

MercyCare Insurance Company Drug Formulary

www.mercycarehealthplans.com (UPDATED 8/1/10)

Please download this document monthly as it is updated monthly. This document can be found at the MercyCare Health Plans website. This is a summary by category of formulary alternatives and MercyCare reserves the right to change the formulary at any time. When an acceptable generic is available the generic product is considered the covered, formulary product – the brand is considered non-formulary. (Prior Authorization FAX # 608-758-7726 Customer Service 800-895-2421)

TARGETED TABLET SPLITTING PROGRAM

Voluntary program offering reduced out of pocket expense for targeted medications. If members choose to split and take 1/2 tablet daily of a target medication #15 per 30 days supply, their coinsurance will be reduced or their copay will be reduced by one-half. (e.g. \$20 reduced to \$10).

Abilify, Actos, Benicar, Lexapro, Lipitor, Seroquel, Zyprexa

Mail Order Program

Mercy Health Mall Pharmacy is our mail order pharmacy - toll free (877) 597-6627. The mail order program allows members to receive a 3-month supply at a 2-month copay.

Mail order service is intended for maintenance medications. Not all medication are good candidates for mail order, such as antibiotics and medications that require special handling like refrigeration.

Mail order co-pay reductions cannot be combined and are not additive with other co-pay reduction programs, such as pill splitting. Members can benefit from the incentive that reduces their co-pay the greatest.

Mercy Care PRIOR AUTHORIZATION MEDICATIONS & SPECIALTY PHARMACY MEDICATIONS

PA indicates that prior authorization criteria apply and require a prior authorization form to be faxed to 608-758-7726.

If a PA request is denied or not obtained; members may pay 100% of the cost. If a PA-2 drug is approved, the member pays Tier-2. If a PA-3 drug is approved, the open formulary member obtains coverage at Tier-3.

SP indicates a Specialty Pharmacy Medication and may be mailed or obtained only from a designated specialty pharmacy.

Please call Customer Service (800) 895-2421 for a copy of the PA form, a list of approved Specialty Pharmacies, or any other questions.

Accutane (PA-2)	Fentanyl Transdermal (PA-1)	Pristiq (PA-3)
Advair (PA-3)	Forteo (PA-2, SP)	Procrit (PA-2, SP)
Ambien CR (PA2)	Gleevec (PA-2, SP)	Prograf (SP)
Amitiza (PA-3)	Humira (PA-2, SP)	Promacta (PA-2)
Ampyra (PA-3, SP)	Infergen (PA-2, SP)	Protopic (PA-2)
Anzemet (PA-3, SP)	Intron-A (PA-2, SP)	Rebetron (PA-2, SP)
Apokyn (PA-2) QL-90	Iressa (PA-2, SP)	Rebif (PA-2, SP)
Avinza (PA-2)	Itraconazole (PA-1)	Regranex (PA-2)
Banzel PA-2	Kadian (PA-2)	Relistor (PA-3)
Betaseron (PA-2, SP)	Kineret (PA-2, SP),	Remicade (PA-2, SP)
Byetta (PA-2)	Leukine (PA-2, SP)	Restasis (PA-2)
Celebrex (PA-2)	Lupron (PA-2, SP)	Rilutek (PA-2, SP)
Cellcept (SP)	Lotronex (PA-3)	Roferon-A (PA-2,
Cimzia (PA-2, SP)	Lyrica (PA-3)	Simponi (PA-3, SP)
Cymbalta (PA-3)	Neulasta (PA-2, SP)	Tazorac (PA-2)
Effexor XR (PA-3)	Neupogen (PA-2, SP)	Tarceva (PA-2, SP)
Embeda PA-2	Noxafil PA-2	Temodar (PA-2, SP)
Enbrel (PA-2, SP)	Nplate (PA-2)	Tikosyn (PA-2)
Entocort EC (PA-2)	Oxycodone SR (PA-3)	Tracleer (PA-2, SP)
Epogen (PA-2, SP)	OxyContin (PA-3)	Tyvaso PA-2
Exjade (PA-3)	Pegasys (PA-2, SP)	Vimpat PA-3
Extavia (PA-2, SP)	Raptiva (PA-2, SP)	Xolair (PA-2, SP)
Famvir (PA-2)		

