

# Prescription Program

Drug List/Formulary – To be used by members who have a tiered 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.*

For more information,  
please visit [anthem.com](http://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](http://anthem.com)
- Bring a copy of this drug list/formulary to your next doctor's visit to assist in selecting the lowest cost medications

## KEY

**Tier 1** – Lowest copayment – Drugs offering the greatest value within a therapeutic class. Some of these are generic equivalents of brand name drugs.

**Tier 2** – Medium copayment – Drugs on this tier are generally the more affordable brand-name drugs. Other drugs are on this tier because they are “preferred” within their therapeutic classes, based on clinical effectiveness and value.

**Tier 3** – Highest copayment – These are higher cost brand-name drugs. Some Tier 3 drugs may have generics or equivalents in Tier 1. In addition, some drugs on this tier may have been evaluated to be less cost-effective than equivalent drugs on lower tiers.

**Tier 4** – Many drugs on this tier are “specialty” drugs used to treat complex, chronic conditions and may require special handling and/or management. For members who do not have a Tier 4 plan, these drugs are found under Tier 1, 2 or 3.

## 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.

Drugs on the Anthem Drug List/Formulary are grouped by ‘tiers.’ A number of factors are considered when classifying drugs into tiers, including, but not limited to: the absolute cost of the drug; the cost of the drug relative to other drugs in the same therapeutic class; the availability of over-the-counter alternatives; and other clinical and cost-effectiveness factors.

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](http://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 if my physician or I choose a brand-name drug when a generic equivalent is available?

A. In most cases, you would be responsible for the appropriate tier copay. This copay may include an additional charge that represents the cost difference between the brand-name medication and the generic equivalent.

### 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 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 Tier 1 or Tier 2 medication. If a Tier 3 medication is selected, you will be responsible for the applicable Tier 3 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.

