

Ideal formulary 2009 Master drug changes from 2008 into 2009

Affected Drug	2008 tier	2009 tier	Description of Change	Alternative(s)
ACTONEL TAB 5, 30, 35, 75, 150MG	2	3	is on our formulary, but will be covered in a higher cost tier	On formulary, Higher Tier
ADVICOR TAB 500-20, 750-20, 1000-20, 1000-40MG	3	not on formulary	Not on 2009 Formulary	Niaspan PLUS lovastatin
AGENERASE CAP 50MG; SOLN 15MG/ML	2	not on formulary	Not on formulary because does not meet the definition of a Part D drug under CMS regulations	See physician
ALBUTEROL AER 90MCG	1	not on formulary	Not on formulary because does not meet the definition of a Part D drug under CMS regulations	Proair HFA
ALTACE CAP 1.25MG	2	not on formulary	is not covered on our 2009 formulary as there are generic equivalents and/or generic alternatives available. When you choose generic drugs, you get prescription medications that are: -FDA approved and regulated -Equal to brand-name drugs in terms of safety and effectiveness -Less expensive	Not on formulary, generic(s) available
AMCINONIDE OINT 0.1%	1	not on formulary	Not on 2009 Formulary	betamethasone dipropionate oint, triamcinolone acetonide oint
AMIFOSTINE INJ 500MG	4	not on formulary	Not on 2009 Formulary	See physician
AMILORIDE TAB 5MG	3	1	On formulary, Lower Tier	On formulary, lower tier
AMOXIL DROPS 50MG/ML	3	1	On formulary, Lower Tier	On formulary, lower tier
AMPICILLIN/SULBACTAM INJ 1.5, 3, 15GM	1	not on formulary	Not on 2009 Formulary	Timentin inj, Zosyn inj
ANDROXY TAB 10MG	3	1	On formulary, Lower Tier	On formulary, lower tier
ANTABUSE TAB 250, 500MG	3	1	On formulary, Lower Tier	On formulary, lower tier
ARIXTRA	2	4	is on our formulary, but will be covered in a higher cost tier	On formulary, Higher Tier
ATREZA TAB 0.4MG	1	not on formulary	Not on formulary because does not meet the definition of a Part D drug under CMS regulations	dicyclomine, methscopolamine
ATROPINE SULFATE OPHTH OINT 1%; OPHTH SOLN 1%	1	not on formulary	Not on formulary because does not meet the definition of a Part D drug under CMS regulations	See physician
AZASAN TAB 75, 100MG	3	1	On formulary, Lower Tier	On formulary, lower tier
AZATHIOPRINE INJ 100MG	3	1	On formulary, Lower Tier	On formulary, lower tier
BACIIM INJ 50000 UNIT	1	not on formulary	Not on 2009 Formulary	See physician
BACTOCILL IN DEX 1, 2GM	1	not on formulary	Not on 2009 Formulary	nafcillin for IV
BETAXOLOL OPHTH SOLN 0.5%	3	1	On formulary, Lower Tier	On formulary, lower tier
BICILLIN C-R INJ	3	not on formulary	Not on 2009 Formulary	See physician
BICILLIN L-A INJ	3	not on formulary	Not on 2009 Formulary	See physician
CEFACTOR ER TAB 500MG	1	not on formulary	Not on 2009 Formulary	cefaclor IR caps
CEFOXITIN INJ 1, 2GM	1	3	is on our formulary, but will be covered in a higher cost tier	On formulary, Higher Tier
CELLCEPT CAP 250MG	4	3	On formulary, Lower Tier	On formulary, lower tier
CEREDASE INJ 10UNIT/ML	4	not on	Not on 2009 Formulary	See physician
CERUBIDINE INJ 20MG	4	3	On formulary, Lower Tier	On formulary, lower tier
CHLORPROMAZINE INJ 25MG/ML	3	1	On formulary, Lower Tier	On formulary, lower tier
CIPRO I.V. IN DEXTROSE 200, 400MG	3	not on formulary	is not covered on our 2009 formulary as there are generic equivalents and/or generic alternatives available. When you choose generic drugs, you get prescription medications that are: -FDA approved and regulated -Equal to brand-name drugs in terms of safety and effectiveness -Less expensive	Not on formulary, generic(s) available
CLOZAPINE TAB 200MG	3	1	On formulary, Lower Tier	On formulary, lower tier
