicalutamide	CASODEX	
C			busulfan	MYLERAN	
C			chlorambucil	LEUKERAN	
C			cyclophosphamide	CYTOXAN	
C			estramustine	EMCYT	
C			etoposide	VEPESID	
			exemstane	AROMASIN	
C			flutamide	EULEXIN	
C			hydroxyurea	HYDREA	
C			levamisole	ERGAMISOL	
C			lomustine	CEENU	
C			megestrol	MEGACE	
C			melphalan	ALKERAN	
C			mercaptopurine	PURINETHOL	
C			methotrexate	RHEUMATREX	

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Section	DRUG CLASS	Sub- Class	Generic Name	Reference Brand Name	Limitations / Restrictions
C			mitotane	LYSODREN	
C			procarbazine	MATULANE	
C			tamoxifen	NOLVADEX	
C			testolactone	TESLAC	
C			thioguanine	THIOGUANINE	
C			tretinoin	VESANOID	
C		Immuno-suppressants			
C			azathioprine	IMURAN	
C			cyclophosphamide	CYTOXAN	
C			cyclosporine	NEORAL	caps and solution
C			<i>cyclosporine caps</i>	<i>SANDIMMUNE</i>	<i>caps</i>
C			methotrexate	RHEUMATREX	
D	CARDIOVASCULAR	Cardiac Glycosides			
D			digoxin	LANOXIN	
D		Nitrates			
D			<i>isosorbide dinitrate</i>	<i>ISORDIL</i>	<i>Tembids caps excluded</i>
D			isosorbide monohydrate	IMDUR	
D			nitroglycerin ointment	NITROL	
D			nitroglycerin sublingual tabs	NITROSTAT	
D			nitroglycerin spray	NITROLINGUAL SPRAY	
D		Beta blockers			
D		Beta-1 Specific			
D			acebutolol	SECTRAL	
D			atenolol	TENORMIN	
D			carvedilol	COREG	
D			metoprolol	LOPRESSOR	
D			metoprolol ER	TOPROL XL	
D		Non-Selective			
D			labetalol	NORMODYNE	
D			nadolol	CORGARD	
D			pindolol	VISKEN	
D			propranolol	INDERAL	
D			propranolol LA	INDERAL LA	
D			propranolol XL	INNOPRAN XL	
D			penbutolol	LEVATOL	
D		Beta-Blocker Combinations			
D			atenolol/chlorthalidone	TENORETIC	
D			bisoprolol/hydrochlorothiazide	ZIAC	

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Section	DRUG CLASS	Sub- Class	Generic Name	Reference Brand Name	Limitations / Restrictions
D		Calcium Antagonists			
D			diltiazem	CARDIZEM	
D			diltiazem ER	CARDIZEM CD, SR	
D			diltiazem ER	DILACOR XR, TIAZAC	
D			nifedipine SR	ADALAT-CC	
D			verapamil	CALAN	
D			verapamil SR	CALAN SR	
D			amlodipine	NORVASC	
D			nisoldipine	SULAR	
D		Anti-dysrhythmic Drugs			
D			amiodarone	CORDARONE	
D			disopyramide	NORPACE, CR	
D			flecainide	TAMBOCOR	
D			mexiletine HCl	MEXITIL	
D			procainamide	PRONESTYL	
D			procainamide SR	PROCANBID	
D			propafenone	RYTHMOL	
D			quinidine gluconate	QUINAGLUTE	
D			quinidine sulfate	QUINIDINE SULFATE	
D			quinidine sulfate SR	QUINIDEX	
D			sotalol	BETAPACE	
D			morizine	ETHMOZINE	
D			tocainide	TONOCARD	
D		Angiotensin Converting Enzyme Inhibitors			
D			benazepril	LOTENSIN	
D			benazepril/HCTZ	LOTENSIN HCT	
D			captopril	CAPOTEN	
D			enalapril	VASOTEC	
D			enalapril/HCTZ	VASORETIC	
D			lisinopril	ZESTRIL	
D			lisinopril/HCTZ	ZESTORETIC	
D		Angiotensin II Antagonists			
D			losartan	COZAAR	
			telmisartan	MICARDIS	Step Therapy - failed losartan
D			valsartan	DIOVAN	Step Therapy - failed losartan
D		Antiadrenergic Agents			
D			clonidine	CATAPRES	tablets only
D			doxazosin	CARDURA	

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Section	DRUG CLASS	Sub- Class	Generic Name	Reference Brand Name	Limitations / Restrictions
D			guanabenz acetate	WYTENSIN	
D			methyldopa	ALDOMET	
D			prazosin	MINIPRESS	
D			terazosin	HYTRIN	
D		Alpha Blockers			
D			phenoxybenzamine	DIBENZYLINE	
D		Vasodilators			
D			hydralazine	APRESOLINE	
D			minoxidil	LONITEN	
D		Diuretics			
D		Loop Diuretics			
D			bumetanide	BUMEX	
D			furosemide	LASIX	
D		Thiazide & Related Diuretics			
D			chlorthalidone	HYGROTON	
D			chlorothiazide	DIURIL	
D			hydrochlorothiazide	HYDRODIURIL	
D			indapamide	LOZOL	
D			methyclothiazide	ENDURON	
D			methyclothiazide/deserpidine	ENDURONYL,	
D			metolazone	ZAROXOLYN	
D		Potassium Sparing Diuretics			
D			amiloride	MIDAMOR	
D			amiloride/HCTZ	MODURETIC	
D			spironolactone	ALDACTONE	
D			spironolactone/HCTZ	ALDACTAZIDE	
D			triamterene/HCTZ	DYAZIDE, MAXZIDE	
D		Carbonic Anhydrase Inhibitors			
D			acetazolamide	DIAMOX	
D			methazolamide	NEPTAZANE	
D		Cholesterol Lowering Agents			
D		HMG CoA Reductase Inhibitors			
D			lovastatin	MEVACOR	
D			pravastatin	PRAVACHOL	
D			simvastatin	ZOCOR	

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Section	DRUG CLASS	Sub- Class	Generic Name	Reference Brand Name	Limitations / Restrictions
D		Other Cholesterol Lowering Agents			
D			<i>cholestyramine</i>	QUESTRAN	<i>cans are covered</i>
D			<i>cholestyramine</i>	QUESTRAN LIGHT	<i>cans are covered</i>
D			<i>colestipol</i>	COLESTID	<i>tablets, granules covered</i>
D			<i>fenofibrate</i>	LOFIBRA	<i>54, 67, 134, 160, & 200mg</i>
D			gemfibrozil	LOPID	
D			niacin – OTC	NICOTINIC ACID	
			niacin (niacin B3; nicotinic acid)	NIASPAN	
D			omega FFA – OTC	Omega FFA - OTC	
D		Miscellaneous Cardiovascular Drugs			
D			midodrine	PROAMATINE	
D			pentoxifylline	TRENTAL	
E	CENTRAL NERVOUS SYSTEM AGENTS				
E		Anxiolytics, Sedative Hypnotics			Limit #60 per month (inclusive) PA < 8 y.o.
E			alprazolam	Xanax	#60 per month
E			buspirone	Buspar	5 mg, 10 mg, 15 mg tabs
E			clonazepam	KLONOPIN	#60 per month
E			diazepam	VALIUM	#60 per month
E			lorazepam	ATIVAN	#60 per month
E			temazepam	RESTORIL	15mg, 30mg (#60/mo)
E			zolpidem	AMBIEN	
E		Anti-depressants			
E			imipramine	TOFRANIL	
E		<i>Anti-depressants</i>			PA < 8 y. o.
E			<i>amitriptyline</i>	ELAVIL	
E			<i>bupropion RR, SR</i>	WELLBUTRIN SR	
E			<i>bupropion XL</i>	BUDEPRION XL	
E			<i>citalopram</i>	CELEXA	
E			<i>desipramine</i>	NORPRAMIN	
E			<i>doxepin HCl</i>	SINEQUIN	
E			<i>fluoxetine</i>	PROZAC	<i>10mg, 20mg are covered</i>
E			<i>maprotiline HCl</i>	LUDIOMIL	
E			<i>nortriptyline</i>	PAMELOR	
E			<i>paroxetine</i>	PAXIL	
E			<i>sertraline</i>	ZOLOFT	

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Section	DRUG CLASS	Sub- Class	Generic Name	Reference Brand Name	Limitations / Restrictions
E			trazodone	DESYREL	
E			venlafaxine	EFFEXOR	
E		CNS Stimulants			PA < 5 y.o.
E			amphetamine salt combination	ADDERALL	
E			amphetamine salt combination	ADDERALL XR	Requires PA
E			dexmethylphenidate	FOCALIN	
E			dextroamphetamine	DEXEDRINE	
E			methylphenidate	CONCERTA	
E			methylphenidate	RITALIN, RITALIN LA	(maximum of 60mg per day)
E		CNS Non-Stiumlant	atomoxetine	STRATTERA	Requires PA
E		Anti-convulsants			
E			carbamazepine	TEGRETOL	
E			carbamazepine ER	TEGRETOL XR	
E			gabapentin	NEURONTIN	
E			phenobarbital	PHENOBARBITAL	
E			primidone	MYSOLINE	
E			valproic acid	DEPAKENE	
E			divalproex sodium	DEPAKOTE	
E			divalproex sodium ER	DEPAKOTE ER	
E			ethosuximide	ZARONTIN	
E			phenytoin	DILANTIN	
E			phenytoin ER	PHENYTEK	
			topiramate	TOPAMAX	
E		Antiparkinson Drugs			
E			benztropine	COGENTIN	
E			bromocriptine	PARLODEL	
E			carbidopa/Levodopa	SINEMET	
E			carbidopa/Levodopa CR	SINEMET CR	
E			trihexyphenidyl	ARTANE	
E		Skeletal Muscle Relaxants			
E			baclofen	LIORESAL	
E			carisoprodol	SOMA	
E			chlorzoxazone	PARAFLEX	
E			cyclobenzaprine	FLEXERIL	
E			methocarbamol	ROBAXIN	
E			tizanidine hydrochloride	ZANAFLEX	
E		Smoking Cessation Products			

PHP Formulary

Section	DRUG CLASS	Sub- Class	Generic Name	Reference Brand Name	Limitations / Restrictions
			bupropion SR 150mg	Zyban	
E			nicotine gum, lozenges, patches, spray, inhaler	Nicotrol	Max. 12 weeks/ 6 months
E			varenicline	Chantix	Max. 12 weeks/ 6 months
F	EAR, NOSE, THROAT AGENTS				
F		OTIC Anti-infectives			
F			ofloxacin otic soln. 0.3%	FLOXIN	
F		OTIC Antibiotic-Steroid Combinations			
F			hydrocortisone/neomycin/ polymyxin B	CORTISPORIN OTIC	
F		Miscellaneous OTIC Products			
F			benzocaine/antipyrine	AURALGAN	
F			hydrocortisone/acetic acid	VOSOL HC OTIC	
F		Throat & Mouth Medications			
F			chlorhexidine liquid	PERIDEX 0.12%	
F			clotrimazole Troche	MYCELEX TROCHE	
F			lidocaine HCL 2%	XYLOCAINE VISCOUS	
F			nystatin	MYCOSTATIN SUSP	
F			phenol 0.5%	CHLORASEPTIC SPRAY	
F			triamcinolone paste	KENALOG ORABASE	
F		Corticosteroids – Nasal			
F			fluticasone	FLONASE	
F			mometasone	NASONEX AQ	Step Therapy - failed fluticasone, flunisolide
F		Miscellaneous Nasal			
F			normal saline 0.65% - OTC	OCEAN	
F			azelastine	ASTELIN	
F			cromolyn – OTC	NASALCROM	
G	ENDOCRINE / METABOLIC AGENTS				
G		Systemic Corticosteroids			
G		Gluco-corticosteroids			
G			dexamethasone	DECADRON	
G			hydrocortisone	CORTEF	
G			methylprednisolone	MEDROL	
G			prednisolone	PRELONE,	

