



**Gold Coast  
Health Plan**<sup>SM</sup>  
A Public Entity

# List of Covered Drugs

**Effective  
April 1, 2017**

## INTRODUCTION

We are pleased to provide the *Gold Coast Health Plan List of Covered Drugs* as a useful reference and informational tool. The *GCHP List of Covered Drugs* can assist practitioners in selecting clinically appropriate and cost effective products for their patients.

The information contained in the *GCHP List of Covered Drugs* is provided solely for the convenience of medical providers. We do not warrant or assure accuracy of such information nor is it intended to be comprehensive in nature. This *List of Covered Drugs* is not intended to be a substitute for the knowledge, expertise, skill and judgment of the medical provider in his or her choice of prescription drugs. All the information in this *List of Covered Drugs* is provided as a reference for drug therapy selection. Specific drug selection for an individual patient rests solely with the prescriber.

We assume no responsibility for the actions or omissions of any medical provider based upon reliance, in whole or in part, on the information contained herein. The medical provider should consult the drug manufacturer's product literature or standard references for more detailed information.

National guidelines can be found on the National Guideline Clearinghouse site at <http://www.guideline.gov>

## PREFACE

The *GCHP List of Covered Drugs* is organized by sections. Each section is divided by therapeutic drug class primarily defined by mechanism of action. Unless exceptions are noted, generally all applicable dosage forms and strengths of the drug cited are included in the *GCHP List of Covered Drugs*. **Generics should be considered the first line of prescribing.**

Drugs represented in the *GCHP List of Covered Drugs* may have varying cost to the plan member based on the plan's benefit structure. Generic medications typically are available at the lowest cost, brand-name medications on the *GCHP List of Covered Drugs* will generally cost more than generics, and brand-name medications not on the list will generally cost the most.

## PHARMACY AND THERAPEUTICS (P&T) COMMITTEE

The services of the **GCHP Pharmacy and Therapeutics Committee ("P&T Committee")** are utilized to approve safe and clinically effective drug therapies. The P&T Committee is an external advisory body of experts. The P&T Committee's voting members include physicians and pharmacists, all of whom have a broad background of clinical and academic expertise regarding prescription drugs. Employees with significant clinical expertise are invited to meet with the P&T Committee. Voting members of the P&T Committee must disclose any financial relationship or conflicts of interest with any pharmaceutical manufacturers.

## GENERIC SUBSTITUTION

Generic substitution is a pharmacy action whereby a generic version is dispensed rather than a prescribed brand-name product. However, not all strengths or dosage forms of the generic name may be generically available. The *GCHP List of Covered Drugs* is a mandatory generic drug list. So whenever a generic to a covered agent becomes available, it is added. And if the branded agent was part of the cover drug list, the branded agent will be removed from the covered drug list.

Generic drugs are usually priced lower than their brand-name equivalents. Generic drugs are:

- Approved by the U.S. Food and Drug Administration for safety and effectiveness, and are manufactured under the same strict standards that apply to brand-name drugs.
- Tested in humans to assure the generic is absorbed into the bloodstream in a similar rate and extent compared to the brand-name drug (bioequivalence). Generics may be different from the brand in size, color, and inactive ingredients, but this does not alter their effectiveness or ability to be absorbed just like the brand-name drug.
- Manufactured in the same strength and dosage form as the brand-name drugs.
- When a generic drug is substituted for a brand-name drug, you can expect the generic to produce the same clinical effect and safety profile as the brand-name drug (therapeutic equivalence).

## SPECIALTY PLAN DESIGN

### Specialty Guideline Management (SGM)

SGM is our utilization management program that helps ensure appropriate utilization for specialty medication based on currently accepted evidence-based medicine guidelines. The utilization management program is available for all therapeutic areas dispensed by our specialty pharmacies. SGM is designed to ensure safety and efficacy while preventing off-guideline utilization. Medications which may be included in the SGM program are identified in the *GCHP List of Covered Drugs* under the heading of “Specialty Medications” for your reference. SGM may also be combined with Inventory Management/ Dose Optimization and Optimal Drug Mix through High Performance Specialty Design to appropriately manage specialty medications.

## PLAN DESIGN

The *GCHP List of Covered Drugs* is a closed drug list plan design. The medications listed on the drug list are covered by the plan as represented. Certain medications on the list are covered if utilization management criteria are met (i.e. Step Therapy, LMN, CPA, Quantity Limits, etc); requests for use of such medications outside of their listed criteria will be reviewed for medical necessity.

Should it become necessary to write a prescription for a drug, which is not on the *GCHP List of Covered Drugs*, one must obtain clinical prior authorization.

## LEGEND

CPA	Clinical Prior Authorization
QL	Quantity Limit
STEP	Step Therapy
OTC	Over the Counter

## DRUG COST KEY

\$ .....	\$1 to \$10
\$\$ .....	\$11 to \$50
\$\$\$ .....	\$51 to \$100
\$\$\$\$ .....	\$101 to \$500
\$\$\$\$\$ .....	\$501 to \$1,000
\$\$\$\$\$\$ .....	\$1,001 to \$5,000
\$\$\$\$\$\$\$ .....	\$5,001 to \$10,000

## EXCLUDED THERAPEUTIC CLASSES AND DRUGS FROM GCHP LIST OF COVERED DRUGS

These therapeutic classes of drugs are carved out from the *GCHP List of Covered Drugs*. This means that when one of these medications is prescribed, it will be filled by the pharmacist, who in turn will bill the State of California for reimbursement.

DEPENDENCY TREATMENT		
Acamprosate Calcium	Buprenorphine Transdermal Patch	Naltrexone Microsphere Injectable
Buprenorphine HCl	Naltrexone	Suspension
Buprenorphine HCl-Naloxone HCl	Naltrexone HCl	Naloxone HCL

HIV		
Abacavir Sulfate	Elvitegravir-Cobicistat-Emtricitabine-	Lopinavir-Ritonavir
Abacavir Sulfate-Lamivudine	Tenofovir DF	Maraviroc
Abacavir Sulfate-Lamivudine-Zidovudine	Elvitegravir-Cobicistat-Emtricitabine-	Nevirapine
Abacavir Sulfate-Dolutegravir-Lamivudine	Tenofovir Alafenamide	Nelfinavir Mesylate
Atazanavir Sulfate	Emtricitabine	Raltegravir Potassium
Atazanavir-Cobisitat	Emtricitabine-Rilpivirine-Tenofovir DF	Rilpivirine Hydrochloride
Cobicistat	Emtricitabine-Rilpivirine-Tenofovir Alafen.	Ritonavir
Darunavir Ethanolate	Emtricitabine-Tenofovir DF	Saquinavir
Darunavir-Cobicistat	Enfuvirtide	Saquinavir Mesylate
Delavirdine Mesylate	Etravirine	Stavudine
Dolutegravir	Fosamprenavir Calcium	Tenofovir Disoproxil Fumarate
Efavirenz	Indinavir Sulfate	Tipranavir
Efavirenz-Emtricitabine-Tenofovir DF	Lamivudine	
Elvitegravir	Lamivudine-Zidovudine	

### ERECTILE DYSFUNCTION

COAGULATION FACTORS		
Antihemophilic Factor(Factor VIII)	Factor VIIa	Factor IX
Factor IX Complex	Factor XIIIa	Factor XIII
Antihemophilic Factor/Von Willebrand Complex	Anti-inhibitor Coagulant Complex	Von Willebrand Factor Complex

PSYCHIATRIC		
Amantadine HCl	lloperidone	Phenelzine Sulfate
Aripiprazole	Isocarboxazid	Pimozide
Asenapine Maleate	Lithium Carbonate	Quetiapine
Benzotropine Mesylate	Lithium Citrate	Risperidone
Brexpiprazole	Loxapine Succinate	Selegiline TD Patch
<i>Cariprazine (pending)</i>	Lurasidone Hydrochloride	Thioridazine HCl
Chlorpromazine HCl	Molindone HCl	Thiothixene
Clozapine	Olanzapine	Thiothixene HCl
Fluphenazine Decanoate	Olanzapine-Fluoxetine HCl	Tranlycypromine Sulfate
Fluphenazine HCl	Olanzapine Pamoate	Trifluoperazine HCl
Haloperidol	Paliperidone	Trihexyphenidyl
Haloperidol Decanoate	Paliperidone Palmitate	Ziprasidone HCl
Haloperidol Lactate	Perphenazine	Ziprasidone Mesylate

### NOTICE

The information contained in this document is proprietary. The information may not be copied in whole or in part without written permission. All rights reserved.

This document contains references to brand-name prescription drugs that are trademarks or registered trademarks of pharmaceutical manufacturers that are not affiliated with Gold Coast Health Plan.

When viewing the *GCHP List of Covered Drugs* via the Internet, please be advised that the *GCHP List of Covered Drugs* is updated periodically and changes may appear prior to their effective date to allow for client notification.



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Health Plan<sup>SM</sup>**  
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**List of Covered Drugs**  
by  
**Brand**

**Effective  
April 1, 2017**

## GCHP List of Covered Drugs Brand Name

Brand Names	Generic Name	Strength(s)	Coverage	Rx Cost	LMN, QL, Step, CPA
ABELCET	Amphotericin B Lipid	5mg/ml	Brand	\$\$\$\$\$\$	CPA
ABRAXANE	Paclitaxel Protein-Bound Particles	100mg	Brand	\$\$\$\$\$\$	Specialty
ACCOLATE	Zafirlukast	10mg, 20mg	Brand	\$\$\$\$	CPA
ACCUPRIL	Quinapril HCl	5mg, 10mg, 20mg, 40mg	Generic	\$\$\$	
ACETASOL HC	Hydrocortisone w/ Acetic Acid Otic	2.0%	Generic	\$\$\$	
ACTHAR	Corticotropin	80u, 42u, 25u	Brand	\$\$\$\$\$\$	Specialty Step: Corticosteroids
ACTHREL	Corticotropin Ovine Triflutate	100mcg	Brand	\$\$\$\$\$\$	Specialty CPA
ACTIMMUNE	Interferon Gamma-1B	2000000u/0.5ml	Brand	\$\$\$\$\$\$	Specialty CPA
ACTIVEVIA	Estradiol & Norethindrone Acetate	1-0.5mg	Generic	\$\$\$\$	
ACTONEL	Risedronate Sodium	5mg, 30mg, 35mg, 75mg, 150mg	Generic	\$\$\$	
ACTOPLUS MET	Pioglitazone HCl-Metformin HCl	15/850mg, 30/1000mg	Generic	\$\$\$\$	Step: Metformin
ACTOS	Pioglitazone HCl	15mg, 30mg, 45mg	Generic	\$\$\$\$	Step: Metformin
ACULAR LS	Ketorolac Tromethamine	0.40%	Generic	\$\$	
ADACEL/BOOSTRIX	Dip/Pert/Tet Adsorbed Vaccine	Unit of dose	Brand	\$\$\$\$	Approved for Age > 18
ADCIRCA	Tadalafil	20mg	Brand	\$\$\$\$\$\$	Specialty
ADDERALL	Amphetamine-Dextroamphetamine	5mg, 7.5mg, 10mg, 15mg, 20mg, 30mg	Generic	\$\$\$	CPA
ADDERALL XR	Amphetamine-Dextroamphetamine SR	5mg, 10mg, 15mg, 20mg, 30mg	Generic	\$\$\$\$	CPA
ADEMPAS	Riociguat	0.5mg; 1mg; 2.5mg	Brand	\$\$\$\$	Specialty CPA
ADRIAMYCIN	Doxorubicin HCl	2mg/ml	Generic	\$\$\$\$	
ADRUCIL	Fluorouracil	2.5g/50ml, 5g/100ml, 500mg/10ml	Generic	\$\$	
ADVAIR DISKUS	Fluticasone-Salmeterol	100/50, 250/50, 500/50	Brand	\$\$\$\$	QL= 1 Diskus / 30 days
ADVAIR HFA	Fluticasone-Salmeterol	45/21, 115/21, 230/21	Brand	\$\$\$\$	QL= 1 inhers/30 days
ADVIL	Ibuprofen	200mg	OTC	\$	QL= 106 tabs/31 days
AEROCAMBER	Spacer/Aerosol-Holding Chambers		Brand	\$\$\$	QL= 1/year
AEROSPAN	Flunisolide HFA Aero	80mcg	Brand	\$\$\$	
AFINITOR	Everolimus	2.5mg, 5mg, 10mg	Brand	\$\$\$\$\$\$	Specialty
AFREZZA	Insulin Regular (Human) Inh Pow	4 Units, 8 Units	Brand	\$\$\$\$	CPA
AGGRENOX	Aspirin-Dipyridamole	25-200mg	Brand	\$\$\$	Step: Dipyridamole & aspirin OR Plavix
AGRYLIN	Anagrelide HCL	0.5mg, 1 mg	Generic	\$\$\$\$	
AK-DILATE	Phenylephrine HCL	10% Opth Sol	Generic	\$\$	
ALBENZA	Albendazole Oral	200mg	Brand	\$\$\$\$	
ALCAINE	Proparacaine HCL	0.5% Opth Sol	Generic	\$\$	
ALDACTAZIDE	Spironolactone & Hydrochlorothiazide	25/25mg	Generic	\$\$\$	
ALDACTONE	Spironolactone	25mg, 50mg, 100mg	Generic	\$\$\$	CPA
ALDARA	Imiquimod	5%	Generic	\$\$\$	QL= 120 days/365 days
ALDOMET	Methyldopa	250mg, 500mg	Generic	\$\$\$\$	
ALDURAZYME	Laronidase	2.9mg/5ml	Brand	\$\$\$\$\$\$	Specialty CPA
ALECENSA	Alectinib HCL	150mg	Brand	\$\$\$\$\$\$	Specialty CPA
ALEVE	Naproxen Sodium	220mg	OTC	\$	QL= 106 tabs/31 days
ALFERON N	Interferon Alfa-n3	5000000u/ml	Brand	\$\$\$\$\$\$	Specialty
ALIMTA	Pemetrexed Disodium	100mg, 500mg	Brand	\$\$\$\$\$\$	Specialty
ALINIA	Nitazoxanide Oral	500mg	Brand	\$\$\$\$	
ALKERAN	Melphalan	2mg, 50mg	Brand	\$\$\$\$\$\$	Specialty
ALLEGRA	Fexofenadine	30mg, 60mg, 180mg	OTC	\$\$	Step: Claritin QL= 62 tabs/31 days
ALLEGRA-D	Fexofenadine-Pseudoephedrine	12 hour, 24 hour	OTC	\$\$	QL= 62 tabs/31 days for 12 hour QL= 31 tabs/31 days for 24 hour
ALLEGRA-D	Fexofenadine-Pseudoephedrine	60mg/120mg, 180mg/240mg	Generic	\$\$	
ALORA	Estradiol	0.025mg, 0.05mg, 0.075mg, 0.1mg	Brand	\$\$\$	QL= 8 patches/31 days
ALOXI	Palonosetron HCl	0.25mg	Generic	\$\$\$\$\$\$	Specialty QL= 1 vial/31 days
ALPHAGAN P	Brimonidine Tartrate	0.15%	Generic	\$\$\$	Age < 21
ALREX	Loteprednol Etabonate	0.2%	Brand	\$\$\$\$	
ALTACE	Ramipril	1.25mg, 2.5mg, 5mg, 10mg	Generic	\$\$\$	

\$ ----- \$1 to \$10  
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## GCHP List of Covered Drugs Brand Name

AMARYL	Glimepiride	1mg, 2mg, 4mg	Generic	\$\$\$	
AMBIEN	Zolpidem Tartrate	5mg, 10mg	Generic	\$\$	QL= 31 tabs/31 days
AMBIEN CR	Zolpidem Tartrate CR	6.25mg 12.5mg	Generic	\$\$\$\$	Step: Failure of Zolpidem QL= 31 tabs/31 days
AMBISOME	Amphotericin B Liposome	510mg	Brand	\$\$\$\$	Specialty CPA
AMEVIVE	Alefacept	15mg	Brand	\$\$\$\$\$\$	Specialty Step: Methotrexate and Cyclosporine and Enbrel
AMIKIN	Amikacin IV		Generic	\$\$\$\$	QL= 14 days
AMINOCAPROIC ACID	Aminocaproic Acid	250mg/ml, 500mg	Generic	\$\$\$\$\$\$	Specialty CPA
AMINOSYN II INJ 10%	Amino Acid Infusion 10%	10%	Brand	\$\$\$	CPA Step: IBS: Linaclotide OIC: Colace
AMITIZA	Lubiprostone	8mcg, 24mcg	Brand	\$\$\$\$	QL=62 caps/31 days
AMOXIL	Amoxicillin-Oral		Generic	\$\$	
AMPICILLIN	Ampicillin IV	125mg, 250mg, 500mg, 1g, 2g, 10g	Generic	\$\$\$	CPA
AMPYRA	Dalfampridine	10mg	Generic	\$\$\$\$\$\$	Specialty CPA
ANAFRANIL	Clomipramine HCl	25mg, 50mg, 75mg	Generic	\$\$\$	CPA
ANALPRAM-HC	Hydrocortisone Acetate w/ Pramoxine	1-1%, 1-2.5%, 2.5%, 2.5-1%	Generic	\$\$\$\$	
ANCEF	Cefazolin		Generic	\$\$\$	
ANCOBON	Flucytosine Oral	250mg, 500mg	Brand	\$	CPA
ANDRODERM	Testosterone	2.5mg/24HR, 5mg/24HR	Brand	\$	CPA
ANGELIQ	Drospirenone-Estradiol	0.5-1mg	Brand	\$\$\$\$	
ANORO ELLIPT	Umeclidinium-Vilanterol Aero Pow	62.5-25 mcg/Inh	Brand	\$\$\$\$	CPA for Age <18 yoa
ANTABUSE	Disulfiram	250mg, 500mg	Generic	\$\$\$	
APIDRA	Insulin Glulisine	100u/ml	Brand	\$\$\$\$	CPA
APLENZIN	Bupropion HBr	174mg, 348mg, 522mg	Brand	\$\$	
APOKYN	Apomorphine Hydrochloride	50mg, 100mg, 20mg/ml	Brand	\$\$\$\$\$\$	Specialty CPA
APRESOLINE	Hydralazine HCl	10mg, 25mg, 50mg, 100mg	Generic	\$\$\$\$	
APRI	Desogestrel & Ethinyl Estradiol Tab 0.15 MG-30 MCG		Generic	\$\$\$	
AQUA-MEPHYTON	Phytonadione Inj Sol	1mg/0.5mL	Generic	\$\$\$	
ARALAST	Proteinase Inhibitor	400mg, 500mg, 800mg, 1000mg	Brand	\$\$\$\$\$\$	Specialty CPA
ARALEN	Chloroquin Phosphate Oral	250mg	Generic	\$\$\$	
ARANELLE	Norethindrone-Eth Estradiol Tab 0.5-35/1- 35/0.5-35 MG-MCG		Generic	\$\$	
ARANESP	Darbepoetin Alfa-Polysorbate	25mcg, 40mcg, 60mcg, 100mcg, 150mcg, 200mcg, 300mcg, 500mcg	Brand	\$\$\$\$\$\$	Specialty, Available at Retail QL= 1 inj/21 days (500mcg)
ARCALYST	Rilonacept	220mg	Brand	\$\$\$\$\$\$	QL= 2 inj/28 days (all other strengths) Specialty CPA
ARELIA	Pamidronate Disodium	30mg, 90mg	Brand	\$\$\$\$\$\$	CPA
ARICEPT, ARICEPT ODT	Donepezil Hydrochloride	5mg, 10mg, 23mg	Generic	\$\$\$\$	
ARIMIDEX	Anastrozole	1mg	Generic	\$\$\$\$	
ARIXTRA	Fondaparinux Sodium	2.5mg/0.5ml, 5mg/0.4ml, 7.5mg/0.6ml, 10mg/0.8ml	Generic	\$\$\$\$\$\$	Age 18 to 75 QL= 30 syringes/30 days
ARMOUR THYRO	Thyroid	32.5mg, 65mg, 130mg, 195mg	Generic	\$\$	
ARNUITY ELLIPTA	Fluticasone Furoate Aero Pow	100mcg; 200mcg	Brand	\$\$\$	
AROMASIN	Exemestane	25mg	Generic	\$\$\$\$	Specialty
ASA	Aspirin	81mg, 325mg	OTC	\$	QL= 122 tabs/31 days
ASACOL, ASACOL HD	Mesalamine	400mg, 800mg	Brand	\$\$\$	CPA
ASMANEX	Mometasone Furoate	110mcg, 220mcg	Brand	\$\$\$\$	Step: Flovent HFA
ASTELIN	Azelastine HCl	0.1%	Generic	\$\$\$\$	QL= 2 bottles/31 days
ASTEPRO	Azelastine HCl	137mcg, 0.15%	Brand	\$\$\$\$	QL= 2 bottles/31 days
ATARAX	Hydroxyzine HCl	10mg, 25mg, 50mg	Generic	\$\$	
ATIVAN	Lorazepam	0.5mg, 1mg, 2mg,	Generic	\$\$\$	QL= 124 tabs/31 days (0.5mg, 1mg)
ATROVENT	Ipratropium Bromide	0.02%	Generic	\$\$\$\$	QL= 62 tabs/31 days (2mg)
ATROVENT HFA	Ipratropium Bromide HFA	17mcg	Brand	\$\$\$\$	QL= 2 inhrs HFA/31 days
AUGMENTIN	Amoxicillin/Clavulanate-Tabs, Susp		Generic	\$\$\$	
AURALGAN	Benzocaine-Antipyrine		Generic	\$\$\$	
AVALIDE	Irbesartan-Hydrochlorothiazide	150-12.5mg, 300-12.5mg, 300-25mg	Generic	\$\$	Step: losartan potassium HCT

\$ ----- \$1 to \$10

\$\$ ----- \$11 to \$50

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**GCHP List of Covered Drugs**  
**Brand Name**

AVAPRO	Irbesartan	75mg, 150mg, 300mg	Brand	\$\$\$	Step: losartan potassium
AVASTIN	Bevacizumab		Brand	\$\$\$\$\$\$	Specialty
AVELOX	Moxifloxacin Oral		Generic	\$\$\$	CPA
AVIANE	Levonorgestrel & Ethinyl Estradiol Tab	0.1 MG-20 MCG	Generic	\$	
AVODART	Dutasteride	0.5mg	Brand	\$\$\$\$	Step: Tamsulosin OR Doxazosin OR Terazosin
AVONEX	Interferon Beta-1a	30mcg	Brand	\$\$\$\$\$\$	Specialty CPA
AXERT	Almotriptan Malate	6.25mg, 12.5mg	Generic	\$\$\$	Step: Sumatriptan Succinate QL= 6 tabs/31 days (6.25mg) QL= 12 tabs/31 days (12.5 mg)
AXIRON	Testosterone	30mg/1.5ml	Brand	\$	CPA
AYGESTIN	Norethindrone Acetate	5mg	Generic	\$\$\$\$	
AZACTAM	Aztreonam IV		Generic	\$\$\$\$\$	CPA
AZASITE	Azithromycin	1%	Brand	\$	
AZILECT	Rasagiline Mesylate	0.5mg, 1mg	Generic	\$\$\$	Step: Selegiline
AZOR	Amlodipine Besylate-Olmesartan Medoxomil	5-20mg, 5-40mg, 10-20mg, 10-40mg	Generic	\$\$\$\$	Step: amlodipine
AZULFIDINE	Sulfasalazine	500mg	Generic	\$\$\$	
BACTRIM DS	Sulfamethoxazole/Trimethoprim		Generic	\$	
BACTROBAN	Mupirocin		Generic	\$	
BANZEL	Rufinamide	200mg, 400mg	Generic	\$\$\$\$	CPA
BARACLUDE	Entecavir	0.5mg, 1mg, 0.05mg/ml	Brand	\$\$\$\$\$\$	Specialty CPA
BASAGLAR	Insulin Glargine	100 UNIT/ML	Brand	\$\$\$\$	CPA Member must have ONE of the following medically documented issues: (1) Unable to draw up insulin into a syringe or self-administer, due to mechanical, physical, or environmental factors (2) Visual Impairment (3) Has severe phobia to traditional syringes and needles as documented in the patient's medical records (4) use a Disetronic Insulin Pump (D-TRONplus)
BECONASE AQ	Beclomethasone Dipropionate Monohydrate	0.042%	Brand	\$\$\$\$	Step: Fail one: flunisolide, fluticasone Step: Two of the following agents: Zolpidem, zaleplon, eszopiclone, temazepam
BELSOMRA	Suvorexant	5mg;10mg;15mg;20mg	Brand	\$\$\$\$	
BELVIQ XR	Lorcaserin HCL Tab SR 24HR	20mg	Brand	\$\$\$\$	CPA
BENADRYL	Diphenhydramine HCL	25mg, 50mg	OTC	\$	QL= 104 caps/31 days Age <=12
BENADRYL LIQUID	Diphenhydramine HCL		OTC	\$	QL= 240ml/31 days Age <12
BENADRYL-D	Diphenhydramine-Phenylephrine	12.5mg/5ml	OTC	\$	QL= 248ml/31 days
BENEMID	Probenecid	500mg	Generic	\$\$\$\$	
BENICAR	Olmesartan Medoxomil	5mg, 20mg, 40mg	Generic	\$\$\$	Step: losartan potassium
BENICAR HCT	Olmesartan Medoxomil -HCTZ	20-12.5mg, 40-12.5mg, 40-25mg	Generic	\$\$\$	Step: losartan potassium HCT
BENTYL	Dicyclomine HCL	10mg, 20mg	Generic	\$\$\$	
BENZAMYCIN	Benzoyl Peroxide-Erythromycin	5-3%	Generic	\$\$\$\$	
BENZOYL	Benzoyl Peroxide	5% GEL	OTC	\$	QL= 85g/31 days
BETALIN-S	Thiamine HCL Inj Sol	100mg/mL	Generic	\$\$\$\$	
BETAPACE	Sotalol HCL	80mg, 120mg, 160mg, 240mg	Generic	\$\$\$\$	
BETASERON	Interferon Beta-1b	0.3mg	Brand	\$\$\$\$\$\$	Specialty Step: Extavia
BETOPIC	Betaxolol HCL	0.50%	Generic	\$\$\$	
BEXSERO/ TRUMENBA	Meningococcal Group B Vaccine	Unit of dose	Brand	\$\$\$\$	Approved for Age > 18

\$ ----- \$1 to \$10  
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**GCHP List of Covered Drugs  
Brand Name**

BIAXIN	Clarithromycin Oral	250mg, 500mg, 125mg/5ml, 250mg/5ml	Generic	\$\$\$	QL= 28 tabs/14 days, Max 2 fills/31 days (250mg & 500mg) QL= 280ml/14 days, Max 2 fills of 280ml/31 days (125mg/5ml & 250mg/5ml)
BICILLIN L-A	Benzathine IM		Generic	\$\$\$\$	CPA
BICNU	Carmustine	100mg	Brand	\$\$\$\$\$\$	Specialty
BILTRICIDE	Praziquantal Oral	600mg	Brand	\$\$\$	
BLEOMYCIN	Bleomycin Sulfate	15u, 30u	Generic	\$\$\$\$\$\$	Specialty
BLEPH-10	Sulfacetamide Sodium	10%	Generic	\$\$	
BONIVA	Ibandronate Sodium	3mg/3ml	Generic	\$\$\$\$	CPA
BONIVA	Ibandronate Sodium	2.5mg, 150mg	Generic	\$\$\$\$	
BOTOX	OnabotulinumtoxinA	50u, 100u, 200u	Brand	\$\$\$\$\$\$	Specialty CPA
BREO ELLIPTA	Fluticasone-Vilanterol	100/25; 200-25	Brand	\$\$\$	STEP: Symbicort or Advair HFA
BRILINTA	Ticagrelor	60mg, 90mg	Brand	\$\$\$\$	Step: Clopidogrel bisulfate
Brisdelle	Paroxetine Mesylate	7.5mg 25 mg; 50 mg; 75 mg; 100 mg; 10 mg/ml;	Brand	\$\$\$\$	CPA
BRIVIACT	Brivaracetam	50mg/5 ml	Brand	\$\$\$\$	Step Therapy: Levetiracetam
BROVANA	Arformoterol Tartrate	15mcg	Brand	\$\$\$\$	Step: Foradil
BUMEX	Bumetanide	0.5mg, 1mg, 2mg,	Generic	\$\$\$	
BUSPAR	Buspirone HCl	5mg, 10mg, 15mg, 30mg	Generic	\$\$\$	QL= 62/30 days
BUTALBITAL	Butalbital		Generic	\$\$	
BYDUREON	Exenatide	2mg Ext Release Susp	Brand	\$\$\$\$	Step: Metformin
BYETTA	Exenatide	5mcg, 10mcg	Brand	\$\$\$\$	Step: Metformin
CABERGOLINE	Cabergoline	0.5mg	Generic	\$\$\$\$\$\$	CPA
CABOMETYX	Cabozantinib S-Malate	20 mg; 40 mg; 60 mg	Brand	\$\$\$\$\$\$	CPA CPA
CALCIPOTRIENE	Calcipotriene	0.005% OIN	Brand	\$\$\$\$	Step: TWO topical corticosteroids
CALCIUM GLUCONATE	Calcium Gluconate	50MG, 500MG	Generic	\$\$	
CAMPATH	Alemtuzumab	30mg/ml	Brand	\$\$\$\$\$\$	Specialty
CAMPOTOSAR	Irinotecan HCl	20mg/ml	Brand	\$\$\$\$\$\$	Specialty
CANASA	Mesalamine	1000mg	Generic	\$\$\$\$	
CANCIDAS	Caspofungin Acetate	50mg, 70mg	Brand	\$\$	Specialty CPA
CAPOTEN	Captopril	12.5mg, 25mg, 50mg, 100mg	Generic	\$\$\$	
CAPOZIDE	Captopril & Hydrochlorothiazide	25-15mg, 25-25mg, 50-15mg, 50-25mg	Generic	\$\$\$	
CARAC	Fluorouracil	0.5%	Brand	\$\$\$\$	
CARAFATE	Sucralfate	1g	Generic	\$\$\$\$	
CARBATROL	Carbamazepine	100mg, 200mg, 300mg	Brand	\$\$\$\$	
CARBOPLATIN	Carboplatin	50mg/5ml, 150mg/15ml, 450mg/45ml, 600mg/60ml, 50mg, 150mg, 450mg	Generic	\$\$\$\$\$\$	Specialty CPA
CARDENE	Nicardipine HCl	20mg, 30mg 30mg, 60mg, 90mg, 180mg, 240mg, 120mg/24, 180mg/24, 240mg/24,	Generic	\$\$	
CARDIZEM	Diltiazem HCl	300mg/24, 360mg/24	Generic	\$\$\$\$	
CARDURA	Doxazosin Mesylate	1mg, 2mg, 4mg, 8mg	Generic	\$\$\$\$	
CARIMUNE	Immune Globulin	3g, 6g, 12g 200mg/mL Inj; 1GM/10mL Sol; 330mg tab	Brand	\$\$\$\$\$\$	Specialty; Available at Retail CPA
CARNITOR	Levocarnitine		Generic	\$\$\$	
CASODEX	Bicalutamide	50mg	Generic	\$\$\$\$	
CATAPRES	Clonidine HCl	0.1mg, 0.2mg, 0.3mg	Generic	\$\$\$	
CEFOTAN	Cefotetan-IV		Generic	\$\$\$	CPA
CEFTIN	Cefuroxime IV, Oral		Generic	\$\$\$	QL= 20 tabs/10 days Step: Two Oral NSAIDS, One That Must Be Meloxicam
CELEBREX	Celecoxib	50mg, 100mg, 200mg, 400mg	Generic	\$\$\$\$	
CELEXA	Citalopram Hydrobromide	10mg, 20mg, 40mg	Generic	\$\$	
CELLCEPT	Mycophenolate Mofetil	250mg, 500mg, 250mg/ml	Generic	\$\$\$\$	Specialty CPA for Age < 21
CEPHULAC	Lactulose	10g/15ml, 20g/30ml	Generic	\$\$\$\$	

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## GCHP List of Covered Drugs Brand Name

CERDELGA	Eliglustat Tartrate	84mg	Brand	\$\$\$\$\$\$\$	Specialty CPA
CEREZYME	Imiglucerase	200u, 400u	Brand	\$\$\$\$\$\$	Specialty CPA
CERUMENEX	Triethanolamine Oleate		Brand	\$\$\$	
CESIA	Desogest-Ethin Est Tab 0.1-0.025/0.125-0.025/0.15-0.025MG-MG		Generic	\$\$	
CHANTIX	Varenicline Tartrate	0.5mg, 1mg	Brand	\$\$\$\$	CPA
CHEMET	Succimer	100MG	Brand	\$\$\$\$\$\$	CPA
CHLOROTHIAZ TAB 250MG	Chlorothiazide Tab	250mg	Generic	\$\$\$	
CHLORTHALIDONE	Chlorthalidone	25mg	Brand	\$\$	
CHOLBAM	Cholic Acid	50mg, 250mg	Brand	\$\$\$\$\$\$\$	CPA
CILOXAN	Ciprofloxacin HCl	3%	Generic	\$\$\$	
CIMZIA	Certolizumab Pegol	200mg/ml	Brand	\$\$\$\$\$\$	Specialty CPA
CINRYZE	C1 Inhibitor	500u	Brand	\$\$\$\$\$\$	Specialty CPA
CIPRO	Ciprofloxacin Oral		Generic	\$\$\$	
CIPRO	Ciprofloxacin Oral	5%, 250mg/5ml	Brand	\$\$\$	
CIPRODEX	Ciprofloxacin-Dexamethasone	0.3-0.1%	Brand	\$\$\$\$	
CISPLATIN	Cisplatin	50mg/50ml, 100mg/100ml, 200mg/200ml	Generic	\$\$\$	
CLADRIBINE	Cladribine	1mg/ml	Generic	\$\$\$\$\$\$	Specialty
CLAFORAN	Cefotaxime IV		Generic	\$\$\$	CPA
CLARITIN	Loratadine	5mg/5mL	OTC	\$\$	QL= 310ml/31 days
CLARITIN	Loratadine	10mg	OTC	\$\$	QL= 31 caps/31 days
CLEOCIN	Clindamycin Oral, IV		Generic	\$\$\$	CPA
CLEOCIN-T	Clindamycin Phosphate	1%, 2%	Generic	\$\$\$\$	
CLIMARA	Estradiol TD	0.025mg, 0.0375mg, 0.05mg, 0.06mg, 0.075mg, 0.1mg	Generic	\$\$\$\$	QL= 4 patches/28 days
CLIMARA PRO	Estradiol-Levonorgestrel		Brand	\$\$\$	QL= 4 patches/28 days
CLINORIL	Sulindac	150mg, 200mg	Generic	\$\$\$	
CLOTIRIMAZOLE	Clotrimazole Cream	1%	OTC	\$ to \$\$\$\$	
COLACE	Docusate Sodium	50mg, 100mg, 250mg	Generic	\$	
COLAZAL	Balsalazide Disodium	750mg	Generic	\$\$\$\$	
COLCRYS	Colchicine	0.6mg	Brand	\$\$\$\$	Step: NSAIDS
COLESTID	Colestipol HCl	1g, 5g, 5/7.5g	Generic	\$\$\$\$	Step: Cholestyramine
COLY-MYCIN M	Colistimethate Sodium	150mg	Brand	\$\$\$\$\$\$	Specialty CPA
COMBIPATCH	Estradiol-Norethindrone Ace	0.05/0.14mg, 0.05/0.25mg	Brand	\$\$\$	QL= 8 patches/28 days
COMPAZINE	Prochlorperazine Maleate	5mg, 10mg	Generic	\$\$	
COMTAN	Entacapone	200mg	Brand	\$\$\$\$	Step: Pramipexole OR Ropinrole HCl OR Carbidopa & Levodopa
CONCERTA	Methylphenidate HCl	18mg, 27mg, 36mg, 54mg	Brand	\$\$\$\$\$\$	Age > 23
CONDOMS	Condoms		OTC	\$\$	QL= 14/31 days
CONTRACE	Naltrexone HCl-Bupropion	8-90mg 12HR Tab	Brand	\$\$\$\$	CPA
COPAXONE/GLATOPA	Glatiramer Acetate	20mg/ml; 40mg/mL	Generic	\$\$\$\$\$\$	Specialty CPA
COPEGUS	Ribavirin	200mg	Brand	\$\$\$\$\$\$	Specialty CPA
COREG	Carvedilol	3.125mg, 6.25mg, 12.5mg, 25mg	Generic	\$\$\$\$	
CORGARD	Nadolol	20mg, 40mg, 80mg	Generic	\$\$	
CORLANOR	Ivabradine HCL	5mg, 7.5mg	Brand	\$\$\$\$	CPA
CORTISPORIN	Neomycin-Colistin-HC-Thonzonium		Generic	\$\$	
CORTISPORIN OPTH	Neomycin-Polymyxin-HC	1.0%	Generic	\$\$	
CORTROSYN	Cosyntropin	0.25mg	Generic	\$\$\$\$	Specialty
COSENTYX	Secukinumab Subcutaneous Soln	150mg/mL	Brand	\$\$\$\$\$\$	Specialty CPA
COTELLIC	Cobimetinib Fumarate	20mg	Brand	\$\$\$\$\$\$	Specialty CPA
COUMADIN	Warfarin Sodium	1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg	Generic	\$\$\$	
COZAAR	Losartan Potassium	25mg, 50mg, 100mg	Generic	\$\$	
CREON	Amy-Lip-Prot	5, 10, 20, 6000u, 12000u, 24000u	Brand	\$\$\$\$	

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**GCHP List of Covered Drugs  
Brand Name**

Drug Code	Brand Name	Strength	Form	Generic	Price	Notes
CRESEMBA	Isavuconazonium Sulfate	372 mg Inj; 186 mg Cap	Brand	\$\$\$\$\$\$		CPA
CRESTOR	Rosuvastatin Calcium	5mg, 10mg, 20mg, 40mg	Generic	\$\$\$\$		Clinical Note: Documented diagnosis of invasive aspergillosis or mucormycosis with documentation of failure or intolerance to both first and second line agents: voriconazole & amphotericin B for aspergillosis; posiconazole and amphotericin B for mucormycosis Step: 90-day Trial of the following: Atorvastatin
CROLOM	Cromolyn Sodium	4%	Generic	\$\$		
CRYSSELLE-28	Norgestrel & Ethinyl Estradiol Tab 0.3 MG-30 MCG		Generic	\$\$		
CUBICIN	Daptomycin IV	500mg	Brand	\$\$\$\$		CPA
CYCLESSA	Desogest-Ethin Est Tab 0.1-0.025/0.125-0.025/0.15-0.025MG-MG		Generic	\$\$		
CYCLOPHOSPHAMIDE	Cyclophosphamide	25mg, 50mg, 500mg, 1g, 2g	Brand	\$\$\$\$\$\$		Specialty
CYMBALTA	Duloxetine HCl	20mg, 30mg, 60mg	Generic	\$\$\$\$		
CYTOGAM	Cytomegalovirus Immune Globulin		Brand	\$\$\$\$\$\$		Specialty CPA
CYTOTEC	Misoprostol	100mcg, 200mcg	Generic	\$\$\$\$		QL= 372 tabs/365 days (200mcg), 372 tabs/365 days (100mcg)
CYTOVENE	Gancyclovir IV	500mg	Generic	\$		CPA
CYTOXAN	Cyclophosphamide	2g	Brand	\$\$\$\$\$\$		Specialty CPA
D10W	Dextrose Inj	10%	Generic	\$\$\$		
D5W	Dextrose Inj	5%	Generic	\$\$\$		
DACARBAZINE	Dacarbazine	100mg, 200mg	Generic	\$\$\$\$\$\$		Specialty
DAKLINZA	Daclatasvir Dihydrochloride	30MG, 60MG	Brand	\$\$\$\$\$\$		Specialty CPA
DALIRESP	Roflumilast	500mcg	Brand	\$\$\$\$		Step: LABA (Foradil OR Servevant), AND Anticholinergics (Atrovent Inhaled OR Spiriva) AND Inhaled Corticosteroids
DALVANCE	Dalbavancin HCL for IV Soln	500mg	Brand	\$\$\$\$\$\$		
DAPSONE	Dapsone Oral	25mg, 100mg	Generic	\$\$		
DAPTACEL/INFANRIX	Dip/Pert/Tet Vaccine	Unit of dose	Brand	\$\$\$\$		Approved for Age > 18
DAUNORUBINCIN	Daunorubicin HCl	20mg, 5mg/ml	Generic	\$\$\$\$\$\$		Specialty
DAYPRO	Oxaprozin	600mg	Generic	\$\$\$\$		
DECADRON	Dexamethasone	0.5mg, 0.75mg, 1.0 mg, 1.5mg, 4mg, 6mg	Generic	\$\$\$		
DEFEROXAMINE	Deferoxamine Mesylate	500mg, 2g	Generic	\$\$\$\$\$\$		Specialty
DELSYM	Dextromethorphan Polistirex	30mg/5ml	OTC	\$\$		QL= 148ml/31 days
Delzicol	Mesalamine	400mg	Brand	\$\$\$\$		CPA
DEPAKOTE SPR	Divalproex Sodium Sprinkle	125mg, 250mg, 500mg	Generic	\$\$\$		
DEPAKOTE, DEPAKOTE ER	Divalproex Sodium	125mg, 250mg, 500mg	Generic	\$\$\$		
DEPO-MEDROL	Methylprednisolone Acetate	40mg/ml, 80mg/ml	Generic	\$\$\$\$		
DEPO-PROVERA	Medroxyprogesterone Acetate IM Susp 150 MG/ML		Generic	\$\$\$		
DEPO-PROVERA	Medroxyprogesterone Acetate IM Susp 400 MG/ML		Brand	\$\$\$\$		
DEPO-TESTOSTERONE	Testosterone Cypionate in Oil	200mg/mL	Generic	\$\$		
DESMOPRESSIN	Desmopressin Acetate	0.1mg, 0.2mg, 4mcg/ml, 0.1%	Generic	\$\$\$\$		CPA
DESOGEN-28	Desogestrel & Ethinyl Estradiol Tab 0.15 MG-30 MCG		Generic	\$\$\$		CPA
DESOWEN	Desonide	5%	Generic	\$\$\$\$		Step: TWO topical corticosteroids
DESXYN	Methamphetamine HCl	5mg	Generic	\$\$\$\$		
DESYREL	Trazodone HCl	50mg, 100mg, 150mg, 300mg	Generic	\$\$		
DETROL, DETROL LA	Tolterodine Tartrate	1mg, 2mg, 4mg	Generic	\$\$\$		Step: Enablex OR Oxyrol OR Vesicare
DEXAMETHASONE	Dexamethasone	2mg	Brand	\$\$\$		

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## GCHP List of Covered Drugs Brand Name

Drug Name	Generic Name	Strength	Form	Price Category	Notes
DEXILANT (formerly KAPIDEX)	Dexlansoprazole	30mg, 60mg	Brand	\$\$\$\$	Step: Failure of two: omeprazole, pantoprazole QL= 31 caps/packets/31 days CPA
DIDRONEL	Etidronate Disodium	400mg	Generic	\$\$\$\$	Intolerance or adverse reaction to formulary bisphosphonates: Actonel and Fosamax
DIFFERIN	Adapalene	0.1%, 0.3%	Generic	\$\$\$\$	CPA History of treatment failure to both of the following: (1) oral antibiotics (e.g. erythromycin, tetracycline, doxycycline) (2) topical therapy (e.g. benzoyl peroxide, erythromycin, clindamycin)
DIFLUCAN	Fluconazole Oral	50mg, 100mg, 150mg, 200mg	Generic	\$\$\$\$	QL= 2 tabs/31 days (150mg)
DILANTIN	Phenytoin Sodium	100mg	Generic	\$	
DILAUDID	Hydromorphone HCl	1mg, 2mg, 4mg, 8mg	Generic	\$\$\$	QL= 186 tabs/31 days CPA required if taken in conjunction with alprazolam
DILAUDID-5	Hydromorphone HCl	1mg/ml	Brand	\$\$\$\$	QL= 500ml/31 days CPA required if taken in conjunction with alprazolam
DIOVAN	Valsartan	40mg, 80mg, 160mg, 320mg	Generic	\$	
DIOVAN HCT	Valsartan-Hydrochlorothiazide	80-12.5mg, 160-12.5mg, 160-25mg, 320-12.5mg, 320-25mg	Generic		
DIPENTUM	Olsalazine Sodium	250mg	Brand	\$\$\$\$	CPA
DIPROLENE	Betamethasone Dipropionate Augmented	5%	Generic	\$\$\$	
DIPROSONE	Betamethasone Dipropionate	5%	Generic	\$\$\$	
DISALCID	Salsalate	500mg, 750mg	Generic	\$	
DITROPAN XL	Oxybutynin Chloride	5mg, 10mg	Generic	\$	
DOLOPHINE	Methadone Oral Solution	5mg/5ml, 10mg/5ml	Generic	\$\$\$	QL= 500ml/31 days CPA required if taken in conjunction with alprazolam
DOVONEX	Calcipotriene	0.005% SOL	Generic	\$\$\$\$\$	CPA
DOXEPIN	Doxepin HCl	150mg	Brand	\$\$\$	
DOXIL	Doxorubicin HCl Liposomal	2mg/ml	Generic	\$\$\$\$\$\$	Specialty
DOXYCYCLINE	Doxycycline Oral		Generic	\$	
DRISDOL	Ergocalciferol	50000u	Generic	\$\$\$	
Duavee	Conjugated Estrogens-Bazedoxifene	45-20mg	Brand	\$\$\$	CPA Trial and failure of BOTH Evista and Alendronate
DUETACT	Pioglitazone HCl-Glimepiride	30-2mg, 30-4mg	Generic	\$\$\$\$	Step: Metformin & Insulin QL= 15 patches/31 days (1st fill)
DURAGESIC	Fentanyl TD Patch	12mcg, 25mcg, 50mcg, 75mcg, 100mcg	Generic	\$\$\$\$	CPA (2nd fill)
DYCELL	Dicloxacillin-Oral		Generic	\$	
EDECRIN	Ethacrynic Acid	25mg	Generic	\$\$\$	CPA
EES	Erythromycin Esthylsuccinate	400mg	Generic	\$\$\$	
EFFEXOR	Venlafaxine HCl	25mg, 37.5mg, 50mg, 75mg, 100mg	Generic	\$	
EFFEXOR ER	Venlafaxine HCl SR	37.5mg, 75mg, 150mg, 225mg	Generic	\$\$\$	
EFFIENT	Prasugrel HCl	5mg, 10mg	Brand	\$\$\$\$	STEP: Clopidogrel bisulfate
ELAPRASE	Idursulfase	6mg/3ml	Brand	\$\$\$\$\$\$	Specialty CPA
ELAVIL	Amitriptyline HCl	10mg, 25mg, 50mg, 75mg, 100mg, 150mg	Generic	\$	
ELDEPRYL	Selegiline HCl	5mg	Generic	\$\$\$	
ELIDEL	Pimecrolimus	1%	Brand	\$\$\$\$	CPA
ELIGARD	Leuprolide Acetate	7.5mg, 22.5mg, 30mg, 45mg	Brand	\$\$\$\$\$\$	Specialty CPA
ELIMITE	Permethrin	5%	Generic	\$\$\$\$	
ELLA	Ulipristal Acetate	30mg	Brand	S	QL= 4 tabs/365 days Specialty
ELLENC	Epirubicin HCl	2mg/ml	Brand	\$\$\$\$\$\$	CPA
ELOCON	Mometasone Furoate	0.1%	Generic	\$\$\$	