COSOPT OPHTH SOLN 2-0.5%	2	3	is on our formulary, but will be covered in a higher cost tier	On formulary, Higher Tier
CRIVAN CAP 100, 200, 333, 400MG	2	3	is on our formulary, but will be covered in a higher cost tier	On formulary, Higher Tier
CYCLOSPORINE MODIFIED CAP 50MG	3	1	On formulary, Lower Tier	On formulary, lower tier
D5W/LYTES INJ #48	1	not on formulary	Not on 2009 Formulary	See physician
DACARBAZINE INJ 100MG	3	1	On formulary, Lower Tier	On formulary, lower tier
DAPSONE TAB 25, 100MG	3	1	On formulary, Lower Tier	On formulary, lower tier
DAUNORUBICIN INJ 5MG/ML	4	3	On formulary, Lower Tier	On formulary, lower tier
DEPAKOTE SPRINKLE CAP 125 MG; DR TAB	2	3	is on our formulary, but will be covered in a higher cost tier	On formulary, Higher Tier
DEXAMETHASONE ELIXIR 0.5/5ML	3	not on formulary	Not on 2009 Formulary	dexamethasone soln

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DEXAMETHASONE SOLN 0.5/5ML; TAB 1, 2MG	not on formulary	1	Covered in 2009 but not in 2008	On formulary in 2009, but not in 2008
DEXTROSE 2.5% IN LACTATED RINGERS 1/2 STRENGTH	1	not on formulary	Not on 2009 Formulary	See physician
DEXTROSE 5%, 10%	not on formulary	1	Covered in 2009 but not in 2008	On formulary in 2009, but not in 2008
DOVONEX OINT 0.005%	2	not on formulary	is not covered on our 2009 formulary as there are generic equivalents and/or generic alternatives available. When you choose generic drugs, you get prescription medications that are: -FDA approved and regulated -Equal to brand-name drugs in terms of safety and effectiveness -Less expensive	Not on formulary, generic(s) available
DOVONEX SOLN 0.0005%	2	3	is on our formulary, but will be covered in a higher cost tier	On formulary, Higher Tier
EFFEXOR XR CAP 37.5, 75, 150MG	2	3	is on our formulary, but will be covered in a higher cost tier	On formulary, Higher Tier
ERGOLOID MESYLATES TAB 1MG	1	not on formulary	Not on 2009 formulary	See physician
ERYTHROMYCIN/SULFISOXAZOLE SUSP 200-600MG/5ML	1	not on formulary	Not on 2009 formulary	sulfamethoxazole/trimethoprim
ESTRADIOL/NORETHINDRONE ACETATE TAB 1-0.5MG	not on formulary	1	Covered in 2009 but not in 2008	On formulary in 2009, but not in 2008
ETHYOL INJ 500MG	4	not on formulary	Not on 2009 formulary	See physician
FLAVOXATE TAB 100 MG	1	not on formulary	Not on 2009 formulary	oxybutynin, oxybutynin ER, Detrol, Detrol LA, Enablex, Sanctura, Santura XR,
FLUOCINOLONE ACETONIDE CRM 0.025%, OINT 0.025%, SOLN 0.01%	1	not on formulary	Not on 2009 formulary	betamethasone dipropionate, triamcinolone acetonide
FLUPHENAZINE CONC 5MG/ML; ELIXIR 2.5/5ML; INJ 2.5MG/ML	3	1	On formulary, Lower Tier	On formulary, lower tier
FOSAMAX PLUS D TAB 70-2800, 70MG-5600UNIT	3	not on formulary	Not on 2009 Formulary	alendronate tabs
FOSAMAX SOLN	2	not on formulary	Not on 2009 Formulary	alendronate tabs
FUROSEMIDE INJ 10MG/ML	not on formulary	1	Covered in 2009 but not in 2008	On formulary in 2009, but not in 2008
GABAPENTIN TAB 300MG	1	not on formulary	Not on formulary because does not meet the definition of a Part D drug under CMS regulations	gabapentin caps, 300mg
GENTAMICIN IN NACL INJ 0.9MG/ML, 1.4MG/ML	3	1	On formulary, Lower Tier	On formulary, lower tier
GEOCILLIN TAB 382MG	2	not on formulary	Not on formulary because does not meet the definition of a Part D drug under CMS regulations	See physician
GLYSET TAB 25, 50, 100MG	2	3	is on our formulary, but will be covered in a higher cost tier	On formulary, Higher Tier
HALFLYTELY BOWEL-PREP KIT	2	not on formulary	Not on formulary because does not meet the definition of a Part D drug under CMS regulations	Golytely, Nulytely, peg 3350/electrolytes for soln PLUS bisacodyl OTC (OTC's are not covered in the benefit)
