January 2011

VIVA Health Custom Drug List

The **VIVA Health Custom Drug List** is a guide within select therapeutic categories for clients, plan members and health care providers. **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. These preferred brand-name medicines are listed to help identify products that are clinically appropriate and cost-effective. Generics listed in therapeutic categories are for representational purposes only. This is not an all-inclusive list. This list represents brand products in CAPS, branded generics in upper- and lowercase *Italics*, and generic products in lowercase *italics*.

PLAN MEMBER

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.
- Please visit **www.vivahealth.com** for specific information regarding your prescription benefit coverage and copay[1] information.
- CVS Caremark may contact your doctor after receiving your prescription to request consideration of a drug list product or generic equivalent. This may result in your doctor prescribing, when medically appropriate, a different brand-name product or generic equivalent in place of your original prescription.
- Any brand drug for which a generic product becomes available may be designated as a non-preferred product.

HEALTH CARE PROVIDER

Your patient is covered under a prescription benefit plan. As a way to help manage health care 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 represents a summary of prescription coverage. It is not inclusive and does not guarantee coverage.
- The member's prescription benefit plan may have a different copay for specific products on the list.
- Unless specifically indicated, drug list products will include all dosage forms.
- Log in to **www.vivahealth.com** to check coverage and copay information for a specific medicine.

ANTI-INFECTIVES

ANTIBACTERIALS

§ CEPHALOSPORINS

cefaclor
cefdinir
cephalexin
SUPRAX

§ 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

§ ANTIFUNGALS

fluconazole
itraconazole
terbinafine tablet [2]

ANTIRETROVIRAL AGENTS

ANTIRETROVIRAL COMBINATIONS

ATRIPLA
COMBIVIR
EPZICOM
TRIZIVIR
TRUVADA

CHEMOKINE RECEPTOR ANTAGONISTS

SELZENTRY

FUSION INHIBITORS

FUZEON [2]

INTEGRASE INHIBITORS

ISENTRESS

NON-NUCLEOSIDE REVERSE TRANSCRIPTASE INHIBITORS

INTELENCE
RESCRIPTOR
SUSTIVA
VIRAMUNE

§ NUCLEOSIDE REVERSE TRANSCRIPTASE INHIBITORS

didanosine delayed-rel
stavudine
zidovudine
EMTRIVA
EPIVIR
VIDEX SOLUTION
ZIAGEN

NUCLEOTIDE REVERSE TRANSCRIPTASE INHIBITORS

VIREAD

PROTEASE INHIBITORS

APTIVUS
CRIXIVAN
INVIRASE
KALETRA
LEXIVA
NORVIR
PREZISTA
REYATAZ
VIRACEPT

ANTIVIRALS

§ CYTOMEGALOVIRUS AGENTS

VALCYTE

§ HEPATITIS AGENTS

BARACLUDE
EPIVIR-HBV
HEPSERA
REBETOL SOLUTION [2]
TYZEKA

§ HERPES AGENTS

acyclovir
valacyclovir

§ INFLUENZA AGENTS

amantadine
rimantadine
RELENZA
TAMIFLU

§ MISCELLANEOUS

clindamycin
metronidazole
nitrofurantoin
sulfamethoxazole-trimethoprim

CARDIOVASCULAR

§ ACE INHIBITORS

fosinopril
lisinopril
quinapril
ramipril

§ ACE INHIBITOR / CALCIUM CHANNEL BLOCKER COMBINATIONS

amlodipine-benazepril
trandolapril-verapamil ext-rel

§ ACE INHIBITOR / DIURETIC COMBINATIONS

fosinopril-hydrochlorothiazide
lisinopril-hydrochlorothiazide
quinapril-hydrochlorothiazide

§ ADRENOLYTICS, CENTRAL

clonidine transdermal

§ ANGIOTENSIN II RECEPTOR ANTAGONISTS / DIURETIC COMBINATIONS

losartan / losartan-hydrochlorothiazide
BENICAR / BENICAR HCT
DIOVAN / DIOVAN HCT
MICARDIS / MICARDIS HCT

