

Enhanced Formulary

2017 Preferred Drug List | Effective 01/1/2017

This Preferred Drug List (PDL) is a guide to common cost-effective medications covered on the QualChoice Enhanced 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 health care 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 Co-payment

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 Co-payment

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

Tier 3 – Highest Co-payment

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 co-payment 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 *Pharmacy*, then select *Commonly Used Specialty Drugs*. 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*, log 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, log in as a member 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.

| Drug Category | Tier 1 | Tier 2 | Tier 3 |
|---|--|--|---|
| Anti-Infectives | | | |
| Antibiotics - Cephalosporins | cefaclor, cefadroxil, cefdinir, cefixime, cefprozil, cefuroxime, cephalexin, cefpodoxime | | Cedax*, Cefditoren, Ceftibuten, Ceftin*, Spectracef, Suprax* |
| Antibiotics - Fluoroquinolones | ciprofloxacin, ciprofloxacin ER, levofloxacin, moxifloxacin, ofloxacin | | Noroxin |
| Antibiotics - Macrolides | azithromycin, clarithromycin, clarithromycin ER, erythromycin | | Dificid (PA), PCE, Ery-Tab, Zmax |
| Antibiotics - Penicillins | amoxicillin, amoxicillin w/ pot clavulanate, ampicillin, dicloxacillin, penicillin | | Moxatag ER |
| Antibiotics - Other | doxycycline hyclate IR, doxycycline monohydrate IR, linezolid, minocycline IR | | Ketek, Sivextro |
| Antifungals | fluconazole(QL), griseofulvin, itraconazole, ketoconazole (PA), terbinafine, voriconazole | | Cresemba (PA) |
| Antivirals - Flu | amantadine, rimantadine | | Relenza, Tamiflu |
| Antivirals - Herpes | acyclovir, famciclovir, valacyclovir | | |
| Antivirals - HIV | All generics | Atripla, Epivir soln, Intelence, Kaletra, Norvir, Prezista, Reyataz, Truvada, Viread | Complera, Descovy, Evotaz, Genvoya, ISENTRESS, Edurant, Epivir* tab, Odefsey, PrezcoBix, Stribild, Triumeq, Viramune XR*, Vitekta |
| Cardiovascular | | | |
| ACE Inhibitors and ACE inhibitor combinations (QL) | benazepril, benazepril hctz, captopril, captopril hctz, enalapril, enalapril hctz, fosinopril, fosinopril hctz, lisinopril, lisinopril hctz, moexipril, moexipril hctz, perindopril, quinapril, quinapril hctz, ramipril, trandolapril | | |
| Angiotensin II Receptor Antagonists (ARB's) and | irbesartan, irbesartan hctz, eprosartan 600mg, | candesartan, candesartan hctz, | Benicar (PA), Benicar HCT (PA), Edarbi (PA), |

| Drug Category | Tier 1 | Tier 2 | Tier 3 |
|---|--|---|---|
| combinations (QL) | losartan, losartan hctz, valsartan, valsartan hctz | telmisartan, telmisartan hctz | Edarbyclor (PA), Teveten HCT (PA) |
| Antihyperlipidemics (statins) | atorvastatin, fluvastatin, lovastatin, pravastatin, simvastatin | rosuvastatin | |
| Other Antihyperlipidemic Agents | amlodipine/atorvastatin, cholestyramine, colestipol, fenofibrate, gemfibrozil, niacin extrel, niacin/lovastatin | fenofibric acid cap 45mg DR, fenofibric acid cap 135mg DR fenofibrate cap 130mg | Vytorin (PA), Welchol, Zetia |
| Antihypertensive combinations (QL) | amlodipine/atorvastatin, amlodipine/benazepril, amlodipine/telmisartan | | Amturnide, Azor (PA), Tribenzor (PA) |
| Antihypertensive - Other (QL) | eplerenone, spironolactone | | Bidil, Tekamlo, Tekturna, Tekturna HCT |
| Antiplatelet/Anticoagulant Agents | cilostazol, clopidogrel, dipyridamole, ticlopidine, warfarin | Eliquis, Pradaxa, Xarelto | Aggrenox, Brilinta, Effient |
| Beta Blockers | acebutolol, atenolol, bisoprolol, carvedilol, metoprolol, metoprolol XL, propranolol | | Bystolic, Coreg CR, Dutoprol, Innopran XL |
| Calcium Channel Blockers | amlodipine, diltiazem, felodipine, isradipine, nicardipine, nifedipine, nimodipine, verapamil | | |
| Central Nervous System | | | |
| ADHD Medications (QL) | amphetamine salts, dextroamphetamine, dexmethylphenidate, methylphenidate, modafanil (PA) | amphetamine-dextroamphetamine SR, dextroamphetamine ER, dexmethylphenidate ER, methylphenidate ER, Strattera (PA) | Daytrana (PA), Nuvigil (PA), Quivillant XR (PA), Vyvanse (PA) |
| Analgesics - Narcotic (All brands with a generic equivalent available are not covered) | codeine-apap, fentanyl, hydrocodone combinations, hydromorphone, meperidine, morphine sulfate, oxycodone combinations, oxycodone CR, tramadol IR, tramadol ER tabs | OxyContin | Nucynta, Nucynta ER, Opana ER |
| Analgesics - NSAIDs | diclofenac, diclofenac-misoprostol, ibuprofen, indomethacin, meloxicam, naproxen, sulindac | celecoxib (PA), etodolac, etodolac ER, piroxicam | Flector (PA) |

