



MaxCare Highly Managed Clinical Programs

Anti-Diabetic Medications	
Preferred	Non-Preferred (Prior Authorization Required)
Oral Medications	
<p>Generic Products</p> <p>Glimepiride (AMARYL) Glipizide (GLUCOTROL) Glipizide XL/ER (GLUCOTROL XL) Glyburide (DIABETA) Glyburid MCR (GLYNASE) Chlorpropam Tolazamide Tolbutamide Metformin (GLUCOPHAGE) Metformin ER (GLUCOPHAGE XR) Metformin/Glipizide Metformin/Glyburide (GLUCOVANCE) Nateglinide (STARLIX) Repaglinide (PRANDIN) Repaglinide/Metformin (PRANDIMET) Acarbose (PRECOSE) Pioglitazone (ACTOS) Pioglitazone/Glimeperide (DUETACT) Pioglitazone/Metformin (ACTOPLUS METFORMIN; ACTOPLUS METFORMIN XR)</p> <p>Brand Name Products</p> <p>AVANDIA (Rosiglitazone) AVANDARYL (Rosiglitazone/Glim) AVANDAMET (Rosiglitazone/Metformin) GLYSET (Miglitol)</p>	<p>Brand Name Products</p> <p>FORTAMET (Metformin SR) GLUMETZA (Metformin SR)</p>
Injectable Medications	
<p>Brand Name Products</p> <p>NOVOLOG (Insulin Aspart) HUMALOG (Insulin Lispro (Human)) NOVOLIN R (Insulin Regular (Human)) HUMULIN R (Insulin Regular (Human)) HUMULIN N (Insulin NPH (Human)) NOVOLIN N (Insulin NPH (Human)) NOVOLOG MIX (Insulin Aspart Prot & Aspart (Human)) HUMALOG MIX (Insulin Lispro Prot & Lispro Sus) NOVOLIN 70/30 INJ RELION (Insulin NPH & Reg Human)) LANTUS (Insulin Glargine) LEVEMIR (Insulin Detemir)</p>	<p>Brand Name Products</p> <p>BYETTA (Exenatide) BYDUREON (Exenatide ER) VICTOZA (Liraglutide) TANZEUM (Albiglutide) TRULICITY (Dulaglutide) SYMLIN (Pramlintide)</p>

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Antihypertensives/Cardiovascular

Preferred	Non-Preferred (Prior Authorization Required)
<p><u>ACE Inhibitors and ACE/HCTZ generic Combos:</u> Benazepril Captopril Enalapril Fosinopril Lisinopril Moexipril Perindopril Quinapril Ramipril Trandolapril</p> <p><u>All generic ARBs & ARB combos</u> Candesartan Irbesartan Losartan Valsartan</p> <p><u>All generic Beta Blockers</u> (metoprolol, atenolol, etc)</p> <p><u>All generic Calcium Channel Blockers & Diuretics</u> (amlodipine, diltiazem, nifedipine, HCTZ, furosemide, etc)</p> <p>Digoxin 0.25mg and 0.125mg</p>	<p><u>Brand Name Products</u> EDARBI (Azilsartan) TEVETEN & TEVETEN HCT (Eprosartan, Eprosartan/HCTZ) BENICAR & BENICAR HCT (Olmesartan/Hctz) TEKTURNA HCT (Aliskiren/Hctz) TEKAMLO (Aliskiren/Amlodipine) AMTURNIDE (Aliskiren/Amlodipine/HCTZ) AZOR (Amlodipine/Olmesartan) EDARBYCLOR (Azilsartan/Chlorthalidone) TRIBENZOR (Olmesartan/Amlodipine/HCTZ) RANEXA (Ranolazine) EPANED (Enalapril Sol) VECAMYL (Mecamylamine) PRESTALIA (Perindopril /Amlod) HEMANGEOL (Propranolol Sol) INNOPRAN XL (Propranolol SR) DUTOPROL (Metoprolol & HCTZ) TIKOSYN (Dofetilide) MULTAQ (Dronedarone) CORLANOR (Ivabradine) ENTRESTO (Sacubitril/Valsartan) DURLAZA CAP (Aspirin SR 24HR) COREG CR CAP (Carvedilol) ZONTIVITY (Vorapaxar) LANOXIN (Digoxin Tab 187.5 MCG) DYRENIUM (Triamterene)</p>

Migraine Medications

Preferred	Non-Preferred (Prior Authorization Required)
<p><u>Generic Products</u> Naratriptan (Amerge) Rizatriptan (Maxalt) Rizatriptan ODT (Maxalt MLT) Sumatriptan Tab, Nasal Spray, Inj (IMITREX) Zolmitriptan (ZOMIG) Zolmitriptan ODT (ZOMIG ZMT) Zolmitriptan (ZOMIG & NAS SPR) Ergot/Caffeine Tab (CAFERGOT)</p>	<p><u>Brand Name Products</u> AXERT (Almotriptan) RELPAX (Eletriptan) FROVA (Frovatriptan) SUMAVEL DOSEPRO (Sumatriptan needleless Injection) CAMBIA (Diclofenac 50mg) TREXIMET (Sumatriptan/Naproxen) MIGRANAL (Dihydroergotamine Nasal Spr) ZECUITY PAD (Sumatriptan TD Iontophoretic Patch) ZEMBRACE (Sumatriptan Auto-injector 3 MG/0.5ML) ONZETRA (Sumatriptan inhalation) SPRIX (Ketorolac Nasal Spray)</p>