ANGIOTENSIN II RECEPTOR ANTAGONIST / CALCIUM CHANNEL BLOCKER COMBINATIONS

AZOR
EXFORGE

ANGIOTENSIN II RECEPTOR ANTAGONIST / CALCIUM CHANNEL BLOCKER / DIURETIC COMBINATIONS

EXFORGE HCT

ANGIOTENSIN II RECEPTOR ANTAGONIST / DIRECT RENIN INHIBITOR COMBINATIONS

VALTURNA

§ ANTIARRHYTHMICS

MULTAQ
RYTHMOL SR
TIKOSYN

ANTILIPEMICS

§ BILE ACID RESINS

cholestyramine
WELCHOL

CHOLESTEROL ABSORPTION INHIBITORS

ZETIA

§ FIBRATES

fenofibrate
TRICOR
TRILIPIX

§ HMG-CoA REDUCTASE INHIBITORS

pravastatin
simvastatin
CRESTOR
LIPITOR

NIACINS / COMBINATIONS

NIASPAN
SIMCOR

§ BETA-BLOCKERS

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

§ CALCIUM CHANNEL BLOCKERS

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

CALCIUM CHANNEL BLOCKER / ANTILIPEMIC COMBINATIONS

CADUET

§ DIGITALIS GLYCOSIDES

digoxin

DIRECT RENIN INHIBITORS / DIURETIC COMBINATIONS

TEKTURNA / TEKTURNA HCT

§ DIURETICS

furosemide
hydrochlorothiazide
metolazone
spironolactone-hydrochlorothiazide
torsemide
triamterene-hydrochlorothiazide

CENTRAL NERVOUS SYSTEM

§ ANTICONVULSANTS

carbamazepine ext-rel
divalproex sodium delayed-rel
divalproex sodium ext-rel
gabapentin
lamotrigine
levetiracetam
oxcarbazepine
topiramate
BANZEL
CARBATROL
GABITRIL
LAMICTAL ODT
LAMICTAL XR
LYRICA
SABRIL
VIMPAT

ANTIDEPRESSANTS

§ MONOAMINE OXIDASE INHIBITORS (MAOIs)

tranylcypromine
NARDIL

§ SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIs)

citalopram
fluoxetine
paroxetine
paroxetine ext-rel
sertraline
LEXAPRO

§ SEROTONIN NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIs) [5]

venlafaxine
venlafaxine ext-rel
CYMBALTA
PRISTIQ

§ MISCELLANEOUS AGENTS

bupropion
bupropion ext-rel
mirtazapine

§ ANTIPARKINSONIAN AGENTS

pramipexole
ropinirole
AZILECT
COMTAN
REQUIP XL
STALEVO

§ ANTIPSYCHOTICS, ATYPICALS

risperidone
ABILIFY
FANAPT
GEODON
INVEGA
SAPHRIS
SEROQUEL
SEROQUEL XR
ZYPREXA

§ ATTENTION DEFICIT HYPERACTIVITY DISORDER/ NARCOLEPSY

amphetamine-dextroamphetamine mixed salts ext-rel [2]
dexmethylphenidate [2]
CONCERTA [2]
DAYTRANA [2]
FOCALIN XR [2]
METADATE CD [2]
PROVIGIL [2]
RITALIN LA [2]
STRATTERA [2]
VYVANSE [2]

§ HYPNOTICS, NONBENZODIAZEPINES

zolpidem [3]
AMBIEN CR [3]

MIGRAINE

§ SELECTIVE SEROTONIN AGONISTS

sumatriptan [3]
MAXALT [3]
ZOMIG [3]

SELECTIVE SEROTONIN AGONIST / NONSTEROIDAL ANTI-INFLAMMATORY DRUG (NSAID) COMBINATIONS

TREXIMET [3]