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## GCHP List of Covered Drugs Brand Name

ELOXATIN	Oxaliplatin	50mg, 100mg, 200mg	Brand	\$\$\$\$\$	Specialty Specialty
EMEND	Aprepitant	80mg, 115mg, 125mg, 150mg	Brand	\$\$\$	CPA
EMETROL	Fructose-Dextrose-Phosphoric Acid		OTC	\$	QL= 240ml/ 31 days
ENABLEX	Darifenacin Hydrobromide	7.5mg, 15mg	Generic	\$\$\$	Step: Oxybutynin Specialty CPA 2 concurrent DMARDS (one of which must be Methotrexate) OR Topical Steroid AND psoralen + UVA treatment (PUVA)
ENBREL	Etanercept	25mg, 25mg/0.5ml, 50mg/ml	Brand	\$\$\$\$\$	
ENGERIX	Hepatitis B Vaccine	10mcg/0.5ml, 20mcg/ml	Brand	\$\$\$\$\$	CPA
ENPRESSE-28	Levonorgestrel-Eth Estra Tab 0.05-30/0.075-40/0.125-30MG-MCG		Generic	\$\$	
ENTRESTO	Sacubitril-Valsartan	24-26MG, 97-103MG, 49-51MG	Brand	\$\$\$	CPA CPA
EPCLUSA	Sofosbuvir-Velpatasvir	400-100mg	Brand	\$\$\$\$\$\$	Preferred Agent
EPCLUSA	Sofosbuvir-Velpatasvir	400-100 MG	Brand	\$\$\$\$\$	CPA
EPIDUO GEL	Adapalene-Benzoyl Peroxide Gel	0.1-2.5 %; 0.3-2.5%	Generic	\$\$\$	
EPIPEN, EPIPEN-JR	Epinephrine	0.15mg, 0.3mg	Brand	\$\$\$	QL= 3 units/31 days (pkg size 1) QL= 4 units/31 days (pkg size 2)
EPIVIR	Lamivudine Oral	150mg, 300mg	Brand	\$\$\$	Specialty
EPOGEN	Epoetin Alfa	2000u/ml, 3000u/ml, 4000u/ml, 10000u/ml, 20000u/ml, 40000u/ml	Brand	\$\$\$\$\$	Specialty, Available at Retail QL= 1 vial/7 days (40,000 units) QL= 12 vials/28 days (all other strengths)
EPOPROSTENOL	Epoprostenol Sodium	0.5mg, 1.5mg	Generic	\$\$\$\$\$	Specialty CPA
ERBITUX	Cetuximab	100mg, 200mg	Brand	\$\$\$\$\$	Specialty
ERYTHROCIN	Erythromycin Stearate	25mg, 500mg	Generic	\$\$	
ERYTHROMYCIN BASE	Erythromycin		Generic	\$\$\$	
ESBRIET	Pirfenidone Cap	267mg	Brand	\$\$\$\$\$\$\$	Specialty CPA
ESTRACE	Estradiol	0.5mg, 1mg, 2mg	Generic	\$\$	
ESTRACE VAG	Estradiol Vaginal Cream		Brand	\$\$\$	
ESTRASORB	Estradiol		Brand	\$\$\$	QL= 56 units/28 days
ESTROGEL	Estradiol		Brand	\$\$\$	QL= 2 pump bottles/28 days
ESTROSTEP FE	Norethindrone Ac-Ethinyl Estrad-Fe Tab 1-20/1-30/1-35 MG-MCG		Generic	\$\$\$	
ETHYOL	Amifostine Crystalline	500mg	Brand	\$\$\$\$\$	Specialty CPA
EUFLEXXA	Sodium Hyaluronate	10mg/ml	Brand	\$\$\$\$\$	Specialty CPA
EURAX	Crotamiton	10%	Brand	\$\$\$	Step: Permethrin
EVISTA	Raloxifene HCl	60mg	Generic	\$\$\$	Step: Alendroante Specialty CPA
EVOXAC	Cevimeline HCl	30mg	Brand	\$\$\$\$\$	
EXELON	Rivastigmine Tartrate	1.5mg, 3mg, 4.5mg, 6mg	Generic	\$\$\$	
EXELON PATCH	Rivastigmine TD Patch	4.6mg/24HR, 9.5mg/24HR	Generic	\$\$\$	
EXJADE	Deferasirox	125mg, 250mg, 500mg	Generic	\$\$\$\$\$	Specialty
EXTAVIA	Interferon Beta-1b	0.3mg	Brand	\$\$\$\$\$	Specialty
FABRAZYME	Agalsidase beta	5mg, 35mg	Brand	\$\$\$\$\$	Specialty CPA
FAMVIR	Famcyclovir Oral	125mg, 250mg, 500mg	Generic	\$\$\$	
FARXIGA	Dapagliflozin Propanediol	5mg; 10mg	Brand	\$\$\$	Step: Metformin
FARYDAK	Panobinostat Lactate Cap	10mg, 15mg, 20mg,	Brand	\$\$\$\$\$\$\$	Specialty CPA
FASLODEX	Fulvestrant	250mg/5ml	Generic	\$\$\$\$\$	
FELDENE	Piroxicam	10mg, 20mg	Generic	\$\$\$	
FEMARA	Letrozole	2.5mg	Generic	\$\$\$\$\$	
FEMHRT	Norethindrone Acetate-Ethinyl Estradiol	0.5mg-2.5mcg, 1mg-5mcg	Generic	\$\$\$	
FENTORA	Fentanyl Citrate	100mcg, 200mcg, 300mcg, 400mcg, 600mcg, 800mcg	Brand	\$\$\$\$\$	CPA: Cancer Only QL= 124 tabs/31 days
FERROUS SULF	Ferrous Sulfate		OTC	\$	QL= 100 caps/31 days QL= 480ml/31 days
FINACEA, FINACEA PLUS KIT	Azelaic Acid	15%, Kit	Brand	\$\$\$	Step: Metrogel or Metrotion

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FIORICET	Butalbital-Acetaminophen-Caffeine	50-325-40mg	Generic	\$\$	QL= 120 tabs/31 Days QL=120 tabs/31 days CPA required if taken in conjunction with alprazolam
FIORICET w/CODEINE	Butalbital-Acetaminophen-Caffeine	50-325-30-40mg	Generic	\$\$\$	
FLAGYL	Metronidazole Oral, IV		Generic	\$\$ to \$\$\$\$	
FLEBOGAMMA	Immune Globulin	5%, 10%	Brand	\$\$\$\$\$	Specialty CPA
FLEXERIL	Cyclobenzaprine HCl	5mg, 10mg	Generic	\$\$\$	QL= 93 tabs/31 days
FLOLAN	Epoprostenol Sodium	0.5mg, 1.5mg	Brand	\$\$\$\$\$	Specialty CPA
FLOMAX	Tamsulosin HCl	0.4mg	Generic	\$\$\$\$	
FLONASE	Fluticasone Propionate	50mcg	Generic	\$\$\$	QL= 1 inhers/31 days
FLORINEF	Fludrocortisone Acetate	0.1mg	Generic	\$\$\$	
FLORONE	Diflorasone Diacetate	0.05%	Generic	\$\$\$	
					Step: Arnuity Ellipta for age >12
					QL= 1 inhers/31 days (44mcg)
					QL= 1 inhr/31 days (110mcg)
					QL= 1 inhers/31 days (220mcg)
FLOVENT HFA	Fluticasone Propionate HFA	44mcg, 110mcg, 220mcg	Brand	\$\$\$\$	
FLUDARA	Fludarabine Phosphate	50mg	Brand	\$\$\$\$\$	Specialty
FLUDARABINE	Fludarabine Phosphate	50mg, 50mg/2ml	Generic	\$\$\$\$\$	Specialty
FLUZONE/FLUVIRIN/ FLUMIST	Influnza Virus Vaccine	Unit of Dose	Brand	\$\$	
FML FORTE	Fluorometholone	0.25%	Brand	\$\$	
		2.5mg, 5mg, 10mg, 15mg, 20mg, 25mg			
FOCALIN, FOCALIN XR	Dexmethylphenidate HCl	30mg, 35mg, 40mg	Generic	\$\$\$\$	Age > 23
FOLTX	Folic Acid	400mcg, 800mcg, 1mg	Generic	\$\$	
					Step: Striverdi
					QL= 12 caps/12 days (12pk)
FORADIL	Formoterol Fumarate		Brand	\$\$\$\$	
FORTAMET	Metformin HCl Tab SR 24HR Osmotic	500mg, 1000mg	Generic	\$\$\$\$	CPA
					Specialty
FORTAZ	Ceftazidime IV		Generic	\$\$\$	CPA
					Specialty CPA
					Failed two oral biphosphonates And one injectable biosphoshonate
FORTEO	Teriparatide	600mcg/2.4ml	Brand	\$\$\$\$\$	
FOSAMAX	Alendronate Sodium	5mg, 10mg, 35mg, 70mg	Generic	\$\$\$	QL= 4 tabs/28 days
					Specialty, Available at Retail
					Age >18
					QL= 30 syringes/30 days
FRAGMIN	Dalteparin Sodium	2500u/0.2ml, 5000u/0.2ml, 7500u/0.3ml, 10000u/ml, 25000u/ml, 9500u, 12500u, 15000u, 18000u	Brand	\$\$\$\$\$	QL= 10 vials/31 days
					Specialty
GAMASTAN	Immune Globulin		Brand	\$\$\$\$\$	CPA
		1g/10ml, 2.5g/25ml, 5g/50ml,			
		10g/100ml, 20g/200ml, 30g/300ml, 0.5g,			
GAMMAGARD SD	Immune Globulin	2.5g, 5g, 10g	Brand	\$\$\$\$\$	Specialty
					CPA
		10%, 1g/10ml, 2.5g/25ml, 5g/5ml,			
GAMUNEX	Immune Globulin	10g/100ml, 20g/200ml	Brand	\$\$\$\$\$	Specialty
					CPA
GARAMYCIN	Gentamicin IM or IV		Generic	\$\$	QL= 14 days
GARDASIL/CERVARIX/GARDASIL 9	Human Pappillomavirus Vaccine	Unit of dose	Brand	\$\$\$\$	Approved for Age > 18
GELNIQUE	Oxybutynin Chloride	10%	Brand	\$\$\$	
GEMZAR	Gemcitabine HCl	200mg, 1g	Brand	\$\$\$\$\$	Specialty
		0.2mg, 0.4mg, 0.6mg, 0.8mg, 1mg,			
		1.2mg, 1.4mg, 1.6mg, 1.8mg, 2mg, 5mg,			
GENOTROPIN	Somatropin	12mg	Brand	\$\$\$\$\$	Specialty
					CPA
GILENYA	Fingolimod HCl	0.5mg	Brand	\$\$\$\$\$	Specialty
					CPA
					Specialty
GILOTRIF	Afatnib Dimaleate	20mg; 30mg; 40mg	Brand	\$\$\$\$\$	CPA
GLEEVEC	Imatinib Mesylate	100mg, 400mg	Generic	\$\$\$\$\$	Specialty
GLUCAGEN	Glucagon HCl	1mg	Brand	\$\$\$\$	CPA required for 2nd fill
GLUCOPHAGE	Metformin HCl	500mg, 750mg, 850mg, 1000mg	Generic	\$\$\$	
GLUCOPHAGE XR	Metformin HCl SR	500mg, 750mg	Generic	\$\$\$	
GLUCOTROL	Glipizide	5mg, 10mg	Generic	\$\$\$	
GLUCOTROL XL	Glipizide SR	2.5mg, 5mg, 10mg	Generic	\$\$\$	
GLUCOVANCE	Glyburide-Metformin	1.25-250mg, 2.5-500mg, 5-500mg	Generic	\$\$\$\$	
GLUMETZA	Metformin HCl Tab SR 24HR Modified Rel	500mg, 1000mg	Generic	\$\$\$\$	CPA

\$ ----- \$1 to \$10  
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**GCHP List of Covered Drugs  
Brand Name**

GLYCOLAX	Polyethylene Glycol		OTC	\$\$	
GLYXAMBI	Empagliflozin-Linagliptin Tab	10-5mg; 25-5mg	Brand	\$\$\$\$	Step: Jardiance OR Tradjenta
GOLYTELY	PEG 3350-KCl-Na Bicarb-NaCl-Na Sulfate		Generic	\$\$\$\$	Specialty
GRANISETRON	Granisetron HCl	1mg, 0.1mg/ml, 1mg/ml, 4mg/4ml,	Generic	\$\$\$\$\$\$	CPA
GRIS-PEG	Griseofulvin Oral	125mg, 250mg	Brand	\$\$	
HALAVEN	Eribulin Mesylate	1mg/2ml	Generic	\$\$\$\$\$\$	Specialty
HARVONI	Ledipasvir-Sofosbuvir Tab	90-400 mg	Brand	\$\$\$\$\$\$	CPA: HCV
HAVRIX	Hepatitis A Vaccine	720u, 1440u	Brand	\$\$\$\$\$\$	CPA
HECTOROL	Doxercalciferol	0.5mcg, 1mcg, 2.5mcg, 2mcg/ml, 4mcg/2ml	Generic	\$\$\$\$	Step: Rocaltrol
HELIDAC	Metronidaz-Tetracyc-Bis		Brand	\$\$\$\$	
HEMANGEOL	Propranolol HCL Oral Soln	4.28mg/mL	Brand	\$\$\$\$	CPA
HEPARIN LOCK	Heparin Sodium Lock Flush	10U, 100U	Generic	\$	
HEPARIN SOD	Heparin Sodium	1000u/ml, 5000u/ml	Generic	\$	
HEPSERA	Adefovir Dipivoxil	10mg	Generic	\$\$\$\$\$\$	Specialty CPA
HERCEPTIN	Trastuzumab	440mg	Brand	\$\$\$\$\$\$	Specialty
HETLIOZ	Tasimelteon	20mg	Brand	\$\$\$\$\$\$	CPA
HUMALOG	Insulin Lispro	50/50, 75/25, 100U/mL	Brand	\$\$\$\$	CPA (Pen Only) Member must have ONE of the following medically documented issues: (1) Unable to draw up insulin into a syringe or self-administer, due to mechanical, physical, or environmental factors (2) Visual Impairment (3) Has severe phobia to traditional syringes and needles as documented in the patient's medical records
HUMALOG	Insulin Lispro	200U/mL	Brand	\$\$\$\$	CPA Member must have ONE of the following medically documented issues: (1) Unable to draw up insulin into a syringe or self-administer, due to mechanical, physical, or environmental factors (2) Visual Impairment (3) Has severe phobia to traditional syringes and needles as documented in the patient's medical records (4) Documented valid reason for requiring a higher potency insulin
HUMATROPE	Somatropin	5mg, 6mg, 12mg, 24mg	Brand	\$\$\$\$\$\$	Specialty CPA Specialty CPA 2 Concurrent DMARDS, one must be Methotrexate OR Topical Steroid AND psoralen + UVA treatment (PUVA) OR Systemic steroids (e.g., prednisone) AND an immunomodulator (e.g., azathioprine, mercaptopurine, cyclosporine or methotrexate) OR Topical Steroid AND psoralen + UVA treatment (PUVA)
HUMIRA	Adalimumab	20mg/0.4ml, 40mg/0.8ml	Brand	\$\$\$\$\$\$	
HUMULIN	Insulin Isophane & Regular	50/50, 70/30	Brand	\$\$\$	

\$ ----- \$1 to \$10  
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 \$\$\$\$\$\$\$ ----- \$5,001 to \$10,000



## GCHP List of Covered Drugs Brand Name

HUMULIN N	Insulin Isophane	100u/ml	Brand	\$\$\$	
HUMULIN R	Insulin Isophane	100u/ml, 500u/ml	Brand	\$\$\$	
HYCAMTIN	Topotecan HCl	4mg	Generic	\$\$\$\$\$	Specialty
HYDREA	Hydroxyurea	500mg	Generic	\$\$\$\$	
HYDRODIURIL	Hydrochlorothiazide	12.5mg, 25mg, 50mg	Generic	\$\$\$	
HYGROTON	Chlorthalidone	25mg, 50mg, 100mg	Generic	\$\$\$\$	
HYPERHEP	Hepatitis B Immune Globulin		Brand	\$\$\$\$\$\$	Specialty CPA
HYPERRHO	Rho D Immune Globulin	50mcg, 300mcg	Brand	\$\$\$\$\$\$	Specialty CPA
HYPER-SAL	Sodium Chloride Inh Sol	3.5%, 7%	Generic	\$\$	
HYTONE	Hydrocortisone	0.5%, 1%, 2.5%	Generic	\$\$\$	
HYTRIN	Terazosin HCl	1mg, 2mg, 5mg, 10mg	Generic	\$\$\$	
HYZAAR	Losartan Potassium & Hydrochlorothiazide	50-12.5mg, 100-12.5mg, 100-25mg	Generic	\$\$\$	
IBRANCE	Palbociclib	12.5mg; 75mg; 100mg	Brand	\$\$\$\$\$\$\$	Specialty CPA
IFEX	Ifosfamide	1 gm, 3 gm	Generic	\$\$\$\$\$\$\$	
ILOTYCIN	Erythromycin		Generic	\$\$	
IMBRUVICA	Ibrutinib	140mg	Brand	\$\$\$\$\$\$\$	Specialty CPA
IMDUR	Isosorbide Mononitrate	10mg, 20mg, 30mg, 60mg, 120mg	Generic	\$\$\$\$	
IMITREX	Sumatriptan Succinate Injection	4mg/0.5ml, 6mg/0.5ml	Generic	\$\$\$	Step: Sumatriptan Oral (QL= 9tabs/31 days) QL= 1 kit/31 days (2 syringes) QL= 2 vials/31 days QL= 9 tabs/31 days (25mg, 50mg, & 100mg)
IMITREX	Sumatriptan Succinate	25mg, 50mg, 100mg	Generic	\$\$\$	
IMODIUM	Loperamide HCl	2mg	Generic	\$\$	
IMPAVIDO	Miltefosine	50mg	Brand		CPA
IMURAN	Azathioprine	50mg	Generic	\$\$\$\$\$	
INCRELEX	Mecasermin	40mg/4ml	Brand	\$\$\$\$\$\$\$	Specialty CPA
INCRUSE ELLIPTA	Umeclidinium Br Aer Pow	62.5mcg/Inh	Brand	\$\$\$\$	
INDERAL	Propranolol HCl	20mg, 60mg, 80mg, 120mg, 160mg	Generic	\$\$\$	
INDOCIN	Indomethacin	25mg, 50mg, 75mg	Generic	\$\$	
INFERGEN	Interferon		Brand	\$\$\$\$\$\$\$	Specialty Step: Peg-Inton and Ribavarin
INFLECTRA	Infliximab-dyyb	100mg	Brand	\$\$\$\$\$\$\$	CPA Age >18
INNOHEP	Tinzaparin Sodium	20000u/ml	Brand	\$\$\$\$\$\$\$	QL= 31 vials/31 days
INSULIN SYRINGES	Syringes		OTC	\$	QL= 110/31 days
INTRALIPID INJ 20%	Fat Emulsion IV Soln	20%	Generic	\$\$\$	
INTRALIPID INJ 30%	Fat Emulsion IV Soln	30%	Brand	\$\$\$	
INTRON-A	Interferon Alfa-2B	3u, 5u, 10u, 18u, 25u, 50u	Brand	\$\$\$\$\$\$\$	Specialty QL= 2 inj/31 days
INTUNIV	Guanfacine HCL	1mg, 2mg, 3mg, 4mg	Brand	\$\$\$\$\$	Age > 23
INVANZ	Ertapenem IV		Generic	\$\$\$\$\$	CPA
INVOKAMET	Canagliflozin/Metformin HCl	50/100mg;50/500mg;150/100mg;150/500mg	Brand	\$\$\$\$	Step: Metformin
INVOKAMET XR	Canagliflozin/Metformin HCl	0mg	Brand	\$\$\$\$	Step: Metformin
INVOKANA	Canagliflozin	50-500mg; 50-1000mg; 150-500mg;	Brand	\$\$\$\$\$	Step: Metformin
ISO ATROPINE	Atropine Sulfate	100mg, 300mg	Generic	\$\$	
ISONIAZID	Isoniazid Oral	1%	Generic	\$\$	
ISOPTIN	Verapamil HCl	40mg, 80mg, 180mg, 240mg	Generic	\$\$\$	
ISORDIL	Isosorbide Dinitrate	5mg, 10mg, 20mg, 30mg, 40mg	Generic	\$\$\$\$	
IXEMPRA	Ixabepilone	15mg, 45mg	Generic	\$\$\$\$\$\$\$	
JANUMET	Sitagliptin-Metformin HCl	50-500mg, 50-1000mg	Brand	\$\$\$\$\$	Step: Metformin
JANUVIA	Sitagliptin Phosphate	25mg, 50mg, 100mg	Brand	\$\$\$\$	Step: Metformin
JARDIANCE	Empagliflozin	25mg;10mg	Brand	\$\$\$\$	Step: Metformin
JEVTANA	Cabazitaxel	60mg/1.5ml	Generic	\$\$\$\$\$\$\$	
JUBLIA	Efinaconazole Soln 10%	10%	Brand	\$\$\$\$\$	CPA
JUNEL FE	Norethindrone Ace & Ethinyl Estradiol-FE Tab 1 MG-20MCG, 1.5 MG-30 MCG		Generic	\$\$	
KARIVA	Desogest-Eth Estrad & Eth Estrad Tab	0.15-0.02/0.01 MG(21/5)	Generic	\$\$\$	

\$ ----- \$1 to \$10  
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**GCHP List of Covered Drugs  
Brand Name**

KELNOR	Ethinodiol Diacetate & Ethinyl Estradiol		Generic	\$\$	
KENALOG	Triamcinolone Acetonide	0.025%, 0.1%, 0.5%	Generic	\$\$	
KEPPRA	Levetiracetam	100mg/ml, 250mg, 500mg, 750mg,	Generic	\$\$\$	
KEPPRA XR	Levetiracetam SR	500mg, 750mg	Brand	\$\$\$	
KINERET	Anakinra		Brand	\$\$\$\$\$	Specialty CPA
KITABIS	Tobramycin	300mg/5ml	Brand	\$\$\$\$\$	Specialty
KLARON	Sulfacetamide Sodium	10%	Generic	\$\$\$	Step: Clindamycin Phosphatase Topical OR Erythromycin Topical
KLONOPIN	Clonazepam	0.125mg, 0.25mg, 0.5mg, 1mg, 2mg	Generic	\$\$	QL= 124 tabs/31 days (0.5mg, 1mg) QL= 62 tabs/31 days (2mg)
KUVAN	Sapropterin dihydrochloride	100mg	Brand	\$\$\$\$\$	Specialty CPA
KYNAMRO	Mipomersen Sodium Inj	200mg/mL	Brand	\$\$\$\$\$	Specialty CPA
LACTATED RINGERS	Lactated Ringers Inj	USP	Generic	\$\$\$	
LAMICTAL	Lamotrigine	25mg, 50mg, 100mg, 150mg, 200mg, 250mg	Generic	\$\$	
LAMICTAL XR	Lamotrigine SR	25mg, 100mg, 150mg, 200mg, 300mg	Generic	\$\$\$	
LAMISIL	Terbinafine Oral	250mg	Generic	\$\$\$	
LANCETS	Lancets		OTC	\$	QL= 200/31 days
LANOXIN	Digoxin	0.125mg, 0.25mg	Generic	\$\$\$	

CPA (Pen Only)  
Member must have failed Basaglar and have ONE of the following medically documented issues: (1) Unable to draw up insulin into a syringe or self-administer, due to mechanical, physical, or environmental factors (2) Visual Impairment (3) Has severe phobia to traditional syringes and needles as documented in the patient's medical records (4) use a Disetronic Insulin Pump (D-TRONplus)

LANTUS	Insulin Glargine	100u/ml, 500u/ml	Brand	\$\$\$	
LASIX	Furosemide	20mg, 40mg, 80mg	Generic	\$\$	
LASTACRAFT	Alcaftadine	0.25%	Brand	\$\$\$	
LENVIMA	Lenvatinib	14mg; 20mg; 10mg; 24mg	Brand	\$\$\$\$\$	Specialty CPA
LESSINA-28	Levonorgestrel & Ethinyl Estradiol Tab	0.1 MG-20 MCG	Generic	\$\$	
LETAIRIS	Ambrisentan	5mg, 10mg	Brand	\$\$\$\$\$	Specialty CPA
LEUCOVOR	Leucovorin Calcium	5mg, 10mg, 15mg, 25mg	Generic	\$\$\$	
LEUKERAN	Chlorambucil	2mg	Brand	\$\$\$\$\$	Specialty Specialty
LEUPROLIDE	Leuprolide Acetate	1mg/0.2ml, 5mg/ml	Generic	\$\$\$\$\$	CPA
LEUSTATIN	Cladribine	1mg/ml	Brand	\$\$\$\$\$	Specialty
LEVAQUIN	Levofloxacin Oral		Generic	\$\$	
LEVBID	Hyoscyamine Sulfate	0.0125mg, 0.375mg	Generic	\$\$	

CPA  
Member must have ONE of the following medically documented issues: (1) Unable to draw up insulin into a syringe or self-administer, due to mechanical, physical, or environmental factors (2) Visual Impairment (3) Has severe phobia to traditional syringes and needles as documented in the patient's medical records.

LEVEMIR, FLEXPEN	Insulin Detemir	100u/ml	Brand	\$\$\$	
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\$ ----- \$1 to \$10  
 \$\$ ----- \$11 to \$50  
 \$\$\$ ----- \$51 to \$100  
 \$\$\$\$ ----- \$101 to \$500  
 \$\$\$\$\$ ----- \$501 to \$1,000  
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**GCHP List of Covered Drugs  
Brand Name**

LEVORA-28	Levonorgestrel & Ethinyl Estradiol Tab 0.15 MG-30 MCG		Generic	\$\$	
LEVOTHROID	Levothyroxine Sodium	25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg, 500mcg	Generic	\$\$	
LEVOXYL	Levothyroxine Sodium	25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	Generic	\$\$	
LEXAPRO	Escitalopram Oxalate	5mg, 10mg, 20mg	Generic	\$\$\$\$	Step: Failure of two: citalopram, fluoxetine, fluvoxamine, paroxetine, sertraline
LIALDA	Mesalamine	1.2g	Brand	\$\$\$\$	CPA
LIBRIUM	Chlordiazepoxide HCl	5mg, 10mg, 25mg	Generic	\$\$	QL= 124 tabs/31 days
LIDEX	Fluocinonide	0.05%	Generic	\$\$	
LIDODERM	Lidocaine Patch	5%	Generic	\$\$\$\$\$	Step: NSAIDS
LINDANE	Lindane	1%	Generic	\$\$\$	QL= 93 patches/31 days
LINZESS	Linacotide	145mcg, 290mcg	Brand	\$\$\$\$	QL= 31 caps/31 days
LIORESAL	Baclofen	10mg, 20mg	Generic	\$\$\$\$	
LIPITOR	Atorvastatin Calcium	10mg, 20mg, 40mg, 80mg	Generic	\$\$\$\$	
LIPOSYN III INJ 10%	Fat Emulsion IV Soln	10%	Generic	\$\$\$	
LO/OVRAL	Norgestrel & Ethinyl Estradiol Tab 0.3 MG- 30 MCG		Generic	\$\$	
LODOSYN	Carbidopa	25mg	Generic	\$\$\$	Step: Carbidopa & Levodopa
LOESTRIN FE	Norethindrone Ace & Ethinyl Estradiol-FE Tab 1 MG-20 MCG, 1.5 MG-30 MCG		Generic	\$\$	
LOFIBRA	Fenofibrate	54mg, 67mg, 134mg, 160mg, 200mg	Generic	\$\$\$	
LOMOTIL	Diphenoxylate w/ Atropine	2.5mg	Generic	\$\$	
LONSURF	Trifluridine-Tipiracil	20-8.19mg, 15-6.14mg	Brand	\$\$\$\$\$\$\$	Specialty CPA
LOPID	Gemfibrozil	600mg	Generic	\$\$\$	
LOPRESSOR	Metoprolol Tartrate	25mg, 50mg, 100mg	Generic	\$\$\$	
LOTEMAX	Loteprednol Etabonate	0.5%	Brand	\$\$\$	
LOTENSIN	Benazepril HCl	5mg, 10mg, 20mg, 40mg	Generic	\$\$\$	
LOTENSIN HCT	Benazepril & Hydrochlorothiazide	5-6.5mg, 10-12.5mg, 20-12.5mg, 20- 25mg	Generic	\$\$\$	
LOTREL	Amlodipine Besylate-Benazepril HCl	2.5-10mg, 5-10mg, 5-20mg, 10-20mg	Generic	\$\$\$	
LOVAZA	Omega-3-acid Ethyl Esters	1gm	Generic	\$\$\$	CPA
LOVENOX	Enoxaparin Sodium	30mg/0.3ml, 40mg/0.4ml, 60mg/0.6ml, 80mg/0.8ml, 100mg/ml, 150mg/ml, 120mg/0.8ml	Generic	\$\$\$\$\$	QL= 28 syringes/14 days
LOW-OGESTREL	Norgestrel & Ethinyl Estradiol Tab 0.3 MG- 30 MCG		Generic	\$\$	
LOZOL	Indapamide	1.25mg, 2.5mg	Generic	\$\$\$	
LUCENTIS	Ranibizumab		Brand	\$\$\$\$\$\$\$	Specialty CPA
LUMIGAN	Bimatoprost	0.01%, 0.03%	Generic	\$\$\$	
LUPRON	Leuprolide Acetate	3.75mg, 7.5mg, 11.25mg, 22.5mg, 30mg	Brand	\$\$\$\$\$\$\$	Specialty CPA
LURIDE	Sodium Fluoride	0.5mg	Generic	\$\$\$	
LUTERA	Levonorgestrel & Ethinyl Estradiol Tab 0.1 MG-20 MCG		Generic	\$\$	
LUVOX	Fluvoxamine Maleate	25mg, 50mg, 100mg	Generic	\$\$\$	
LYNPARZA	Olaparib	50mg	Brand	\$\$\$\$\$\$\$	CPA
LYRICA	Pregabalin	25mg, 50mg, 75mg, 100mg, 150mg, 200mg, 225mg, 300mg	Brand	\$\$\$\$	Step: gabapentin
MACRODANTIN	Nitrofurantoin Macrorcrystal Oral		Brand	\$\$	
MACUGEN	Pegaptanib Sodium		Brand	\$\$\$\$\$\$\$	Specialty CPA
MAPAP	Acetaminophen Liquid	160mg/ml	OTC	\$	Age <10 QL= 248ml/31 days
MATULANE	Procarbazine HCl	50mg	Generic	\$\$\$\$\$\$\$	

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## GCHP List of Covered Drugs

### Brand Name

MAXALT, MAXALT-MLT	Rizatriptan Benzoate	5mg, 10mg	Generic	\$\$\$	QL= 9 tabs/31 days
MAXIPIME	Cefapime IV		Generic	\$\$	CPA
MAXITROL	Neomycin-Polymyxin-Dexamethasone	0.1%	Generic	\$\$	
MAXZIDE	Triamterene & Hydrochlorothiazide	37.5-25mg, 50-25mg, 75-50mg	Generic	\$\$\$	
MEBENDAZOLE	Mebendazole Oral	100mg	Brand	\$\$\$	
MEDROL	Methylprednisolone	2mg, 4mg, 8mg, 16mg, 32mg	Generic	\$\$\$	
MEFOXIN	Cefoxitin-IV		Generic	\$\$	CPA
MEGACE	Megestrol Acetate	20mg, 40mg	Generic	\$\$\$\$\$	
MEGACE	Megestrol Acetate	40mg/ml	Generic	\$\$\$\$\$	
MEKINIST	Trametinib Dimethyl Sulfoxide	2mg, 0.5mg	Brand	\$\$\$\$\$\$\$	Specialty CPA
MENACTRA	Meningococcal Polysaccharide Diphtheria Conjugate Vaccine	Unit of dose	Brand	\$\$\$\$	Approved for Age > 18
MENOMUNE	Meningococcal Polysaccharide Vaccine	Unit of dose	Brand	\$\$\$\$	Approved for Age > 18
MENOSTAR	Estradiol	14mcg	Brand	\$\$\$\$	QL= 4 patches/28 days
MENVEO	Meningococcal Oligosachcharide Diphtheria Conjugate Vaccine	Unit of dose	Brand	\$\$\$\$	Approved for Age > 18
MEPHYTON	Phytonadione	5MG	Brand	\$\$	CPA
MERREM	Meropenem IV		Generic	\$\$\$\$	CPA
MESTINON	Pyridostigmine Bromide	60mg, 60mg/5ml	Brand	\$\$\$\$	
METADATE CD	Methylphenidate HCl	10mg, 20mg, 30mg, 40mg, 50mg, 60mg	Brand	\$\$\$\$\$	Age > 23
METHADONE	Methadone HCl	5mg, 10mg	Generic	\$\$\$	QL= 124 tabs/31 days (5mg, 10mg) CPA required if taken in conjunction with alprazolam
METHADOSE	Methadone Oral Concentrate	10mg/ml	Generic	\$\$\$	QL= 250ml/31 days CPA required if taken in conjunction with alprazolam
METHERGINE	Methylegonovine Maleate	0.2 mg	Generic	\$\$\$\$	
METROGEL	Metronidazole Gel	0.75%	Generic	\$\$\$	
METROLOTION	Metronidazole	0.75%	Generic	\$\$\$	
MEVACOR	Lovastatin	20mg, 40mg	Generic	\$\$\$\$	
MEXATE	Methotrexate Sodium	1g, 1g/40ml, 25mg/ml, 50mg/2ml, 250mg/10ml	Generic	\$\$\$\$\$	
MIACALCIN	Calcitonin	200u/ACT	Generic	\$\$\$\$	CPA History of failure, intolerance, or contraindication to one of the following: Actonel, Boniva (tablets or injection), Fosamax
MIACALCIN Injection	Calcitonin	200u/ml	Brand	\$\$\$\$	CPA History of failure, intolerance, or contraindication to one of the following: Actonel, Boniva (tablets or injection), Fosamax, AND History of failure, intolerance, or contraindication to Miacalcin Nasal Spray
MICARDIS	Telmisartan	20mg, 40mg, 80mg	Generic	\$\$\$	Step: losartan potassium
MICRHOGAM PL	Rho D Immune Globulin	50mcg	Brand	\$\$\$\$\$	
MICROGESTIN	Norethindrone Ace & Ethinyl Estradiol Tab 1 MG-20 MCG, 1.5 MG-30 MCG		Generic	\$\$	
MICROGESTIN FE	Norethindrone Ace & Ethinyl Estradiol-FE Tab 1 MG-20 MCG, 1.5 MG-30 MCG		Generic	\$\$	
MICRO-K	Potassium Chloride	8mEq, 10mEq, 20mEq	Generic	\$\$	
MICRONASE	Glyburide	1.25mg, 2.5mg, 5mg	Generic	\$\$\$	
MIDAMOR	Amiloride HCl	5mg	Generic	\$\$\$\$	Step: spironolactone
MINIPRESS	Prazosin HCl	1mg, 2mg, 5mg	Generic	\$\$\$	
MIRAPEX	Pramipexole Dihydrochloride	0.125mg, 0.25mg, 0.5mg, 0.75mg, 1mg	Generic	\$\$\$	Step: carbidopa/levodopa, clonazepam, OR ropinirole

\$ ----- \$1 to \$10  
 \$\$ ----- \$11 to \$50  
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 \$\$\$\$\$\$ ----- \$1,001 to \$5,000  
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**GCHP List of Covered Drugs  
Brand Name**

MIRAPEX ER	Pramipexole Dihydrochloride SR	0.375mg, 0.75mg, 1.5mg, 3mg, 4.5mg	Generic	\$\$\$\$	Step: Pramipexole Dihydrochloride
MIRCETTE	Desogest-Eth Estrad & Eth Estrad Tab		Generic	\$\$\$	
MIRTAZAPINE	Mirtazapine	7.5mg, 15mg, 30mg, 45mg	Generic	\$\$\$	
MIRVASO	Brimonidine Tartrate Gel	0.33%	Brand	\$\$\$\$	CPA
MITOMYCIN	Mitomycin	5mg, 20mg, 40mg	Generic	\$\$\$\$\$\$	
M-M-R II	Measles, Mumps, and Rubella Virus Vaccine	Unit of dose	Brand	\$\$\$\$	Approved for Age > 18
MOBIC	Meloxicam	7.5mg, 15mg	Generic	\$\$\$\$	
MODICON	Norethindrone & Ethinyl Estradiol Tab		Generic	\$\$\$	
MONONESSA	Norgestimate & Ethinyl Estradiol Tab		Generic	\$\$	
MONOPRIL	Fosinopril Sodium	10mg, 20mg, 40mg	Generic	\$\$	
MONOPRIL HCT	Fosinopril Sodium & Hydrochlorothiazide	10-12.5mg, 20-12.5mg	Generic	\$\$\$\$	QL= 240ml/31 days (20mg/ml) QL= 1000ml/31 days (10mg/5ml) CPA required if taken in conjunction with alprazolam
MORPHINE SUL	Morphine Sulfate	15mg, 30mg, 20mg/ml, 10mg/5ml	Brand	\$\$	Age <10
MOTRIN	Ibuprofen	100mg/5ml	OTC	\$	QL= 248ml/31 days
MOTRIN	Ibuprofen	800mg	Generic	\$\$	QL= 93 tabs/31 days CPA required if taken in conjunction with alprazolam
MS CONTIN	Morphine Sulfate	15mg, 30mg, 60mg, 10mg, 200mg	Generic	\$\$\$	
MUCOMYST	Acetylcysteine Inh Sol	10%, 20%	Generic	\$\$\$	
MURO	Sodium Chloride	5% Solution	Generic	\$\$	
MYALEPT	Metreleptin for subcutaneous inj	11.3 mg	Brand	\$\$\$\$\$\$	Specialty CPA
MYAMBUTOL	Ethambutol Oral	100mg, 400mg	Generic	\$\$\$	
MYCAMINE	Micafungin IV	50mg, 100mg	Brand	\$\$\$	CPA
MYCOPHENOLATE	Mycophenolate Mofetil	250mg, 500mg	Generic	\$\$\$\$\$\$	Specialty CPA for Age < 21
MYLANTA	Alum & Mag Hydroxide-Simethicone	200-200-20MG/5mL, 400-400-40/5mL	Generic	\$\$	
MYOZYME	Alglucosidase Alfa	50mg	Brand	\$\$\$\$\$\$	Specialty CPA
MYRBETRIQ	MIRABEGRON	25mg, 50mg	Brand	\$\$\$\$	STEP: Oxybutynin
MYSOLINE	Primidone	50mg, 250mg	Generic	\$\$\$	
NAFCILLIN	Nafcillin IV		Generic	\$\$\$\$	CPA
NAGLAZYME	Galsulfase	1mg/ml	Brand	\$\$\$\$\$\$	Specialty CPA
NAMENDA	Memantine HCl	5mg, 5-10mg, 10mg	Generic	\$\$\$\$	
NAMENDA XR	Memantine HCl SR	7mg, 14mg, 28mg	Generic	\$\$\$\$	
NAPROSYN	Naproxen	220mg, 250mg, 275mg, 375m g, 500mg, 550mg	Generic	\$\$\$	
NASACORT AQ	Triamcinolone Acetonide	55mcg/ACT	Brand	\$\$\$\$	Step: Fail one: flunisolide, fluticasone
NASALIDE	Flunisolide	0.025%	Generic	\$\$\$	QL= 3 inhrs/bottles/31 days
NASONEX	Mometasone Furoate	50mcg/ACT	Brand	\$\$\$\$	CPA Age < 4 Step: Fail one: flunisolide, fluticasone
NATALCARE PLUS	Prenatal Vit w/ Fe Fumarate-FA		Generic	\$\$	Step: Prenatal OTC
NATPARA	Parathyroid Hormone (recombinant)	25mcg, 50mcg, 75mcg, 100mcg	Brand	\$\$\$\$\$\$	CPA
NAVELBINE	Vinorelbine Tartrate	10mg/ml, 50mg/5ml	Brand	\$\$\$\$\$\$	Specialty
NECON	Norethindrone & Ethinyl Estradiol Tab		Generic	\$\$	
NEOMYCIN	Neomycin Sulfate -Oral	500mg	Generic	\$\$\$\$	QL= 2 tabs/31 days
NEORAL	Cyclosporine	25mg, 100mg	Generic	\$\$\$\$\$\$	
NEOSPORIN	Neomycin/Polymyxin Gramicidin		Generic	\$\$	

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**GCHP List of Covered Drugs  
Brand Name**

NEULASTA	Pegfilgrastim	6mg/0.6ml	Brand	\$\$\$\$\$	Specialty, Available at Retail QL= 1 syringes/14 days
NEUMEGA	Oprelvekin	5mg	Brand	\$\$\$\$\$	Specialty, Available at Retail Age >18 QL= 21 vials/28 days
NEUPOGEN	Filgrastim	300mcg, 480mcg, 300mcg/0.5ml, 480mcg/0.8ml	Brand	\$\$\$\$\$	Specialty, Available at Retail QL= 14 vials/31 days (300mcg & 480mcg)
NEURONTIN	Gabapentin	100mg, 300mg, 400mg, 600mg, 800mg	Generic	\$\$\$\$	
NEXAVAR	Sorafenib Tosylate	200mg	Brand	\$\$\$\$\$	Specialty CPA
NIASPAN	Niacin	500mg, 750mg, 1000mg	Brand	\$\$\$\$	
NICODERM CQ	Nicotine TD Patch	7mg, 12mg, 21mg	OTC	\$\$	QL= 180 days/year
NICORETTE	Nicotine Gum/Lozenge	2mg, 4mg	OTC	\$\$\$\$	QL= 180 days/year
Nicotrol Inh	Nicotine Inhaler System	10mg (4mg delivered)	Brand	\$\$	Step: Nicotine Patch TD (62100050085) OR Nicotine Gum (621000100028) OR Nicotine Lozenge (621000100047); QL=180 days/365 days
Nicotrol NS	Nicotine Nasal Spray	10mg/mL	Brand	\$\$	Step: Nicotine Patch TD (62100050085) OR Nicotine Gum (621000100028) OR Nicotine Lozenge (621000100047); QL=180 days/365 days
NINLARO	Ixazomib Citrate	2mg; 3mg; 4mg	Brand	\$\$\$\$\$\$\$	Specialty CPA
NITRO-BID	Nitroglycerin	2%	Generic	\$\$\$	
NITRO-DUR	Nitroglycerin	2.5mg, 6.5mg, 0.1mg/HR, 0.2mg/HR, 0.4mg/HR, 0.6mg/HR	Generic	\$\$\$\$	Step: nitroglycerin 2% ointment
NITROSTAT	Nitroglycerin	0.3mg, 0.4mg, 0.6mg	Brand	\$\$\$\$	
NIX	Permethrin Lotion	1%	OTC	\$\$	QL= 240ml/31 days
NIZORAL	Ketoconazole Topical		Generic	\$\$	
NIZORAL	Ketoconazole Oral	200mg	Generic	\$\$\$	
NOLVADEX	Tamoxifen Citrate	10mg, 20mg	Generic	\$\$\$\$	
NORDETTE	Levonorgestrel & Ethinyl Estradiol Tab 0.15 MG-30 MCG		Generic	\$\$\$	
NORDITROPIN	Somatropin	5mg/1.5ml, 10mg/1.5ml, 15mg/1.5ml, 30mg/3ml	Brand	\$\$\$\$\$	Specialty CPA
NORINYL	Norethindrone & Mestranol Tab 1 MG- 35MCG, 1 MG-50 MCG		Generic	\$\$	
NORMAL SALINE	NaCl Inj	0.90%	Generic	\$\$\$	
NORMODYNE	Labetalol HCl	100mg, 200mg, 300mg	Generic	\$\$\$	
NORPRAMIN	Desipramine HCl	10mg, 25mg, 50mg, 75mg, 100mg, 150mg	Generic	\$\$	
NOR-QD	Norethindrone	0.35mg	Generic	\$\$\$	
NORTHERA	Droxidopa		Brand	\$\$\$\$\$	Specialty CPA
NORTREL	Norethindrone & Ethinyl Estradiol Tab 0.5 MG-35 MCG, 1 MG-35 MCG, 0.5- 35/0.75-35/1-35 MG-MCG		Generic	\$\$	
NORVASC	Amlodipine Besylate	2.5mg, 5mg, 10mg	Generic	\$\$\$	
NOVAREL	Chorionic Gonadotropin	10000u	Generic	\$\$\$\$\$	Specialty CPA
NOVOLIN	Insulin Isophane & Regular	70/30	Brand	\$\$\$	
NOVOLIN N	Insulin Isophane	100u/ml	Brand	\$\$\$	
NOVOLIN R	Insulin Isophane	100u/ml	Brand	\$\$\$	
NOVOLOG	Insulin Aspart	70/30, 100u/ml	Brand	\$\$\$\$	
NOXAFIL	Posaconazole Oral	40mg/ml	Brand	\$\$\$\$\$	Step: Fluconazole
NOXAFIL	Posaconazole Relayed Release Tab	100mg	Brand	\$\$\$\$\$	Step: Fluconazole
NPLATE	Romiplostim	250mcg, 500mcg	Generic	\$\$\$\$\$	1st fill: QL = 30 tabs (MAX 12/day) 2nd fill: CPA CPA required if taken in conjunction with alprazolam
NUCYNTA	Tapentadol HCL	50mg	Brand	\$\$\$\$	
NULYTELY	PEG 3350-KCl-Sod Bicarb-NaCl		Generic	\$\$\$\$	
NUTROPIN	Somatropin	5mg, 10mg, 5mg/2ml, 20mg/2ml	Brand	\$\$\$\$\$	Specialty CPA

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## GCHP List of Covered Drugs Brand Name