HUMIRA	not on formulary	4	Covered in 2009 but not in 2008	On formulary in 2009, but not in 2008
HUMULIN R INJ U-500	2	not on formulary	Not on 2009 formulary	Humulin R U-100
IMITREX INJ, SPRAY, TAB	2	3	is on our formulary, but will be covered in a higher cost tier	On formulary, Higher Tier
ISENTRESS TAB 400MG	3	2	On formulary, Lower Tier	On formulary, lower tier
KCL 0.15%/D5W/NACL 0.225%	1	not on formulary	Not on 2009 formulary	See physician
KETOPROFEN ER CAP 200MG	1	not on formulary	is not covered on our 2009 formulary as there are generic equivalents and/or generic alternatives available. When you choose generic drugs, you get prescription medications that are: -FDA approved and regulated -Equal to brand-name drugs in terms of safety and effectiveness -Less expensive	Not on formulary, generic(s) available
KETOTIFEN FUMARATE OPHTH SOLN	1	not on formulary	Not on formulary because does not meet the definition of a Part D drug under CMS regulations	Patanol
KLOR-CON POW 20MEQ	1	not on formulary	Not on formulary because does not meet the definition of a Part D drug under CMS regulations	potassium chloride ER caps, tabs
LAMICTAL STARTER KIT	2	3	is on our formulary, but will be covered in a higher cost tier	On formulary, Higher Tier

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LAMICTAL TAB 25, 100, 150, 200MG	2	not on formulary	is not covered on our 2009 formulary as there are generic equivalents and/or generic alternatives available. When you choose generic drugs, you get prescription medications that are: -FDA approved and regulated -Equal to brand-name drugs in terms of safety and effectiveness -Less expensive	Not on formulary, generic(s) available
LANOXIN TAB 0.125, 0.25MG	2	not on formulary	is not covered on our 2009 formulary as there are generic equivalents and/or generic alternatives available. When you choose generic drugs, you get prescription medications that are: -FDA approved and regulated -Equal to brand-name drugs in terms of safety and effectiveness -Less expensive	Not on formulary, generic(s) available
LEUCOVORIN CALCIUM INJ 500MG	not on formulary	1	Covered in 2009 but not in 2008	On formulary in 2009, but not in 2008
LEUCOVORIN CALCIUM INJ 50MG; TAB 10,	3	1	On formulary, Lower Tier	On formulary, lower tier
LEVOTHYROXINÉ INJ 200, 500MCG	1	not on formulary	Not on 2009 Formulary	See physician
LEVULAN KERASTICK	3	not on formulary	Not on 2009 formulary	See physician
LIDOCAINE INJ 2%	1	not on formulary	Not on 2009 Formulary	lidocaine local inj, 0.5%, 1%
LOCOID CRM 0.1%; OINT 0.1%; SOLN 0.1%	1	not on formulary	is not covered on our 2009 formulary as there are generic equivalents and/or generic alternatives available. When you choose generic drugs, you get prescription medications that are: -FDA approved and regulated -Equal to brand-name drugs in terms of safety and effectiveness -Less expensive	Not on formulary, generic(s) available
LOTREL CAP 5-40, 10-40MG	2	not on formulary	is not covered on our 2009 formulary as there are generic equivalents and/or generic alternatives available. When you choose generic drugs, you get prescription medications that are: -FDA approved and regulated -Equal to brand-name drugs in terms of safety and effectiveness -Less expensive	Not on formulary, generic(s) available
LOVENOX INJ 60, 80, 100, 120, 150, 300MG	3	4	is on our formulary, but will be covered in a higher cost tier	On formulary, Higher Tier