## Tier 1

Acarbose	Aviane <b>PA</b>	Cefditoren	Diclofenac potassium	Famotidine	Heparin*
Acebutolol	Azathioprine	Cefepodoxime	Diclofenac sodium Ophth.	Felodopine <b>DO, QL</b>	Homatropine
Acetaminophen/caffeine/ butalb	Azelastine <b>QL</b>	Cefprozil	Diclofenac, ER	Fenofibrate	Hydralazine
Acetazolamide, SR	Azithromycin <b>QL</b>	Cefuroxime <b>QL</b>	Dicloxacillin	Fenofibric acid	Hydralazine/HCTZ
Acetic acid	Bacitracin zinc/polymyxin B	Cephalexin	Dicyclomine	Fenoprofen	Hydrochlorothiazide
Acetic acid/ hydrocortisone	Bacitracin/polymyxin/ neomycin-hc oph oint	Chloral hydrate	Didanosine	Fentanyl <b>PA, QL</b>	Hydrocodone w/homatropine
Acetic acid/aluminum acetate	Baclofen	Chlordiazepoxide	Diflorasone diacetate	Fexofenadine <b>QL</b>	Hydrocodone/APAP <b>QL</b>
Acetic acid otic	Balsalazide	Chlorhexidine gluconate	Diflunisal	Fexofenadine/PSE 12hr <b>QL</b>	Hydrocortisone 2.5% cream, ointment, lotion
Acetylcholine	Belladonna/ phenobarbital	Chloroquine 250mg	Digoxin	Finasteride	Hydrocortisone enema
Acyclovir	Benazepril, HCTZ	Chlorothiazide	Diltiazem	Flecainide	Hydromorphone
Albuterol	Benzoyl peroxide	Chlorpheniramine/ phenylephrine	Diltiazem CD <b>DO, QL</b>	Fluconazole	Hydroxychloroquine
Albuterol/ipratropium	Benzoyl peroxide/ clindamycin <b>ST</b>	Chlorpheniramine/ pseudoephedrine	Diltiazem CR <b>DO, QL</b>	Fludrocortisone	Hydroxyurea
Alendronate <b>QL</b>	Benzoyl peroxide/ erythromycin	Chlorpromazine tab	Diltiazem SR <b>DO, QL</b>	Flunisolide Nasal Spray <b>ST, QL</b>	Hydroxyzine HCL
Allopurinol	Benzotropine	Chlorpropamide	Diphenhydramine 50mg	Fluocinolone acetonide	Hydroxyzine pamoate
Alprazolam	Betamet diprop/prop gyl	Chlorthalidone	Diphenoxylate/atropine sulfate	Fluocinonide	Hyoscyamine
Amantadine	Betamethasone	Chlorzoxazone	Dipivefrin HCl	Fluorometholone	Ibuprofen
Aminoclonide	dipropionate	Cholestyramine, light	Dipyridamole	Fluorouracil	Imipramine
Amiloride	Betamethasone valerate	Chorionic gonadotropin	Disopyramide	Fluoxetine <b>DO, QL</b>	Indapamide
Amiloride/ hydrochlorothiazide	Betaxolol	Ciclopirox	Disopyramide CR 150mg	Fluphenazine	Indomethacin, SR
Aminophylline	Bethanechol	Cimetidine	Divalproex, ER	Flurazepam	Ipratropium bromide neb soln/nasal spray <b>QL</b>
Amiodarone	Bicalutamide	Ciprofloxacin <b>QL</b>	Dorzolamide	Flurbiprofen	Iron combination capsule
Amitriptyline	Bisoprolol	Citalopram <b>DO, QL</b>	Dorzolamide/timolol	Flurbiprofen sodium	Iron/intrinsic factor/B12
Amitriptyline/ perphenazine	Bisoprolol/HCTZ	Clemastine fumarate	Doxazosin mesylate	Flutamide	Iron/B12/folic acid