NUVARING	Etonogestrel-Ethinyl Estradiol VA Ring 0.120-0.015 MG/24HR		Brand	\$\$\$	
NUVIGIL	Armodafinil	50mg, 150mg, 250mg	Brand	\$\$\$\$\$	Age > 23
NYSTATIN	Nystatin Swish and Swallow		Generic	\$\$	
NYSTOP	Nystatin Topical Powder		Generic	\$\$	
OCELLA	Drospirenone-Ethinyl Estradiol Tab 3- 0.03 MG		Generic	\$\$\$	
OCTAGAM	Immune Globulin	2.5g, 5g, 10g, 25g 100mcg, 200mcg, 500mcg, 1000mcg,	Brand	\$\$\$\$\$	Specialty CPA
OCTREOTIDE	Octreotide Acetate	1mg/ml, 50mcg/ml	Generic	\$\$\$\$\$	Specialty CPA
OCUFLOX	Ofloxacin	0.3%	Generic	\$\$\$	
ODOMZO	Sonidegib Phosphate	200MG	Brand	\$\$\$\$\$\$\$	CPA
OFEV	Nintedanib Esylate	100mg;150mg	Brand	\$\$\$\$\$\$\$	CPA
OGEN	Estropipate	0.75mg, 1.5mg, 3mg	Generic	\$\$	
OMNARIS	Ciclesonide	50mcg/ACT	Brand	\$\$\$\$	Step: Fail one: flunisolide, fluticasone
OMNICEF	Cefdinir	300mg, 125mg/5ml, 250mg/5ml	Generic	\$\$\$\$	
OMNIPRED	Prednisolone Acetate	1%	Generic	\$\$\$\$	
OMNITROPE	Somatropin	5.8mg, 5mg/1.5ml, 10mg/1.5ml	Brand	\$\$\$\$\$	Specialty CPA
ONGLYZA	Saxagliptin HCl	2.5mg, 5mg	Brand	\$\$\$\$	Step: Metformin
ONTAK	Denileukin Diftitox	150mcg/ml	Brand	\$\$\$\$\$	Specialty
ONXOL	Paclitaxel	30mg/5ml, 100mg/16.7ml, 150mg/25ml, 300mg/50ml	Generic	\$\$\$\$\$	Step: Failure of (2) two of the following: morphine, oxycodone, OR hydromorphone QL= 124 tabs/31 days CPA required if taken in conjunction with alprazolam
OPANA	Oxymorphone HCl	5mg, 10mg	Generic	\$\$\$\$	Step: Oxycontin QL= 62 tablets/31 days CPA required if taken in conjunction with alprazolam
OPANA ER	Oxymorphone HCl	5mg, 7.5mg, 10mg, 15mg, 20mg, 30mg, 40mg	Brand	\$\$\$\$	CPA required if taken in conjunction with alprazolam
OPSUMIT	Macitentan	10mg	Brand	\$\$\$\$\$	Specialty CPA
ORENCIA	Abatacept	250mg	Brand	\$\$\$\$\$	Specialty CPA Intolerant or inadequate response after 3 months of treatment to methotrexate AND Intolerant or inadequate response after 3 months of treatment to etanercept (Enbrel) and adalimumab (Humira) AND/OR Intolerant or inadequate response after 3 months of treatment to Remicade
ORKAMBI	Lumacaftor-Ivacaftor	200-125MG	Brand	\$\$\$\$\$	Specialty CPA
ORTHO EVRA	Norelgestromin-Ethinyl Estradiol TD PTWK 150-35 MCG/24HR		Generic	\$\$\$	QL= 3 patches/28 days
ORTHO TRI-CYCLEN	Norgestimate-Eth Estrad Tab 0.18- 35/0.215-35/0.25-35 MG-MCG		Generic	\$\$	
ORTHO TRI-CYCLEN LO	Norgestimate-Eth Estrad Tab 0.18- 25/0.215-25/0.25-25 MG-MCG		Generic	\$\$	
ORTHO-CEPT	Desogestrel & Ethinyl Estradiol Tab 0.15 MG-30 MCG		Generic	\$\$	
ORTHO-CYCLEN	Norgestimate & Ethinyl Estradiol Tab 0.25 MG-35 MCG		Generic	\$\$\$	
ORTHO-NOVUM	Norethindrone & Ethinyl Estradiol Tab 1 MG-35 MCG, 1 MG-50MCG, 0.5-35/0.75- 35/1-35 MG-M		Generic	\$\$\$	
ORTHOVISC	Hyaluronan	15mg/ml	Brand	\$\$\$\$\$	Specialty CPA
ORUDIS	Ketoprofen	50mg, 75mg, 200mg	Generic	\$\$\$	

\$ ----- \$1 to \$10  
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## GCHP List of Covered Drugs Brand Name

Otrexup	Methotrexate Soln PF Auto-Injector	10mg;15mg;20mg;25mg	Brand	\$\$\$\$\$	CPA
OVCON 35	Norethindrone & Ethinyl Estradiol Tab		Generic	\$\$\$	
OVIDE	Malathion Lotion	0.50%	Generic	\$\$\$\$	QL= 60ml/30days
OXYTROL	Oxybutynin	3.9mg/24HR	Brand	\$\$\$	Step: Oxybuttnin
OYSTER CAL	Calcium carbonate	500MG, 600MG, 1250MG, 1500MG	Generic	\$\$\$	
PACERONE	Amiodarone HCl	200mg	Generic	\$\$\$	
PACLITAXEL	Paclitaxel	100mg, 6mg/ml, 30mg/5ml, 150mg/25ml, 300mg/50ml	Generic	\$\$\$\$\$\$	Specialty
PAMELOR	Nortriptyline HCl	10mg, 25mg, 50mg, 75mg	Generic	\$\$\$	
PAMIDRONATE	Pamidronate Disodium	30mg, 90mg, 30mg/10ml, 90mg/10ml	Generic	\$\$\$\$\$\$	Specialty
PARLODEL	Bromocriptine Mesylate	2.5mg, 5mg	Generic	\$\$\$\$	
PATANASE	Olopatadine HCl	0.6%	Generic	\$\$\$\$	Step: fluticasone OR flunisolide OR one oral histamine OR azelastine
PATANOL	Olopatadine HCl	0.1%	Generic	\$\$\$\$	
PAXIL	Paroxetine HCl	10mg, 12.5mg, 20mg, 30mg, 40mg	Generic	\$\$	
PEDIALYTE SOL	Oral Electrolyte Solution	N/A	Generic	\$	
PEGASYS	Peginterferon alfa-2a	180mcg/0.5ml, 180mcg/ml	Brand	\$\$\$\$\$\$	Specialty CPA
PEG-INTRON	Peginterferon alfa-2b	50mcg, 80mcg, 120mcg, 150mcg	Brand	\$\$\$\$\$\$	Specialty CPA
PEN NEEDLES	Pen Needles		OTC	\$	QL= 200/31 days
PENICILLN GK	Penicillin G IV		Generic	\$\$\$	CPA
PENICILLN VK	Penicillin VK-oral		Generic	\$\$\$	
PENTASA	Mesalamine	250mg, 500mg	Brand	\$\$\$\$	CPA
PEPCID	Famotidine	10mg, 20mg	OTC	\$\$	QL= 93 tabs/31 days
PEPCID	Famotidine	40mg, 40mg/5ml	Generic	\$\$\$	QL= 150mL/30 days QL= 124 tabs/31 days CPA required if taken in conjunction with alprazolam
PERCOCET	Oxycodone w/ Acetaminophen		Generic	\$\$\$	CPA
PERFORMIST	Formoterol Fumarate	20mcg	Brand	\$\$\$\$	QL= 120 vials/31 days
PERIACTIN	Cyproheptadine HCl	4mg	Generic	\$\$	
PERIDEX	Chlorhexidine Gluconate	0.12%	Generic	\$\$\$	
PHENERGAN	Promethazine HCl	12.5mg, 25mg, 50mg	Generic	\$\$	CPA Age < 4
PHENERGAN DM	Promethazine-DM		Generic	\$\$	CPA Age < 4
PHENERGAN/CODEINE	Promethazine w/ Codeine	6.25-10mg	Generic	\$\$	CPA Age < 4
PHENOBARB	Phenobarbital	15mg, 30mg, 32.4mg, 60mg, 100mg	Generic	\$\$	
PHENOBARB	Phenobarbital	97.2mg	Brand	\$\$	
PHENYTEK	Phenytoin Sodium	200mg, 300mg	Generic	\$\$	
PHEREGAN	Promethazine HCl	12.5mg, 25mg, 50mg	Generic	\$\$	
PHOSLO	Calcium Acetate	667mg	Generic	\$\$	
PILOCARPINE	Pilocarpine HCl	1%, 2%, 3%, 4%, 6%	Generic	\$\$	
PLAN B	Levonorgestrel	0.75mg, 1.5mg	Brand/Gen eric	\$\$\$	QL= 2 tabs/31 days for 0.75mg QL=1 tab/31 days for 1.5mg
PLAQUENIL	Hydroxychloroquine Sulfate	200mg	Generic	\$\$\$	
PLAVIX	Clopidogrel Bisulfate	75mg, 300mg	Generic	\$\$\$	
PLEGRIDY	Peginterferon Beta-1a	125mcg	Brand	\$\$\$\$\$\$	Specialty CPA
PLETAL	Cilostazol	50mg, 100mg	Generic	\$\$\$	
POLY_VIT DROPS /FL	Pediatric Multiple Vitamins w/ Fluoride Soln	0.25 MG/ML	Generic	\$\$	
POLYTRIM	Polymyxin B-Trimethoprim		Generic	\$	
POLY-VI-SOL DROPS /IRON	Pediatric Multiple Vitamins w/ Iron Drops	10 MG/ML	Generic	\$\$	
POLY-VITA DROPS	Pediatric Multiple Vitamin w/ C Soln	35 MG/ML	Generic	\$\$	
POMALYST	Pomalidomide	1mg; 2mg; 3mg; 4mg	Brand	\$\$\$\$\$\$	Specialty CPA
PONTOCAINE	Tetracaine HCL	0.5% Opth Sol	Generic	\$\$	

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PRAVACHOL	Pravastatin Sodium	10mg, 20mg, 40mg, 80mg	Generic	\$\$\$\$	
PRECOSE	Acarbose	25mg, 50mg, 100mg	Generic	\$\$\$	
PRED FORTE	Prednisolone Acetate	1%	Generic	\$\$	
PREFEST	Estradiol/Estrad-Norgestimate		Brand	\$\$\$\$	
PREGNYL	Chorionic Gonadotropin	10000u	Generic	\$\$\$\$\$\$	CPA
PREMARIN	Estrogens, Conjugated	0.3mg, 0.45mg, 0.625mg, 0.9mg, 1.25mg	Brand	\$\$\$	
PREMARIN VAG	Estrogens, Conjugated Vaginal Cream	0.625mg	Brand	\$\$	
PREMPHASE	Conj Est/Conj Est-Medroxypro Ac		Brand	\$\$\$	
PREMPRO	Conjugated Estrogen-Medroxyprogrest Acetate	0.3-1.5mg, 0.45-1.5mg, 0.625-2.5mg, 0.625-5mg	Brand	\$\$\$	
PRENATAL	Prenatal Rx		Generic	\$\$	Step: Prenatal OTC
PRENATAL VITAMINS	Prenatal Vitamins		OTC	\$\$	QL= 100 tabs/31 days
PRENATE ELITE	Prenatal Vit w/ Fe Fum-Methylfolate-FA		Brand	\$\$\$\$	Step: Prenatal OTC
PREVACID	Lansoprazole	15mg; 30mg	Generic	\$\$\$\$	
PREVIFEM	Norgestimate & Ethinyl Estradiol Tab 0.25 MG-35 MCG		Generic	\$\$	
PREVNAR 13 INJ	Pneumococcal 13-Valent Conjugate Vaccine	N/A	Brand	\$\$\$\$	
PREVNAR 23 INJ	Pneumococcal Vaccine Polyvalent Inj	N/A	Brand	\$\$\$\$	
PREVPAC	Amoxicillin-Clarithro-Lansopraz		Generic	\$\$\$\$	
PRIOSECC	Omeprazole	10mg, 20mg, 40mg	Generic	\$\$\$	QL= 31 caps/31 days
PRIOSECC OTC	Omeprazole	20mg	OTC	\$\$	QL= 62 tabs/31 days
PRIMAQUINE	Primaquine Oral	26.3mg	Generic	\$\$\$\$	
PRIMAXIN	Imipenem/Cilastin IV		Generic	\$\$\$\$\$	CPA
PRISTIQ	Desvenlafaxine Succinate Tab SR 24HR	25mg, 50mg, 100mg	Generic	\$\$\$\$	CPA
PRIVIGEN	Immune Globulin	5g, 10g, 20g	Brand	\$\$\$\$\$\$	CPA
PROAMATINE	Midodrine HCl	2.5mg, 5mg, 10mg	Generic	\$\$\$	
PROBEN/COLCH	Colchicine w/ Probenecid	500-0.5	Generic	\$\$\$	
PROCARDIA	Nifedipine	10mg, 20mg	Generic	\$\$	
PROCARDIA XL	Nifedipine SR	30mg, 60mg, 90mg	Generic	\$\$\$\$	
PROCRIT	Epoetin Alfa	2000u/ml, 3000u/ml, 4000u/ml, 10000u/ml, 20000u/ml, 30000u/ml, 40000u/ml	Brand	\$\$\$\$\$\$	Specialty, Available at Retail QL= 1 vial/7 days (40,000 units) QL= 12 vials/28 days (all other strengths) Specialty
PROCYSBI	Cysteamine Bitartrate	25mg; 75mg	Brand	\$\$\$\$\$	CPA
PROGRAF	Tacrolimus	0.5mg, 1mg, 5mg, 5mg/ml	Generic	\$\$\$\$\$	Specialty Specialty CPA
PROLIA	Denosumab	60mg/ml	Brand	\$\$\$\$\$\$	Failure on two bisphosphonates
PROMETHAZINE	Promethazine HCl	6.25mg/5ml	Generic	\$	
PROPYLTHIOURACIL	Propylthiouracil	50mg, 100mg, 200mg, 400mg	Generic	\$\$	
PROSCAR	Finasteride	5mg	Generic	\$\$\$\$	
PROTONIX	Pantoprazole	20mg, 40mg	Generic	\$\$\$	QL= 31 caps/packets/31 days
PROTOPIC	Tacrolimus	0.03%, 0.1%	Generic	\$\$\$\$	CPA
PROVENTIL	Albuterol Sulfate	2mg, 4mg	Generic	\$\$	
PROVERA	Medroxyprogesterone Acetate	2.5mg, 5mg, 10mg	Generic	\$\$\$	
PROVIGIL	Modafinil	100mg, 200mg, 300mg	Brand	\$\$\$\$\$	Age > 23
PROZAC	Fluoxetine HCl	10mg, 20mg, 40mg, 90mg	Generic	\$\$	
PROZAC WEEKLY	Fluoxetine HCl	90mg	Generic	\$\$	Step: Failure of two: citalopram, fluoxetine, fluvoxamine, paroxetine, sertraline
PULMICORT	Budesonide	0.25mg/2ml, 0.5mg/2ml, 1mg/ml	Generic	\$\$\$\$	CPA
PULMICORT FLEXHALER	Budesonide	90mcg, 180mcg	Brand	\$\$\$\$	QL= 1 inh/31 days (90 mcg) QL= 1 inh/31 days (180 mcg)
PULMOZYME	Dornase Alfa	1mg/ml	Brand	\$\$\$\$\$	Specialty CPA
PURINETHOL	Mercaptopurine	50mg	Generic	\$\$\$\$	
PYRAZINAMIDE	Pyrazinamide Oral	500mg	Generic	\$\$\$	
PYRIDIDIUM	Phenazopyridine HCl	100mg, 200mg	Generic	\$\$	
PYRIDOXINE	Pyridoxine HCl	25mg, 50mg, 100mg, 200mg, 250mg, 500mg	OTC	\$\$	QL= 62 tabs/31 days

\$ ----- \$1 to \$10  
 \$\$ ----- \$11 to \$50  
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**GCHP List of Covered Drugs**  
**Brand Name**

QUESTRAN	Cholestyramine	4g	Generic	\$\$\$	
QVAR	Beclomethasone Dipropionate	40mcg; 80mcg	Brand	\$\$\$	
RABAVERT/IMOVAX	Rabies Vaccine	Unit of dose	Brand	\$\$\$\$	Approved for Age > 18
RANEXA	Ranolazine	500mg, 1000mg	Brand	\$\$\$\$	CPA Step: Tamsulosin OR Doxazosin OR Terazosin
RAPAFLO	Sildenafil	4mg, 8mg	Brand	\$\$\$\$	
RAPAMUNE	Sirolimus	0.5mg, 1mg, 2mg, 1mg/ml	Generic	\$\$\$\$\$\$	Specialty
RASUVO	Methotrexate Soln PF Auto-Injector	7.5mg,10mg,12.5mg,15mg,17.5mg,20mg	Brand	\$\$\$\$	CPA
RAVICTI	Glycerol Phenylbutyrate Liquid	,22.5mg,25mg,27.5mg,30mg	Brand	\$\$\$\$\$\$	CPA
REBETOL	Ribavirin	200mg, 40mg/ml	Generic	\$\$\$\$\$\$	Specialty CPA
REBIF	Interferon Beta-1a	22mcg/0.5ml, 44mcg/0.5ml	Brand	\$\$\$\$\$\$	Specialty CPA
RECLAST	Zoledronic Acid	5mg/100ml	Generic	\$\$\$\$\$\$	Specialty CPA Failure on two bisphosphonates
REDISOL	Cyanocobalamin Inj Sol	1000mcg/mL	Generic	\$\$	
REGLAN	Metoclopramide HCl	5mg, 10mg	Generic	\$\$	
RELAFEN	Nabumetone	500mg, 750mg	Generic	\$\$\$	
RELENZA	Zanamivir Oral	5mg	Brand	\$\$\$	QL= 20 tabs/31 days Step: Sumatriptan Succinate
RELPAK	Eletriptan Hydrobromide	20mg, 40mg	Brand	\$\$\$\$	QL= 9 tabs/31 days
REMICADE	Infliximab	100mg	Brand	\$\$\$\$\$\$	Specialty CPA
REMODULIN	Treprostinil Sodium	1mg/ml, 2.5mg/ml, 5mg/ml, 10mg/ml	Brand	\$\$\$\$\$\$	Specialty CPA
RENAGEL	Sevelamer	400mg, 800mg	Brand	\$\$\$\$\$	
RENEVA	Sevelamer Carbonate	800mg, 0.8g, 2.4g	Brand	\$\$\$\$\$	
REPREXAIN	Hydrocodone-Ibuprofen	2.5-200mg, 5-200mg, 7.5-200mg, 10-200mg	Generic	\$\$\$\$	QL= 186 tabs/31 days CPA required if taken in conjunction with alprazolam
REQUIP	Ropinirole Hydrochloride	0.25mg, 0.5mg, 1mg, 2mg, 3mg, 4mg, 5mg	Generic	\$\$	
REQUIP XL	Ropinirole Hydrochloride SR	2mg, 4mg, 6mg, 8mg, 12mg	Brand	\$\$\$\$	Step: Ropinirole Hydrochloride
RESTASIS	Cyclosporine	0.05%	Brand	\$\$\$\$	QL= 60 vials/31 days
RESTORIL	Temazepam	7.5mg, 15mg, 30mg	Generic	\$\$	QL= 31 caps/31 days
RETIN-A	Tretinoin	0.25%, 0.375%, 0.05%, 0.1%	Generic	\$\$\$\$	Age >34
REVATIO	Sildenafil Citrate	20mg, 10mg/12.5ml	Generic	\$\$\$\$\$\$	Specialty CPA Specialty
REVLIMID	Lenalidomide	5mg, 10mg, 15mg, 25mg	Brand	\$\$\$\$\$\$	CPA
RHEUMATREX	Methotrexate Sodium	2.5mg	Generic	\$\$\$\$	
RHINOCORT AQUA	Budesonide	32mcg/ACT	Generic	\$\$\$\$	
RHOGAM PLUS	Rho D Immune Globulin	300mcg	Brand	\$\$\$\$\$\$	Specialty Specialty
RHOPHYLAC	Rho D Immune Globulin	1500u/2ml	Brand	\$\$\$\$\$\$	CPA Specialty
RIBAPAK	Ribavirin Oral	400mg, 600mg	Generic	\$\$\$\$	CPA Specialty
RIBASPHERE	Ribavirin	200mg, 400mg, 600mg	Brand	\$\$\$\$\$\$	CPA Specialty
RIBAVIRIN	Ribavirin Oral	200mg, 400mg, 600mg	Generic	\$\$\$\$	CPA
RIDAURA	Auranofin	3MG	Brand	\$\$\$\$\$	CPA
RIFADIN	Rifampin Oral	150mg, 300mg	Generic	\$\$\$	
RILUTEK	Riluzole	50mg	Generic	\$\$\$\$\$	
RIMSO-50	Dimethyl Sulfoxide	50%	Brand	\$\$\$\$\$\$	CPA
RIOMET	Metformin HCl	500mg/5ml	Brand	\$\$\$\$	
RITALIN	Methylphenidate HCl	5mg, 10mg, 18mg, 20mg, 27mg, 36mg, 54mg	Generic	\$\$\$\$	Age > 23
RITALIN LA	Methylphenidate HCl	10mg, 20mg, 30mg, 40mg	Generic	\$\$\$\$	Age > 23
RITUXAN	Rituximab	100mg, 500mg	Brand	\$\$\$\$\$\$	Specialty
ROCALTROL	Calcitriol	0.25mcg, 0.5mcg	Generic	\$\$\$\$	
ROCEPHIN	Ceftriaxone IV		Generic	\$\$\$	

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## GCHP List of Covered Drugs Brand Name

ROXICODONE	Oxycodone HCl	5mg, 10mg, 15mg, 20mg, 30mg	Generic	\$\$\$	QL= 186 tabs/31 days CPA required if taken in conjunction with alprazolam
ROZEREM	Ramelteon	8mg	Brand	\$\$\$\$	Step: Failure of Zolpidem
RYTHMOL	Propafenone HCl	150mg, 225mg, 325mg, 425mg	Generic	\$\$\$\$	QL= 31 tabs/31 days
SAIZEN	Somatropin	5mg, 8.8mg	Brand	\$\$\$\$\$\$	Specialty
SALAGEN	Pilocarpine HCl	5mg, 7.5mg	Generic	\$\$\$	CPA
SANCTURA, SANCTURA XR	Trospium Chloride	20mg, 60mg	Generic	\$\$\$	Step: Enablex OR Oxyrol OR Vesicare
SANDIMMUNE	Cyclosporine	50mg/ml	Generic	\$\$\$\$\$\$	
SANDOSTATIN	Octreotide Acetate	10mg, 20mg, 30mg, 50mcg/ml, 100mcg, 200mcg, 500mcg, 1000mcg	Brand	\$\$\$\$\$\$	Specialty
SAVAYSA	Edoxaban	15mg; 30mg; 60mg	Brand	\$\$\$\$	Step: Warfarin and Xarelto
SAVELLA	Milnacipran HCl	12.5mg, 25mg, 50mg, 100mg	Generic	\$\$\$\$	Step: Gabepentin OR TCA
SEASONALE	Levonorgestrel & Ethinyl Estradiol (91-Day) Tab 0.15-0.03 MG		Generic	\$\$\$\$	
SELSUN	Selenium Sulfide	2.25%, 2.5%	Generic	\$	
SENSIPAR	Cinacalcet HCl	30mg, 60mg, 90mg	Brand	\$\$\$\$\$\$	Specialty CPA
SEREVENT DISKUS	Salmeterol Xinafoate	50mcg	Brand	\$\$\$\$	Step: Striverdi
SEROSTIM	Somatropin	4mg, 5mg, 6mg, 8.8mg	Brand	\$\$\$\$\$\$	Specialty CPA
SERZONE	Nefazodone HCl	50mg, 100mg, 150mg, 200mg, 250mg	Generic	\$\$\$	
SILVADENE	Silver Sulfadiazine		Generic	\$\$\$	
SIMPONI	Golimumab	50mg	Brand	\$\$\$\$\$\$	Specialty
SIMVASTATIN	Simvastatin	80mg	Generic	\$\$\$\$	Step: Fail <b>BOTH</b> Humira AND Enbrel
SINEMET	Carbidopa & Levodopa	10-100mg, 25-100mg, 25-250mg, 50-200mg	Generic	\$\$\$	CPA
SINEQUAN	Doxepin HCl	10mg, 25mg, 50mg, 75mg, 100mg, 150mg	Generic	\$\$	
SINGULAIR	Montelukast Sodium	4mg, 5mg, 10mg	Generic	\$\$\$\$	
SOD CHLORIDE	Sodium Chloride	0.9%	Generic	\$	
SOLIA	Desogestrel & Ethinyl Estradiol Tab 0.15 MG-30 MCG		Generic	\$\$	
SOLIQUA	Insulin Glargine-Lixisenatide	100-33 Unit-MCG/ML	Brand	\$\$\$\$	
SOLU-CORTEF	Hydrocortisone Sodium Succinate	100mg, 250mg, 500mg, 1000mg	Brand	\$\$\$\$\$\$	CPA
SOMA	Carisoprodol	350mg	Generic	\$\$\$\$	Step: Failure of (1) of the following: Baclofen OR Tizanidine OR Cyclobenzaprine
SOMAVERT	Pegvisomant	10mg, 15mg, 20mg	Brand	\$\$\$\$\$\$	QL=45 tabs/ 31 days
SOOLANTRA	Ivermectin	1%	Brand	\$\$\$\$	Specialty CPA
SOTYLIZE	Sotalol HCL Oral Sol	5mg/mL	Brand	\$\$\$\$	CPA
SOVALDI	Sofosbuvir	400mg	Brand	\$\$\$\$\$\$	Specialty
SPERMACIDAL PRODUCTS	Spermacidal Products	Sponge, Foam, Cream, Gel	OTC	\$\$	CPA
SPIRIVA	Tiotropium Bromide Monohydrate	18mcg	Brand	\$\$\$\$	QL= 1 pkg/90 days ( 90 caps) QL= 1 pkgs/30 days (30 caps)
SPIRIVA RESPIMAT	Tiotropium Bromide Monohydrate INH Sol	2.5mch/actuation	Brand	\$\$\$\$	
SPORANOX	Itraconazole Oral	100mg	Generic	\$\$\$\$	CPA
SPRINTEC 28	Norgestimate & Ethinyl Estradiol Tab 0.25 MG-35 MCG		Generic	\$\$	
SPRYCEL	Dasatinib	20mg, 50mg, 70mg, 80mg, 100mg, 140mg	Brand	\$\$\$\$\$\$	Specialty
STARLIX	Nateglinide	60mg, 120mg	Generic	\$\$\$\$	
STERAPRED	Prednisone	1mg, 2.5mg, 5mg, 10mg, 20mg, 50mg	Generic	\$\$\$\$	
STIMATE	Desmopressin Acetate	1.5mg/ml	Brand	\$\$\$\$\$\$	Specialty
					CPA

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**GCHP List of Covered Drugs  
Brand Name**

Drug Name	Generic Name	Dosage	Brand	Cost Category	Specialty/CPA
STIOLTO	Tiotropium Br-Olodaterol	2.5-2.5mcg/act	Brand	\$\$\$\$	CPA STEP: ANORO ELLIPT
STIVARGA	Regorafenib	40 mg 10mg, 18mg, 25mg, 40mg, 60mg, 80mg,	Brand	\$\$\$\$\$\$	Specialty CPA
STRATTERA	Atomoxetine HCl	100mg	Brand	\$\$\$\$	Age > 23
STRIVERDI AER RESPIMAT	Olodaterol HCl	2.5mcg/act Inhaled Aer Sol	Brand	\$\$\$\$	
STROMEKTOL	Ivermectin Oral	3mg	Generic	\$\$\$\$	
SUCRALFATE	Sucralfate	1gm/10ml	Brand	\$\$	
SUDAFED	Pseudoephedrine	30MG	Generic	\$\$	
SUDAFED PE	Phenylephrine HCL	10MG	Generic	\$\$	
SULFADIAZINE	Sulfadiazine	500mg, Powder	Brand	\$\$\$	
SUMATRIPTAN	Sumatriptan Nasal Spray	5mg/ACT, 20mg/ACT	Brand	\$\$\$	Step: Sumatriptan Oral (QL= 9 tabs/31 days) QL= 6 devices/31 days
SUPARTZ	Sodium Hyaluronate Intra-articular	25mg/2.5ml	Brand	\$\$\$\$\$\$	Specialty CPA
SUPPRELIN	Histrelin Acetate	50mg	Brand	\$\$\$\$\$\$	Specialty CPA CPA Age > 12 QL= 150ml/31 days OR 2 tab/31 days (All ages)
SUPRAX	Cefixime	400mg, 100mg/5ml	Generic	\$\$\$\$	
SUTENT	Sunitinib Malate	12.5mg, 25mg, 50mg	Brand	\$\$\$\$\$\$	Specialty
SYMBICORT	Budesonide-Formoterol Fumarate	80-4.5mcg/ACT, 160-4.5mcg/ACT	Brand	\$\$\$\$	QL= 1 inhrs/31 days
SYMLIN/SYMLINPEN	Pramlintide Acetate	600mcg, 1000mcg	Brand	\$\$\$\$	CPA One of the following: a. Type 1 diabetic patients with a previous history of insulin and concurrently using insulin therapy OR b. Type 2 diabetic patients with a previous history of insulin therapy and concurrently using insulin therapy with or without sulfonylurea and/or metformin QL=7 vials/31 days QL=8 pens/31 days
SYNAREL	Nafarelin Acetate	2mg/ml	Brand	\$\$\$\$\$\$	Specialty CPA
SYNJARDY	Empagliflozin-Metformin HCL	12.5-500MG, 12.5-1000MG, 5-1000MG,5-500MG	Brand	\$\$\$\$	Step: Metformin
SYNTHROID	Levothyroxine Sodium	25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	Brand	\$\$\$	
SYNVISC	Hylan Intra-articular	8mg/ml	Brand	\$\$\$\$\$\$	Specialty CPA Corticosteroids
TACROLIMUS	Tacrolimus	0.5mg, 1mg, 5mg	Generic	\$\$\$\$\$\$	Specialty
TAFINLAR	Dabrafenib Mesylate	50mg; 75mg	Brand	\$\$\$\$\$\$	Specialty CPA
TAGRISSO	Osimeritmb Mesylate	40mg, 80mg	Brand	\$\$\$\$\$\$	Specialty CPA
TAMBOCOR	Flecainide Acetate	50mg, 100mg, 150mg, 200mg	Generic	\$\$\$\$	
TAMIFLU	Oseltamir Oral	30mg, 45mg, 75mg, 12mg/ml	Susp	\$\$\$\$	Generic: Tabs Brand: QL= 10 caps/31 days (45mg, 75mg) QL= 20 caps/31 days (30mg) QL=120ml/31 days (oral susp)
TANZEUM	Albiglutide for soln Pen-Injector	30mg, 50mg	Brand	\$\$\$\$	Step: Metformin
TAPAZOLE	Methimazole	5mg, 10mg	Generic	\$\$	
TARCEVA	Erlotinib	25mg, 100mg, 150mg	Brand	\$\$\$\$\$\$	Specialty Available at retail
TARGRETIN	Bexarotene	75mg, 1%	Brand	\$\$\$\$\$\$	Specialty Specialty
TASIGNA	Nilotinib	150mg, 200mg	Brand	\$\$\$\$\$\$	QL= 2 tabs/31 days
TAXOTERE	Docetaxel	20mg/ml,80mg/4ml	Generic	\$\$\$\$	Specialty
TAXOTERE	Docetaxel	20mg/0.5ml,80mg/2ml	Brand	\$\$\$\$\$\$	Specialty

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## GCHP List of Covered Drugs

### Brand Name

TAZORAC	Tazarotene	0.05%, 0.1%	Brand	\$\$\$\$	CPA
TECFIDERA	Dimethyl Fumarate	120mg; 240mg	Brand	\$\$\$\$\$\$	Specialty CPA
TECHNIVIE	Ombitasvir-Paritaprevir-Ritonavir	12.5-75-50MG	Brand	\$\$\$\$\$\$	CPA
TEGRETOL	Carbamazepine	200mg, 400mg	Generic	\$\$\$	
TEMODAR	Temozolomide	5mg, 20mg, 100mg, 140mg, 180mg, 250mg	Generic	\$\$\$\$	Specialty
TEMOVATE	Clobetasol Propionate	5%	Generic	\$\$	
TENEX	Guanfacine HCl	1mg, 2mg	Generic	\$\$\$\$	
TENIVAC	Tetanus & Diphtheria Toxoids Adsorbed Vaccine	Unit of dose	Brand	\$\$\$\$	Approved for Age > 18
TENORMIN	Atenolol	25mg, 50mg, 100mg	Generic	\$\$\$	
TERCONAZOLE	Terconazole Vaginal		Generic	\$\$	
TESSALON	Benzonate	100mg, 200mg	Generic	\$\$	
TESTOSTERONE GEL	Testosterone TD Gel	50mg/5GM (1%)	Brand	\$\$\$\$	CPA
TETRACYCLINE	Tetracycline Oral		Generic	\$\$	
THALOMID	Thalidomide	50mg, 150mg, 200mg, 100mg,	Brand	\$\$\$\$\$\$	Specialty
THEO-DUR	Theophylline	100mg, 200mg, 300mg	Generic	\$\$\$	
THEOPHYLLINE ANHYDROUS	Theophylline		Brand	\$\$	
THROMBAT III	Antithrombin III	500u, 1000u	Brand	\$\$\$\$\$\$	Specialty CPA
THYMOGLOBULIN	Anti-Thymocyte Globulin	25mg	Brand	\$\$\$\$\$\$	Specialty CPA
THYROGEN	Thyrotropin Alfa	1.1mg	Brand	\$\$\$\$\$\$	CPA
TICE	BCG Live Intravesical	50mg	Brand	\$\$\$\$\$\$	Specialty
TIGAN	Trimethobenzamide HCl	300mg/5ml	Generic	\$\$\$	
TIMOPTIC	Timolol Maleate	0.25%, 0.5%	Generic	\$\$\$	
TIMOPTIC-XE	Timolol Maleate	0.25%, 0.5%	Generic	\$\$\$	
TIZANIDINE	Tizanidine HCl	2mg, 4mg	Generic	\$\$\$	QL= 63 tabs/31 days Specialty
TOBI	Tobramycin	300mg/5ml	Generic	\$\$\$\$	Step: KITABIS
TOBRADEX	Tobramycin-Dexamethasone Ophth Susp		Generic	\$\$\$	
TOBREX	Tobramycin IV		Generic	\$\$\$	QL= 14 days
TOFRANIL	Imipramine HCl	10mg, 25mg, 50mg	Generic	\$\$	
TOPAMAX	Topiramate	25mg, 50mg, 100mg, 200mg	Generic	\$\$	
TOPAMAX SPRINKLE	Topiramate Sprinkle	15mg, 25mg	Generic	\$\$	
TOPICORT	Desoximetasone	0.05%, 0.25%	Generic	\$\$	
TOPOSAR	Etoposide	20mg/ml	Generic	\$\$\$\$	
TOPROL XL	Metoprolol Succinate	25mg, 50mg, 100mg, 200mg	Generic	\$\$\$\$	
TORISEL	Temsirolimus	25mg/ml	Brand	\$\$\$\$\$\$	Specialty

CPA (Pen Only)  
Member must have failed Basaglar and have ONE of the following medically documented issues: (1) Unable to draw up insulin into a syringe or self-administer, due to mechanical, physical, or environmental factors (2) Visual Impairment (3) Has severe phobia to traditional syringes and needles as documented in the patient's medical records (4) use a Disetronic Insulin Pump (D-TRONplus)

TOUJEO SOLO	Insulin Glargine	300Units/mL	Brand	\$\$\$\$	
TRACLEER	Bosentan	62.5mg, 125mg	Brand	\$\$\$\$\$\$	Specialty CPA
TRANXENE-T	Clorazepate Dipotassium	3.75mg, 7.5mg, 15mg	Generic	\$\$	Step: Failure of (1) of the following: Lorazepam OR Clonazepam OR Diazepam QL= 93 tabs/31 days
TREANDA	Bendamustine HCl	25mg, 100mg	Brand	\$\$\$\$	
TRELSTAR	Triptorelin Pamoate	3.75mg, 11.25mg, 22.5mg	Brand	\$\$\$\$\$\$	Specialty
TRENTAL	Pentoxifylline	400mg	Generic	\$\$\$\$	
TRESIBA FLEX	Insulin Degludec Sol Pen Inj	100IU, 200IU	Brand	\$\$\$\$	

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**GCHP List of Covered Drugs**  
**Brand Name**

TRICOR	Fenofibrate Nanocrystals	34mg, 48mg, 54mg, 67mg, 145mg, 200mg	Brand	\$\$\$\$\$	Step: micronized fenofibrate
TRILEPTAL	Oxcarbazepine Suspension	300mg/5ml	Generic	\$\$\$	
TRILIPIX	Choline Fenofibrate	45mg, 135mg	Generic	\$\$\$\$\$	Step: micronized fenofibrate
TRINESSA	Norgestimate-Eth Estrad Tab 0.18-35/0.215-35/0.25-35 MG-MCG		Generic	\$\$	
TRI-NORINYL	Norethindrone-Eth Estradiol Tab 0.5-35/1-35/0.5-35 MG-MCG		Generic	\$\$\$	
TRI-PREVIEWEM	Norgestimate-Eth Estrad Tab 0.18-35/0.215-35/0.25-35 MG-MCG		Generic	\$\$	
TRISENOX	Arsenic Trioxide	10mg/10ml	Generic	\$\$\$\$\$	
TRI-SPRINTEC	Norgestimate-Eth Estrad Tab 0.18-35/0.215-35/0.25-35 MG-MCG		Generic	\$\$	
TRIVORA-28	Levonorgestrel-Eth Estra Tab 0.05-30/0.075-40/0.125-30MG-MCG		Generic	\$\$	
TRUE - kits, strips and supplies			Brand	\$\$\$	QL= 100 strips/31 days
TRULICITY	Dulaglutide Soln Pen-Injector	0.75mg; 1.5mg	Brand	\$\$\$\$\$	Step: Metformin
TRUSOPT	Dorzolamide HCL	2%	Generic	\$\$	
TUDORZA PRES	Acidinium Bromide	400/ACT	Brand	\$\$\$\$\$	QL= 1 inh/31 days
TUSSIONEX	Hydrocod Polst-Chlorphen Polst		Generic	\$\$\$	
TWINRIX	Hepatitis A (Inact)-Hep B (Recomb) Vac		Brand	\$\$\$\$\$\$	CPA
TYGACIL	Tigecycline IV	50mg	Brand	\$\$\$\$\$	CPA
TYKERB	Lapatinib Ditosylate	250mg	Brand	\$\$\$\$\$\$	Specialty
TYLENOL CHLD	Acetaminophen Elixir	160mg/5ml	OTC	\$	Age < 10 QL= 240ml/31 days
TYLENOL/COD	Acetaminophen w/ Codeine	300-15mg, 300-30mg, 300-60mg	Generic	\$\$\$	QL= 124 tabs/31 days
TYSABRI	Natalizumab	300mg/15ml	Brand	\$\$\$\$\$\$	Specialty CPA
TYZEKA	Telbivudine Oral	600mg	Brand	\$\$\$\$\$	Specialty CPA
UCERIS	Budesonide Rectal Foam	2mg/Act	Brand	\$\$\$\$	Step: Topical Mesalamine; Oral Hydrocortisone
ULORIC	Febuxostat	40mg, 80mg	Brand	\$\$\$\$	Step: allopurinol
ULTRACET	Tramadol HCL w/Acetaminophen	37.5/325mg	Generic	\$\$\$	QL= 124 tabs/31 days CPA required if taken in conjunction with alprazolam
ULTRAM, ER	Tramadol HCL	50mg, 100mg, 200mg, 300mg	Generic	\$\$\$\$	QL= 124 tabs/31 days (50mg) CPA required if taken in conjunction with alprazolam
UNASYN	Ampicillin/Sulbactam IV		Generic	\$\$\$	CPA
UNITHROID	Levothyroxine Sodium	25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	Generic	\$\$	
UPTRAVI	Selexipag	200mcg, 400mcg, 800mcg, 1200mcg, 1400mcg, 1600mcg, 200/800mcg	Brand	\$\$\$\$\$\$	Specialty CPA
UROXATRAL	Alfuzosin HCL	10mg	Generic	\$\$	Step: Tamsulosin OR Doxazosin OR Terazosin
URSO, URSO FORTE	Ursodiol	250mg, 500mg	Generic	\$\$\$\$	
VALCHLOR	Mechlorethamine HCL Gel	0.016%	Brand		Specialty CPA
VALCYTE	Valganciclovir HCL	450mg	Generic	\$\$\$\$\$	Specialty CPA
VALCYTE	Valganciclovir HCL	50mg/ml	Brand	\$\$\$\$\$	Specialty CPA
VALIUM	Diazepam	2mg, 5mg, 10mg	Generic	\$\$	QL= 124 tabs/31 days (2mg, 5mg)
VALTRES	Valacyclovir HCL	500mg, 1g	Generic	\$\$\$\$	QL= 31 tabs/31 days (10mg)
VANOCOCIN	Vancomycin Oral, IV		Generic	\$\$\$	CPA
VANDAZOLE	Metronidazole Vaginal Gel	0.75%	Generic	\$\$\$\$	
VANSPAR	Buspiron HCL	7.5mg	Generic	\$\$\$	QL= 62/30 days
VANTAS	Histrelin Acetate	50mg	Brand	\$\$\$\$\$	Specialty
VARIVAX	Varicella Virus Vaccine	Unit of dose	Brand	\$\$\$\$	Approved for Age > 18
VARUBI	Rolapitant HCL	90mg	Brand	\$\$\$\$\$	CPA

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## GCHP List of Covered Drugs Brand Name

VASERETIC	Enalapril Maleate & Hydrochlorothiazide	5-12.5mg, 10-25mg	Generic	\$\$\$\$	
VASOTEC	Enalapril Maleate	2.5mg, 5mg, 10mg, 20mg	Generic	\$\$	
VECTICAL	Calcitriol	3mcg/gm	Brand	\$\$\$\$\$	CPA
VELCADE	Bortezomib	3.5mg	Generic	\$\$\$\$\$	
VELIVET	Desogest-Ethin Est Tab 0.1-0.025/0.125-0.025/0.15-0.025MG-MG		Generic	\$\$	
VENTAVIS	Iloprost	10mcg/ml, 20mcg/ml	Brand	\$\$\$\$\$	Specialty CPA
VENTOLIN HFA AER	Albuterol	90mcg HFA	Brand	\$\$\$\$	QL= 2 inhrs/31 days
VERAMYST	Fluticasone Furoate	27.5mcg	Brand	\$\$\$\$	Step: Fail one: flunisolide, fluticasone
VERIPRED 20	Prednisolone Sod Phosphate	20mg/5ml	Brand	\$\$\$\$	
VESICARE	Solifenacin Succinate	5mg, 10mg	Brand	\$\$\$	Step: Oxybutynin Specialty
VFEND	Voriconazole	50mg, 200mg, 40mg/ml	Generic	\$\$\$\$\$	Step: Fluconazole
VIBATIV	Televancin IV	250mg, 750mg	Brand	\$\$\$	Step: Vancomycin
VICODIN	Hydrocodone-Acetaminophen	10-650mg, 10-660mg	Generic	\$\$\$	QL= 124 tabs/31 days CPA required if taken in conjunction with alprazolam
VICTOZA	Liraglutide	18mg/3ml	Brand	\$\$\$\$	Step: Metformin
VIDAZA	Azacitidine	100mg	Generic	\$\$\$\$\$	
VIEKIRA PAK	Ombitasvir-Paritaprevir-Ritonavir & Dasabuvir	12.5-75-50 & 250mg	Brand	\$\$\$\$\$\$\$	Specialty CPA
VIGAMOX	Moxifloxacin HCL	0.50%	Brand	\$\$\$	Step: At Least Two fo the following: fluoxetine, paroxetine, citalopram, sertraline, bupropion, escitalopram, OR mirtazapine.
VIIBRYD	Vilazodone HCL	10mg, 20mg, 40mg	Brand	\$\$\$\$\$	
VIMPAT	Lacosamide	50mg, 100mg, 150mg, 200mg, 10mg/ml	Generic	\$\$\$\$	CPA
VINBLASTINE	Vinblastine Sulfate	1mg/ml	Generic	\$\$\$\$	
VINCRIStINE	Vincristine Sulfate	1mg/ml	Generic	\$\$\$\$	
VINORELBINE	Vinorelbine Tartrate	10mg/ml, 50mg/5ml	Brand	\$\$\$\$\$	Specialty Specialty
VIREAD	Tenofovir Disoproxil Fumarate	300mg	Brand	\$\$\$\$\$	CPA
VIROPTIC	Trifluridine	1%	Brand	\$\$\$	
VISTARIL	Hydroxyzine Pamoate	25mg, 50mg, 100mg	Generic	\$\$	
VISTOGARD	Uridine Triacetate	10GM	Brand	\$\$\$\$\$	CPA
VISUDYNE	Verteporfin	15mg	Brand	\$\$\$\$\$	Specialty CPA
VITAMIN K	Phytonadione	100mcg	OTC	\$\$	QL= 62 tabs/31 days
VIVELLE-DOT	Estradiol	0.0375, 0.025mg, 0.05mg, 0.075mg, 0.1mg	Generic	\$\$\$\$	QL= 8 patches/28 days CPA
VOLTAREN	Diclofenac Sodium Gel 1%	1%	Brand	\$\$\$	QL: 500g/30days
VOLTAREN	Diclofenac Sodium	50mg, 75mg, 100mg	Generic	\$\$\$	
VOTRIENT	Pazopanib HCl	200mg	Brand	\$\$\$\$\$	Specialty
VYVANSE	Lisdexamphetamine Dimesylate	20mg, 30mg, 40mg, 50mg, 60mg, 70mg	Brand	\$\$\$\$\$	CPA Age <23
WELLBUTRIN, WELLBUTRIN XL	Bupropion HCl, Bupropion HCl SR	75mg, 100mg, 150mg, 200mg, 300mg	Generic	\$\$\$	Specialty
WINRHO SDF	Rho D Immune Globulin	600u, 1500u, 2500u, 5000u, 15000u	Brand	\$\$\$\$\$	CPA
XALATAN	Latanoprost	0.005%	Generic	\$\$\$	Step: Failure of (1) of the following: Lorazepam OR Clonazepam OR Diazepam QL= 124 tabs/31 days(0.25mg, 0.5mg, 1mg) QL= 62tabs/31 days(2mg) CPA if taken in conjunction with opioid
XANAX	Alprazolam	0.25mg, 0.5mg, 1mg, 2mg 10MG, 15MG, 20MG, 15-20MG Starter	Generic	\$\$	
XARELTO	Rivaroxaban	Kit	Brand	\$\$\$\$	Step: Warfarin
XELODA	Capecitabine	150mg, 500mg	Brand	\$\$\$\$\$	Specialty

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**GCHP List of Covered Drugs**  
**Brand Name**