| Drug Category | Tier 1 | Tier 2 | Tier 3 |
|-------------------------------------|---|--|---|
| Alheimers | donepezil, galantamine, rivastigmine | | Namenda XR, |
| Antianxiety | alprazolam, diazepam, lorazepam | | |
| Anticonvulsants | carbamazepine, clonazepam, divalproex sodium, gabapentin, lamotrigine, lamotrigine ER, levetiracetam, levetiracetam ER, oxcarbazepine, phenytoin, tiagabine, topiramate, zonisamide | | Briviact (PA), Depakote ER*, Dilantin*, Fycompa (PA), Gabitril*, Keppra*, Keppra XR*, Lamictal*, Lyrica (PA), Onfi (PA), Oxtellar XR, Topamax*, Trileptal*, Vimpat, Zonegran* |
| Antidepressants - SNRIs (QL) | venlafaxine, venlafaxine ER caps | desvenlafaxine ER, duloxetine | Pristiq (PA) |
| Antidepressants - SSRIs (QL) | citalopram, escitalopram, fluoxetine caps, fluvoxamine, paroxetine, paroxetine ER, sertraline | | |
| Antidepressants - Other (QL) | amitriptyline, bupropion immediate-release, bupropion SR, bupropion XL, desipramine, imipramine, mirtazapine, nortriptyline | | |
| Anti-Parkinson's Agents | carbidopa/levodopa, entacapone, pramipexole, rivastigmine, ropinirole ropinirole SR, selegiline, tolcapone | | Azilect (PA), Neupro patch (PA), Stalevo |
| Antipsychotic Agents (QL) | aripiprazole, clozapine, olanzapine, olanzapine/fluoxetine, quetiapine, risperidone, ziprasidone | | Clozaril*, Equetro, Latuda, Rexulti (PA), Saphris (PA), Seroquel XR, Vraylar (PA) |
| Migraine Products (QL = ALL) | naratriptan, rizatriptan, rizatriptan MLT, sumatriptan, | almotriptan (PA), zolmitriptan, zolmitriptan ODT | Frova (PA), Migranal, Relpax (PA), Zomig Nasal Spray |
| Sedative - Hypnotics (QL) | flurazepam, temazepam, triazolam, zaleplon (QL), zolpidem (QL) | eszopiclone (QL), zolpidem ER (QL) | Rozerem (QL) |
| Skeletal Muscle Relaxants | carisoprodol, chlorzoxazone, cyclobenzaprine, tizanidine tabs | metaxalone (ST) | |
| Endocrine | | | |

| Drug Category | Tier 1 | Tier 2 | Tier 3 |
|---|---|--|---|
| Diabetes - Combinations | glyburide/metformin, pioglitazone/glimepiride, pioglitazone/metformin | | ActoplusMet XR |
| Diabetes - Insulin | | Lantus, Levemir, Novolin, NovoLog, Toujeo | |
| Diabetes - Insulin Secreting Agents | chlorpropamide, glimepiride, glipizide, glyburide, nateglinide, repaglinide, tolazamide | | |
| Diabetes - Insulin Sensitizing Agents | metformin, metformin XR, pioglitazone | | |
| Diabetes - Non-Insulin injectable antihyperglycemic agents | | | Byetta (PA), Bydureon (PA), Symlin, Victoza (PA) |
| Diabetes - Other Medications | acarbose | Invokamet, Invokana (PA), Janumet, Januvia(PA), Jardiance (PA), Kombiglyze, Onglyza (PA) | Glyset |
| Diabetic Supplies | | Accu-Chek, OneTouch | |
| Thyroid Agents | levothyroxine, Levoxyl | | Synthroid* |
| Gastrointestinal/Urinary | | | |
| Digestive Aids | | Creon, Zenpep | |
| Gallstone Solubilizing Agents | ursodiol | | |
| Genitourinary Medications | oxybutynin, oxybutynin ER, tolterodine, tolterodine, ER, trospium, trospium ER | | Enablex (PA), Myrbetriq (PA), Oxytrol, Toviaz (PA), Vesicare (PA) |
| H-2 Antagonists** | | | |
| Hyperparathyroid Agents | calcitriol, paracalcitol | | |
| Inflammatory/Irritable Bowel | balsalazide, mesalamine, sulfasalazine | Canasa, Lialda, Linzess, Pentasa | Amitiza, Apriso (PA) Asacol HD (PA), Delzicol (PA), |
| Proton Pump Inhibitors | omeprazole, pantoprazole | lansoprazole, rabeprazole | |
| Men's Health | | | |
| Erectile Dysfunction Agents (QL = ALL) | | | Caverject (PA), Cialis (PA), Levitra (PA), Staxyn (PA), Stendra (PA), Viagra (PA) |
| Hormone Replacement | | Androgel 1.62% (PA/QL) | Axiron (PA/QL) |