MAGNESIUM SALICYLATE TAB 600MG	1	not on formulary	Not on formulary because does not meet the definition of a Part D drug under CMS regulations	See physician
MAPROTILINE TAB 25, 50, 75MG	3	1	On formulary, Lower Tier	On formulary, lower tier
MEPROBAMATE TAB 200, 400MG	1	not on formulary	Not on 2009 formulary	See physician
METHYLDOPA/ HYDROCHLOROTHIAZIDE TAB 250/25MG	1	not on formulary	Not on 2009 formulary	methyldopa PLUS hydrochlorothiazide
METOPROLOL INJ 1MG/ML	1	not on formulary	Not on 2009 formulary	See physician
MIRAPEX TAB 0.125, 0.25, 0.5, 0.75, 1, 1.5MG	2	3	is on our formulary, but will be covered in a higher cost tier	On formulary, Higher Tier
MORPHINE SULFATE SUPP 5, 10, 20, 30MG	1	not on formulary	Not on formulary because does not meet the definition of a Part D drug under CMS regulations	morphine sulfate soln, 10 mg/5 mL, 20 mg/5 mL; tabs
M-R-VAX II INJ	3	not on formulary	Not on 2009 Formulary	M-M-R II
MUMPSVAX INJ	3	not on formulary	Not on 2009 formulary	M-M-R II
NALLPEN/DEX INJ 1/50, 2GM/50ML	3	not on formulary	Not on 2009 formulary	nafcillin for IV
NEUTREXIN INJ 25, 200MG	4	not on formulary	Not on formulary because does not meet the definition of a Part D drug under CMS regulations	See physician
NORTHYX TAB 15, 20MG	3	not on formulary	Not on 2009 formulary	methimazole 5 mg, 10 mg
NUMORPHAN INJ 1MG/ML	3	not on formulary	Not on formulary because does not meet the definition of a Part D drug under CMS regulations	morphine sulfate inj, 0.5 mg/mL, 1 mg/mL; soln, 10 mg/5 mL, 20 mg/5 mL; tabs
ONXOL INJ 300/50ML	4	1	On formulary, Lower Tier	On formulary, lower tier
OXACILLIN INJ 1, 2, 10GM	3	not on formulary	Not on 2009 formulary	nafcillin for IV

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OXYCODONE CAP 5MG; CONC 20/ML; SOLN 5MG/5ML	1	not on formulary	Not on formulary because does not meet the definition of a Part D drug under CMS regulations	oxycodone tabs, 5 mg, 15 mg, 30 mg; morphine sulfate soln, 10 mg/5 mL, 20 mg/5 mL
PALGIC SOLN 4MG/5ML	3	not on formulary	is not covered on our 2009 formulary as there are generic equivalents and/or generic alternatives available. When you choose generic drugs, you get prescription medications that are: -FDA approved and regulated -Equal to brand-name drugs in terms of safety and effectiveness -Less expensive	Not on formulary, generic(s) available
PALGIC TAB 4MG	3	1	On formulary, Lower Tier	On formulary, lower tier
PAMIDRONATE INJ 6MG/ML	3	1	On formulary, Lower Tier	On formulary, lower tier
PANTOPRAZOLE TAB 20, 40MG	1	not on formulary	Not on 2009 formulary	omeprazole, Nexium caps
PAREGORIC 2MG/5ML	1	not on formulary	Not on formulary because does not meet the definition of a Part D drug under CMS regulations	See physician
PAXIL CR TAB 12.5, 25MG	3	not on formulary	is not covered on our 2009 formulary as there are generic equivalents and/or generic alternatives available. When you choose generic drugs, you get prescription medications that are: -FDA approved and regulated -Equal to brand-name drugs in terms of safety and effectiveness -Less expensive	Not on formulary, generic(s) available
PAXIL CR TAB 37.5MG	3	not on formulary	Not on 2009 Formulary	paroxetine ER 12.5 mg or 25 mg; paroxetine IR
PENICILLIN G PROCAINE INJ 600000UNITS/ML	3	not on formulary	Not on 2009 Formulary	See physician
PLENAXIS INJ 100MG	4	not on formulary	Not on formulary because does not meet the definition of a Part D drug under CMS regulations	See physician
PLENDIL 2.5, 5, 10MG	3	not on formulary	is not covered on our 2009 formulary as there are generic equivalents and/or generic alternatives available. When you choose generic drugs, you get prescription medications that are: -FDA approved and regulated -Equal to brand-name drugs in terms of safety and effectiveness -Less expensive	Not on formulary, generic(s) available