XENAZINE	Tetrabenazine	12.5mg, 25mg	Generic	\$\$\$\$\$	Specialty CPA
XIAFLEX	Collagenase Clostridium Histolyticum	0.9mg	Brand	\$\$\$\$\$	Specialty CPA
XIGDUO XR	Dapagliflozin Propanediol-Metformin	5-500mg; 5-1000mg;10-500mg;10-1000mg	Brand	\$\$\$	Step: Metformin
XOLAIR	Omalizumab	150mg	Brand	\$\$\$\$\$	Specialty CPA Age > 12 Step: Inhaled corticosteroid AND long acting beta agonist (Foradil OR Serevent)
XOPENEX	Levalbuterol HCl	0.31mg, 0.63mg, 1.25mg/3ml	Brand	\$\$\$	Step: albuterol Step: albuterol
XOPENEX HFA	Levalbuterol Tartrate		Brand	\$\$\$	QL= 2 inhrs/31 days
XURIDEN	Uridine Triacetate	2 GM	Brand	\$\$\$\$\$	CPA
XYLOCAINE	Lidocaine HCl	2% gel, 5% onit	Generic	\$\$	
XYLOCAINE	Lidocaine HCl Viscous	2%	Generic	\$\$	
YASMIN	Drospirenone-Ethinyl Estradiol Tab 3-0.03 MG		Generic	\$\$\$	
YAZ	Drospirenone-Ethinyl Estradiol Tab 3-0.02 MG		Generic	\$\$\$\$	
YODOXIN	Iodoquinol Oral	210mg, 650mg	Brand	\$\$\$	
ZANTAC	Ranitidine HCl	75mg, 150mg	OTC	\$\$	QL= 67 tabs/31 days
ZANTAC	Ranitidine HCl	300mg, 75mg/5ml	Generic	\$\$\$	QL= 310ml/31 days (syrup)
ZAROXOLYN	Metolazone	2.5mg, 5mg, 10mg	Generic	\$\$\$\$	
ZEBETA	Bisoprolol Fumarate	5mg, 10mg	Generic	\$\$\$\$	
ZEMPLAR	Paricalcitol	1mcg, 2mcg, 4mcg, 2mcg/ml, 5mcg/ml	Generic	\$\$\$\$\$	Specialty CPA Step: Vitamin D sterols - doxercalciferol OR calcitriol
ZEPATIER	Elbasvir-Grazoprevir	50-100MG	Brand	\$\$\$\$\$	Specialty CPA CPA
ZEPATIER	Elbasvir-Grazoprevir	50-100mg	Brand	\$\$\$\$\$	Preferred Agent
ZESTORETIC	Lisinopril & Hydrochlorothiazide	10-12.5mg, 20-12.5mg, 20-25mg	Generic	\$\$\$	
ZESTRIL	Lisinopril	2.5mg, 5mg, 10mg, 20mg, 30mg	Generic	\$\$	
ZETIA	Ezetimibe	10mg	Generic	\$\$\$	CPA
ZINBRYTA	Daclizumab	150mg/mL	Brand	\$\$\$\$\$	Step: Interferon Beta 1b <b>AND</b> Glatiramer Specialty
ZINECARD	Dexrazoxane	250mg, 500mg	Brand	\$\$\$\$\$	CPA
ZIRGAN	Ganciclovir	0.15%	Brand	\$\$\$	Step: Failure of Viroptic CPA (600mg) QL= 8 tabs/10 days, Max 2 fills/31 days (250mg) QL= 4 tabs/10 days, Max 2 fills/31 days (500 mg) CPA (80mg)
ZITHROMAX	Azithromycin Oral	250mg, 500mg, 600mg	Generic	\$\$	QL= 31 tabs/31 days (4mg & 8mg) QL= 3 tab/31 days (24mg) CPA
ZOCOR	Simvastatin	5mg, 10mg, 20mg, 40mg, 80mg	Generic	\$\$\$	
ZOFRAN	Ondansetron HCl	4mg, 8mg, 24mg	Generic	\$\$\$	
ZOFRAN	Ondansetron HCl and Dextrose	32mg/50ml	Brand	\$\$\$	QL= 3 units/31 days
ZOHYDRO ER	Hydrocodone Bitartrate	10mg; 15mg; 20mg; 30mg; 40mg; 50mg	Brand	\$\$\$\$	CPA
ZOLADEX	Goserelin Acetate	3.6mg, 10.8mg	Brand	\$\$\$\$\$	Specialty
ZOLOFT	Sertraline HCl	25mg, 50mg, 100mg	Generic	\$\$	
ZOMACTON	Somatropin	5mg, 10mg	Brand	\$\$\$\$\$	Specialty CPA
ZOMETA	Zoledronic Acid	4mg/5ml	Generic	\$\$\$\$\$	Specialty CPA
ZOMIG NASAL SPRAY	Zolmitriptan Nasal Spray	5mg	Brand	\$\$\$	Step: Zomig, Zomig ZMT QL= 9 devices/31 days
ZOMIG, ZOMIG ZMT	Zolmitriptan	2.5mg, 5mg	Generic	\$\$\$	Step: Sumatriptan Succinate QL= 9 tabs/31 days
ZONEGRAN	Zonisamide	25MG,50mg, 100mg	Generic	\$\$	
ZORBIVE	Somatropin	8.8mg	Brand	\$\$\$\$\$	Specialty CPA
ZOSTAVAX	Varicella-Zoster Virus Vaccine, Live	0.5mL	Brand	\$\$\$\$	Age > 60; QL One per lifetime
ZOSYN	Pipercillin/Tazobactam IV		Generic	\$\$\$\$	CPA

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**Brand Name**

ZOVIA	Ethinodiol Diacetate & Ethinyl Estradiol Tab 1 MG-35 MCG, 1 MG-50 MCG		Generic	\$\$	
ZOVIRAX	Acyclovir Na IV	50mg/mL	Generic	\$\$\$\$	CPA
ZOVIRAX	Acyclovir Oral	200mg, 400mg, 800mg, 200mg/mL	Generic	\$\$\$\$	
					Step: 1. Allopurinol 2. Uloric 3. Zurampic + Allopurinol 4. Zurampic + Uloric
ZURAMPIC	Lesinurad	200mg	Brand	\$\$\$\$	
ZYDELIG	Idelalisib	100mg;150mg	Brand	\$\$\$\$\$\$\$	Specialty CPA
ZYKADIA	Ceritinib	150mg	Brand	\$\$\$\$\$\$\$	CPA
ZYLOPRIM	Allopurinol	100mg, 300mg	Generic	\$\$\$	
ZYRTEC	Cetirizine HCl	5mg, 10mg	OTC	\$\$	Step: Claritin QL= 31 tabs/31 days
ZYRTEC	Cetirizine HCl Syrup	1mg/ml	OTC	\$\$	QL= 480ml/31 days
ZYRTEC-D	Cetirizine -Pseudoephedrine	5mg/120mg	OTC	\$\$	Step: Claritin QL= 31 tabs/31 days
ZYRTEC-D	Cetirizine-Pseudoephedrine	5mg/120mg	Generic	\$\$\$	
ZYVOX	Linezolid Oral, IV	600mg, 100mg/5mL, 2mg, mL	Generic	\$\$\$\$\$	CPA

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**Gold Coast  
Health Plan**<sup>SM</sup>  
A Public Entity

**List of Covered Drugs**  
by  
**Generic**

**Effective  
April 1, 2017**

**GCHP List of Covered Drugs  
Generic Name**

Brand Names	Generic Name	Strength(s)	Coverage	Rx Cost	LMN, QL, Step, CPA
					Specialty CPA Intolerant or inadequate response after 3 months of treatment to methotrexate AND Intolerant or inadequate response after 3 months of treatment to etanercept (Enbrel) and adalimumab (Humira) AND/OR Intolerant or inadequate response after 3 months of treatment to Remicade
ORENCIA	Abatacept	250mg	Brand	\$\$\$\$\$\$	
PRECOSE	Acarbose	25mg, 50mg, 100mg	Generic	\$\$\$	
TYLENOL CHLD	Acetaminophen Elixir	160mg/5ml	OTC	\$	Age < 10 QL= 240ml/31 days
MAPAP	Acetaminophen Liquid	160mg/ml	OTC	\$	Age <10 QL= 248ml/31 days
TYLENOL/COD	Acetaminophen w/ Codeine	300-15mg, 300-30mg, 300-60mg	Generic	\$\$\$	QL= 124 tabs/31 days
MUCOMYST	Acetylcysteine Inh Sol	10%, 20%	Generic	\$\$\$	
TUDORZA PRES	Aclicinium Bromide	400/ACT	Brand	\$\$\$\$	QL= 1 inh/31 days
ZOVIRAX	Acyclovir Na IV	50mg/mL	Generic	\$\$\$\$	CPA
ZOVIRAX	Acyclovir Oral	200mg, 400mg, 800mg, 200mg/mL	Generic	\$\$\$\$	
					Specialty CPA 2 Concurrent DMARDS, one must be Methotrexate OR Topical Steroid AND psoralen + UVA treatment (PUVA) OR Systemic steroids (e.g., prednisone) AND an immunomodulator (e.g., azathioprine, mercaptopurine, cyclosporine or methotrexate) OR Topical Steroid AND psoralen + UVA treatment (PUVA)
HUMIRA	Adalimumab	20mg/0.4ml, 40mg/0.8ml	Brand	\$\$\$\$\$\$	
					CPA History of treatment failure to both of the following: (1) oral antibiotics (e.g. erythromycin, tetracycline, doxycycline) (2) topical therapy (e.g. benzoyl peroxide, erythromycin, clindamycin)
DIFFERIN	Adapalene	0.1%, 0.3%	Generic	\$\$\$\$	
EPIDUO GEL	Adapalene-Benzoyl Peroxide Gel	0.1-2.5 %; 0.3-2.5%	Generic	\$\$\$\$	
HEPSERA	Adefovir Dipivoxil	10mg	Generic	\$\$\$\$\$\$	Specialty CPA
GILOTRIF	Afatnib Dimaleate	20mg; 30mg; 40mg	Brand	\$\$\$\$\$\$	Specialty CPA
FABRAZYME	Agalsidase beta	5mg, 35mg	Brand	\$\$\$\$\$\$	Specialty CPA
ALBENZA	Albendazole Oral	200mg	Brand	\$\$\$\$	
TANZEUM	Albiglutide for soln Pen-Injector	30mg, 50mg	Brand	\$\$\$\$	Step: Metformin
VENTOLIN HFA AER	Albuterol	90mcg HFA	Brand	\$\$\$\$	QL= 2 inh/31 days
PROVENTIL	Albuterol Sulfate	2mg, 4mg	Generic	\$\$	
LASTACRAFT	Alcaftadine	0.25%	Brand	\$\$\$\$	
ALECENSA	Alectinib HCL	150mg	Brand	\$\$\$\$\$\$	Specialty CPA
					Specialty Step: Methotrexate and Cyclosporine and
AMEVIVE	Alefacept	15mg	Brand	\$\$\$\$\$\$	Enbrel
CAMPATH	Alemtuzumab	30mg/ml	Brand	\$\$\$\$\$\$	Specialty
FOSAMAX	Alendronate Sodium	5mg, 10mg, 35mg, 70mg	Generic	\$\$\$	QL= 4 tabs/28 days

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**GCHP List of Covered Drugs**  
**Generic Name**

UROXATRAL	Alfuzosin HCl	10mg	Generic	\$\$	Step: Tamsulosin OR Doxazosin OR Terazosin
MYOZYME	Alglucosidase Alfa	50mg	Brand	\$\$\$\$\$\$	Specialty CPA
ZYLOPRIM	Allopurinol	100mg, 300mg	Generic	\$\$\$	
AXERT	Almotriptan Malate	6.25mg, 12.5mg	Generic	\$\$\$	Step: Sumatriptan Succinate QL= 6 tabs/31 days (6.25mg) QL= 12 tabs/31 days (12.5 mg)
XANAX	Alprazolam	0.25mg, 0.5mg, 1mg, 2mg	Generic	\$\$	Step: Failure of (1) of the following: Lorazepam OR Clonazepam OR Diazepam QL= 124 tabs/31 days(0.25mg, 0.5mg, 1mg) QL= 62tabs/31 days(2mg) CPA if taken in conjunction with opioid
MYLANTA	Alum & Mag Hydroxide-Simethicone	200-200-20MG/5mL, 400-400-40/5mL	Generic	\$\$	
LETAIRIS	Ambrisentan	5mg, 10mg	Brand	\$\$\$\$\$\$	Specialty CPA
ETHYOL	Amifostine Crystalline	500mg	Brand	\$\$\$\$\$\$	Specialty CPA
AMIKIN	Amikacin IV		Generic	\$\$\$\$	QL= 14 days
MIDAMOR	Amiloride HCl	5mg	Generic	\$\$\$\$	Step: spironolactone
AMINOSYN II INJ 10%	Amino Acid Infusion 10%	10%	Brand	\$\$\$	CPA
AMINOCAPROIC ACID	Aminocaproic Acid	250mg/ml, 500mg	Generic	\$\$\$\$\$\$	Specialty CPA
PACERONE	Amiodarone HCl	200mg	Generic	\$\$\$	
ELAVIL	Amitriptyline HCl	10mg, 25mg, 50mg, 75mg, 100mg, 150mg	Generic	\$\$	
NORVASC	Amlodipine Besylate	2.5mg, 5mg, 10mg	Generic	\$\$\$	
LOTREL	Amlodipine Besylate-Benazepril HCl	2.5-10mg, 5-10mg, 5-20mg, 10-20mg	Generic	\$\$\$	
AZOR	Amlodipine Besylate-Olmesartan Medoxomil	5-20mg, 5-40mg, 10-20mg, 10-40mg	Generic	\$\$\$\$	Step: amlodipine
AUGMENTIN	Amoxicillin/Clavulanate-Tab, Susp		Generic	\$\$\$	
PREVPAC	Amoxicillin-Clarithro-Lansopraz		Generic	\$\$\$\$	
AMOXIL	Amoxicillin-Oral		Generic	\$\$	
ADDERALL	Amphetamine-Dextroamphetamine	5mg, 7.5mg, 10mg, 15mg, 20mg, 30mg	Generic	\$\$\$	CPA
ADDERALL XR	Amphetamine-Dextroamphetamine SR	5mg, 10mg, 15mg, 20mg, 30mg	Generic	\$\$\$\$	CPA
ABELCET	Amphotericin B Lipid	5mg/ml	Brand	\$\$\$\$\$\$	CPA
AMBISOME	Amphotericin B Liposome	510mg	Brand	\$\$\$\$	Specialty CPA
AMPICILLIN	Ampicillin IV	125mg, 250mg, 500mg, 1g, 2g, 10g	Generic	\$\$\$	CPA
UNASYN	Ampicillin/Sulbactam IV		Generic	\$\$\$	CPA
CREON	Amy-Lip-Prot	5, 10, 20, 6000u, 12000u, 24000u	Brand	\$\$\$\$	
AGRYLIN	Anagrelide HCL	0.5mg, 1 mg	Generic	\$\$\$\$	
KINERET	Anakinra		Brand	\$\$\$\$\$\$	Specialty CPA
ARIMIDEX	Anastrozole	1mg	Generic	\$\$\$\$	
THROMBAT III	Antithrombin III	500u, 1000u	Brand	\$\$\$\$\$\$	Specialty CPA
THYMOGLOBULIN	Anti-Thymocyte Globulin	25mg	Brand	\$\$\$\$\$\$	Specialty CPA
APOKYN	Apomorphine Hydrochloride	50mg, 100mg, 20mg/ml	Brand	\$\$\$\$\$\$	Specialty CPA
EMEND	Aprepitant	80mg, 115mg, 125mg, 150mg	Brand	\$\$\$\$	Specialty CPA
BROVANA	Arformoterol Tartrate	15mcg	Brand	\$\$\$\$	Step: Foradil
NUVIGIL	Armodafinil	50mg, 150mg, 250mg	Brand	\$\$\$\$	Age > 23
TRISENOX	Arsenic Trioxide	10mg/10ml	Generic	\$\$\$\$	
ASA	Aspirin	81mg, 325mg	OTC	\$	QL= 122 tabs/31 days
AGGRENOX	Aspirin-Dipyridamole	25-200mg	Brand	\$\$\$	Step: Dipyridamole & aspirin OR Plavix
TENORMIN	Atenolol	25mg, 50mg, 100mg	Generic	\$\$\$	

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# GCHP List of Covered Drugs

## Generic Name

Drug Name	Generic Name	Strength/Dosage	Formulation	Cost Category	Specialty/Restrictions
STRATTERA	Atomoxetine HCl	10mg, 18mg, 25mg, 40mg, 60mg, 80mg, 100mg	Brand	\$\$\$\$	Age > 23
LIPITOR	Atorvastatin Calcium	10mg, 20mg, 40mg, 80mg	Generic	\$\$\$\$	
ISO ATROPINE	Atropine Sulfate	1%	Generic	\$\$	
RIDAURA	Auranofin	3MG	Brand	\$\$\$\$\$	CPA
VIDAZA	Azacitidine	100mg	Generic	\$\$\$\$\$	
IMURAN	Azathioprine	50mg	Generic	\$\$\$\$\$	
FINACEA, FINACEA PLUS KIT	Azelaic Acid	15%, Kit	Brand	\$\$\$\$	Step: Metrogel or Metro lotion
ASTELIN	Azelastine HCl	0.1%	Generic	\$\$\$\$	QL= 2 bottles/31 days
ASTEPRO	Azelastine HCl	137mcg, 0.15%	Brand	\$\$\$\$	QL= 2 bottles/31 days
AZASITE	Azithromycin	1%	Brand	\$\$	
ZITHROMAX	Azithromycin Oral	250mg, 500mg, 600mg	Generic	\$\$	CPA (600mg) QL= 8 tabs/10 days, Max 2 fills/31 days (250mg) QL= 4 tabs/10 days, Max 2 fills/31 days (500 mg)
AZACTAM	Aztreonam IV		Generic	\$\$\$\$\$	CPA
LIORESAL	Baclofen	10mg, 20mg	Generic	\$\$\$\$	
COLAZAL	Balsalazide Disodium	750mg	Generic	\$\$\$\$	
TICE	BCG Live Intravesical	50mg	Brand	\$\$\$\$\$	Specialty
QVAR	Beclomethasone Dipropionate	40mcg; 80mcg	Brand	\$\$\$	
BECONASE AQ	Beclomethasone Dipropionate Monohyd	0.042%	Brand	\$\$\$\$	Step: Fail one: flunisolide, fluticasone
LOTENSIN HCT	Benazepril & Hydrochlorothiazide	5-6.5mg, 10-12.5mg, 20-12.5mg, 20-25mg	Generic	\$\$\$	
LOTENSIN	Benazepril HCl	5mg, 10mg, 20mg, 40mg	Generic	\$\$\$	
TREANDA	Bendamustine HCl	25mg, 100mg	Brand	\$\$\$\$	
BICILLIN L-A	Benzathine IM		Generic	\$\$\$\$	CPA
AURALGAN	Benzocaine-Antipyrine		Generic	\$\$\$	
TESSALON	Benzonatate	100mg, 200mg	Generic	\$\$	
BENZOYL	Benzoyl Peroxide	5% GEL	OTC	\$\$	QL= 85g/31 days
BENZAMYCIN	Benzoyl Peroxide-Erythromycin	5-3%	Generic	\$\$\$\$	
DIPROSONE	Betamethasone Dipropionate	5%	Generic	\$\$\$	
DIPROLENE	Betamethasone Dipropionate	5%	Generic	\$\$\$	
BETOPIC	Betaxolol HCL	0.50%	Generic	\$\$\$	
AVASTIN	Bevacizumab		Brand	\$\$\$\$\$	Specialty
TARGRETIN	Bexarotene	75mg, 1%	Brand	\$\$\$\$\$	Specialty
CASODEX	Bicalutamide	50mg	Generic	\$\$\$\$	
LUMIGAN	Bimatoprost	0.01%, 0.03%	Generic	\$\$\$	
ZEBETA	Bisoprolol Fumarate	5mg, 10mg	Generic	\$\$\$\$	
BLEOMYCIN	Bleomycin Sulfate	15u, 30u	Generic	\$\$\$\$\$	Specialty
VELCADE	Bortezomib	3.5mg	Generic	\$\$\$\$\$	
TRACLEER	Bosentan	62.5mg, 125mg	Brand	\$\$\$\$\$	Specialty CPA
ALPHAGAN P	Brimonidine Tartrate	0.15%	Generic	\$\$\$	Age < 21
MIRVASO	Brimonidine Tartrate Gel	0.33%	Brand	\$\$\$\$	CPA
BRIVIACT	Brivaracetam	25 mg; 50 mg; 75 mg; 100 mg; 10 mg/ml; 50mg/5 ml	Brand	\$\$\$\$	Step Therapy: Levetiracetam
PARLODEL	Bromocriptine Mesylate	2.5mg, 5mg	Generic	\$\$\$\$	
PULMICORT	Budesonide	0.25mg/2ml, 0.5mg/2ml, 1mg/ml	Generic	\$\$\$\$	CPA
PULMICORT FLEXHALER	Budesonide	90mcg, 180mcg	Brand	\$\$\$\$	QL= 1 inh/31 days (90 mcg) QL= 1 inh/31 days (180 mcg)
RHINOCORT AQUA	Budesonide	32mcg/ACT	Generic	\$\$\$\$	
UCERIS	Budesonide Rectal Foam	2mg/Act	Brand	\$\$\$\$	Step: Topical Mesalamine; Oral Aminosaliclates; or Topical Hydrocortisone
SYMBICORT	Budesonide-Formoterol Fumarate	80-4.5mcg/ACT, 160-4.5mcg/ACT	Brand	\$\$\$\$	QL= 1 inh/31 days
BUMEX	Bumetanide	0.5mg, 1mg, 2mg,	Generic	\$\$\$	
APLENZIN	Bupropion HBr	174mg, 348mg, 522mg	Brand	\$\$	
WELLBUTRIN, WELLBUTRIN XL	Bupropion HCl, Bupropion HCl SR	75mg, 100mg, 150mg, 200mg, 300mg	Generic	\$\$\$	
BUSPAR	Buspiron HCl	5mg, 10mg, 15mg, 30mg	Generic	\$\$\$	QL= 62/30 days
VANSPAR	Buspiron HCl	7.5mg	Generic	\$\$\$	QL= 62/30 days
BUTALBITAL	Butalbital		Generic	\$\$	
FIORICET	Butalbital-Acetaminophen-Caffeine	50-325-40mg	Generic	\$\$	QL= 120 tabs/31 Days

\$ ----- \$1 to \$10  
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 \$\$\$\$\$\$ ----- \$1,001 to \$5,000  
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**GCHP List of Covered Drugs  
Generic Name**

FIORICET w/CODEINE	Butalbital-Acetaminophen-Caffeine	50-325-30-40mg	Generic	\$\$\$	QL=120 tabs/31 days CPA required if taken in conjunction with alprazolam
CINRYZE	C1 Inhibitor	500u	Brand	\$\$\$\$\$	Specialty CPA
JEVTANA	Cabazitaxel	60mg/1.5ml	Generic	\$\$\$\$\$	
CABERGOLINE	Cabergoline	0.5mg	Generic	\$\$\$\$\$	CPA
CABOMETYX	Cabozantinib S-Malate	20 mg; 40 mg; 60 mg	Brand	\$\$\$\$\$	CPA
CALCIPOTRIENE	Calcipotriene	0.005% OIN	Brand	\$\$\$\$	CPA Step: TWO topical corticosteroids
DOVONEX	Calcipotriene	0.005% SOL	Generic	\$\$\$\$	CPA
MIACALCIN	Calcitonin	200u/ACT	Generic	\$\$\$\$	CPA History of failure, intolerance, or contraindication to one of the following: Actonel, Boniva (tablets or injection), Fosamax
MIACALCIN Injection	Calcitonin	200u/ml	Brand	\$\$\$\$	CPA History of failure, intolerance, or contraindication to one of the following: Actonel, Boniva (tablets or injection), Fosamax, AND History of failure, intolerance, or contraindication to Miacalcin Nasal Spray
ROCALTROL	Calcitriol	0.25mcg, 0.5mcg	Generic	\$\$\$\$	
VECTICAL	Calcitriol	3mcg/gm	Brand	\$\$\$\$\$	CPA
PHOSLO	Calcium Acetate	667mg	Generic	\$\$	
OYSTER CAL	Calcium carbonate	500MG, 600MG, 1250MG, 1500MG	Generic	\$\$\$	
CALCIUM GLUCONATE	Calcium Gluconate	50MG, 500MG	Generic	\$\$	
INVOKANA	Canagliflozin	100mg, 300mg	Brand	\$\$\$\$\$	Step: Metformin
INVOKAMET	Canagliflozin/Metformin HCl	50/100mg;50/500mg;150/100mg;150/500mg	Brand	\$\$\$\$	Step: Metformin
INVOKAMET XR	Canagliflozin/Metformin HCl	150-1000mg	Brand	\$\$\$\$	Step: Metformin
XELODA	Capecitabine	150mg, 500mg	Brand	\$\$\$\$\$	Specialty
CAPTEN	Captopril	12.5mg, 25mg, 50mg, 100mg	Generic	\$\$\$	
CAPOZIDE	Captopril & Hydrochlorothiazide	25-15mg, 25-25mg, 50-15mg, 50-25mg	Generic	\$\$\$	
CARBATROL	Carbamazepine	100mg, 200mg, 300mg	Brand	\$\$\$\$	
TEGRETOL	Carbamazepine	200mg, 400mg	Generic	\$\$\$	
LODOSYN	Carbidopa	25mg	Generic	\$\$\$	Step: Carbidopa & Levodopa
SINEMET	Carbidopa & Levodopa	10-100mg, 25-100mg, 25-250mg, 50-200mg	Generic	\$\$\$	
CARBOPLATIN	Carboplatin	50mg/5ml, 150mg/15ml, 450mg/45ml, 600mg/60ml, 50mg, 150mg, 450mg	Generic	\$\$\$\$\$	Specialty CPA
SOMA	Carisoprodol	350mg	Generic	\$\$\$\$	Step: Failure of (1) of the following: Baclofen OR Tizanidine OR Cyclobenzaprine QL=45 tabs/ 31 days
BICNU	Carmustine	100mg	Brand	\$\$\$\$\$	Specialty
COREG	Carvedilol	3.125mg, 6.25mg, 12.5mg, 25mg	Generic	\$\$\$\$	
CANCIDAS	Caspofungin Acetate	50mg, 70mg	Brand	\$\$	Specialty CPA
MAXIPIME	Cefapime IV		Generic	\$\$	CPA
ANCEF	Cefazolin		Generic	\$\$\$	
OMNICEF	Cefdinir	300mg, 125mg/5ml, 250mg/5ml	Generic	SSSS	
SUPRAX	Cefixime	400mg, 100mg/5ml	Generic	\$\$\$\$\$	CPA Age > 12 QL= 150ml/31 days OR 2 tab/31 days (All ages)
CLAFORAN	Cefotaxime IV		Generic	\$\$\$	CPA

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**GCHP List of Covered Drugs**  
**Generic Name**

CEFOTAN	Cefotetan-IV		Generic	\$\$\$	CPA
MEFOXIN	Cefoxitin-IV		Generic	\$\$	CPA
FORTAZ	Ceftazidime IV		Generic	\$\$\$	Specialty CPA
ROCEPHIN	Ceftriaxone IV		Generic	\$\$\$	
CEFTIN	Cefuroxime IV, Oral		Generic	\$\$\$	QL= 20 tabs/10 days Step: Two Oral NSAIDS, One That Must Be Meloxicam
CELEBREX	Celecoxib	50mg, 100mg, 200mg, 400mg	Generic	\$\$\$\$	
ZYKADIA	Ceritinib	150mg	Brand	\$\$\$\$\$\$\$	CPA
CIMZIA	Certolizumab Pegol	200mg/ml	Brand	\$\$\$\$\$\$\$	Specialty CPA
ZYRTEC	Cetirizine HCl	5mg, 10mg	OTC	\$\$	Step: Claritin QL= 31 tabs/31 days
ZYRTEC	Cetirizine HCl Syrup	1mg/ml	OTC	\$\$	QL= 480ml/31 days Step: Claritin
ZYRTEC-D	Cetirizine -Pseudoephedrine	5mg/120mg	OTC	\$\$	QL= 31 tabs/31 days
ZYRTEC-D	Cetirizine-Pseudoephedrine	5mg/120mg	Generic	\$\$\$	
ERBITUX	Cetuximab	100mg, 200mg	Brand	\$\$\$\$\$\$\$	Specialty
EVOXAC	Cevimeline HCl	30mg	Brand	\$\$\$\$\$\$\$	Specialty CPA
LEUKERAN	Chlorambucil	2mg	Brand	\$\$\$\$\$\$\$	Specialty
LIBRIUM	Chlordiazepoxide HCl	5mg, 10mg, 25mg	Generic	\$\$	QL= 124 tabs/31 days
PERIDEX	Chlorhexidine Gluconate	0.12%	Generic	\$\$\$	
ARALEN	Chloroquin Phosphate Oral	250mg	Generic	\$\$\$	
CHLOROTHIAZ TAB 250MG	Chlorothiazide Tab	250mg	Generic	\$\$\$	
CHLORTHALIDONE	Chlorthalidone	25mg	Brand	\$\$	
HYGROTON	Chlorthalidone	25mg, 50mg, 100mg	Generic	\$\$\$\$	
QUESTRAN	Cholestyramine	4g	Generic	\$\$\$	
CHOLBAM	Cholic Acid	50mg, 250mg	Brand	\$\$\$\$\$\$\$	CPA
TRILIPIX	Choline Fenofibrate	45mg, 135mg	Generic	\$\$\$\$\$	Step: micronized fenofibrate
NOVAREL	Chorionic Gonadotropin	10000u	Generic	\$\$\$\$\$\$\$	Specialty CPA
PREGNYL	Chorionic Gonadotropin	10000u	Generic	\$\$\$\$\$\$\$	CPA
OMNARIS	Ciclesonide	50mcg/ACT	Brand	\$\$\$\$	Step: Fail one: flunisolide, fluticasone
PLETAL	Cilostazol	50mg, 100mg	Generic	\$\$\$	
SENSIPAR	Cinacalcet HCl	30mg, 60mg, 90mg	Brand	\$\$\$\$\$\$\$	Specialty CPA
CILOXAN	Ciprofloxacin HCl	3%	Generic	\$\$\$	
CIPRO	Ciprofloxacin Oral		Generic	\$\$\$	
CIPRO	Ciprofloxacin Oral	5%, 250mg/5ml	Brand	\$\$\$	
CIPRODEX	Ciprofloxacin-Dexamethasone	0.3-0.1%	Brand	\$\$\$\$	
CISPLATIN	Cisplatin	50mg/50ml, 100mg/100ml, 200mg/200ml	Generic	\$\$\$	
CELEXA	Citalopram Hydrobromide	10mg, 20mg, 40mg	Generic	\$\$	
CLADRIBINE	Cladribine	1mg/ml	Generic	\$\$\$\$\$\$\$	Specialty
LEUSTATIN	Cladribine	1mg/ml	Brand	\$\$\$\$\$\$\$	Specialty
BIAXIN	Clarithromycin Oral	250mg, 500mg, 125mg/5ml, 250mg/5ml	Generic	\$\$\$	QL= 28 tabs/14 days, Max 2 fills/31 days (250mg & 500mg)
CLEOCIN	Clindamycin Oral, IV		Generic	\$\$\$	CPA
CLEOCIN-T	Clindamycin Phosphate	1%, 2%	Generic	\$\$\$\$	
TEMOVATE	Clobetasol Propionate	5%	Generic	\$\$	
ANAFRANIL	Clomipramine HCl	25mg, 50mg, 75mg	Generic	\$\$\$	CPA
KLONOPIN	Clonazepam	0.125mg, 0.25mg, 0.5mg, 1mg, 2mg	Generic	\$\$	QL= 124 tabs/31 days (0.5mg, 1mg)
CATAPRES	Clonidine HCl	0.1mg, 0.2mg, 0.3mg	Generic	\$\$\$	QL= 62 tabs/31 days (2mg)
PLAVIX	Clopidogrel Bisulfate	75mg, 300mg	Generic	\$\$\$	
TRANXENE-T	Clorazepate Dipotassium	3.75mg, 7.5mg, 15mg	Generic	\$\$	Step: Failure of (1) of the following: Lorazepam OR Clonazepam OR Diazepam
CLOTRIMAZOLE	Clotrimazole Cream	1%	OTC	\$ to \$\$\$\$	QL= 93 tabs/31 days
COTELLIC	Cobimetinib Fumarate	20mg	Brand	\$\$\$\$\$\$\$	Specialty CPA

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## GCHP List of Covered Drugs Generic Name

COLCRYS	Colchicine	0.6mg	Brand	\$\$\$\$	Step: NSAIDS
PROBEN/COLCH	Colchicine w/ Probenecid	500-0.5	Generic	\$\$\$	
COLESTID	Colestipol HCl	1g, 5g, 5/7.5g	Generic	\$\$\$\$	Step: Cholestyramine Specialty CPA
COLY-MYCIN M	Colistimethate Sodium	150mg	Brand	\$\$\$\$\$\$	
XIAFLEX	Collagenase Clostridium Histolyticum	0.9mg	Brand	\$\$\$\$\$\$	Specialty CPA
CONDOMS	Condoms		OTC	\$\$	QL= 14/31 days
PREMPHASE	Conj Est/Conj Est-Medroxypro Ac		Brand	\$\$\$	
PREMPRO	Conjugated Estrogen-Medroxyprogest Acetate	0.3-1.5mg, 0.45-1.5mg, 0.625-2.5mg, 0.625-5mg	Brand	\$\$\$	CPA Trial and failure of BOTH Evista and Alendronate
Duavee	Conjugated Estrogens-Bazedoxifene	45-20mg	Brand	\$\$\$	Specialty CPA
ACTHREL	Corticotropin Ovine Triflutate	100mcg	Brand	\$\$\$\$\$\$	Specialty CPA Step: Corticosteroids
ACTHAR	Corticotropin	80u, 42u, 25u	Brand	\$\$\$\$\$\$	
CORTROSYN	Cosyntropin	0.25mg	Generic	\$\$\$\$	Specialty
CROLOM	Cromolyn Sodium	4%	Generic	\$\$	
EURAX	Crotamiton	10%	Brand	\$\$\$\$	Step: Permethrin
REDISOL	Cyanocobalamin Inj Sol	1000mcg/mL	Generic	\$\$	
FLEXERIL	Cyclobenzaprine HCl	5mg, 10mg	Generic	\$\$\$	QL= 93 tabs/31 days
CYCLOPHOSPHAMIDE	Cyclophosphamide	25mg, 50mg, 500mg, 1g, 2g	Brand	\$\$\$\$\$\$	Specialty Specialty
CYTOXAN	Cyclophosphamide	2g	Brand	\$\$\$\$\$\$	CPA
NEORAL	Cyclosporine	25mg, 100mg	Generic	\$\$\$\$\$\$	
RESTASIS	Cyclosporine	0.05%	Brand	\$\$\$\$	QL= 60 vials/31 days
SANDIMMUNE	Cyclosporine	50mg/ml	Generic	\$\$\$\$\$\$	
PERIACTIN	Cyproheptadine HCl	4mg	Generic	\$\$	
PROCYSBI	Cysteamine Bitartrate	25mg; 75mg	Brand	\$\$\$\$	Specialty CPA Specialty
CYTOGAM	Cytomegalovirus Immune Globulin		Brand	\$\$\$\$\$\$	CPA
TAFINLAR	Dabrafenib Mesylate	50mg; 75mg	Brand	\$\$\$\$\$\$	Specialty CPA
DACARBAZINE	Dacarbazine	100mg, 200mg	Generic	\$\$\$\$\$\$	Specialty
DAKLINZA	Daclatasvir Dihydrochloride	30MG, 60MG	Brand	\$\$\$\$\$\$	Specialty CPA
ZINBRYTA	Daclizumab	150mg/mL	Brand	\$\$\$\$\$\$	Step: Interferon Beta 1b <b>AND</b> Glatiramer
DALVANCE	Dalbavancin HCL for IV Soln	500mg	Brand	\$\$\$\$\$\$	CPA
AMPYRA	Dalfampridine	10mg	Generic	\$\$\$\$\$\$	Specialty CPA Specialty, Available at Retail Age >18 QL= 30 syringes/30 days
FRAGMIN	Dalteparin Sodium	2500u/0.2ml, 5000u/0.2ml, 7500u/0.3ml, 10000u/ml, 25000u/ml, 9500u, 12500u, 15000u, 18000u	Brand	\$\$\$\$\$\$	QL= 10 vials/31 days
FARXIGA	Dapagliflozin Propanediol	5mg; 10mg 5-500mg; 5-1000mg;10-500mg;10-	Brand	\$\$\$	Step: Metformin
XIGDUO XR	Dapagliflozin Propanediol-Metformin	1000mg	Brand	\$\$\$	Step: Metformin
DAPSONE	Dapsone Oral	25mg, 100mg	Generic	\$\$	
CUBICIN	Daptomycin IV	500mg	Brand	\$\$\$	CPA
ARANESP	Darbepoetin Alfa-Polysorbate	25mcg, 40mcg, 60mcg, 100mcg, 150mcg, 200mcg, 300mcg, 500mcg	Brand	\$\$\$\$\$\$	Specialty, Available at Retail QL= 1 inj/21 days (500mcg) QL= 2 inj/28 days (all other strengths)
ENABLEX	Darifenacin Hydrobromide	7.5mg, 15mg	Generic	\$\$\$	Step: Oxybutynin
SPRYCEL	Dasatinib	20mg, 50mg, 70mg, 80mg, 100mg, 140mg	Brand	\$\$\$\$\$\$	Specialty
DAUNORUBINCIN	Daunorubicin HCl	20mg, 5mg/ml	Generic	\$\$\$\$\$\$	Specialty
EXJADE	Deferasirox	125mg, 250mg, 500mg	Generic	\$\$\$\$\$\$	Specialty
DEFEROXAMINE	Deferoxamine Mesylate	500mg, 2g	Generic	\$\$\$\$\$\$	Specialty
ONTAK	Denileukin Diftitox	150mcg/ml	Brand	\$\$\$\$\$\$	Specialty Specialty CPA
PROLIA	Denosumab	60mg/ml	Brand	\$\$\$\$\$\$	Failure on two bisphosphonates
NORPRAMIN	Desipramine HCl	10mg, 25mg, 50mg, 75mg, 100mg, 150mg	Generic	\$\$	

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**GCHP List of Covered Drugs**  
**Generic Name**

DESMOPRESSIN	Desmopressin Acetate	0.1mg, 0.2mg, 4mcg/ml, 0.1%	Generic	\$\$\$\$\$	CPA
STIMATE	Desmopressin Acetate	1.5mg/ml	Brand	\$\$\$\$\$\$	Specialty CPA
KARIVA	Desogest-Eth Estrad & Eth Estrad Tab 0.15-0.02/0.01 MG(21/5)		Generic	\$\$\$	
MIRCETTE	Desogest-Eth Estrad & Eth Estrad Tab 0.15-0.02/0.01 MG(21/5)		Generic	\$\$\$	
CESIA	Desogest-Ethin Est Tab 0.1-0.025/0.125- 0.025/0.15-0.025MG-MG		Generic	\$\$	
CYCLESSA	Desogest-Ethin Est Tab 0.1-0.025/0.125- 0.025/0.15-0.025MG-MG		Generic	\$\$	
VELIVET	Desogest-Ethin Est Tab 0.1-0.025/0.125- 0.025/0.15-0.025MG-MG		Generic	\$\$	
APRI	Desogestrel & Ethinyl Estradiol Tab 0.15 MG-30 MCG		Generic	\$\$\$	
DESOGEN-28	Desogestrel & Ethinyl Estradiol Tab 0.15 MG-30 MCG		Generic	\$\$\$	
ORTHO-CEPT	Desogestrel & Ethinyl Estradiol Tab 0.15 MG-30 MCG		Generic	\$\$	
SOLIA	Desogestrel & Ethinyl Estradiol Tab 0.15 MG-30 MCG		Generic	\$\$	CPA
DESOWEN	Desonide	5%	Generic	\$\$\$\$	Step: TWO topical corticosteroids
TOPICORT	Desoximetasone	0.05%, 0.25%	Generic	\$\$	
PRISTIQ	Desvenlafaxine Succinate Tab SR 24HR	25mg, 50mg, 100mg	Generic	\$\$\$\$	CPA
DECADRON	Dexamethasone	0.5mg, 0.75mg, 1.0 mg,1.5mg, 4mg, 6mg	Generic	\$\$\$	
DEXAMETHASONE	Dexamethasone	2mg	Brand	\$\$\$	
DEXILANT (formerly KAPIDEX)	Dexlansoprazole	30mg, 60mg	Brand	\$\$\$\$	Step: Failure of two: omeprazole, pantoprazole QL= 31 caps/packets/31 days
FOCALIN, FOCALIN XR	Dexmethylphenidate HCl	2.5mg, 5mg, 10mg, 15mg, 20mg,25mg 30mg,35mg, 40mg	Generic	\$\$\$\$	Age > 23
ZINECARD	Dexrazoxane	250mg, 500mg	Brand	\$\$\$\$\$\$	Specialty CPA
DELSYM	Dextromethorphan Polistirex	30mg/5ml	OTC	\$\$	QL= 148ml/31 days
D10W	Dextrose Inj	10%	Generic	\$\$\$	
D5W	Dextrose Inj	5%	Generic	\$\$\$	
VALIUM	Diazepam	2mg, 5mg, 10mg	Generic	\$\$	QL= 124 tabs/31 days (2mg, 5mg)
VOLTAREN	Diclofenac Sodium	50mg, 75mg, 100mg	Generic	\$\$\$	QL= 31 tabs/31 days (10mg)
VOLTAREN	Diclofenac Sodium Gel 1%	1%	Brand	\$\$\$	CPA QL: 500g/30days
DYCILL	Dicloxacillin-Oral		Generic	\$\$	
BENTYL	Dicyclomine HCl	10mg, 20mg	Generic	\$\$\$	
FLORONE	Diflorasone Diacetate	0.05%	Generic	\$\$\$	
LANOXIN	Digoxin	0.125mg, 0.25mg	Generic	\$\$\$	
CARDIZEM	Diltiazem HCl	30mg, 60mg, 90mg, 180mg, 240mg, 120mg/24, 180mg/24, 240mg/24, 300mg/24, 360mg/24	Generic	\$\$\$\$	
TECFIDERA	Dimethyl Fumarate	120mg; 240mg	Brand	\$\$\$\$\$\$	Specialty CPA
RIMSO-50	Dimethyl Sulfoxide	50%	Brand	\$\$\$\$\$\$	CPA
ADACEL/BOOSTRIX	Dip/Pert/Tet Adsorbed Vaccine	Unit of dose	Brand	\$\$\$\$	Approved for Age > 18
DAPTACEL/INFANRIX	Dip/Pert/Tet Vaccine	Unit of dose	Brand	\$\$\$\$	Approved for Age > 18
BENADRYL	Diphenhydramine HCl	25mg, 50mg	OTC	\$	QL= 104 caps/31 days Age <=12
BENADRYL LIQUID	Diphenhydramine HCl		OTC	\$	QL= 240ml/31 days Age <12
BENADRYL-D	Diphenhydramine-Phenylephrine	12.5mg/5ml	OTC	\$	QL= 248ml/31 days
LOMOTIL	Diphenoxylate w/ Atropine	2.5mg	Generic	\$\$	

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## GCHP List of Covered Drugs

### Generic Name

ANTABUSE	Disulfiram	250mg, 500mg	Generic	\$\$\$	
DEPAKOTE, DEPAKOTE ER	Divalproex Sodium	125mg, 250mg, 500mg	Generic	\$\$\$	
DEPAKOTE SPR	Divalproex Sodium Sprinkle	125mg, 250mg, 500mg	Generic	\$\$\$	
TAXOTERE	Docetaxel	20mg/ml, 80mg/4ml	Generic	\$\$\$\$\$	Specialty
TAXOTERE	Docetaxel	20mg/0.5ml, 80mg/2ml	Brand	\$\$\$\$\$\$	Specialty
			OTC/		
COLACE	Docusate Sodium	50mg, 100mg, 250mg	Generic	\$	
ARICEPT, ARICEPT ODT	Donepezil Hydrochloride	5mg, 10mg, 23mg	Generic	\$\$\$\$	
PULMOZYME	Dornase Alfa	1mg/ml	Brand	\$\$\$\$\$\$	Specialty CPA
TRUSOPT	Dorzolamide HCL	2%	Generic	\$\$	
CARDURA	Doxazosin Mesylate	1mg, 2mg, 4mg, 8mg	Generic	\$\$\$\$	
DOXEPIN	Doxepin HCl	150mg	Brand	\$\$\$	
		10mg, 25mg, 50mg, 75mg, 100mg,			
SINEQUAN	Doxepin HCl	150mg	Generic	\$\$	
		0.5mcg, 1mcg, 2.5mcg, 2mcg/ml,			
HECTOROL	Doxercalciferol	4mcg/2ml	Generic	\$\$\$\$\$	Step: Rocaltrol
ADRIAMYCIN	Doxorubicin HCl	2mg/ml	Generic	\$\$\$\$	
DOXIL	Doxorubicin HCl Liposomal	2mg/ml	Generic	\$\$\$\$\$\$	Specialty
DOXYCYCLINE	Doxycycline Oral		Generic	\$\$	
ANGELIQ	Drospirenone-Estradiol	0.5-1mg	Brand	\$\$\$\$	
		Drospirenone-Ethinyl Estradiol Tab 3-			
YAZ		0.02 MG	Generic	\$\$\$\$	
		Drospirenone-Ethinyl Estradiol Tab 3-			
OCELLA		0.03 MG	Generic	\$\$\$	
		Drospirenone-Ethinyl Estradiol Tab 3-			
YASMIN		0.03 MG	Generic	\$\$\$	
NORTHERA	Droxidopa		Brand		Specialty CPA
TRULICITY	Dulaglutide Soln Pen-Injector	0.75mg; 1.5mg	Brand	\$\$\$\$	Step: Metformin
CYMBALTA	Duloxetine HCl	20mg, 30mg, 60mg	Generic	\$\$\$\$	
					Step: Tamsulosin OR Doxazosin OR
AVODART	Dutasteride	0.5mg	Brand	\$\$\$\$	Terazosin
SAVAYSA	Edoxaban	15mg; 30mg; 60mg	Brand	\$\$\$\$	Step: Warfarin and Xarelto
JUBLIA	Efinaconazole Soln 10%	10%	Brand	\$\$\$\$\$	CPA
ZEPATIER	Elbasvir-Grazoprevir	50-100MG	Brand	\$\$\$\$\$\$	Specialty CPA
					CPA
ZEPATIER	Elbasvir-Grazoprevir	50-100mg	Brand	\$\$\$\$\$\$	Preferred Agent
					Step: Sumatriptan Succinate
RELPAK	Eletriptan Hydrobromide	20mg, 40mg	Brand	\$\$\$\$	QL= 9 tabs/31 days
CERDELGA	Eliglustat Tartrate	84mg	Brand	\$\$\$\$\$\$	Specialty CPA
JARDIANCE	Empagliflozin	25mg; 10mg	Brand	\$\$\$\$	Step: Metformin
GLYXAMBI	Empagliflozin-Linagliptin Tab	10-5mg; 25-5mg	Brand	\$\$\$\$	Step: Jardiance OR Tradjenta
		12.5-500MG, 12.5-1000MG, 5-1000MG, 5-			
SYNJARDY	Empagliflozin-Metformin HCL	500MG	Brand	\$\$\$\$	Step: Metformin
VASOTEC	Enalapril Maleate	2.5mg, 5mg, 10mg, 20mg	Generic	\$\$	
VASERETIC	Enalapril Maleate & Hydrochlorothiazide	5-12.5mg, 10-25mg	Generic	\$\$\$\$	
		30mg/0.3ml, 40mg/0.4ml, 60mg/0.6ml,			
		80mg/0.8ml, 100mg/ml, 150mg/ml,			
LOVENOX	Enoxaparin Sodium	120mg/0.8ml	Generic	\$\$\$\$\$	QL= 28 syringes/14 days
					Step: Pramipexole OR Ropinrole HCl OR
COMTAN	Entacapone	200mg	Brand	\$\$\$\$	Carbidopa & Levodopa
					Specialty
BARACLUDE	Entecavir	0.5mg, 1mg, 0.05mg/ml	Brand	\$\$\$\$\$	CPA
					QL= 3 units/31 days (pkg size 1)
EPIPEN, EPIPEN-JR	Epinephrine	0.15mg, 0.3mg	Brand	\$\$\$\$	QL= 4 units/31 days (pkg size 2)
					Specialty
ELLECE	Epirubicin HCl	2mg/ml	Brand	\$\$\$\$\$	CPA
					Specialty, Available at Retail
		2000u/ml, 3000u/ml, 4000u/ml,			QL= 1 vial/7 days (40,000 units)
EPOGEN	Epoetin Alfa	10000u/ml, 20000u/ml, 40000u/ml	Brand	\$\$\$\$\$	QL= 12 vials/28 days (all other strengths)
		2000u/ml, 3000u/ml, 4000u/ml,			Specialty, Available at Retail
		10000u/ml, 20000u/ml, 30000u/ml,			QL= 1 vial/7 days (40,000 units)
PROCRIT	Epoetin Alfa	40000u/ml	Brand	\$\$\$\$\$	QL= 12 vials/28 days (all other strengths)