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Cholesterol Medications	
Preferred	Non-Preferred (Prior Authorization Required)
Statins	
<u>Generic Products</u> Atorvastatin (LIPITOR) Lovastatin (MEVACOR) Pravastatin (PRAVACHOL) Simvastatin (ZOCOR) <u>Brand Name Products</u> SIMCOR (Niacin/Simvastatin) ADVICOR (Niacin/Lovastatin)	<u>Brand Name Products</u> CRESTOR (Rosuvastatin) VYTORIN (Simvastatin/Ezetimibe) LIPITOR (Atorvastatin) MEVACOR, ALTOPREV (Lovastatin) PRAVACHOL (Pravastatin) ZOCOR (Simvastatin) LESCOL & LESCOL XL (Fluvastatin) LIVALO (Pitavastatin) ZETIA (Ezetemibe)
Non-Statins Cholesterol Medications	
Preferred	Non-Preferred (Prior Authorization Required)
<u>Generic Products</u> Cholestyramine (QUESTRAN, PREVALITE) Fenofibrate (TRILIPIX) Fenofibrate (FIBRICOR) Fenofibrate (LIPOFEN) Fenofibrate (TRICOR) Fenofibrate (LOFIBRA) Fenofibrate (TRIGLIDE) Fenofibrate (ANTARA) Gemfibrozil (LOPID) Omega-3-Acid Ethyl (LOVAZA) Colestipol (COLESTID) <u>Brand Name Products</u> VASCEPA (Icosapent Ethyl) WELCHOL Tab & Pak (Colesevelam)	<u>Brand Name Products</u> FENOGLIDE 120 mg only (Fenofibrate) ANTARA 90mg only (Fenofibrate)
Hypnotics	
Preferred	Non-Preferred (Prior Authorization Required)
<u>Generic Products</u> Quazepam (DORAL) Temazepam (RESTORIL) Triazolam (HALCION) Eszopiclone (LUNESTA) Zaleplon (SONATA) Zolpidem & Zolpidem ER (AMBIEN & AMBIEN CR) Estazolam Flurazepam Midazolam	<u>Brand Name Products</u> INTERMEZZO (Zolpidem SL) EDLUAR (Zolpidem SL) ZOLPIMIST (Zolpidem Oral Spray) SILENOR (Doxepin) ROZEREM (Ramelteon) BELSOMRA (Suvorexant)

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Atypical Antipsychotics

Preferred	Non-Preferred (Prior Authorization Required)
<p>Generic Products Aripiprazole (ABILIFY Tab, ODT & Sol) Risperidone Tab, Sol, ODT (RISPERDAL) Clozapine Tab (CLOZARIL) Quetiapine (SEROQUEL) Olanzapine Tab & ODT (ZYPREXA) Ziprasidone (GEODON) Quetiapine Tab SR (SEROQUEL XR)</p> <p>Brand Name Product Asenapine SL Tab (SAPHRIS) SEROQUEL XR (Quetiapine Tab SR)</p>	<p>Brand Name Products FANAPT (Iloperidone) INVEGA (Paliperidone Tab SR) LATUDA (Lurasidone) REXULTI (Brexpiprazole) VERSACLOZ (Clozapine Susp 50 mg/mL) FAZACLO ODT (Clozapine ODT) EQUETRO (Carbamazepine Cap SR) SAPHRIS (Asenapine SL Tab) VRAYLAR (Cariprazine)</p>

Antidepressants

Preferred	Non-Preferred (Prior Authorization Required)
<p>Generic SSRI Products Citalopram Tabs & Sol (CELEXA) Escitalopram Tabs & Sol (LEXAPRO) Fluoxetine Caps & Sol (PROZAC) Fluoxetine (PROZAC WEEKLY) Fluvoxamine (LUVOX & CR) Paroxetine (PAXIL & CR; PAXIL SUSP) Sertraline Tabs & Sol (ZOLOFT)</p> <p>Generic Dual Acting Products Duloxetine (CYMBALTA) Venlafaxine (EFFEXOR) Venlafaxine Cap ER (EFFEXOR XR) Venlafaxine Tab ER Bupropion (WELLBUTRIN) Budeprion SR (WELLBUTRIN SR) Bupropion XL (WELLBUTRIN XL) Mirtazapine (REMERON) Mirtazapine ODT (REMERON SLTB) Desvenlafaxine (PRISTIQ) Nefazodone Trazodone</p>	<p>Brand Name Products EMSAM (Selegiline TD Patch) OLEPTRO (Trazodone SR 24HR) VIIBRYD (Vilazodone) BRINTELLIX (Vortioxetine) KHEDEZLA (Desvenlafaxine) FETZIMA (Levomilnacipran) FORFIVO XL (Bupropion SR 24HR) APLENZIN (Bupropion SR 24HR) IRENKA (Duloxetine 40mg Caps) PEXEVA (Paroxetine) BRISDELLE (Paroxetine Mesylate Cap 7.5mg)</p>

Bladder Control Medications/Benign Prostatic Hypertrophy (BPH)

Preferred	Non-Preferred (Prior Authorization Required)
<p>Bladder Products Oxybutynin 5mg & 10mg ER, Syrup Tolterodine & Tolterodine SR 24HR GELNIQUE (Oxybutynin TD Gel) VESICARE (Solifenacin Tab)</p> <p>BPH Products Terazosin Doxazosin (Cardura) Tamsulosin (Flomax) Rapaflo (Silodosin) Alfuzosin (Uroxatrol) Finasteride (Proscar)</p>	<p>Bladder Products TOVIAZ TAB 4mg & 8mg (Fesoterodine) ENABLEX TAB 7.5mg & 15mg (Darifenacin) OXYTROL PATCH (Oxybutynin Td Biweekly) MYRBETRIQ (Mirabegron Tab SR 24) DETROL & DETROL LA (Tolterodine) SANCTURA XR (Tropium) DITROPAN XL (oxybutinin)</p> <p>BPH Products CARDURA XL (Doxazosin) CIALIS (Tadalafil)</p>