MULTIPLE SCLEROSIS AGENTS

AVONEX [2]
BETASERON [2]
COPAXONE [2]
EXTAVIA [2]
REBIF [2]

§ MUSCULOSKELETAL THERAPY AGENTS

metaxalone

ENDOCRINE AND METABOLIC

ANTIDIABETICS

§ ALPHA-GLUCOSIDASE INHIBITORS

acarbose

§ BIGUANIDES

metformin
metformin ext-rel

§ BIGUANIDE / SULFONYLUREA COMBINATIONS

glipizide-metformin

DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS

JANUVIA
ONGLYZA

DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITOR / BIGUANIDE COMBINATIONS

JANUMET

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

SUPPLIES

ACCU-CHEK STRIPS AND KITS [4]
BD INSULIN SYRINGES AND NEEDLES [4]
ONETOUCH STRIPS AND KITS [4]

CALCIUM REGULATORS

§ BISPHOSPHONATES

alendronate
ACTONEL
BONIVA

§ CALCITONINS

Fortical

PARATHYROID HORMONES

FORTEO

CONTRACEPTIVES

§ MONOPHASIC

ethinyl estradiol-drospirenone
YAZ

§ TRIPHASIC

ethinyl estradiol-norgestimate
ORTHO TRI-CYCLEN LO

FOUR PHASE

NATAZIA

§ EXTENDED CYCLE

ethinyl estradiol-levonorgestrel
LOSEASONIQUE
SEASONIQUE

TRANSDERMAL

ORTHO EVRA

VAGINAL

NUVARING

ESTROGENS

§ ORAL

estradiol
estropipate
ENJUVIA
PREMARIN

§ TRANSDERMAL

estradiol
ESTRADERM
EVAMIST
VIVELLE-DOT

VAGINAL

PREMARIN VAGINAL CREAM

§ ESTROGEN / PROGESTINS, ORAL

estradiol-norethindrone
PREMPHASE
PREMPRO

§ PROGESTINS, ORAL

medroxyprogesterone

PROMETRIUM

SELECTIVE ESTROGEN RECEPTOR MODULATORS
EVISTA

§ THYROID SUPPLEMENTS
levothyroxine
SYNTHROID

GASTROINTESTINAL

§ ANTIEMETICS
dronabinol
ondansetron oral [2]
TRANSDERM SCOP

§ CHOLELITHOLYTICS
ursodiol

§ H_2 RECEPTOR ANTAGONISTS
ranitidine

INFLAMMATORY BOWEL DISEASE
§ ORAL AGENTS
ASACOL
ASACOL HD
ENTOCORT EC
LIALDA
PENTASA

§ RECTAL AGENTS
CANASA
CORTIFOAM

§ LAXATIVES
KRISTALOSE

PANCREATIC ENZYMES
CREON
ZENPEP

§ PROTON PUMP INHIBITORS
lansoprazole
pantoprazole

§ SALIVA STIMULANTS
EVOXAC

§ STEROIDS, RECTAL
PROCTOFOAM-HC

GENITOURINARY

§ BENIGN PROSTATIC HYPERPLASIA
doxazosin
finasteride
tamsulosin
terazosin
AVODART
RAPAFLO

§ URINARY ANTISPASMODICS
oxybutynin
oxybutynin ext-rel
DETROL
DETROL LA
ENABLEX
GELNIQUE
OXYTROL
SANCTURA XR
VESICARE