\$ ----- \$1 to \$10

\$\$ ----- \$11 to \$50

\$\$\$ ----- \$51 to \$100

\$\$\$\$ ----- \$101 to \$500

\$\$\$\$\$ ----- \$501 to \$1,000

\$\$\$\$\$\$ ----- \$1,001 to \$5,000

\$\$\$\$\$\$\$ ----- \$5,001 to \$10,000

**GCHP List of Covered Drugs**  
**Generic Name**

EPOPROSTENOL	Epoprostenol Sodium	0.5mg, 1.5mg	Generic	\$\$\$\$\$\$	Specialty CPA
FLOLAN	Epoprostenol Sodium	0.5mg, 1.5mg	Brand	\$\$\$\$\$\$	Specialty CPA
DRISDOL	Ergocalciferol	50000u	Generic	\$\$\$	
HALAVEN	Eribulin Mesylate	1mg/2ml	Generic	\$\$\$\$\$\$	
TARCEVA	Erlotinib	25mg, 100mg, 150mg	Brand	\$\$\$\$\$\$	Specialty Available at retail
INVANZ	Ertapenem IV		Generic	\$\$\$\$\$	CPA
ERYTHROMYCIN BASE	Erythromycin		Generic	\$\$\$	
ILOTYCIN	Erythromycin		Generic	\$\$	
EES	Erythromycin Esthylsuccinate	400mg	Generic	\$\$\$	
ERYTHROCIN	Erythromycin Stearate	25mg, 500mg	Generic	\$\$	
LEXAPRO	Escitalopram Oxalate	5mg, 10mg, 20mg	Generic	\$\$\$\$	Step: Failure of two: citalopram, fluoxetine, fluvoxamine, paroxetine, sertraline
ESTRACE	Estradiol	0.5mg, 1mg, 2mg	Generic	\$\$	
ESTRASORB	Estradiol		Brand	\$\$\$	QL= 56 units/28 days
ESTROGEL	Estradiol		Brand	\$\$\$\$	QL= 2 pump bottles/28 days
MENOSTAR	Estradiol	14mcg	Brand	\$\$\$\$	QL= 4 patches/28 days
VIVELLE-DOT	Estradiol	0.0375, 0.025mg, 0.05mg, 0.075mg, 0.1mg	Generic	\$\$\$\$	QL= 8 patches/28 days
ALORA	Estradiol	0.025mg, 0.05mg, 0.075mg, 0.1mg	Brand	\$\$\$	QL= 8 patches/31 days
ACTIVELLA	Estradiol & Norethindrone Acetate	1-0.5mg	Generic	\$\$\$\$	
CLIMARA	Estradiol TD	0.025mg, 0.0375mg, 0.05mg, 0.06mg, 0.075mg, 0.1mg	Generic	\$\$\$\$	QL= 4 patches/28 days
ESTRACE VAG	Estradiol Vaginal Cream		Brand	\$\$\$	
PREFEST	Estradiol/Estrad-Norgestimate		Brand	\$\$\$\$	
CLIMARA PRO	Estradiol-Levonorgestrel		Brand	\$\$\$	QL= 4 patches/28 days
COMBIPATCH	Estradiol-Norethindrone Ace	0.05/0.14mg, 0.05/0.25mg	Brand	\$\$\$	QL= 8 patches/28 days
PREMARIN	Estrogens, Conjugated	0.3mg, 0.45mg, 0.625mg, 0.9mg, 1.25mg	Brand	\$\$\$	
PREMARIN VAG	Estrogens, Conjugated Vaginal Cream	0.625mg	Brand	\$\$	
OGEN	Estropipate	0.75mg, 1.5mg, 3mg	Generic	\$\$	
ENBREL	Etanercept	25mg, 25mg/0.5ml, 50mg/ml	Brand	\$\$\$\$\$\$	Specialty CPA 2 concurrent DMARDS (one of which must be Methotrexate) OR Topical Steroid AND psoralen + UVA treatment (PUVA)
EDECIN	Ethacrynic Acid	25mg	Generic	\$\$\$	CPA
MYAMBUTOL	Ethambutol Oral	100mg, 400mg	Generic	\$\$\$	
KELNOR	Ethinodiol Diacetate & Ethinyl Estradiol Tab 1 MG-35 MCG		Generic	\$\$	
ZOVIA	Ethinodiol Diacetate & Ethinyl Estradiol Tab 1 MG-35 MCG, 1 MG-50 MCG		Generic	\$\$	CPA Intolerance or adverse reaction to formulary bisphosphonates: Actonel and Fosamax
DIDRONEL	Etidronate Disodium	400mg	Generic	\$\$\$\$	
NUVARING	Etonogestrel-Ethinyl Estradiol VA Ring 0.120-0.015 MG/24HR		Brand	\$\$\$	
TOPOSAR	Etoposide	20mg/ml	Generic	\$\$\$\$\$	
AFINITOR	Everolimus	2.5mg, 5mg, 10mg	Brand	\$\$\$\$\$\$	Specialty
AROMASIN	Exemestane	25mg	Generic	\$\$\$\$	Specialty
BYDUREON	Exenatide	2mg Ext Release Susp	Brand	\$\$\$\$\$	Step: Metformin
BYETTA	Exenatide	5mcg, 10mcg	Brand	\$\$\$\$	Step: Metformin
ZETIA	Ezetimibe	10mg	Generic	\$\$\$	CPA
FAMVIR	Famcyclovir Oral	125mg, 250mg, 500mg	Generic	\$\$\$\$	
PEPCID	Famotidine	10mg, 20mg	OTC	\$\$	QL= 93 tabs/31 days
PEPCID	Famotidine	40mg, 40mg/5ml	Generic	\$\$\$	QL= 150mL/30 days
INTRALIPID INJ 20%	Fat Emulsion IV Soln	20%	Generic	\$\$\$	
INTRALIPID INJ 30%	Fat Emulsion IV Soln	30%	Brand	\$\$\$	
LIPOSYN III INJ 10%	Fat Emulsion IV Soln	10%	Generic	\$\$\$	
ULORIC	Febuxostat	40mg, 80mg	Brand	\$\$\$\$	Step: allopurinol

\$ ----- \$1 to \$10  
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## GCHP List of Covered Drugs

### Generic Name

TRICOR	Fenfibrate Nanocrystals	34mg, 48mg, 54mg, 67mg, 145mg, 200mg	Brand	\$\$\$\$\$	Step: micronized fenofibrate
LOFIBRA	Fenofibrate	54mg, 67mg, 134mg, 160mg, 200mg	Generic	\$\$\$	
FENTORA	Fentanyl Citrate	100mcg, 200mcg, 300mcg, 400mcg, 600mcg, 800mcg	Brand	\$\$\$\$\$	CPA: Cancer Only QL= 124 tabs/31 days
DURAGESIC	Fentanyl TD Patch	12mcg, 25mcg, 50mcg, 75mcg, 100mcg	Generic	\$\$\$\$	QL= 15 patches/31 days (1st fill) CPA (2nd fill)
FERROUS SULF	Ferrous Sulfate		OTC	\$	QL= 100 caps/31 days QL= 480ml/31 days Step: Claritin
ALLEGRA	Fexofenadine	30mg, 60mg, 180mg	OTC	\$\$	QL= 62 tabs/31 days
ALLEGRA-D	Fexofenadine-Pseudoephedrine	12 hour, 24 hour	OTC	\$\$	QL= 62 tabs/31 days for 12 hour
ALLEGRA-D	Fexofenadine-Pseudoephedrine	60mg/120mg, 180mg/240mg	Generic	\$\$	QL= 31 tabs/31 days for 24 hour
NEUPOGEN	Filgrastim	300mcg, 480mcg, 300mcg/0.5ml, 480mcg/0.8ml	Brand	\$\$\$\$\$\$	Specialty, Available at Retail QL= 14 vials/31 days (300mcg & 480mcg)
PROSCAR	Finasteride	5mg	Generic	\$\$\$\$	
GILENYA	Fingolimod HCl	0.5mg	Brand	\$\$\$\$\$\$	Specialty CPA
TAMBOCOR	Flecainide Acetate	50mg, 100mg, 150mg, 200mg	Generic	\$\$\$\$\$	
DIFLUCAN	Fluconazole Oral	50mg, 100mg, 150mg, 200mg	Generic	\$\$\$\$	QL= 2 tabs/31 days (150mg)
ANCOBON	Flucytosine Oral	250mg, 500mg	Brand	\$	CPA
FLUDARA	Fludarabine Phosphate	50mg	Brand	\$\$\$\$\$\$	Specialty
FLUDARABINE	Fludarabine Phosphate	50mg, 50mg/2ml	Generic	\$\$\$\$\$\$	Specialty
FLORINEF	Fludrocortisone Acetate	0.1mg	Generic	\$\$\$	
NASALIDE	Flunisolide	0.025%	Generic	\$\$\$	QL= 3 inhers/bottles/31 days
AEROSPAN	Flunisolide HFA Aero	80mcg	Brand	\$\$\$	
LIDEX	Fluocinonide	0.05%	Generic	\$\$	
FML FORTE	Fluorometholone	0.25%	Brand	\$\$	
ADRUCIL	Fluorouracil	2.5g/50ml, 5g/100ml, 500mg/10ml	Generic	\$\$	
CARAC	Fluorouracil	0.5%	Brand	\$\$\$\$	
PROZAC WEEKLY	Fluoxetine HCl	90mg	Generic	\$\$	Step: Failure of two: citalopram, fluoxetine, fluvoxamine, paroxetine, sertraline
PROZAC	Fluoxetine HCl	10mg, 20mg, 40mg, 90mg	Generic	\$\$	
VERAMYST	Fluticasone Furoate	27.5mcg	Brand	\$\$\$\$	Step: Fail one: flunisolide, fluticasone
ARNUITY ELLIPTA	Fluticasone Furoate Aero Pow	100mcg; 200mcg	Brand	\$\$\$	
FLONASE	Fluticasone Propionate	50mcg	Generic	\$\$\$	QL= 1 inhers/31 days
FLOVENT HFA	Fluticasone Propionate HFA	44mcg, 110mcg, 220mcg	Brand	\$\$\$\$	Step: Arnuity Ellipta for age >12 QL= 1 inhers/31 days (44mcg) QL= 1 inhr/31 days (110mcg) QL= 1 inhers/31 days (220mcg)
ADVAIR DISKUS	Fluticasone-Salmeterol	100/50, 250/50, 500/50	Brand	\$\$\$\$	QL= 1 Diskus / 30 days
ADVAIR HFA	Fluticasone-Salmeterol	45/21, 115/21, 230/21	Brand	\$\$\$\$	QL= 1 inhers/30 days
BREO ELLIPTA	Fluticasone-Vilanterol	100/25; 200-25	Brand	\$\$\$	STEP: Symbicort or Advair HFA
LUVOX	Fluvoxamine Maleate	25mg, 50mg, 100mg	Generic	\$\$\$	
FOLTX	Folic Acid	400mcg, 800mcg, 1mg	Generic	\$\$	
ARIXTRA	Fondaparinux Sodium	2.5mg/0.5ml, 5mg/0.4ml, 7.5mg/0.6ml, 10mg/0.8ml	Generic	\$\$\$\$\$\$	Age 18 to 75 QL= 30 syringes/30 days
FORADIL	Formoterol Fumarate		Brand	\$\$\$\$	Step: Striverdi QL= 12 caps/12 days (12pk) QL= 60caps/30 days (60pk) CPA
PERFORMIST	Formoterol Fumarate	20mcg	Brand	\$\$\$\$	QL= 120 vials/31 days
MONOPRIL	Fosinopril Sodium	10mg, 20mg, 40mg	Generic	\$\$	
MONOPRIL HCT	Fosinopril Sodium & Hydrochlorothiazide	10-12.5mg, 20-12.5mg	Generic	\$\$\$\$	
EMETROL	Fructose-Dextrose-Phosphoric Acid		OTC	\$	QL= 240ml/ 31 days
FASLODEX	Fulvestrant	250mg/5ml	Generic	\$\$\$\$\$\$	
LASIX	Furosemide	20mg, 40mg, 80mg	Generic	\$\$	

\$ ----- \$1 to \$10  
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## GCHP List of Covered Drugs Generic Name

NEURONTIN	Gabapentin	100mg, 300mg, 400mg, 600mg, 800mg	Generic	\$\$\$\$	
NAGLAZYME	Galsulfase	1mg/ml	Brand	\$\$\$\$\$\$	Specialty CPA
ZIRGAN	Ganciclovir	0.15%	Brand	\$\$\$\$	Step: Failure of Viroptic
CYTOVENE	Gancyclovir IV	500mg	Generic	\$	CPA
GEMZAR	Gemcitabine HCl	200mg, 1g	Brand	\$\$\$\$\$\$	Specialty
LOPID	Gemfibrozil	600mg	Generic	\$\$\$	
GARAMYCIN	Gentamicin IM or IV		Generic	\$\$	QL= 14 days Specialty
COPAXONE/GLATOPA	Glatiramer Acetate	20mg/ml; 40mg/mL	Generic	\$\$\$\$\$\$	CPA
AMARYL	Glimepiride	1mg, 2mg, 4mg	Generic	\$\$\$	
GLUCOTROL	Glipizide	5mg, 10mg	Generic	\$\$\$	
GLUCOTROL XL	Glipizide SR	2.5mg, 5mg, 10mg	Generic	\$\$\$	
GLUCAGEN	Glucagon HCl	1mg	Brand	\$\$\$\$\$	CPA required for 2nd fill
MICRONASE	Glyburide	1.25mg, 2.5mg, 5mg	Generic	\$\$\$	
GLUCOVANCE	Glyburide-Metformin	1.25-250mg, 2.5-500mg, 5-500mg	Generic	\$\$\$\$	
RAVICTI	Glycerol Phenylbutyrate Liquid	1.1 gm	Brand	\$\$\$\$\$\$	CPA
SIMPONI	Golimumab	50mg	Brand	\$\$\$\$\$\$	Specialty Step: Fail <b>BOTH</b> Humira AND Enbrel
ZOLADEX	Goserelin Acetate	3.6mg, 10.8mg	Brand	\$\$\$\$\$\$	Specialty Specialty
GRANISETRON	Granisetron HCl	1mg, 0.1mg/ml, 1mg/ml, 4mg/4ml,	Generic	\$\$\$\$\$\$	CPA
GRIS-PEG	Griseofulvin Oral	125mg, 250mg	Brand	\$\$	
INTUNIV	Guanfacine HCL	1mg, 2mg, 3mg, 4mg	Brand	\$\$\$\$\$	Age > 23
TENEX	Guanfacine HCl	1mg, 2mg	Generic	\$\$\$\$	
HEPARIN SOD	Heparin Sodium	1000u/ml, 5000u/ml	Generic	\$	
HEPARIN LOCK	Heparin Sodium Lock Flush	10U, 100U	Generic	\$	
TWINRIX	Hepatitis A (Inact)-Hep B (Recomb) Vac		Brand	\$\$\$\$\$\$	CPA
HAVRIX	Hepatitis A Vaccine	720u, 1440u	Brand	\$\$\$\$\$\$	CPA
HYPERHEP	Hepatitis B Immune Globulin		Brand	\$\$\$\$\$\$	Specialty CPA
ENGERIX	Hepatitis B Vaccine	10mcg/0.5ml, 20mcg/ml	Brand	\$\$\$\$\$\$	CPA
SUPPRELIN	Histrelin Acetate	50mg	Brand	\$\$\$\$\$\$	Specialty CPA
VANTAS	Histrelin Acetate	50mg	Brand	\$\$\$\$\$\$	Specialty
GARDASIL/CERVARIX/GARDASIL 9	Human Pappillomavirus Vaccine	Unit of dose	Brand	\$\$\$	Approved for Age > 18
ORTHOVISC	Hyaluronan	15mg/ml	Brand	\$\$\$\$\$\$	Specialty CPA
APRESOLINE	Hydralazine HCl	10mg, 25mg, 50mg, 100mg	Generic	\$\$\$\$	
HYDRODIURIL	Hydrochlorothiazide	12.5mg, 25mg, 50mg	Generic	\$\$\$	
TUSSIONEX	Hydrocod Polst-Chlorphen Polst		Generic	\$\$\$	
ZOHYDRO ER	Hydrocodone Bitartrate	10mg; 15mg; 20mg; 30mg; 40mg; 50mg	Brand	\$\$\$\$	CPA
VICODIN	Hydrocodone-Acetaminophen	2.5-500mg, 5-325mg, 5-500mg, 7.5-325mg, 7.5-650mg, 7.5-650mg, 7.5-750mg, 10-300mg, 10-325mg, 10-500mg, 10-650mg, 10-660mg	Generic	\$\$\$	QL= 124 tabs/31 days CPA required if taken in conjunction with alprazolam QL= 186 tabs/31 days CPA required if taken in conjunction with alprazolam
REPREXAIN	Hydrocodone-Ibuprofen	2.5-200mg, 5-200mg, 7.5-200mg, 10-200mg	Generic	\$\$\$\$	
HYTONE	Hydrocortisone	0.5%, 1%, 2.5%	Generic	\$\$\$	
ANALPRAM-HC	Hydrocortisone Acetate w/ Pramoxine	1-1%, 1-2.5%, 2.5%, 2.5-1%	Generic	\$\$\$\$	
SOLU-CORTEF	Hydrocortisone Sodium Succinate	100mg, 250mg, 500mg, 1000mg	Brand	\$\$\$\$\$\$	CPA
ACETASOL HC	Hydrocortisone w/ Acetic Acid Otic	2.0%	Generic	\$\$\$	QL= 186 tabs/31 days CPA required if taken in conjunction with alprazolam
DILAUDID	Hydromorphone HCl	1mg, 2mg, 4mg, 8mg	Generic	\$\$\$	QL= 500ml/31 days CPA required if taken in conjunction with alprazolam
DILAUDID-5	Hydromorphone HCl	1mg/ml	Brand	\$\$\$\$	
PLAQUENIL	Hydroxychloroquine Sulfate	200mg	Generic	\$\$\$	
HYDREA	Hydroxyurea	500mg	Generic	\$\$\$\$	

\$ ----- \$1 to \$10  
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**GCHP List of Covered Drugs**  
**Generic Name**

ATARAX	Hydroxyzine HCl	10mg, 25mg, 50mg	Generic	\$\$	
VISTARIL	Hydroxyzine Pamoate	25mg, 50mg, 100mg	Generic	\$\$	
					Specialty CPA
SYNVISC	Hylan Intra-articular	8mg/ml	Brand	\$\$\$\$\$\$	Corticosteroids
LEVBIID	Hyoscyamine Sulfate	0.0125mg, 0375mg	Generic	\$\$	
BONIVA	Ibandronate Sodium	3mg/3ml	Generic	\$\$\$\$	CPA
BONIVA	Ibandronate Sodium	2.5mg, 150mg	Generic	\$\$\$\$	
IMBRUVICA	Ibrutinib	140mg	Brand	\$\$\$\$\$\$	Specialty CPA
ADVIL	Ibuprofen	200mg	OTC	\$	QL= 106 tabs/31 days Age <10
MOTRIN	Ibuprofen	100mg/5ml	OTC	\$	QL= 248ml/31 days
MOTRIN	Ibuprofen	800mg	Generic	\$\$	
ZYDELIG	Idelalisib	100mg;150mg	Brand	\$\$\$\$\$\$	Specialty CPA
ELAPRASE	Idursulfase	6mg/3ml	Brand	\$\$\$\$\$\$	Specialty CPA
IFEX	Ifosfamide	1 gm, 3 gm	Generic	\$\$\$\$\$\$	
VENTAVIS	Iloprost	10mcg/ml, 20mcg/ml	Brand	\$\$\$\$\$\$	Specialty CPA
GLEEVEC	Imatinib Mesylate	100mg, 400mg	Generic	\$\$\$\$\$\$	Specialty
CEREZYME	Imiglucerase	200u, 400u	Brand	\$\$\$\$\$\$	Specialty CPA
PRIMAXIN	Imipenem/Cilastin IV		Generic	\$\$\$\$	CPA
TOFRANIL	Imipramine HCl	10mg, 25mg, 50mg	Generic	\$\$	
ALDARA	Imiquimod	5%	Generic	\$\$\$	CPA QL= 120 days/365 days
CARIMUNE	Immune Globulin	3g, 6g, 12g	Brand	\$\$\$\$\$\$	Specialty; Available at Retail CPA
FLEBOGAMMA	Immune Globulin	5%, 10%	Brand	\$\$\$\$\$\$	Specialty CPA Specialty
GAMASTAN	Immune Globulin		Brand	\$\$\$\$\$\$	CPA
GAMMAGARD SD	Immune Globulin	1g/10ml, 2.5g/25ml, 5g/50ml, 10g/100ml, 20g/200ml, 30g/300ml, 0.5g, 2.5g, 5g, 10g	Brand	\$\$\$\$\$\$	Specialty CPA
GAMUNEX	Immune Globulin	10%, 1g/10ml, 2.5g/25ml, 5g/5ml, 10g/100ml, 20g/200ml	Brand	\$\$\$\$\$\$	Specialty CPA
OCTAGAM	Immune Globulin	2.5g, 5g, 10g, 25g	Brand	\$\$\$\$\$\$	Specialty CPA
PRIVIGEN	Immune Globulin	5g, 10g, 20g	Brand	\$\$\$\$\$\$	CPA
LOZOL	Indapamide	1.25mg, 2.5mg	Generic	\$\$\$	
INDOCIN	Indomethacin	25mg, 50mg, 75mg	Generic	\$\$	
REMICADE	Infliximab	100mg	Brand	\$\$\$\$\$\$	Specialty CPA
INFLECTRA	Infliximab-dyyb	100mg	Brand	\$\$\$\$\$\$	CPA
FLUZONE/FLUVIRIN/ FLUMIST	Influenza Virus Vaccine	Unit of Dose	Brand	\$\$	
NOVOLOG	Insulin Aspart	70/30, 100u/ml	Brand	\$\$\$\$	
TRESIBA FLEX	Insulin Degludec Sol Pen Inj	100IU, 200IU	Brand	\$\$\$\$	
					CPA Member must have ONE of the following medically documented issues: (1) Unable to draw up insulin into a syringe or self- administer, due to mechanical, physical, or environmental factors (2) Visual Impairment (3) Has severe phobia to traditional syringes and needles as documented in the patient's medical records.
LEVEMIR, FLEXPEN	Insulin Detemir	100u/ml	Brand	\$\$\$\$	

\$ ----- \$1 to \$10  
 \$\$ ----- \$11 to \$50  
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**GCHP List of Covered Drugs  
Generic Name**

					CPA Member must have ONE of the following medically documented issues: (1) Unable to draw up insulin into a syringe or self-administer, due to mechanical, physical, or environmental factors (2) Visual Impairment (3) Has severe phobia to traditional syringes and needles as documented in the patient's medical records (4) use a Disetronic Insulin Pump (D-TRONplus)
BASAGLAR	Insulin Glargine	100 UNIT/ML	Brand	\$\$\$\$	
					CPA (Pen Only) Member must have failed Basaglar and have ONE of the following medically documented issues: (1) Unable to draw up insulin into a syringe or self-administer, due to mechanical, physical, or environmental factors (2) Visual Impairment (3) Has severe phobia to traditional syringes and needles as documented in the patient's medical records (4) use a Disetronic Insulin Pump (D-TRONplus)
LANTUS	Insulin Glargine	100u/ml, 500u/ml	Brand	\$\$\$\$	
					CPA (Pen Only) Member must have failed Basaglar and have ONE of the following medically documented issues: (1) Unable to draw up insulin into a syringe or self-administer, due to mechanical, physical, or environmental factors (2) Visual Impairment (3) Has severe phobia to traditional syringes and needles as documented in the patient's medical records (4) use a Disetronic Insulin Pump (D-TRONplus)
TOUJEO SOLO	Insulin Glargine	300Units/mL	Brand	\$\$\$\$	
SOLIQUA	Insulin Glargine-Lixisenatide	100-33 Unit-MCG/ML	Brand	\$\$\$\$	
APIDRA	Insulin Glulisine	100u/ml	Brand	\$\$\$\$	CPA
HUMULIN N	Insulin Isophane	100u/ml	Brand	\$\$\$	
HUMULIN R	Insulin Isophane	100u/ml, 500u/ml	Brand	\$\$\$	
NOVOLIN N	Insulin Isophane	100u/ml	Brand	\$\$\$	
NOVOLIN R	Insulin Isophane	100u/ml	Brand	\$\$\$	
HUMULIN	Insulin Isophane & Regular	50/50, 70/30	Brand	\$\$\$	
NOVOLIN	Insulin Isophane & Regular	70/30	Brand	\$\$\$	
					CPA (Pen Only) Member must have ONE of the following medically documented issues: (1) Unable to draw up insulin into a syringe or self-administer, due to mechanical, physical, or environmental factors (2) Visual Impairment (3) Has severe phobia to traditional syringes and needles as documented in the patient's medical records
HUMALOG	Insulin Lispro	50/50, 75/25, 100U/mL	Brand	\$\$\$\$	

\$ ----- \$1 to \$10  
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## GCHP List of Covered Drugs Generic Name

Brand Name	Generic Name	Strength	Form	Category	Cost	Notes
HUMALOG	Insulin Lispro	200U/mL		Brand	\$\$\$\$	CPA Member must have ONE of the following medically documented issues: (1) Unable to draw up insulin into a syringe or self-administer, due to mechanical, physical, or environmental factors (2) Visual Impairment (3) Has severe phobia to traditional syringes and needles as documented in the patient's medical records (4) Documented valid reason for requiring a higher potency insulin
AFREZZA	Insulin Regular (Human) Inh Pow	4 Units, 8 Units		Brand	\$\$\$\$	CPA
INFERGEN	Interferon			Brand	\$\$\$\$\$\$	Specialty Step: Peg-Inton and Ribavarin
INTRON-A	Interferon Alfa-2B	3u, 5u, 10u, 18u, 25u, 50u		Brand	\$\$\$\$\$\$	Specialty QL= 2 inj/31 days
ALFERON N	Interferon Alfa-n3	5000000u/ml		Brand	\$\$\$\$\$\$	Specialty
AVONEX	Interferon Beta-1a	30mcg		Brand	\$\$\$\$\$\$	Specialty CPA
REBIF	Interferon Beta-1a	22mcg/0.5ml, 44mcg/0.5ml		Brand	\$\$\$\$\$\$	Specialty CPA
BETASERON	Interferon Beta-1b	0.3mg		Brand	\$\$\$\$\$\$	Specialty Step: Extavia
EXTAVIA	Interferon Beta-1b	0.3mg		Brand	\$\$\$\$\$\$	Specialty
ACTIMMUNE	Interferon Gamma-1B	2000000u/0.5ml		Brand	\$\$\$\$\$\$	Specialty CPA
YODOXIN	Iodoquinol Oral	210mg, 650mg		Brand	\$\$\$\$	
ATROVENT	Ipratropium Bromide	0.02%		Generic	\$\$\$\$	
ATROVENT HFA	Ipratropium Bromide HFA	17mcg		Brand	\$\$\$\$	QL= 2 inhrs HFA/31 days
AVAPRO	Irbesartan	75mg, 150mg, 300mg		Brand	\$\$\$	Step: losartan potassium
AVALIDE	Irbesartan-Hydrochlorothiazide	150-12.5mg, 300-12.5mg, 300-25mg		Generic	\$\$	Step: losartan potassium HCT
CAMPTOSAR	Irinotecan HCl	20mg/ml		Brand	\$\$\$\$\$\$	Specialty

Brand Name	Generic Name	Strength	Form	Category	Cost	Notes
CRESEMBA	Isavuconazonium Sulfate	372 mg Inj; 186 mg Cap		Brand	\$\$\$\$\$\$	CPA Clinical Note: Documented diagnosis of invasive aspergillosis or mucormycosis with documentation of failure or intolerance to both first and second line agents: voriconazole & amphotericin B for aspergillosis; posiconazole and amphotericin B for mucormycosis
ISONIAZID	Isoniazid Oral			Generic	\$\$	
ISORDIL	Isosorbide Dinitrate	5mg, 10mg, 20mg, 30mg, 40mg		Generic	\$\$\$\$	
IMDUR	Isosorbide Mononitrate	10mg, 20mg, 30mg, 60mg, 120mg		Generic	\$\$\$\$	
SPORANOX	Itraconazole Oral	100mg		Generic	\$\$\$\$	CPA
CORLANOR	Ivabradine HCL	5mg, 7.5mg		Brand	\$\$\$\$	CPA
SOOLANTRA	Ivermectin	1%		Brand	\$\$\$\$	CPA
STROMEKTOL	Ivermectin Oral	3mg		Generic	\$\$\$\$	
IXEMPRA	Ixabepilone	15mg, 45mg		Generic	\$\$\$\$\$\$	
NINLARO	Ixazomib Citrate	2mg; 3mg; 4mg		Brand	\$\$\$\$\$\$	Specialty CPA
NIZORAL	Ketoconazole Oral	200mg		Generic	\$\$\$	
NIZORAL	Ketoconazole Topical			Generic	\$\$	
ORUDIS	Ketoprofen	50mg, 75mg, 200mg		Generic	\$\$\$	
ACULAR LS	Ketorolac Tromethamine	0.40%		Generic	SS	
NORMODYNE	Labetalol HCl	100mg, 200mg, 300mg		Generic	\$\$\$	
VIMPAT	Lacosamide	50mg, 100mg, 150mg, 200mg, 10mg/ml		Generic	\$\$\$\$	CPA
LACTATED RINGERS	Lactated Ringers Inj	USP		Generic	\$\$\$	
CEPHULAC	Lactulose	10g/15ml, 20g/30ml		Generic	\$\$\$\$	
EPIVIR	Lamivudine Oral	150mg, 300mg		Brand	\$\$\$\$	Specialty

\$ ----- \$1 to \$10  
 \$\$ ----- \$11 to \$50  
 \$\$\$ ----- \$51 to \$100  
 \$\$\$\$ ----- \$101 to \$500  
 \$\$\$\$\$ ----- \$501 to \$1,000  
 \$\$\$\$\$\$ ----- \$1,001 to \$5,000  
 \$\$\$\$\$\$\$ ----- \$5,001 to \$10,000

**GCHP List of Covered Drugs**  
**Generic Name**

LAMICTAL	Lamotrigine	25mg, 50mg, 100mg, 150mg, 200mg, 250mg	Generic	\$\$	
LAMICTAL XR	Lamotrigine SR	25mg, 100mg, 150mg, 200mg, 300mg	Generic	\$\$\$\$	
LANCETS	Lancets		OTC	\$	QL= 200/31 days
PREVACID	Lansoprazole	15mg; 30mg	Generic	\$\$\$\$	
TYKERB	Lapatinib Ditosylate	250mg	Brand	\$\$\$\$\$\$	Specialty
ALDURAZYME	Laronidase	2.9mg/5ml	Brand	\$\$\$\$\$\$	Specialty CPA
XALATAN	Latanoprost	0.005%	Generic	\$\$\$	
HARVONI	Ledipasvir-Sofosbuvir Tab	90-400 mg	Brand	\$\$\$\$\$\$\$	Specialty CPA: HCV
REVLIMID	Lenalidomide	5mg, 10mg, 15mg, 25mg	Brand	\$\$\$\$\$\$	Specialty CPA
LENVIMA	Lenvatinib	14mg; 20mg; 10mg; 24mg	Brand	\$\$\$\$\$	Specialty CPA
					Step: 1. Allopurinol 2. Uloric 3. Zurampic + Allopurinol 4. Zurampic + Uloric
ZURAMPIC	Lesinurad	200mg	Brand	\$\$\$\$	
FEMARA	Letrozole	2.5mg	Generic	\$\$\$\$\$	
LEUCOVOR	Leucovorin Calcium	5mg, 10mg, 15mg, 25mg	Generic	\$\$\$	
ELIGARD	Leuprolide Acetate	7.5mg, 22.5mg, 30mg, 45mg	Brand	\$\$\$\$\$\$	Specialty CPA
LEUPROLIDE	Leuprolide Acetate	1mg/0.2ml, 5mg/ml	Generic	\$\$\$\$\$\$	Specialty CPA
LUPRON	Leuprolide Acetate	3.75mg, 7.5mg, 11.25mg, 22.5mg, 30mg	Brand	\$\$\$\$\$\$	Specialty CPA
XOPENEX	Levalbuterol HCl	0.31mg, 0.63mg, 1.25mg/3ml	Brand	\$\$\$	Step: albuterol
XOPENEX HFA	Levalbuterol Tartrate		Brand	\$\$\$	Step: albuterol QL= 2 inhrrs/31 days
KEPPRA	Levetiracetam	100mg/ml, 250mg, 500mg, 750mg, 1000mg	Generic	\$\$\$	
KEPPRA XR	Levetiracetam SR	500mg, 750mg	Brand	\$\$\$	
CARNITOR	Levocarnitine	200mg/mL Inj; 1GM/10mL Sol; 330mg tab	Generic	\$\$\$	
LEVAQUIN	Levofloxacin Oral		Generic	\$\$	
PLAN B	Levonorgestrel	0.75mg, 1.5mg	Brand/Gen eric	\$\$\$	QL= 2 tabs/31 days for 0.75mg QL=1 tab/31 days for 1.5mg
SEASONALE	Levonorgestrel & Ethinyl Estradiol (91-Day) Tab 0.15-0.03 MG		Generic	\$\$\$\$	
AVIANE	Levonorgestrel & Ethinyl Estradiol Tab 0.1 MG-20 MCG		Generic	\$\$	
LESSINA-28	Levonorgestrel & Ethinyl Estradiol Tab 0.1 MG-20 MCG		Generic	\$\$	
LUTERA	Levonorgestrel & Ethinyl Estradiol Tab 0.1 MG-20 MCG		Generic	\$\$	
LEVORA-28	Levonorgestrel & Ethinyl Estradiol Tab 0.15 MG-30 MCG		Generic	\$\$	
NORDETTE	Levonorgestrel & Ethinyl Estradiol Tab 0.15 MG-30 MCG		Generic	\$\$\$	
ENPRESSE-28	Levonorgestrel-Eth Estra Tab 0.05-30/0.075-40/0.125-30MG-MCG		Generic	\$\$	
TRIVORA-28	Levonorgestrel-Eth Estra Tab 0.05-30/0.075-40/0.125-30MG-MCG		Generic	\$\$	
LEVOTHROID	Levothyroxine Sodium	25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg, 500mcg	Generic	\$\$	
LEVOXYL	Levothyroxine Sodium	25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	Generic	\$\$	
SYNTHROID	Levothyroxine Sodium	25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	Brand	\$\$\$	
		\$ ----- \$1 to \$10			
		\$\$ ----- \$11 to \$50			
		\$\$\$ ----- \$51 to \$100			
		\$\$\$\$ ----- \$101 to \$500			
		\$\$\$\$\$ ----- \$501 to \$1,000			
		\$\$\$\$\$\$ ----- \$1,001 to \$5,000			
		\$\$\$\$\$\$\$ ----- \$5,001 to \$10,000			



**GCHP List of Covered Drugs**  
**Generic Name**

		25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg,			
UNITHROID	Levothyroxine Sodium	175mcg, 200mcg, 300mcg	Generic	\$\$	
XYLOCAINE	Lidocaine HCl	2% gel, 5% onit	Generic	\$\$	
XYLOCAINE	Lidocaine HCl Viscous	2%	Generic	\$\$	
LIDODERM	Lidocaine Patch	5%	Generic	\$\$\$\$	Step: NSAIDS QL= 93 patches/31 days
LINZESS	Linacotide	145mcg, 290mcg	Brand	\$\$\$\$	QL= 31 caps/31 days
LINDANE	Lindane	1%	Generic	\$\$\$	
ZYVOX	Linezolid Oral, IV	600mg, 100mg/5mL, 2mg, mL	Generic	\$\$\$\$\$	CPA
VICTOZA	Liraglutide	18mg/3ml	Brand	\$\$\$\$	Step: Metformin
VYVANSE	Lisdexamphetamine Dimesylate	20mg, 30mg, 40mg, 50mg, 60mg, 70mg	Brand	\$\$\$\$\$	CPA Age <23
ZESTRIL	Lisinopril	2.5mg, 5mg, 10mg, 20mg, 30mg	Generic	\$\$	
ZESTORETIC	Lisinopril & Hydrochlorothiazide	10-12.5mg, 20-12.5mg, 20-25mg	Generic	\$\$\$	
IMODIUM	Loperamide HCl	2mg	Generic	\$\$	
CLARITIN	Loratadine	5mg/5mL	OTC	\$\$	QL= 310ml/31 days
CLARITIN	Loratadine	10mg	OTC	\$\$	QL= 31 caps/31 days
					QL= 124 tabs/31 days (0.5mg, 1mg)
ATIVAN	Lorazepam	0.5mg, 1mg, 2mg,	Generic	\$\$\$	QL= 62 tabs/31 days (2mg)
BELVIQ XR	Lorcaserin HCL Tab SR 24HR	20mg	Brand	\$\$\$\$	CPA
COZAAR	Losartan Potassium	25mg, 50mg, 100mg	Generic	\$\$	
	Losartan Potassium & Hydrochlorothiazide	50-12.5mg, 100-12.5mg, 100-25mg	Generic	\$\$\$	
HYZAAR					
ALREX	Loteprednol Etabonate	0.2%	Brand	\$\$\$\$	
LOTEMAX	Loteprednol Etabonate	0.5%	Brand	\$\$\$	
MEVACOR	Lovastatin	20mg, 40mg	Generic	\$\$\$\$	
					Step: IBS: Linacotide OIC: Colace
AMITIZA	Lubiprostone	8mcg, 24mcg	Brand	\$\$\$\$	QL=62 caps/31 days
ORKAMBI	Lumacaftor-Ivacaftor	200-125MG	Brand	\$\$\$\$\$	Specialty CPA
OPSUMIT	Macitentan	10mg	Brand	\$\$\$\$\$	Specialty CPA
OVIDE	Malathion Lotion	0.50%	Generic	\$\$\$\$	QL= 60ml/30days
M-M-R II	Measles, Mumps, and Rubella Virus Vaccine	Unit of dose	Brand	\$\$\$\$	Approved for Age > 18
MEBENDAZOLE	Mebendazole Oral	100mg	Brand	\$\$\$	
INCRELEX	Mecasermin	40mg/4ml	Brand	\$\$\$\$\$	Specialty CPA Specialty CPA
VALCHLOR	Mechlorethamine HCL Gel	0.016%	Brand		
PROVERA	Medroxyprogesterone Acetate	2.5mg, 5mg, 10mg	Generic	\$\$\$	
	Medroxyprogesterone Acetate IM Susp 150 MG/ML		Generic	\$\$\$	
DEPO-PROVERA	Medroxyprogesterone Acetate IM Susp 400 MG/ML		Brand	\$\$\$\$	
MEGACE	Megestrol Acetate	20mg, 40mg	Generic	\$\$\$\$\$	
MEGACE	Megestrol Acetate	40mg/ml	Generic	\$\$\$\$	
MOBIC	Meloxicam	7.5mg, 15mg	Generic	\$\$\$\$	
ALKERAN	Melphalan	2mg, 50mg	Brand	\$\$\$\$\$	Specialty
NAMENDA	Memantine HCl	5mg, 5-10mg, 10mg	Generic	\$\$\$\$	
NAMENDA XR	Memantine HCl SR	7mg, 14mg, 28mg	Generic	\$\$\$\$	
BEXSERO/ TRUMENBA	Meningococcal Group B Vaccine	Unit of dose	Brand	\$\$\$\$	Approved for Age > 18
MENVEO	Meningococcal Oligosachcharide Diphtheria Conjugate Vaccine	Unit of dose	Brand	\$\$\$\$	Approved for Age > 18
MENACTRA	Meningococcal Polysaccharide Diphtheria Conjugate Vaccine	Unit of dose	Brand	\$\$\$\$	Approved for Age > 18
MENOMUNE	Meningococcal Polysaccharide Vaccine	Unit of dose	Brand	\$\$\$\$	Approved for Age > 18
PURINETHOL	Mercaptopurine	50mg	Generic	\$\$\$\$	
MERREM	Meropenem IV		Generic	\$\$\$\$	CPA
ASACOL, ASACOL HD	Mesalamine	400mg, 800mg	Brand	\$\$\$	CPA
CANASA	Mesalamine	1000mg	Generic	\$\$\$\$	
Delzicol	Mesalamine	400mg	Brand	\$\$\$\$	CPA
LIALDA	Mesalamine	1.2g	Brand	\$\$\$\$	CPA
PENTASA	Mesalamine	250mg, 500mg	Brand	\$\$\$\$	CPA

\$ ----- \$1 to \$10  
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**GCHP List of Covered Drugs**  
**Generic Name**

GLUCOPHAGE	Metformin HCl	500mg, 750mg, 850mg, 1000mg	Generic	\$\$\$	
RIOMET	Metformin HCl	500mg/5ml	Brand	\$\$\$\$	
GLUCOPHAGE XR	Metformin HCl SR	500mg, 750mg	Generic	\$\$\$	
GLUMETZA	Metformin HCl Tab SR 24HR Modified Rel	500mg, 1000mg	Generic	\$\$\$\$	CPA
FORTAMET	Metformin HCl Tab SR 24HR Osmotic	500mg, 1000mg	Generic	\$\$\$\$	CPA
METHADONE	Methadone HCl	5mg, 10mg	Generic	\$\$\$	QL= 124 tabs/31 days (5mg, 10mg) CPA required if taken in conjunction with alprazolam
METHADOSE	Methadone Oral Concentrate	10mg/ml	Generic	\$\$\$	QL= 250ml/31 days CPA required if taken in conjunction with alprazolam
DOLOPHINE	Methadone Oral Solution	5mg/5ml, 10mg/5ml	Generic	\$\$\$	QL= 500ml/31 days CPA required if taken in conjunction with alprazolam
DESOXYN	Methamphetamine HCl	5mg	Generic	\$\$\$\$	
TAPAZOLE	Methimazole	5mg, 10mg	Generic	\$\$	
RASUVO	Methotrexate Soln PF Auto-Injector	7.5mg,10mg,12.5mg,15mg,17.5mg,20mg ,22.5mg,25mg,27.5mg,30mg	Brand	\$\$\$\$	CPA
MEXATE	Methotrexate Sodium	1g, 1g/40ml, 25mg/ml, 50mg/2ml, 250mg/10ml	Generic	\$\$\$\$\$\$	
RHEUMATREX	Methotrexate Sodium	2.5mg	Generic	\$\$\$\$	
Otrexup	Methotrexate Soln PF Auto-Injector	10mg;15mg;20mg;25mg	Brand	\$\$\$\$\$	CPA
ALDOMET	Methyldopa	250mg, 500mg	Generic	\$\$\$\$	
METHERGINE	Methylergonovine Maleate	0.2 mg	Generic	\$\$\$\$	
CONCERTA	Methylphenidate HCl	18mg, 27mg, 36mg, 54mg	Brand	\$\$\$\$\$	Age > 23
RITALIN	Methylphenidate HCl	5mg, 10mg, 18mg, 20mg, 27mg, 36mg, 54mg	Generic	\$\$\$\$	Age > 23
RITALIN LA	Methylphenidate HCl	10mg, 20mg, 30mg, 40mg	Generic	\$\$\$\$	Age > 23
METADATE CD	Methylphenidate HCl	10mg, 20mg, 30mg, 40mg, 50mg, 60mg	Brand	\$\$\$\$\$	Age > 23
MEDROL	Methylprednisolone	2mg, 4mg, 8mg, 16mg, 32mg	Generic	\$\$\$	
DEPO-MEDROL	Methylprednisolone Acetate	40mg/ml, 80mg/ml	Generic	\$\$\$\$	
REGLAN	Metoclopramide HCl	5mg, 10mg	Generic	\$\$	
ZAROXOLYN	Metolazone	2.5mg, 5mg, 10mg	Generic	\$\$\$\$	
TOPROL XL	Metoprolol Succinate	25mg, 50mg, 100mg, 200mg	Generic	\$\$\$\$	
LOPRESSOR	Metoprolol Tartrate	25mg, 50mg, 100mg	Generic	\$\$\$	
MYALEPT	Metreleptin for subcutaneous inj	11.3 mg	Brand	\$\$\$\$\$\$	Specialty CPA
METROLOTION	Metronidazole	0.75%	Generic	\$\$\$	
METROGEL	Metronidazole Gel	0.75%	Generic	\$\$\$	
FLAGYL	Metronidazole Oral, IV		Generic	\$\$ to \$\$\$\$	
VANDAZOLE	Metronidazole Vaginal Gel	0.75%	Generic	\$\$\$\$	
HELIDAC	Metronidaz-Tetracyc-Bis		Brand	\$\$\$\$	
MYCAMINE	Micafungin IV	50mg, 100mg	Brand	\$\$\$	CPA
PROAMATINE	Midodrine HCl	2.5mg, 5mg, 10mg	Generic	\$\$\$	
SAVELLA	Milnacipran HCl	12.5mg, 25mg, 50mg, 100mg	Generic	\$\$\$\$	Step: Gabepentin OR TCA
IMPAVIDO	Miltefosine	50mg	Brand		CPA
KYNAMRO	Mipomersen Sodium Inj	200mg/mL	Brand	\$\$\$\$\$\$	Specialty CPA
MYRBETRIQ	MIRABEGRON	25mg, 50mg	Brand	\$\$\$\$	STEP: Oxybutynin
MIRTAZAPINE	Mirtazapine	7.5mg, 15mg, 30mg, 45mg	Generic	\$\$\$	
CYTOTEC	Misoprostol	100mcg, 200mcg	Generic	\$\$\$\$	QL= 372 tabs/365 days (200mcg), 372 tabs/365 days (100mcg)
MITOMYCIN	Mitomycin	5mg, 20mg, 40mg	Generic	\$\$\$\$\$\$	
PROVIGIL	Modafinil	100mg, 200mg, 300mg	Brand	\$\$\$\$\$	Age > 23
ASMANEX	Mometasone Furoate	110mcg, 220mcg	Brand	\$\$\$\$	Step: Flovent HFA
ELOCON	Mometasone Furoate	0.1%	Generic	\$\$\$	
NASONEX	Mometasone Furoate	50mcg/ACT	Brand	\$\$\$\$	CPA Age < 4
SINGULAIR	Montelukast Sodium	4mg, 5mg, 10mg	Generic	\$\$\$\$	Step: Fail one: flunisolide, fluticasone

\$ ----- \$1 to \$10  
 \$\$ ----- \$11 to \$50  
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**GCHP List of Covered Drugs  
Generic Name**