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Anticonvulsants

Preferred	Non-Preferred (Prior Authorization Required)
<p>Generic Products</p> <p>Ethotoin (PEGANONE)</p> <p>Fosphenytoin Inj (CEREBYX Inj)</p> <p>Phenytoin (DILANTIN Cap, Chew, Susp)</p> <p>Ethosuximide (ZARONTIN)</p> <p>Divalproex Tab Dr (DEPAKOTE)</p> <p>Divalproex Cap Sprinkle (DIVALPROEX)</p> <p>Divalproex Tab SR 24 HR (DIVALPROEX ER)</p> <p>Valproate Sodium Syrup (DEPAKENE Syrup)</p> <p>Valproic Acid Cap (DEPAKENE Cap)</p> <p>Valproic Acid DR (STAVZOR Cap)</p> <p>Carbamazepine (TEGRETOL Tab, Chew, Spr)</p> <p>Carbamazepine SR 12HR (CARBATROL Cap)</p> <p>Carbamazepine SR 12HR (TEGRETOL-XR Tab)</p> <p>Gabapentin (NEURONTIN Cap, Tab, Sol)</p> <p>Gabapentin Susp 25 mg/mL (FANATREX COMPD KIT)</p> <p>Lamotrigine (LAMICTAL Tab, Chew, ODT)</p> <p>Lamotrigine SR 24HR (LAMICTAL XR Tab)</p> <p>Levetiracetam (KEPPRA Tab, Sol)</p> <p>Levetiracetam SR 24HR (KEPPRA XR Tab)</p> <p>Oxcarbazepine (TRILEPTAL Tab, Susp)</p> <p>Primidone (MYSOLINE Tab)</p> <p>Topiramate (TOPAMAX Tab, Spr)</p> <p>Zonisamide (ZONEGRAN Cap)</p> <p>Tiagabine (GABITRIL)</p> <p>Brand Name Products</p> <p>LYRICA CAP, SOL (Pregabalin)</p> <p>CELONTIN (Methsuximide)</p>	<p>Brand Name Products</p> <p>ONFI (Clobazam)</p> <p>FELBATOL (Felbamate)</p> <p>SABRIL (Vigabatrin)</p> <p>FYCOMPA (Perampanel)</p> <p>OXTELLAR XR (Oxcarbazepine SR 24HR)</p> <p>TROKENDI XR (Topiramate Cap SR 24HR)</p> <p>QUDEXY XR (Topiramate Spr Cap ER 24HR)</p> <p>POTIGA (Ezogabine)</p> <p>APTIOM Tab (Eslicarbazepine)</p> <p>VIMPAT (Lacosamide)</p> <p>BANZEL Tab, Susp (Rufinamide)</p> <p>GRALISE (Gabapentin Tab)</p> <p>HORIZANT (Gabapentin Enacarbil)</p> <p>SPRITAM (Levetiracetam ODT)</p>

NSAIDS (Non-Narcotic Pain and Inflammation Relievers)

Preferred	Non-Preferred (Prior Authorization Required)
<p>Generic Products</p> <p>Diclofenac Tab & DR Tab, 1% gel, 1.5% solution</p> <p>Etodolac Tab & ER</p> <p>Flurbiprofen Tab</p> <p>Ibuprofen Tab & Susp</p> <p>Indomethacin Tab & ER Cap</p> <p>Ketoprofen Tab & ER Cap</p> <p>Meclofenamate Cap</p> <p>Mefenamic Cap</p> <p>Meloxicam Tab & Susp</p> <p>Nabumetone</p> <p>Naproxen Tabs, DR & susp</p> <p>Oxaprozin</p> <p>Piroxicam</p> <p>Sulindac</p> <p>Tolmetin</p> <p>Diclofenac/misoprost ER Tab</p> <p>Celebrex (Celecoxib)</p>	<p>Brand Name Products</p> <p>PONSTEL (Mefenamic Acid Cap)</p> <p>NAPRELAN (Naproxen Tab SR)</p> <p>ZORVOLEX (Diclofenac 18 & 35mg)</p> <p>ZIPSOR (Diclofenac 25 & 50mg)</p> <p>SPRIX (Ketorolac Nasal Spray)</p> <p>DUEXIS (Ibuprofen/Famotidine)</p> <p>VIMOVO (Naproxen/Esomeprazole)</p> <p>TIVORBEX (Indomethacin Cap)</p> <p>PONSTEL (Mefenamic Acid Cap)</p> <p>PRASTERA (Prasterone Cap & Ibuprofen Tab)</p> <p>FLECTOR (Diclofenac Epolamine Patch 1.3%)</p> <p>PENNSAID (Diclofenac Topical Soln 2%)</p> <p>REXAPHENAC (Diclofenac Sodium Cream 1%)</p>