Gerd Step Therapy Management

Intermittent Gerd Symptoms

Patients with intermittent symptoms can be managed with ranitidine (**zero Co-pay**) Taking non-prescription antacids such as: Gaviscon, Riopan, AlternGel, or Tums. Liquid antacids generally act quicker and have a greater acid neutralizing effect. It is best to take antacids 1 hour after a meal.

Non-Pharmacologic Lifestyle Modifications

Prohibiting late evening snacks and alcohol intake
Elevation of the head of the bed
Sleeping on left lateral side
Avoid spicy foods, chocolate, onions, citrus Juices, and fatty or fried foods
Smoking cessation
Weight loss

Other Treatment Options

For patients who are having breakthrough Symptoms at night, intermittent use of generic Ranitidine at bedtime (**zero co-pay**)

Patients not responding to the normal dose of Prilosec OTC can be increased to twice a day dosing rather than switching to another PPI

KEY: Underline = best economic choice

Tier \$0 = \$0 copay, formulary OTC agent.

Tier 1 = "**generic drug**" = bolded, lowercase indicates Tier-1 copay

Tier 2 = "Brand Drug" = Not bolded, uppercase indicates Tier-2 copay

AL=Age Limit; PA required > 40 years

(PA) = Prior Authorization required for coverage

QL = Quantity Limits (PA required for greater quantities)

QL-1 = 1 inhalers/Copay

NTI – Narrow therapeutic index drug. Brand covered at Tier-2.

Generic Covered at Tier-1

ST- Step Therapy

TS = voluntary tab split: #15 / month reduces member coinsurance reduction or one-half copay reduction

SP-Special Pharmacy medication. After PA has been approved, the medication must be obtained from a designated pharmacy

ALLERGY & ASTHMA	
Tier	<u>Antihistamines</u>
1	clemastine
1	diphenhydramine
1	hydroxyzine
1	deconamine SR
1	bromfenex & PD
1	OTC loratadine
1	OTC loratadine-D
1	OTC cetirizine
1	OTC cetirizine - D
2	Rondec
1	fexofenadine
<u>Nasal Sprays</u>	
1	Ipratropium NS
1	fluticasone
2	Astelin
2	Astepro
2	Nasonex
<u>Bronchodilators</u>	
2	Proair HFA - QL – 1
1	theophylline (Slophyllin,Uniphyll)
2	Proventil HFA – QL-1
2	Maxair Autohaler
2	Atrovent, HFA
2	Combivent
2	Accuneb
2	Spiriva
<u>Preventative</u>	
1	Asmanex
1	QVAR
2	Symbicort
2	Accolate
1	Singulair
2	Intal
2	Serevent AL > 40 years
2	Foradil AL > 40 years
2	Tilade
2	Pulmicort
2	Pulmicort Respules AL < 8 years

ANTI-INFECTIVES	
Tier	<u>Cephalosporins</u>
1	<u>cephalexin</u>
1	cefadroxil
1	cefuroxime
1	cefaclor
1	cephradine
1	cefdinir
1	cefprozil
2	Suprax
<u>Fluoroquinolones</u>	
1	ciprofloxacin