HEMATOLOGIC

§ ANTICOAGULANTS
warfarin
COUMADIN

§ PLATELET AGGREGATION INHIBITORS
AGGRENOX
EFFIENT
PLAVIX

IMMUNOLOGIC AGENTS

IMMUNOSUPPRESSANTS
§ ANTIMETABOLITES
mycophenolate mofetil
AZASAN
MYFORTIC

§ CALCINEURIN INHIBITORS
cyclosporine, modified
tacrolimus
SANDIMMUNE

RAPAMYCIN DERIVATIVES
RAPAMUNE

NUTRITIONAL / SUPPLEMENTS

§ FOLIC ACID COMBINATIONS
folic acid-vitamin B6-vitamin B12

§ PRENATAL VITAMINS
generic prenatal vitamins

RESPIRATORY

ANAPHYLAXIS TREATMENT AGENTS
EPIPEN
EPIPEN JR

§ ANTICHOLINERGICS
SPIRIVA

§ ANTICHOLINERGIC / BETA AGONIST COMBINATIONS
ipratropium-albuterol inhalation solution
COMBIVENT

§ ANTIHISTAMINES, NONSEDATING
fexofenadine

BETA AGONISTS, INHALANTS
§ SHORT ACTING
albuterol
PROAIR HFA
PROVENTIL HFA
VENTOLIN HFA

LONG ACTING
FORADIL
SEREVENT

LEUKOTRIENE RECEPTOR ANTAGONISTS
SINGULAIR

§ NASAL ANTIHISTAMINES
azelastine
ASTEPRO

§ NASAL STEROIDS
fluticasone
NASACORT AQ
NASONEX
VERAMYST

STEROID / BETA AGONIST COMBINATIONS
ADVAIR
DULERA
SYMBICORT

§ STEROID INHALANTS
ASMANEX
FLOVENT
PULMICORT
QVAR

§ XANTHINES
THEO-24

TOPICAL

DERMATOLOGY
§ ACNE
clindamycin solution
clindamycin-benzoyl peroxide
erythromycin solution
erythromycin-benzoyl peroxide
tretinoin
ACANYA [2]
DIFFERIN [2]
DUAC CS
EPIDUO [2]
RETIN-A MICRO [2]