Amitriptyline/ chlordiazepoxide	Brimonidine	Clindamycin	Doxepin	Fluticasone Nasal Spray <b>QL</b>	Isometh/dichlphen/APAP
Amlodipine <b>DO, QL</b>	Bromocriptine	Clobetasol	Doxycycline	Fluvoxamine <b>DO</b>	Isoniazid
Amlodipine/benazepril	Budeprion XL <b>DO, QL</b>	Clomiphene	Doxycycline monohydrate	Folic acid	Isosorbide dinitrate
Amnesteem <b>QL</b>	Bumetanide	Clomipramine	Dronabinol	Fosinopril <b>DO, QL</b>	Isosorbide mononitrate
Amphetamine- dextroamphetamine	Buprenorphine <b>QL</b>	Clonidine	Dyphylline	Fosinopril HCTZ	Isotretinoin <b>QL</b>
Amphetamine- dextroamphetamine ER <b>ST^#</b>	Bupropion	Clorazepate	Econazole	Furosemide	Itraconazole <b>PA</b>
Amoxapine	Buspirone	Clotriazole/ betamethasone	Enalapril, HCTZ	Gabapentin	Ketoconazole
Amoxicillin	Butalbital Compound w/Codeine	Clozapine	Ergotamine	Galantamine, SR	Ketoprofen, ER
Amoxicillin/clavulanate <b>QL</b>	Butorphanol tartrate 10mg/ml N.S. <b>QL</b>	Codeine sulfate	Ergotamine/belladonna/PB	Ganciclovir	Ketorolac <b>QL</b>
Amphetamine	Cabergoline	Codeine/APAP <b>QL</b>	Erythromycin	Gemfibrozil	Ketorolac tromethamine
Ampicillin	Calcipotriene Soln.	Colchicine	Erythromycin base	Gentamicin	Labetalol
Antipyrine/benzocaine	Calcium Acetate	Cromolyn	Erythromycin ethylsuccinate	Glimepiride	Lactulose
APAP/caffeine/butalbital	Captopril, HCTZ	Cyclobenzaprine	Erythromycin/ sulfisoxazole	Glipizide XL	Lamotrigine
Apri <b>PA</b>	Carbamazepine, ER	Cyclopentolate	Estradiol	Glipizide/metformin	Lansoprazole <b>QL</b>
Asa/codeine	Carbidopa/levodopa	Cyproheptadine	Estradiol/norethindrone <b>PA</b>	Glyburide	Leflunomide
Aspirin/caffeine/ butalbital	Carbidopa/levodopa CR	Danazol	Estropipate	Glyburide/micronized	Leucovorin
Atenolol	Carisoprodol	Dantrolene	Ethambutol	Glyburide/metformin	Leuprolide <b>PA*</b>
Atenolol/chlorthalidone	Carteolol hcl	Desipramine	Ethinyl estradiol/ norethindrone <b>PA</b>	Glycolax	Levalbuterol
Atropine sulfate	Cartia XT <b>DO, QL</b>	Desmopressin acetate	Ethinyl estradiol/ ethynodiol diacetate <b>PA</b>	Granisetron <b>QL</b>	Levetiracetam
	Carvedilol	Desonide	Ethosuximide	Guaifenesin <b>QL</b>	Levonorgestrel (emergency OC)
	Cefaclor	Desoximetasone	Etodolac	Guaifenesin SR	Levonorgestrel & ethinyl estradiol <b>PA</b>
	Cefaclor ER	Dexmethylphenidate	Etodolac ER	Guaifenesin/dextrometh	Levora <b>PA</b>
	Cefadroxil	Dextroamphetamine	Etoposide	Guaifenesin/hydrocodone	Levoxyol
	Cefdinir	Dextromethorphan/ guaifenesin	Famciclovir	Guanabenz	Livorphanol tartrate
		Diazepam		Guanfacine	
				Halobetasol	
				Haloperidol	