PODOPHYLLUM RESIN SOLN 25%	1	not on formulary	Not on formulary because does not meet the definition of a Part D drug under CMS regulations	
POLYETHYLENE GLYCOL 3350	1	not on formulary	Not on formulary because does not meet the definition of a Part D drug under CMS regulations	polyethylene glycol 3350 (OTC's are not covered in the benefit)
POLYMYXIN B INJ 500000	1	not on formulary	Not on 2009 formulary	See physician
PRECOSE TAB 25, 50, 100MG	3	not on formulary	is not covered on our 2009 formulary as there are generic equivalents and/or generic alternatives available. When you choose generic drugs, you get prescription medications that are: -FDA approved and regulated -Equal to brand-name drugs in terms of safety and effectiveness -Less expensive	Not on formulary, generic(s) available
PROCAINAMIDE ER TAB 500MG	1	not on formulary	Not on 2009 Formulary	See physician
PROPRANOLOL/ HYDROCHLOROTHIAZIDE TAB 40/25, 80/25MG	1	not on formulary	Not on 2009 formulary	propranolol PLUS hydrochlorothiazide
PROTONIX INJ 40MG; PACKET 40MG; TAB 20, 40MG	3	not on formulary	Not on 2009 formulary	omeprazole, Nexium caps and for susp, Nexium IV
PROZAC WEEKLY CAP 90MG	3	not on formulary	Not on 2009 Formulary	fluoxetine daily
REGRANEX GEL 0.01%	2	4	is on our formulary, but will be covered in a higher cost tier	On formulary, Higher Tier
REQUIP TAB 0.5, 1, 2, 3, 4, 5MG	2	3	is not covered on our 2009 formulary as there are generic equivalents and/or generic alternatives available. When you choose generic drugs, you get prescription medications that are: -FDA approved and regulated -Equal to brand-name drugs in terms of safety and effectiveness -Less expensive	Not on formulary, generic(s) available
RIMANTADINE TAB 100MG	1	not on formulary	Not on 2009 formulary	amantadine caps

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RISPERDAL INJ 12.5, 25, 37.5, 50MG; RISPERDAL M-TAB 0.5, 1, 2, 3, 4MG; SOLN	2	3	is on our formulary, but will be covered in a higher cost tier	On formulary, Higher Tier
RISPERDAL TAB 0.5, 1, 2, 3, 4, 5MG	2	not on formulary	is not covered on our 2009 formulary as there are generic equivalents and/or generic alternatives available. When you choose generic drugs, you get prescription medications that are: -FDA approved and regulated -Equal to brand-name drugs in terms of safety and effectiveness -Less expensive	Not on formulary, generic(s) available
ROFERON-A KIT	3	not on formulary	Not on formulary because does not meet the definition of a Part D drug under CMS regulations	Alferon N, Intron-A
ROTARIX SUSP	not on formulary	3	Covered in 2009 but not in 2008	On formulary in 2009, but not in 2008
SELEGILINE TAB 5MG	1	not on formulary	Not on 2009 formulary	selegiline caps
SULFAMETHOXAZOLE/ TRIMETHOPRIM INJ 400-80 MG/5ML	3	1	On formulary, Lower Tier	On formulary, lower tier
TESLAC TAB 50MG	4	not on formulary	Not on formulary because does not meet the definition of a Part D drug under CMS regulations	See physician
TETANUS TOXOIDS INJ 4LF	3	not on formulary	Not on formulary because does not meet the definition of a Part D drug under CMS regulations	Tetanus Toxoid Adsorbed
THEOPHYLLINE ER CAP 125, 200, 300MG	1	not on formulary	Not on formulary because does not meet the definition of a Part D drug under CMS regulations	theophylline ER 12 hr tabs, theophylline ER 24 hr tabs
THERACYS INJ	3	not on formulary	Not on formulary because does not meet the definition of a Part D drug under CMS regulations	See physician