1	<u>Ofloxacin</u>
2	Levaquin
<u>Macrolides & Ketolides</u>	
1	<u>erythromycin</u>
1	Clarithromycin, XL
1	azithromycin
<u>Penicillins</u>	
1	<u>penicillin VK</u>
1	amoxicillin 250,500 mg
1	dicloxacillin
1	amoxicillin/clavulanate & ES
2	Augmentin XR
<u>Antifungals</u>	
1	nystatin
1	lotrisone
1	ketoconazole
2	Exelderm
2	Oxistat
2	Mycelex Tablets
2	Nizoral Shampoo Rx
1	miconazole-3-Rx vag supp
1	econazole
1	terbinafine QL-90
PA-1	Itraconazole
PA-2	Noxafil
PA-2	Zyvox
<u>Antivirals</u>	
1	acyclovir
1	amantadine
2	Tamiflu QL-10
2	Relenza
PA-1	famciclovir
2	Aldara, Condylox
2	Tyzeka
2	All oral HIV medicines are formulary
<u>Other</u>	
1	metronidazole
1	<u>bactrim SS/DS-generics</u>
1	tetracycline
1	clindamycin
1	nitrofurantion
1	<u>doxycycline</u>
1	minocycline
1	mupirocin

ANALGESICS	
Tier	<u>Migraine</u>
1	butalbital/APAP/Caff
1	midrin - generics
2	Migranal
2	Depakote ER
1	Sumatriptan
2	Maxalt/Maxalt MLT QL-9

<u>Muscle Relaxants</u>	
1	baclofen
1	<u>cyclobenzaprine</u>
1	methocarbamol
1	tizanidine
<u>Narcotics</u>	
1	codeine
1	morphine
1	oxycodone
1	tramadol
1	Ultracet-Generic
1	codeine/APAP
1	hydrocodone/APAP
1	propoxyphene/APAP
1	oxycodone /APAP
1	morphine Sulfate SA
PA-1	Fentanyl Transdermal QL-10 patches/month
PA-2	Avinza
PA-2	Kadian
<u>NSAIDS</u>	
1	<u>Ibuprofen</u>
1	naproxen sodium (Anaprox)
1	indomethacin & SR
1	piroxicam
1	ketorolac QL-20/month
1	diclofenac Na NOT SR (Voltaren)
1	etodolac NOT SR
1	sulindac
1	nabumetone
1	meloxicam
PA-2	Celebrex

CARDIOVASCULAR	
Tier	<u>ACE Inhib</u>
1	moexipril
1	fosinopril
1	captopril
1	<u>enalapril</u>
1	lisinopril/ lisinopril/HCTZ
1	benazepril
1	Quinapril/Quinapril HCTZ
<u>ARB's</u>	
1	Losartan, HCTZ
2	Benicar & Benicar HCT TS
<u>Alpha- Blockers</u>	
1	<u>prazosin</u>
1	doxazosin
1	terozosin
2	Flomax
<u>Anti-hyperlipidemics</u>	
\$0	niacin OTC
2	Niaspan
1	cholestyramine, (cans

1	& packets)
1	Colestipol
2	Welchol
1	gemfibrozil
1	fenofibrate
2	Trilipix
1	lovastatin
\$0	simvastatin
2	Simcor
2	Lipitor QL-30 TS
2	Zetia
2	Advicor
<u>Anti-Coagulants/Platelets</u>	
1 & 2	Warfarin/Coumadin NTI
1	ticlopidine
1	pentoxifylline ER
2	Plavix
2	Lovenox QL-60
<u>Beta- Blockers</u>	
1	<u>atenolol</u>
1	labetalol
1	Metoprolol - XL
1	pindolol
1	propranolol & SR
1	nadolol
1	Sotalol
1	Betaxolol
1	Bisoprolol
1	Carvedilol
2	Inderal LA
2	Innopran XL
<u>Ca+ Ch Blockers</u>	
1	<u>adalat CC - generics</u>
1	procardia XL generics
1	<u>verapamil SR tabs only</u>
1	dilacor XR - generics
1	cardizem CD generics
1	Tiazac generics
1	felodipine
1	amlodipine
2	Caduet
1	Nisoldipine
<u>Diuretics</u>	
1	<u>hydrochlorothiazide</u>
1	chlorthalidone
1	indapamide
1	metolazone
1	<u>furosemide</u>
1	bumetanide
1	torsemide
1	amiloride/HCTZ
1	spironolactone/HCTZ
1	<u>triamterene/HCTZ</u>
<u>Electrolyte Replacement</u>	
1	slow-k, micro-k, klor-con, k-dur, k-lyte

