

## Commercial Pocket Formulary Comparison

2009

NOTE: Generically available drugs are bolded and highlighted in yellow.  
\*L = Liquid, S = Solid

Avg. cost / mo. (in \$)	Blue Cross	Blue Shield	Health Net	PacificCare
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### ANTIBIOTICS (NOTE: LIQUID AND SOLID FORMS AVAILABLE FOR MOST PRODUCTS LISTED.)

1st Line	L/S* 10 day course ( or approved duration)					
<b>Amoxicillin, Bactrim generic, Doxycycline, Erythromycin, Cephalexin</b>			<b>G</b>	<b>F</b>	<b>F</b>	<b>F</b>
<b>2nd Line</b>						
Erythromycin/Sulfisoxazole (Pediazole)			F/QL	F	F	F
Ciprofloxacin (Cipro)			F/QL	F	F	F
Amox/Clavulanate (Augmentin)			F/QL	F	F	F
Cefuroxime (Ceftin)			F/QL	F	F	F
Azithromycin (Zithromax)			F/QL	F	F	F
Clarithromycin (Biaxin)			F/QL	F	F	F
Clarithromycin (Biaxin XL)			G/QL	F	F	F
Cefprozil (Cefzil)			F/QL	G	F	NF
Cefdinir (Omnicef)			F/QL	F	F	F
Amox/Clavulanate (Augmentin ES)			F/QL	F	F	F
Augmentin XR	111		F	F	F	F
Moxifloxacin (Avelox)	228		NF/QL	F	F	NF
Levofloxacin (Levaquin)	253		F/QL	NF	NF	F

### CARDIOVASCULAR AGENTS

#### 1st Line Antihypertensives: Diuretics and Beta Blockers

ACE Inhibitors / Angiotensin Receptor Blockers						
Captopril (Capoten)			G	F	F	F
Lisinopril (Prinivil, Zestril)			G	F	F	F
Benazepril (Lotensin)			F	F	F	F
Fosinopril (Monopril)			F	F	F	F
Quinapril (Accupril)			F	G	F	F
Moexipril (Univasc)			F	G	F	F
Trandolapril (Mavik)			F	G	NF	NF
Ramipril (Altace) Cap			F	G	F	F
Telmisartan (Micardis, Micardis HCT)	68		NF	NPA	NPA	FPA
Olsmesartan (Benicar) / HCT	78		NF	NPA	F	FPA
Valsartan (Diovan) / HCT	117		F	FPA	F	FPA
Irbesartan (Avapro)	76		NF	FPA	NPA	NPA
Candesartan (Atacand)	65		NF	NPA	NPA	NPA
Losartan (Cozaar)	66		F	NPA	NPA	NPA
Benazepril / Amlodipine (Lotrel)			F	G	F	F
Beta Blockers						
Atenolol (Tenormin)			F	F	F	F
Metoprolol (Lopressor)			F	F	F	F
Metoprolol XL (Toprol XL)			F	F	F	F
Carvedilol (Coreg)			F	F	F	F
Calcium Channel Blockers						
Verapamil SR (Calan SR)			F	F	F	F
Diltiazem Long Acting			F	F	F	F
Nifedipine LA			F	F	F	F
Felodipine (Plendil)			F	F	F	F
Amlodipine/olsmesartan (Azor)	90		NF/QL	NPA	FPA	FPA
Amlodipine/valsartan (Exforge)	93		F/QL	FPA	FPA	NF
Nisoldipine (Sular) 8.5,17,25.5,34mg	77		F	F	F	F
Amlodipine (Norvasc)			F	G	F	F

### Please Note

This abbreviated drug guide is intended to assist prescribers in the selection of cost-effective drug therapy. Prices are based on the average wholesale price (AWP) or maximum allowable cost (MAC) per weighted average 30-day supply or per course of antibiotics. For antibiotics, the first price listed is for liquid dosage forms and the second price is for solid dosage forms. Medications available as generics are listed in bold and highlighted in yellow. Some covered medications may require prior authorization before they will be covered by the plan. Consider using over-the-counter (OTC) products as first-line agents when appropriate.

### Health Plan Coverages

(F)	indicates a formulary medication
(FPA)	indicates a formulary medication that requires prior authorization, step therapy or has quantity or age limits
(NPA)	indicates a non-formulary medication that requires prior authorization, step therapy or has quantity or age limits
(NF)	indicates a non-formulary medication
(B) (G)	indicates coverage of brand-drug or generic-drug only
(QL)	quantity limits apply

For many health plans, if a generic equivalent is available, the brand name drug may not be a covered benefit. The generic equivalent will be dispensed.

You may need to consult with the health plan's formulary for additional information. The information listed is accurate as of the date of printing of this Pocket Guide. This information has been obtained from the health plan or their websites.

