

The *DataRx Management Preferred Drug List* is a guide within select therapeutic categories for clients and their plan participants. **Generics should be considered the first line of prescribing.** If there is no generic available, there may be more than one brand name medicine to treat a condition. The preferred brand name medicines are listed to help identify products that are clinically appropriate and cost-effective. Generics listed in therapeutic categories are for representation purposes only and not meant to be all-inclusive. This list represents brand products in CAPS and generic products in *lowercase-italics*.

## PLAN PARTICIPANT

Your benefit plan provides you with a prescription benefit program. Ask your doctor to consider prescribing, when medically appropriate, a preferred medicine from this list. Take this list along when you, or a covered family member, sees a doctor.

Please note:

- Your specific prescription benefit plan design may not cover certain categories, regardless of their appearance in this document.
- Unless specifically indicated, drug list products will include all dosage forms.

## HEALTHCARE PROVIDER

Your patient is covered under a prescription benefit plan. As a way to help manage healthcare costs, authorize generic substitution whenever possible. If you believe a brand name product is necessary, consider prescribing a brand name on this list.

Please note:

- Generics should be considered the first line of prescribing.
- This drug list is not inclusive nor does it guarantee coverage, but represents a summary of prescription coverage.
- The plan participant's specific prescription benefit plan may have a different co-pay<sup>1</sup> for specific products on the list.
- Unless specifically indicated, drug list products will include all dosage forms.

## ANTI-INFECTIVES

### ANTIBACTERIALS

#### § CEPHALOSPORINS

*cefactor*  
*cefdinir*  
*cephalexin*

#### § ERYTHROMYCINS / MACROLIDES

*azithromycin*  
*clarithromycin*  
*clarithromycin ext-rel*  
*erythromycins*

#### § FLUOROQUINOLONES

*ciprofloxacin ext-rel*  
*ciprofloxacin tablet*  
AVELOX  
CIPRO SUSPENSION  
LEVAQUIN

#### § PENICILLINS

*amoxicillin*  
*amoxicillin-clavulanate*  
*dicloxacillin*  
*penicillin VK*

#### § TETRACYCLINES

*doxycycline hyclate*  
*minocycline*  
*tetracycline*

#### § MISCELLANEOUS

*metronidazole*  
*sulfamethoxazole- trimethoprim*

#### § ANTIFUNGALS

*fluconazole*  
*itraconazole*  
*terbinafine tablet*

## ANTIVIRALS

### § HERPES AGENTS

*acyclovir*  
VALTREX

### § INFLUENZA AGENTS

TAMIFLU

## CARDIOVASCULAR

### § ACE INHIBITORS

*fosinopril*  
*lisinopril*  
*quinapril*  
*ramipril*

### § ACE INHIBITOR / DIURETIC COMBINATIONS

*fosinopril-hydrochlorothiazide*  
*lisinopril-hydrochlorothiazide*  
*quinapril-hydrochlorothiazide*

### ACE INHIBITOR / CALCIUM CHANNEL BLOCKERS

TARKA

### ANGIOTENSIN II RECEPTOR ANTAGONISTS / COMBINATIONS

ATACAND<sup>2</sup> / ATACAND HCT  
AVAPRO / AVALIDE  
BENICAR / BENICAR HCT  
MICARDIS / MICARDIS HCT

### ANTILIPEMICS

#### § BILE ACID RESINS

*cholestyramine*  
WELCHOL

### CHOLESTEROL ABSORPTION INHIBITORS

ZETIA

### § FIBRATES

*fenofibrate*  
TRICOR

### § HMG-CoA REDUCTASE INHIBITORS

*pravastatin*  
*simvastatin*  
CRESTOR  
LIPITOR

### NIACINS / COMBINATIONS

ADVICOR  
NIASPAN  
SIMCOR

### § BETA-BLOCKERS

*atenolol*  
*carvedilol*  
*metoprolol*  
*metoprolol succinate ext-rel*  
*nadolol*  
*propranolol*  
COREG CR