Drug Name	Generic Name	Strength/Dosage	Brand	Cost	Quantity/Limit
MORPHINE SUL	Morphine Sulfate	15mg, 30mg, 20mg/ml, 10mg/5ml	Brand	\$\$	QL= 240ml/31 days (20mg/ml) QL= 1000ml/31 days (10mg/5ml) CPA required if taken in conjunction with alprazolam
MS CONTIN	Morphine Sulfate	15mg, 30mg, 60mg, 10mg, 200mg	Generic	\$\$\$	QL= 93 tabs/31 days CPA required if taken in conjunction with alprazolam
VIGAMOX	Moxifloxacin HCL	0.50%	Brand	\$\$\$	
AVELOX	Moxifloxacin Oral		Generic	\$\$\$	CPA
BACTROBAN	Mupirocin		Generic	\$\$	
CELLCEPT	Mycophenolate Mofetil	250mg, 500mg, 250mg/ml	Generic	\$\$\$\$\$	Specialty CPA for Age < 21
MYCOPHENOLATE	Mycophenolate Mofetil	250mg, 500mg	Generic	\$\$\$\$\$\$	Specialty CPA for Age < 21
RELAFEN	Nabumetone	500mg, 750mg	Generic	\$\$\$	
NORMAL SALINE	NaCl Inj	0.90%	Generic	\$\$\$	
CORGARD	Nadolol	20mg, 40mg, 80mg	Generic	\$\$	
SYNAREL	Nafarelin Acetate	2mg/ml	Brand	\$\$\$\$\$\$	Specialty CPA
NAFCILLIN	Nafcillin IV		Generic	\$\$\$\$	CPA
CONTRAVE	Naltrexone HCl-Bupropion	8-90mg 12HR Tab	Brand	\$\$\$\$	CPA
NAPROSYN	Naproxen	220mg, 250mg, 275mg, 375mg, 500mg, 550mg	Generic	\$\$\$	
ALEVE	Naproxen Sodium	220mg	OTC	\$	QL= 106 tabs/31 days
TYSABRI	Natalizumab	300mg/15ml	Brand	\$\$\$\$\$\$	Specialty CPA
STARLIX	Nateglinide	60mg, 120mg	Generic	\$\$\$\$	
SERZONE	Nefazodone HCl	50mg, 100mg, 150mg, 200mg, 250mg	Generic	\$\$\$	
NEOMYCIN	Neomycin Sulfate -Oral	500mg	Generic	\$\$\$\$	QL= 2 tabs/31 days
NEOSPORIN	Neomycin/Polymyxin Gramicidin		Generic	\$\$	
CORTISPORIN	Neomycin-Colistin-HC-Thonzonium		Generic	\$\$	
MAXITROL	Neomycin-Polymyxin-Dexamethasone	0.1%	Generic	\$\$	
CORTISPORIN OPTH	Neomycin-Polymyxin-HC	1.0%	Generic	\$\$	
NIASPAN	Niacin	500mg, 750mg, 1000mg	Brand	\$\$\$\$	
CARDENE	Nicardipine HCl	20mg, 30mg	Generic	\$\$	
NICORETTE	Nicotine Gum/Lozenge	2mg, 4mg	OTC	\$\$\$\$	QL= 180 days/year
Nicotrol Inh	Nicotine Inhaler System	10mg (4mg delivered)	Brand	\$\$	Step: Nicotine Patch TD (62100050085) OR Nicotine Gum (621000100028) OR Nicotine Lozenge (621000100047); QL=180 days/365 days
Nicotrol NS	Nicotine Nasal Spray	10mg/mL	Brand	\$\$	Step: Nicotine Patch TD (62100050085) OR Nicotine Gum (621000100028) OR Nicotine Lozenge (621000100047); QL=180 days/365 days
NICODERM CQ	Nicotine TD Patch	7mg, 12mg, 21mg	OTC	\$\$	QL= 180 days/year
PROCARDIA	Nifedipine	10mg, 20mg	Generic	\$\$	
PROCARDIA XL	Nifedipine SR	30mg, 60mg, 90mg	Generic	\$\$\$\$	
TASIGNA	Nilotinib	150mg, 200mg	Brand	\$\$\$\$\$\$	Specialty QL= 2 tabs/31 days
OFEV	Nintedanib Esylate	100mg;150mg	Brand	\$\$\$\$\$\$	CPA
ALINIA	Nitazoxanide Oral	500mg	Brand	\$\$\$\$	
MACRODANTIN	Nitrofurantoin Macrorcrystal Oral		Brand	\$\$	
NITRO-BID	Nitroglycerin	2%	Generic	\$\$\$	
NITRO-DUR	Nitroglycerin	2.5mg, 6.5mg, 0.1mg/HR, 0.2mg/HR, 0.4mg/HR, 0.6mg/HR	Generic	\$\$\$\$	Step: nitroglycerin 2% ointment
NITROSTAT	Nitroglycerin	0.3mg, 0.4mg, 0.6mg	Brand	\$\$\$\$	
ORTHO EVRA	Norelgestromin-Ethinyl Estradiol TD		Generic	\$\$\$	QL= 3 patches/28 days
NOR-QD	Norethindrone	0.35mg	Generic	\$\$\$	
OVCON 35	Norethindrone & Ethinyl Estradiol Tab	0.4 MG	Generic	\$\$\$	

\$ ----- \$1 to \$10  
 \$\$ ----- \$11 to \$50  
 \$\$\$ ----- \$51 to \$100  
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 \$\$\$\$\$\$ ----- \$1,001 to \$5,000  
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**GCHP List of Covered Drugs**  
**Generic Name**

NECON	Norethindrone & Ethinyl Estradiol Tab 0.5 MG-35 MCG, 1 MG-35 MCG, 0.5-35/0.75-35/1-35 MG-MCG		Generic	\$\$	
NORTREL	Norethindrone & Ethinyl Estradiol Tab 0.5 MG-35 MCG, 1 MG-35 MCG, 0.5-35/0.75-35/1-35 MG-MCG		Generic	\$\$	
MODICON	Norethindrone & Ethinyl Estradiol Tab 0.5 MG-35MCG		Generic	\$\$\$	
ORTHO-NOVUM	Norethindrone & Ethinyl Estradiol Tab 1 MG-35 MCG, 1 MG-50MCG, 0.5-35/0.75-35/1-35 MG-M		Generic	\$\$\$	
NORINYL	Norethindrone & Mestranol Tab 1 MG-35MCG, 1 MG-50 MCG		Generic	\$\$	
MICROGESTIN	Norethindrone Ace & Ethinyl Estradiol Tab 1 MG-20 MCG, 1.5 MG-30 MCG		Generic	\$\$	
LOESTRIN FE	Norethindrone Ace & Ethinyl Estradiol-FE Tab 1 MG-20 MCG, 1.5 MG-30 MCG		Generic	\$\$	
MICROGESTIN FE	Norethindrone Ace & Ethinyl Estradiol-FE Tab 1 MG-20 MCG, 1.5 MG-30 MCG		Generic	\$\$	
JUNEL FE	Norethindrone Ace & Ethinyl Estradiol-FE Tab 1 MG-20MCG, 1.5 MG-30 MCG		Generic	\$\$	
AYGESTIN	Norethindrone Acetate	5mg	Generic	\$\$\$\$	
FEMHRT	Norethindrone Acetate-Ethinyl Estradiol	0.5mg-2.5mcg, 1mg-5mcg	Generic	\$\$\$\$	
ESTROSTEP FE	Norethindrone Ac-Ethinyl Estrad-Fe Tab 1-20/1-30/1-35 MG-MCG		Generic	\$\$\$	
ARANELLE	Norethindrone-Eth Estradiol Tab 0.5-35/1-35/0.5-35 MG-MCG		Generic	\$\$	
TRI-NORINYL	Norethindrone-Eth Estradiol Tab 0.5-35/1-35/0.5-35 MG-MCG		Generic	\$\$\$	
MONONESSA	Norgestimate & Ethinyl Estradiol Tab 0.25 MG-35 MCG		Generic	\$\$	
ORTHO-CYCLEN	Norgestimate & Ethinyl Estradiol Tab 0.25 MG-35 MCG		Generic	\$\$\$	
PREVIFEM	Norgestimate & Ethinyl Estradiol Tab 0.25 MG-35 MCG		Generic	\$\$	
SPRINTEC 28	Norgestimate & Ethinyl Estradiol Tab 0.25 MG-35 MCG		Generic	\$\$	
ORTHO TRI-CYCLEN LO	Norgestimate-Eth Estrad Tab 0.18-25/0.215-25/0.25-25 MG-MCG		Generic	\$\$	
ORTHO TRI-CYCLEN	Norgestimate-Eth Estrad Tab 0.18-35/0.215-35/0.25-35 MG-MCG		Generic	\$\$	
TRINESSA	Norgestimate-Eth Estrad Tab 0.18-35/0.215-35/0.25-35 MG-MCG		Generic	\$\$	
TRI-PREVIFEM	Norgestimate-Eth Estrad Tab 0.18-35/0.215-35/0.25-35 MG-MCG		Generic	\$\$	
TRI-SPRINTEC	Norgestimate-Eth Estrad Tab 0.18-35/0.215-35/0.25-35 MG-MCG		Generic	\$\$	
CRYSSELLE-28	Norgestrel & Ethinyl Estradiol Tab 0.3 MG-30 MCG		Generic	\$\$	
LO/OVRAL	Norgestrel & Ethinyl Estradiol Tab 0.3 MG-30 MCG		Generic	\$\$	
LOW-OGESTREL	Norgestrel & Ethinyl Estradiol Tab 0.3 MG-30 MCG		Generic	\$\$	
PAMELOR	Nortriptyline HCl	10mg, 25mg, 50mg, 75mg	Generic	\$\$\$	
NYSTATIN	Nystatin Swish and Swallow		Generic	\$\$	
NYSTOP	Nystatin Topical Powder		Generic	\$\$	
OCTREOTIDE	Octreotide Acetate	100mcg, 200mcg, 500mcg, 1000mcg, 1mg/ml, 50mcg/ml	Generic	\$\$\$\$\$\$	Specialty CPA
SANDOSTATIN	Octreotide Acetate	10mg, 20mg, 30mg, 50mcg/ml, 100mcg, 200mcg, 500mcg, 1000mcg	Brand	\$\$\$\$\$\$	Specialty

\$ ----- \$1 to \$10  
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**GCHP List of Covered Drugs**  
**Generic Name**

OCUFLOX	Ofloxacin	0.3%	Generic	\$\$\$	
LYNPARZA	Olaparib	50mg	Brand	\$\$\$\$\$\$	CPA
BENICAR	Olmesartan Medoxomil	5mg, 20mg, 40mg	Generic	\$\$\$	Step: losartan potassium
BENICAR HCT	Olmesartan Medoxomil -HCTZ	20-12.5mg, 40-12.5mg, 40-25mg	Generic	\$\$\$	Step: losartan potassium HCT
STRIVERDI AER RESPIMAT	Olodaterol HCl	2.5mg/act Inhaled Aer Sol	Brand	\$\$\$\$	
PATANASE	Olopatadine HCl	0.6%	Generic	\$\$\$\$	Step: fluticasone OR flunisolide OR one oral histamine OR azelastine
PATANOL	Olopatadine HCl	0.1%	Generic	\$\$\$\$	
DIPENTUM	Olsalazine Sodium	250mg	Brand	\$\$\$\$	CPA
					Specialty CPA
XOLAIR	Omalizumab	150mg	Brand	\$\$\$\$\$\$	Age > 12 Step: Inhaled corticosteroid AND long acting beta agonist (Foradil OR Serevent) Specialty
TECHNIVIE	Ombitasvir-Paritaprevir-Ritonavir	12.5-75-50MG	Brand	\$\$\$\$\$\$	CPA
VIEKIRA PAK	Ombitasvir-Paritaprevir-Ritonavir & Dasabuvir	12.5-75-50 & 250mg	Brand	\$\$\$\$\$\$	Specialty CPA
LOVAZA	Omega-3-acid Ethyl Esters	1gm	Generic	\$\$\$	CPA
PRILOSEC	Omeprazole	10mg, 20mg, 40mg	Generic	\$\$\$	QL= 31 caps/31 days
PRILOSEC OTC	Omeprazole	20mg	OTC	\$\$	QL= 62 tabs/31 days
					Specialty
BOTOX	OnabotulinumtoxinA	50u, 100u, 200u	Brand	\$\$\$\$\$\$	CPA
ZOFRAN	Ondansetron HCl	4mg, 8mg, 24mg	Generic	\$\$\$	QL= 31 tabs/31 days (4mg & 8mg) QL= 3 tab/31 days (24mg)
					CPA
ZOFRAN	Ondansetron HCl and Dextrose	32mg/50ml	Brand	\$\$\$	QL= 3 units/31 days
					Specialty, Available at Retail
NEUMEGA	Oprelvekin	5mg	Brand	\$\$\$\$	Age >18 QL= 21 vials/28 days
PEDIALYTE SOL	Oral Electrolyte Solution	N/A	Generic	\$\$	
			Generic:		
			Tabs		QL= 10 caps/31 days (45mg, 75mg)
			Brand:		QL= 20 caps/31 days (30mg)
TAMIFLU	Oseltamir Oral	30mg, 45mg, 75mg, 12mg/ml	Susp	\$\$\$\$	QL=120ml/31 days (oral susp)
TAGRISSO	Osimeritimb Mesylate	40mg, 80mg	Brand	\$\$\$\$\$\$	Specialty CPA
ELOXATIN	Oxaliplatin	50mg, 100mg, 200mg	Brand	\$\$\$\$\$\$	Specialty
DAYPRO	Oxaprozin	600mg	Generic	\$\$\$\$	
TRILEPTAL	Oxcarbazepine Suspension	300mg/5ml	Generic	\$\$\$	
OXYTROL	Oxybutynin	3.9mg/24HR	Brand	\$\$\$	Step: Oxybuttnin
DITROPAN XL	Oxybutynin Chloride	5mg, 10mg	Generic	\$\$	
GELNIQUE	Oxybutynin Chloride	10%	Brand	\$\$\$	
					QL= 186 tabs/31 days
ROXICODONE	Oxycodone HCl	5mg, 10mg, 15mg, 20mg, 30mg	Generic	\$\$\$	CPA required if taken in conjunction with alprazolam
					QL= 124 tabs/31 days
PERCOCET	Oxycodone w/ Acetaminophen		Generic	\$\$\$	CPA required if taken in conjunction with alprazolam
					Step: Failure of (2) two of the following: morphine, oxycodone, OR hydromorphone
					QL= 124 tabs/31 days
					CPA required if taken in conjunction with alprazolam
OPANA	Oxymorphone HCl	5mg, 10mg	Generic	\$\$\$\$	
					Step: Oxycontin
					QL= 62 tablets/31 days
OPANA ER	Oxymorphone HCl	5mg, 7.5mg, 10mg, 15mg, 20mg, 30mg, 40mg	Brand	\$\$\$\$	CPA required if taken in conjunction with alprazolam
ONXOL	Paclitaxel	30mg/5ml, 100mg/16.7ml, 150mg/25ml, 300mg/50ml	Generic	\$\$\$\$	
					100mg, 6mg/ml, 30mg/5ml,
PACLITAXEL	Paclitaxel	150mg/25ml, 300mg/50ml	Generic	\$\$\$\$\$\$	Specialty
ABRAXANE	Paclitaxel Protein-Bound Particles	100mg	Brand	\$\$\$\$\$\$	Specialty
IBRANCE	Palbociclib	12.5mg; 75mg; 100mg	Brand	\$\$\$\$\$\$	Specialty CPA
					Specialty
ALOXI	Palonosetron HCl	0.25mg	Generic	\$\$\$\$\$\$	QL= 1 vial/31 days

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**GCHP List of Covered Drugs**  
**Generic Name**

AREZIA	Pamidronate Disodium	30mg, 90mg	Brand	\$\$\$\$\$	CPA
PAMIDRONATE	Pamidronate Disodium	30mg, 90mg, 30mg/10ml, 90mg/10ml	Generic	\$\$\$\$\$	Specialty
FARYDAK	Panobinostat Lactate Cap	10mg, 15mg, 20mg,	Brand	\$\$\$\$\$	Specialty CPA
PROTONIX	Pantoprazole	20mg, 40mg	Generic	\$\$\$	QL= 31 caps/packets/31 days
NATPARA	Parathyroid Hormone (recombinant)	25mcg, 50mcg, 75mcg, 100mcg	Brand	\$\$\$\$\$	CPA
ZEMPLAR	Paricalcitol	1mcg, 2mcg, 4mcg, 2mcg/ml, 5mcg/ml	Generic	\$\$\$\$\$	Specialty CPA Step: Vitamin D sterols - doxercalciferol OR calcitriol
PAXIL	Paroxetine HCl	10mg, 12.5mg, 20mg, 30mg, 40mg	Generic	\$\$	
Brisdelle	Paroxetine Mesylate	7.5mg	Brand	\$\$\$\$	CPA
VOTRIENT	Pazopanib HCl	200mg	Brand	\$\$\$\$\$	Specialty
POLY-VITA DROPS	Pediatric Multiple Vitamin w/ C Soln	35 MG/ML	Generic	\$\$	
POLY_VIT DROPS /FL	Pediatric Multiple Vitamins w/ Fluoride Soln	0.25 MG/ML	Generic	\$\$	
POLY-VI-SOL DROPS /IRON	Pediatric Multiple Vitamins w/ Iron Drops	10 MG/ML	Generic	\$\$	
GOLYTELY	PEG 3350-KCl-Na Bicarb-NaCl-Na Sulfate		Generic	\$\$\$\$	
NULYTELY	PEG 3350-KCl-Sod Bicarb-NaCl		Generic	\$\$\$\$	
MACUGEN	Pegaptanib Sodium		Brand	\$\$\$\$\$	Specialty CPA
NEULASTA	Pegfilgrastim	6mg/0.6ml	Brand	\$\$\$\$\$	Specialty, Available at Retail QL= 1 syringes/14 days
PEGASYS	Peginterferon alfa-2a	180mcg/0.5ml, 180mcg/ml	Brand	\$\$\$\$\$	Specialty CPA
PEG-INTRON	Peginterferon alfa-2b	50mcg, 80mcg, 120mcg, 150mcg	Brand	\$\$\$\$\$	Specialty CPA
PLEGRIDY	Peginterferon Beta-1a	125mcg	Brand	\$\$\$\$\$	CPA
SOMAVERT	Pegvisomant	10mg, 15mg, 20mg	Brand	\$\$\$\$\$	Specialty CPA
ALIMTA	Pemetrexed Disodium	100mg, 500mg	Brand	\$\$\$\$\$	Specialty
PEN NEEDLES	Pen Needles		OTC	\$	QL= 200/31 days
PENICILLN GK	Penicillin G IV		Generic	\$\$\$	CPA
PENICILLN VK	Penicillin VK-oral		Generic	\$\$\$	
TRENTAL	Pentoxifylline	400mg	Generic	\$\$\$\$	
ELIMITE	Permethrin	5%	Generic	\$\$\$\$	
NIX	Permethrin Lotion	1%	OTC	\$\$	QL= 240ml/31 days
PYRIDIUM	Phenazopyridine HCl	100mg, 200mg	Generic	\$\$	
PHENOBARB	Phenobarbital	15mg, 30mg, 32.4mg, 60mg, 100mg	Generic	\$\$	
PHENOBARB	Phenobarbital	97.2mg	Brand	\$\$	
AK-DILATE	Phenylephrine HCL	10% Opth Sol	Generic	\$\$	
SUDAFED PE	Phenylephrine HCL	10MG	Generic	\$\$	
DILANTIN	Phenytoin Sodium	100mg	Generic	\$\$	
PHENYTEK	Phenytoin Sodium	200mg, 300mg	Generic	\$\$	
MEPHYTON	Phytonadione	5MG	Brand	\$\$	CPA
VITAMIN K	Phytonadione	100mcg	OTC	\$\$	QL= 62 tabs/31 days
AQUA-MEPHYTON	Phytonadione Inj Sol	1mg/0.5mL	Generic	\$\$\$	
PILOCARPINE	Pilocarpine HCl	1%, 2%, 3%, 4%, 6%	Generic	\$\$	
SALAGEN	Pilocarpine HCl	5mg, 7.5mg	Generic	\$\$\$	
ELIDEL	Pimecrolimus	1%	Brand	\$\$\$\$	CPA
ACTOS	Pioglitazone HCl	15mg, 30mg, 45mg	Generic	\$\$\$\$	Step: Metformin
DUETACT	Pioglitazone HCl-Glimepiride	30-2mg, 30-4mg	Generic	\$\$\$\$	Step: Metformin & Insulin
ACTOPLUS MET	Pioglitazone HCl-Metformin HCl	15/850mg, 30/1000mg	Generic	\$\$\$\$	Step: Metformin
ZOSYN	Piperacillin/Tazobactam IV		Generic	\$\$\$\$\$	CPA
ESBRIET	Pirfenidone Cap	267mg	Brand	\$\$\$\$\$	Specialty CPA
FELDENE	Piroxicam	10mg, 20mg	Generic	\$\$\$\$	
PREVNAR 13 INJ	Pneumococcal 13-Valent Conjugate Vaccine	N/A	Brand	\$\$\$\$	

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**GCHP List of Covered Drugs**  
**Generic Name**

PREVNAR 23 INJ	Pneumococcal Vaccine Polyvalent Inj	N/A	Brand	\$\$\$\$	
GLYCOLAX	Polyethylene Glycol		OTC	\$\$	
POLYTRIM	Polymyxin B-Trimethoprim		Generic	\$	
POMALYST	Pomalidomide	1mg; 2mg; 3mg; 4mg	Brand	\$\$\$\$\$\$\$	Specialty CPA
NOXAFIL	Posaconazole Oral	40mg/ml	Brand	\$\$\$\$\$	Step: Fluconazole
NOXAFIL	Posaconazole Relayed Release Tab	100mg	Brand	\$\$\$\$\$	Step: Fluconazole
MICRO-K	Potassium Chloride	8mEq, 10mEq, 20mEq	Generic	\$\$	Step: carbidopa/levodopa, clonazepam, OR ropinirole
MIRAPEX	Pramipexole Dihydrochloride	0.125mg, 0.25mg, 0.5mg, 0.75mg, 1mg	Generic	\$\$\$	
MIRAPEX ER	Pramipexole Dihydrochloride SR	0.375mg, 0.75mg, 1.5mg, 3mg, 4.5mg	Generic	\$\$\$\$	Step: Pramipexole Dihydrochloride
					CPA One of the following: a. Type 1 diabetic patients with a previous history of insulin and concurrently using insulin therapy OR b. Type 2 diabetic patients with a previous history of insulin therapy and concurrently using insulin therapy with or without sulfonylurea and/or metformin QL=7 vials/31 days
SYMLIN/SYMLINPEN	Pramlintide Acetate	600mcg, 1000mcg	Brand	\$\$\$\$	QL=8 pens/31 days
EFFIENT	Prasugrel HCl	5mg, 10mg	Brand	\$\$\$\$	STEP: Clopidogrel bisulfate
PRAVACHOL	Pravastatin Sodium	10mg, 20mg, 40mg, 80mg	Generic	\$\$\$\$	
BILTRICIDE	Praziquantal Oral	600mg	Brand	\$\$\$	
MINIPRESS	Prazosin HCl	1mg, 2mg, 5mg	Generic	\$\$\$	
OMNIPRED	Prednisolone Acetate	1%	Generic	\$\$\$\$	
PRED FORTE	Prednisolone Acetate	1%	Generic	\$\$	
VERIPRED 20	Prednisolone Sod Phosphate	20mg/5ml	Brand	\$\$\$\$	
STERAPRED	Prednisone	1mg, 2.5mg, 5mg, 10mg, 20mg, 50mg, 25mg, 50mg, 75mg, 100mg, 150mg, 200mg, 225mg, 300mg	Generic	\$\$\$\$	
LYRICA	Pregabalin		Brand	\$\$\$\$	Step: gabapentin
PRENATAL	Prenatal Rx		Generic	\$\$	Step: Prenatal OTC
NATALCARE PLUS	Prenatal Vit w/ Fe Fumarate-FA		Generic	\$\$	Step: Prenatal OTC
PRENATE ELITE	Prenatal Vit w/ Fe Fum-Methylfolate-FA		Brand	\$\$\$\$	Step: Prenatal OTC
PRENATAL VITAMINS	Prenatal Vitamins		OTC	\$\$	QL= 100 tabs/31 days
PRIMAQUINE	Primaquine Oral	26.3mg	Generic	\$\$\$\$	
MYSOLINE	Primidone	50mg, 250mg	Generic	\$\$\$	
BENEMID	Probenecid	500mg	Generic	\$\$\$\$	
MATULANE	Procarbazine HCl	50mg	Generic	\$\$\$\$\$\$\$	
COMPAZINE	Prochlorperazine Maleate	5mg, 10mg	Generic	\$\$	
PHENERGAN	Promethazine HCl	12.5mg, 25mg, 50mg	Generic	\$\$	CPA Age < 4
PHEREGAN	Promethazine HCl	12.5mg, 25mg, 50mg	Generic	\$\$	
PROMETHAZINE	Promethazine HCl	6.25mg/5ml	Generic	\$	
PHENERGAN/CODEINE	Promethazine w/ Codeine	6.25-10mg	Generic	\$\$	CPA Age < 4 CPA
PHENERGAN DM	Promethazine-DM		Generic	\$\$	Age < 4
RYTHMOL	Propafenone HCl	150mg, 225mg, 325mg, 425mg	Generic	\$\$\$\$	
ALCAINE	Proparacaine HCl	0.5% Opth Sol	Generic	\$\$	
INDERAL	Propranolol HCl	20mg, 60mg, 80mg, 120mg, 160mg	Generic	\$\$\$	
HEMANGEOL	Propranolol HCL Oral Soln	4.28mg/mL	Brand	\$\$\$\$	CPA
PROPLYTHIOURACIL	Propylthiouracil	50mg, 100mg, 200mg, 400mg	Generic	\$\$	
ARALAST	Proteinase Inhibitor	400mg, 500mg, 800mg, 1000mg	Brand	\$\$\$\$\$\$\$	Specialty CPA
SUDAFED	Pseudoephedrine	30MG	Generic	\$\$	
PYRAZINAMIDE	Pyrazinamide Oral	500mg	Generic	\$\$\$	
MESTINON	Pyridostigmine Bromide	60mg, 60mg/5ml	Brand	\$\$\$\$	

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## GCHP List of Covered Drugs

### Generic Name

PYRIDOXINE	Pyridoxine HCl	25mg, 50mg, 100mg, 200mg, 250mg, 500mg	OTC	\$\$	QL= 62 tabs/31 days
ACCUPRIL	Quinapril HCl	5mg, 10mg, 20mg, 40mg	Generic	\$\$\$	
RABAVERT/IMOVAX	Rabies Vaccine	Unit of dose	Brand	\$\$\$\$	Approved for Age > 18
EVISTA	Raloxifene HCl	60mg	Generic	\$\$\$\$	Step: Alendroante Step: Failure of Zolpidem QL= 31 tabs/31 days
ROZEREM	Ramelteon	8mg	Brand	\$\$\$\$	
ALTACE	Ramipril	1.25mg, 2.5mg, 5mg, 10mg	Generic	\$\$\$	
LUCENTIS	Ranibizumab		Brand	\$\$\$\$\$\$	Specialty CPA
ZANTAC	Ranitidine HCl	75mg, 150mg	OTC	\$\$	QL= 67 tabs/31 days
ZANTAC	Ranitidine HCl	300mg, 75mg/5ml	Generic	\$\$\$	QL= 310ml/31 days (syrup)
RANEXA	Ranolazine	500mg, 1000mg	Brand	\$\$\$\$	CPA
AZILECT	Rasagiline Mesylate	0.5mg, 1mg	Generic	\$\$\$	Step: Selegiline
STIVARGA	Regorafenib	40 mg	Brand	\$\$\$\$\$\$	Specialty CPA
HYPERRHO	Rho D Immune Globulin	50mcg, 300mcg	Brand	\$\$\$\$\$\$	Specialty CPA
MICRHOGAM PL	Rho D Immune Globulin	50mcg	Brand	\$\$\$\$\$\$	
RHOGAM PLUS	Rho D Immune Globulin	300mcg	Brand	\$\$\$\$\$\$	Specialty
RHOPHYLAC	Rho D Immune Globulin	1500u/2ml	Brand	\$\$\$\$\$\$	Specialty CPA
WINRHO SDF	Rho D Immune Globulin	600u, 1500u, 2500u, 5000u, 15000u	Brand	\$\$\$\$\$\$	Specialty CPA
COPEGUS	Ribavirin	200mg	Brand	\$\$\$\$\$\$	Specialty CPA
REBETOL	Ribavirin	200mg, 40mg/ml	Generic	\$\$\$\$\$\$	Specialty CPA
RIBASPHERE	Ribavirin	200mg, 400mg, 600mg	Brand	\$\$\$\$\$\$	Specialty CPA
RIBAPAK	Ribavirin Oral	400mg, 600mg	Generic	\$\$\$\$	Specialty CPA
RIBAVIRIN	Ribavirin Oral	200mg, 400mg, 600mg	Generic	\$\$\$\$	CPA
RIFADIN	Rifampin Oral	150mg, 300mg	Generic	\$\$\$	
ARCALYST	Rilonacept	220mg	Brand	\$\$\$\$\$\$	Specialty CPA
RILUTEK	Riluzole	50mg	Generic	\$\$\$\$	Specialty CPA
ADEMPAS	Riociguat	0.5mg; 1mg; 2.5mg	Brand	\$\$\$\$	
ACTIONEL	Risedronate Sodium	5mg, 30mg, 35mg, 75mg, 150mg	Generic	\$\$\$	
RITUXAN	Rituximab	100mg, 500mg	Brand	\$\$\$\$\$\$	Specialty
XARELTO	Rivaroxaban	10MG, 15MG, 20MG, 15-20MG Starter Kit	Brand	\$\$\$\$	Step: Warfarin
EXELON	Rivastigmine Tartrate	1.5mg, 3mg, 4.5mg, 6mg	Generic	\$\$\$\$	
EXELON PATCH	Rivastigmine TD Patch	4.6mg/24HR, 9.5mg/24HR	Generic	\$\$\$\$	
MAXALT, MAXALT-MLT	Rizatriptan Benzoate	5mg, 10mg	Generic	\$\$\$	QL= 9 tabs/31 days
DALIRESP	Roflumilast	500mcg	Brand	\$\$\$\$	Step: LABA (Foradil OR Servevant), AND Anticholinergics (Atrovent Inhaled OR Spiriva) AND Inhaled Corticosteroids
VARUBI	Rolapitant HCL	90mg	Brand	\$\$\$\$	CPA
NPLATE	Romiplostim	250mcg, 500mcg	Generic	\$\$\$\$\$\$	
REQUIP	Ropinirole Hydrochloride	0.25mg, 0.5mg, 1mg, 2mg, 3mg, 4mg, 5mg	Generic	\$\$	
REQUIP XL	Ropinirole Hydrochloride SR	2mg, 4mg, 6mg, 8mg, 12mg	Brand	\$\$\$\$	Step: Ropinirole Hydrochloride
CRESTOR	Rosuvastatin Calcium	5mg, 10mg, 20mg, 40mg	Generic	\$\$\$\$	Step: 90-day Trial of the following: Atorvastatin
BANZEL	Rufinamide	200mg, 400mg	Generic	\$\$\$\$	CPA
ENTRESTO	Sacubitril-Valsartan	24-26MG, 97-103MG, 49-51MG	Brand	\$\$\$\$	CPA
SEREVENT DISKUS	Salmeterol Xinafoate	50mcg	Brand	\$\$\$\$	Step: Striverdi
DISALCID	Salsalate	500mg, 750mg	Generic	\$\$	
KUVAN	Sapropterin dihydrochloride	100mg	Brand	\$\$\$\$\$\$	Specialty CPA
ONGLYZA	Saxagliptin HCl	2.5mg, 5mg	Brand	\$\$\$\$	Step: Metformin
COSENTYX	Secukinumab Subcutaneous Soln	150mg/mL	Brand	\$\$\$\$\$\$	Specialty CPA
ELDEPRYL	Selegiline HCl	5mg	Generic	\$\$\$	
SELSUN	Selenium Sulfide	2.25%, 2.5%	Generic	\$	

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## GCHP List of Covered Drugs Generic Name

UPTRAVI	Selexipag	200mcg, 400mcg, 800mcg, 1200mcg, 1400mcg, 1600mcg, 200/800mcg	Brand	\$\$\$\$\$\$	Specialty CPA
ZOLOFT	Sertraline HCl	25mg, 50mg, 100mg	Generic	\$\$	
RENAGEL	Sevelamer	400mg, 800mg	Brand	\$\$\$\$\$	
REVELA	Sevelamer Carbonate	800mg, 0.8g, 2.4g	Brand	\$\$\$\$\$	
REVATIO	Sildenafil Citrate	20mg, 10mg/12.5ml	Generic	\$\$\$\$\$	Specialty CPA
RAPAFLO	Sildenafil	4mg, 8mg	Brand	\$\$\$	Step: Tamsulosin OR Doxazosin OR Terazosin
SILVADENE	Silver Sulfadiazine		Generic	\$\$\$	
SIMVASTATIN	Simvastatin	80mg	Generic	\$\$\$	CPA
ZOCOR	Simvastatin	5mg, 10mg, 20mg, 40mg, 80mg	Generic	\$\$\$	CPA (80mg)
RAPAMUNE	Sirolimus	0.5mg, 1mg, 2mg, 1mg/ml	Generic	\$\$\$\$\$	Specialty
JANUVIA	Sitagliptin Phosphate	25mg, 50mg, 100mg	Brand	\$\$\$	Step: Metformin
JANUMET	Sitagliptin-Metformin HCl	50-500mg, 50-1000mg	Brand	\$\$\$\$\$	Step: Metformin
MURO	Sodium Chloride	5% Solution	Generic	\$\$	
SOD CHLORIDE	Sodium Chloride	0.9%	Generic	\$	
HYPER-SAL	Sodium Chloride Inh Sol	3.5%, 7%	Generic	\$\$	
LURIDE	Sodium Fluoride	0.5mg	Generic	\$\$\$	
EUFLEXXA	Sodium Hyaluronate	10mg/ml	Brand	\$\$\$\$\$	Specialty CPA
SUPARTZ	Sodium Hyaluronate Intra-articular	25mg/2.5ml	Brand	\$\$\$\$\$	Specialty CPA
SOVALDI	Sofosbuvir	400mg	Brand	\$\$\$\$\$	Specialty CPA
EPCLUSA	Sofosbuvir-Velpatasvir	400-100mg	Brand	\$\$\$\$\$	CPA Preferred Agent
EPCLUSA	Sofosbuvir-Velpatasvir	400-100 MG	Brand	\$\$\$\$\$	CPA
VESICARE	Solifenacin Succinate	5mg, 10mg	Brand	\$\$\$	Step: Oxybutynin
GENOTROPIN	Somatropin	0.2mg, 0.4mg, 0.6mg, 0.8mg, 1mg, 1.2mg, 1.4mg, 1.6mg, 1.8mg, 2mg, 5mg, 12mg	Brand	\$\$\$\$\$	Specialty CPA
HUMATROPE	Somatropin	5mg, 6mg, 12mg, 24mg	Brand	\$\$\$\$\$	Specialty CPA
NORDITROPIN	Somatropin	5mg/1.5ml, 10mg/1.5ml, 15mg/1.5ml, 30mg/3ml	Brand	\$\$\$\$\$	Specialty CPA
NUTROPIN	Somatropin	5mg, 10mg, 5mg/2ml, 20mg/2ml	Brand	\$\$\$\$\$	Specialty CPA
OMNITROPE	Somatropin	5.8mg, 5mg/1.5ml, 10mg/1.5ml	Brand	\$\$\$\$\$	Specialty CPA
SAIZEN	Somatropin	5mg, 8.8mg	Brand	\$\$\$\$\$	Specialty CPA
SEROSTIM	Somatropin	4mg, 5mg, 6mg, 8.8mg	Brand	\$\$\$\$\$	Specialty CPA
ZOMACTON	Somatropin	5mg, 10mg	Brand	\$\$\$\$\$	Specialty CPA
ZORBTIVE	Somatropin	8.8mg	Brand	\$\$\$\$\$	Specialty CPA
ODOMZO	Sonidegib Phosphate	200MG	Brand	\$\$\$\$\$	CPA
NEXAVAR	Sorafenib Tosylate	200mg	Brand	\$\$\$\$\$	Specialty CPA
BETAPACE	Sotalol HCl	80mg, 120mg, 160mg, 240mg	Generic	\$\$\$\$	
SOTYLIZE	Sotalol HCL Oral Sol	5mg/mL	Brand	\$\$\$\$	CPA
AEROCHAMBER	Spacer/Aerosol-Holding Chambers		Brand	\$\$\$	QL= 1/year
SPERMACIDAL PRODUCTS	Spermicidal Products	Sponge, Foam, Cream, Gel	OTC	\$\$	
ALDACTONE	Spironolactone	25mg, 50mg, 100mg	Generic	\$\$\$	
ALDACTAZIDE	Spironolactone & Hydrochlorothiazide	25/25mg	Generic	\$\$\$	
CHEMET	Succimer	100MG	Brand	\$\$\$\$\$	CPA
CARAFATE	Sucralfate	1g	Generic	\$\$\$\$	
SUCRALFATE	Sucralfate	1gm/10ml	Brand	\$\$	
BLEPH-10	Sulfacetamide Sodium	10%	Generic	\$\$	
KLARON	Sulfacetamide Sodium	10%	Generic	\$\$\$	Step: Clindamycin Phosphatase Topical OR Erythromycin Topical
SULFADIAZINE	Sulfadiazine	500mg, Powder	Brand	SSS	
BACTRIM DS	Sulfamethoxazole/Trimethoprim		Generic	\$\$	
AZULFIDINE	Sulfasalazine	500mg	Generic	\$\$\$	
CLINORIL	Sulindac	150mg, 200mg	Generic	\$\$\$	

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## GCHP List of Covered Drugs Generic Name

SUMATRIPTAN	Sumatriptan Nasal Spray	5mg/ACT, 20mg/ACT	Brand	\$\$\$	Step: Sumatriptan Oral (QL= 9 tabs/31 days)
IMITREX	Sumatriptan Succinate	25mg, 50mg, 100mg	Generic	\$\$\$	QL= 6 devices/31 days QL= 9 tabs/31 days (25mg, 50mg, & 100mg) Step: Sumatriptan Oral (QL= 9tabs/31 days)
IMITREX	Sumatriptan Succinate Injection	4mg/0.5ml, 6mg/0.5ml	Generic	\$\$\$	QL= 1 kit/31 days (2 syringes) QL= 2 vials/31 days
SUTENT	Sunitinib Malate	12.5mg, 25mg, 50mg	Brand	\$\$\$\$\$	Specialty Step: Two of the following agents: Zolpidem,zaleplon,eszopiclone,temazapam
BELSOMRA	Suvorexant	5mg;10mg;15mg;20mg	Brand	\$\$\$\$	
INSULIN SYRINGES	Syringes		OTC	\$	QL= 110/31 days
PROGRAF	Tacrolimus	0.5mg, 1mg, 5mg, 5mg/ml	Generic	\$\$\$\$\$	Specialty
PROTOPIC	Tacrolimus	0.03%, 0.1%	Generic	\$\$\$\$	CPA
TACROLIMUS	Tacrolimus	0.5mg, 1mg, 5mg	Generic	\$\$\$\$\$	Specialty
ADCIRCA	Tadalafil	20mg	Brand	\$\$\$\$\$	Specialty
NOLVADEX	Tamoxifen Citrate	10mg, 20mg	Generic	\$\$\$\$	
FLOMAX	Tamsulosin HCl	0.4mg	Generic	\$\$\$\$	
NUCYNTA	Tapentadol HCL	50mg	Brand	\$\$\$\$	1st fill: QL = 30 tabs (MAX 12/day) 2nd fill: CPA CPA required if taken in conjunction with alprazolam
HETLIOZ	Tasimelteon	20mg	Brand	\$\$\$\$\$\$	CPA
TAZORAC	Tazarotene	0.05%, 0.1%	Brand	\$\$\$\$	CPA
TYZKA	Telbivudine Oral	600mg	Brand	\$\$\$\$\$	Specialty CPA
VIBATIV	Televancin IV	250mg, 750mg	Brand	\$\$\$	Step: Vancomycin
MICARDIS	Telmisartan	20mg, 40mg, 80mg	Generic	\$\$\$	Step: losartan potassium
RESTORIL	Temazepam	7.5mg, 15mg, 30mg	Generic	\$\$	QL= 31 caps/31 days
TEMODAR	Temozolomide	5mg, 20mg, 100mg, 140mg, 180mg, 250mg	Generic	\$\$\$\$\$	Specialty
TORISEL	Temsirolimus	25mg/ml	Brand	\$\$\$\$\$	Specialty Specialty
VIREAD	Tenofovir Disoproxil Fumarate	300mg	Brand	\$\$\$\$\$	CPA
HYTRIN	Terazosin HCl	1mg, 2mg, 5mg, 10mg	Generic	\$\$\$	
LAMISIL	Terbinafine Oral	250mg	Generic	\$\$\$\$	
TERCONAZOLE	Terconazole Vaginal		Generic	\$	
FORTEO	Teriparatide	600mcg/2.4ml	Brand	\$\$\$\$\$	Specialty CPA Failed two oral biphosphosphonates And one injectable biosphosphonate
ANDRODERM	Testosterone	2.5mg/24HR, 5mg/24HR	Brand	\$	CPA
AXIRON	Testosterone	30mg/1.5ml	Brand	\$	CPA
DEPO-TESTOSTERONE	Testosterone Cypionate in Oil	200mg/mL	Generic	\$\$	
TESTOSTERONE GEL	Testosterone TD Gel	50mg/5GM (1%)	Brand	\$\$\$\$	CPA
TENIVAC	Tetanus & Diphtheria Toxoids Adsorbed Vaccine	Unit of dose	Brand	\$\$\$\$	Approved for Age > 18
XENAZINE	Tetrabenazine	12.5mg, 25mg	Generic	\$\$\$\$\$	Specialty CPA
PONTOCAINE	Tetracaine HCL	0.5% Opth Sol	Generic	\$\$	
TETRACYCLINE	Tetracycline Oral		Generic	\$\$	
THALOMID	Thalidomide	50mg, 150mg, 200mg, 100mg,	Brand	\$\$\$\$\$	Specialty
THEO-DUR	Theophylline	100mg, 200mg, 300mg	Generic	\$\$\$	
THEOPHYLLINE ANHYDROUS	Theophylline		Brand	\$\$	
BETALIN-S	Thiamine HCL Inj Sol	100mg/mL	Generic	\$\$\$\$	
ARMOUR THYRO	Thyroid	32.5mg, 65mg, 130mg, 195mg	Generic	\$\$	
THYROGEN	Thyrotropin Alfa	1.1mg	Brand	\$\$\$\$\$	Specialty CPA
BRILINTA	Ticagrelor	60mg, 90mg	Brand	\$\$\$\$	Step: Clopidogrel bisulfate
TYGACIL	Tigecycline IV	50mg	Brand	\$\$\$\$\$	CPA
TIMOPTIC	Timolol Maleate	0.25%, 0.5%	Generic	\$\$\$	
TIMOPTIC-XE	Timolol Maleate	0.25%, 0.5%	Generic	\$\$\$	
INNOHEP	Tinzaparin Sodium	20000u/ml	Brand	\$\$\$\$\$	Age >18 QL= 31 vials/31 days

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## GCHP List of Covered Drugs Generic Name

						CPA
STIOLTO	Tiotropium Br-Olodaterol	2.5-2.5mcg/act	Brand	\$\$\$\$	STEP: ANORO ELLIPT	
SPIRIVA	Tiotropium Bromide Monohydrate	18mcg	Brand	\$\$\$\$	QL= 1 pkg/90 days ( 90 caps)	
SPIRIVA RESPIMAT	Tiotropium Bromide Monohydrate INH Sol	2.5mch/actuation	Brand	\$\$\$\$	QL= 1 pkgs/30 days (30 caps)	
TIZANIDINE	Tizanidine HCl	2mg, 4mg	Generic	\$\$\$	QL= 63 tabs/31 days	
KITABIS	Tobramycin	300mg/5ml	Brand	\$\$\$\$\$	Specialty	
TOBI	Tobramycin	300mg/5ml	Generic	\$\$\$\$\$	Specialty	
TOBREX	Tobramycin IV		Generic	\$\$\$	Step: KITABIS	
TOBRADEX	Tobramycin-Dexamethasone Ophth Susp 0.3-0.1%		Generic	\$\$\$	QL= 14 days	
DETROL, DETROL LA	Tolterodine Tartrate	1mg, 2mg, 4mg	Generic	\$\$\$	Step: Enablex OR Oxyrol OR Vesicare	
TOPAMAX	Topiramate	25mg, 50mg, 100mg, 200mg	Generic	\$\$		
TOPAMAX SPRINKLE	Topiramate Sprinkle	15mg, 25mg	Generic	\$		
HYCAMTIN	Topotecan HCl	4mg	Generic	\$\$\$\$\$	Specialty	
ULTRAM, ER	Tramadol HCl	50mg, 100mg, 200mg, 300mg	Generic	\$\$\$\$	QL= 124 tabs/31 days (50mg) QL= 31 tabs/31 days (ER) CPA required if taken in conjunction with alprazolam	
ULTRACET	Tramadol HCL w/Acetaminophen	37.5/325mg	Generic	\$\$\$	QL= 124 tabs/31 days CPA required if taken in conjunction with alprazolam	
MEKINIST	Trametinib Dimethyl Sulfoxide	2mg, 0.5mg	Brand	\$\$\$\$\$\$\$	Specialty	
HERCEPTIN	Trastuzumab	440mg	Brand	\$\$\$\$\$\$\$	CPA	
DESYREL	Trazodone HCl	50mg, 100mg, 150mg, 300mg	Generic	\$\$	Specialty	
REMODULIN	Treprostinil Sodium	1mg/ml, 2.5mg/ml, 5mg/ml, 10mg/ml	Brand	\$\$\$\$\$\$\$	CPA	
RETIN-A	Tretinoin	0.25%, 0.375%, 0.05%, 0.1%	Generic	\$\$\$\$	Age >34	
KENALOG	Triamcinolone Acetonide	0.025%, 0.1%, 0.5%	Generic	\$		
NASACORT AQ	Triamcinolone Acetonide	55mcg/ACT	Brand	\$\$\$\$	Step: Fail one: flunisolide, fluticasone	
MAXZIDE	Triamterene & Hydrochlorothiazide	37.5-25mg, 50-25mg, 75-50mg	Generic	\$\$\$		
CERUMENEX	Triethanolamine Oleate		Brand	\$\$\$		
VIROPTIC	Trifluridine	1%	Brand	\$\$\$		
LONSURF	Trifluridine-Tipiracil	20-8.19mg, 15-6.14mg	Brand	\$\$\$\$\$\$\$	Specialty CPA	
TIGAN	Trimethobenzamide HCl	300mg/5ml	Generic	\$\$\$		
TRELSTAR	Triptorelin Pamoate	3.75mg, 11.25mg, 22.5mg	Brand	\$\$\$\$\$\$\$	Specialty	
SANCTURA, SANCTURA XR	Trospium Chloride	20mg, 60mg	Generic	\$\$\$	Step: Enablex OR Oxyrol OR Vesicare	
ELLA	Ulipristal Acetate	30mg	Brand	\$	QL= 4 tabs/365 days	
INCRUSE ELLIPTA	Umeclidinium Br Aer Pow	62.5mcg/Inh	Brand	\$\$\$\$		
ANORO ELLIPT	Umeclidinium-Vilanterol Aero Pow	62.5-25 mcg/Inh	Brand	\$\$\$\$	CPA for Age <18 yoa	
VISTOGARD	Uridine Triacetate	10GM	Brand	\$\$\$\$\$	CPA	
XURIDEN	Uridine Triacetate	2 GM	Brand	\$\$\$\$\$	CPA	
URSO, URSO FORTE	Ursodiol	250mg, 500mg	Generic	\$\$\$\$		
VALTREX	Valacyclovir HCl	500mg, 1g	Generic	\$\$\$\$		
VALCYTE	Valganciclovir HCl	450mg	Generic	\$\$\$\$\$	Specialty	
VALCYTE	Valganciclovir HCl	50mg/ml	Brand	\$\$\$\$\$	CPA	
DIOVAN	Valsartan	40mg, 80mg, 160mg, 320mg	Generic	\$\$	Specialty	
DIOVAN HCT	Valsartan-Hydrochlorothiazide	80-12.5mg, 160-12.5mg, 160-25mg, 320-12.5mg, 320-25mg	Generic	\$\$	CPA	
VANCOCIN	Vancomycin Oral, IV		Generic	\$\$\$	CPA	
CHANTIX	Varenicline Tartrate	0.5mg, 1mg	Brand	\$\$\$\$	CPA	
VARIVAX	Varicella Virus Vaccine	Unit of dose	Brand	\$\$\$\$	Approved for Age > 18	
ZOSTAVAX	Varicella-Zoster Virus Vaccine, Live	0.5mL	Brand	\$\$\$\$	Age > 60; QL One per lifetime	
EFFEXOR	Venlafaxine HCl	25mg, 37.5mg, 50mg, 75mg, 100mg	Generic	\$\$		