### Health Plan Prior Authorization Telephone Numbers and Health Plan Internet Addresses

Anthem Blue Cross <a href="http://www.anthem.com/ca">www.anthem.com/ca</a>	1-888-831-2242 1-888-831-2243(fax)
Blue Shield <a href="http://www.blueshieldca.com">www.blueshieldca.com</a>	1-800-535-9481 1-888-697-8122 (Fax)
Health Net <a href="http://www.healthnet.com">www.healthnet.com</a>	1-800-548-5524 1-818-676-8086 (Fax)
PacificCare <a href="http://www.pacificcare.com/california/providers">www.pacificcare.com/california/providers</a>	1-800-711-4555 1-800-527-0531 (Fax)

Not all benefit plans include outpatient prescription drug benefits. For specific coverage and limitations please refer to local plan specifications and benefit design. The most up-to-date listings of the formularies can be found on-line.

updated: January 2009



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### PAIN MANAGEMENT: NSAIDS

#### OTC: Advil, Motrin, Aleve, Actron, & Orudis KT

<b>Ibuprofen (Motrin), Salsalate (Disalcid), Naproxen (Naprosyn, Anaprox), Sulindac (Clinoril)</b>			G	F	F	F
<b>Nabumetone (Relafen)</b>			G	G	F	F
<b>Oxaprozin (Daypro)</b>			G	G	F	F

### RESPIRATORY AGENTS

Albuterol (ProAir HFA/Proventil HFA)	45		F/QL	F	NF/F	NF
Metaproterenol (Alupent)			G/QL	F	F	F
Pirbuterol (Maxair)	116		NF/QL	F	F	F
Formoterol (Foradil)	149		F/QL	F	F	F
Salmeterol (Serevent Diskus)	137		F/QL	F	F	NF
Ipratropium (Atrovent)	95		F/QL	F	F	F
Ipratropium/Albuterol (Combivent)	107		F/QL	NF	NF	F
Budesonide-Fomoterol (Symbicort)	164		F/QL	F	NF	NF
Tiotropium (Spiriva)	150		F/QL	F	F	F
Beclomethasone (QVAR)	76		F/QL	F	F	F
Mometasone (Asmanex)	130		F/QL	F	F	F
Triamcinolone (Azmecort)	145		F/QL	NF	F	NF
Fluticasone (Flovent)	125		F/QL	F	F	NF
Flunisolide (Aerobid / M)	85		F/QL	NF	NF	NF
Budesonide (Pulmicort)	100		F/QL	F	F	F
Salmeterol / Fluticasone (Advair)	198		F/QL	F	F	NF
Cromolyn (Intal)	83		G/QL	F	F	F
Zafirlukast (Accolate)	90		NPA	NF	FPA	NPA
Montelukast (Singulair)	112		FPA/QL	F	FPA	FPA

### Antiallergy Medications

1st Line OTC: Claritin or Claritin D, Alavert, Zyrtec, Nolahist, Chlor-Trimeton, Dimetapp, Tavist-ND & Sudafed						
Azelastine (Astelin Nasal Spray)	95		F/QL	F	F	F
<b>Fexofenadine (Allegra)</b>			FPA/QL	G	NPA	NPA
Desloratadine (Clarinet)	77		NPA/QL	NPA	NPA	NF

### Nasal Sprays

#### OTC: Nasal crom

<b>Flunisolide (Nasalide)</b>			F/QL	F	NF	F
<b>Fluticasone (Flonase)</b>			F/QL	F	F	F
<b>Flunisolide (Nasarel)</b>			F/QL	F	NF	F
Budesonide (Rhinocort Aqua)	102		NPA/QL	NF	NF	NF
Beclomethasone (Beconase AQ)	150		NPA/QL	NF	NF	NF
Triamcinolone (Nasacort AQ)	90		NPA/QL	NF	NF	NF
Mometasone (Nasonex)	90		F/QL	F	F	F