§ ACTINIC KERATOSIS
CARAC

§ ANTIBIOTICS
BACTROBAN
BACTROBAN NASAL

§ ANTIFUNGALS
ciclopirox
MENTAX

§ ANTIPSORIATICS, TOPICAL
TAZORAC

§ CORTICOSTEROIDS
clobetasol propionate foam
CORDRAN
LUXIQ

IMMUNOMODULATORS
ELIDEL
PROTOPIC

§ LOCAL ANALGESICS
LIDODERM

§ ROSACEA
metronidazole 0.75%
METROGEL

§ MISCELLANEOUS SKIN AND MUCOUS MEMBRANE
imiquimod

OPHTHALMIC
§ ANTIALLERGICS
ALREX
PATANOL

§ ANTI-INFECTIVE / ANTI-INFLAMMATORY COMBINATIONS
tobramycin-dexamethasone

§ ANTI-INFLAMMATORIES, NONSTEROIDAL
diclofenac sodium
ketorolac

§ ANTI-INFLAMMATORIES, STEROIDAL
LOTEMAX

§ BETA-BLOCKERS, NONSELECTIVE
timolol maleate solution
BETIMOL

BETA-BLOCKERS, SELECTIVE
BETOPTIC S

§ CARBONIC ANHYDRASE INHIBITORS
dorzolamide
AZOPT

§ CARBONIC ANHYDRASE INHIBITOR / BETA-BLOCKER COMBINATIONS
dorzolamide-timolol

IMMUNOMODULATORS
RESTASIS

PROSTAGLANDINS
LUMIGAN
TRAVATAN
XALATAN

§ SYMPATHOMIMETICS
brimonidine 0.15%, 0.2%
ALPHAGAN P

OTIC
§ ANTI-INFECTIVES
ofloxacin otic

§ ANTI-INFECTIVE / ANTI-INFLAMMATORY COMBINATIONS
CIPRO HC
CIPRODEX

QUICK REFERENCE DRUG LIST

A

ABILIFY
ACANYA [2]
acarbose
ACCU-CHEK STRIPS AND KITS [4]
ACTONEL
ACTOPLUS MET
ACTOS
acyclovir
ADVAIR
AGGRENOX
albuterol
alendronate
ALPHAGAN P
ALREX
amantadine
AMBIEN CR [3]
amlodipine
amlodipine-benazepril
amoxicillin
amoxicillin-clavulanate
amphetamine-dextroamphetamine mixed salts ext-rel [2]
APIDRA
APTIVUS
ASACOL
ASACOL HD
ASMANEX
ASTEPRO
atenolol
ATRIPLA
AVELOX
AVODART
AVONEX [2]
AZASAN
azelastine
AZILECT
azithromycin
AZOPT
AZOR

B

BACTROBAN
BACTROBAN NASAL
BANZEL
BARACLUDE
BD INSULIN SYRINGES AND NEEDLES [4]
BENICAR
BENICAR HCT
BETASERON [2]
BETIMOL
BETOPTIC S
BONIVA
brimonidine 0.15%, 0.2%
bupropion
bupropion ext-rel
BYETTA
BYSTOLIC

C

CADUET
CANASA
CARAC
carbamazepine ext-rel
CARBATROL
carvedilol
cefaclor
cefdinir
cephalexin
cholestyramine
ciclopirox
CIPRO HC
CIPRO SUSPENSION
CIPRODEX
ciprofloxacin ext-rel
ciprofloxacin tablet
citalopram
clarithromycin
clarithromycin ext-rel
clindamycin
clindamycin solution
clindamycin-benzoyl peroxide
clobetasol propionate foam
clonidine transdermal
COMBIVENT
COMBIVIR
COMTAN
CONCERTA [2]
COPAXONE [2]
CORDRAN
COREG CR
CORTIFOAM
COUMADIN
CREON
CRESTOR
CRIXIVAN
cyclosporine, modified
CYMBALTA

D

DAYTRANA [2]
DETROL
DETROL LA
dexmethylphenidate [2]
diclofenac sodium
dicloxacillin
didanosine delayed-rel
DIFFERIN [2]
digoxin
diltiazem ext-rel
DIOVAN
DIOVAN HCT
divalproex sodium delayed-rel
divalproex sodium ext-rel
dorzolamide
dorzolamide-timolol
doxazosin
doxycycline hyclate
dronabinol
DUAC CS
DUETACT
DULERA

E

EFFIENT
ELIDEL
EMTRIVA
ENABLEX
ENJUVIA
ENTOCORT EC
EPIDUO [2]
EPIPEN
EPIPEN JR
EPIVIR
EPIVIR-HBV
EPZICOM
erythromycin solution
erythromycin-benzoyl peroxide
erythromycins
ESTRADERM
estradiol
estradiol-norethindrone
estropipate
ethinyl estradiol-drospirenone
ethinyl estradiol-levonorgestrel
ethinyl estradiol-norgestimate
EVAMIST
EVISTA
EVOXAC
EXFORGE
EXFORGE HCT
EXTAVIA [2]

F

FANAPT
fenofibrate
fexofenadine
finasteride
FLOVENT
fluconazole
fluoxetine
fluticasone
FOCALIN XR [2]
folic acid-vitamin B6-vitamin B12
FORADIL
FORTEO
Fortical
fosinopril
fosinopril-hydrochlorothiazide
furosemide
FUZEON [2]

G

gabapentin
GABITRIL
GELNIQUE
generic prenatal vitamins
GEODON
glimepiride
glipizide
glipizide ext-rel
glipizide-metformin

H

HEPSERA
HUMALOG
HUMULIN
hydrochlorothiazide

I

imiquimod
INTELENCE
INVEGA
INVIRASE
ipratropium-albuterol inhalation solution
ISENTRESS
itraconazole