PHP Formulary

Section	DRUG CLASS	Sub- Class	Generic Name	Reference Brand Name	Limitations / Restrictions
G				PEDIAPRED	
G			prednisone	ORASONE	
G			dexamethasone Therapeutic Pak	HEXADROL	
G		Mineralocorticoids			
G			fludrocortisone	FLORINEF	
G		Estrogens			
G			estradiol (oral, patch)	ESTRACE, CLIMARA TD	
G			estropipate	ESTRATAB	
G			estrogens, conjugated	PREMARIN (oral, cream)	
G		Estrogen/			
G		Progestin Combinations			
G			estrogens, conjugated/medroxyprogesterone	PREMPRO, PREMPHASE	
G		Mono-Phasic Oral Contraceptives			
G			ethinyl estradiol/desogestrel	ORTHO-CEPT	
G			ethinyl estradiol/norethindrone	MODICON	
G			ethinyl estradiol/norethindrone	ORTHO-NOVUM 1/35	
G			ethynodiol/ethinyl estradiol	DEMULEN 1/5, 1/50	
G			levonogestrel/ethinyl estradiol	ALESSE	
G			levonogestrel/ethinyl estradiol	NORDETTE	
			levonogestrel/ethinyl estradiol	YAZ	
G			norethindrone/ethinyl estradiol	LOESTRIN	
G			norethindrone/mestranol	ORTHO-NOVUM 1/50	
G			norgestimate/ethinyl estradiol	ORTHO-CYCLEN	
G			norgestrel/ethinyl estradiol	LO OVRAL, OVRAL	
G			estradiol/norelgestromin	ORTHO EVRA	
G			ethinyl estradiol/drospirenone	YASMIN 28	
G			ethinyl estradiol/norethindrone	OVCON-35, 50	
G		Bi-Phasic Oral Contraceptives			
G			desogestrel/ethinyl estradiol	MIRCETTE	
G			norethindrone/ethinyl estradiol	ORTHO-NOVUM 10/11	
G		Tri-Phasic Oral Contraceptives			
G			levonorgestrel/ethinyl estradiol	TRIPHASIL	
G			norethindrone/ethinyl estradiol	ORTHO-NOVUM 7/7/7	
G			norethindrone/ethinyl estradiol	ESTROSTEP	
G			norgestimate/ethinyl estradiol	ORTH TRI CYCLEN	
			norgestimate/ethinyl estradiol	ORTH TRI CYCLEN LO	

PHP Formulary

Section	DRUG CLASS	Sub- Class	Generic Name	Reference Brand Name	Limitations / Restrictions
G		Progestin Only Oral Contraceptives			
G			norethindrone	ORTHO MICRONOR	
G			levonorgestrel	PLAN B OTC	
G			norgestrel	OVRETTE	
G		Other Contraceptive Devices			
G			condoms-OTC		
G			contraceptive cream/jelly-OTC		
G			contraceptive foam w/applicator-OTC		
G			diaphragm, Diaphragm Kit	ORTHO FLEX,	
G				KOROMEX	
G			spermicidal jelly-OTC		
G		Progestins			
G			medroxyprogesterone	PROVERA, CYCRIN	
G			medroxyprogesterone injection	DEPO-PROVERA	
G			norethindrone acetate	AYGESTIN	
G			progesterone gel	CRINONE	
G		Oral Hypoglycemics			
G			acarbose	PRECOSE	
G			chlorpropamide	DIABINESE	
G			glimepiride	AMARYL	
G			glipizide	GLUCOTROL	
G			glipizide extended release	GLUCOTROL XL	
G			glyburide	GLYNASE 1.5mg, 3mg, MICRONASE	
G			glyburide/metformin	GLYCOVANCE	
G			metformin	GLUCOPHAGE	
G			metformin XR	GLUCOPHAGE XR	
G			tolazamide	TOLINASE	
G			tolbutamide	ORINASE	
			pioglitazone	ACTOS	
G			rosiglitazone	AVANDIA	
G			rosiglitazone/Metformin	AVANDAMET	
G		Insulins			
G			insulin, aspart	NOVOLOG	
G			insulin, glargine	LANTUS	
			insulin, human	NOVOLIN	
G		Diabetic Supplies			
G			alcohol Prep Pads		

PHP Formulary

Section	DRUG CLASS	Sub- Class	Generic Name	Reference Brand Name	Limitations / Restrictions
G			glucose Test Strips	ACCU-CHEK-	
G				ACTIVE	
G				AVIVA	
G				ADVANTAGE	
G				COMPACT	
G				COMPLETE	
G			insulin Syringes		
G			lancets		
G		Glucagon			
G			glucagon injection	GLUCAGON KIT	
G		Anti-thyroid Drugs			
G			propylthiouracil	PTU	
G			methimazole	TAPAZOLE	
G		Thyroid Hormones			
G			levothyroxine-T4	LEVOTHROID, LEVOXYL	Generics only
G		Other Endocrine Drugs	thyroid desiccated	ARMOUR THYROID	
G					
G			bromocriptine	PARLODEL	
G			alendronate	FOSAMAX	
G			calcitonin Nasal Spray	MIACALCIN NASAL SPRAY	
G			raloxifene	EVISTA	
G			risedronate	ACTONEL	
H	GASTROINTESTINAL AGENTS				
H		Antidiarrheal preparations			
H			diphenoxylate/atropine	LOMOTIL	
H			kaolin-pectin- OTC	KAOPECTATE	
H			loperamide HCL – OTC	IMODIUM A-D	
H		Antiulcer Drugs			
H		H2 Antagonists			
H			cimetidine	TAGAMET	
H			famotidine - OTC	PEPCID AC	
H			ranitidine - OTC	ZANTAC	
H			ranitidine syrup	ZANTAC SYRUP	PA > 8 years old
H		Proton Pump Inhibitors			
H			omeprazole – OTC	PRILOSEC OTC	up to 80mg/d (#4, 20mg each)

PHP Formulary

Section	DRUG CLASS	Sub- Class	Generic Name	Reference Brand Name	Limitations / Restrictions
H		Other Anti-ulcer and gastrointestinal products			
H			antacid liquid – OTC	MAALOX	
H				MAALOX TC	
H			antacid liquid – OTC	MYLANTA/RIOPAN	
H			antacid tablets/capsules – OTC	GAVISCONTUMS	
H			docusate capsules – OTC	COLACE	
H			magnesium hydroxide - OTC	MILK OF MAGNESIA	
H			simethicone – OTC	MYLICON	
H			sodium phosphate ped – OTC	FLEETS PED – OTC	
H			sucralfate	CARAFATE	<i>tablets are covered</i>
H			ursodiol	ACTIGALL	
H			senna laxatives	SENOKOT	
H		Antiemetics			
H			hydroxyzine	ATARAX	
H			meclizine - OTC	ANTIVERT	
H			prochlorperazine	COMPRO	<i>tablets, supps are covered</i>
H			promethazine	PHENERGAN	<i>tablets, supps are covered</i>
H		Antispasmodics & Drugs Affecting GI Motility			
H			dicyclomine	BENTYL	
H			l-hyoscyamine sulfate	LEVSIN, LEVSIN EX	
H			lactulose	CEPHULAC	
H			metoclopramide	REGLAN	
H			PEG solution	COLYTE, COLYTE FLAVORED	
H			propantheline	PRO-BANTHINE	
H			psyllium powder	METAMUCIL	
H			scopolamine tablets	SCOPACE	
H		Misc. Gastrointestinals			
			polycarbophil	FIBERCON	
H			sulfasalazine	AZULFIDINE	
H			mesalamine	ASACOL	
H		Digestive Enzymes			
H			Lipase/protease/amylase	CREON CR	
I	GENITOURINARY AGENTS				
I		Vaginal Anti-Infectives			
I					
I			butoconazole – OTC	FEMSTAT-3	

PHP Formulary

Section	DRUG CLASS	Sub- Class	Generic Name	Reference Brand Name	Limitations / Restrictions
I			clindamycin	CLEOCIN VAGINAL	
I			clotrimazole – OTC	GYNE-LOTTRIMIN, MYCELEX-G	
I			metronidazole	METROGEL VAGINAL	
I			miconazole – OTC	MONISTAT-7	
I			nystatin	MYCOSTATIN	
I			terconazole	TERAZOL	
I			tioconazole – OTC	VAGISTAT-1	
I			triple sulfa vaginal cream	SULTRIN VAG CREAM	
I		Anti-cholinergic / Anti-spasmodics			
I			oxybutynin	DITROPAN	
I			oxybutynin XL	DITROPAN XL	
I		Cholinergic Drugs			
I			bethanechol	URECHOLINE	
I		Miscellaneous Genitourinary			
I			doxazosin	CARDURA	
I			prazosin	MINIPRESS	
I			terazosin	HYTRIN	
I			finasteride	PROSCAR	
J	HEMATOLOGICAL AGENTS				
J		Anticoagulant Drugs			
J			warfarin	COUMADIN	
J			warfarin	COUMADIN	
J		Antiplatelet Drugs			
J			aspirin- OTC	ASPIRIN	
J			clopidogrel	PLAVIX	
J			dipyridamole	PERSANTINE	
J			ticlopidine	TICLID	
J			apirin/dipyridamole	AGGRENOX	
K	NUTRITIONAL - VITAMINS, MINERALS, ELECTROLYTES, SUPPLEMENTS				
K		Prenatal vitamins			
K			prenatal vitamins	NESTABS FA,	
K		Vitamins			
K			calcitriol	ROCALTROL	

PHP Formulary

Section	DRUG CLASS	Sub- Class	Generic Name	Reference Brand Name	Limitations / Restrictions
			cholecalciferol (D3)	VITAMIN D 3	
K			ferrous sulfate tabs, liquid, drops	FEOSOL	
K			folic acid	FOLVITE	
K			MVI w/ FI & / or FE	TRI-VI-FLOR	tablets and drops are covered
K				POLYR-VI-FLO	
K			MVI – OTC	VARIOUS	maximum of #100 covered
K			sodium fluoride	LURIDE TABS	
K			sodium fluoride drops	LURIDE DROPS	
K			vitamin B-12/folic acid/B-6	FOLTIX	
K		Potassium Supplements			
K			potassium chloride packets	KLOR CON	
K			potassium chloride liquid	Potassium Liquid	
K			potassium chloride tablets	K-DUR, KTABS, KLOTRIX	
K		Electrolytes and Other Products			
K			pediatric electrolyte solution	PEDIALYTE	
K			potassium citrate/citric acid	CITRA-K	
L	OPHTHALMIC AGENTS				
L		Antibiotics			
L			bacitracin	BACITRACIN OPHTH OINT	
L			chloramphenicol	CHLOROPTIC	
L			erythromycin	ILOTYCIN OPHTH OINT	
L			gentamicin	GENOPTIC	
L			ofloxacin	OCUFLOX	
L			tobramycin	TOBREX	
L		Antibiotic Combinations			
L			bacitracin/polymyxin B	POLYSPORIN	
L			gram/neomycin/polymixin B	NEOSPORIN	
L			trimethoprim/ polymyxin B	POLYTRIM	
L		Antibiotic-Steroid Combinations			
L			dexamethasone/neomycin/polymixin	MAXITROL, POLYDEX	
L			hydrocortisone/neomycin/polymyxin B	CORTISPORIN,	
L			neomycin 0.35%/polymyxin B/	POLY PRED	
L			prednisolone		
L			prednisolone 1%/gentamicin 3mg/ml drops	PRED-G	
L			sulfacetamide/prednisolone	BLEPHAMIDE	