1	kaochlor liquid
1	k-lor powder
<u>Vasodilators & Other</u>	
1	Hydralazine
1	Amiodarone
1	isordil tembids--generic
1	minoxidil
1	nitroglycerin
1	minitran generic
2	Monoket
1	Nitro-dur generic
1	Nitrostat
1	transderm-nitro
1	midodrine
2	Catapres TTS
2	Ranexa

CNS DRUGS	
Tier	<u>Alzheimer's</u>
2	Aricept
1	Galantamine, SR
2	Namenda
2	Exelon
2	Exelon Patch QL-30
2	Cognex
<u>Anti-Convulsants</u>	
1	phenobarbital
1	phenytoin
1	primidone
1	Carbamazepine
1	Divalproex, ER
2	Tegretol & XR NTI
1	gabapentin
2	Carbatrol
1	Lamotrigine
2	Gabitril
1	Levetiracetam
2	Celontin
1	Topiramate
1	Banzel PA-2
<u>Anti-Depressants</u>	
1	<u>amitriptyline</u>
1	clomipramine, imipramine
1	desipramine, nortriptyline
1	doxepin
1	trazodone
1	bupropion, bupropion SR
2	Nardil
\$0	<u>fluoxetine</u>
1	paroxetine HCL
1	mirtazepine tabs & soltabs
1	citalopram
1	nefazodone
1	sertraline

2	Lexapro TS
1	Venlafaxine ER
PA-2	Emsam
1	fluvoxamine
	<u>Anti-Parkinson's</u>
1	selegiline
1	trihexyphenidyl
1	benztropine
1	bromocriptine
1	sinemet & CR generics
1	Permax
1	Ropinirole
2	Azilect
2	Mirapex
2	Zelapar
2	Comtan, Stalevo
	<u>ADHD</u>
1	<u>methylphenidate & SR</u>
1	dexedrine & spansules
1	adderall and XR generics
2	Concerta
2	Metadate CD
2	Vyvanse
2	Strattera
2	Intuniv
2	Daytrana
	<u>Weight Reduction</u>
1	Phentermine
	<u>BZD's/Anxiety / Sleep</u>
1	diazepam
1	flurazepam QL-10
1	alprazolam
1	buspirone
1	temazepam QL-10
1	lorazepam
1	triazolam QL-10
1	oxazepam
1	chlordiazepoxide
1	clonazepam
1	zolpidem QL -10
2	Rozerem QL-10
PA-2	Ambien CR PA-2
	<u>Bipolar</u>
1	lithium NTI
1	generic-Eskalith CR NTI
2	Depakote & ER
2	Equetro
1	Lamotrigine
2	Tegretol XR
	<u>Nausea / Vertigo</u>
1	meclizine
1	prochlorperazine
1	promethazine
2	Transderm Scop
1	ondansetron

1	Granisetron
2	Cesamet
PA-2	Marinol
	<u>Neuroleptics</u>
1	haloperidol
1	chlorpromazine
1	benztropine
1	fluphenazine
1	thiothixine
1	thioridazine
2	Zyprexa TS
2	Abilify TS
2	Seroquel, XR
2	Geodon
2	Saphris
1	Risperidone
1	clozapine
	<u>DERMATOLOGIC</u>
Tier	<u>Acne</u>
PA-1	tretinoin AL < 40
2	Azelex
2	Finacea
PA-2	Differin AL < 40
PA-2	Tazorac
1	emgel, cleocin-T
2	Metrogel, Crm
2	Klaron
2	Plexion
1	Benzamycin Generic
1 PA	Amnesteem, Claravis, Sotret
1	Dovonex
	<u>Other</u>
1	betamethasone
1	fluocinolone
1	hydrocortisone
1	desonide
1	cyclocort
1	fluocinonide
1	clobetasol
1	desoximetasone
1	diflorasone
1	diprolene
1	alclometasone
1	fluticasone
1	mometasone
1	halobetasol
2	Elidel
PA-2	Protopic
PA-2	Taclonex
	<u>EYE / EAR DROPS</u>
Tier	<u>Allergy</u>
\$0	<u>naphconA, Opcon-A</u>
\$0	Zaditor OTC
	<u>Anti-Infective & Viral</u>