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**GCHP List of Covered Drugs**  
**Generic Name**

EFFEXOR ER	Venlafaxine HCl SR	37.5mg, 75mg, 150mg, 225mg	Generic	\$\$\$	
ISOPTIN	Verapamil HCl	40mg, 80mg, 180mg, 240mg	Generic	\$\$\$	
VISUDYNE	Verteporfin	15mg	Brand	\$\$\$\$\$\$	Specialty CPA Step: At Least Two fo the following: fluoxetine, paroxetine, citalopram, sertraline, bupropion, escitalopram, OR mirtazapine.
VIIIBRYD	Vilazodone HCL	10mg, 20mg, 40mg	Brand	\$\$\$\$\$	
VINBLASTINE	Vinblastine Sulfate	1mg/ml	Generic	\$\$\$\$	
VINCRISTINE	Vincristine Sulfate	1mg/ml	Generic	\$\$\$\$	
NAVELBINE	Vinorelbine Tartrate	10mg/ml, 50mg/5ml	Brand	\$\$\$\$\$\$	Specialty
VINORELBINE	Vinorelbine Tartrate	10mg/ml, 50mg/5ml	Brand	\$\$\$\$\$\$	Specialty
VFEND	Voriconazole	50mg, 200mg, 40mg/ml	Generic	\$\$\$\$\$\$	Specialty Step: Fluconazole
COUMADIN	Warfarin Sodium	1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg	Generic	\$\$\$	
ACCOLATE	Zafirlukast	10mg, 20mg	Brand	\$\$\$\$	CPA
RELENZA	Zanamivir Oral	5mg	Brand	\$\$\$	QL= 20 tabs/31 days
RECLAST	Zoledronic Acid	5mg/100ml	Generic	\$\$\$\$\$\$	Specialty CPA Failure on two bisphosphonates
ZOMETA	Zoledronic Acid	4mg/5ml	Generic	\$\$\$\$\$\$	Specialty CPA
ZOMIG, ZOMIG ZMT	Zolmitriptan	2.5mg, 5mg	Generic	\$\$\$\$	Step: Sumatriptan Succinate QL= 9 tabs/31 days
ZOMIG NASAL SPRAY	Zolmitriptan Nasal Spray	5mg	Brand	\$\$\$\$	Step: Zomig, Zomig ZMT QL= 9 devices/31 days
AMBIEN	Zolpidem Tartrate	5mg, 10mg	Generic	\$\$	QL= 31 tabs/31 days Step: Failure of Zolpidem
AMBIEN CR	Zolpidem Tartrate CR	6.25mg 12.5mg	Generic	\$\$\$\$	QL= 31 tabs/31 days
ZONEGRAN	Zonisamide	25MG,50mg, 100mg	Generic	\$\$	
TRUE - kits, strips and supplies			Brand	\$\$\$	QL= 100 strips/31 days

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**Gold Coast  
Health Plan**<sup>SM</sup>  
A Public Entity

**List of Covered Drugs**  
by  
**Therapeutic Class**

**Effective  
April 1, 2017**

**GCHP List of Covered Drugs  
Therapeutic Category**

ANESTHETICS							
Therapeutic Class	Brand Names	Generic Name	Strength(s)	Coverage	Rx Cost	LMN, QL, Step, CPA	
TOPICAL ANESTHETICS	XYLOCAINE	Lidocaine HCl	2% gel, 5% onit	Generic	\$\$		
	XYLOCAINE	Lidocaine HCl Viscous	2%	Generic	\$\$		
	LIDODERM	Lidocaine Patch	5%	Generic	\$\$\$\$\$	Step: NSAIDS QL= 93 patches/31 days	
ANTIINFECTIVES							
Therapeutic Class	Brand Names	Generic Name	Strength(s)	Coverage	Rx Cost	LMN, QL, Step, CPA	
ALLYLAMINE	NIZORAL	Ketoconazole Topical		Generic	\$\$		
	NYSTATIN	Nystatin Swish and Swallow		Generic	\$\$		
	LAMISIL	Terbinafine Oral	250mg	Generic	\$\$\$\$		
	TERCONAZOLE	Terconazole Vaginal		Generic	\$\$		
AMINOGLYCOSIDES	AMIKIN	Amikacin IV		Generic	\$\$\$\$	QL= 14 days	
	GARAMYCIN	Gentamicin IM or IV		Generic	\$\$	QL= 14 days	
	NEOMYCIN	Neomycin Sulfate -Oral	500mg	Generic	\$\$\$\$	QL= 2 tabs/31 days	
AMINOPENICILLINS	TOBREX	Tobramycin IV		Generic	\$\$\$	QL= 14 days	
	AMOXIL	Amoxicillin-Oral		Generic	\$\$		
		AMPICILLIN	Ampicillin IV	125mg, 250mg, 500mg, 1g, 2g, 10g	Generic	\$\$\$	CPA
ANTIBIOTICS	UNASYN	Ampicillin/Sulbactam IV		Generic	\$\$\$	CPA	
	BACTROBAN	Mupirocin		Generic	\$\$		
	NEOSPORIN	Neomycin/Polymyxin Gramicidin		Generic	\$\$		
ANTIFUNGALS	ABELCET	Amphotericin B Lipid	5mg/ml	Brand	\$\$\$\$\$\$	CPA	
	JUBLIA	Efinaconazole Soln 10%	10%	Brand	\$\$\$\$\$	CPA	
	ANCOBON	Flucytosine Oral	250mg, 500mg	Brand	\$	CPA	
	GRIS-PEG	Griseofulvin Oral	125mg, 250mg	Brand	\$\$		
						CPA	
						Clinical Note: Documented diagnosis of invasive aspergillosis or mucormycosis with documentation of failure or intolerance to both first and second line agents: voriconazole & amphotericin B for aspergillosis; posiconazole and amphotericin B for mucormycosis	
ANTI-MYCOBACTERIAL	CRESEMBA	Isavuconazonium Sulfate	372 mg Inj; 186 mg Cap	Brand	\$\$\$\$\$\$\$		
	NYSTOP	Nystatin Topical Powder		Generic	\$\$		
	MYAMBUTOL	Ethambutol Oral	100mg, 400mg	Generic	\$\$\$		
	ISONIAZID	Isoniazid Oral		Generic	\$\$		
	PYRAZINAMIDE	Pyrazinamide Oral	500mg	Generic	\$\$\$		
ANTIPARASITICS	RIFADIN	Rifampin Oral	150mg, 300mg	Generic	\$\$\$		
	ALBENZA	Albendazole Oral	200mg	Brand	\$\$\$\$		
	ARALEN	Chloroquin Phosphate Oral	250mg	Generic	\$\$\$		
	DAPSONE	Dapsone Oral	25mg, 100mg	Generic	\$\$		
	PLAQUENIL	Hydroxychloroquine Sulfate	200mg	Generic	\$\$\$		
	YODOXIN	Iodoquinol Oral	210mg, 650mg	Brand	\$\$\$\$		
	STROMECTOL	Ivermectin Oral	3mg	Generic	\$\$\$\$		
	OVIDE	Malathion Lotion	0.50%	Generic	\$\$\$\$	QL= 60ml/30days	
	MEBENDAZOLE	Mebendazole Oral	100mg	Brand	\$\$\$		
	ALINIA	Nitazoxanide Oral	500mg	Brand	\$\$\$\$\$		
ANTIPROTOZOAN: LEISHMANIASIS	BILTRICIDE	Praziquantal Oral	600mg	Brand	\$\$\$		
	PRIMAQUINE	Primaquine Oral	26.3mg	Generic	\$\$\$\$		
ANTI-PSEUDOMONAL PCN	IMPAVIDO	Miltefosine	50mg	Brand		CPA	
ANTI-VIRAL	ZOSYN	Piperacillin/Tazobactam IV		Generic	\$\$\$\$	CPA	
	ZOVIRAX	Acyclovir Na IV	50mg/mL	Generic	\$\$\$\$	CPA	
	ZOVIRAX	Acyclovir Oral	200mg, 400mg, 800mg, 200mg/mL	Generic	\$\$\$\$		
	HEPSERA	Adefovir Dipivoxil	10mg	Generic	\$\$\$\$\$\$	Specialty CPA	
	XELODA	Capecitabine	150mg, 500mg	Brand	\$\$\$\$\$\$	Specialty Specialty	
	CYTOGAM	Cytomegalovirus Immune Globulin		Brand	\$\$\$\$\$\$	CPA	
	DAKLINZA	Daclatasvir Dihydrochloride	30MG, 60MG	Brand	\$\$\$\$\$\$\$	Specialty CPA	
	ZEPATIER	Elbasvir-Grazoprevir	50-100MG	Brand	\$\$\$\$\$\$\$	Specialty CPA CPA	
	ZEPATIER	Elbasvir-Grazoprevir	50-100mg	Brand	\$\$\$\$\$\$\$	Preferred Agent Specialty	
	BARACLUDE	Entecavir	0.5mg, 1mg, 0.05mg/ml	Brand	\$\$\$\$\$\$	CPA	

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Therapeutic Category**

	TARCEVA	Erlotinib	25mg, 100mg, 150mg	Brand	\$\$\$\$\$\$	Specialty Available at retail
	FAMVIR	Famcyclovir Oral	125mg, 250mg, 500mg	Generic	\$\$\$\$	
	CYTOVENE	Gancyclovir IV	500mg	Generic	\$	CPA
	HAVRIX	Hepatitis A Vaccine	720u, 1440u	Brand	\$\$\$\$\$\$	CPA
	HARVONI	Ledipasvir-Sofosbuvir Tab	90-400 mg	Brand	\$\$\$\$\$\$\$	Specialty CPA: HCV
	TECHNIVIE	Ombitasvir-Paritaprevir-Ritonavir	12.5-75-50MG	Brand	\$\$\$\$\$\$\$	Specialty CPA
	VIEKIRA PAK	Ombitasvir-Paritaprevir-Ritonavir & Dasabuvir	12.5-75-50 & 250mg	Brand	\$\$\$\$\$\$\$	Specialty CPA
	TAMIFLU	Oseltamir Oral	30mg, 45mg, 75mg, 12mg/ml	Generic: Tabs Brand: Susp	\$\$\$\$	QL= 10 caps/31 days (45mg, 75mg) QL= 20 caps/31 days (30mg) QL=120ml/31 days (oral susp)
	PEGASYS	Peginterferon alfa-2a	180mcg/0.5ml, 180mcg/ml	Brand	\$\$\$\$\$\$	Specialty CPA
	PEG-INTRON	Peginterferon alfa-2b	50mcg, 80mcg, 120mcg, 150mcg	Brand	\$\$\$\$\$\$	Specialty CPA
	COPEGUS	Ribavirin	200mg	Brand	\$\$\$\$\$\$	Specialty CPA
	REBETOL	Ribavirin	200mg, 40mg/ml	Generic	\$\$\$\$\$\$	Specialty CPA
	RIBASPHERE	Ribavirin	200mg, 400mg, 600mg	Brand	\$\$\$\$\$\$	Specialty CPA
	RIBAPAK	Ribavirin Oral	400mg, 600mg	Generic	\$\$\$\$	Specialty CPA
	SOVALDI	Sofosbuvir	400mg	Brand	\$\$\$\$\$\$\$	Specialty CPA
	EPCLUSA	Sofosbuvir-Velpatasvir	400-100mg	Brand	\$\$\$\$\$\$\$	CPA Preferred Agent
	EPCLUSA	Sofosbuvir-Velpatasvir	400-100 MG	Brand	\$\$\$\$\$\$\$	CPA
	VIREAD	Tenofovir Disoproxil Fumarate	300mg	Brand	\$\$\$\$\$\$	Specialty CPA
	VALTREX	Valacyclovir HCl	500mg, 1g	Generic	\$\$\$\$	
	VALCYTE	Valganciclovir HCl	450mg	Generic	\$\$\$\$\$\$	Specialty CPA
	VALCYTE	Valganciclovir HCl	50mg/ml	Brand	\$\$\$\$\$\$	Specialty CPA
	VFEND	Voriconazole	50mg, 200mg, 40mg/ml	Generic	\$\$\$\$\$\$	Specialty Step: Fluconazole
	RELENZA	Zanamivir Oral	5mg	Brand	\$\$\$	QL= 20 tabs/31 days
BURN PRODUCTS	SILVADENE	Silver Sulfadiazine		Generic	\$\$\$	
CARBAPENAM	INVANZ	Ertapenem IV		Generic	\$\$\$\$	CPA
	PRIMAXIN	Imipenem/Cilastin IV		Generic	\$\$\$\$	CPA
	MERREM	Meropenem IV		Generic	\$\$\$\$	CPA
CEPHALOSPORINS 1ST GENERATION	ANCEF	Cefazolin		Generic	\$\$\$	
CEPHALOSPORINS 2ND GENERATION	CEFOTAN	Cefotetan-IV		Generic	\$\$\$	CPA
	MEFOXIN	Cefoxitin-IV		Generic	\$\$	CPA
	CEFTIN	Cefuroxime IV, Oral		Generic	\$\$\$	QL= 20 tabs/10 days
CEPHALOSPORINS 3RD GENERATION	OMNICEF	Cefdinir	300mg, 125mg/5ml, 250mg/5ml	Generic	SSSS	
	SUPRAX	Cefixime	400mg, 100mg/5ml	Generic	\$\$\$\$	CPA Age > 12 QL= 150ml/31 days OR 2 tab/31 days
	CLAFORAN	Cefotaxime IV		Generic	\$\$\$	(All ages) CPA
	FORTAZ	Ceftazidime IV		Generic	\$\$\$	Specialty CPA
	ROCEPHIN	Ceftriaxone IV		Generic	\$\$\$	
CEPHALOSPORINS 4TH GENERATION	MAXIPIME	Cefapime IV		Generic	\$\$	CPA
CLINDAMYIN	CLEOCIN	Clindamycin Oral, IV		Generic	\$\$\$	CPA
ECHINOCANDINS	CANCIDAS	Caspofungin Acetate	50mg, 70mg	Brand	\$\$	Specialty CPA
	MYCAMINE	Micafungin IV	50mg, 100mg	Brand	\$\$\$	CPA
ERYTHROMYCIN	EES	Erythromycin Esthylsuccinate	400mg	Generic	\$\$\$	
	ERYTHROCIN	Erythromycin Stearate	25mg, 500mg	Generic	\$\$	
FLUOROQUINOLONE	CIPRO	Ciprofloxacin Oral		Generic	\$\$\$	
	CIPRO	Ciprofloxacin Oral	5%, 250mg/5ml	Brand	\$\$\$	
	LEVAQUIN	Levofloxacin Oral		Generic	\$\$	

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**GCHP List of Covered Drugs  
Therapeutic Category**

	AVELOX	Moxifloxacin Oral		Generic	\$\$\$	CPA
GLYCOPEPTIDE	DALVANCE	Dalbavancin HCL for IV Soln	500mg	Brand	\$\$\$\$\$\$	CPA
	VIBATIV	Televancin IV	250mg, 750mg	Brand	\$\$\$	Step: Vancomycin
	VANCOCIN	Vancomycin Oral, IV		Generic	\$\$\$	CPA
HEP B & HEP C	INFERGEN	Interferon		Brand	\$\$\$\$\$\$	Specialty Step: Peg-Inton and Ribavarin
	EPIVIR	Lamivudine Oral	150mg, 300mg	Brand	\$\$\$\$	Specialty
	RIBAVIRIN	Ribavirin Oral	200mg, 400mg, 600mg	Generic	\$\$\$\$	CPA
	TYZEKA	Telbivudine Oral	600mg	Brand	\$\$\$\$\$	Specialty CPA
IMIDAZOLE ANTIFUNGALS	NIZORAL	Ketoconazole Oral	200mg	Generic	\$\$\$	
LIPOPEPTIDE	CUBICIN	Daptomycin IV	500mg	Brand	\$\$\$\$	CPA
MACROLIDES	ZITHROMAX	Azithromycin Oral	250mg, 500mg, 600mg	Generic	\$\$	CPA (600mg) QL= 8 tabs/10 days, Max 2 fills/31 days (250mg) QL= 4 tabs/10 days, Max 2 fills/31 days (500 mg) QL= 28 tabs/14 days, Max 2 fills/31 days (250mg & 500mg) QL= 280ml/14 days, Max 2 fills of 280ml/31 days (125mg/5ml & 250mg/5ml)
	BIAXIN	Clarithromycin Oral	250mg, 500mg, 125mg/5ml, 250mg/5ml	Generic	\$\$\$	Specialty
MISC. ANTIBIOTIC	COLY-MYCIN M	Colistimethate Sodium	150mg	Brand	\$\$\$\$\$\$	CPA
MONOBACTAM	AZACTAM	Aztreonam IV		Generic	\$\$\$\$\$	CPA
NITRODANTIN	MACRODANTIN	Nitrofurantoin Macrorcrystal Oral		Brand	\$\$	
NITROIMIDAZOLE	FLAGYL	Metronidazole Oral, IV		Generic	\$ to \$\$\$\$	
	VANDAOZOLE	Metronidazole Vaginal Gel	0.75%	Generic	\$\$\$\$	
	AUGMENTIN	Amoxicillin/Clavulanate-Tabs, Susp		Generic	\$\$\$	
OXAZOLIDINONE	ZYVOX	Linezolid Oral, IV	600mg, 100mg/5mL, 2mg, mL	Generic	\$\$\$\$\$\$	CPA
PENICILLIN	BICILLIN L-A	Benzathine IM		Generic	\$\$\$\$	CPA
	PENICILLN GK	Penicillin G IV		Generic	\$\$\$	CPA
PENICILLINASE RESISTANT PCN	PENICILLN VK	Penicillin VK-oral		Generic	\$\$\$	
	DYCILL	Dicloxacillin-Oral		Generic	\$\$	
	NAFCILLIN	Nafcillin IV		Generic	\$\$\$\$	CPA
POLYENE ANITFUNGALS	AMBISOME	Amphotericin B Liposome	510mg	Brand	\$\$\$\$	Specialty CPA
SULFONAMIDES	SULFADIAZINE	Sulfadiazine	500mg, Powder	Brand	SSS	
TETRACYCLINE	BACTRIM DS	Sulfamethoxazole/Trimethoprim		Generic	\$\$	
	DOXYCYCLINE	Doxycycline Oral		Generic	\$\$	
	TETRACYCLINE	Tetracycline Oral		Generic	\$\$	
	TYGACIL	Tigecycline IV	50mg	Brand	\$\$\$\$\$	CPA
TRIAZOLE ANTIFUNGALS	NOXAFIL	Posaconazole Relayed Release Tab	100mg	Brand	\$\$\$\$\$\$	Step: Fluconazole
	DIFLUCAN	Fluconazole Oral	50mg, 100mg, 150mg, 200mg	Generic	\$\$\$\$	QL= 2 tabs/31 days (150mg)
	SPORANOX	Itraconazole Oral	100mg	Generic	\$\$\$\$	CPA
	NOXAFIL	Posaconazole Oral	40mg/ml	Brand	\$\$\$\$\$	Step: Fluconazole

**ANTINEOPLASTIC/ IMMUNOSUPPRESSANT**

Therapeutic Class	Brand Names	Generic Name	Strength(s)	Coverage	Rx Cost	LMN, QL, Step, CPA
ANTINEOPLASTIC/ IMMUNOSUPPRESSANT	ORENCIA	Abatacept	250mg	Brand	\$\$\$\$\$\$	Specialty CPA Intolerant or inadequate response after 3 months of treatment to methotrexate AND Intolerant or inadequate response after 3 months of treatment to etanercept (Enbrel) and adalimumab (Humira) AND/OR Intolerant or inadequate response after 3 months of treatment to Remicade

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**GCHP List of Covered Drugs  
Therapeutic Category**

						Specialty CPA 2 Concurrent DMARDS, one must be Methotrexate OR Topical Steroid AND psoralen + UVA treatment (PUVA) OR Systemic steroids (e.g., prednisone) AND an immunomodulator (e.g., azathioprine, mercaptopurine, cyclosporine or methotrexate) OR Topical Steroid AND psoralen + UVA treatment (PUVA)
HUMIRA	Adalimumab	20mg/0.4ml, 40mg/0.8ml	Brand	\$\$\$\$\$\$		Specialty
GILOTRIF	Afatnib Dimaleate	20mg; 30mg; 40mg	Brand	\$\$\$\$\$\$		CPA
ALECENSA	Alectinib HCL	150mg	Brand	\$\$\$\$\$\$		Specialty CPA
CAMPATH	Alemtuzumab	30mg/ml	Brand	\$\$\$\$\$\$		Specialty Specialty
ETHYOL	Amifostine Crystalline	500mg	Brand	\$\$\$\$\$\$		CPA
ARIMIDEX	Anastrozole	1mg	Generic	\$\$\$\$		
TRISENOX	Arsenic Trioxide	10mg/10ml	Generic	\$\$\$\$		
VIDAZA	Azacididine	100mg	Generic	\$\$\$\$\$\$		
IMURAN	Azathioprine	50mg	Generic	\$\$\$\$\$\$		
TICE	BCG Live Intravesical	50mg	Brand	\$\$\$\$\$\$		Specialty
TREANDA	Bendamustine HCl	25mg, 100mg	Brand	\$\$\$\$		
AVASTIN	Bevacizumab		Brand	\$\$\$\$\$\$		Specialty
TARGRETIN	Bexarotene	75mg, 1%	Brand	\$\$\$\$\$\$		Specialty
CASODEX	Bicalutamide	50mg	Generic	\$\$\$\$		
BLEOMYCIN	Bleomycin Sulfate	15u, 30u	Generic	\$\$\$\$\$\$		Specialty
VELCADE	Bortezomib	3.5mg	Generic	\$\$\$\$\$\$		
JEVTANA	Cabazitaxel	60mg/1.5ml	Generic	\$\$\$\$\$\$		
CABOMETYX	Cabozantinib S-Malate	20 mg; 40 mg; 60 mg	Brand	\$\$\$\$\$\$		CPA
		50mg/5ml, 150mg/15ml, 450mg/45ml, 600mg/60ml, 50mg, 150mg, 450mg				Specialty CPA
CARBOPLATIN	Carboplatin		Generic	\$\$\$\$\$\$		Specialty
BICNU	Carmustine	100mg	Brand	\$\$\$\$\$\$		Specialty
ZYKADIA	Ceritinib	150mg	Brand	\$\$\$\$\$\$		CPA
ERBITUX	Cetuximab	100mg, 200mg	Brand	\$\$\$\$\$\$		Specialty
LEUKERAN	Chlorambucil	2mg	Brand	\$\$\$\$\$\$		Specialty
		50mg/50ml, 100mg/100ml, 200mg/200ml				Generic \$\$\$
CISPLATIN	Cisplatin		Generic	\$\$\$		
CLADRIBINE	Cladribine	1mg/ml	Generic	\$\$\$\$\$\$		Specialty
LEUSTATIN	Cladribine	1mg/ml	Brand	\$\$\$\$\$\$		Specialty
COTELLIC	Cobimetinib Fumarate	20mg	Brand	\$\$\$\$\$\$		Specialty CPA
CYCLOPHOSPHAMIDE	Cyclophosphamide	25mg, 50mg, 500mg, 1g, 2g	Brand	\$\$\$\$\$\$		Specialty Specialty
CYTOXAN	Cyclophosphamide	2g	Brand	\$\$\$\$\$\$		CPA
NEORAL	Cyclosporine	25mg, 100mg	Generic	\$\$\$\$\$\$		
SANDIMMUNE	Cyclosporine	50mg/ml	Generic	\$\$\$\$\$\$		
TAFINLAR	Dabrafenib Mesylate	50mg; 75mg	Brand	\$\$\$\$\$\$		Specialty CPA
DACARBAZINE	Dacarbazine	100mg, 200mg	Generic	\$\$\$\$\$\$		Specialty
						Step: Interferon Beta 1b <b>AND</b>
ZINBRYTA	Daclizumab	150mg/mL	Brand	\$\$\$\$\$\$		Glatiramer
AMPYRA	Dalfampridine	10mg	Generic	\$\$\$\$\$\$		Specialty CPA
		20mg, 50mg, 70mg, 80mg, 100mg,				
SPRYCEL	Dasatinib	140mg	Brand	\$\$\$\$\$\$		Specialty
DAUNORUBINCIN	Daunorubicin HCl	20mg, 5mg/ml	Generic	\$\$\$\$\$\$		Specialty
ONTAK	Denileukin Diftitox	150mcg/ml	Brand	\$\$\$\$\$\$		Specialty Specialty
ZINECARD	Dexrazoxane	250mg, 500mg	Brand	\$\$\$\$\$\$		CPA Specialty
TECFIDERA	Dimethyl Fumarate	120mg; 240mg	Brand	\$\$\$\$\$\$		CPA
TAXOTERE	Docetaxel	20mg/ml, 80mg/4ml	Generic	\$\$\$\$		Specialty
TAXOTERE	Docetaxel	20mg/0.5ml, 80mg/2ml	Brand	\$\$\$\$\$\$		Specialty
ADRIAMYCIN	Doxorubicin HCl	2mg/ml	Generic	\$\$\$\$		
DOXIL	Doxorubicin HCl Liposomal	2mg/ml	Generic	\$\$\$\$\$\$		Specialty Specialty
ELLENC	Epirubicin HCl	2mg/ml	Brand	\$\$\$\$\$\$		CPA
HALAVEN	Eribulin Mesylate	1mg/2ml	Generic	\$\$\$\$\$\$		

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**GCHP List of Covered Drugs  
Therapeutic Category**

						Specialty CPA 2 concurrent DMARDS (one of which must be Methotrexate) OR Topical Steroid AND psoralen + UVA treatment (PUVA)
ENBREL	Etanercept	25mg, 25mg/0.5ml, 50mg/ml	Brand	\$\$\$\$\$\$		
TOPOSAR	Etoposide	20mg/ml	Generic	\$\$\$\$\$		
AFINITOR	Everolimus	2.5mg, 5mg, 10mg	Brand	\$\$\$\$\$\$		Specialty
AROMASIN	Exemestane	25mg	Generic	\$\$\$\$		Specialty
		300mcg, 480mcg, 300mcg/0.5ml, 480mcg/0.8ml				Specialty, Available at Retail QL= 14 vials/31 days (300mcg & 480mcg)
NEUPOGEN	Filgrastim		Brand	\$\$\$\$\$\$		Specialty
GILENYA	Fingolimod HCl	0.5mg	Brand	\$\$\$\$\$\$		CPA
FLUDARA	Fludarabine Phosphate	50mg	Brand	\$\$\$\$\$\$		Specialty
FLUDARABINE	Fludarabine Phosphate	50mg, 50mg/2ml	Generic	\$\$\$\$\$\$		Specialty
ADRUCIL	Fluorouracil	2.5g/50ml, 5g/100ml, 500mg/10ml	Generic	\$		
FASLODEX	Fulvestrant	250mg/5ml	Generic	\$\$\$\$\$\$		
GEMZAR	Gemcitabine HCl	200mg, 1g	Brand	\$\$\$\$\$\$		Specialty
						Specialty
SIMPONI	Golimumab	50mg	Brand	\$\$\$\$\$\$		Step: Fail <b>BOTH</b> Humira AND Enbrel
ZOLADEX	Goserelin Acetate	3.6mg, 10.8mg	Brand	\$\$\$\$\$\$		Specialty
VANTAS	Histreltin Acetate	50mg	Brand	\$\$\$\$\$\$		Specialty
HYDREA	Hydroxyurea	500mg	Generic	\$\$\$\$		
IMBRUVICA	Ibrutinib	140mg	Brand	\$\$\$\$\$\$		Specialty CPA
ZYDELIG	Idelalisib	100mg;150mg	Brand	\$\$\$\$\$\$		Specialty CPA
IFEX	Ifosfamide	1 gm, 3 gm	Generic	\$\$\$\$\$\$		
GLEEVEC	Imatinib Mesylate	100mg, 400mg	Generic	\$\$\$\$\$\$		Specialty
						Specialty
REMICADE	Infliximab	100mg	Brand	\$\$\$\$\$\$		CPA
INFLECTRA	Infliximab-dyyb	100mg	Brand	\$\$\$\$\$\$		CPA
EXTAVIA	Interferon Beta-1b	0.3mg	Brand	\$\$\$\$\$\$		Specialty
CAMPOTOSAR	Irinotecan HCl	20mg/ml	Brand	\$\$\$\$\$\$		Specialty
IXEMPRA	Ixabepilone	15mg, 45mg	Generic	\$\$\$\$\$\$		
NINLARO	Ixazomib Citrate	2mg; 3mg; 4mg	Brand	\$\$\$\$\$\$		Specialty CPA
TYKERB	Lapatinib Ditosylate	250mg	Brand	\$\$\$\$\$\$		Specialty
						Specialty
REVLIMID	Lenalidomide	5mg, 10mg, 15mg, 25mg	Brand	\$\$\$\$\$\$		CPA
						Specialty
LENVIMA	Lenvatinib	14mg; 20mg; 10mg; 24mg	Brand	\$\$\$\$\$		CPA
FEMARA	Letrozole	2.5mg	Generic	\$\$\$\$\$		
						Specialty
VALCHLOR	Mechlorethamine HCL Gel	0.016%	Brand			CPA
MEGACE	Megestrol Acetate	20mg, 40mg	Generic	\$\$\$\$\$		
ALKERAN	Melphalan	2mg, 50mg	Brand	\$\$\$\$\$\$		Specialty
PURINETHOL	Mercaptopurine	50mg	Generic	\$\$\$\$		
		7.5mg,10mg,12.5mg,15mg,17.5mg,20mg,22.5mg,25mg,27.5mg,30mg	Brand	\$\$\$\$		CPA
RASUVO	Methotrexate Soln PF Auto-Injector					
		1g, 1g/40ml, 25mg/ml, 50mg/2ml, 250mg/10ml				
MEXATE	Methotrexate Sodium		Generic	\$\$\$\$\$\$		
RHEUMATREX	Methotrexate Sodium	2.5mg	Generic	\$\$\$\$		
Otrexup	Methotrexate Soln PF Auto-Injector	10mg;15mg;20mg;25mg	Brand	\$\$\$\$\$		CPA
MITOMYCIN	Mitomycin	5mg, 20mg, 40mg	Generic	\$\$\$\$\$\$		
						Specialty
CELLCEPT	Mycophenolate Mofetil	250mg, 500mg, 250mg/ml	Generic	\$\$\$\$\$		CPA for Age < 21
						Specialty
MYCOPHENOLATE	Mycophenolate Mofetil	250mg, 500mg	Generic	\$\$\$\$\$\$		CPA for Age < 21
						Specialty
TASIGNA	Nilotinib	150mg, 200mg	Brand	\$\$\$\$\$\$		QL= 2 tabs/31 days
OFEV	Nintedanib Esylate	100mg;150mg	Brand	\$\$\$\$\$\$		CPA
LYNPARZA	Olaparib	50mg	Brand	\$\$\$\$\$\$		CPA
						Specialty, Available at Retail Age >18
NEUMEGA	Oprelvekin	5mg	Brand	\$\$\$\$\$		QL= 21 vials/28 days
TAGRISO	Osimeritib Mesylate	40mg, 80mg	Brand	\$\$\$\$\$\$		Specialty CPA
ELOXATIN	Oxaliplatin	50mg, 100mg, 200mg	Brand	\$\$\$\$\$\$		Specialty
		30mg/5ml, 100mg/16.7ml, 150mg/25ml, 300mg/50ml				
ONXOL	Paclitaxel		Generic	\$\$\$\$\$		
		100mg, 6mg/ml, 30mg/5ml, 150mg/25ml, 300mg/50ml				
PACLITAXEL	Paclitaxel		Generic	\$\$\$\$\$\$		Specialty

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Therapeutic Category**

ABRAXANE	Paclitaxel Protein-Bound Particles	100mg	Brand	\$\$\$\$\$\$	Specialty
IBRANCE	Palbociclib	12.5mg; 75mg; 100mg	Brand	\$\$\$\$\$\$	Specialty CPA
PAMIDRONATE	Pamidronate Disodium	30mg, 90mg, 30mg/10ml, 90mg/10ml	Generic	\$\$\$\$\$\$	Specialty
FARYDAK	Panobinostat Lactate Cap	10mg, 15mg, 20mg,	Brand	\$\$\$\$\$\$	Specialty CPA
VOTRIENT	Pazopanib HCl	200mg	Brand	\$\$\$\$\$\$	Specialty
NEULASTA	Pegfilgrastim	6mg/0.6ml	Brand	\$\$\$\$\$\$	Specialty, Available at Retail QL= 1 syringes/14 days
ALIMTA	Pemetrexed Disodium	100mg, 500mg	Brand	\$\$\$\$\$\$	Specialty
POMALYST	Pomalidomide	1mg; 2mg; 3mg; 4mg	Brand	\$\$\$\$\$\$	Specialty
MATULANE	Procarbazine HCl	50mg	Generic	\$\$\$\$\$\$	CPA
STIVARGA	Regorafenib	40 mg	Brand	\$\$\$\$\$\$	Specialty
ARCALYST	Rilonacept	220mg	Brand	\$\$\$\$\$\$	CPA
RITUXAN	Rituximab	100mg, 500mg	Brand	\$\$\$\$\$\$	Specialty CPA
NPLATE	Romiplostim	250mcg, 500mcg	Generic	\$\$\$\$\$\$	Specialty
COSENTYX	Secukinumab Subcutaneous Soln	150mg/mL	Brand	\$\$\$\$\$\$	Specialty CPA
RAPAMUNE	Sirolimus	0.5mg, 1mg, 2mg, 1mg/ml	Generic	\$\$\$\$\$\$	Specialty
ODOMZO	Sonidegib Phosphate	200MG	Brand	\$\$\$\$\$\$	CPA
NEXAVAR	Sorafenib Tosylate	200mg	Brand	\$\$\$\$\$\$	Specialty CPA
SUTENT	Sunitinib Malate	12.5mg, 25mg, 50mg	Brand	\$\$\$\$\$\$	Specialty
PROGRAF	Tacrolimus	0.5mg, 1mg, 5mg, 5mg/ml	Generic	\$\$\$\$\$\$	Specialty
TACROLIMUS	Tacrolimus	0.5mg, 1mg, 5mg	Generic	\$\$\$\$\$\$	Specialty
NOLVADEX	Tamoxifen Citrate	10mg, 20mg	Generic	\$\$\$\$	
TEMODAR	Temozolomide	5mg, 20mg, 100mg, 140mg, 180mg, 250mg	Generic	\$\$\$\$	Specialty
TORISEL	Temsirolimus	25mg/ml	Brand	\$\$\$\$	Specialty
XENAZINE	Tetrabenazine	12.5mg, 25mg	Generic	\$\$\$\$	Specialty CPA
THALOMID	Thalidomide	50mg, 150mg, 200mg, 100mg,	Brand	\$\$\$\$	Specialty
HYCAMTIN	Topotecan HCl	4mg	Generic	\$\$\$\$	Specialty
MEKINIST	Trametinib Dimethyl Sulfoxide	2mg, 0.5mg	Brand	\$\$\$\$	CPA
HERCEPTIN	Trastuzumab	440mg	Brand	\$\$\$\$	Specialty
LONSURF	Trifluridine-Tipiracil	20-8.19mg, 15-6.14mg	Brand	\$\$\$\$	Specialty CPA
TRELSTAR	Triptorelin Pamoate	3.75mg, 11.25mg, 22.5mg	Brand	\$\$\$\$	Specialty
VINBLASTINE	Vinblastine Sulfate	1mg/ml	Generic	\$\$\$\$	
VINCISTINE	Vincristine Sulfate	1mg/ml	Generic	\$\$\$\$	
NAVELBINE	Vinorelbine Tartrate	10mg/ml, 50mg/5ml	Brand	\$\$\$\$	Specialty
VINORELBINE	Vinorelbine Tartrate	10mg/ml, 50mg/5ml	Brand	\$\$\$\$	Specialty
CHEMOTHERAPY PROTECTANTS	LEUCOVOR	Leucovorin Calcium	5mg, 10mg, 15mg, 25mg	Generic	\$\$\$
VISTOGARD	Uridine Triacetate	10GM	Brand	\$\$\$\$	CPA

**AUTONOMIC & CNS**

Therapeutic Class	Brand Names	Generic Name	Strength(s)	Coverage	Rx Cost	LMN, QL, Step, CPA
ANALGESICS	TYLENOL/COD	Acetaminophen w/ Codeine	300-15mg, 300-30mg, 300-60mg	Generic	\$\$\$	QL= 124 tabs/31 days
	BUTALBITAL	Butalbital		Generic	\$\$	
	FIORICET	Butalbital-Acetaminophen-Caffeine	50-325-40mg	Generic	\$\$	QL= 120 tabs/31 Days QL=120 tabs/31 days CPA required if taken in conjunction with alprazolam
	FIORICET w/CODEINE	Butalbital-Acetaminophen-Caffeine	50-325-30-40mg 100mcg, 200mcg, 300mcg, 400mcg,	Generic	\$\$\$	CPA: Cancer Only
	FENTORA	Fentanyl Citrate	600mcg, 800mcg	Brand	\$\$\$\$	QL= 124 tabs/31 days
	DURAGESIC	Fentanyl TD Patch	12mcg, 25mcg, 50mcg, 75mcg, 100mcg	Generic	\$\$\$\$	QL= 15 patches/31 days (1st fill) CPA (2nd fill)
	ZOHYDRO ER	Hydrocodone Bitartrate	10mg; 15mg; 20mg; 30mg; 40mg; 50mg	Brand	\$\$\$\$	CPA
	VICODIN	Hydrocodone-Acetaminophen	2.5-500mg, 5-325mg, 5-500mg, 7.5-325mg, 7.5-650mg, 7.5-650mg, 7.5-750mg, 10-300mg, 10-325mg, 10-500mg, 10-650mg, 10-660mg	Generic	\$\$\$	QL= 124 tabs/31 days CPA required if taken in conjunction with alprazolam
	REPRESAIN	Hydrocodone-Ibuprofen	2.5-200mg, 5-200mg, 7.5-200mg, 10-200mg	Generic	\$\$\$\$	QL= 186 tabs/31 days CPA required if taken in conjunction with alprazolam
	DILAUDID	Hydromorphone HCl	1mg, 2mg, 4mg, 8mg	Generic	\$\$\$	QL= 186 tabs/31 days CPA required if taken in conjunction with alprazolam
	DILAUDID-5	Hydromorphone HCl	1mg/ml	Brand	\$\$\$\$	QL= 500ml/31 days CPA required if taken in conjunction with alprazolam

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 \$\$\$\$ ----- \$101 to \$500  
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**GCHP List of Covered Drugs  
Therapeutic Category**

	METHADONE	Methadone HCl	5mg, 10mg	Generic	\$\$\$	QL= 124 tabs/31 days (5mg, 10mg) CPA required if taken in conjunction with alprazolam
	METHADOSE	Methadone Oral Concentrate	10mg/ml	Generic	\$\$\$	QL= 250ml/31 days CPA required if taken in conjunction with alprazolam
	DOLOPHINE	Methadone Oral Solution	5mg/5ml, 10mg/5ml	Generic	\$\$\$	QL= 500ml/31 days CPA required if taken in conjunction with alprazolam
	MORPHINE SUL	Morphine Sulfate	15mg, 30mg, 20mg/ml, 10mg/5ml	Brand	\$\$	QL= 240ml/31 days (20mg/ml) QL= 1000ml/31 days (10mg/5ml) CPA required if taken in conjunction with alprazolam
	MS CONTIN	Morphine Sulfate	15mg, 30mg, 60mg, 10mg, 200mg	Generic	\$\$\$	QL= 93 tabs/31 days CPA required if taken in conjunction with alprazolam
	ROXICODONE	Oxycodone HCl	5mg, 10mg, 15mg, 20mg, 30mg	Generic	\$\$\$	QL= 186 tabs/31 days CPA required if taken in conjunction with alprazolam
	PERCOCET	Oxycodone w/ Acetaminophen		Generic	\$\$\$	QL= 124 tabs/31 days CPA required if taken in conjunction with alprazolam Step: Failure of (2) two of the following: morphine, oxycodone, OR hydromorphone
	OPANA	Oxymorphone HCl	5mg, 10mg	Generic	\$\$\$\$	QL= 124 tabs/31 days CPA required if taken in conjunction with alprazolam
	OPANA ER	Oxymorphone HCl	5mg, 7.5mg, 10mg, 15mg, 20mg, 30mg, 40mg	Brand	\$\$\$\$	Step: Oxycontin QL= 62 tablets/31 days CPA required if taken in conjunction with alprazolam
	NUCYNTA	Tapentadol HCl	50mg	Brand	\$\$\$\$	1st fill: QL = 30 tabs (MAX 12/day) 2nd fill: CPA CPA required if taken in conjunction with alprazolam
	ULTRAM, ER	Tramadol HCl	50mg, 100mg, 200mg, 300mg	Generic	\$\$\$\$	QL= 124 tabs/31 days (50mg) QL= 31 tabs/31 days (ER) CPA required if taken in conjunction with alprazolam
	ULTRACET	Tramadol HCl w/Acetaminophen	37.5/325mg	Generic	\$\$\$	QL= 124 tabs/31 days CPA required if taken in conjunction with alprazolam
ANORETIC AGENTS	BELVIQ XR	Lorcaserin HCl Tab SR 24HR	20mg	Brand	\$\$\$\$	CPA
	CONTRACE	Naltrexone HCl-Bupropion	8-90mg 12HR Tab	Brand	\$\$\$\$	CPA
ANTIANSXIETY	XANAX	Alprazolam	0.25mg, 0.5mg, 1mg, 2mg	Generic	\$\$	Step: Failure of (1) of the following: Lorazepam OR Clonazepam OR Diazepam
	BUSPAR	Buspirone HCl	5mg, 10mg, 15mg, 30mg	Generic	\$\$\$	QL= 124 tabs/31 days(0.25mg, 0.5mg, 1mg)
	VANSPAR	Buspirone HCl	7.5mg	Generic	\$\$\$	QL= 62tabs/31 days(2mg)
	LIBRIUM	Chlordiazepoxide HCl	5mg, 10mg, 25mg	Generic	\$\$	CPA if taken in conjunction with opioid
	TRANXENE-T	Clorazepate Dipotassium	3.75mg, 7.5mg, 15mg	Generic	\$\$	QL= 62/30 days QL= 62/30 days
	VALIUM	Diazepam	2mg, 5mg, 10mg	Generic	\$\$	QL= 124 tabs/31 days QL= 31 tabs/31 days (10mg)
	ATIVAN	Lorazepam	0.5mg, 1mg, 2mg, 25 mg; 50 mg; 75 mg; 100 mg; 10	Generic	\$\$\$	QL= 124 tabs/31 days (0.5mg, 1mg) QL= 62 tabs/31 days (2mg)
ANTICONVULSANTS	BRIVIACT	Brivaracetam	mg/ml; 50mg/5 ml	Brand	\$\$\$\$	Step Therapy: Levetiracetam
	CARBATROL	Carbamazepine	100mg, 200mg, 300mg	Brand	\$\$\$\$	
	TEGRETOL	Carbamazepine	200mg, 400mg	Generic	\$\$\$	

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**GCHP List of Covered Drugs  
Therapeutic Category**