PHP Formulary

Section	DRUG CLASS	Sub- Class	Generic Name	Reference Brand Name	Limitations / Restrictions
L			tobramycin 0.3% /dexamethasone 0.1%	TOBRADEX	
L				VASOCIDIN	
L		Antiviral Agents			
L			trifluridine	VIROPTIC	
L			vidarabine	VIRA-A	
L		Sulfonamides			
L			sulfacetamide 10%	BLEPH 10,	
L				SODIUM SULAMYD	
L		Corticosteroids			
L			dexamethasone 0.1%	DECADRON,	
L				AK-DEX SOL PRED	
L			fluorometholone 0.1%, 0.25%	FML	
L			prednisolone 0.12%	PRED MILD	
L			prednisolone 1%	PRED FORTE	
L		Sympathomimetics			
L			dipivefrin	PROPINE	
L		Beta-Blockers			
L			betaxolol	BETOPTIC	
L			levobunolol	BETAGAN	
L			timolol maleate soln	TIMOPTIC	
L			timolol maleate gel	TIMOPTIC-XE GEL	
L		Miotics			
L			pilocarpine hydrochloride	PILOCAR	
L		Vaso-constrictors			
L			phenylephrine	NEOSYNEPHRINE	
L		Cycloplegic Mydriatics			
L			atropine	ISOPTO ATROPINE	
L			cyclopentolate	CYCLOGYL	
L			homatropine	ISOPTO HOMATROPINE	
L			tropicamide	MYDRIACYL	
L			scopolamine	ISOPTO HYOSCINE	
L		Alpha Adrenergic Receptor Agonists			
L			brimonidine 0.2%	ALPHAGAN	
L			brimonidine 0.2%	ALPHAGAN P	
L		Non-steroidal Anti-inflammatory Drugs (NSAIDS)			
L			flurbiprofen 0.03%	OCUFEN	

PHP Formulary

Section	DRUG CLASS	Sub- Class	Generic Name	Reference Brand Name	Limitations / Restrictions
L			diclofenac 0.1%	VOLTAREN	
L			ketorolac 0.5%	ACULAR,	
L				ACULAR P.F.	
L		Anti-Allergy Agents			
L			cromolyn sodium	OPTICROM	
L			ketorolac 0.5%	ACULAR,	
L				ACULAR P.F.	
L			lodoxamine 0.1%	ALOMIDE	
L			olopatadine HCL 0.4%	PATANOL	
L		Antifungal Agents			
L			natamycin 5%	NATACYN	
L		Artificial Tear Products/Lubricants			
L			carboxymethylcellulose (CMC) 0.5%, 1% - OTC	REFRESH TEARS	
L					
L					
L			hydroxypropyl cellulose - OTC	LACRI-LUBE	
L			hydroxypropyl cellulose - OTC	GENTEAL	
L					
L		Carbonic Anhydrase Inhibitors			
L			dorzolamide 1%	TRUSOPT	
L		Prostaglandins			
L			latanoprost 0.005%	XALATAN	
M	RESPIRATORY AGENTS				
M		Antihistamines			
M					
M		Single-Entity Products			
M			carbinoxamine	HISTEX/PD	
M			cetirizine	ZYRTEC	
			chlorpheniramine - OTC	CHLOR-TRIMETON	
M			clemastine – OTC	TAVIST	
M			cyproheptadine	PERIACTIN	
M			diphenhydramine 12.5mg/5ml elixir- OTC	BENADRYL	
M			diphenhydramine 25mg – OTC	BENADRYL 25mg	
M			diphenhydramine 50mg	BENADRYL 50mg	
M			fexofenadine	ALLEGRA	

PHP Formulary

Section	DRUG CLASS	Sub- Class	Generic Name	Reference Brand Name	Limitations / Restrictions
M			hydroxyzine	ATARAX, VISTARIL	
M			loratadine – OTC	CLARITIN – OTC	
M		Combination Products			
M					
M			brompheniramine/Pseudoephedrine-OTC	DIMETAPP ELIXER	
M			carbinoxamine/pseudoephedrine	RONDEC TABS, DROPS	
M			pyrilamine/phenyltoloxmine/pheniramine	POLY-HISTINE	
M			triprolidine/pseudoephedrine – OTC	ACTIFED TABS, SYRUP	
M		Pediatric Cough/Cold Products			
M			guaifenesin/ dextromethorphan – OTC	ROBITUSSIN DM	
M			phenylephrine tannate/Chlorpheniramine tannate	RYNATAN PED SUSP	
M			pseudoephedrine/ brompheniramine	RONDEC SYRUP	
M			pseudoephedrine/ carbinoxamine DM	RONDEC DM	
M			pseudoephedrine/CTM/ dextromethorphan - OTC	PEDIA-CARE	
M				COUGH/COLD	
M		Decongestant Products			
M			phenylephrine/guaifenesin	ENTEX LA	
M			pseudoephedrine – OTC	SUDAFED TABS, SYRUP	
M			pseudoephedrine/guaifenesin	ENTEX PSE,	
M				GUAIMAX-D,	
M				DURATUSS	
M			pseudoephedrine/guaifenesin	ZEPHREX LA,	
M				DECONSAL II	
M		Antitussives & Expectorants			
M			benzonatate	TESSALON PERLES	
M			codeine/promethazine	PHENERGAN/COD	
M			codeine/promethazine/phenylephrine	PHENERGAN VC	
M			dextromethorphan/promethazine	PHENERGAN DM	
M			guaifenesin liquid – OTC	ROBITUSSIN	
M			guaifenesin tablet	HUMIBID LA, FENESIN	
M			guaifenesin/codeine	ROBITUSSIN AC	
M			guaifenesin/codeine	TUSSI-ORGANIDIN NR	

PHP Formulary

Section	DRUG CLASS	Sub- Class	Generic Name	Reference Brand Name	Limitations / Restrictions
M			guaifenesin/dextromethorphan	HUMIBID DM,	
M			guaifenesin/dextromethorphan	TUSSI-ORGANIDIN DM NR	
M			guaifenesin/dextromethorphan – OTC	ROBITUSSIN DM	
M			hydrocodone/phenylephrine/CTM	HISTUSSIN HC	
M			phenylephrine/promethazine	PHENERGAN VC	
M			phenylephrine/pyrilamine/ pheniramine	POLY-HISTINE	
M			pseudoephedrine/DM/ guaifenesin	ROBITUSSIN CF	
M				FENESIN DM	
M		<u>Antiasthmatics</u>			
M		Adrenergic Stimulants- inhalation			
M			albuterol, inhaler	PROAIR	HFA only
M			albuterol, nebulization	albuterol, nebulization	
M			ipratropium, nebulization	ipratropium, nebulization	
M			ipratropium & albuterol, inhaler	COMBIVENT	
M			metaproterenol	ALUPENT INHALER	
M		Adrenergic Stimulants- Oral solutions			
M			albuterol	PROVENTIL	
M			metaproterenol	METAPREL	
M		Adrenergic Stimulants- Oral Tabs			
M			albuterol	PROVENTIL	
M			metaproterenol tablets	ALUPENT	
M			terbutaline	BRETHINE	
M		Xanthine Derivatives			
M			theophylline	THEO-DUR	
M			theophylline SR	SLO-BID GYROCAPS	
M			theophylline XR	UNIPHYL	
M		Corticosteroids for inhalation			
M			beclomethasone dipropionate	QVAR	
M			<i>budesonide inhalation susp</i>	<i>PULMICORT RESPULES</i>	PA > 8 years old
M			fluticasone propionate inhalation	FLOVENT HFA	
M		Other Respiratory drugs and Devices			
M			ipratropium bromide	ATROVENT SOLUTION	

PHP Formulary

Section	DRUG CLASS	Sub- Class	Generic Name	Reference Brand Name	Limitations / Restrictions
M			ipratropium	ATROVENT INHALER	
M			sodium chloride solution-OTC canister	BRONCHO SALINE	
N	TOPICALS				
N		Anti-Acne Medications			
N			benzoyl peroxide - OTC	BENZAC	
N			clindamycin	CLEOCIN T	
N			erythromycin topical solution	T-STAT, ERYCETTE	
N			<i>tretinoin</i>	RETIN-A	PA > 18 y.o.
N		Topical Anti-Infectives			
N			bacitracin ointment	BACITRACIN	
N			bacitracin/neomycin/polymixin B ointment	NEOSPORIN	
N			gentamicin	GARAMYCIN	
N			mupirocin	BACTROBAN	
N			silver sulfadiazine	SILVADENE	
N		Topical Anti-Fungals			
N			clotrimazole cream/solution – OTC	MYCELEX	
N			nystatin	MYCOSTATIN	
N			tolnaftate cream/solution – OTC	TINACTIN	
		Topical Antiparasitic			
N			permethrin 1%, 5%	NIX, ACTICIN	
N		Topical Corticosteroids			
N		GROUP I (HIGH POTENCY)			
N			clobetasol	TEMOVATE	
N		GROUP II (HIGH POTENCY)			
N			fluocinonide	LIDEX	
N			betamethasone dipropionate	DIPROSONE	
N			betamethasone valerate	VALISONE	
N		GROUP III (MEDIUM POTENCY)			
N			fluocinolone acetonide	SYNALAR	
N			triamcinolone acetonide	KENALOG	
N		GROUP IV (LOW POTENCY)			
N			hydrocortisone	HYTONE	
N			hydrocortisone 1% - OTC	Hydrocortisone 1%	
N		Corti-costeroid Combination			