### § CALCIUM CHANNEL BLOCKERS

*amlodipine*  
*diltiazem ext-rel*  
*nifedipine ext-rel*  
*verapamil ext-rel*

### CALCIUM CHANNEL BLOCKER / ANTILIPEMIC COMBINATIONS

CADUET

### § DIGITALIS GLYCOSIDES

digoxin

## § DIURETICS

*furosemide*  
*hydrochlorothiazide*  
*metolazone*  
*spironolactone-hydrochlorothiazide*  
*toremide*  
*triamterene-hydrochlorothiazide*

## CENTRAL NERVOUS SYSTEM

### ANTIDEPRESSANTS

#### § MISCELLANEOUS AGENTS

*bupropion*  
*bupropion ext-rel*  
*mirtazapine*

### SEROTONIN NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIs)<sup>3</sup>

*venlafaxine*  
CYMBALTA  
EFFEXOR XR

### § HYPNOTICS, NON-BENZODIAZEPINES

*zolpidem*  
AMBIEN CR  
LUNESTA

## MIGRAINE

### SELECTIVE SEROTONIN AGONISTS

IMITREX  
MAXALT  
ZOMIG

### MULTIPLE SCLEROSIS AGENTS

COPAXONE  
REBIF

## ENDOCRINE AND METABOLIC

### ANDROGENS

ANDRODERM  
ANDROGEL

### ANTIDIABETICS

#### § BIGUANIDES

metformin  
metformin ext-rel

### INCRETIN MIMETIC AGENTS

BYETTA

### INSULINS

APIDRA  
HUMALOG  
HUMULIN  
LANTUS  
LEVEMIR  
NOVOLIN  
NOVOLOG

### INSULIN SENSITIZERS

ACTOS

### INSULIN SENSITIZER / BIGUANIDE

COMBINATIONS  
ACTOPLUS MET

### INSULIN SENSITIZER / SULFONYLUREA

COMBINATIONS  
DUETACT

### MEGLITINIDES

PRANDIN

#### § SULFONYLUREAS

glimepiride  
glipizide  
glipizide ext-rel

#### § SULFONYLUREA / BIGUANIDE

COMBINATIONS  
glipizide-metformin  
glyburide-metformin

### SUPPLIES

ACCU-CHEK STRIPS AND KITS  
BD INSULIN SYRINGES AND NEEDLES  
ONETOUCH STRIPS AND KITS

## CALCIUM REGULATORS

### § BISPHOSPHONATES

alendronate  
ACTONEL

### § CALCITONINS

fortical

### PARTHYROID HORMONES

FORTEO

## CONTRACEPTIVES

### § MONOPHASIC

ethinyl estradiol-drospirenone  
YAZ

### § TRIPHASIC

ORTHO TRI-CYCLON LO

### § EXTENDED CYCLE

ethinyl estradiol-levonorgestrel  
SEASONIQUE

### CONTINUOUS

LYBREL

### TRANSDERMAL

ORTHO EVRA

### VAGINAL

NUVARING

## ESTROGENS

### § ORAL

estradiol  
estropipate  
ENJUVIA  
PREMARIN

### § TRANSDERMAL, ESTROGENS

estradiol  
CLIMARA  
ESTRADERM  
VIVELLE-DOT

### ORAL ESTROGEN / PROGESTINS

estradiol-norethindrone  
PREMPHASE  
PREMPRO

### § PROGESTINS

medroxyprogesterone  
PROMETRIUM

### SELECTIVE ESTROGEN RECEPTOR MODULATORS

EVISTA

### § THYROID SUPPLEMENTS

levothyroxine  
SYNTHROID

## GASTROINTESTINAL

### § H<sub>2</sub> RECEPTOR ANTAGONISTS

ranitidine

### § PROTON PUMP INHIBITORS

omeprazole  
NEXIUM  
PREVACID  
PRILOSEC

## GENITOURINARY

### § BENIGN PROSTATIC HYPERPLASIA

doxazosin  
finasteride  
terazosin  
AVODART  
FLOMAX

### § URINARY ANTISPASMODICS

oxybutynin  
oxybutynin ext-rel  
DETROL  
DETROL LA  
ENABLEX  
OXYTROL  
VESICARE