NOTE: Generically available drugs are bolded and highlighted in yellow. ** Tricor is a brand product avail. In 48mg & 145mg tbs, but different dosage strengths of generic fenofibrate (cap-65mg, 134mg, 200mg tab-54mg, 160mg) are available.	Avg. cost / mo. (in \$)	Blue Cross	Blue Shield	Health Net	PacificCare
<b>Lipid Lowering Agents</b>					
Lovastatin (Mevacor)		G/QL	G	F	F
Pravastatin (Pravachol)		G/QL	F	F	F
Simvastatin (Zocor)		G	F	F	F
Ezetimibe (Zetia)	102	NPA/QL	NPA	NF	NF
Fluvastatin (Lescol / Lescol XL)		NF/QL	NF	NF	NF
Rosuvastatin (Crestor)	114	FPA/QL	T3	FPA	F
Simvastatin/Ezetimibe (Vytorin)	104	NPA/QL	FPA	FPA	F
Niacin/simvastatin (Simcor)	98	NF/QL	F	F	NPA
Lovastatin / Niacin (Advicor)	113	NF	F	F	F
Atorvastatin (Lipitor)	131	F/QL	NPA	NPA	F
Niacin ER (Niaspan)	98	F	F	F	F
Gemfibrozil (Lipid)		G	F	F	F
Fenofibrate (Tricor)**	124	F	F	F	FPA
Cholestyramine (Questran)		G	F	F	F
<b>Blood Modifiers</b>					
Ticlopidine (Ticlid)		G	F	F	NF
Clopidogrel (Plavix)	149	F/QL	F	F	F
<b>CENTRAL NERVOUS SYSTEM AGENTS</b>					
<b>Antidepressants</b>					
Trazodone (Desyrel)		F	F	F	F
Fluoxetine (Prozac)		G/QL	F	F	F
Paroxetine (Paxil)		F/QL	F	F	F
Citalopram (Celexa)		F/QL	G	F	F
Bupropion (Wellbutrin)		F	F	F	F
Bupropion (Wellbutrin SR)		F	F	F	F
Escitalopram (Lexapro)	92	F	NPA	F	F
Paroxetine (Paxil CR)		F	F	F	F
Sertraline (Zoloft)		F	F	F	F
Bupropion (Wellbutrin XL)		F	F	F	F
Venlafaxine (Effexor XR)	133	F	F	F	F
Venlafaxine (Effexor)		F	G	F	F
Duloxetine (Cymbalta)	135	NPA/QL	NF	NF/QL	NF
<b>Antimigraine: QL = Quantity Limits</b>					
Floricet		G/QL	F	F	F
Midrin		G	F	F	F
Ergotamine/Caffeine (Cafergot)		F	F	F	F
Migranal Nasal Spray (#8)	290	NF/QL	F/QL	NF/QL	NF
Zolmitriptan (Zomig - pkg size #6)	134	F/QL	NF	NF/QL	QL
Rizatriptan (Maxalt - pkg size #9)	207	F/QL	F/QL	NF/QL	QL
Sumatriptan (Imitrex - pkg size #9)		F/QL	F/QL	F/QL	NF
Almotriptan (Axert - pkg size #6)	125	NF/QL	NF	NF/QL	NF
Eletriptan (Relpax - pkg size #6)	127	NF/QL	NF	NF/QL	QL
Naratriptan (Amerge - pkg size #9)	267	NF/QL	F/QL	F/QL	NF
<b>ADHD Medications</b>					
Amphetamine salt combo (Adderall)		G	F	F	FPA
Dextroamphetamine (Dexedrine)		G	F	F	FPA
Methylphenidate (Ritalin)		G	F	F	FPA
Methylphenidate SR (Ritalin SR)		F	F	F	FPA
Amphetamine salt combo SR (Adderall XR)	164	F	F	NF	FPA
Methylphenidate ER (Metadate ER)		F	F	F	NPA
Methylphenidate ER (Metadate CD)	108	NPA	NF	NF	NPA
Methylphenidate ER (Concerta)	135	FPA	F	F/QL	NPA
Atomoxetine (Strattera)	152	F	NPA	NF	NPA