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Opioids/Narcotics

Preferred	Non-Preferred (Prior Authorization Required)
<p>Generic Products</p> <p>Fentanyl Patch (DURAGESIC) Fentanyl Cit Inj (SUBLIMAZE) Hydromorphone (DILAUDID) Levorphanol Tartrate Tab Meperidine (DEMEROL) QL Applies Methadone Tabs, Sol (DOLOPHINE) Morphine Sulf Tab, Sol (MS CONTIN) Morphine Sulf Beads SR 24HR (AVINZA) Oxycodone IR Tabs, Sol Oxymorphone HCL Tab (OPANA) Tramadol & Tramadol ER (ULTRAM & ER) Buprenorphine Hcl Inj (BUPRENEX) Butorphanol Nasal Soln & Inj Nalbuphine Hcl Inj Pentazocine/Naloxone Tab Oxycodone/Acetaminophen Tab Oxycodone/Aspirin Acetaminophen/Codeine Hydrocodone/Acetaminophen EMBEDA (Morphine/Naltrexone Cap CR) OXYCONTIN (Oxycodone Tab ER) Oxymorphone Tab ER</p>	<p>Brand Name Products</p> <p>ACTIQ (Fentanyl OT Loz) SUBSYS (Fentanyl Sublingual Spray) FENTORA (Fentanyl Citrate Buccal Tab) ABSTRAL (Fentanyl Citrate SL Tab) LAZANDA (Fentanyl Citrate Nasal Spray) IONSYS (Fentanyl Hcl Iontophoretic TD System) OPANA ER (Oxymorphone Tab ER) EXALGO (Hydromorphone Tab ER 24HR) ZOHYDRO ER (Hydrocodone Cap SR 12HR) HYSINGLA ER (Hydrocodone Tab ER 24HR Deter) INFUMORPH (Morphine Sulfate Microinfusion Inj) KADIAN (Morphine Sulf Cap SR 24HR) OXAYDO (Oxycodone Hcl Tab Abuse Deter) NUCYNTA & ER (Tapentadol) CONZIP (Tramadol Cap SR 24HR Biphasic Release) BUTRANS (Buprenorphine TD Patch Weekly) TALWIN (Pentazocine Inj) PRIMLEV (Oxycodone/Acetaminophen Tab 10/300) XARTEMIS XR (Oxycodone/Acetaminophen Tab CR 7.5/325) CAPITAL/COD (Acet W/ Codeine Susp 120/12 mg/5mL) BUPAP TAB 50/300MG (Butalbital/Acetaminophen) ALLZITAL (Butalbital-Acetaminophen Tab 25-325)</p>

Anti-Infectives

Preferred	Non-Preferred (Prior Authorization Required)
<p>All generic low cost agents, including but not limited to:</p> <p>Amoxicillin/Clavulanate Penicillin Ampicillin Doxycycline Minocycline Tetracycline Ciprofloxacin Azithromycin Levofloxacin Moxifloxacin Ofloxacin, Metronidazole Trim/Sulfa DS, etc.</p>	<p>Brand Name Products</p> <p>DIFICID (Fidaxomicin Tab) ADOXA (Doxycycline Monohydrate Cap) ACTICLATE (Doxycycline Hyclate Tab) DORYX (Doxycycline Hyclate Tab DR) MONODOX (Doxycycline Monohydrate Cap) TARGADOX (Doxycycline Hyclate Tab) SOLODYN (Minocycline Tab SR) SIRTURO (Bedaquiline Tab) QUALAQUIN (Quinine Cap) COARTEM (Artemether/Lumefantrine Tab) VANCOCIN (Vancomycin Cap, Susp) KETEK (Telithromycin Tab) ZYVOX (Linezolid Tab, Susp, IV) SIVEXTRO (Tedizolid Tab) CRESEMBA (Isuvuconazonium Cap) XIFAXAN (Rifaximin) PRIMSOL (Trimethoprim solution 50mg/5ml) INVANZ (Ertapenem IV) OTIPRIO (Ciprofloxacin Intratympanic Susp) IMPAVIDO (Miltefosine Cap)</p>

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Antifungals Oral

Preferred	Non-Preferred (Prior Authorization Required)
<p>Generic Products Flucytosine Cap 250mg (ANCOBON) Griseofulvin Tab 500mg, Tab 125, Susp (GRIFULVIN V) Nystatin 50,000, 100,000U (BIO-STATIN CAP) Terbinafine Tab 250mg (LAMISIL) Ketoconazole Tab 200mg Fluconazole TAB 50mg, 100mg, 150mg, 200mg (DIFLUCAN)</p>	<p>Brand Name Products SPORANOX (Itraconazole) Cap 100mg, Pulsepak, Sol ONMEL (Itraconazole) Tab 200mg VFEND (Voriconazole) Tab 50mg, 200mg, Susp LAMISIL GRANULES (Terbinafine) PKTS 125mg, 187.5mg NOXAFIL (Posaconazole) Tab 100mg, Susp ORAVIG (Miconazole Buccal Tab)</p>

Oral Allergy Medications

Preferred	Non-Preferred (Prior Authorization Required)
<p>Generic Products Loratadine (Claritin) Desloratadine (Clarinox) Cetirizine (Zyrtec) Fexofenadine (Allegra) Levocetirizine (Xyzal)</p>	<p>Brand Name Products DICOPANOL (Diphenhydramine Susp) GRASTEK (Mixed Pollen Extract) RAGWITEK (Mixed Pollen Extract) ORALAIR (Mixed Pollen Extract)</p>

Intra-Nasal Allergy Medications

Preferred	Non-Preferred (Prior Authorization Required)
<p>Generic Products Flunisolide Budesonide (RHINOCORT AQ) Fluticasone spr (FLONASE) Triamcinolon (NASACORT AQ) Ipratropium spr (ATROVENT) Azelastine 0.1% (ASTELIN) Azelastine 0.15% (ASTEPRO) Olopatadine spr (PATANASE) Veramyst (FLUTICASONE) Nasonex (MOMETASONE)</p>	<p>Brand Name Products DYMISTA NS (Azelastine/Fluticasone) QNASL (Beclomethasone Aer) BECONASE AQ (Beclomethasone) RHINOCORT AQ (Budesonide) OMNARIS (Ciclesonide) ZETONNA (Ciclesonide Aer)</p>

Ophthalmic Allergy Medications

Preferred	Non-Preferred (Prior Authorization Required)
<p>Generic Products Pemirolast (ALAMAST) Epinastine (ELESTAT) Azelastine (OPTIVAR) Pataday (OLOPATADINE) Patanol (OLOPATADINE)</p>	<p>Brand Name Products ALOMIDE (Lodoxamide) ALOCRI (Nedocromil) BEPREVE (Bepotastine) LASTACAF (Alcaftadine) PAZEO (Olopatadine) EMADINE (Emedastine)</p>