1	acetic acid OTIC
1	sulfacetamide 10%
1	gentamicin
1	tobramycin
1	erythromycin
1	bacitracin
1	domebro OTIC
1	neosporin
2	Ciloxan
2	Ocuflax
2	Floxin OTIC
2	Zymar
2	Vigamox
2	Quixin
2	Vira-A, Viroptic
	<u>Corticosteroid Combo</u>
1	neodecadrone
1	cortisporin solution
2	Blephamide
2	Maxitrol / Maxidex
1	Pred Mild / Forte - generic
1	Dorzolamide (Trusopt)
2	Cipro HC OTIC
2	Ciprodex OTIC
	<u>Pain & Miscellaneous</u>
1	auralgan OTIC
1	cerumenex OTIC
2	Acular, LS
2	Nevanac
2	Voltaren
	<u>Glaucoma</u>
1	pilocarpine, various
1	epinephrine, various
1	timolol & XE
1	dipivefrin
1	Tobramycin/Dexa (Tobradex)
2	Betoptic S
1	Dorzolamide/Timolol (cosopt)
2	Alphagan-P
2	Xalatan, Travatan
2	lopidine
	<u>GI / URINARY</u>
Tier	<u>H2 Antagonists</u>
1	cimetidine
\$0	ranitidine
1	famotidine
	<u>Proton Pump Inhibitors</u>
1	Prilosec-OTC
1	Pantoprazole
2	Aciphex
	<u>Urinary</u>
1	oxybutynin, XL

2	Finasteride
2	Uroxatral
2	Avodart
2	Detrol, Detrol LA
2	Sanctura, XR
2	Elmiron
2	Toviaz
	<u>Other</u>
1	lactulose
1	azulfidine
1	loperamide caps
1	misoprostol
2	Pentasa
1	dicyclomine
1	levbid / levsinex-generic
1	golytely / nulytely-generic
1	cortifoam
1	cortifoam
2	Dipentum
2	Asacol
2	Rowasa
2	Entocort EC
	<u>HORMONES</u>
Tier	<u>Anti-diabetic Agents</u>
1	glipizide
1	glyburide
1	glipizide XL
1	glimepiride
INS	Humulin Insulin
INS	Humalog Insulin
INS	Lantus-Insulin
INS	Levemir
PA-2	Byetta
PA-2	Symilin
2	Precose
1	metformin
1	metformin XR
1	gylburide/metformin
2	Prandin
2	Prandimet
2	Starlix
2	Actos TS
2	ACTOplusmet
2	Januvia, Janumet
2	Onglyza
2	Glucagon
	<u>HRT / Osteoporosis</u>
1	estradiol
2	Activella
1	estrogens, esterified
1	estropiate
1	medroxyprogesterone
2	Premarin
2	Prempro, Premphase
1	Calcitonin

2	Alendronate
2	Actonel
2	Evista
2	Menostar QL-4
PA-2	Forteo
2	Evamist
2	Estrace & Premarin Cream
2	Vagifem
1	estratest & HS
2	FemHRT
2	Prometrium
1	climara patch generic
2	Climara Pro
2	Vivelle, DOT
1	estradiol patch
2	Esclim
1	estraderm generic
2	Alora
2	Combipatch
	<u>Oral Contraceptives</u>
1	zovia
1	levora
1	avaine
1	microgestin & FE
1	apri
1	necon
1	genora
1	low-ogestrel, cryselle
1	sprintec
1	trivora
2	Nuvaring
2	Ortho Evra
1	camila
1	jolivette
1	errin
1	trinessa
1	velivet
1	Ocella
2	Yaz
2	Estrostep & Fe
2	Lunelle