PHP Formulary

Section	DRUG CLASS	Sub- Class	Generic Name	Reference Brand Name	Limitations / Restrictions
N			triamcinolone/nystatin	MYCOLOG II	
N		Antiparasitics			
N			permethrin - OTC	ELIMITE	
N			malathion	OVIDE	
N		Anorectal Medications			
N			hydrocortisone retention enema	CORTENEMA	
N					
N		Miscellaneous Topicals			
N			ammonium Lactate	LAC-HYDRIN	
N			capsaicin – OTC	ZOSTRIX	
N			lidocaine topical 2%, 5%	XYLOCAINE topical	
N			salicylic acid – OTC	SALICYLIC ACID	
N			selenium sulfide	SELSUN BLUE	
N			urea – 10, 20, 40%	CARMOL, AQUACARE	
N		Enzyme Preparations			
N			PODOCON-25 LIQUID		
N		Vaginal			
N			conjugated estrogen cream	PREMARIN CREAM	
N					
N			PODOFILOX 0.5% TOPICAL SOLN		
O	MISCELLANEOUS				
O			spacers	AEROCHAMBERS+	Limit one per year
O			vaporizers	Cool Mist Vaporizers	\$10.00, limit one per member per year
O					
O			epinephrine	EPI-PEN, EPI-PEN JR	
O		End Stage Renal Disease Medications			
O			aluminum hydroxide – OTC	ALTERNAGEL	
O			calcium acetate tabs, caps	PHOSLO TABS, CAPS	
O			calcium carbonate – OTC	TUMS	
O		Uterine Active Agents			
O			methergine	METHERGINE	
P	Preferred Prior Authorization Medications - see attached				

Preferred Prior Authorization Medications					
Section	DRUG CLASS	Sub- Class	Generic Name	Reference	Criteria, Limitations,
P-A		Opioid Agonist	oxycodone HCl	OXYCONTIN	Kadian and generic MS Contin intolerance*
P-A		Non-Steroidal Anti-Inflammatory	nabumetone	RELAFEN	
P-A			celecoxib	CELEBREX	
P-A		Migraine	rizatriptan	MAXALT	limit #9/mo
P-A			sumatriptan	IMITREX SPRAY/INJ	
P-B	Antineoplastics/Immunologic	Colony Stimulating Factors	epoetin alpha	PROCRIT	
P-B			pegfilgrastim	NEULASTA	
P-D	Cardiovascular	Other Cholesterol Lowering Agents	ezetimibe/Simvastatin	VYTORIN	ST
	Central Nervous System	Anti-anxiety			PA < 8 y. o. [New starts under the age of 8 should be referred to the RBHA]
P-E		Anti-depressants			PA < 8 y. o.
P-E			venlafaxine XR	EFFEXOR XR	[Failure/intolerance to venlafaxine RR]
P-E		Anti-convulsants	lamotrigine	LAMICTAL	Neurologists exempt for epilepsy
P-E			levetiracetam	KEPPRA	Neurologists exempt for epilepsy
P-E			oxcarbazepine	TRILEPTAL	Neurologists exempt for epilepsy
P-E			topiramate	TOPAMAX	Neurologists exempt for epilepsy
P-E			zonisamide	ZONEGRAN	Neurologists exempt for epilepsy
P-E		Parkinson's Disease	entacapone	COMTAN	Neurologists exempt for epilepsy
P-E		Alzheimer's Drugs			
P-E			donepezil	ARICEPT	PA (*with current MMSE > 12 or >10 w/ ADLS)
P-E			galantamine	RAZADYNE	PA (*with current MMSE > 12 or >10 w/ ADLS) **Preferred**
P-E			rivastigmine	EXELON	PA (*with current MMSE > 12 or >10 w/ ADLS)

Preferred Prior Authorization Medications					
Section	DRUG CLASS	Sub- Class	Generic Name	Reference	Criteria, Limitations,
P-E		ADHD			PA < 5 y.o. [New starts under age 5 should be referred to the RBHA]
P-E			atomoxetine	STRATTERA	[Failure/intolerance to formulary stimulants.]
P-E			amphetamine salt combination	ADDERALL XR	[Failure/intolerance to amphetamine salt combination - regular release or Concerta]
P-F	Ear, Nose and Throat		ciprofloxacin-hydrocortisone Otic Susp	CIPRO HC OTIC SUSP	ENT Exempt
P-G	Endocrine/Metabolic	Estrogens	estradiol TDS	ESTRADIOL TDS	GYN Exempt
P-G		Insulins	insulin, glargine	LANTUS	STEP THERAPY, Endocrinologists Exempt
P-H	Gastrointestinal	Proton Pump Inhibitors	pantoprazole sodium	PROTONIX	Step therapy after Omeprazole and Prevacid OTC
P-H			ondansetron	ZOFRAN	PRIOR AUTHORIZATION Required for 48-72 hours post radiation or chemotherapy only
P-H		H2 blockers	ranitidine syrup	ZANTAC SYRUP	PA > 8 years old
P-I	Genitourinary	Miscellaneous Genitourinary	tamsulosin	FLOMAX	Doxazosin or terazosin tried first
P-M	Respiratory	Adrenergic Stimulants-inhalation	salmeterol	Serevent	PRIOR AUTHORIZATION - available for the treatment of COPD
P-M		Leukotriene Inhibitors			
P-M			zafirlukast	ACCOLATE	Step-therapy for asthma if patient is compliant refilling inhaled corticosteroids.
P-M			montelukast	SINGULAIR	Step-therapy for asthma if patient is compliant refilling inhaled corticosteroids.
P-M			budesonide inhalation susp	PULMICORT RESPULES	PA > 8 years old
P-M		Inhaled Corticosteroids/Long-Acting Beta Agonist Combination	budesonide/formoterol	Symbicort	Step-therapy for asthma if patient is compliant refilling inhaled corticosteroids.

Preferred Prior Authorization Medications					
Section	DRUG CLASS	Sub- Class	Generic Name	Reference	Criteria, Limitations,
P-M			fluticasone/salmeterol	Advair	Step-therapy for asthma if patient is compliant refilling inhaled corticosteroids.
P-N	Topicals		pimecrolimus	ELIDEL	
P-O	Miscellaneous	Miscellaneous	lanthanum carbonate	FOSRENOL	
P-O			sevelamer	RENAGEL	
P-O		Immunomodulators	adalimumab	Humira	Failed methotrexate
P-O			etanercept	Enbrel	Failed methotrexate
P-O			interferon beta 1a	Rebif	MS

PHP Formulary Index By Generic Name

Generic Name	Reference / Brand Name	Restrictions	DRUG CLASS	Section
abacavir	ZIAGEN		ANTI-INFECTIVES	B
abacavir/lamivudine/zidovudine	TRIZIVIR		ANTI-INFECTIVES	B
acarbose	PRECOSE		ENDOCRINE/METABOLIC	G
acebutolol	SECTRAL		CARDIOVASCULAR	D
acetaminophen – OTC	TYLENOL		ANALGESICS	A
acetaminophen/codeine	TYLENOL/CODEINE		ANALGESICS	A
acetaminophen/hydrocodone	LORTAB, VICODIN		ANALGESICS	A
acetaminophen/oxycodone	PERCOCET		ANALGESICS	A
acetazolamide	DIAMOX		CARDIOVASCULAR	D
acyclovir	ZOVIRAX		ANTI-INFECTIVES	B
albuterol	PROVENTIL		RESPIRATORY	M
albuterol, inhaler	PROAIR		RESPIRATORY	M
albuterol, nebulization	ALBUTEROL SOLN.		RESPIRATORY	M
alcohol Prep Pads	BD		MISCELLANEOUS	O
alendronate	FOSAMAX		ENDOCRINE/METABOLIC	G
allopurinol	ZYLOPRIM		ENDOCRINE/METABOLIC	G
alprazolam	XANAX		CENTRAL NERVOUS SYSTEM	E
altretamine	HEXALEN		ANTI-NEOPLASTIC / IMMUNOLOGICS	C
aluminum hydroxide – OTC	ALTERNAGEL		GASTROINTESTINAL	H
amantadine	SYMMETREL		ANTI-INFECTIVES	B
amiloride	MIDAMOR		CARDIOVASCULAR	D
amiloride/HCTZ	MODURETIC		CARDIOVASCULAR	D
amiodarone	CORDARONE		CARDIOVASCULAR	D
amitriptyline	ELAVIL		CENTRAL NERVOUS SYSTEM	E
amlodipine	NORVASC		CARDIOVASCULAR	D
ammonium Lactate	LAC-HYDRIN		TOPICALS	N
amoxicillin	TRIMOX		ANTI-INFECTIVES	B
amoxicillin/clavulanate	AUGMENTIN		ANTI-INFECTIVES	B
amphetamine salt combination	ADDERALL (not XR)		CENTRAL NERVOUS SYSTEM	E
ampicillin	PRINCIPEN		ANTI-INFECTIVES	B
amprenavir	AGENERASE		ANTI-INFECTIVES	B
anastrozole	ARIMIDEX		ANTI-NEOPLASTIC / IMMUNOLOGICS	C
antacid liquid – OTC	MAALOX		GASTROINTESTINAL	H
antacid liquid – OTC	MYLANTA/RIOPAN		GASTROINTESTINAL	H
antacid tablets/capsules – OTC	GAVISCONTUMS		GASTROINTESTINAL	H
apirin/dipyridamole	AGGRENOX		HEMATOLOGICAL	J
aspirin – OTC	ASPIRIN		ANALGESICS	A
aspirin E.C. tab – OTC	ECOTRIN		ANALGESICS	A
aspirin- OTC	ASPIRIN		HEMATOLOGICAL	J
aspirin/caffeine/APAP – OTC	EXCEDRIN MIGRAINE		ANALGESICS	A
atenolol	TENORMIN		CARDIOVASCULAR	D
atenolol/chlorthalidone	TENORETIC		CARDIOVASCULAR	D
atomoxetine (REQUIRES PA)	STRATTERA		CENTRAL NERVOUS SYSTEM	E
atropine	ISOPTO ATROPINE		OPHTHALMIC	L
azathioprine	IMURAN		ANTI-NEOPLASTIC / IMMUNOLOGICS	C
azelastine	ASTELIN		EAR, NOSE AND THROAT	F
azithromycin	ZITHROMAX		ANTI-INFECTIVES	B
bacitracin	BACITRACIN OPHTH OINT		OPHTHALMIC	L
bacitracin ointment	BACITRACIN		TOPICALS	N
bacitracin/neomycin/polymixin B ointment	NEOSPORIN		TOPICALS	N
bacitracin/polymyxin B	POLYSPORIN		OPHTHALMIC	L
baclofen	LIORESAL		CENTRAL NERVOUS SYSTEM	E
beclomethasone dipropionate	QVAR		RESPIRATORY	M
benazepril	LOTENSIN		CARDIOVASCULAR	D
benazepril/HCTZ	LOTENSIN HCT		CARDIOVASCULAR	D