J

JANUMET
JANUVIA

K

KALETRA
ketorolac
KRISTALOSE

L

LAMICTAL ODT
LAMICTAL XR
lamotrigine
lansoprazole
LANTUS
LEVAQUIN
LEVEMIR
levetiracetam
levothyroxine
LEXAPRO
LEXIVA
LIALDA
LIDODERM
LIPITOR
lisinopril
lisinopril-hydrochlorothiazide
losartan
losartan-hydrochlorothiazide
LOSEASONIQUE
LOTEMAX
LUMIGAN
LUXIQ
LYRICA

M

MAXALT [3]
medroxyprogesterone
MENTAX
METADATE CD [2]
metaxalone
metformin
metformin ext-rel
metolazone
metoprolol
metoprolol succinate ext-rel
METROGEL
metronidazole
metronidazole 0.75%
MICARDIS
MICARDIS HCT
minocycline
mirtazapine
MULTAQ
mycophenolate mofetil
MYFORTIC

N

nadolol
NARDIL
NASACORT AQ
NASONEX
NATAZIA
NIASPAN
nifedipine ext-rel
nitrofurantoin
NORVIR
NOVOLIN
NOVOLOG
NUVARING

O

ofloxacin otic
ondansetron oral [2]
ONETOUCH STRIPS AND KITS [4]
ONGLYZA
ORTHO EVRA
ORTHO TRI-CYCLEN LO
oxcarbazepine
oxybutynin
oxybutynin ext-rel
OXYTROL

P

pantoprazole
paroxetine
paroxetine ext-rel
PATANOL
penicillin VK
PENTASA
PLAVIX
pramipexole
PRANDIN
pravastatin
PREMARIN
PREMARIN VAGINAL CREAM
PREMPHASE
PREMPRO
PREZISTA
PRISTIQ
PROAIR HFA
PROCTOFOAM-HC
PROMETRIUM
propranolol
PROTOPIC
PROVENTIL HFA
PROVIGIL [2]
PULMICORT

Q

quinapril
quinapril-hydrochlorothiazide
QVAR

R

ramipril
ranitidine
RAPAFLO
RAPAMUNE

Your specific prescription benefit plan design may not cover certain categories, regardless of their appearance in this document.

REBETOL SOLUTION [2]
REBIF [2]
RELENZA
REQUIP XL
RESCRIPTOR
RESTASIS
RETIN-A MICRO [2]
REYATAZ
rimantadine
risperidone
RITALIN LA [2]
ropinirole
RYTHMOL SR

S

SABRIL
SANCTURA XR
SANDIMMUNE
SAPHRIS
SEASONIQUE
SELZENTRY
SEREVENT
SEROQUEL
SEROQUEL XR
sertraline
SIMCOR
simvastatin
SINGULAIR
SPIRIVA
spironolactone-hydrochlorothiazide
STALEVO
stavudine
STRATTERA [2]
sulfamethoxazole-trimethoprim
sumatriptan
sumatriptan [3]
SUPRAX
SUSTIVA
SYMBICORT
SYNTHROID

T

tacrolimus
TAMIFLU
tamsulosin
TAZORAC
TEKTURNA
TEKTURNA HCT
terazosin
terbinafine tablet [2]
tetracycline
THEO-24
TIKOSYN
timolol maleate solution
tobramycin-dexamethasone
topiramate
torsemide
trandolapril-verapamil ext-rel
TRANSDERM SCOP
tranylcypromine
TRAVATAN
tretinoin
TREXIMET [3]
triamterene-hydrochlorothiazide
TRICOR
TRILIPIX
TRIZIVIR
TRUVADA
TYZEKA

U

ursodiol

V

valacyclovir
VALCYTE
VALTURNA
venlafaxine
venlafaxine ext-rel
VENTOLIN HFA
VERAMYST
verapamil ext-rel
VESICARE
VIDEX SOLUTION
VIMPAT
VIRACEPT
VIRAMUNE
VIREAD
VIVELLE-DOT
VYVANSE [2]

