

The Blue Cross and Blue Shield of New Mexico (BCBSNM), Prime Therapeutics Pharmacy and Therapeutics Committee meeting was held May 24, 2010. The following changes to the BCBSNM Drug List were recommended.

### Brand Name Medications Moved to Third Tier Copay

Effective October 1, 2010

Third-Tier Brand	Second-Tier Alternatives	First-Tier Generic Alternatives
Zovirax ointment		acyclovir
Concerta	Vyvanse	dextroamphetamine ext-release
Avandia	Actos	
Avandamet	Actoplus Met	
Nitro Bid 2%	Nitrostat	
Lotrel 5-40 mg, 10-40 mg		amlodipine/benazepril
Hectorol	Zemplar	

### Brand Name Medications Added to Second Tier Copay

Effective January 1, 2010

New Second Tier Medications
Astepro 205.5 mcg/spray

Effective April 1, 2010

New Second Tier Medications
Lyrica
Multaq
Soriatane
Vyvanse
Welchol Pak

Effective July 1, 2010

New Second Tier Medications
Nitrostat
Prenaplus
Prenatabs FA
Prenatal 19
Prenatal Plus
Prenatal Plus/Iron
Prenatal + DHA:
SE-Natal 19

## New or Updated Prior Authorization, Step Therapy or Quantity Limits

Effective January 1, 2010

New Quantity Limits	
Embeda (morphine and naltrexone)	60 caps/30 days (100 mg/4.0mg – 120 caps/30 days)
Nucynta (tapentadol)	180 tabs/30 days
Astepro (azelastine)	0.15% 2 inhalers/month
Extavia (interferon beta 1b)	1 package per 30 days

Effective February 1, 2010

New Quantity Limits	
Cymbalta (duloxetine)	30 caps/30 days
Sumavel DosePro (sumatriptan)	3 kits (6 injections)

Effective July 1, 2010

New Quantity Limits	
Ampyra (dalfampridine) 60 tabs/30 days (Specialty Pharmacy)	

Effective April 1, 2010

New Prior Authorization	
Solodyn	
Ampyra (Specialty Pharmacy)	