PHP Formulary Index By Generic Name

Generic Name	Reference / Brand Name	Restrictions	DRUG CLASS	Section
benzocaine/antipyrine	AURALGAN		EAR, NOSE AND THROAT	F
benzonatate	TESSALON PERLES		RESPIRATORY	M
benzoyl peroxide - OTC	BENZAC		TOPICALS	N
benztropine	COGENTIN		CENTRAL NERVOUS SYSTEM	E
betamethasone dipropionate	DIPROSONE		TOPICALS	N
betamethasone valerate	VALISONE		TOPICALS	N
betaxolol	BETOPTIC		OPHTHALMIC	L
bethanechol	URECHOLINE		GENITOURINARY	I
bicalutamide	CASODEX		ANTI-NEOPLASTIC / IMMUNOLOGICS	C
bisoprolol/hydrochlorothiazide	ZIAC		CARDIOVASCULAR	D
brimonidine 0.2%	ALPHAGAN		OPHTHALMIC	L
brimonidine 0.2%	ALPHAGAN P		OPHTHALMIC	L
bromocriptine	PARLODEL		CENTRAL NERVOUS SYSTEM	E
bromocriptine	PARLODEL		ENDOCRINE/METABOLIC	G
brompheniramine/Pseudoephedrine-OTC	DIMETAPP ELIXIR		RESPIRATORY	M
budesonide inhalation susp	PULMICORT RESPULES		RESPIRATORY	M
bumetanide	BUMEX		CARDIOVASCULAR	D
bupropion	WELLBUTRIN		CENTRAL NERVOUS SYSTEM	E
bupropion SR	WELLBUTRIN; ZYBAN		CENTRAL NERVOUS SYSTEM	E
bupropion XL	BUDEPRION XL		CENTRAL NERVOUS SYSTEM	E
buspirone	BUSPAR		CENTRAL NERVOUS SYSTEM	E
busulfan	MYLERAN		ANTI-NEOPLASTIC / IMMUNOLOGICS	C
butalbital/ASA/caffeine/codeine	FIORICET/COD		ANALGESICS	A
butalbital/ASA/caffeine/codeine	FIORINAL/COD		ANALGESICS	A
butoconazole – OTC	FEMSTAT-3		GENITOURINARY	I
calcitonin Nasal Spray	MIACALCIN NASAL SPRAY		ENDOCRINE/METABOLIC	G
calcitriol	ROCALTROL		NUTRITIONAL / ELECTROLYTES	K
calcium acetate tabs, caps	PHOSLO TABS, CAPS		ENDOCRINE/METABOLIC	G
calcium carbonate – OTC	TUMS		GASTROINTESTINAL	H
capecitabine	XELODA		ANTI-NEOPLASTIC / IMMUNOLOGICS	C
capsaicin – OTC	ZOSTRIX,		TOPICALS	N
captopril	CAPOTEN		CARDIOVASCULAR	D
carbamazepine	TEGRETOL		CENTRAL NERVOUS SYSTEM	E
carbamazepine ER	TEGRETOL XR		CENTRAL NERVOUS SYSTEM	E
carbidopa/Levodopa CR	SINEMET CR		CENTRAL NERVOUS SYSTEM	E
carbidopa/Levodopa	SINEMET		CENTRAL NERVOUS SYSTEM	E
carbinoxamine	HISTEX/PD		RESPIRATORY	M
carbinoxamine/pseudoephedrine	RONDEC TABS, DROPS		RESPIRATORY	M
carboxymethylcellulose (CMC) 0.5%, 1% - OTC	REFRESH TEARS		OPHTHALMIC	L
carisoprodol	SOMA		CENTRAL NERVOUS SYSTEM	E
carvedilol	COREG		CARDIOVASCULAR	D
cefaclor	CECLOR		ANTI-INFECTIVES	B
cefdinir	OMNICEF		ANTI-INFECTIVES	B
cefuroxime	CEFTIN		ANTI-INFECTIVES	B
cephalexin	KEFLEX		ANTI-INFECTIVES	B
cetirizine	ZYRTEC		RESPIRATORY	M
chlorambucil	LEUKERAN		ANTI-NEOPLASTIC / IMMUNOLOGICS	C
chloramphenicol	CHLOROPTIC		OPHTHALMIC	L
chlorhexidine liquid	PERIDEX 0.12%		EAR, NOSE AND THROAT	F
chloroquine	ARALEN		ANTI-INFECTIVES	B
chlorothiazide	DIURIL		CARDIOVASCULAR	D
chlorpheniramine - OTC	CHLOR-TRIMETON		RESPIRATORY	M
chlorpropamide	DIABINESE		ENDOCRINE/METABOLIC	G

PHP Formulary Index By Generic Name

Generic Name	Reference / Brand Name	Restrictions	DRUG CLASS	Section
chlorthalidone	HYGROTON		CARDIOVASCULAR	D
chlorzoxazone	PARAFLEX,		CENTRAL NERVOUS SYSTEM	E
cholecalciferol (D3)	VITAMIN D 3		NUTRITIONAL / ELECTROLYTES	K
cholestyramine	QUESTRAN		CARDIOVASCULAR	D
cholestyramine	QUESTRAN LIGHT		CARDIOVASCULAR	D
cimetidine	TAGAMET		GASTROINTESTINAL	H
ciprofloxacin	CIPRO		ANTI-INFECTIVES	B
citalopram	CELEXA		CENTRAL NERVOUS SYSTEM	E
clemastine – OTC	TAVIST		RESPIRATORY	M
clindamycin	CLEOCIN		ANTI-INFECTIVES	B
clindamycin	CLEOCIN T		TOPICALS	N
clobetasol	TEMOVATE		TOPICALS	N
clonazepam	KLONOPIN		CENTRAL NERVOUS SYSTEM	E
clonidine	CATAPRES		CARDIOVASCULAR	D
clopidogrel	PLAVIX		HEMATOLOGICAL	J
clotrimazole	MYCELEX		ANTI-INFECTIVES	B
clotrimazole – OTC	GYNE-LOTRIMIN, MYCELEX-G		GENITOURINARY	I
clotrimazole cream/solution – OTC	MYCELEX		TOPICALS	N
clotrimazole Troche	MYCELEX TROCHE		EAR, NOSE AND THROAT	F
codeine/promethazine	PHENERGAN/COD		RESPIRATORY	M
codeine/promethazine/phenylephrine	PHENERGAN VC W/ CODEINE		RESPIRATORY	M
colestipol	COLESTID/COLESTID FLAVORED		CARDIOVASCULAR	D
condoms-OTC	CONDOMS		ENDOCRINE/METABOLIC	G
contraceptive cream/jelly-OTC	CONTRACEPTIVE CREAM/JELLY - OTC		ENDOCRINE/METABOLIC	G
contraceptive foam w/applicator-OTC	CONTRACEPTIVE FOAM - OTC		ENDOCRINE/METABOLIC	G
cromolyn – OTC	NASALCROM		EAR, NOSE AND THROAT	F
cromolyn inhalation solution	INTAL NEBULIZER		RESPIRATORY	M
cromolyn sodium	OPTICROM		OPHTHALMIC	L
cyclobenzaprine	FLEXERIL		CENTRAL NERVOUS SYSTEM	E
cyclopentolate	CYCLOGYL		OPHTHALMIC	L
cyclophosphamide	CYTOXAN		ANTI-NEOPLASTIC / IMMUNOLOGICS	C
cyclosporine caps	SANDIMMUNE		ANTI-NEOPLASTIC / IMMUNOLOGICS	C
cyclosporine caps and solution	NEORAL		ANTI-NEOPLASTIC / IMMUNOLOGICS	C
cyproheptadine	PERIACTIN		RESPIRATORY	M
dapsone	DAPSONE		ANTI-INFECTIVES	B
delavirdine mesylate	RESCRIPTOR		ANTI-INFECTIVES	B
demeclocycline HCL	DECLOMYCIN		ANTI-INFECTIVES	B
desipramine	NORPRAMIN		CENTRAL NERVOUS SYSTEM	E
desogestrel/ethinyl estradiol	MIRCETTE		ENDOCRINE/METABOLIC	G
dexamethasone	DECADRON		ENDOCRINE/METABOLIC	G
dexamethasone 0.1%	DECADRON, AK-DEX SOL PRED		OPHTHALMIC	L
dexamethasone Therapeutic Pak	HEXADROL		ENDOCRINE/METABOLIC	G
dexamethasone/neomycin/polymixin	MAXITROL, POLYDEX		OPHTHALMIC	L
dexmethylphenidate	FOCALIN		CENTRAL NERVOUS SYSTEM	E
dextroamphetamine	DEXEDRINE		CENTRAL NERVOUS SYSTEM	E
dextromethorphan/promethazine	PHENERGAN DM		RESPIRATORY	M
diaphragm, Diaphragm Kit	ORTHO FLEX,		ENDOCRINE/METABOLIC	G
diazepam	VALIUM		CENTRAL NERVOUS SYSTEM	E
diclofenac	VOLTAREN		ANALGESICS	A
diclofenac 0.1%	VOLTAREN		OPHTHALMIC	L
diclofenac/misoprostol	ARTHROTEC		ANALGESICS	A
dicloxacillin	DYNAPEN		ANTI-INFECTIVES	B
dicyclomine	BENTYL		GASTROINTESTINAL	H
didanosine (ddl)	VIDEX		ANTI-INFECTIVES	B

PHP Formulary Index By Generic Name

Generic Name	Reference / Brand Name	Restrictions	DRUG CLASS	Section
didanosine EC	VIDEX EC		ANTI-INFECTIVES	B
digoxin	LANOXIN		CARDIOVASCULAR	D
diltiazem	CARDIZEM		CARDIOVASCULAR	D
diltiazem ER	CARDIZEM CD, SR		CARDIOVASCULAR	D
diltiazem ER	DILACOR XR, TIAZAC		CARDIOVASCULAR	D
diphenhydramine 12.5mg/5ml elixir- OTC	BENADRYL		RESPIRATORY	M
diphenhydramine 25mg – OTC	BENADRYL 25mg		RESPIRATORY	M
diphenhydramine 50mg	BENADRYL 50mg		RESPIRATORY	M
diphenoxylate/atropine	LOMOTIL		GASTROINTESTINAL	H
dipivefrin	PROPINE		OPHTHALMIC	L
dipyridamole	PERSANTINE		HEMATOLOGICAL	J
disopyramide	NORPACE, CR		CARDIOVASCULAR	D
divalproex sodium	DEPAKOTE		CENTRAL NERVOUS SYSTEM	E
divalproex sodium ER	DEPAKOTE ER		CENTRAL NERVOUS SYSTEM	E
docusate capsules – OTC	COLACE		GASTROINTESTINAL	H
dorzolamide 1%	TRUSOPT		OPHTHALMIC	L
doxazosin	CARDURA		GENITOURINARY	I
doxazosin	CARDURA		CARDIOVASCULAR	D
doxepin HCl	SINEQUIN		CENTRAL NERVOUS SYSTEM	E
doxycycline	VIBRAMYCIN		ANTI-INFECTIVES	B
efavirenz	SUSTIVA		ANTI-INFECTIVES	B
emtricitabine	EMTRIVA		ANTI-INFECTIVES	B
emtricitabine/Tenofovir	TRUVADA		ANTI-INFECTIVES	B
enalapril	VASOTEC		CARDIOVASCULAR	D
enalapril/HCTZ	VASORETIC		CARDIOVASCULAR	D
epinephrine	EPI-PEN, EPI-PEN JR		MISCELLANEOUS	O
erythromycin	ILOTYCIN OPHTH OINT		OPHTHALMIC	L
erythromycin base, enteric coated	ERY-TAB		ANTI-INFECTIVES	B
erythromycin stearate	ERYTHROCIN		ANTI-INFECTIVES	B
erythromycin topical solution	T-STAT, ERYCETTE		TOPICALS	N
erythromycin-ethylsuccinate	E.E.S.		ANTI-INFECTIVES	B
estradiol	ESTRACE oral, CLIMARA PATCH		ENDOCRINE/METABOLIC	G
estradiol/norelgestromin			ENDOCRINE/METABOLIC	G
estramustine	EMCYT		ANTI-NEOPLASTIC / IMMUNOLOGICS	C
estrogens, conjugated	PREMARIN (oral, cream)		ENDOCRINE/METABOLIC	G
estrogens, conjugated/medroxyprogesterone	PREMPRO / PREMPHASE		ENDOCRINE/METABOLIC	G
estropipate	ESTRATAB		ENDOCRINE/METABOLIC	G
ethambutol	MYAMBUTOL		ANTI-INFECTIVES	B
ethinyl estradiol/desogestrel	ORTHO-CEPT		ENDOCRINE/METABOLIC	G
ethinyl estradiol/drospirenone	YASMIN 28		ENDOCRINE/METABOLIC	G
ethinyl estradiol/norethindrone	MODICON		ENDOCRINE/METABOLIC	G
ethinyl estradiol/norethindrone	ORTHO-NOVUM 1/35		ENDOCRINE/METABOLIC	G
ethinyl estradiol/norethindrone	OVCON-35, 50		ENDOCRINE/METABOLIC	G
ethosuximide	ZARONTIN		CENTRAL NERVOUS SYSTEM	E
ethynodiol/ethinyl estradiol	DEMULEN 1/5, 1/50		ENDOCRINE/METABOLIC	G
etodolac	LODINE		ANALGESICS	A
etoposide	VEPESID		ANTI-NEOPLASTIC / IMMUNOLOGICS	C
exemestane	Aromasin		ANTI-NEOPLASTIC / IMMUNOLOGICS	C
famotidine - OTC	PEPCID AC		GASTROINTESTINAL	H
fenofibrate	LOFIBRA, LIPOFEN		CARDIOVASCULAR	D
ferrous sulfate tabs, liquid, drops	FEOSOL		NUTRITIONAL / ELECTROLYTES	K
fexofenadine	ALLEGRA		RESPIRATORY	M
finasteride	PROSCAR		GENITOURINARY	I
flecainide	TAMBOCOR		CARDIOVASCULAR	D
fluconazole	DIFLUCAN		ANTI-INFECTIVES	B
fluconazole	DIFLUCAN 150MG TABS		GENITOURINARY	I
fludrocortisone	FLORINEF		ENDOCRINE/METABOLIC	G