Levothyroxine	Mometasone ointment, cream	Oxcarbazepine	prospate	Sodium polystyrene sulfonate	Trifluridine
Lidocaine	Morphine SR <b>QL</b>	Oxycodone	Prednisone	Sodium sulfacetamide/sulfur	Trihexyphenidyl
Lidocaine viscous	Morphine sulfate	Oxycodone ER <b>QL</b>	Prenatal multivitamins and minerals/iron/folic acid	Sotret <b>QL</b>	Trimethobenzamide
Liothyronine	Multivitamins w/fluoride	Oxycodone/aspirin	Prenatal vitamin	Spirolactone	Trimethoprim
Lisinopril, HCTZ	Multivitamins w/folic acid	Oxycodone/APAP <b>QL</b>	Prenatal w/docusate, iron, folic acid	Spirolactone/HCTZ	Tri-nessa <b>PA</b>
Lithium	Mycophenolate mofetil	Oxytocin	Primidone	Stannous fluoride	Triple sulfa
Loperamide	Nabumetone	Pantoprazole <b>ST, QL</b> ^#	Probenecid	Stavudine	Triple vitamins w/fluoride
Lorazepam	Nadolol	Paroxetine, SR <b>DO, QL</b>	Probenecid/colchicine	Sucralfate	Trivora <b>PA</b>
Lovastatin <b>DO, QL</b>	Naltrexone hcl	Penicillin V.K.	Procainamide, SR	Sulfacet sod w/sulfur	Tropicamide
Low-ogestrel	Naphazoline	Pentamidine isethionate	Prochlorperazine	Sulfacetamide sodium solution	Trypsin/balsam peru/castor oil
Loxapine	Naproxen	Pentazocine nx	Prochlorperazine supp 25mg	Sulfacetamide sodium/prednisoloneophth sol.	Ursodiol
Mebendazole	Naproxen EC	Pentazocine/apap	Promethazine	Sulfamethoxazole/trimethoprim, DS	Valacyclovir
Meclizine	Naproxen sodium, DS	Pentoxifylline	Promethazine/codeine	Sulfasalazine, EC	Valproic acid
Meclofenamate	Nateglinide	Pergolide	Promethazine/dextromethorphan	Sulfapyrazone	Venlafaxine
Medroxyprogesterone	Necon <b>PA</b>	Perindopril	Promethazine/phenylephrine	Sulindac	Verapamil, SR
Mefloquine	Neomycin	Permethrin	Propafenone	Sumatriptan <b>QL</b>	Warfarin
Megestrol	Neomycin/dexamethasone	Perphenazine	Propranolol, LA	Tacrolimus	Yohimbine
Meloxicam <b>QL</b>	Neomycin/polymyxin/hydrocortisone	Phenazopyridine	Propoxyphene/APAP <b>QL</b>	Tamoxifen	Zaleplon <b>ST, QL</b>
Meperidine	Neomycin/polymyxin/dexamethasone	Phenobarbital	Propranolol/HCTZ	Terazosin	Zolpidem <b>QL</b>
Meperidine w/promethazine	Neomycin/polymyxin/bacitracin	Phenyleph hcl/hydrocod bit/cp	Propylthiouracil	Terbutaline	Zidovudine
Mercaptopurine	Neomycin/polymyxin/gramicidin	Phenyleph/chlorphen/carbeta	Pseudoephed/bromphen-DM 45-4-15	Terconazole	Zonisamide
Metaproterenol	Neosol	Phenyleph/chlorphen/hydrocodone	Pseudoephedrine hcl/chlor-mal	Theophylline	
Metformin	Nicardipine	Phenyleph-ephed-cpd w/carbetapentane	Pseudoephedrine/guaifenesin	Theophylline SR	
Metformin ER	Nifedipine	Phenyleph-pyrimamine w/hydrocodone	Pseudoephedrine/carbinoxamine	Theophylline syrup	
Meth/salicylate/atropine/hyos benzoic	Nifedipine ER <b>DO, QL</b>	Phenylephrine	Pyrainamide	Thioridazine	
Methadone	Nisoldipine <b>DO, QL</b>	Phenylephrine/promethazine/codeine	Quinapril, HCTZ	Thiothixene	
Methazolamide	Nitrofurantoin	Phenytion	Quinidine gluconate	Ticlopidine	
Methenamine/hyosc-meth blue/sod biphos-phenyl sal	Nitrofurantoin mono	Phospha 250	Quinidine sulfate	Timolol	
Methocarbamol	Nitroglycerin	Pilocarpine	Ramipril	Tizanidine	
Methotrexate tablets	Nitroglycerin ointment	Pindolol	Ranitidine	Tobramycin*	
Methyclothiazide	Nitroglycerin SR	Piroxicam	Ribavirin	Tobramycin/Dexamethasone Susp.	
Methyl dopa	Nizatidine	Polyethylene glycol-electrolyte solution	Rifampin	Tolmetin	
Methyl dopa/HCTZ	Norethindrone	Polymyxin B/trimethoprim	Risperidone, ODT	Topiramate	
Methylphenidate, SR	Nortriptyline	Pot. & Sod. Citrates w/citric acid	Ropinirole	Torseamide	
Methylprednisolone	Nystatin	Potassium chloride	Salsalate	Tramadol, ER <b>QL</b>	
Metoclopramide	Nystatin/triamcinolone	Potassium citrate	Selegiline	Tramadol/APAP <b>QL</b>	
Metolazone	Ocella <b>PA</b>	Potassium citrate-citric acid	Selenium sulfide	Trandolapril	
Metoprolol, SR	Octreotide	Pramipexole	Sertraline <b>DO, QL</b>	Tranlycypromine	
Metoprolol/HCTZ	Ofloxacin <b>QL</b>	Pramoxine/hc/chloroxylenol	Silver sulfadiazine	Trazodone	
Metronidazole	Omeprazole <b>QL</b>	Pravastatin <b>DO, QL</b>	Simvastatin <b>DO, QL</b>	Tretinoin <b>PA</b>	
Mexiletine	Ondansetron <b>QL</b>	Prazosin	Sodium citrate & citric acid	Triamcinolone acetonide	
Miconazole nitrate	Orphenadrine	Prednisolone	Sodium fluoride	Triamterene/HCTZ	
Microgestin <b>PA</b>	Orphenadrine cpd	Prednisolone sodium		Triazolam	
Midodrine	Orphenadrine cpd Forte			Trifluoperazine	
Minocycline	Oxaprozin				
Minoxidil	Oxazepam				
Mirtazapine	Oxybutynin				
Misoprostol					
Moexipril, HCTZ					