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<b>DIABETIC AGENTS</b>					
<b>Oral Hypoglycemics</b>					
Glipizide (Glucotrol)		F	F	F	F
Glyburide (Diabeta, Micronase)		F	F	F	F
Glipizide LA ( Glucotrol XL)		F	F	F	F
Metformin (Glucophage)		F	F	F	F
Metformin (Glucophage XR)		F	G	F	F
Metformin/Glyburide (Glucovance)		F	G	F	NF
Glipizide / Metformin (Metaglip)		F	G	F	NF
Acarbose (Precose)		F	F	F	NF
Nateglinide (Starlix)	145	F	NF	NF	NF
Repaglinide (Prandin)	160	F	NF	F	NF
Metformin/Rosiglitazone (Avandamet)	138	F/QL	FPA	F	F
Sitagliptin (Januvia)	182	F/QL	FPA	F	F
Sitagliptin/metformin (Janumet)	182	F/QL	FPA	F	F
Rosiglitazone (Avandia)	118	F/QL	FPA	F	F
Pioglitazone (Actos)	220	F/QL	FPA	F	F
Pioglitazone/Metformin (ActoPlus Met)	219	F/QL	FPA	F	F
Rosiglitazone/Glimepiride (Avandaryl)	131	F/QL	NPA	F	F
<b>Insulins - Cost per 10ml vial</b>					
Humulin R or N	50	F	F	F	NF
Novolin R or N	50	F	NF	NF	F
Lantus	97	F	F	F	F
Humalog	103	F	F	F	NF
Novolog	104	F	NF	NF	F
<b>GASTROINTESTINAL AGENTS - ANTIULCER / GERD</b>					
<b>OTC: Zantac 75, Zantac 150, Pepcid AC, Prilosec OTC</b>					
Ranitidine or Cimetidine		F	F	F	F
Omeprazole (Prilosec)		G/QL	G	F/QL	F
Pantoprazole (Protonix)		G	F	NF/QL	F
Rabeprazole (Aciphex)	179	NPA/QL	F	F/QL	F
Esomeprazole (Nexium)	173	F	NPA	NPA	NPA
Lansoprazole (Prevacid)	171	F/QL	NPA	NPA	NPA
<b>GENITOURINARY AGENTS</b>					
Oxybutynin (Ditropan)		F	F	F	F
Darifenacin (Enablex)	127	NF	FPA	NF	F
Oxybutynin (Ditropan XL)		G	G	NF	NF
Oxybutynin (Oxytrol)	123	NF	FPA	NF	F
Tolterodine (Detrol)	145	F	NPA	F	NF
Tolterodine (Detrol LA)	126	F	NPA	F	NF
Solifenacin (VesiCare)	138	F	NPA	NF	F
Trospium (Sanctura)	137	NF	NPA	NF	NF
<b>OB-GYN AGENTS</b>					
<b>Oral Contraceptives (28 days)</b>					
<b>Monophasic</b>					
Ortho-Novum 1/50		G	G	G	G
Demulen 1/50		G	F	G	G
Ovcon 50	73	NF	F	NF	NF
Ovral-28 or generic		G	G	G	G
Ortho-Novum 1/35		G	G	G	G
Brevicon		G	G	G	G
Modicon		G	G	G	G
Demulen 1/35		G	G	G	G
Ovcon 35 (non-chew tabs)	66	NF	F	NF	NF
Ortho-Cyclen		G	G	G	G
Desogen		NF	F	G	G

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<b>Oral Contraceptives Continued - Monophasic</b>					
Ortho-Cept		G	G	G	G
Lo/Ovral		G	F	G	G
Loestrin 1.5/30 / Loestrin FE		G	F	G	NF
Levlen-28		G	G	G	G
Nordette		G	F	G	G
Seasonale		G	G	NF	NF
Alesse or generic		G	G	G	G
Levite		NF	G	G	G
Loestrin 1/20 / Loestrin FE		G	F	G	NF
Yasmin		F	F	G	F
Yaz	58	F	F	F	F
<b>Biphasic</b>					
Mircette		G	F	G	G
Necon 10/11		F	G	G	G
<b>Triphasic</b>					
Tri-Norinyl		G	F	G	NF
Triphasil or generic		G	G	G	G
Tri-Levlen or generic		G	G	G	G
Cyclessa		F	F	G	G
Estrostep	76	NF	NF	NF	NF
Ortho Tri-Cyclen		G	G	G	G
Ortho Tri-Cyclen Lo	58	F	NF	F	NF
Ortho-Novum 7/7/7		G	G	G	G
<b>Patch or Ring</b>					
Ortho Evra	60	F/QL	NF	F	NF
Nuvaring	56	NF/QL	F	F	F
<b>Progestin Only</b>					
Nor-Q-D		G	F	G	G
Ortho Micronor		G	G	G	F
<b>Emergency Contraception</b>					
Plan B	50	FPA/QL	F	F	F
<b>Estrogen / Bone Modifiers</b>					
Estradiol (Estrace)		F/QL	F	F	F
Esterified Estrogens (Menest)	25	F	F	F	F
Conjugated Estrogen (Cenestin)	53	F	NF	NF	F
Conjugated Estrogens (Premarin)	49	F/QL	F	F	F
Prempro	40	F	F	F	F
Premphase	58	F	F	F	F
Prefert	60	F	NF	NF	NF
FemHRT	65	F	NF	NF	NF
Activella	67	F	F	NF	F
Climara		G/QL	F	F	G
Climara Pro	60	F/QL	F	F	F
Alora	50	F/QL	NF	NF	F
Vivelle Dot	52	F/QL	F	F	F
Estraderm	55	F/QL	NF	F	F
Alendronate (Fosamax) 5,10,70mg		F/QL	F	F	F
Risedronate (Actonel) 5,35,150mg	92	F/QL	NPA	NPA	F
Ibandronate (Boniva) 2.5,150mg	110	NF/QL	NPA	NPA	F
Calcitonin Salmon (Miacalcin NS)		G/QL	NPA	F	F
Raloxifene (Evista)	114	F/QL	F	F	F