PHP Formulary Index By Generic Name

Generic Name	Reference / Brand Name	Restrictions	DRUG CLASS	Section
fluocinolone acetonide	SYNALAR		TOPICALS	N
fluocinonide	LIDEX		TOPICALS	N
fluorometholone 0.1%, 0.25%	FML		OPHTHALMIC	L
fluoxetine	PROZAC		CENTRAL NERVOUS SYSTEM	E
flurbiprofen 0.03%	OCUFEN		OPHTHALMIC	L
flutamide	EULEXIN		ANTI-NEOPLASTIC / IMMUNOLOGICS	C
fluticasone	FLONASE		EAR, NOSE AND THROAT	F
fluticasone propionate inhalation	FLOVENT HFA		RESPIRATORY	M
folic acid	FOLVITE		NUTRITIONAL / ELECTROLYTES	K
fosamprenavir	LEXIVA		ANTI-INFECTIVES	B
furazolidone	FUROXONE		ANTI-INFECTIVES	B
furosemide	LASIX		CARDIOVASCULAR	D
gabapentin	NEURONTIN		CENTRAL NERVOUS SYSTEM	E
gemfibrozil	LOPID		CARDIOVASCULAR	D
gentamicin	GARAMYCIN		TOPICALS	N
gentamicin	GENOPTIC		OPHTHALMIC	L
glimepiride	AMARYL		ENDOCRINE/METABOLIC	G
glipizide	GLUCOTROL		ENDOCRINE/METABOLIC	G
glipizide extended release	GLUCOTROL XL		ENDOCRINE/METABOLIC	G
glucagon injection	GLUCAGON KIT		ENDOCRINE/METABOLIC	G
glucose Test Strips	ACCU-CHEK-		ENDOCRINE/METABOLIC	G
glyburide	GLYNASE 1.5mg, 3mg, MICRONASE		ENDOCRINE/METABOLIC	G
glyburide/metformin	GLUCOVANCE		ENDOCRINE/METABOLIC	G
gram/neomycin/polymyxin B	NEOSPORIN		OPHTHALMIC	L
griseofulvin	GRIFULVIN V/SUSP		ANTI-INFECTIVES	B
guaifenesin liquid – OTC	ROBITUSSIN		RESPIRATORY	M
guaifenesin tablet	HUMIBID LA, FENESIN		RESPIRATORY	M
guaifenesin/codeine	ROBITUSSIN AC		RESPIRATORY	M
guaifenesin/codeine	TUSSI-ORGANIDIN NR		RESPIRATORY	M
guaifenesin/dextromethorphan	HUMIBID DM,		RESPIRATORY	M
guaifenesin/dextromethorphan	TUSSI-ORGANIDIN DM NR		RESPIRATORY	M
guaifenesin/dextromethorphan – OTC	ROBITUSSIN DM		RESPIRATORY	M
guaifenesin/dextromethorphan – OTC	ROBITUSSIN DM		RESPIRATORY	M
guanabenz acetate	WYTENSIN		CARDIOVASCULAR	D
homatropine	ISOPTO HOMATROPINE		OPHTHALMIC	L
hydralazine	APRESOLINE		CARDIOVASCULAR	D
hydrochlorothiazide	HYDRODIURIL		CARDIOVASCULAR	D
hydrocodone/phenylephrine/CTM	HISTUSSIN HC		RESPIRATORY	M
hydrocortisone	CORTEF		ENDOCRINE/METABOLIC	G
hydrocortisone	HYTONE		TOPICALS	N
hydrocortisone 1% - OTC	Hydrocortisone 1%		TOPICALS	N
hydrocortisone retention enema	CORTENEMA		TOPICALS	N
hydrocortisone/acetic acid	VOSOL HC OTIC		EAR, NOSE AND THROAT	F
hydrocortisone/neomycin/polymyxin B	CORTISPORIN OTIC		EAR, NOSE AND THROAT	F
hydrocortisone/neomycin/polymyxin B	CORTISPORIN,		OPHTHALMIC	L
hydromorphone	DILAUDED		ANALGESICS	A
hydroxychloroquine	PLAQUENIL		ANALGESICS	A
hydroxypropyl cellulose - OTC	LACRI-LUBE, GENTEAL		OPHTHALMIC	L
hydroxyurea	HYDREA		ANTI-NEOPLASTIC / IMMUNOLOGICS	C
hydroxyzine	ATARAX, VISTARIL		RESPIRATORY	M
ibuprofen	MOTRIN		ANALGESICS	A
ibuprofen – OTC	CHILDREN'S MOTRIN SUSP		ANALGESICS	A
imipramine	TOFRANIL		CENTRAL NERVOUS SYSTEM	E
indapamide	LOZOL		CARDIOVASCULAR	D
indinavir	CRIXIVAN		ANTI-INFECTIVES	B
indomethacin	INDOCIN		ANALGESICS	A
insulin Syringes	BD		ENDOCRINE/METABOLIC	G
insulin, aspart	NOVOLOG		ENDOCRINE/METABOLIC	G

PHP Formulary Index By Generic Name

Generic Name	Reference / Brand Name	Restrictions	DRUG CLASS	Section
insulin, glargine	LANTUS		ENDOCRINE/METABOLIC	G
insulin, human	NOVOLIN		ENDOCRINE/METABOLIC	G
iodoquinol	YODOXIN		ANTI-INFECTIVES	B
ipratropium	ATROVENT INHALER		RESPIRATORY	M
ipratropium & albuterol, inhaler	COMBIVENT		RESPIRATORY	M
ipratropium bromide	ATROVENT SOLUTION		RESPIRATORY	M
isoniazid	INH		ANTI-INFECTIVES	B
isosorbide dinitrate	ISORDIL		CARDIOVASCULAR	D
isosorbide monohydrate	IMDUR		CARDIOVASCULAR	D
kaolin-pectin- OTC	KAOPECTATE		GASTROINTESTINAL	H
ketorolac 0.5%	ACULAR, ACULAR PF		OPHTHALMIC	L
labetalol	NORMODYNE		CARDIOVASCULAR	D
lactulose	CEPHULAC		GASTROINTESTINAL	H
lamivudine	EPIVIR		ANTI-INFECTIVES	B
lamivudine/Abacavir	EPZICOM		ANTI-INFECTIVES	B
lamivudine/Zidovudine	COMBIVIR		ANTI-INFECTIVES	B
lancets	BD		ENDOCRINE/METABOLIC	G
latanoprost 0.005%	XALATAN		OPHTHALMIC	L
levamisole	ERGAMISOL		ANTI-NEOPLASTIC / IMMUNOLOGICS	C
levobunolol	BETAGAN		OPHTHALMIC	L
levofloxacin	LEVAQUIN		ANTI-INFECTIVES	B
levonogestrel/ethinyl estradiol	ALESSE		ENDOCRINE/METABOLIC	G
levonogestrel/ethinyl estradiol	NORDETTE		ENDOCRINE/METABOLIC	G
levonogestrel/ethinyl estradiol	YAZ		ENDOCRINE/METABOLIC	G
levonorgestrel	PLAN B OTC		ENDOCRINE/METABOLIC	G
levonorgestrel/ethinyl estradiol	TRIPHASIL		ENDOCRINE/METABOLIC	G
levothyroxine-T4	LEVOTHROID, LEVOXYL		ENDOCRINE/METABOLIC	G
l-hyoscyamine sulfate	LEVSIN, LEVSIN EX		GASTROINTESTINAL	H
lidocaine HCL 2%	XYLOCAINE VISCOUS		EAR, NOSE AND THROAT	F
lidocaine topical 2%, 5%	XYLOCAINE topical		TOPICALS	N
Lipase/protease/amylase	CREON DR		GASTROINTESTINAL	H
lisinopril	ZESTRIL		CARDIOVASCULAR	D
lisinopril/HCTZ	ZESTORETIC		CARDIOVASCULAR	D
lodoxamine 0.1%	ALOMIDE		OPHTHALMIC	L
lomustine	CEENU		ANTI-NEOPLASTIC / IMMUNOLOGICS	C
loperamide HCL – OTC	IMODIUM A-D		GASTROINTESTINAL	H
lopinavir/Ritonavir	KALETRA		ANTI-INFECTIVES	B
loratadine – OTC	CLARITIN – OTC		RESPIRATORY	M
lorazepam	ATIVAN		CENTRAL NERVOUS SYSTEM	E
losartan	COZAAR		CARDIOVASCULAR	D
lovastatin	MEVACOR		CARDIOVASCULAR	D
magnesium hydroxide - OTC	MILK OF MAGNESIA		GASTROINTESTINAL	H
malathion	OVIDE		TOPICALS	N
maprotiline HCl	LUDIOMIL		CENTRAL NERVOUS SYSTEM	E
mebendazole	VERMOX		ANTI-INFECTIVES	B
meclizine - OTC	ANTIVERT		GASTROINTESTINAL	H
medroxyprogesterone	PROVERA, CYCRIN		ENDOCRINE/METABOLIC	G
medroxyprogesterone injection	DEPO-PROVERA		ENDOCRINE/METABOLIC	G
megestrol	MEGACE		ANTI-NEOPLASTIC / IMMUNOLOGICS	C
meloxicam	MOBIC		ANALGESICS	A
melphalan	ALKERAN		ANTI-NEOPLASTIC / IMMUNOLOGICS	C
meperidine	DEMEROL		ANALGESICS	A
mercaptapurine	PURINETHOL		ANTI-NEOPLASTIC / IMMUNOLOGICS	C
mesalamine	ASACOL		GASTROINTESTINAL	H
metaproterenol	ALUPENT, METAPREL		RESPIRATORY	M
metformin	GLUCOPHAGE		ENDOCRINE/METABOLIC	G
metformin XR	GLUCOPHAGE XR		ENDOCRINE/METABOLIC	G
methadone 5mg, 10mg	DOLOPHINE		ANALGESICS	A

