

# Prescription Program

Drug List/Formulary — To be used by members who have a tiered drug plan.

*Anthem Blue Cross and Blue Shield prescription drug benefits include medications available on the Anthem Drug List/Formulary. Our prescription drug benefits can offer potential savings when your physician prescribes medications on the drug list/formulary.*

## For Kentucky Residents Only:

In selecting medications for the prescription drug formulary, the therapeutic efficacy and cost effectiveness are addressed for each category. All therapeutic categories are represented on the formulary by at least one medication. When a closed formulary is in effect, only medications that are included on the formulary are a covered service. In certain clinical situations, a member may require use of a non-formulary product. Anthem has criteria that permits a member to obtain a non-formulary medication in a closed formulary plan. If specific criteria are met, a member can receive a non-formulary drug for a formulary copay. The criteria preserves the clinical integrity of the drug formulary and provides a process by which deviations from the formulary may be allowed. An appeals process is in place for any medications that do not meet the criteria.



For more information, please visit [anthem.com](http://anthem.com).

- If you have additional questions about your prescription benefits please call the Member Services number on your ID card
- Speech and hearing impaired (TDD/TTY users) should call 800-221-6915, Monday – Friday, 8:30 a.m. – 5:00 p.m., ET
- For the most current version of this prescription drug list, please visit [anthem.com](http://anthem.com)
- Bring a copy of this drug list/formulary to your next doctor's visit to assist in selecting the lowest cost medications

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## KEY

**Tier 1** – Lowest copayment – Drugs offering the greatest value within a therapeutic class. Some of these are generic equivalents of brand name drugs.

**Tier 2** – Medium copayment – Drugs on this tier are generally the more affordable brand-name drugs. Other drugs are on this tier because they are “preferred” within their therapeutic classes, based on clinical effectiveness and value

**Tier 3** – Highest copayment – These are higher cost brand-name drugs. Some Tier 3 drugs may have generics or equivalents in Tier 1. In addition, some drugs on this tier may have been evaluated to be less cost-effective than equivalent drugs on lower tiers.

**Tier 4** – Many drugs on this tier are “specialty” drugs used to treat complex, chronic conditions and may require special handling and/or management. For members who do not have a Tier 4 plan, these drugs are found under Tier 1, 2 or 3.

### Tier 1

Acarbose	Azathioprine	Cephalexin
Acetabulol	Azithromycin QL	Chloral hydrate
Acetaminophen/ caffeine/butalb	Bacitracin zinc/polymyxin B	Chlordiazepoxide
Acetazolamide, SR	Bacitracin/polymyxin/ neomycin-hc oph oint	Chlorhexidine gluconate
Acetic acid	Baclofen	Chloroquine 250mg
Acetic acid/hydrocortisone	Balsalazide	Chlorothiazide
Acetic acid/aluminum acetate	Belladonna/phenobarbital	Chlorphen/pyrilamine/ phenylephrine
Acetic acid otic	Benazepril, HCTZ	Chlorpheniramine/ pseudoephedrine
Acetylcysteine	Benzoyl peroxide	Chlorpromazine tab
Acyclovir	Benzoyl peroxide/ erythromycin	Chlorpropamide
Albuterol	Benzotropine	Chlorthalidone
Albuterol/ipratropium	Betamet diprop/ prop gyl	Chlorzoxazone
Alendronate QL	Betamethasone dipropionate	Cholestyramine, light
Allopurinol	Betamethasone valerate	Chorionic gonadotropin
Alprazolam	Betaxolol	Ciclopirox
Amantadine	Bethanechol	Cimetidine
Amcinonide	Bisoprolol	Ciprofloxacin QL
Amiloride	Bisoprolol/HCTZ	Citalopram DO, QL
Amiloride/ hydrochlorothiazide	Bromocriptine	Clemastine fumarate
Aminophylline	Budeprion XL DO, QL	Clindamycin
Amiodarone	Bumetanide	Clobetasol
Amitriptyline	Bupropion	Clomiphene
Amitriptyline/perphenazine	Buspiron	Clomipramine
Amitriptyline/ chlordiazepoxide	Butalbital Compound w/Codeine	Clonazepam
Amlodipine DO, QL	Butorphanol tartrate 10mg/ml N.S. QL	Clonidine
Amlodipine/benazepril	Cabergoline	Clorazepate
Amnesteem QL	Calcipotriene Soln.	Clotrimazole/ betamethasone
Amoxapine	Calcium Acetate	Clozapine
Amoxicillin	Captopril, HCTZ	Codeine sulfate
Amoxicillin/ clavulanate QL	Carbamazepine	Codeine/APAP QL
Amphetamine	Carbidopa/levodopa	Colchicine
Ampicillin	Carbidopa/levodopa CR	Cromolyn
Antipyrine/benzocaine	Carisoprodol	Cyclobenzaprine
APAP/caffeine/butalbital	Carteolol hcl	Cyclopentolate
Apri PA	Cartia XT DO, QL	Cyproheptadine
Asa/codeine	Carvedilol	Danazol
Aspirin/caffeine/butalbital	Cefaclor	Dantrolene
Atenolol	Cefaclor ER	Desipramine
Atenolol/chlorthalidone	Cefadroxil	Desmopressin acetate
Atropine sulfate	Cefdinir	Desonide
Aviane PA	Cefpodoxime	Desoximetasone
	Cefprozil	Dexamethylphenidate
	Cefuroxime QL	Dextroamphetamine
		Dextromethorphan/ guaifenesin