## HEMATOLOGIC

### § ANTICOAGULANTS

warfarin  
COUMADIN

## RESPIRATORY

### ANAPHYLAXIS TREATMENT AGENTS

EPIPEN  
EPIPEN JR

### § ANTICHOLINERGICS

SPIRIVA

### ANTICHOLINERGIC / BETA AGONISTS

ipratropium-albuterol  
inhalation solution  
COMBIVENT

### § ANTIHISTAMINES, NONSEDATING

fexofenadine

### § ANTIHISTAMINE / DECONGESTANTS

ALLEGRA-D<sup>4</sup>

### § BETA AGONISTS

### § SHORT ACTING

albuterol  
PROAIR HFA  
PROVENTIL HFA  
XOPENEX  
XOPENEX HFA

## LONG ACTING

FORADIL  
SEREVENT

### LEUKOTRIENE RECEPTOR ANTAGONISTS

SINGULAIR

### NASAL ANTIHISTAMINES

ASTELIN

### § NASAL STEROIDS

fluticasone  
NASACORT AQ  
NASONEX  
RHINOCORT AQUA  
VERAMYST

### STEROID / BETA AGONISTS

ADVAIR  
SYMBICORT

### STEROID INHALANTS

ASMANEX  
FLOVENT  
PULMICORT  
QVAR

## TOPICAL

## DERMATOLOGY

### § ACNE

erythromycin-benzoyl peroxide  
tretinoin  
BENZACLIN  
DIFFERIN  
DUAC CS  
RETIN-A MICRO  
ZIANA

## OPHTHALMIC

### § BETA-BLOCKERS, NONSELECTIVE

timolol maleate solution  
BETIMOL

### BETA-BLOCKERS, SELECTIVE

BETOPTIC S

### PROSTAGLANDINS

LUMIGAN  
TRAVATAN  
XALATAN

### § SYMPATHOMIMETICS

brimonidine 0.2%  
ALPHAGAN P



## Preferred Drug List - IBN

1/1/2009

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- § Generics are available in this class and should be considered as the first line of prescribing.
- (1) Co-payment or co-pay means the amount a plan participant is required to pay for a prescription in accordance with a Plan, which may be a deductible, a percentage of the prescription price, a fixed amount or other charge, with the balance, if any, paid by a Plan.
- (2) Atacand should be reserved for patients who meet CHARM (Candesartan in Heart Failure - Assessment of Reduction in Mortality and Morbidity) trial criteria.
- (3) Indicates the proposed mechanism of action, based on the American Psychiatric Association Summary of Treatment Recommendations.
- (4) Higher co-payments may apply depending on the plan participant's specific prescription benefit plan.

The Data Rx Drug List contains prescription brand name medicines that are registered or trademarks of pharmaceutical manufacturers. Listed products are for informational purposes only and are not intended to replace the clinical judgment of the prescriber.

### Co-Pay:

Tier 1 (generics): \$5

Tier 2 (preferred brand): \$20

Tier 3 (all other drugs): \$40

## QUICK REFERENCE PREFERRED DRUG LIST

### A

ACCU-CHEK STRIPS AND KITS  
 ACTONEL  
 ACTOPLUS MET  
 ACTOS  
*acyclovir*  
 ADVAIR  
 ADVICOR  
*albuterol*  
*alendronate*  
 ALLEGRA-D<sup>4</sup>  
 ALPHAGAN P  
*amlodipine*  
*amoxicillin*  
*amoxicillin-clavulanate*  
 ANDRODERM  
 ANDROGEL  
 APIDRA  
 ASMANEX  
 ASTELIN  
 ATACAND<sup>2</sup>  
 ATACAND HCT  
*atenolol*  
 AVALIDE  
 AVAPRO  
 AVELOX  
 AVODART  
*azithromycin*

### B

BD INSULIN SYRINGES AND NEEDLES  
 BENICAR  
 BENICAR HCT  
 BENZACLIN  
 BETIMOL  
 BETOPTIC S  
*brimonidine 0.2%*  
*bupropion*  
*bupropion ext-rel*  
 BYETTA

### C

CADUET  
*carvedilol*  
*cefaclor*  
*cefdinir*  
*cephalexin*  
 CIPRO SUSPENSION  
*ciprofloxacin ext-rel*  
*ciprofloxacin tablet*  
*cialopram*  
*clarithromycin*  
*clarithromycin ext-rel*  
 CLIMARA  
 COMBIVENT  
 COPAXONE  
 COREG CR  
 COUMADIN  
 CRESTOR  
 CYMBALTA