## Tier 2

Abilify  
Accu-chek Product Line **QL**  
Activella 0.1-0.5 **PA**  
Actonel **QL**  
Actonel with Calcium **QL**  
ActoPlus Met **QL**  
Actos **QL**  
Adderall XR  
Advair Diskus, HFA **QL**  
Advicor **DO**  
Aerobid **QL**  
Aerobid M **QL**  
Agenerase  
Akne-Mycin  
Aldara **QL**  
Alkeran  
Altabax  
Alora  
Analpram HC lotion  
Androderm **PA, QL**  
Androgel **PA, QL**  
Antabuse  
Apidra  
Aricept  
Arimidex  
Armour Thyroid  
Aromasin  
Asacol, HD

Asmanex <b>QL</b>	Diovan HCT <b>DO, QL</b>	Humulin N, R, 50/50, 70/30	Neupogen <b>PA*</b>	Renagel	Vagifem
Astelin <b>QL</b>	Dipentum	Hyzaar <b>DO, QL</b>	Nexavar <b>PA</b>	Renvela tab	Valcyte tabs
Astepro <b>QL</b>	Dovonex cream	Intal Inh.	Nexium <b>QL</b>	Rescriptor	Valtrex
Atrovent HFA <b>QL</b>	Duac CS	Invirase	Niaspan	Restasis	Venlafaxine ER <b>DO, QL</b>
Avandamet <b>QL</b>	Duetact	Iressa <b>PA</b>	Nilandron	Retin-A Micro <b>PA</b>	Veramyst <b>QL</b>
Avandaryl <b>QL</b>	Effexor XR <b>DO, QL</b>	Janumet <b>QL</b>	Nitro-Bid	Retrovir	VESIcare
Avandia <b>QL</b>	Effient <b>DO, QL</b>	Januvia <b>QL</b>	Nitro-Dur	Reyataz	Videx soln.
Avinza <b>QL</b>	Elidel <b>ST</b>	Kaletra	Nitrolingual spray	Ridaura	Vigamox
Avodart	Emcyt	Keppra	Norpace CR 100mg	Rifamate	Viracept
AzaSite	Emtriva	Kuzyme	Norvir	Rifater	Viramune
Azopt	Entocort EC	Lamictal tab, chew 2 mg	Novolin N, R, 70/30	Rilutek	Viread
Baraclude	Epipen, JR.	Lamictal tabs	Novolog	Risperdal Consta	Vivelle, <b>DOT</b>
Betimol	Epivir	Lanoxicaps	Nuvigil <b>PA, QL</b>	Sandimmune Oral	Voltaren gel
Beptoptic S	Estraderm	Lanoxin	One Touch Product Line <b>QL</b>	Serevent Diskus <b>QL</b>	Vyvanse <b>PA</b>
BiDil	Estring	Lantus	Ortho Evra <b>PA</b>	Seroquel, XR	Welchol
Blephamide	Ethmozine	Leukeran	Ortho Tri-Cyclen Lo <b>PA</b>	Singulair <b>QL</b>	Xalatan
Byetta <b>ST, QL</b>	Euflexxa	Leukine <b>PA*</b>	OxyContin <b>QL</b>	Skelaxin	Xeloda <b>PA</b>
Calciferol drops	Evamist	Levaquin <b>QL</b>	Oxytrol	Spiriva <b>QL</b>	Xopenex Neb. Soln. (except 1.25/0.5ml)
Capitrol	Evista	Levemir	Pacerone	Sprycel <b>PA</b>	Yaz <b>PA</b>
Canasa	Evoxac	Levothyroid	Pancrease	Starlix	Yodoxin
Carbatrol	Exelon	Lexapro <b>DO, QL</b>	Pataday <b>QL</b>	Strattera	Zarontin
CeeNU	Exforge <b>DO, QL</b>	Lexiva	Patanol <b>QL</b>	Subutex 8mg <b>QL</b>	Ziagen
Cellcept	Exforge HCT <b>DO, QL</b>	Lialda	Perforomist <b>QL</b>	Sular <b>DO, QL</b>	Zomig, ZMT <b>QL</b>
Cenestin	Fansidar	Lidoderm	Pentasa	Sustiva	Zovirax Oint
Ciprodex	FazaClo ODT	Lipitor <b>DO, QL</b>	Plan B 1.5mg <b>QL</b>	Sutent <b>PA</b>	Zylet
Climara Pro	Felbatol	Loprox shampoo	Plavix <b>QL</b>	Symbyax	Zyprexa, Zydys
Clozaril	Fem HRT	Lotemax	Plexion SCT	Symlin	
CombiPatch	Femara	Lotrel (5/40 & 10/40mg)	Pramosone 1% cream only, oint, lotion	Symbicort <b>QL</b>	
Combivent <b>QL</b>	Finacea	Lovaza	Prandin	Synthroid	
Combivir	Flomax	Lumigan	Pred Mild 0.12%	Tarceva <b>PA</b>	
Comtan	Flovent, HFA <b>QL</b>	Matulane	Prefest	Tazorac	
Concerta	Fluoroplex	Maxalt, MLT <b>QL</b>	Premarin oral, vaginal cream	Tegretol, XR	
Coreg XR	FML Forte	Maxidex	Premphase	Tekturna, HCT <b>DO, QL</b>	
Cortifoam	FML S	Medrol 2mg, 16mg, 32mg	Prenate Elite	Temodar <b>PA</b>	
Coumadin	Foradil <b>QL</b>	Menest	Prevpac	Teslac	
Cozaar <b>QL</b>	Fortovase	Mephyton	Priftin	Testim <b>PA, QL</b>	
Creon	Fosamax solution <b>QL</b>	Mepron	Primaquine	Thalomid <b>PA</b>	
Crestor <b>DO, QL</b>	Fosamax Plus D <b>QL</b>	Mestinon timespan	Pristiq <b>DO, QL</b>	Theo-24	
Crixivan	Fosrenol	MetroGel	ProAir HFA <b>QL</b>	Tilade	
Cuprimine	Furadantin	Mintezol	Procambid	TOBI	
Cymbalta <b>DO, QL</b>	Furoxone	Mirapex 0.75mg	Prograf	Tobradex oint.	
Cytadren	Fuzeon*	Myleran	Prometrium	Topamax <b>PA</b>	
Dapsone	Gabitril	Nasonex <b>QL</b>	Protopic <b>ST</b>	Transderm-Scop	
Daraprim	Gantrisin	Nebupent	Proventil HFA <b>QL</b>	Treximet <b>QL</b>	
Depakote, ER	Geodon	Neoral	Pulmicort Respules <b>QL</b>	Trilipix <b>QL</b>	
Derma-Smoothe, FS	Gleevec <b>PA</b>	Neosar	Pulmicort Turbuhaler <b>QL</b>	Trizivir	
Detrol, LA	Glucagon	Neulasta <b>PA, QL*</b>	QVAR <b>QL</b>	Tussicaps	
Diastat	Glyset		Ranexa	Tussionex Pennkinetic ER	
Dibenzyline	Halflytely		Rapamune	Twinject	
Differin <b>PA</b>	Hectorol			Ultrase	
Dilantin	Humalog			Uniphyl	
Diovan <b>DO, QL</b>	Humibid Cap Sprinkle			Uroxatral	