Miscellaneous Cold and Cough Medications

<p>Various generic cold and cough agents.</p>	<p>Brand Name Products KARBINAL ER (Carbinoxamine Susp) VITUZ (Hydrocodone/Chlorpheniramine) TUSSICAPS (Hydrocodone/Chlorphen) OBREDON (Hydrocodone/Guaifenesin) ZYFLO, ZYFLO CR (Zileuton Tab) TUZISTRA XR (Codeine/Chlorphen Susp)</p>
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Anti-Emetics (Nausea & Vomiting)

Preferred	Non-Preferred (Prior Authorization Required)
<p>Generic Products Ondansetron ODT Ondansetron Tab & Inj (ZOFTRAN) Ondansetron Sol (ZOFTRAN) Granisetron Tab (GRANISOL)</p>	<p>Brand Name Products ANZEMET (Dolasetron Tab) SANCUSO (Granisetron TD Patch) ZUPLENZ (Ondansetron Film) EMEND (Aprepitant Ca[s]) VARUBI (Rolapitant Caps) AKYNZEO (Netupitant/Palonosetron Caps) MARINOL (Dronabinol Caps) CESAMET (Nabilone Cap) DICLEGIS (Doxylamine/Pyridoxine Tab)</p>

Testosterone Replacement Therapy

Preferred	Non-Preferred (Prior Authorization Required)
<p>Please note all Testosterone Replacement products require clinical review to establish medical necessity.</p> <p>Injectable Products Testosterone injection</p> <p>Topical Products Testosterone Gel 1% Generic ANDROGEL 1.62% ANDRODERM TESTIM GEL 1%</p>	<p>Brand Name Testosterone Products AXIRON SOL 30MG/ACT FORTESTA GEL 10MG/ACT VOGELXO GEL NATESTO GEL TESTRED, ANDROID CAP 10MG METHITEST TAB 10MG STRIANT BUCCAL FIRST-TESTOS CRE MC 2% FIRST-TESTOS OIN 2% TESTONE CIK KIT 200MG/ML</p>

Gastro-intestinal Agents

Preferred	Non-Preferred (Prior Authorization Required)
<p>Generic Anti – Inflammatory Products: Balsalazide Cap 750MG Mesalamine Ene 4GM Mesalamine KIT 4GM Sulfasalazin Tab 500MG Sulfasalazin Tab 500MG DR</p> <p>Brand Anti – Inflammatory Products: LIALDA (Mesalamine DR Tab 1.2gm) APRISO (Mesalamine Cap SR 24HR 0.375 gm) SFROWASA (Mesalamine (SF) Enema 4 gm/60mL) CANASA (Mesalamine Suppos 1000 mg)</p> <p>PPis: Omeprazole Lansoprazole Pantoprazole Esomeprazole</p> <p>Pancreatic Enzymes: ZENPEP CREON</p>	<p>Anti – Inflammatory: ASACOL HD (Mesalamine Tab DR 800 mg) DELZICOL (Mesalamine Cap DR 400 mg) DIPENTUM (Olsalazine Sodium Cap 250 mg) GIAZO (Balsalazide Disodium Tab 1.1 gm) PENTASA (Mesalamine Cap CR 250, 500 mg) ROWASA (Mesalamine Rectal Enema 4 gm & Cleanser Wipe KIT)</p> <p>PPis: PREVACID ODT (Lansoprazole) PRILOSEC POWDER PKT (Omeprazole Susp Packet) PROTONIX PAK (Pantoprazole Susp Packet) ACIPHEX SPR CAP (Rabeprazole Capsule Sprinkle) HELIDAC (Metronidaz Tab/Tetracyc Cap/Bis Sub) ZEGERID POW (Omeprazole/Na Bicarb Susp Pack)</p> <p>Pancreatic Enzymes: VIOKACE PANCREAZE PERTZYE PANCREAZE ULTRESA</p>

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Topical Corticosteroids & Miscellaneous Dermatological Products

