
Basic Formulary

2018 Preferred Drug List | Effective 01/01/2018

This Preferred Drug List (PDL) is a guide to common cost-effective medications covered on the QualChoice Basic Formulary. This list is not all-inclusive. Coverage depends on your benefit plan. Check QualChoice.com for the most up-to-date information.

Print this PDL and take it with you when you see a doctor or other medical provider. We encourage doctors to prescribe drugs on this list when they are medically right for you. In all cases, choices about your healthcare and treatment are between you and your doctor.

How We Select Preferred Drugs

The drugs on this list are chosen for safety, effectiveness, and cost, based on the guidance of the QualChoice Pharmacy & Therapeutics Committee. This group is made up of practicing doctors and pharmacists. They look at drugs regulated by the Federal Drug Administration (FDA) — both newly approved and those that have been on the market for some time.

Reading the Drug List

Column 1 lists major drug categories such as antibiotics and sub-categories such as penicillins. Any restrictions on the drug are noted as:

PA (Pre-authorization)

Covered only if pre-authorized (pre-approved). You or your doctor must have approval before filling the prescription. If you don't get approval, your medication may not be covered. Call **Catamaran**, an OptumRx company, at 877.629.3118 for a pre-authorization form. Your doctor must fill it out and send to Catamaran.

QL (Quantity Limits)

Covered only for a limited number of doses over a certain amount of time. To learn more about QL on a certain drug, call **Catamaran** at 877.629.3118.

ST (Step Therapy)

Requires use of some other drug first before it is covered. Starts with the most cost-effective and safest drugs and moves on to other more costly ones only if needed. Examples are muscle relaxants and some specialty drugs.

Columns 2, 3, 4 list the drug's tier level. Each drug is listed in one of three payment tiers, each with a different cost share.

Tier 1 – Lowest Copayment

Most (but not all) generic drugs are in Tier 1. For the lowest out-of-pocket cost, always ask your doctor if a Tier 1 drug would work for you.

Tier 2 – Middle Copayment

If your drug is in Tier 2, ask your doctor if a Tier 1 drug might work for you.

Tier 3 – Highest Copayment

If your drug is in Tier 3, ask your doctor if a Tier 1 or Tier 2 drug might work for you.

Specialty Drugs

These drugs may have a higher copayment or deductible and coinsurance, based on your plan. They can be filled by our preferred specialty pharmacy, BriovaRx. For help call **BriovaRx at 866.791.8679**. Check your *Benefit Summary* about specialty drug coverage under your plan. For a list of common specialty drugs, go to *QualChoice.com*; select *Already a Member?*, *View My Drug Coverage*, then select *Commonly Used Specialty Medications*. To see what you will pay for a specialty drug, check your *Benefit Summary*.

For more on your specific drug coverage, check your *Evidence of Coverage (EOC)* or *Certificate of Coverage (COC)*. If you do not have a copy of these or your *Benefit Summary*, sign in to *My Account* at **QualChoice.com** and select *Your Benefit Booklet*. Or call us at 800.235.7111 or 501.228.7111 to ask for a copy to be mailed to you.

Medication Not Listed

If your drug is not listed here, sign in to *My Account* at *QualChoice.com* and select *Your Drug Formulary*. On the *OptumRx Dashboard*, select *Drug Lookup*.

Generic Drugs

Generics are FDA-approved and have the same active ingredients as the brand-name drug. They are most often less costly than brand-name drugs. On the drug list, (*) means that a generic version is available.

Appeal Process

You have the right to appeal any decision by QualChoice to not provide or pay for a medication. You may file an appeal by filling out the *Member Appeal Request Form* at *QualChoice.com*. You may also call us at 501.228.7111 or 800.235.7111 and ask for a copy to be mailed to you

*Generic version available

Drug Category	Tier 1	Tier 2	Tier 3
Anti-Infectives			
Antibiotics – Cephalosporins	cefaclor, cefadroxil, cefdinir, cefprozil, cefuroxime, cephalexin		
Antibiotics – Fluoroquinolones	ciprofloxacin, ciprofloxacin ER, levofloxacin		
Antibiotics – Macrolides	azithromycin, clarithromycin, erythromycin		
Antibiotics – Penicillins	amoxicillin, amoxicillin w/ pot clavulanate, ampicillin, penicillin		
Antibiotics – Other	doxycycline, minocycline, tetracycline		
Antifungals	fluconazole(QL), itraconazole, ketoconazole, terbinafine		
Antivirals – Flu	amantadine, rimantadine, oseltamivir		Tamiflu susp
Antivirals – Herpes	acyclovir, famciclovir, valacyclovir		
Antivirals – HIV			
Cardiovascular			
ACE Inhibitors and ACE Inhibitor combinations (QL)	benazepril, benazepril hctz, captopril, enalapril, enalapril hctz, fosinopril, lisinopril, lisinopril hctz, quinapril, ramipril		
Angiotensin II Receptor Antagonists (ARB's) and combinations (QL)	irbesartan, irbesartan hctz, eprosartan, losartan, losartan hctz, valsartan, valsartan hctz	candesartan, candesartan hctz, telmisartan, telmisartan hctz	
Antihyperlipidemics (Statins)	atorvastatin, fluvastatin, lovastatin, pravastatin, simvastatin		
Other Antihyperlipidemic Agents	amlodipine/atorvastatin, cholestyramine, colestipol, fenofibrate, gemfibrozil	fenofibric acid cap 45mg, fenofibric acid cap 135mg, fenofibrate cap 130mg	
Antihypertensive combinations (QL)	amlodipine/atorvastatin, amlodipine/benazepril, amlodipine/telmisartan		
Antihypertensive – Other (QL)	spironolactone		