W

warfarin
WELCHOL

X

XALATAN

Y

YAZ

Z

ZENPEP
ZETIA
ZIAGEN
zidovudine
zolpidem [3]
ZOMIG [3]
ZYPREXA

PREFERRED ALTERNATIVES LIST

DRUG NAME	PREFERRED ALTERNATIVE(S)*
ACCOLATE	SINGULAIR
ACIPHEX	*lansoprazole, pantoprazole*
ACTONEL W/CALCIUM	*alendronate*
ADVICOR	SIMCOR
AEROBID, AEROBID M	ASMANEX, FLOVENT, PULMICORT, QVAR
ALORA	*estradiol,* ESTRADERM, EVAMIST, VIVELLE-DOT
ALTOPREV	*pravastatin, simvastatin*
ALVESCO	ASMANEX, FLOVENT, PULMICORT, QVAR
ANGELIQ	*estradiol-norethindrone*, PREMPHASE, PREMPRO
ARMOUR THYROID	*levothyroxine,* SYNTHROID
ASCENSIA STRIPS AND KITS [4]	ACCU-CHEK STRIPS AND KITS [4], ONETOUCH STRIPS AND KITS [4]
ATACAND, ATACAND HCT	*losartan, losartan-hydrochlorothiazide*
ATROVENT HFA	SPIRIVA
AXERT [3]	*sumatriptan* [3], MAXALT [3], ZOMIG [3]
AZELEX	*erythromycin solution*
BECONASE AQ	*fluticasone*
BENZAC AC, BENZAC W	*clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin,* ACANYA [2], DIFFERIN [2], DUAC CS, EPIDUO [2], RETIN-A MICRO [2]
BENZAGEL	*clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin,* ACANYA [2], DIFFERIN [2], DUAC CS, EPIDUO [2], RETIN-A MICRO [2]
BENZIQ	*clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin,* ACANYA [2], DIFFERIN [2], DUAC CS, EPIDUO [2], RETIN-A MICRO [2]
BREVOXYL	*clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin,* ACANYA [2], DIFFERIN [2], DUAC CS, EPIDUO [2], RETIN-A MICRO [2]
CARDURA XL	*doxazosin, tamsulosin, terazosin,* RAPAFLO
CENESTIN	*estradiol, estropipate,* ENJUVIA, PREMARIN
CLARINEX	*fexofenadine*
CLINDAGEL	*erythromycin solution*
DESQUAM E, DESQUAM X	*clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin,* ACANYA [2], DIFFERIN [2], DUAC CS, EPIDUO [2], RETIN-A MICRO [2]
DORAL [3]	*zolpidem* [3], AMBIEN CR [3]
DYNACIRC CR	*amlodipine, nifedipine ext-rel*
EDLUAR [3]	*zolpidem* [3]
ESTRASORB	*estradiol,* ESTRADERM, EVAMIST, VIVELLE-DOT
ESTROGEL	*estradiol,* ESTRADERM, EVAMIST, VIVELLE-DOT
FEMHRT	*estradiol-norethindrone,* PREMPHASE, PREMPRO
FEMTRACE	*estradiol, estropipate,* ENJUVIA, PREMARIN
FENOGLIDE	*fenofibrate,* TRICOR, TRILIPIX
FORTAMET	*metformin ext-rel*
FOSAMAX PLUS D	*alendronate*
FREESTYLE STRIPS AND KITS [4]	ACCU-CHEK STRIPS AND KITS [4], ONETOUCH STRIPS AND KITS [4]
FROVA [3]	*sumatriptan* [3]
GLUMETZA	*metformin ext-rel*
INNOPRAN XL	*atenolol, propranolol ext-rel*
ISTALOL	*timolol maleate solution*, BETIMOL
KLARON LOTION [2]	*erythromycin solution*
LUNESTA [3]	*zolpidem* [3]
MAXAIR	PROAIR HFA, PROVENTIL HFA, VENTOLIN HFA
MENEST	*estradiol, estropipate*, ENJUVIA, PREMARIN
MENOSTAR	*estradiol*, ESTRADERM, EVAMIST, VIVELLE-DOT
OMNARIS	*fluticasone*

Your specific prescription benefit plan design may not cover certain categories, regardless of their appearance in this document.