Preferred	Non-Preferred (Prior Authorization Required)
<p> Alclometasone Cream, Oint 0.05% Amcinonide Cream, Lot, Oint 0.1% Betamethasone Dip Cream, Lot, Oint 0.05% Betamethasone Dip Aug Cream, Gel, Lot, Oint 0.05% Betamethasone Val Cream, Lot, Oint 0.1% Clobetasol Prop Sol, Cream, Gel, Oint 0.05% Clobetasol Prop Lot, Shampoo 0.05% Clobetasol Prop Emollient Cream 0.05% Desonide Lot, Oint 0.05% Desoximetasone Cream 0.25% Desoximetasone Gel 0.05% Fluocinolone Body, Scalp Oil, Sol, Cre 0.01% Fluocinolone Acet Cream, Oint 0.025% Fluocinonide Sol, Cream, Gel, Oint 0.05% Fluocinonide Emulsified Cream 0.05% Fluticasone Prop Cream 0.05% Fluticasone Prop Oint 0.005% Halobetasol Prop Cream, Oint 0.05% Hydrocortisone Cream 1% Hydrocortisone Cream 2.5% Hydrocortisone Gel 1% Hydrocortisone Lotion 2% Hydrocortisone Oint 0.5% Hydrocortisone Oint 1% Hydrocortisone Oint 2.5% Hydrocortisone Val Cream, Oint 0.2% HC Butyr Soln, Cream, Oint 0.1% (LOCOID) Mometasone Fur Sol, Cream, Oint 0.1% Prednicarbate Cream, Oint 0.1% Triamcinolone Acet Cream, Lot, Oint 0.025% Triamcinolone Acet Cream, Lot, Oint 0.1% Triamcinolone Acet Oint 0.05% Pramoxine/HC Cream, Lot 1/1% Pramoxine/HC Cream, Lot 1/2.5% EPIFOAM Aer 1% (Pramoxine/HC Foam 1/1%) PRAMOSONE Lot 1% (Pramoxine/HC 1/1%) PRAMOSONE Lot 2.5% (Pramoxine/HC 1/2.5%) </p> <p> CALCITRENE (Calcipotriene OIN 0.005%) DOVONEX SCALP CRE, SOL (Calcipotriene SOL 0.005%) EFUDEX (Fluorouracil Cream 5%) </p>	<p> LUXIQ Aer 0.12% (Betamethasone Val Foam 0.12%) SERNIVO SPRAY (Betamethasone Dipropionate spray 0.05%) CLOBEX Spr 0.05% (Clobetasol Prop Spray 0.05%) OLUX, OLUX-E Aer 0.05% (Clobetasol Prop Foam 0.05%) CLODERM Cre 0.1% (Clocortolone Piv Cream 0.1%) DESONATE Gel 0.05% (Desonide Gel 0.05%) VERDESO Aer 0.05% (Desonide Foam 0.05%) TOPICORT Spray, Ointment 0.25% (Desoximetasone 0.25%) TOPICORT Cream, Ointment 0.05% (Desoximetasone 0.05%) APEXICON E Cream 0.05% ((Diflorasone Cream 0.05%) PSORCON Cream, Ointment 0.05% (Diflorasone 0.05%) CAPEX Shampoo 0.01% (Fluocinolone 0.01%) VANOS Cre 0.1% (Fluocinonide Cream 0.1%) CORDRAN Tape, Cream, Lot, Oint 0.05% (Flurandrenolide 0.05%) CUTIVATE Lot 0.05% (Fluticasone Prop Lot 0.05%) TEXACORT (Hydrocortisone Soln 2.5%) ADV ALLERGY KIT (Hydrocortisone Cream KIT 2.5%) PANDEL Cre 0.1% (Hydrocortisone Prob 0.1%) MICORT-HC Cream 2.5% (Hydrocortisone Acetate Cream 2.5%) LOCOID Lot, Lipocream 0.1% (Hydrocortisone Butyrate 0.1%) KENALOG Spray (Triamcinolone Acet Aer Sol) </p> <p> Combination /Miscellaneous Combo DERMASORB HC KIT 2% (HC Lot 2% & Cleanser Liq) PEDIADERM HC KIT (HC Lot 2% & Emollient Cream KIT) DERMASORB TA KIT 0.1% (TA Cream 0.1% & Cleanser Liq) PEDIADERM TA KIT (HC Cream 0.1% & Emollient Cream KIT) PRAMOSONE OIN 1%, 2.5% (Pramoxine/HC Oint 1/1%) PRAMOSONE E CRE 1/2.5% (Pramoxine/HC Cream 1/2.5%) NOVACORT GEL (HC/Pramoxine/Aloe) CLODAN or SYNALAR KIT 0.05% (Clobetasol Prop Shampoo 0.05% KIT) HALONATE KIT (Halobetasol Prop Oint 0.05% & Ammon Lac Foam 12%) ULTRAVATE KIT PAC (Halobetasol Prop Cre 0.05% & Ammon Lac Lot 12%) ULTRAVATE X KIT 0.05/10% (Halobetasol Prop Cream & Lactic Acid Cream) ULTRAVATE LOTION 0.05% (Halobetasol Propionate Lotion 0.05%) TRIDERMA CREAM FORTE or VALIDERM (calcitriol/fluticasone/tacrolimus) DERMACINRX (Triam Acet Cr 0.1% & Dimeth Cr 5% & Silicone Tape) ADV ALLERGY KIT COLLECTION (Hydrocortisone Cream Kit 2.5%) </p> <p> Topical Psoriasis Products: TACLONEX SUS, OIN (Calcipotriene/Betameth Diprop 0.005/0.064%) ENSTILAR AER FOAM (Calcipotriene/Betamethasone Diprop 0.005-0.064%) CARAC (Fluorouracil Cream 0.5%) SOLARAZE (Diclofenac Sodium (Actinic Keratoses) Gel 3%) PICATO (Ingenol Mebutate 0.015% & 0.05%) SORILUX (Calcipotriene Foam 0.005%) TAZORAC CREAM, GEL (Tazarotene 0.05%, 0.1%) </p> <p> Miscellaneous Products: PRUDOXIN (Doxepin HCl Cream 5%) OXSORALEN (Methoxsalen) REGANEX (Becaplermin) UREVAZ (Urea Cream 44%) ZYCLARA PUMP (Imiquimod Cream 2.5%, 3.75%) SANTYL (Collagenase Oint) </p>

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Antifungals Topical

Preferred	Non-Preferred (Prior Authorization Required)
<p><u>OTC available but may not be covered:</u> Tolnaftate Sol, Pwd, Aer, Cre 1% Terbinafine Cream 1% (OTC) Miconazole 2% Cre, Aer, Oint, Sol</p> <p><u>RX:</u> Ciclopirox 8% Sol, 0.77% Gel, 1% Shampoo, Ciclopirox 0.77% Susp, Cream Nystatin Cream, Oint Clotrimazole Cream 1% Econazole Cream 1% Ketoconazole Cream 2% Clotrimazole/Betamethasone Cream 1/0.05% Clioquinol/HC Cream 3/0.5% Iodoquinol/HC Cream 1% Nystatin/Triamcinolone Cream, Oint</p>	<p><u>Brand Name Products</u> KERYDIN SOL 5% (Tavaborole) JUBLIA SOL 10% (Efinaconazole) LUZU (Luliconazole) NAFTIN 1% and 2% CREAM, GEL (Naftifine) CNL8 NAIL KIT (Ciclopirox) PEDIPIROX-4 KIT NAIL (Ciclopirox) PEDIPAK (Ciclopirox Soln 8% & Urea Cream 20%) CICLODAN CREAM KIT (Ciclopirox) CICLODAN SOLUTION KIT (Ciclopirox) ECOZA AER 1% (Econazole Foam 1%) XOLEGEL (Ketoconazole Gel 2%) KETODAN KIT 2% (Ketoconazole) ALOQUIN GEL 1.25/1% (Iodoquin, Aloe) ACTIVE-PREP CRE KIT (Itraconazole/Phenytoin) ALCORTIN A GEL (Iodoquinol/Hydrocortisone/Aloe) VYTON CRE 1/1.9% (Iodoquinol/Hydrocortisone/Aloe) VUSION OIN (Miconazole/Petrolatum) OXISTAT CRE, LOT 1% (Oxiconazole) ERTACZO CREAM (Sertaconazole 2%)</p>