Diazepam  
 Diclofenac potassium  
 Diclofenac sodium  
   Ophth.  
 Diclofenac, ER  
 Diclloxacinlin  
 Dicyclomine  
 Didanosine  
 Diflorasone diacetate  
 Diflunisal  
 Digoxin  
 Diltia XT **DO, QL**  
 Diltiazem  
 Diltiazem CD **DO, QL**  
 Diltiazem CR **DO, QL**  
 Diltiazem SR **DO, QL**  
 Diphenhydramine 50mg  
 Diphenoxylate/  
   atropine sulfate  
 Dipivefrin HCl  
 Dipyrindamole  
 Disopyramide  
 Disopyramide CR 150mg  
 Divalproex  
 Dorzolamide  
 Dorzolamide/timolol  
 Doxazosin mesylate  
 Doxepin  
 Doxycycline  
 Doxycycline monohydrate  
 Dronabinol  
 Dyphylline  
 Econazole  
 Enalapril, HCTZ  
 Ergotamine  
 Ergotamine/  
   belladonna/PB  
 Erythromycin  
 Erythromycin base  
 Erythromycin  
   ethylsuccinate  
 Erythromycin/sulfisoxazole  
 Estradiol  
 Estradiol/  
   norethindrone **PA**  
 Estropipate  
 Ethambutol  
 Ethinyl estradiol/  
   norethindrone **PA**  
 Ethinyl estradiol/ethynodiol  
   diacetate **PA**  
 Ethosuximide  
 Etodolac  
 Etodolac ER  
 Etoposide  
 Famciclovir  
 Famotidine  
 Felodopine **DO, QL**  
 Fenoprofen  
 Fentanyl **QL**  
 Fexofenadine, D **QL**  
 Finasteride  
 Flecainide  
 Fluconazole  
 Fludrocortisone  
 Flunisolide Nasal  
   Spray **QL**  
 Fluocinolone acetonide  
 Fluocinonide  
 Fluorometholone  
 Fluorouracil  
 Fluoxetine **DO, QL**  
 Fluphenazine  
 Flurazepam  
 Flurbiprofen  
 Flurbiprofen sodium  
 Flutamide  
 Fluticasone Nasal  
   Spray **QL**  
 Fluvoxamine **DO**  
 Folic acid  
 Fosinopril **DO, QL**  
 Fosinopril HCTZ  
 Furosemide  
 Gabapentin  
 Galantamine, SR  
 Ganciclovir  
 Gemfibrozil  
 Gentamicin  
 Glimepiride  
 Glipizide XL  
 Glipizide/metformin  
 Glyburide  
 Glyburide micronized  
 Glyburide/metformin  
 Glycolax  
 Granisetron **QL**  
 Guaifenesin  
 Guaifenesin SR  
 Guaifenesin/dextrometh  
 Guaifenesin/hydrocodone  
 Guanabenz  
 Guanfacine  
 Halobetasol  
 Haloperidol  
 Heparin\*  
 Homatropine  
 Hydralazine  
 Hydralazine/HCTZ  
 Hydrochlorothiazide  
 Hydrocodone w/  
   homatropine  
 Hydrocodone/APAP **QL**  
 Hydrocortisone 2.5%  
   cream, ointment, lotion  
 Hydrocortisone enema  
 Hydromorphone  
 Hydroxychloroquine  
 Hydroxyurea  
 Hydroxyzine HCL  
 Hydroxyzine pamoate  
 Hyoscyamine  
 Ibuprofen  
 Imipramine  
 Indapamide  
 Indomethacin, SR  
 Ipratropium bromide neb  
   soln/nasal spray **QL**  
 Iron combination capsule  
 Iron/intrinsic factor/B12  
 Iron/B12/folic acid  
 Isometh/dichlphen/APAP  
 Isoniazid  
 Isosorbide dinitrate  
 Isosorbide mononitrate  
 Isotretinoin **QL**  
 Itraconazole **PA**  
 Ketoconazole  
 Ketoprofen, ER  
 Ketorolac **QL**  
 Labetalol  
 Lactulose  
 Lamotrigine  
 Leflunomide  
 Leucovorin  
 Leuprolide **PA\***  
 Levetiracetam  
 Levobunolol  
 Levonorgestrel & ethinyl  
   estradiol **PA**  
 Levora **PA**  
 Levoxyl  
 Levorphanol tartrate  
 Lidocaine  
 Lidocaine viscous  
 Lisinopril, HCTZ  
 Lithium  
 Loperamide  
 Lorazepam  
 Lovastatin **DO, QL**  
 Low-ogestrel  
 Loxapine  
 Mebendazole  
 Meclizine  
 Meclofenamate  
 Medroxyprogesterone  
 Mefloquine  
 Megestrol  
 Meloxicam **QL**  
 Meperidine  
 Meperidine w/promethazine  
 Mercaptopurine  
 Metaproterenol  
 Metformin  
 Metformin ER  
 Meth/salicylate/atropine/  
   hyos benzoic  
 Methadone  
 Methazolamide  
 Methenamine/  
   hyosc-meth blue/sod  
   biphos-phenyl sal  
 Methocarbamol  
 Methotrexate tablets  
 Methyclothiazide  
 Methyl dopa  
 Methyl dopa/HCTZ  
 Methylphenidate, SR  
 Methylprednisolone