DRUG NAME	PREFERRED ALTERNATIVE(S)*
PATANASE	*azelastine*, ASTEPRO
PEXEVA	*citalopram, fluoxetine, paroxetine, paroxetine ext-rel, sertraline,* LEXAPRO
PRECISION XTRA STRIPS AND KITS [4]	ACCU-CHEK STRIPS AND KITS [4], ONETOUCH STRIPS AND KITS [4]
PREFEST	*estradiol-norethindrone,* PREMPHASE, PREMPRO
PREVACID SOLUTAB	*lansoprazole*, *pantoprazole*
RELION INSULIN	HUMULIN INSULIN, NOVOLIN INSULIN
RELPAX [3]	*sumatriptan* [3], MAXALT [3], ZOMIG [3]
RHINOCORT AQUA	*fluticasone*
ROZEREM [3]	*zolpidem* [3]
SKELID	*alendronate*, ACTONEL
SURE-TEST STRIPS AND KITS [4]	ACCU-CHEK STRIPS AND KITS [4], ONETOUCH STRIPS AND KITS [4]
TEVETEN, TEVETEN HCT	*losartan, losartan-hydrochlorothiazide*
TOVIAZ	*oxybutynin ext-rel*
TRIAZ	*clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin,* ACANYA [2], DIFFERIN [2], DUAC CS, EPIDUO [2], RETIN-A MICRO [2]
TRIGLIDE	*fenofibrate,* TRICOR, TRILIPIX
TRUE CARE STRIPS AND KITS [4], TRUETEST STRIPS AND KITS [4], TRUETRACK STRIPS AND KITS [4]	ACCU-CHEK STRIPS AND KITS [4], ONETOUCH STRIPS AND KITS [4]
TWINJECT	EPIPEN, EPIPEN JR
UROXATRAL	*doxazosin, tamsulosin, terazosin,* RAPAFLO
VANOS	*clobetasol*
XOPENEX HFA	PROAIR HFA, PROVENTIL HFA, VENTOLIN HFA
ZODERM	*clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin,* ACANYA [2], DIFFERIN [2], DUAC CS, EPIDUO [2], RETIN-A MICRO [2]
ZYFLO, ZYFLO CR	SINGULAIR

FOR YOUR INFORMATION: Generics should be considered the first line of prescribing. This drug list represents a summary of prescription coverage. It is not inclusive and does not guarantee coverage. Any brand drug for which a generic product becomes available may be designated as a non-preferred product. Specific prescription benefit plan design may not cover certain categories, regardless of their appearance in this document. The member's prescription benefit plan may have a different copay for specific products on the list. Unless specifically indicated, drug list products will include all dosage forms. This list represents brand products in CAPS, branded generics in upper- and lowercase *Italics*, and generic products in lowercase *italics*. Generics listed in therapeutic categories are for representational purposes only. This is not an all-inclusive list. Listed products may be available generically in certain strengths or dosage forms. Dosage forms on this list will be consistent with the category and use where listed. Log in to **www.vivahealth.com** to check coverage and copay information for a specific medicine.

***** The preferred alternative products in this list are a broad representation within therapeutic categories of available treatment options and do not necessarily represent clinical equivalency.
§ Generics are available in this class and should be considered the first line of prescribing.
[1] Copayment, copay or coinsurance means the amount a member 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] These medications may require prior authorization from VIVA Health. Before going to the pharmacy, please have your doctor call VIVA Health Medical Management toll-free at 1-800-294-7780, ext. 475.
[3] These medications may have quantity limitations.
[4] Only covered under pharmacy benefit when excluded from your medical benefit.
[5] Indicates the proposed mechanism of action, based on the American Psychiatric Association Summary of Treatment Recommendations.