### D

DETROL  
 DETROL LA  
*dicloxacillin*  
 DIFFERIN  
*digoxin*  
*diltiazem ext-rel*  
*doxazosin*  
*doxycycline hyclate*  
 DUAC CS  
 DUETACT

### E

EFFEXOR XR  
 ENABLEX  
 ENJUVA  
 EPIPEN  
 EPIPEN JR  
*erythromycin-benzoyl peroxide*  
*erythromycins*  
 ESTRADERM  
*estradiol*  
*estradiol-norethindrone*  
*estropipate*  
*ethinyl estradiol-drospirenone*  
*estropipate*  
*ethinyl estradiol-levonorgestrel*  
 EVISTA

### F

*fenofibrate*  
*fexofenadine*  
*finasteride*  
 FLOMAX  
 FLOVENT  
*fluconazole*  
*fluoxetine*  
*fluticasone*  
 FORADIL  
 FORTEO  
*fortical*  
*fosinopril*  
*fosinopril-hydrochlorothiazide*  
*furosemide*

### G

*glimepiride*  
*glipizide*  
*glipizide ext-rel*  
*glipizide-metformin*  
*glyburide metformin*

### H

HUMALOG  
 HUMULIN  
*hydrochlorothiazide*

### I

IMITREX  
*ipratropium-albuterol*  
*inhalation solution*  
 itraconazole

### L

LANTUS  
 LEVAQUIN  
 LEVEMIR  
*levothyroxine*  
 LEXAPRO  
 LIPITOR  
*lisinopril*  
*lisinopril-hydrochlorothiazide*  
 LUMIGAN  
 LUNESTA  
 LYBREL

### M

MAXALT  
*medroxyprogesterone*  
*metformin*  
*metformin ext-rel*  
*metolazone*  
*metoprolol*  
*metoprolol succinate ext-rel*  
*metronidazole*  
 MICARDIS  
 MICARDIS HCT  
*minocycline*  
*mirtazapine*

### N

*nadolol*  
 NASACORT AQ  
 NASONEX  
 NEXIUM  
 NIASPAN  
*nifedipine ext-rel*  
 NOVOLIN  
 NOVOLOG  
 NUVARING

### O

*omeprazole*  
 ONETOUCH STRIPS AND KITS  
 ORTHO EVRA  
 ORTHO TRI-CYCLEN LO  
*oxybutynin*  
*oxybutynin ext-rel*  
 OXYTROL

### P

*paroxetine*  
*paroxetine ext-rel*  
*penicillin VK*  
 PRANDIN  
*pravastatin*  
 PREMARIN  
 PREMPHASE  
 PREMPRO  
 PREVACID  
 PRILOSEC  
 PROAIR HFA  
 PROMETRIUM  
*propranolol*  
 PROVENTIL HFA  
 PULMICORT

### Q

*quinapril*  
*quinapril-hydrochlorothiazide*  
 QVAR

### R

*ramipril*  
*ranitidine*  
 REBIF  
 RETIN-A MICRO  
 RHINOCORT AQUA

### S

SEASONIQUE  
 SEREVENT  
*sertraline*  
 SIMCOR  
*simvastatin*  
 SINGULAIR  
 SPIRIVA  
*spironolactone-hydrochlorothiazide*  
*sulfamethoxazole-trimethoprim*  
 SYMBICORT  
 SYNTHROID

### T

TAMIFLU  
 TARKA  
*terazosin*  
*terbinafine tablet*  
*tetracycline*  
*timolol maleate solution*  
*torseamide*  
 TRAVATAN  
*tretinoin*  
*triamterene-hydrochlorothiazide*  
 TRICOR

### V

VALTRESX  
*venlafaxine*  
 VERAMYST  
*verapamil ext-rel*  
 VESICARE  
 VIVELLE-DOT

### W

*warfarin*  
 WELCHOL

### X

XALATAN  
 XOPENEX  
 XOPENEX HFA

### Y

YAZ

### Z

ZETIA  
 ZIANA  
*zolpidem*  
 ZOMIG