Metoclopramide	Oxaprozin	Prochlorperazine
Metolazone	Oxazepam	Prochlorperazine supp 25mg
Metoprolol, SR	Oxybutynin	Promethazine
Metoprolol/HCTZ	Oxycodone	Promethazine/codeine
Metronidazole	Oxycodone ER QL	Promethazine/ dextromethorphan
Mexiletine	Oxycodone/aspirin	Promethazine/ phenylephrine
Miconazole nitrate	Oxycodone/APAP QL	Propafenone
Microgestin PA	Oxytocin	Propranolol
Midodrine	Pantoprazole ST, QL^#	Propranolol/HCTZ
Minocycline	Paroxetine, SR DO, QL	Propylthiouracil
Minoxidil	Penicillin V.K.	Pseudoephed/bromphen- DM 45-4-15
Mirtazapine	Pentamidine isethionate	Pseudoephedrine hcl/ chlor-mal
Misoprostol	Pentazocine nx	Pseudoephedrine/ guaifenesin
Moexipril, HCTZ	Pentazocine/apap	Pseudoephedrine/ carbinoxamine
Mometasone ointment, cream	Pentoxifylline	Pyrazinamide
Morphine SR QL	Pergolide	Quinapril, HCTZ
Morphine sulfate	Permethrin	Quinidine gluconate
Multivitamins w/fluoride	Perphenazine	Quinidine sulfate
Multivitamins w/folic acid	Phenazopyridine	Ramipril
Nabumetone	Phenobarbital	Ranitidine
Nadolol	Phenyleph hcl/hydrocod bit/cp	Ribavirin PA
Naltrexone hcl	Phenyleph/chlorphen/ carbeta	Rifampin
Naphazoline	Phenyleph/chlorphen/ hydrocodone	Risperidone
Naproxen	Phenyleph-ephed-cpd w/carbetapentane	Ropinirole
Naproxen EC	Phenyleph-pyrimidine w/hydrocodone	Salsalate
Naproxen sodium, DS	Phenylephrine	Selegiline
Necon PA	Phenylephrine/ promethazine/codeine	Selenium sulfide
Neomycin	Phenytoin	Sertraline DO, QL
Neomycin/dexamethasone	Phospha 250	Silver sulfadiazine
Neomycin/polymixin/ hydrocortisone	Pilocarpine	Simvastatin DO, QL
Neomycin/polymyxin/ dexamethasone	Pindolol	Sodium citrate & citric acid
Neomycin/polymyxin/ bacitracin	Piroxicam	Sodium fluoride
Neomycin/polymyxin/ gramicidin	Polyethylene glycol- electrolyte solution	Sodium polystyrene sulfonate
Neosol	Polymyxin B/trimethoprim Pot. & Sod. Citrates w/citric acid	Sodium sulfacetamide/ sulfur
Nicardipine	Potassium chloride	Sotret QL
Nifedipine	Potassium citrate	Spironolactone
Nifedipine ER DO, QL	Potassium citrate-citric acid	Spironolactone/HCTZ
Nisoldipine DO, QL	Pramoxine/hc/ chloroxylenol	Stannous fluoride
Nitrofurantoin	Pravastatin DO, QL	Stavudine
Nitrofurantoin mono	Prazosin	Sucralfate
Nitroglycerin	Prednisolone	Sulfacet sod w/sulfur 10/5%
Nitroglycerin ointment	Prednisolone sodium prophate	Sulfacetamide sodium solution
Nitroglycerin SR	Prednisone	Sulfacetamide sodium/ prednisoloneophth sol.
Nizatidine	Prenatal multivitamins and minerals/iron/folic acid	Sulfamethoxazole/ trimethoprim, DS
Norethindrone	Prenatal vitamin	Sulfasalazine, EC
Nortriptyline	Prenatal w/docusate, iron, folic acid	Sulfinpyrazone
Nystatin	Primidone	Sulindac
Nystatin/triamcinolone	Probenecid	Sumatriptan QL
Ocella PA	Probenecid/colchicine	
Ofloxacin QL	Procainamide, SR	
Omeprazole 10 & 20mg QL		
Omeprazole 40mg ST, QL^#		
Ondansetron QL		
Orphenadrine		
Orphenadrine cpd		
Orphenadrine cpd Forte		