Miscellaneous medications requiring prior authorization:

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| <ul style="list-style-type: none"> • COVARYX (Esterified Estrogens & Methyltestosterone Tab) • EEMT HS (Esterified Estrogens & Methyltestosterone Tab) • EXELON PATCH, SOLUTION (Rivastigmine) • NUEDEXTA (Dextromethorphan HBr-Quinidine Sulfate Cap) • PROVIGIL (Modafinil) • NUVIGIL (Armodafinil) • ELMIRON (Pentosan Cap) • LITHOSTAT (Acetohydroxamic acid Tab) • THIOLA (Tiopronin) • PROSTIN E2 (Dinoprostone Vaginal Suppos) • BINOSTO TAB (Alendronate Sodium Effervescent Tab 70mg TAB) • SITAVIG (Acyclovir Buccal Tab) • RIDAURA (Auranofin Cap) • MIRAPEX ER (Pramipexole Tab SR) • REQUIP XL (Ropinirole Tab SR 24HR) • RYTARY (Carbidopa & Levodopa ER Cap) • RESTASIS (Cyclosporine (Ophth) Emulsion 0.05%) • EVOXAC (Cevimeline Cap 30MG) • 8-MOP (Methoxsalen Cap 10 MG) | <ul style="list-style-type: none"> • OXSORALEN (Methoxsalen Rapid Cap) • SAVELLA (Milnacipran Tab) • MITIGARE (Colchicine Cap) • ULORIC (Febuxostat) • DYANAVAL XR (Amphetamine Susp Extended Release 2.5 MG/ML) • QUILLICHEW (Methylphenidate Chew Tab Extended Release) • SORIATANE CAPS (Acitretin Cap) • LACRISERT (Artificial Tear Ophth Insert) • GASTROCROM (Cromolyn Sodium Oral Conc) • FULYZAQ (Crofelemer Tab Delayed Release) • METOZOLV ODT (Metoclopramide ODT) • LOTRONEX (Alosetron Tab) • LINZESS (Linaclotide Cap) • ENTEREG (Alvimopan Cap) • RELISTOR INJ (Methylnaltrexone Bromide Inj) • MOVANTIK (Naloxegol Oxalate Tab) • UCERIS (Budesonide Tab SR 24H) • RAYOS (Prednisone Tab Delayed Release) |
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Optional Coverage Categories