### Tier 3

Accolate  
Accupril  
Accuretic  
Aceon  
Aciphex **ST, QL**^#  
Actimmune\*  
Activella 1.0-0.5 **PA**  
Actiq **PA, QL**  
Acular, LS  
Acuvail  
Adcirca **PA**  
Adderall  
Aggrenox **QL**  
Alamast **QL**^  
Alferon-N\*  
Allegra, D **QL**^  
Alocril **QL**^  
Alomide **QL**^  
Alphagan P  
Altace  
Altoprev **ST, DO**  
Alupent Inhaler  
Alvesco **QL**

Ambien **QL**  
 Ambien CR **QL, ST**  
 Amerge **QL**  
 Amevive **PA**  
 Amitiza  
 Anadrol-50 **PA**  
 Android **PA**  
 Antara  
 Anzemet **QL**  
 Apidra  
 Aplenzin **DO, QL**  
 Apriso  
 Aquachloral Supporettes  
 Aranesp **PA\***  
 Arixtra\*  
 Arthrotec **ST**  
 Atacand **DO, QL**  
 Atacand HCT **DO, QL**  
 Avalide **DO, QL**  
 Avapro **DO, QL**  
 Avelox **QL**  
 Avonex\*  
 Axert **QL**  
 Azor **DO, QL**  
 Beconase AQ **ST, QL**  
 Benicar, HCT **DO, QL**  
 Benzacilin **ST**  
 Besivance  
 Betaseron **ST\***  
 Biaxin XL  
 Boniva **ST, QL**  
 Bystolic  
 Caduet **DO**  
 Canasa  
 Capex Shampoo  
 Capoten  
 Capozide  
 Cardene, SR  
 Cardizem CD, LA **DO, QL**  
 Cardura, XL  
 Casodex  
 Catapres TTS  
 Caverject **PA, QL**  
 Cedax  
 Ceftin **QL**  
 Celebrex **ST, QL**  
 Cetrotide\*  
 Chemet  
 Cialis **PA, QL**  
 Cimzia **PA, QL**  
 Cipro XR **QL**  
 Clarinex, D **QL^**

Cleocin Vaginal Cream  
 Climara  
 Clobex **ST**  
 Coartem  
 Colazal  
 Colestid  
 Combunox **QL**  
 Copaxone\*  
 Cordran Tape  
 Coreg  
 Cosopt  
 Covera HS **DO**  
 Crinone  
 Cyclophosphamide  
 DDAVP injection  
 Delatestryl\*  
 Denavir  
 Depen  
 Depo-Estradiol\*  
 Depo-Testosterone\*  
 Dexpak  
 Dilaudid  
 Dovonex Soln.  
 Dynacirc, CR  
 Edex **PA, QL**  
 Edluar SL **ST**  
 Elestat **QL^**  
 Eliphos  
 Elmiron  
 Emadine **QL^**  
 Embeda **QL**  
 Emend **QL**  
 Enablex  
 Enbrel **PA, QL\***  
 Epogen **PA\***  
 Esclim  
 Estrace vaginal cream  
 Estrasorb  
 Estrogel  
 Exelderm  
 Factive **QL**  
 Femring  
 Fenoglide  
 Fentora **PA, QL**  
 Fibracor  
 First Testosterone  
 Flonase **QL**  
 Floxin Otic  
 Foradil **QL**  
 Fortamet  
 Forteo **PA, QL\***  
 Fosamax tablets **QL**