## QUESTIONS AND ANSWERS

### Q. *What is a Drug List/Formulary?*

A. The Anthem Drug List/Formulary is a list of FDA-approved brand-name and generic medications that have been reviewed and recommended for their quality and effectiveness by the National Pharmacy and Therapeutics (P&T) Committee. The P&T Committee is an independent group of practicing doctors and pharmacists responsible for the research and decisions surrounding our drug list. This group meets regularly to review new and existing drugs and choose the top medications for our drug list—based on their safety, effectiveness and value.

Drugs on the Anthem Drug List/Formulary are grouped by 'tiers.' A number of factors are considered when classifying drugs into tiers, including, but not limited to: the absolute cost of the drug; the cost of the drug relative to other drugs in the same therapeutic class; the availability of over-the-counter alternatives; and other clinical and cost-effectiveness factors.

Because the medications on the drug list/formulary are subject to periodic review, please ask your physician about the most current drug list additions and deletions or visit [anthem.com](http://anthem.com).

**Brand-name:** A brand-name drug is usually available from only one manufacturer and may have patent protection.

**Generic:** A generic drug is required by the FDA to have the same active ingredients as its brand-name counterpart, but is normally only available after the patent protection expires on a brand-name drug. Although it may look different, a generic drug works the same as its brand-name counterpart. You can save money by using generic medications.

### Q. *What if my physician or I choose a brand-name drug when a generic equivalent is available?*

A. In most cases, you would be responsible for the appropriate tier copay. This copay may include an additional charge that represents the cost difference between the brand-name medication and the generic equivalent.

### Q. *What are 'clinically equivalent' medications? How does this affect my drug coverage?*

A. The P&T Committee reviews the most current research available to determine if multiple drugs used to treat a disease/condition produce the same clinical effect. When this is the case, the committee may recommend that we cover only the lower cost drug(s) as part of our effort to help reduce the overall cost of care. This means your specific prescription plan may not cover some drugs in classes with 'clinically equivalent' alternatives.

### Q. *What if my medication is not on the drug list/formulary?*

A. An open drug list allows members and their physicians to choose from a wide variety of prescription medications. Please talk with your doctor about prescribing a Tier 1 or Tier 2 medication. If a Tier 3 medication is selected, you will be responsible for the applicable Tier 3 copayment.

You or your physician may submit a request to add a drug to the drug list/formulary either in writing or on our web site. Requests are taken into consideration by the P&T Committee during the drug list/formulary review process.