ACNE/ROSACEA	
Preferred	Non-Preferred (Prior Authorization Required)
<p>DIFFERIN CRE, GEL 0.1%, GEL 0.3% (Adapalene)</p> <p>AVITA, RETIN-A CRE 0.025% (Tretinoin) RETIN-A CRE 0.05%, 0.1% (Tretinoin) RETIN-A GEL, AVITA GEL 0.01%, 0.025% (Tretinoin)</p> <p>Benzoyl Perox Liq 2.5% (BP WASH) Benzoyl Perox 5% Liq (BENZAC AC 5% WASH) Benzoyl Perox 7% Liq (SE BPO, BP WASH, BENZEPRO, etc) Benzoyl Perox Foam 10% (BP FOAMING WASH) Benzoyl Perox 5.25% (BENZIQ 5.25%) Benzoyl Perox Foam 5.3% (BP FOAM, BENZEPRO, etc) Benzoyl Perox Foam 9.8% (BENZEFOAM AER 9.8%) Benzoyl Perox Gel 2.75%, 5.25% (BENZIQ LS GEL) Benzoyl Perox Gel 4%, 8% (BPO GEL) Benzoyl Perox Gel 10% (CLEARPLEX X) Benzoyl Perox Lot 6% (OSCION CLNSR) Benzoyl Perox Lot 8% (ZACLIR)</p> <p>Clindamycin Phos 1% Sol (CLEOCIN-T) Clindamycin Phos 1% Gel (CLEOCIN-T, CLINDAGEL, CLINDAMAX) Clindamycin Phos 1% Lot (CLEOCIN-T LOT 1%) Clindamycin Phos Swabs (CLEOCIN-P PAD 1%, CLINDACIN) NEUAC, DUAC GEL 1.2/5% (Clindamycin/BP (Refrig) Gel)</p> <p>Erythromycin 2% Soln Erythromycin 2% Gel (ERYGEL GEL) Erythromycin 2% Oin (AKNE-MYICIN OIN) Erythromycin 2% Pads (ERY PAD)</p> <p>BP Lot & Hyaluronate Gel 0.2% Kit (ZACARE KIT 4%, 8%) BP/Hydrocortisone Lot (VANOXIDE/HC 5/0.5%) Sulfacetamide 10% (KLARON LOT 10%) Sulfur/BP 3%/6% (NUOX GEL) Sulfur 2% (SULFOAM SHAMPOO) Sulfacetamide Na/Sulfur Wash 9/4% (SUMAXIN, ZENCIA) Sulfacetamide Na/Sulfur Wash 9/4.5% (SUMADAN) Sulfacetamide Na/Sulfur Emulsion 10/1% (CERISA, BP 10-1) Sulfacet/Sulfur Emulsion 10/5% (AVAR, ROSANIL, PRASCION) Sulfacetamide/Sulfur Susp 10/5% Sulfacetamide/Sulfur Susp 8/4% (SUMAXIN TS) Sulfacet/Sulfur Foam 10/5% (CLARIFOAM EF, SSS AER 10/5%) Sulfacetamide/Sulfur Lotion 10/5% Sulfacet/Sulfur/Urea 10/4% (CLARIS, BP CLEANSING) Sulfacet/Sulfur Urea Emuls 10/5% Sulfacet/Sulfur Urea Gel 10/5% Sulfacet/Sulfur Wash 9/4.5% & Skin Cleanser (SUMADAN KIT) Sulfacet/Sulfur Emul 10/5% & Skin Cleanser (ROSANIL KIT) Sulfacetamide/Sulfur/Sunscreen (PRASCION RA CRE 10/5%)</p>	<p>DIFFERIN LOT 0.1% (Adapalene) AZELEX CRE 20% (Azelaic Acid) FABIOR AER 0.1% (Tazarotene Foam 0.1%) ACZONE GEL 5%, 7.5% (Dapsone Gel 5%)</p> <p>ABSORICA 10, 20, 25, 30, 35, 40MG (Isotretinoin) AMNESTEEM 10MG, 20, 40MG (Isotretinoin) CLARAVIS 10, 20, 30, 40MG (Isotretinoin) MYORISAN 10, 20, 30, 40MG (Isotretinoin) ZENATANE 10, 20, 30, 40MG (Isotretinoin)</p> <p>TRETIN-X CRE 0.0375% (Tretinoin) TRETIN-X CRE 0.075% (Tretinoin) TRETIN-X CRE KIT (Tretinoin 0.025% Cleanser & Moisturizer Kit) RETIN-A MICR GEL 0.04%, 0.08%, 0.1% (Tretinoin Microsphere)</p> <p>EPIDUO GEL 0.1/2.5% (Adapalene/Benzoyl Peroxide) EPIDUO FORTE GEL 0.3/2.5% (Adapalene/Benzoyl Peroxide) RIAX AER 5.5%, 9.5% (Benzoyl Peroxide foam) BPO, BENZEPRO CLOTHS 3%, 6%, 9% (Benzoyl Perox Cloths)</p> <p>CLINDAP-T, TRISEON (Adapalene/Clindamycin Cream 0.3/1% Kit) BENZACLIN GEL 1/5% (Clindamycin Phos /Benzoyl Perox) EVOCLIN AER 1% (Clindamycin Foam) ACANYA GEL 1.2/2.5% (Clindamycin/Benzoyl Perox) ONEXTON GEL 1.2/3.75% (Clindamycin/Benzoyl Perox) CLINDACIN KIT PAC 1% (Clindamycin Swab 1% & Cleanser KIT) VELTIN, ZIANA GEL (Clindamycin/Tretinoin Gel 1.2/0.025%) NEUAC KIT 1.2/5% (Clindamycin/BP Gel 1.2/5% Moisturizer CR KIT) CLINOIN (Clindamycin/Tretinoin/Cholesty Crm 1.25/0.025/1%)</p> <p>INOVA KIT 4%, 8% (BP Pad 4% & Vitamin E Topical 5% KIT) BENZAMYCIN GEL 5/3% (BP/Erythromycin)</p> <p>PLEXION LIQ, CRE, LOT, PAD 9.8/4.8% (Sulfacetamide/Sulfur) AVAR LS LIQ 10/2% (Sulfacetamide/Sulfur Cleanser 10/2%) AVAR-E LS CRE 10/2% (Sulfacetamide/Sulfur) SE 10-5 SS CRE 10/5% (Sulfacetamide/Sulfur) AVAR AER 9.5/5% (Sulfacetamide/Sulfur) AVAR LS AER 10/2% (Sulfacetamide/Sulfur) AVAR PAD 9.5/5% (Sulfacetamide/Sulfur Pads) AVAR LS PAD 10/2% (Sulfacetamide/Sulfur Pads) SUMAXIN (Sulfacetamide/Sulfur Pads) ROSULA LIQ 10/4.5% (Sulfacetamide/Sulfur) ROSULA, PRASCION FC PAD 10/5% (Sulfacetamide/Sulfur) SUMAXIN CP KIT (Sulfac /Sulfur Pad 10/4% & Skin Cleanser KIT) INOVA 4/1 KIT, SUMADAN XLT KIT (Sulfac/Sulfur 9/4.5% Sunscreen)</p>

BP = Benzoyl Peroxide

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ACNE/ROSACEA (Continued)

Preferred	Non-Preferred (Prior Authorization Required)
<p> ROSADAN CRE (Metronidazole 0.75%) ROSADAN GEL (Metronidazole 0.75%) METROGEL (Metronidazole Gel 1%) METROLOTION (Metronidazole 0.75%) </p> <p> ATRALIN (Tretinoin Gel 0.05%) BENZAMYCIN GEL PAK (Benzoyl Peroxide/Erythromycin 5/3%) SOOLANTRA CRE 1% (Ivermectin) </p>	<p> MIRVASO GEL 0.33% (Brimonidine) ORACEA 40MG CAP (Doxycycline/Rosacea) FINACEA AER, GEL (Azelaic Acid Foam 15%, Gel) </p> <p> NORITATE (Metronidazole Cream 1%) ROSADAN GEL KIT 0.75% (Metronidazole Cleanser KIT) ROSADAN CRE KIT 0.75% (Metronidazole Cleanser KIT) </p>

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