Drug Category	Tier 1	Tier 2	Tier 3
Antiplatelet/ Anticoagulant Agents	cilostazol, clopidogrel, dipyridamole, ticlopidine, warfarin		
Beta Blockers	acebutolol, atenolol, bisoprolol, carvedilol, metoprolol, metoprolol XL, propranolol		
Calcium Channel Blockers	amlodipine, diltiazem, felodipine, nifedipine, verapamil		
Central Nervous System			
ADHD Medications (PA) (QL)	amphetamine salts, dextroamphetamine, methylphenidate		
Analgesics – Narcotic	codeine–apap, hydrocodone combinations, hydromorphone, meperidine, morphine sulfate, oxycodone combinations		
Analgesics – NSAIDs	diclofenac, diclofenac– misoprostol, ibuprofen, indomethacin, meloxicam, naproxen, sulindac	etodolac, etodolac ER, piroxicam	
Alzheimers	galantamine, donepezil, rivastigmine		
Antianxiety	alprazolam, diazepam, lorazepam		
Anticonvulsants	carbamazepine, divalproex sodium, gabapentin, lamotrigine, levetiracetam, oxcarbazepine, phenytoin, zonisamide		
Antidepressants – SNRIs (QL)	venlafaxine, venlafaxine ER caps	duloxetine	
Antidepressants – SSRIs (QL)	citalopram, escitalopram, fluoxetine caps, paroxetine, paroxetine ER, sertraline		
Antidepressants - Other (QL)	amitriptyline, bupropion immediate-release, bupropion SR, bupropion XL, desipramine, imipramine, mirtazapine, nortriptyline		
Anti-Parkinson	carbidopa/levodopa, pramipexole, ropinirole, rivastigmine		

Drug Category	Tier 1	Tier 2	Tier 3
Antipsychotic Agents	clozapine, olanzapine, quetiapine, risperidone		
Migraine Products	naratriptan (QL), sumatriptan (QL)	rizatriptan (QL), rizatriptan MLT (QL), zolmitriptan (QL), zolmitriptan ODT (QL)	
Sedative – Hypnotics	flurazepam, temazepam, triazolam, zaleplon (QL), zolpidem (QL)	eszopiclone (QL)	
Skeletal Muscle Relaxants	carisoprodol, chlorzoxazone, cyclobenzaprine, tizanidine tabs		
Endocrine			
Diabetes – Combinations	glyburide/metformin, pioglitazone/metformin		
Diabetes – Insulin			Novolin, NovoLog, Lantus
Diabetes – Insulin Secreting Agents	chlorpropamide, glime-piride, glipizide, glyburide, nateglinide, tolazamide		
Diabetes – Insulin Sensitizing Agents	metformin, metformin XR, pioglitazone		
Diabetes – Non-Insulin injectable anti-hyperglycemic agents			
Diabetes – Other Medications	acarbose		Janumet, Januvia
Diabetic Supplies		Accu–Chek, OneTouch	
Thyroid Agents	levothyroxine, Levoxyl		
Gastrointestinal/Urinary			
Digestive Aids			Creon, Zenpep
Gallstone Solubilizing Agents	ursodiol		
Genitourinary Medications	oxybutynin, oxybutynin ER, tolterodine, tolterodine ER, trospium, trospium ER		
H–2 Antagonists			
Hyperparathyroid Agents	calcitriol, paracalcitol		
Inflammatory/Irritable Bowel	balsalazide, mesalamine, sulfasalazine		
Proton Pump Inhibitors			
Men's Health			

Drug Category	Tier 1	Tier 2	Tier 3
Erectile Dysfunction Agents			
Hormone Replacement			AndroGel (PA)
Prostate Health	alfuzosin, doxazosin, tamsulosin, terazosin		
Respiratory			
Antihistamines			
Asthma – Beta Agonists Long Acting			Foradil
Asthma – Beta Agonists Short Acting	albuterol sulfate, metaproterenol	ProAir HFA	
Asthma–Leukotriene Modulators	montelukast (CT), zafirlukast		
Asthma – Steroid Inhalants	budesonide		Flovent
Asthma – Other	ipratropium/albuterol		Advair (PA), Atrovent, Combivent, Spiriva, Symbicort (PA)
Nasal Products	azelastine, flunisolide, fluticasone		
Topical			
Ears	antipyrine/benzocaine, ofloxacin		
Eye – Allergy	cromolyn, diclofenac, ketotifen fumarate		
Eye – Glaucoma	acetazolamide, brimonidine, dorzolamide, dorzolamide/timolol, latanoprost, levobunolol, timolol		
Eye – Miscellaneous	ciprofloxacin, erythromycin, gentamicin		
Skin – Acne	benzoyl peroxide, clindamycin, clindamycin phosphate-benzoyl peroxide		
Skin – All	betamethasone, mometasone, mupirocin, imiquimod		
Women's Health			
Contraceptives	all generics	Natazia, Necon 1/50, Zovia 1/50, Nuvaring	
Combination HRT	estradiol/norethindrone		Premphase, Prempro

Drug Category	Tier 1	Tier 2	Tier 3
Hormone Replacement Therapy (HRT)	estradiol, progesterone		Cenestin, Vagifem
Osteoporosis – Calcium Regulators	alendronate	risedronate	ibandronate (ST)
Osteoporosis – Hormone Receptor Modulators		raloxifene	
Vaginal Products	clindamycin, metronidazole, terconazole		
Miscellaneous			
Antiemetics	granisetron (QL), ondansetron (QL)		
Gout	allopurinol, colchicine		
Immunosuppressive Agents	azathioprine, cyclosporine, mycophenolate mofetil, tacrolimus		

Brand-names are the property of their respective manufacturers.

For information on drugs not listed, call OptumRx at 877.629.3118.
 For information on your prescription benefit program, visit QualChoice.com.