Inclusion of a medication on the drug list/formulary is not a guarantee of coverage. Some drugs, such as those used for cosmetic purposes, may be excluded from your benefits. Please refer to your Certificate or Evidence of Coverage for coverage limitations and exclusions.

Tamoxifen  
Temazepam  
Terazosin  
Terbinafine **PA**  
Terbutaline  
Terconazole  
Theophylline  
Theophylline SR  
Theophylline syrup  
Thioridazine  
Thiothixene  
Ticlopidine  
Timolol  
Tizanidine  
Tobramycin\*  
Tolmetin  
Torsemide  
Tramadol **QL**  
Tramadol/APAP **QL**  
Trandolapril  
Tranlycypromine  
Trazodone  
Tretinoin **PA**  
Triamcinolone acetonide  
Triamterene/HCTZ  
Triazolam  
Trifluoperazine  
Trifluridine  
Trihexyphenidyl  
Trimethobenzamide  
Trimethoprim  
Tri-nessa **PA**  
Triple sulfa  
Triple vitamins w/fluoride  
Trivora **PA**  
Tropicamide  
Trypsin/balsam peru/  
castor oil  
Ursodiol  
Valproic acid  
Venlafaxine  
Verapamil, SR  
Warfarin  
Yohimbine  
Zaleplon **ST, QL**  
Zolpidem **QL**  
Zonisamide

## Tier 2

Abilify  
Accu-check Product Line **QL**  
Actonel **QL**  
Actonel with Calcium **QL**  
ActoPlus Met **QL**  
Actos **QL**  
Adderall XR  
Advair Diskus, HFA **QL**  
Aerobid **QL**  
Aerobid M **QL**  
Agenerase  
Akne-Mycin  
Aldara **QL**

Alkeran  
Alora  
Alphagan P  
Altace 2.5, 5 & 10mg  
Androderm **PA, QL**  
Androgel **PA, QL**  
Antabuse  
Apidra  
Ariccept  
Arimidex  
Armour Thyroid  
Aromasin  
Asacol  
Asmanex **QL**  
Astelin  
Atrovent HFA **QL**  
Avandamet **QL**  
Avandaryl **QL**  
Avandia **QL**  
Avodart  
Azopt  
Azmecort **QL**  
Betimol  
Beptoptic S  
BiDil  
Blephamide  
Byetta **ST, QL**  
Calciferol drops  
Capitol  
Carbatrol  
Casodex  
CeeNU  
Cellcept  
Cenestin  
Ciprodex  
Climara Pro  
Clozaril  
Combivent **QL**  
Combivir  
Comtan  
Concerta  
Coreg XR  
Cosopt  
Coumadin  
Cozaar **QL**  
Creon  
Crixivan  
Cuprimine  
Cymbalta **DO, QL**  
Cytadren  
Dapsone  
Daraprim  
Depakote, ER  
Derma-Smoothe, FS  
Detrol, LA  
Diastat  
Dibenzyline  
Differin  
Dilantin  
Diovan **DO, QL**  
Diovan HCT **DO, QL**  
Dovonex cream  
Duac CS

Duetact  
Effexor XR **DO, QL**  
Elidel **ST**  
Emcyt  
Emtriva  
Entocort EC  
Epipen, JR.  
Epivir  
Estraderm  
Estring  
Ethmozine  
Evista  
Evoxac  
Exelder  
Exelon  
Exforge **DO, QL**  
Fansidar  
FazaClo ODT  
Felbatol  
Fem HRT  
Femara  
Flomax  
Flovent, HFA **QL**  
Fluoroplex  
FML Forte  
FML S  
Foradil **QL**  
Fortovase  
Fosamax solution **QL**  
Fosamax Plus D **QL**  
Fosrenol  
Furadantin  
Furoxone  
Fuzeon  
Gabitril  
Gantrisin  
Geodon  
Gleevec **PA**  
Glucagon  
Glyset  
Humalog  
Humibid Cap Sprinkle  
Humulin N, R, 50/50, 70/30  
Hyzaar **DO, QL**  
Imitrex **QL**  
Intal Inh.  
Invirase  
Iressa **PA**  
Janumet **QL**  
Januvia **QL**  
Kaletra  
Keppra  
Kuzyme  
Lanoxicaps  
Lanoxin  
Lantus  
Leukeran  
Leukine **PA\***  
Levaquin **QL**  
Levemir  
Levothroid  
Lexapro **DO, QL**  
Lexiva