TICE BCG INJ	3	not on formulary	Not on formulary because does not meet the definition of a Part D drug under CMS regulations	See physician
TIMOLOL MALEATE TAB 10MG	1	not on formulary	Not on 2009 formulary	propranolol tabs, nadolol
TOBRAMYCIN INJ 10MG/ML	3	1	On formulary, Lower Tier	On formulary, lower tier
TOBRAMYCIN SULFATE IN SALINE INJ 0.8/ML, 1.2MG/ML	3	1	On formulary, Lower Tier	On formulary, lower tier
TOLAZAMIDE TAB 100MG	3	not on formulary	Not on formulary because does not meet the definition of a Part D drug under CMS regulations	tolazamide 250 mg, 500 mg
TRAVERT 5%/ELECTROLYTE #2, TRAVERT 10%/ELECTROLYTE #2	1	not on formulary	Not on formulary because does not meet the definition of a Part D drug under CMS regulations	See physician
TRI-LEGEST TAB FE	not on formulary	1	Covered in 2009 but not in 2008	On formulary in 2009, but not in 2008
UNASYN INJ PIGGYBACK 1.5, 3GM	3	not on formulary	Not on 2009 formulary	Timentin inj, Zosyn inj
VALCYTE TAB 450MG	2	4	is on our formulary, but will be covered in a higher cost tier	On formulary, Higher Tier
VALSTAR SOL 40MG/ML	4	not on formulary	Not on formulary because does not meet the definition of a Part D drug under CMS regulations	See physician
VANCOGIN HCL CAP 125, 250MG	2	4	is on our formulary, but will be covered in a higher cost tier	On formulary, Higher Tier
VANCOMYCIN INJ 10GM	3	1	On formulary, Lower Tier	On formulary, lower tier
VIDEX EC CAP 125MG	2	3	is on our formulary, but will be covered in a higher cost tier	On formulary, Higher Tier
VIDEX SOLN 2, 4GM	2	3	is on our formulary, but will be covered in a higher cost tier	On formulary, Higher Tier
VINORELBINE INJ 10MG/ML	4	1	On formulary, Lower Tier	On formulary, lower tier
VINORELBINE INJ 50MG/ML	4	3	On formulary, Lower Tier	On formulary, lower tier
VIVACTIL TAB 5, 10MG	3	1	On formulary, Lower Tier	On formulary, lower tier
VUMON INJ 50MG/5ML	4	not on formulary	Not on formulary because does not meet the definition of a Part D drug under CMS regulations	See physician
WELLBUTRIN TAB XL 150MG	2	not on formulary	is not covered on our 2009 formulary as there are generic equivalents and/or generic alternatives available. When you choose generic drugs, you get prescription medications that are: -FDA approved and regulated -Equal to brand-name drugs in terms of safety and effectiveness -Less expensive	Not on formulary, generic(s) available
ZERIT CAP 15, 20, 30, 40MG; SOLN 1MG/ML	2	3	is on our formulary, but will be covered in a higher cost tier	On formulary, Higher Tier
ZESTORETIC TAB 10-12.5, 20-12.5, 20-25MG	3	not on formulary	is not covered on our 2009 formulary as there are generic equivalents and/or generic alternatives available. When you choose generic drugs, you get prescription medications that are: -FDA approved and regulated -Equal to brand-name drugs in terms of safety and effectiveness -Less expensive	Not on formulary, generic(s) available

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ZESTRIL TAB 2.5, 5, 10, 20, 30, 40MG	3	not on formulary	is not covered on our 2009 formulary as there are generic equivalents and/or generic alternatives available. When you choose generic drugs, you get prescription medications that are: -FDA approved and regulated -Equal to brand-name drugs in terms of safety and effectiveness -Less expensive	Not on formulary, generic(s) available
ZYFLO CR TAB 600MG	2	not on formulary	Not on 2009 formulary	Accolate, Singulair
ZYVOX SUSP 100MG/5ML; TAB 600MG	2	4	is on our formulary, but will be covered in a higher cost tier	On formulary, Higher Tier