PHP Formulary Index By Generic Name

Generic Name	Reference / Brand Name	Restrictions	DRUG CLASS	Section
methazolamide	NEPTAZANE		CARDIOVASCULAR	D
methergine	METHERGINE		MISCELLANEOUS	O
methimazole	TAPAZOLE		ENDOCRINE/METABOLIC	G
methocarbamol	ROBAXIN		CENTRAL NERVOUS SYSTEM	E
methotrexate	RHEUMATREX		ANTI-NEOPLASTIC / IMMUNOLOGICS	C
methyclothiazide	ENDURON		CARDIOVASCULAR	D
methyclothiazide/deserpidine	ENDURONYL		CARDIOVASCULAR	D
methyl dopa	ALDOMET		CARDIOVASCULAR	D
methylphenidate	CONCERTA		CENTRAL NERVOUS SYSTEM	E
methylphenidate	RITALIN		CENTRAL NERVOUS SYSTEM	E
methylprednisolone	MEDROL		ENDOCRINE/METABOLIC	G
metoclopramide	REGLAN		GASTROINTESTINAL	H
metolazone	ZAROXOLYN		CARDIOVASCULAR	D
metoprolol	LOPRESSOR		CARDIOVASCULAR	D
metoprolol ER	TOPROL XL		CARDIOVASCULAR	D
metronidazole	FLAGYL		ANTI-INFECTIVES	B
metronidazole	METROGEL VAGINAL		GENITOURINARY	I
mexiletine HCl	MEXITIL		CARDIOVASCULAR	D
miconazole – OTC	MONISTAT-7		GENITOURINARY	I
midodrine	PROAMATINE		CARDIOVASCULAR	D
minoxidil	LONITEN		CARDIOVASCULAR	D
mitotane	LYSODREN		ANTI-NEOPLASTIC / IMMUNOLOGICS	C
mometasone	NASONEX AQ	Step Therapy	EAR, NOSE AND THROAT	F
montelukast	SINGULAIR	Step Therapy	RESPIRATORY	M
morizine	ETHMOZINE		CARDIOVASCULAR	D
morphine sulfate CR	KADIAN		ANALGESICS	A
morphine sulfate IR, CR	MSIR, MS CONTIN		ANALGESICS	A
mupirocin	BACTROBAN		TOPICALS	N
MVI – OTC	VARIOUS		NUTRITIONAL / ELECTROLYTES	K
MVI w/ FI & / or FE	TRI-VI-FLOR		NUTRITIONAL / ELECTROLYTES	K
nadolol	CORGARD		CARDIOVASCULAR	D
naproxen	NAPROSYN		ANALGESICS	A
natamycin 5%	NATACYN		OPHTHALMIC	L
nelfinavir mesylate	VIRACEPT		ANTI-INFECTIVES	B
neomycin	NEOMYCIN		ANTI-INFECTIVES	B
neomycin 0.35%/polymyxin B/	POLY PRED		OPHTHALMIC	L
nevirapine	VIRAMUNE		ANTI-INFECTIVES	B
niacin – OTC	NICOTINIC ACID		CARDIOVASCULAR	D
niacin (niacin B3; nicotinic acid)	NIASPAN		CARDIOVASCULAR	D
niclosamide	NICLOCIDE		ANTI-INFECTIVES	B
nicotine replacement	NICOTROL		CENTRAL NERVOUS SYSTEM	E
nifedipine SR	ADALAT-CC		CARDIOVASCULAR	D
nisoldipine	SULAR		CARDIOVASCULAR	D
nitrofurantoin	FURADANTIN		ANTI-INFECTIVES	B
nitrofurantoin	MACROBID		ANTI-INFECTIVES	B
nitrofurantoin Macrocrystals	MACRODANTIN		ANTI-INFECTIVES	B
nitroglycerin ointment	NITROL		CARDIOVASCULAR	D
nitroglycerin spray	NITROLINGUAL		CARDIOVASCULAR	D
nitroglycerin sublingual tabs	NITROSTAT		CARDIOVASCULAR	D
norethindrone	ORTHO MICRONOR		ENDOCRINE/METABOLIC	G
norethindrone acetate	AYGESTIN		ENDOCRINE/METABOLIC	G
norethindrone/ethinyl estradiol	ESTROSTEP		ENDOCRINE/METABOLIC	G
norethindrone/ethinyl estradiol	LOESTRIN		ENDOCRINE/METABOLIC	G
norethindrone/ethinyl estradiol	ORTHO-NOVUM 10/11		ENDOCRINE/METABOLIC	G
norethindrone/ethinyl estradiol	ORTHO-NOVUM 7/7/7		ENDOCRINE/METABOLIC	G
norethindrone/mestranol	ORTHO-NOVUM 1/50		ENDOCRINE/METABOLIC	G
norgestimate/ethinyl estradiol	ORTH TRI CYCLEN		ENDOCRINE/METABOLIC	G
norgestimate/ethinyl estradiol	ORTHO-CYCLEN		ENDOCRINE/METABOLIC	G

PHP Formulary Index By Generic Name

Generic Name	Reference / Brand Name	Restrictions	DRUG CLASS	Section
norgestimate/ethinyl estradiol	ORTHO TRI CYCLEN LO		ENDOCRINE/METABOLIC	G
norgestrel	OVRETTE		ENDOCRINE/METABOLIC	G
norgestrel/ethinyl estradiol	LO OVRAL, OVRAL		ENDOCRINE/METABOLIC	G
normal saline 0.65% - OTC	OCEAN		EAR, NOSE AND THROAT	F
nortriptyline	PAMELOR		CENTRAL NERVOUS SYSTEM	E
nystatin	MYCOSTATIN		ANTI-INFECTIVES	B
nystatin	MYCOSTATIN		GENITOURINARY	I
nystatin	MYCOSTATIN		TOPICALS	N
nystatin	MYCOSTATIN SUSP		EAR, NOSE AND THROAT	F
ofloxacin	OCUFLOX		OPHTHALMIC	L
ofloxacin otic soln. 0.3%	FLOXIN		EAR, NOSE AND THROAT	F
olopatadine HCL 0.4%	PATANOL		OPHTHALMIC	L
omega FFA – OTC	Omega FFA - OTC		CARDIOVASCULAR	D
omeprazole – OTC	PRILOSEC OTC		GASTROINTESTINAL	H
ondansetron	ZOFRAN		GASTROINTESTINAL	H
oxybutynin, oxybutin XL	DITROPAN, DITROPAN XL		GENITOURINARY	I
oxycodone	OXY IR		ANALGESICS	A
pantoprazole sodium	PROTONIX		GASTROINTESTINAL	H
paroxetine	PAXIL		CENTRAL NERVOUS SYSTEM	E
pediatric electrolyte solution	PEDIALYTE		NUTRITIONAL / ELECTROLYTES	K
PEG solution	COLYTE, COLYTE FLAVORED		GASTROINTESTINAL	H
penbutolol	LEVATOL		CARDIOVASCULAR	D
penicillin VK	VEETIDS		ANTI-INFECTIVES	B
pentoxifylline	TRENTAL		CARDIOVASCULAR	D
permethrin	NIX, ACTICIN		TOPICALS	N
phenobarbital	PHENOBARBITAL		CENTRAL NERVOUS SYSTEM	E
phenol 0.5%	CHLORASEPTIC SPRAY		EAR, NOSE AND THROAT	F
phenoxybenzamine	DIBENZYLIN		CARDIOVASCULAR	D
phenylephrine	NEOSYNEPHRINE		OPHTHALMIC	L
phenylephrine/Chlorpheniramine	RYNATAN PED SUSP		RESPIRATORY	M
phenylephrine/guaifenesin	ENTEX LA		RESPIRATORY	M
phenylephrine/promethazine	PHENERGAN VC		RESPIRATORY	M
phenylephrine/pyrilamine/pheniramine	POLY-HISTINE		RESPIRATORY	M
phenytoin	DILANTIN		CENTRAL NERVOUS SYSTEM	E
phenytoin ER	PHENYTEK		CENTRAL NERVOUS SYSTEM	E
pilocarpine hydrochloride	PILOCAR		OPHTHALMIC	L
pindolol	VISKEN		CARDIOVASCULAR	D
pioglitazone	ACTOS		ENDOCRINE/METABOLIC	G
piperazine	VERMIZINE		ANTI-INFECTIVES	B
piroxicam	FELDENE		ANALGESICS	A
podofilox 0.5% solution	PODOFILOX SOLUTION		TOPICALS	N
polycarbophil	FIBERCON		GASTROINTESTINAL	H
potassium chloride liquid	POTASSIUM LIQUID		NUTRITIONAL / ELECTROLYTES	K
potassium chloride packets	KLOR CON		NUTRITIONAL / ELECTROLYTES	K
potassium chloride tablets	K-DUR, KTABS, KLOTRIX		NUTRITIONAL / ELECTROLYTES	K
potassium citrate/citric acid	CITRA-K		NUTRITIONAL / ELECTROLYTES	K
pravastatin	PRAVACHOL		CARDIOVASCULAR	D
prazosin	MINIPRESS		CARDIOVASCULAR	D
prednisolone	PREDNISOLONE OPTH.		OPHTHALMIC	L
prednisolone	PRELONE		ENDOCRINE/METABOLIC	G
prednisolone 0.12%	PRED MILD		OPHTHALMIC	L
prednisolone 1%	PRED FORTE		OPHTHALMIC	L
prednisolone 1%/gentamicin 3mg/ml drops	PRED-G		OPHTHALMIC	L
prednisone	ORASONE		ENDOCRINE/METABOLIC	G
Preferred Prior Authorization Medications	see attached		see attached	P
prenatal vitamins	NESTABS FA		NUTRITIONAL / ELECTROLYTES	K
primaquine Phosphate	PRIMAQUINE		ANTI-INFECTIVES	B
primidone	MYSOLINE		CENTRAL NERVOUS SYSTEM	E