Lipitor DO, QL  
Loprox gel, shampoo  
Lotrel (5/40 & 10/40mg)  
Lovaza  
Lumigan  
Matulane  
Maxalt, MLT QL  
Maxidex  
Medrol 2mg, 16mg, 32mg  
Menest  
Mephyton  
Mepron  
Mestinon timespan  
Methergine Tabs  
Mintezol  
Mirapex  
Mycobutin  
Myleran  
Namenda  
Nardil  
Nasonex QL  
Nebupent  
Neoral  
Neosar  
Neulasta PA, QL\*  
Neupogen PA\*  
Nexavar PA  
Nexium QL  
Niaspan  
Nilandron  
Nitro-Bid  
Nitro-Dur  
Nitrolingual spray  
Norpace CR 100mg  
Norvir  
Novolin N, R, 70/30  
Novolog  
One Touch Product Line QL  
Ortho Evra PA  
Ortho Tri-Cyclen Lo PA  
OxyContin QL  
Pacerone  
Pancrease  
Pentasa  
Phoslo  
Plan B QL  
Plavix QL  
Plexion SCT  
Prandin  
Pred Mild 0.12%  
Prefest  
Premarin oral, vaginal cream  
Premphase  
Prempro  
Prenate Elite  
Prevacid QL  
Prevacid Naprapac QL  
Prevpac  
Priftin  
Primaquine  
Pristiq DO, QL  
ProAir HFA QL

Procambid  
Prograf  
Prometrium  
Protopic ST  
Proventil HFA QL  
Pulmicort Respules QL  
Pulmicort Turbuhaler QL  
QVAR QL  
Rapamune  
Renagel  
Renvela  
Rescriptor  
Retin-A Micro PA  
Retrovir  
Reyataz  
Ridaura  
Rifamate  
Rifater  
Rilutek  
Sandimmune Oral  
Sandostatin\*  
Serevent Diskus QL  
Seroquel, XR  
Simcor QL  
Singulair QL  
Somavert\*  
Spiriva QL  
Sprycel PA  
Starlix  
Strattera  
Subutex QL  
Sular DO, QL  
Sustiva  
Sutent PA  
Symlin  
Symbicort QL  
Synthroid  
Tarceva PA  
Tegretol, XR  
Tekturna, HCT DO, QL  
Temodar  
Teslac  
Testim PA, QL  
Thalomid PA  
Theo-24  
Tilade  
TOBI  
Tobradex  
Topamax PA  
Transderm-Scop  
Tricor  
Trizivir  
Trusopt  
Twinject  
Ultrase  
Uniphyl  
Vagifem  
Valcyte  
Valtrex  
VESicare  
Videx  
Vigamox  
Viracept

Viramune  
Viread  
Vivelle, DOT  
Vyvanse PA  
Xalatan  
Xeloda PA  
Xopenex HFA QL  
Yaz PA  
Yodoxin  
Zarontin  
Zerit  
Ziagen  
Zomig, ZMT QL  
Zovirax Oint  
Zyprexa, Zydis

### Tier 3

Accolate  
Accupril  
Accuretic  
Aceon  
Aciphex ST, QL^#  
Actimmune\*  
Activella PA  
Actiq PA, QL  
Advicor  
Aggrenox QL  
Alamast QL^  
Alferon-N\*  
Allegra, D QL^  
Alocril QL^  
Alomide QL^  
Altace 1.25mg  
Altoprev DO  
Alupent Inhaler  
Alvesco QL  
Ambien QL  
Ambien CR QL, ST  
Amerge QL  
Amevive PA  
Amitiza  
Anadrol-50 PA  
Analpram - HC  
Android PA  
Antara  
Anzemet QL  
Apidra  
Aquachloral Suppnettes  
Aranesp PA\*  
Arixtra\*  
Arthrotec ST  
Atacand DO, QL  
Atacand HCT DO, QL  
Avalide DO, QL  
Avapro DO, QL  
Avelox QL  
Avinza QL  
Avonex\*  
Axert QL  
Azor DO, QL  
Beconase AQ ST, QL  
Benicar, HCT DO, QL