Fragmin\*  
 Frova **QL**  
 Genotropin **PA, QL\***  
 Glumetza  
 Gonal-f, RFF\*  
 Grifulvin V  
 Histex, SR  
 Humatrope **PA, QL\***  
 Humira **PA, QL\***  
 Hybolin **PA**  
 Imitrex **QL**  
 Infergen\* **PA**  
 Innohep\*  
 Intron A **PA\***  
 Intuniv  
 K-Phos  
 Kadian **QL**  
 Kapidex **ST, QL**  
 Ketek  
 Kineret **PA\***  
 Kristalose  
 Kytril **QL**  
 Lamictal chew 5 & 25mg, XR  
 Lamisil Spray  
 Lamisil Tablet **PA**  
 Lescol, XL **ST, DO, QL**  
 Levitra **PA, QL**  
 Lipofen  
 Loprox gel  
 Lorabid  
 Lotensin, HCT  
 Lotrel (2.5/10, 5/10, 5/20 & 10/20mg)  
 Lunesta **QL**  
 Lupron Depot **PA\***  
 Luxiq  
 Lyrica **PA**  
 Malarone **PA**  
 Marinol  
 Mavik  
 Maxair **QL**  
 Maxaquin **QL**  
 Methergine  
 Methitest  
 MetroLotion  
 Miacalcin Spray **QL**  
 Micardis, HCT **DO, QL**  
 Migranal **QL**  
 Mirapex (except 0.75mg), ER  
 Moban  
 Mobic **QL**

Monopril/HCT  
 Multaq  
 Muse **PA**  
 Myambutol  
 Myfortic  
 Mysoline  
 Nasacort AQ **ST, QL**  
 Nasarel **QL**  
 Neumega **PA\***  
 Niacor  
 Norditropin **PA, QL\***  
 Noroxin **QL**  
 Norvasc **DO, QL**  
 Nucynta **QL**  
 Nutropin, AQ **PA, QL\***  
 Nuvaring **PA, QL**  
 Nuvigil **PA, QL**  
 Olux E  
 Omeprazole 40mg **PA, QL^#**  
 Omnaris **ST, QL**  
 Omnicef  
 Omnitrope **PA, QL\***  
 Onsolis **PA, QL**  
 Opana  
 Opana ER **QL**  
 Optivar **QL^**  
 Oraxyl  
 Ovidrel **PA\***  
 Oxandrin **PA**  
 Panretin  
 Pantoprazole **PA, QL^#**  
 Patanase **QL**  
 Parnate  
 Paxil CR **DO, QL**  
 Pegasys **PA\***  
 Peg-Intron **PA\***  
 Penlac **PA**  
 Phoslo  
 Plan B 0.75mg **QL**  
 Poly-Histone Elixir  
 Poly-Pred  
 Pravigard  
 Pred-G  
 Precose  
 Prevacid **ST, QL**  
 Prilosec **ST, QL^#**  
 Primaxin **QL**  
 Prinivil  
 Prinzide  
 Procrit **PA\***  
 Prostin E2 Supp

Protonix **ST, QL^#**  
 Provigil **PA, QL**  
 Prozac Weekly **QL**  
 Pulmozyme  
 Quaaluan **PA, QL**  
 Raptiva **PA**  
 Razadyne, ER  
 Rebif\*  
 Relenza **QL**  
 Relpax **QL**  
 Remicade **PA**  
 Renvela Pak  
 Restoril  
 Revatio **PA, QL**  
 Requip, XL  
 Risperdal, M  
 Rhinocort Aqua **ST, QL**  
 Roxicet **QL**  
 Rozerem **ST, QL**  
 Ryzolt **QL**  
 Saizen **PA, QL\***  
 Sanctura, XR  
 Sancuso **QL**  
 Sandostatin LAR\*  
 Sarafem **QL**  
 Savella **PA, QL**  
 Seasonale **PA**  
 Serostim **PA, QL\***  
 Simcor **QL**  
 Simponi **PA, QL**  
 Solodyn  
 Somavert\*  
 Sonata **ST, QL**  
 Soriatane CK  
 Spectracef  
 Sporanox Solution **PA**  
 Stadol **QL**  
 Stelara  
 Striant **PA**  
 Subutex 2mg **QL**  
 Sumavel Dosepro **QL**  
 Suprax **QL**  
 Synagis **PA**  
 Synarel **PA**  
 Tamiflu **QL**  
 Tarka  
 Tequin **QL**  
 Testopel **PA**  
 Testred **PA**  
 Teveten, HCT **DO, QL**  
 Tev-Tropin **PA, QL\***  
 Tiazac **DO, QL**