| Drug Category | Tier 1 | Tier 2 | Tier 3 |
|--|---|---|--|
| Prostate Health | alfuzosin, doxazosin, dutasteride, tamsulosin, terazosin | | Rapaflo (PA) |
| Respiratory | | | |
| Asthma - Beta Agonists Long Acting | | Foradil, Serevent | Arcapta, Brovana, Perforomist, Striverdi |
| Asthma - Beta Agonists Short Acting | albuterol sulfate, metaproterenol | ProAir HFA, Ventolin HFA | Xopenex HFA |
| Asthma-Leukotriene Modulators | montelukast, zafirlukast | | |
| Asthma - Steroid Inhalants | budesonide | Arnuity Ellipta, Flovent | Pulmicort flexhaler |
| Asthma - Other | ipratropium/albuterol | Advair (PA), Breo Ellipta (PA) Incruse Ellipta, Spiriva, Symbicort (PA) | Anoro Ellipta, Atrovent HFA, Combivent Respimat, Stiolto Respimat, Daliresp (PA) |
| Nasal Products | azelastine, budesonide, flunisolide, fluticasone, mometasone, triamcinolone | | |
| Topical | | | |
| Ears | antipyrine/benzocaine, ofloxacin | Ciprodex | Cipro HC |
| Eye - Allergy | cromolyn, diclofenac, epinastine, ketorolac, ketotifen fumarate | Pataday, Pazeo | Alocril, Alomide, Bepreve, Emadine, Ilevro, Nevanac |
| Eye - Glaucoma | acetazolamide, brimonidine, dorzolamide, dorzolamide/timolol, latanoprost, levobunolol, timolol | Travatan-Z | Azopt, Betimol, Betoptic S, Combigan, Simbrinza |
| Eye - Miscellaneous | ciprofloxacin, erythromycin, gatifloxacin, gentamicin | Lotemax, Vigamox | Alex, Azasite, Besivance, Durezol, Maxidex, Moxeza, Natacyn, Vexol, Zirgan |
| Skin - Acne | benzoyl peroxide, benzoyl peroxide/erythromycin, clindamycin, clindamycin phosphatebenzoyl peroxide | Veltin gel | Aczone, Azelex |
| Skin - All | betamethasone, imiquimod, mometasone, mupirocin | Denavir cream 1%, Elidel | Altabax, Desonate Gel, Ertaczo, Eurax, Finacea gel, Mentax, Picato, Tazorac, Ulesfia, Vectical, Veregen, |

| Drug Category | Tier 1 | Tier 2 | Tier 3 |
|---|--|--|--|
| | | | Zovirax crm (QL) |
| Women's Health | | | |
| Contraceptives | All Generics | Natazia, Necon 1/50, Nuvaring, Zovia 1/50 | Beyaz, Lo Loestrin, Safyral |
| Combination HRT | estradiol/norethindron, | CombiPatch, Premphase, Prempro | Duavee (PA) |
| Hormone Replacement Therapy (HRT) | estradiol, progesterone | Cenestin, Enjuvia, Estrace Vaginal, Minivelle, Premarin, Vagifem | Alora, Estring Vaginal, Estrogel Pump, Femring, Menest, Vivelle-DOT* |
| Osteoporosis - Calcium Regulators | alendronate, calcitonin spray, risedronate | | ibandronate (ST) |
| Osteoporosis - Hormone Receptor Modulators | raloxifene | | |
| Vaginal Products | clindamycin, metronidazole, terconazole | Clindesse | AVC, Gynazole-1, Osphena (PA) |
| Miscellaneous | | | |
| Antiemetics | granisetron (QL), ondansetron (QL) | | Anzemet (QL), Emend (QL), |
| Gout | allopurinol | | Colcrys, Uloric |
| Immunosuppressive Agents | cyclosporine, mycophenolate mofetil, sirolimus, tacrolimus | | Azasan, Zortress |
| Smoking Cessation | bupropion | | Chantix (PA) |

Brand-names are the property of their respective manufacturers.

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

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