Betaseron\*  
 Biaxin XL  
 Boniva QL  
 Bystolic  
 Caduet DO  
 Canasa  
 Capex Shampoo  
 Capoten  
 Capozide  
 Cardene, SR  
 Cardizem CD, LA DO, QL  
 Cardura, XL  
 Catapres TTS  
 Caverject PA, QL  
 Cedax  
 Ceftin QL  
 Celebrex ST, QL  
 Cetrotide\*  
 Chemet  
 Cialis PA, QL  
 Cimzia PA, QL  
 Cipro XR QL  
 Clarinex, D QL^  
 Cleocin Vaginal Cream  
 Climara  
 Colazal  
 Colestid  
 Combipatch  
 Combunox QL  
 Copaxone\*  
 Cordran Tape  
 Coreg  
 Covera HS DO  
 Crestor DO, QL  
 Crinone  
 Cyclophosphamide  
 DDAVP injection  
 Delatestryl\*  
 Denavir  
 Depen  
 Depo-Estradiol\*  
 Depo-Testosterone\*  
 Dexpak  
 Dilaudid  
 Dovonex Soln.  
 Dynacirc, CR  
 Edex PA, QL  
 Elestat QL^  
 Elmiron  
 Emadine QL^  
 Emend QL  
 Enablex  
 Enbrel PA, QL\*  
 Esclim  
 Estrace vaginal cream  
 Estrasorb  
 Estratest, HS  
 Estrogel  
 Factive QL  
 Femring  
 Fenoglide  
 Fentora PA, QL  
 First Testosterone  
 Flonase QL  
 Floxin Otic  
 Foradil QL  
 Fortamet  
 Forteo PA, QL\*  
 Fosamax tablets QL  
 Fragmin\*  
 Frova QL  
 Genotropin PA, QL\*  
 Glumetza  
 Gonal-f, RFF\*  
 Grifulvin V  
 Histex, SR  
 Humatrope PA, QL\*  
 Humira PA, QL\*  
 Hybolin PA  
 Infergen\* PA  
 Innohep\*  
 Intron A PA\*  
 K-Phos  
 Kadian QL  
 Ketek  
 Kineret PA\*  
 Kytril QL  
 Lamisil Spray  
 Lamisil Tablet PA  
 Lescol, XL DO, QL  
 Levitra PA, QL  
 Lipofen  
 Lorabid  
 Lotensin, HCT  
 Lotrel (2.5/10, 5/10, 5/20  
 & 10/20mg)  
 Lunesta QL  
 Lupron Depot PA\*  
 Luxiq  
 Lyrica PA  
 Malarone PA  
 Marinol  
 Mavik  
 Maxair QL  
 Maxaquin QL  
 Methitest  
 Miacalcin Spray QL  
 Micardis, HCT DO, QL  
 Migranal QL  
 Moban  
 Mobic QL  
 Monopril/HCT  
 Muse PA  
 Myambutol  
 Myfortic  
 Mysoline  
 Nasacort AQ ST, QL  
 Nasarel QL  
 Neumega PA\*  
 Niacor  
 Norditropin PA, QL\*  
 Noroxin QL  
 Norvasc DO, QL  
 Nutropin, AQ PA, QL\*  
 Nuvaring PA  
 Olux  
 Omeprazole 40mg  
 PA, QL^#  
 Omnaris ST, QL  
 Omnicef  
 Omnitrope PA, QL\*  
 Opana  
 Opana ER QL  
 Optivar QL^  
 Ovidrel PA\*  
 Oxandrin PA  
 Oxytrol  
 Panretin  
 Pantoprazole PA, QL^#  
 Pataday QL^  
 Patanol QL^  
 Patanase QL  
 Parnate  
 Paxil CR DO, QL  
 Pegasys PA\*  
 Peg-Intron PA\*  
 Penlac PA  
 Poly-Histine Elixir  
 Poly-Pred  
 Pramoxone  
 Pravigard  
 Pred-G  
 Precose  
 Prilosec 40mg ST, QL^#  
 Primaxin QL  
 Prinivil  
 Prinzide  
 Procrit PA\*  
 Prostin E2 Supp  
 Protonix ST, QL^#  
 Provigil PA, QL  
 Prozac Weekly QL  
 Pulmozyme  
 Raptiva PA  
 Razadyne, ER  
 Rebif\*  
 Relenza QL  
 Relpax QL  
 Remicade PA  
 Restoril  
 Revatio PA, QL  
 Requip, XL  
 Risperdal  
 Rhinocort Aqua ST, QL  
 Rozerem ST, QL  
 Saizen PA, QL\*  
 Sanctura, XR  
 Sarafem QL  
 Seasonale PA  
 Serostim PA, QL\*  
 Skelaxin  
 Sonata ST, QL  
 Soriatane  
 Spectracef  
 Sporanox Solution PA  
 Stadol QL  
 Striant PA  
 Suprax QL  
 Synagis PA