Tobradex susp.  
 Tobrex  
 Toprol XL  
 Toradol **QL**  
 Tricor  
 Tri-Nasal  
 Triglide  
 Trileptal  
 Trovan  
 Trusopt  
 Twynsta  
 Uloric  
 Ultram, ER **QL**  
 Uniretic  
 Univasc  
 Urocit-K  
 Valcyte soln  
 Valturna **DO, QL**  
 Vaseretic  
 Vasotec  
 Ventavis **PA**  
 Ventolin HFA **QL**  
 Verelan PM **DO, QL**  
 Vesandid  
 Vexol  
 Vfend **PA**  
 Viagra **PA, QL**  
 Victoza  
 Videx EC  
 Vivactil  
 Voltaren Ophth  
 Vytorin **ST, QL**  
 Wellbutrin, SR  
 Wellbutrin XL **DO, QL**  
 Winstrol **PA**  
 Xerac AC  
 Xolair **PA\***  
 Xopenex HFA **QL**  
 Xopenex Neb. Soln. 1.25/0.5ml  
 Xyzal **ST, QL^**  
 Yasmin **PA**  
 Zegerid **ST, QL^#**  
 Zerit  
 Zestoretic  
 Zestril  
 Zetia **ST, QL**  
 Zithromax **QL**  
 Zmax **QL**  
 Zocor **DO**  
 Zofran **QL**  
 Zoladex **PA**

Zoloft **DO, QL**  
Zorbtive **PA, QL\***  
Zyflo  
Zyprexa Relprev

#### Tier 4

Actimmune  
Alferon-N  
Antagon  
Apokyn  
Aranesp **PA**  
Arixtra  
Avonex

Betaseron  
Bravelle  
Caverject **PA, QL**  
Cetrotide  
Chorionic Gonadotropin  
Colistimeth  
Coly-Mycin  
Copaxone  
Delatestryl  
Delestrogen  
Depo Testosterone  
Depo-Estradiol  
DHE 45  
Edex **PA, QL**

Eligard **PA**  
Enbrel **PA, QL**  
Epogen **PA**  
Fertinex  
Follistim AQ  
Forteo **PA, QL**  
Fragmin  
Fuzeon  
Genotropin **PA, QL**  
Gonal-f, RFF  
Heparin  
Humatrope **PA, QL**  
Humira **PA, QL**  
Increlex **PA**

Infergen **PA**  
Innohep  
Intron-A **PA**  
Iplex **PA**  
Kineret **PA**  
Leukine **PA**  
Leuprolide **PA**  
Lovenox  
Lupron, Depot **PA**  
Luveris  
Methotrexate  
Metrodin  
Menopur  
Miacalcin injection

Neulasta **PA, QL**  
Neumega **PA**  
Neupogen **PA**  
Norditropin **PA, QL**  
Novarel  
Nutropin, AQ **PA, QL**  
Omnitrope **PA, QL**  
Ovidrel  
Pegasys **PA**  
Peg-Intron **PA**  
Pregnyl  
Profasi  
Procrit **PA**  
Raptiva **PA**

Rebif  
Repronex **PA**  
Roferon-A **PA**  
Saizen **PA, QL**  
Sandostatin LAR  
Serostim **PA, QL**  
Somavert  
TevTropin **PA, QL**  
Tobramycin  
Vitamin B12  
Vivaglobulin **PA**  
Xolair **PA**  
Zorbtive **PA**

#### KEY

# Non-formulary in Indiana only

^ 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](http://anthem.com), for details on coverage.

\* = These drugs are Tier 1, 2 or 3 for those members that do not have a Tier 4 plan

**PA** = PRIOR AUTHORIZATION REQUIRED. Prior authorization is the process of obtaining approval of benefits before certain prescriptions may be filled.

**QL** = QUANTITY LIMITS. Certain prescription drugs have specific quantity limits per prescription or per month.

**ST** = STEP THERAPY REQUIRED. You may need to use one medication before benefits for the use of another medication can be authorized. Please note: Foradil and Serevent are safety edits that prevent duplication of therapy.

**DO** = DOSE OPTIMIZATION REQUIRED. Normally involves the conversion from twice-daily dosing to a once-daily dosing schedule.

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.



**For more information, please visit [anthem.com](https://www.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](https://www.anthem.com)**
- **Bring a copy of this drug list/formulary to your next doctor's visit to assist in selecting the lowest cost medications**

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