PHP Formulary Index By Generic Name

Generic Name	Reference / Brand Name	Restrictions	DRUG CLASS	Section
probenecid	BENEMID		MISCELLANEOUS	O
procainamide	PRONESTYL		CARDIOVASCULAR	D
procainamide SR	PROCANBID		CARDIOVASCULAR	D
procarbazine	MATULANE		ANTI-NEOPLASTIC / IMMUNOLOGICS	C
prochlorperazine	COMPRO		GASTROINTESTINAL	H
progesterone gel	CRINONE		ENDOCRINE/METABOLIC	G
promethazine	PHENERGAN		GASTROINTESTINAL	H
propafenone	RYTHMOL		CARDIOVASCULAR	D
propantheline	PRO-BANTHINE		GASTROINTESTINAL	H
propoxyphene HCl	DARVON		ANALGESICS	A
propoxyphene napsylate/acetaminophen	DARVOCET-N		ANALGESICS	A
propranolol	INDERAL		CARDIOVASCULAR	D
propranolol LA	INDERAL LA		CARDIOVASCULAR	D
propranolol XL	INNOPRAN XL		CARDIOVASCULAR	D
propylthiouracil	PTU		ENDOCRINE/METABOLIC	G
pseudoephedrine - OTC	SUDAFED TABS, SYRUP		RESPIRATORY	M
pseudoephedrine/brompheniramine	RONDEC SYRUP		RESPIRATORY	M
pseudoephedrine/CTM/dextromethorphan-OTC	PEDIA-CARE		RESPIRATORY	M
pseudoephedrine/DM/guaifenesin	ROBITUSSIN CF		RESPIRATORY	M
pseudoephedrine/guaifenesin	ENTEX PSE, GUAIMAX-D, DURATUSS		RESPIRATORY	M
pseudoephedrine/guaifenesin	ZEPHREX LA, DECONSAL II		RESPIRATORY	M
psyllium	METAMUCIL		GASTROINTESTINAL	H
pyrazinamide	PYRAZINAMIDE		ANTI-INFECTIVES	B
pyridoxine - OTC	Vitamin B-6		ANTI-INFECTIVES	B
pyrilamine/phenyltoloxmine/pheniramine	POLY-HISTINE		RESPIRATORY	M
pyrimethamine	DARAPRIM		ANTI-INFECTIVES	B
quinidine gluconate	QUINAGLUTE		CARDIOVASCULAR	D
quinidine sulfate	QUINIDINE SULFATE		CARDIOVASCULAR	D
quinidine sulfate SR	QUINIDEX		CARDIOVASCULAR	D
raloxifene	EVISTA		ENDOCRINE/METABOLIC	G
ranitidine - OTC	ZANTAC		GASTROINTESTINAL	H
ranitidine syrup	ZANTAC SYRUP		GASTROINTESTINAL	H
rifabutin	MYCOBUTIN		ANTI-INFECTIVES	B
rifampin	RIFADIN		ANTI-INFECTIVES	B
risedronate	ACTONEL		ENDOCRINE/METABOLIC	G
ritonavir	NORVIR		ANTI-INFECTIVES	B
rosiglitazone	AVANDIA		ENDOCRINE/METABOLIC	G
rosiglitazone/Metformin	AVANDAMET		ENDOCRINE/METABOLIC	G
salicylic acid - OTC	SALICYLIC ACID		TOPICALS	N
salsalate	DISALCID,		ANALGESICS	A
saquinavir	FORTOVASE		ANTI-INFECTIVES	B
saquinavir	INVIRASE		ANTI-INFECTIVES	B
scopolamine	ISOPTO HYOSCINE		OPHTHALMIC	L
scopolamine tablets	SCOPACE		GASTROINTESTINAL	H
selenium sulfide	SELSUN BLUE		TOPICALS	N
senna laxatives	SENOKOT		GASTROINTESTINAL	H
sertraline	ZOLOFT		CENTRAL NERVOUS SYSTEM	E
silver sulfadiazine	SILVADENE		TOPICALS	N
simethicone - OTC	MYLICON		GASTROINTESTINAL	H
simvastatin	ZOCOR		CARDIOVASCULAR	D
SMZ/TMP, DS	BACTRIM, SEPTRA, DS		ANTI-INFECTIVES	B
sodium chloride solution-OTC canister	P		RESPIRATORY	M
sodium fluoride	LURIDE TABS, DROPS		NUTRITIONAL / ELECTROLYTES	K
sodium phosphate ped - OTC	FLEETS PED - OTC		GASTROINTESTINAL	H
sotalol	BETAPACE		CARDIOVASCULAR	D
spacers	AEROCHAMBERS+		MISCELLANEOUS	O

PHP Formulary Index By Generic Name

Generic Name	Reference / Brand Name	Restrictions	DRUG CLASS	Section
spermicidal jelly-OTC	spermicidal jelly		ENDOCRINE/METABOLIC	G
spironolactone	ALDACTONE		CARDIOVASCULAR	D
spironolactone/HCTZ	ALDACTAZIDE		CARDIOVASCULAR	D
stavudine (d4T)	ZERIT		ANTI-INFECTIVES	B
sucrafate	CARAFATE		GASTROINTESTINAL	H
sulfacetamide 10%	BLEPH 10, SODIUM SULAMYD		OPHTHALMIC	L
sulfacetamide/prednisolone	BLEPHAMIDE		OPHTHALMIC	L
sulfasalazine	AZULFIDINE		GASTROINTESTINAL	H
sulfisoxazole	GANTRISIN		ANTI-INFECTIVES	B
sulfisoxazole/erythromycin	PEDIAZOLE		ANTI-INFECTIVES	B
sulindac	CLINORIL		ANALGESICS	A
sumatriptan	IMITREX TABS		ANALGESICS	A
tamoxifen	NOLVADEX		ANTI-NEOPLASTIC / IMMUNOLOGICS	C
temazepam	RESTORIL		CENTRAL NERVOUS SYSTEM	E
telmisartan	MICARDIS	Step Therapy	CARDIOVASCULAR	D
tenofovir	VIREAD		ANTI-INFECTIVES	B
terazosin	HYTRIN		CARDIOVASCULAR	D
terazosin	HYTRIN		GENITOURINARY	I
terbutaline	BRETHINE		RESPIRATORY	M
terconazole	TERAZOL		GENITOURINARY	I
testolactone	TESLAC		ANTI-NEOPLASTIC / IMMUNOLOGICS	C
tetracycline	SUMYCIN		ANTI-INFECTIVES	B
theophylline	THEO-DUR		RESPIRATORY	M
theophylline SR	SLO-BID GYROCAPS		RESPIRATORY	M
theophylline XR	UNIPHYL		RESPIRATORY	M
thioguanine	THIOGUANINE		ANTI-NEOPLASTIC / IMMUNOLOGICS	C
thyroid desiccated	ARMOUR THYROID		ENDOCRINE/METABOLIC	G
ticlopidine	TICLID		HEMATOLOGICAL	J
timolol maleate gel	TIMOPTIC-XE GEL		OPHTHALMIC	L
timolol maleate soln	TIMOPTIC		OPHTHALMIC	L
tioconazole – OTC	VAGISTAT-1		GENITOURINARY	I
tizanidine hydrochloride	ZANAFLEX		CENTRAL NERVOUS SYSTEM	E
tobramycin	TOBEX		OPHTHALMIC	L
tobramycin 0.3% /dexamethasone 0.1%	TOBRADEX		OPHTHALMIC	L
tocainide	TONOCARD		CARDIOVASCULAR	D
tolazamide	TOLINASE		ENDOCRINE/METABOLIC	G
tolbutamide	ORINASE		ENDOCRINE/METABOLIC	G
tolnaftate cream/solution – OTC	TINACTIN		TOPICALS	N
topiramate	Topamax		CENTRAL NERVOUS SYSTEM	E
tramadol	ULTRAM		ANALGESICS	A
tramadol/APAP	ULTRACET		ANALGESICS	A
trazodone	DESYREL		CENTRAL NERVOUS SYSTEM	E
tretinoin	RETIN-A		TOPICALS	N
tretinoin	VESANOID		ANTI-NEOPLASTIC / IMMUNOLOGICS	C
triamcinolone acetonide	KENALOG		TOPICALS	N
triamcinolone paste	KENALOG ORABASE		EAR, NOSE AND THROAT	F
triamcinolone/nystatin	MYCOLOG II		TOPICALS	N
triamterene/HCTZ	DYAZIDE, MAXZIDE		CARDIOVASCULAR	D
trifluridine	VIROPTIC		OPHTHALMIC	L
trihexyphenidyl	ARTANE		CENTRAL NERVOUS SYSTEM	E
trimethoprim	TRIMPEX		ANTI-INFECTIVES	B
trimethoprim/ polymyxin B	POLYTRIM		OPHTHALMIC	L
triple sulfa vaginal cream	SULTRIN VAG CREAM		GENITOURINARY	I
triprolidine/pseudoephedrine – OTC	ACTIFED TABS, SYRUP		RESPIRATORY	M
tropicamide	MYDRIACYL		OPHTHALMIC	L
urea – 10, 20, 40%	CARMOL, AQUACARE		TOPICALS	N
ursodiol	ACTIGALL		GASTROINTESTINAL	H

PHP Formulary Index By Generic Name

Generic Name	Reference / Brand Name	Restrictions	DRUG CLASS	Section
valacyclovir	VALTREX		ANTI-INFECTIVES	B
valproic acid	DEPAKENE		CENTRAL NERVOUS SYSTEM	E
valsartan	DIOVAN	Step Therapy	CARDIOVASCULAR	D
vaporizers	Cool Mist Vaporizers		MISCELLANEOUS	O
varenicline	CHANTIX		CENTRAL NERVOUS SYSTEM	E
venlafaxine	EFFEXOR		CENTRAL NERVOUS SYSTEM	E
verapamil	CALAN		CARDIOVASCULAR	D
verapamil SR	CALAN SR		CARDIOVASCULAR	D
vidarabine	VIRA-A		OPHTHALMIC	L
vitamin B-12/folic acid/B-6	FOLTX		NUTRITIONAL / ELECTROLYTES	K
warfarin	COUMADIN		HEMATOLOGICAL	J
zalcitabine (ddC)	HIVID		ANTI-INFECTIVES	B
zidovudine	RETROVIR		ANTI-INFECTIVES	B
zinc-all strengths	ZINC		NUTRITIONAL / ELECTROLYTES	K
zolpidem	AMBIEN		CENTRAL NERVOUS SYSTEM	E

Behavioral Health Medications

<u>ADHD</u>	Adults	Children	PHP Policy
Short Acting	√	√	<i>ADHD Rx requires PA for kids < 5 y.o.</i>
mixed amphetamine salts	√	√	
methylphenidate	√	√	
Intermediated Acting			
methylphenidate, long acting (LA)	√	√	
Long Acting			
mixed amphetamine salts, extended release (XR)	√	√	
methylphenidate, extended release (XR)	√	√	
Non-Stimulant			
atomoxetine	√	√	<i>Requires PA</i>
 <u>ANXIETY</u>			<i>Anxiety Rx requires PA for kids < 8 y.o.</i>
Selective Serotonin Reuptake Inhibitor			
fluoxetine	√	√	
paroxetine	√	√	
sertraline	√	√	
Tricyclic Antidepressant			
imipramine	√	√	
Benzodiazepine			
lorazepam	√	√	
clonazepam		√	
Serotonin Partial Agonist			
bupirone	√	√	
 <u>DEPRESSION</u>			<i>Depression Rx requires PA for kids < 8 y.o.</i>
Selective Serotonin Reuptake Inhibitor			
fluoxetine	√	√	
citalopram	√	√	
paroxetine	√	√	
sertraline	√	√	
Serotonin Norepinephrine Reuptake Inhibitor			
venlafaxine	√	√	
Norepinephrine Dopamine Reuptake Inhibitor			
bupropion	√	√	

Note:

Additional drugs and/or prior authorization status can be found on the PHP website: phoenixhealthplan.com