Synarel PA  
Tamiflu QL  
Tarka  
Tequin QL  
Testopel PA  
Testred PA  
Teveten, HCT DO, QL  
Tev-Tropin PA, QL\*  
Tiazac DO, QL  
Tobrex  
Toprol XL  
Toradol QL  
Treximet  
Tri-Nasal  
Triglide  
Trileptal  
Trovan  
Tussionex  
Ultram ER QL  
Uniretic  
Univasc  
Urocit-K  
Uroxatral  
Vaseretic  
Vasotec  
Ventolin HFA QL  
Veramyst ST, QL  
Verelan PM DO, QL  
Vexol  
Vfend PA  
Viagra PA, QL  
Vivactil  
Voltaren Ophth  
Vytorin ST, QL  
Welchol  
Wellbutrin, SR  
Wellbutrin XL DO, QL  
Winstrol PA  
Xerac AC  
Xolair PA\*  
Xopenex Nebulizer Soln.  
Xyzal PA, QL^  
Yasmin PA  
Zegerid ST, QL^#  
Zestoretic

Zestril  
Zetia ST, QL  
Zithromax QL  
Zmax QL  
Zocor DO  
Zofran QL  
Zoladex PA  
Zoloft DO, QL  
Zorbtive PA, QL\*

#### Tier 4

Actimmune  
Alferon-N  
Antagon  
Apokyn  
Aranesp PA  
Arixtra  
Avonex  
Betaseron  
Bravelle  
Caverject PA, QL  
Cetrotide  
Chorionic Gonadotropin  
Colistimeth  
Coly-Mycin  
Copaxone  
Delatestryl  
Delestrogen  
Depo Testosterone  
Depo-Estradiol  
DHE 45  
Edex PA, QL  
Eligard PA  
Enbrel PA, QL  
Epogen PA  
Fertinex  
Follistim AQ  
Forteo PA, QL  
Fragmin  
Fuzeon  
Genotropin PA, QL  
Gonal-f, RFF  
Heparin  
Humatrope PA, QL  
Humira PA, QL  
Increlex PA  
Infergen PA  
Innohep  
Intron-A PA  
Iplex PA  
Kineret PA  
Leukine PA  
Leuprolide PA  
Lovenox  
Lupron, Depot PA  
Luveris  
Methotrexate  
Metrodin  
Menopur  
Miacalcin injection  
Neulasta PA, QL  
Neumega PA  
Neupogen PA  
Norditropin PA, QL  
Novarel  
Nutropin, AQ PA, QL  
Omnitrope PA, QL  
Ovidrel  
Pegasys PA  
Peg-Intron PA  
Pregnyl  
Profasi  
Procrit PA  
Raptiva PA  
Rebif  
Repronex PA  
Roferon-A PA  
Saizen PA, QL  
Sandostatin  
Serostim PA, QL  
Somavert  
TevTropin PA, QL  
Tobramycin  
Vitamin B12  
Vivaglobulin PA  
Xolair PA  
Zorbtive PA, QL

#### KEY

# Non-formulary in Indiana only

^ This product has clinically equivalent alternatives included on the formulary and, as a consequence, such product may not be covered under your pharmacy benefit. Please consult your on-line pharmacy account through your health plan website, anthem.com, for details on coverage.

\* = These drugs are Tier 1, 2 or 3 for those members that do not have a Tier 4 plan

**PA** = PRIOR AUTHORIZATION REQUIRED. Prior authorization is the process of obtaining approval of benefits before certain prescriptions may be filled.

**QL** = QUANTITY LIMITS. Certain prescription drugs have specific quantity limits per prescription or per month.

**ST** = STEP THERAPY REQUIRED. You may need to use one medication before benefits for the use of another medication can be authorized. Please note: Foradil and Serevent are safety edits that prevent duplication of therapy.

**DO** = DOSE OPTIMIZATION REQUIRED. Normally involves the conversion from twice-daily dosing to a once-daily dosing schedule.

Not all medications and not all plans are subject to prior authorization and quantity limits. For more information regarding prior authorization or quantity limits, contact Member Services at the telephone number listed on your identification card.