	KLONOPIN	Clonazepam	0.125mg, 0.25mg, 0.5mg, 1mg, 2mg	Generic	\$\$	QL= 124 tabs/31 days (0.5mg, 1mg)
	DEPAKOTE, DEPAKOTE ER	Divalproex Sodium	125mg, 250mg, 500mg	Generic	\$\$\$	QL= 62 tabs/31 days (2mg)
	DEPAKOTE SPR	Divalproex Sodium Sprinkle	125mg, 250mg, 500mg	Generic	\$\$\$	
	NEURONTIN	Gabapentin	100mg, 300mg, 400mg, 600mg, 800mg	Generic	\$\$\$\$	
	VIMPAT	Lacosamide	50mg, 100mg, 150mg, 200mg, 10mg/ml	Generic	\$\$\$\$	CPA
	LAMICTAL	Lamotrigine	25mg, 50mg, 100mg, 150mg, 200mg, 250mg	Generic	\$\$	
	LAMICTAL XR	Lamotrigine SR	25mg, 100mg, 150mg, 200mg, 300mg	Generic	\$\$\$\$	
	KEPPRA	Levetiracetam	1000mg	Generic	\$\$\$	
	KEPPRA XR	Levetiracetam SR	500mg, 750mg	Brand	\$\$\$	
	TRILEPTAL	Oxcarbazepine Suspension	300mg/5ml	Generic	\$\$\$	
	PHENOBARB	Phenobarbital	15mg, 30mg, 32.4mg, 60mg, 100mg	Generic	\$\$	
	PHENOBARB	Phenobarbital	97.2mg	Brand	\$\$	
	DILANTIN	Phenytoin Sodium	100mg	Generic	\$\$	
	PHENYTEK	Phenytoin Sodium	200mg, 300mg	Generic	\$\$	
	LYRICA	Pregabalin	25mg, 50mg, 75mg, 100mg, 150mg, 200mg, 225mg, 300mg	Brand	\$\$\$\$	Step: gabapentin
	MYSOLINE	Primidone	50mg, 250mg	Generic	\$\$\$	
	BANZEL	Rufinamide	200mg, 400mg	Generic	\$\$\$\$	CPA
	TOPAMAX	Topiramate	25mg, 50mg, 100mg, 200mg	Generic	\$\$	
	TOPAMAX SPRINKLE	Topiramate Sprinkle	15mg, 25mg	Generic	\$\$	
	ZONEGRAN	Zonisamide	25MG, 50mg, 100mg	Generic	\$\$	
ANTIDEMENTIA	ARICEPT, ARICEPT ODT	Donepezil Hydrochloride	5mg, 10mg, 23mg	Generic	\$\$\$\$	
	NAMENDA	Memantine HCl	5mg, 5-10mg, 10mg	Generic	\$\$\$\$	
	NAMENDA XR	Memantine HCl SR	7mg, 14mg, 28mg	Generic	\$\$\$\$	
	EXELON	Rivastigmine Tartrate	1.5mg, 3mg, 4.5mg, 6mg	Generic	\$\$\$\$	
	EXELON PATCH	Rivastigmine TD Patch	4.6mg/24HR, 9.5mg/24HR	Generic	\$\$\$\$	
ANTIDEPRESSANTS	ELAVIL	Amitriptyline HCl	10mg, 25mg, 50mg, 75mg, 100mg, 150mg	Generic	\$\$	
	APLENZIN	Bupropion HBr	174mg, 348mg, 522mg	Brand	\$\$	
	WELLBUTRIN, WELLBUTRIN XL	Bupropion HCl, Bupropion HCl SR	75mg, 100mg, 150mg, 200mg, 300mg	Generic	\$\$\$	
	CELEXA	Citalopram Hydrobromide	10mg, 20mg, 40mg	Generic	\$\$	
	ANAFRANIL	Clomipramine HCl	25mg, 50mg, 75mg	Generic	\$\$\$	CPA
	NORPRAMIN	Desipramine HCl	10mg, 25mg, 50mg, 75mg, 100mg, 150mg	Generic	\$\$	
	PRISIQ	Desvenlafaxine Succinate Tab SR 24HR	25mg, 50mg, 100mg	Generic	\$\$\$\$	CPA
	DOXEPIN	Doxepin HCl	10mg, 25mg, 50mg, 75mg, 100mg, 150mg	Brand	\$\$\$	
	SINEQUAN	Doxepin HCl	10mg, 25mg, 50mg, 75mg, 100mg, 150mg	Generic	\$\$	
	CYMBALTA	Duloxetine HCl	20mg, 30mg, 60mg	Generic	\$\$\$\$	
	LEXAPRO	Escitalopram Oxalate	5mg, 10mg, 20mg	Generic	\$\$\$\$	Step: Failure of two: citalopram, fluoxetine, fluvoxamine, paroxetine, sertraline
ANTIDEPRESSANTS	PROZAC WEEKLY	Fluoxetine HCl	90mg	Generic	\$\$	
	PROZAC	Fluoxetine HCl	10mg, 20mg, 40mg, 90mg	Generic	\$\$	
	LUVOX	Fluvoxamine Maleate	25mg, 50mg, 100mg	Generic	\$\$\$	
	TOFRANIL	Imipramine HCl	10mg, 25mg, 50mg	Generic	\$\$	
	SAVELLA	Milnacipran HCl	12.5mg, 25mg, 50mg, 100mg	Generic	\$\$\$\$	
	MIRTAZAPINE	Mirtazapine	7.5mg, 15mg, 30mg, 45mg	Generic	\$\$\$	Step: Gabepentin OR TCA
	SERZONE	Nefazodone HCl	50mg, 100mg, 150mg, 200mg, 250mg	Generic	\$\$\$	
	PAMELOR	Nortriptyline HCl	10mg, 25mg, 50mg, 75mg	Generic	\$\$\$	
	PAXIL	Paroxetine HCl	10mg, 12.5mg, 20mg, 30mg, 40mg	Generic	\$\$	
	ZOLOFT	Sertraline HCl	25mg, 50mg, 100mg	Generic	\$\$	
	DESYREL	Trazodone HCl	50mg, 100mg, 150mg, 300mg	Generic	\$\$	
	EFFEXOR	Venlafaxine HCl	25mg, 37.5mg, 50mg, 75mg, 100mg	Generic	\$\$	
	EFFEXOR ER	Venlafaxine HCl SR	37.5mg, 75mg, 150mg, 225mg	Generic	\$\$\$	

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**GCHP List of Covered Drugs  
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						Step: At Least Two fo the following: fluoxetine, paroxetine, citalopram, sertraline, bupropion, escitalopram, OR mirtazapine.
	VIIBRYD	Vilazodone HCL	10mg, 20mg, 40mg	Brand	\$\$\$\$\$	
ANTIEMETIC	EMEND	Aprepitant	80mg, 115mg, 125mg, 150mg	Brand	\$\$\$\$	Specialty CPA
	ZOFRAN	Ondansetron HCl	4mg, 8mg, 24mg	Generic	\$\$\$	QL= 31 tabs/31 days (4mg & 8mg) QL= 3 tab/31 days (24mg) CPA
	ZOFRAN	Ondansetron HCl and Dextrose	32mg/50ml	Brand	\$\$\$	QL= 3 units/31 days
	COMPAZINE	Prochlorperazine Maleate	5mg, 10mg	Generic	\$\$	
	PHEREGAN	Promethazine HCl	12.5mg, 25mg, 50mg	Generic	\$\$	
	VARUBI	Rolapitant HCL	90mg	Brand	\$\$\$\$\$	CPA
ANTIPARKINSON	TIGAN	Trimethobenzamide HCl	300mg/5ml	Generic	\$\$\$	
	LODOSYN	Carbidopa	25mg	Generic	\$\$\$	Step: Carbidopa & Levodopa
	SINEMET	Carbidopa & Levodopa	200mg	Generic	\$\$\$	
	COMTAN	Entacapone	200mg	Brand	\$\$\$\$	Step: Pramipexole OR Ropinrole HCl OR Carbidopa & Levodopa
	MIRAPEX	Pramipexole Dihydrochloride	0.125mg, 0.25mg, 0.5mg, 0.75mg, 1mg	Generic	\$\$\$	Step: carbidopa/levodopa, clonazepam, OR ropinirole
	MIRAPEX ER	Pramipexole Dihydrochloride SR	0.375mg, 0.75mg, 1.5mg, 3mg, 4.5mg	Generic	\$\$\$\$	Step: Pramipexole Dihydrochloride
	AZILECT	Rasagiline Mesylate	0.5mg, 1mg	Generic	\$\$\$	Step: Selegiline
	REQUIP	Ropinirole Hydrochloride	0.25mg, 0.5mg, 1mg, 2mg, 3mg, 4mg, 5mg	Generic	\$\$	
	REQUIP XL	Ropinirole Hydrochloride SR	2mg, 4mg, 6mg, 8mg, 12mg	Brand	\$\$\$\$	Step: Ropinirole Hydrochloride
	ELDEPRYL	Selegiline HCl	5mg	Generic	\$\$\$	
DRUGS TO TREAT HEADACHES	AXERT	Almotriptan Malate	6.25mg, 12.5mg	Generic	\$\$\$	Step: Sumatriptan Succinate QL= 6 tabs/31 days (6.25mg) QL= 12 tabs/31 days (12.5 mg)
	RELPAK	Eletriptan Hydrobromide	20mg, 40mg	Brand	\$\$\$\$	Step: Sumatriptan Succinate QL= 9 tabs/31 days
	MAXALT, MAXALT-MLT	Rizatriptan Benzoate	5mg, 10mg	Generic	\$\$\$	QL= 9 tabs/31 days Step: Sumatriptan Oral (QL= 9 tabs/31 days) QL= 6 devices/31 days
	SUMATRIPTAN	Sumatriptan Nasal Spray	5mg/ACT, 20mg/ACT	Brand	\$\$\$	
	IMITREX	Sumatriptan Succinate	25mg, 50mg, 100mg	Generic	\$\$\$	QL= 9 tabs/31 days (25mg, 50mg, & 100mg) Step: Sumatriptan Oral (QL= 9tabs/31 days)
	IMITREX	Sumatriptan Succinate Injection	4mg/0.5ml, 6mg/0.5ml	Generic	\$\$\$	QL= 1 kit/31 days (2 syringes) QL= 2 vials/31 days Step: Sumatriptan Succinate QL= 9 tabs/31 days
	ZOMIG, ZOMIG ZMT	Zolmitriptan	2.5mg, 5mg	Generic	\$\$\$\$	Step: Zomig, Zomig ZMT QL= 9 devices/31 days
	ZOMIG NASAL SPRAY	Zolmitriptan Nasal Spray	5mg	Brand	\$\$\$\$	
NEUROLOGIC AGENTS	RILUTEK	Riluzole	50mg	Generic	\$\$\$\$\$	
NEUROMUSCULAR	MESTINON	Pyridostigmine Bromide	60mg, 60mg/5ml	Brand	\$\$\$\$	
SEDATIVE/ HYPNOTIC	ROZEREM	Ramelteon	8mg	Brand	\$\$\$\$	Step: Failure of Zolpidem QL= 31 tabs/31 days
	BELSOMRA	Suvorexant	5mg;10mg;15mg;20mg	Brand	\$\$\$\$	Step: Two of the following agents: Zolpidem,zaleplon,eszopiclone,temaz apam
	HETLIOZ	Tasimelteon	20mg	Brand	\$\$\$\$\$\$\$	CPA
	RESTORIL	Temazepam	7.5mg, 15mg, 30mg	Generic	\$\$	QL= 31 caps/31 days
	AMBIEN	Zolpidem Tartrate	5mg, 10mg	Generic	\$\$	QL= 31 tabs/31 days Step: Failure of Zolpidem QL= 31 tabs/31 days
	AMBIEN CR	Zolpidem Tartrate CR	6.25mg 12.5mg 5mg, 7.5mg, 10mg, 15mg, 20mg, 30mg	Generic	\$\$\$\$	
STIMULANTS	ADDERALL	Amphetamine-Dextroamphetamine Amphetamine-Dextroamphetamine		Generic	\$\$\$	CPA
	ADDERALL XR	SR	5mg, 10mg, 15mg, 20mg, 30mg	Generic	\$\$\$\$\$	CPA
	NUVIGIL	Armodafinil	50mg, 150mg, 250mg 10mg, 18mg, 25mg, 40mg, 60mg, 80mg, 100mg	Brand	\$\$\$\$\$	Age > 23
	STRATTERA	Atomoxetine HCl	2.5mg, 5mg, 10mg, 15mg, 20mg,25mg 30mg,35mg, 40mg	Generic	\$\$\$\$	Age > 23
	FOCALIN, FOCALIN XR	Dexmethylphenidate HCl	1mg, 2mg, 3mg, 4mg	Brand	\$\$\$\$\$	Age > 23
	INTUNIV	Guanfacine HCL	20mg, 30mg, 40mg, 50mg, 60mg,	Brand	\$\$\$\$\$	Age > 23
	VYVANSE	Lisdexamphetamine Dimesylate	70mg	Brand	\$\$\$\$\$	CPA Age <23

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	DESOXYN	Methamphetamine HCl	5mg	Generic	\$\$\$\$	
	CONCERTA	Methylphenidate HCl	18mg, 27mg, 36mg, 54mg	Brand	\$\$\$\$\$	Age > 23
	RITALIN	Methylphenidate HCl	5mg, 10mg, 18mg, 20mg, 27mg,	Generic	\$\$\$\$	Age > 23
	RITALIN LA	Methylphenidate HCl	36mg, 54mg	Generic	\$\$\$\$	Age > 23
	METADATE CD	Methylphenidate HCl	10mg, 20mg, 30mg, 40mg, 50mg,	Brand	\$\$\$\$\$	Age > 23
	PROVIGIL	Modafinil	60mg	Brand	\$\$\$\$\$	Age > 23
SUBSTANCE ABUSE DETERANTS	ANTABUSE	Disulfiram	100mg, 200mg, 300mg	Generic	\$\$\$	

**CARDIOVASCULAR**

Therapeutic Class	Brand Names	Generic Name	Strength(s)	Coverage	Rx Cost	LMN, QL, Step, CPA
ANGIOTENSIN CONVERTING ENZYME INHIBITORS	LOTENSIN	Benazepril HCl	5mg, 10mg, 20mg, 40mg	Generic	\$\$\$	
	CAPOTEN	Captopril	12.5mg, 25mg, 50mg, 100mg	Generic	\$\$\$	
	VASOTEC	Enalapril Maleate	2.5mg, 5mg, 10mg, 20mg	Generic	\$\$	
	MONOPRIL	Fosinopril Sodium	10mg, 20mg, 40mg	Generic	\$\$	
	ZESTRIL	Lisinopril	2.5mg, 5mg, 10mg, 20mg, 30mg	Generic	\$\$	
	ACCUPRIL	Quinapril HCl	5mg, 10mg, 20mg, 40mg	Generic	\$\$\$	
	ALTACE	Ramipril	1.25mg, 2.5mg, 5mg, 10mg	Generic	\$\$\$	
ANGIOTENSIN II RECEPTOR ANTAGONISTS	AVAPRO	Irbesartan	75mg, 150mg, 300mg	Brand	\$\$\$	Step: losartan potassium
	COZAAR	Losartan Potassium	25mg, 50mg, 100mg	Generic	\$\$	
	BENICAR	Olmесartan Medoxomil	5mg, 20mg, 40mg	Generic	\$\$\$	Step: losartan potassium
	BENICAR HCT	Olmесartan Medoxomil -HCTZ	20-12.5mg, 40-12.5mg, 40-25mg	Generic	\$\$\$	Step: losartan potassium HCT
	MICARDIS	Telmisartan	20mg, 40mg, 80mg	Generic	\$\$\$	Step: losartan potassium
ANTIARRHYTHMICS	DIOVAN	Valsartan	40mg, 80mg, 160mg, 320mg	Generic	\$\$	
	PACERONE	Amiodarone HCl	200mg	Generic	\$\$\$	
	TAMBOCOR	Flecainide Acetate	50mg, 100mg, 150mg, 200mg	Generic	\$\$\$\$\$	
	RHYTHMOL	Propafenone HCl	150mg, 225mg, 325mg, 425mg	Generic	\$\$\$\$\$	
	BETAPACE	Sotalol HCl	80mg, 120mg, 160mg, 240mg	Generic	\$\$\$\$\$	
ANTICOAGULANTS	SAVAYSA	Edoxaban	15mg; 30mg; 60mg	Brand	\$\$\$\$	Step: Warfarin and Xarelto
	XARELTO	Rivaroxaban	10MG, 15MG, 20MG, 15-20MG Starter Kit	Brand	\$\$\$\$	Step: Warfarin
BETA-ADRENERGIC ANTAGONISTS	TENORMIN	Atenolol	25mg, 50mg, 100mg	Generic	\$\$\$	
	ZEBETA	Bisoprolol Fumarate	5mg, 10mg	Generic	\$\$\$\$	
	COREG	Carvedilol	3.125mg, 6.25mg, 12.5mg, 25mg	Generic	\$\$\$\$	
	NORMODYNE	Labetalol HCl	100mg, 200mg, 300mg	Generic	\$\$\$	
	TOPROL XL	Metoprolol Succinate	25mg, 50mg, 100mg, 200mg	Generic	\$\$\$\$	
	LOPRESSOR	Metoprolol Tartrate	25mg, 50mg, 100mg	Generic	\$\$\$	
	CORGARD	Nadolol	20mg, 40mg, 80mg	Generic	\$\$	
	INDERAL	Propranolol HCl	20mg, 60mg, 80mg, 120mg, 160mg	Generic	\$\$\$	
	HEMANGEO	Propranolol HCl Oral Soln	4.28mg/mL	Brand	\$\$\$\$	CPA
	SOTYLIZE	Sotalol HCl Oral Sol	5mg/mL	Brand	\$\$\$\$	CPA
CALCIUM ANTAGONISTS	NORVASC	Amlodipine Besylate	2.5mg, 5mg, 10mg	Generic	\$\$\$	
	CARDIZEM	Diltiazem HCl	30mg, 60mg, 90mg, 180mg, 240mg, 120mg/24, 180mg/24, 240mg/24, 300mg/24, 360mg/24	Generic	\$\$\$\$	
	CARDENE	Nicardipine HCl	20mg, 30mg	Generic	\$\$	
	PROCARDIA	Nifedipine	10mg, 20mg	Generic	\$\$	
	PROCARDIA XL	Nifedipine SR	30mg, 60mg, 90mg	Generic	\$\$\$\$	
	ISOPTIN	Verapamil HCl	40mg, 80mg, 180mg, 240mg	Generic	\$\$\$	
CARDIAC GLYCOSIDES	LANOXIN	Digoxin	0.125mg, 0.25mg	Generic	\$\$\$	Specialty
CARDIOVASCULAR MISC	CINRYZE	C1 Inhibitor	500u	Brand	\$\$\$\$\$\$	CPA
	CORLANOR	Ivabradine HCL	5mg, 7.5mg	Brand	\$\$\$\$	CPA
CENTRALLY ACTING ANTIHYPERTENSIVES	CATAPRES	Clonidine HCl	0.1mg, 0.2mg, 0.3mg	Generic	\$\$\$	
	TENEX	Guanfacine HCl	1mg, 2mg	Generic	\$\$\$\$	
	ALDOMET	Methyldopa	250mg, 500mg	Generic	\$\$\$\$	
COMBINATION ANTIHYPERTENSIVES	LOTREL	Amlodipine Besylate-Benazepril HCl	2.5-10mg, 5-10mg, 5-20mg, 10-20mg	Generic	\$\$\$	
	AZOR	Amlodipine Besylate-Olmесartan Medoxomil	5-20mg, 5-40mg, 10-20mg, 10-40mg	Generic	\$\$\$\$	Step: amlodipine
	LOTENSIN HCT	Benazepril & Hydrochlorothiazide	5-6.5mg, 10-12.5mg, 20-12.5mg, 20-25mg	Generic	\$\$\$	
	CAPOZIDE	Captopril & Hydrochlorothiazide	25-15mg, 25-25mg, 50-15mg, 50-25mg	Generic	\$\$\$	
	VASERETIC	Enalapril Maleate & Hydrochlorothiazide	25mg	Generic	\$\$\$	

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	MONOPRIL HCT	Fosinopril Sodium & Hydrochlorothiazide	10-12.5mg, 20-12.5mg	Generic	\$\$\$\$	
	AVALIDE	Irbesartan-Hydrochlorothiazide	150-12.5mg, 300-12.5mg, 300-25mg	Generic	\$\$	Step: losartan potassium HCT
	ZESTORETIC	Lisinopril & Hydrochlorothiazide	10-12.5mg, 20-12.5mg, 20-25mg	Generic	\$\$\$	
	HYZAAR	Losartan Potassium & Hydrochlorothiazide	50-12.5mg, 100-12.5mg, 100-25mg	Generic	\$\$\$	
	ENTRESTO	Sacubitril-Valsartan	24-26MG, 97-103MG, 49-51MG	Brand	\$\$\$\$	CPA
DIURETICS, LOOP	DIOVAN HCT	Valsartan-Hydrochlorothiazide	80-12.5mg, 160-12.5mg, 160-25mg, 320-12.5mg, 320-25mg	Generic		
	BUMEX	Bumetanide	0.5mg, 1mg, 2mg,	Generic	\$\$\$	
	EDECIN	Ethacrynic Acid	25mg	Generic	\$\$\$	CPA
DIURETICS, POTASSIUM SPARING	LASIX	Furosemide	20mg, 40mg, 80mg	Generic	\$\$	
	MIDAMOR	Amiloride HCl	5mg	Generic	\$\$\$\$	Step: spironolactone
	ALDACTONE	Spironolactone	25mg, 50mg, 100mg	Generic	\$\$\$	
	ALDACTAZIDE	Spironolactone & Hydrochlorothiazide	25/25mg	Generic	\$\$\$	
DIURETICS, THIAZIDE & RELATED DRUGS	MAXZIDE	Triamterene & Hydrochlorothiazide	37.5-25mg, 50-25mg, 75-50mg	Generic	\$\$\$	
	CHLOROTHIAZ TAB 250MG	Chlorothiazide Tab	250mg	Generic	\$\$\$	
	CHLORTHALIDONE	Chlorthalidone	25mg	Brand	\$\$	
	HYGROTON	Chlorthalidone	25mg, 50mg, 100mg	Generic	\$\$\$\$	
	HYDRODIURIL	Hydrochlorothiazide	12.5mg, 25mg, 50mg	Generic	\$\$\$	
	LOZOL	Indapamide	1.25mg, 2.5mg	Generic	\$\$\$	
	ZAROXOLYN	Metolazone	2.5mg, 5mg, 10mg	Generic	\$\$\$\$	
HEPARIN & HEPARIN ANTAGONISTS	FRAGMIN	Dalteparin Sodium	2500u/0.2ml, 5000u/0.2ml, 7500u/0.3ml, 10000u/ml, 25000u/ml, 9500u, 12500u, 15000u, 18000u	Brand	\$\$\$\$\$\$	Specialty, Available at Retail Age >18 QL= 30 syringes/30 days QL= 10 vials/31 days
	LOVENOX	Enoxaparin Sodium	30mg/0.3ml, 40mg/0.4ml, 60mg/0.6ml, 80mg/0.8ml, 100mg/ml, 150mg/ml, 120mg/0.8ml	Generic	\$\$\$\$\$	QL= 28 syringes/14 days Age 18 to 75
	ARIXTRA	Fondaparinux Sodium	2.5mg/0.5ml, 5mg/0.4ml, 7.5mg/0.6ml, 10mg/0.8ml	Generic	\$\$\$\$\$	QL= 30 syringes/30 days
	HEPARIN SOD	Heparin Sodium	1000u/ml, 5000u/ml	Generic	\$	
	HEPARIN LOCK	Heparin Sodium Lock Flush	10U, 100U	Generic	\$	
	INNOHEP	Tinzaparin Sodium	20000u/ml	Brand	\$\$\$\$\$	Age >18 QL= 31 vials/31 days
HMG-COA REDUCTASE INHIBITORS	LIPITOR	Atorvastatin Calcium	10mg, 20mg, 40mg, 80mg	Generic	\$\$\$\$	
	MEVACOR	Lovastatin	20mg, 40mg	Generic	\$\$\$\$	
	PRAVACHOL	Pravastatin Sodium	10mg, 20mg, 40mg, 80mg	Generic	\$\$\$\$	
	CRESTOR	Rosuvastatin Calcium	5mg, 10mg, 20mg, 40mg	Generic	\$\$\$\$	Step: 90-day Trial of the following: Atorvastatin
	SIMVASTATIN	Simvastatin	80mg	Generic	\$\$\$\$	CPA
HYPOLIPOPROTEINEMICS	ZOCOR	Simvastatin	5mg, 10mg, 20mg, 40mg, 80mg	Generic	\$\$\$	CPA (80mg)
	QUESTRAN	Cholestyramine	4g	Generic	\$\$\$	
	TRILIPIX	Choline Fenofibrate	45mg, 135mg	Generic	\$\$\$\$\$	Step: micronized fenofibrate
	COLESTID	Colestipol HCl	1g, 5g, 5/7.5g	Generic	\$\$\$\$	Step: Cholestyramine
	ZETIA	Ezetimibe	10mg	Generic	\$\$\$	CPA
	TRICOR	Fenofibrate Nanocrystals	34mg, 48mg, 54mg, 67mg, 145mg, 200mg	Brand	\$\$\$\$\$	Step: micronized fenofibrate
	LOFIBRA	Fenofibrate	54mg, 67mg, 134mg, 160mg, 200mg	Generic	\$\$\$	
	LOPID	Gemfibrozil	600mg	Generic	\$\$\$	
	KYNAMRO	Mipomersen Sodium Inj	200mg/mL	Brand	\$\$\$\$\$\$	Specialty CPA
	NIASPAN	Niacin	500mg, 750mg, 1000mg	Brand	\$\$\$\$	
IV LINE MAINTENANCE	LOVAZA	Omega-3-acid Ethyl Esters	1gm	Generic	\$\$\$	CPA
NITRATES	SOD CHLORIDE	Sodium Chloride	0.9%	Generic	\$	
	ISORDIL	Isosorbide Dinitrate	5mg, 10mg, 20mg, 30mg, 40mg	Generic	\$\$\$\$	
	IMDUR	Isosorbide Mononitrate	10mg, 20mg, 30mg, 60mg, 120mg	Generic	\$\$\$\$	
	NITRO-BID	Nitroglycerin	2%	Generic	\$\$\$	
	NITRO-DUR	Nitroglycerin	2.5mg, 6.5mg, 0.1mg/HR, 0.2mg/HR, 0.4mg/HR, 0.6mg/HR	Generic	\$\$\$\$	Step: nitroglycerin 2% ointment
	NITROSTAT	Nitroglycerin	0.3mg, 0.4mg, 0.6mg	Brand	\$\$\$\$	
ORAL ANTICOAGULANTS, VITAMIN K	COUMADIN	Warfarin Sodium	1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg	Generic	\$\$\$	
PERIPHERAL VASCULAR DISEASE	AGGRENOX	Aspirin-Dipyridamole	25-200mg	Brand	\$\$\$	Step: Dipyridamole & aspirin OR Plavix

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**GCHP List of Covered Drugs  
Therapeutic Category**

PLATELET INHIBITORS	PLETAL	Cilostazol	50mg, 100mg	Generic	\$\$\$		
	TRENTAL	Pentoxifylline	400mg	Generic	\$\$\$\$		
	PLAVIX	Clopidogrel Bisulfate	75mg, 300mg	Generic	\$\$\$		
	EFFIENT	Prasugrel HCl	5mg, 10mg	Brand	\$\$\$\$	STEP: Clopidogrel bisulfate	
	BRILINTA	Ticagrelor	60mg, 90mg	Brand	\$\$\$\$	Step: Clopidogrel bisulfate	
POTASSIUM SUPPLEMENTS	MICRO-K	Potassium Chloride	8mEq, 10mEq, 20mEq	Generic	\$		
PULMONARY HYPERTENSION	LETAIRIS	Ambrisentan	5mg, 10mg	Brand	\$\$\$\$\$\$	Specialty CPA	
	TRACLEER	Bosentan	62.5mg, 125mg	Brand	\$\$\$\$\$\$	Specialty CPA	
	EPOPROSTENOL	Epoprostenol Sodium	0.5mg, 1.5mg	Generic	\$\$\$\$\$\$	Specialty CPA	
	FLOLAN	Epoprostenol Sodium	0.5mg, 1.5mg	Brand	\$\$\$\$\$\$	Specialty CPA	
	VENTAVIS	Iloprost	10mcg/ml, 20mcg/ml	Brand	\$\$\$\$\$\$	Specialty CPA	
	OPSUMIT	Macitentan	10mg	Brand	\$\$\$\$\$\$	Specialty CPA	
		ADEMPAS	Riociguat	0.5mg; 1mg; 2.5mg	Brand	\$\$\$\$	Specialty CPA
				200mcg, 400mcg, 800mcg, 1200mcg,			
		UPTRAVI	Selexipag	1400mcg, 1600mcg, 200/800mcg	Brand	\$\$\$\$\$\$	Specialty CPA
		REVATIO	Sildenafil Citrate	20mg, 10mg/12.5ml	Generic	\$\$\$\$\$\$	Specialty CPA
	ADCIRCA	Tadalafil	20mg	Brand	\$\$\$\$\$\$	Specialty CPA	
	REMODULIN	Treprostinil Sodium	1mg/ml, 2.5mg/ml, 5mg/ml, 10mg/ml	Brand	\$\$\$\$\$\$	Specialty CPA	
REFRACTORY ANGINA	RANEXA	Ranolazine	500mg, 1000mg	Brand	\$\$\$\$	CPA	
THERAPEUTIC VITAMINS & MINERALS	ROCALTROL	Calcitriol	0.25mcg, 0.5mcg	Generic	\$\$\$\$		
	HECTOROL	Doxercalciferol	0.5mcg, 1mcg, 2.5mcg, 2mcg/ml,	Generic	\$\$\$\$	Step: Rocaltrol	
	FOLTX	Folic Acid	4mcg/2ml	Generic	\$		
VASODILATOR ANTIHYPERTENSIVES	CARDURA	Doxazosin Mesylate	1mg, 2mg, 4mg, 8mg	Generic	\$\$\$\$		
	APRESOLINE	Hydralazine HCl	10mg, 25mg, 50mg, 100mg	Generic	\$\$\$\$		
	MINIPRESS	Prazosin HCl	1mg, 2mg, 5mg	Generic	\$\$\$		
	HYTRIN	Terazosin HCl	1mg, 2mg, 5mg, 10mg	Generic	\$\$\$		
VASOPRESSORS	NORTHERA	Droxidopa		Brand		Specialty CPA	
	PROAMATINE	Midodrine HCl	2.5mg, 5mg, 10mg	Generic	\$\$\$		
<b>DERMATOLOGICAL</b>							
Therapeutic Class	Brand Names	Generic Name	Strength(s)	Coverage	Rx Cost	LMN, QL, Step, CPA	
						CPA History of treatment failure to both of the following: (1) oral antibiotics (e.g. erythromycin, tetracycline, doxycycline) (2) topical therapy (e.g. benzoyl peroxide, erythromycin, clindamycin)	
ANTIACNE	DIFFERIN	Adapalene	0.1%, 0.3%	Generic	\$\$\$\$		
	EPIDUO GEL	Adapalene-Benzoyl Peroxide Gel	0.1-2.5 %; 0.3-2.5%	Generic	\$\$\$\$		
	FINACEA, FINACEA PLUS KIT	Azelaic Acid	15%, Kit	Brand	\$\$\$\$	Step: Metrogel or Metro lotion	
ANTIPIRURITIC	BENZAMYCIN	Benzoyl Peroxide-Erythromycin	5-3%	Generic	\$\$\$\$		
	CLEOCIN-T	Clindamycin Phosphate	1%, 2%	Generic	\$\$\$\$		
	ERYTHROMYCIN BASE	Erythromycin		Generic	\$\$\$		
	METROLOTION	Metronidazole	0.75%	Generic	\$\$\$		
	METROGEL	Metronidazole Gel	0.75%	Generic	\$\$\$		
	RETIN-A	Tretinoin	0.25%, 0.375%, 0.05%, 0.1%	Generic	\$\$\$\$	Age >34	
	ATARAX	Hydroxyzine HCl	10mg, 25mg, 50mg	Generic	\$		
	VISTARIL	Hydroxyzine Pamoate	25mg, 50mg, 100mg	Generic	\$		
ANTIPSORIASIS & ANTIECZEMA	AMEVIVE	Alefacept	15mg	Brand	\$\$\$\$\$\$	Specialty Step: Methotrexate and Cyclosporine and Enbrel	
	CALCIPOTRIENE	Calcipotriene	0.005% OIN	Brand	\$\$\$\$	CPA Step: TWO topical corticosteroids	
	DOVONEX	Calcipotriene	0.005% SOL	Generic	\$\$\$\$	CPA	
	VECTICAL	Calcitriol	3mcg/gm	Brand	\$\$\$\$	CPA	
	SELSUN	Selenium Sulfide	2.25%, 2.5%	Generic	\$		
	KLARON	Sulfacetamide Sodium	10%	Generic	\$\$\$\$	Step: Clindamycin Phosphate Topical OR Erythromycin Topical	
SCABICIDES	TAZORAC	Tazarotene	0.05%, 0.1%	Brand	\$\$\$	CPA	
	EURAX	Crotamiton	10%	Brand	\$\$\$	Step: Permethrin	
TOPICAL CORTICOSTEROID	LINDANE	Lindane	1%	Generic	\$\$\$		
	ELIMITE	Permethrin	5%	Generic	\$\$\$\$		
	DIPROSONE	Betamethasone Dipropionate	5%	Generic	\$\$\$		

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**GCHP List of Covered Drugs  
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	DIPROLENE TEMOVATE	Betamethasone Dipropionate Augmented Clobetasol Propionate	5% 5%	Generic Generic	\$\$\$ \$\$	
	DESOWEN TOPICORT FLORONE LIDEX ELOCON KENALOG	Desonide Desoximetasone Diflorasone Diacetate Fluocinonide Mometasone Furoate Triamcinolone Acetonide	5% 0.05%, 0.25% 0.05% 0.05% 0.1% 0.025%, 0.1%, 0.5%	Generic Generic Generic Generic Generic	\$\$\$\$ \$\$ \$\$\$ \$\$ \$\$\$ \$\$	CPA Step: TWO topical corticosteroids
TOPICAL DERMATOLOGICAL	MIRVASO CARAC	Brimonidine Tartrate Gel Fluorouracil	0.33% 0.5%	Brand Brand	\$\$\$\$ \$\$\$\$	CPA
	ALDARA	Imiquimod	5%	Generic	\$\$\$	CPA QL= 120 days/365 days
	SOOLANTRA ELIDEL PROTOPIC	Ivermectin Pimecrolimus Tacrolimus	1% 1% 0.03%, 0.1%	Brand Brand Generic	\$\$\$\$ \$\$\$\$ \$\$\$\$	CPA CPA CPA

**EAR, NOSE, THROAT**

Therapeutic Class	Brand Names	Generic Name	Strength(s)	Coverage	Rx Cost	LMN, QL, Step, CPA
DRUGS AFFECTING THE EAR	AURALGAN CIPRODEX	Benzocaine-Antipyrine Ciprofloxacin-Dexamethasone		Generic Brand	\$\$\$ \$\$\$\$	
	ACETASOL HC CORTISPORIN OCUFLOX CERUMENEX	Hydrocortisone w/ Acetic Acid Otic Neomycin-Colistin-HC-Thonzonium Ofloxacin Triethanolamine Oleate	2.0% 0.3%	Generic Generic Generic Brand	\$\$\$ \$\$ \$\$\$ \$\$\$	
DRUGS AFFECTING THE NOSE	ASTELIN ASTEPRO BECONASE AQ RHINOCORT AQUA	Azelastine HCl Azelastine HCl Beclomethasone Dipropionate Monohyd Budesonide	0.1% 137mcg, 0.15% 0.042% 32mcg/ACT	Generic Brand Brand Generic	\$\$\$\$ \$\$\$\$ \$\$\$\$ \$\$\$\$	QL= 2 bottles/31 days QL= 2 bottles/31 days Step: Fail one: flunisolide, fluticasone
	OMNARIS NASALIDE VERAMYST FLONASE	Ciclesonide Flunisolide Fluticasone Furoate Fluticasone Propionate	50mcg/ACT 0.025% 27.5mcg 50mcg	Brand Generic Brand Generic	\$\$\$\$ \$\$\$ \$\$\$\$ \$\$\$	Step: Fail one: flunisolide, fluticasone QL= 3 inhrs/bottles/31 days Step: Fail one: flunisolide, fluticasone QL= 1 inhrs/31 days
	NASONEX PATANASE	Mometasone Furoate Olopatadine HCl	50mcg/ACT 0.6%	Brand Generic	\$\$\$\$ \$\$\$\$	CPA Age < 4 Step: Fail one: flunisolide, fluticasone Step: fluticasone OR flunisolide OR one oral histamine OR azelastine
	DALIRESP NASACORT AQ	Roflumilast Triamcinolone Acetonide	500mcg 55mcg/ACT	Brand Brand	\$\$\$\$ \$\$\$\$	Step: LABA (Foradil OR Servevant), AND Anticholinergics (Atrovent Inhaled OR Spiriva) AND Inhaled Corticosteroids Step: Fail one: flunisolide, fluticasone

DRUGS AFFECTING THE THROAT AND MOUTH	PERIDEX	Chlorhexidine Gluconate	0.12%	Generic	\$\$\$	
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**ENDOCRINE**

Therapeutic Class	Brand Names	Generic Name	Strength(s)	Coverage	Rx Cost	LMN, QL, Step, CPA
AMYLIN ANALOGUES	SYMLIN/SYMLINPEN	Pramlintide Acetate	600mcg, 1000mcg	Brand	\$\$\$\$	CPA
ANTITHYROID DRUGS	TAPAZOLE PROPYLTHIOURACIL	Methimazole Propylthiouracil	5mg, 10mg 50mg, 100mg, 200mg, 400mg	Generic Generic	\$\$ \$\$	One of the following: a. Type 1 diabetic patients with a previous history of insulin and concurrently using insulin therapy OR b. Type 2 diabetic patients with a previous history of insulin therapy and concurrently using insulin therapy with or without sulfonylurea and/or metformin QL=7 vials/31 days QL=8 pens/31 days
BIPHOSHONATES	AREDIA	Pamidronate Disodium	30mg, 90mg	Brand	\$\$\$\$\$\$	CPA

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**GCHP List of Covered Drugs  
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DIPEPTIDYL PEPTIDASE - IV INHIB	ONGLYZA	Saxagliptin HCl	2.5mg, 5mg	Brand	\$\$\$\$	Step: Metformin
	JANUVIA	Sitagliptin Phosphate	25mg, 50mg, 100mg	Brand	\$\$\$\$	Step: Metformin
	JANUMET	Sitagliptin-Metformin HCl	50-500mg, 50-1000mg	Brand	\$\$\$\$\$	Step: Metformin
DPP-4/SGLT-2 COMBO	GLYXAMBI	Empagliflozin-Linagliptin Tab	10-5mg; 25-5mg	Brand	\$\$\$\$	Step: Jardiance OR Tradjenta
ENDOCRINE	FABRAZYME	Agalsidase beta	5mg, 35mg	Brand	\$\$\$\$\$\$	Specialty CPA
	MYOZYME	Alglucosidase Alfa	50mg	Brand	\$\$\$\$\$\$	Specialty CPA
	APOKYN	Apomorphine Hydrochloride	50mg, 100mg, 20mg/ml	Brand	\$\$\$\$\$\$	Specialty CPA
	PARLODEL	Bromocriptine Mesylate	2.5mg, 5mg	Generic	\$\$\$\$	
	CABERGOLINE	Cabergoline	0.5mg	Generic	\$\$\$\$\$\$	CPA
	PREGNYL	Chorionic Gonadotropin	10000u	Generic	\$\$\$\$\$\$	CPA
	SENSIPAR	Cinacalcet HCl	30mg, 60mg, 90mg	Brand	\$\$\$\$\$\$	Specialty CPA
	XIAFLEX	Collagenase Clostridium Histolyticum	0.9mg	Brand	\$\$\$\$\$\$	Specialty CPA
	ACTHREL	Corticotrelin Ovine Triflutate	100mcg	Brand	\$\$\$\$\$\$	Specialty CPA
	ACTHAR	Corticotropin	80u, 42u, 25u	Brand	\$\$\$\$\$\$	Step: Corticosteroids
CORTROSYN	Cosyntropin	0.25mg	Generic	\$\$\$\$	Specialty	
DESMOPRESSIN	Desmopressin Acetate	0.1mg, 0.2mg, 4mcg/ml, 0.1%	Generic	\$\$\$\$	CPA	
CERDELGA	Eliglustat Tartrate	84mg	Brand	\$\$\$\$\$\$	Specialty CPA	
NAGLAZYME	Galsulfase	1mg/ml	Brand	\$\$\$\$\$\$	Specialty CPA	
SUPPRELIN	Histrelin Acetate	50mg	Brand	\$\$\$\$\$\$	Specialty CPA	
ORTHOVISC	Hyaluronan	15mg/ml	Brand	\$\$\$\$\$\$	Specialty CPA	
SOLU-CORTEF	Hydrocortisone Sodium Succinate	100mg, 250mg, 500mg, 1000mg	Brand	\$\$\$\$\$\$	CPA	
ELAPRASE	Idursulfase	6mg/3ml	Brand	\$\$\$\$\$\$	Specialty CPA	
ELIGARD	Leuprolide Acetate	7.5mg, 22.5mg, 30mg, 45mg	Brand	\$\$\$\$\$\$	Specialty CPA	
LEUPROLIDE	Leuprolide Acetate	1mg/0.2ml, 5mg/ml 3.75mg, 7.5mg, 11.25mg, 22.5mg,	Generic	\$\$\$\$\$\$	Specialty CPA	
LUPRON	Leuprolide Acetate	30mg	Brand	\$\$\$\$\$\$	CPA	
INCRELEX	Mecasermin	40mg/4ml	Brand	\$\$\$\$\$\$	Specialty CPA	
METHERGINE	Methylergonovine Maleate	0.2 mg	Generic	\$\$\$\$		
MEDROL	Methylprednisolone	2mg, 4mg, 8mg, 16mg, 32mg	Generic	\$\$\$	Specialty	
SYNAREL	Nafarelin Acetate	2mg/ml	Brand	\$\$\$\$\$\$	CPA	
TYSABRI	Natalizumab	300mg/15ml	Brand	\$\$\$\$\$\$	Specialty CPA	
OCTREOTIDE	Octreotide Acetate	100mcg, 200mcg, 500mcg, 1000mcg, 1mg/ml, 50mcg/ml	Generic	\$\$\$\$\$\$	Specialty CPA	
SANDOSTATIN	Octreotide Acetate	10mg, 20mg, 30mg, 50mcg/ml, 100mcg, 200mcg, 500mcg, 1000mcg	Brand	\$\$\$\$\$\$	Specialty CPA	
BOTOX	OnabotulinumtoxinA	50u, 100u, 200u	Brand	\$\$\$\$\$\$	Specialty CPA	
ZEMPLAR	Paricalcitol	1mcg, 2mcg, 4mcg, 2mcg/ml, 5mcg/ml	Generic	\$\$\$\$\$\$	Step: Vitamin D sterols - doxercalciferol OR calcitriol	
SOMAVERT	Pegvisomant	10mg, 15mg, 20mg	Brand	\$\$\$\$\$\$	Specialty CPA	
SUPARTZ	Sodium Hyaluronate Intra-articular	25mg/2.5ml 0.2mg, 0.4mg, 0.6mg, 0.8mg, 1mg, 1.2mg, 1.4mg, 1.6mg, 1.8mg, 2mg,	Brand	\$\$\$\$\$\$	Specialty CPA	
GENOTROPIN	Somatropin	5mg, 12mg	Brand	\$\$\$\$\$\$	Specialty CPA	
HUMATROPE	Somatropin	5mg, 6mg, 12mg, 24mg 5mg/1.5ml, 10mg/1.5ml, 15mg/1.5ml,	Brand	\$\$\$\$\$\$	Specialty CPA	
NORDITROPIN	Somatropin	30mg/3ml	Brand	\$\$\$\$\$\$	Specialty CPA	
NUTROPIN	Somatropin	5mg, 10mg, 5mg/2ml, 20mg/2ml	Brand	\$\$\$\$\$\$	Specialty CPA	
OMNITROPE	Somatropin	5.8mg, 5mg/1.5ml, 10mg/1.5ml	Brand	\$\$\$\$\$\$	Specialty CPA	
SAIZEN	Somatropin	5mg, 8.8mg	Brand	\$\$\$\$\$\$	Specialty CPA	
SEROSTIM	Somatropin	4mg, 5mg, 6mg, 8.8mg	Brand	\$\$\$\$\$\$	Specialty CPA	
ZOMACTON	Somatropin	5mg, 10mg	Brand	\$\$\$\$\$\$	Specialty CPA	
ZORBIVE	Somatropin	8.8mg	Brand	\$\$\$\$\$\$	Specialty CPA	
THYROGEN	Thyrotropin Alfa	1.1mg	Brand	\$\$\$\$\$\$	Specialty CPA	
XURIDEN	Uridine Triacetate	2 GM	Brand	\$\$\$\$	CPA	

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**GCHP List of Covered Drugs  
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ERYTHROPOIETINS	ARANESP	Darbepoetin Alfa-Polysorbate	25mcg, 40mcg, 60mcg, 100mcg, 150mcg, 200mcg, 300mcg, 500mcg	Brand	\$\$\$\$\$\$	Specialty, Available at Retail QL= 1 inj/21 days (500mcg) QL= 2 inj/28 days (all other strengths) Specialty, Available at Retail QL= 1 vial/7 days (40,000 units) QL= 12 vials/28 days (all other strengths) Specialty, Available at Retail QL= 1 vial/7 days (40,000 units) QL= 12 vials/28 days (all other strengths)
	EPOGEN	Epoetin Alfa	2000u/ml, 3000u/ml, 4000u/ml, 10000u/ml, 20000u/ml, 40000u/ml	Brand	\$\$\$\$\$\$	
	PROCRIT	Epoetin Alfa	2000u/ml, 3000u/ml, 4000u/ml, 10000u/ml, 20000u/ml, 30000u/ml, 40000u/ml	Brand	\$\$\$\$\$\$	
GLUCOCORTICOID	DECADRON	Dexamethasone	0.5mg, 0.75mg, 1.0 mg, 1.5mg, 4mg, 6mg	Generic	\$\$\$	
	DEXAMETHASONE	Dexamethasone	2mg	Brand	\$\$\$	
	HYTONE	Hydrocortisone	0.5%, 1%, 2.5%	Generic	\$\$\$	
	DEPO-MEDROL	Methylprednisolone Acetate	40mg/ml, 80mg/ml	Generic	\$\$\$\$	
	VERIPRED 20	Prednisolone Sod Phosphate	20mg/5ml	Brand	\$\$\$\$	
	STERAPRED	Prednisone	1mg, 2.5mg, 5mg, 10mg, 20mg, 50mg	Generic	\$\$\$\$	
GLUCOSE ELEVATING	GLUCAGEN	Glucagon HCl	1mg	Brand	\$\$\$\$\$	CPA required for 2nd fill
INCRETIN MIMETICS	TANZEUM	Albiglutide for soln Pen-Injector	30mg, 50mg	Brand	\$\$\$\$	Step: Metformin
	TRULICITY	Dulaglutide Soln Pen-Injector	0.75mg; 1.5mg	Brand	\$\$\$\$	Step: Metformin
	BYDUREON	Exenatide	2mg Ext Release Susp	Brand	\$\$\$\$\$	Step: Metformin
	BYETTA	Exenatide	5mcg, 10mcg	Brand	\$\$\$\$	Step: Metformin
	VICTOZA	Liraglutide	18mg/3ml	Brand	\$\$\$\$	Step: Metformin
INSULIN	NOVOLOG	Insulin Aspart	70/30, 100u/ml	Brand	\$\$\$\$	
	TRESIBA FLEX	Insulin Degludec Sol Pen Inj	100IU, 200IU	Brand	\$\$\$\$\$	
	LEVEMIR, FLEXPEN	Insulin Detemir	100u/ml	Brand	\$\$\$\$	CPA Member must have ONE of the following medically documented issues: (1) Unable to draw up insulin into a syringe or self-administer, due to mechanical, physical, or environmental factors (2) Visual Impairment (3) Has severe phobia to traditional syringes and needles as documented in the patient's medical records.
	BASAGLAR	Insulin Glargine	100 UNIT/ML	Brand	\$\$\$\$	CPA Member must have ONE of the following medically documented issues: (1) Unable to draw up insulin into a syringe or self-administer, due to mechanical, physical, or environmental factors (2) Visual Impairment (3) Has severe phobia to traditional syringes and needles as documented in the patient's medical records (4) use a Disetronic Insulin Pump (D-TRONplus)
	LANTUS	Insulin Glargine	100u/ml, 500u/ml	Brand	\$\$\$\$	CPA (Pen Only) Member must have failed Basaglar and have ONE of the following medically documented issues: (1) Unable to draw up insulin into a syringe or self-administer, due to mechanical, physical, or environmental factors (2) Visual Impairment (3) Has severe phobia to traditional syringes and needles as documented in the patient's medical records (4) use a Disetronic Insulin Pump (D-TRONplus)

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Therapeutic Category**

TOUJEO SOLO	Insulin Glargine	300Units/mL	Brand	\$\$\$\$
SOLIQUA	Insulin Glargine-Lixisenatide	100-33 Unit-MCG/ML	Brand	\$\$\$\$
APIDRA	Insulin Glulisine	100u/ml	Brand	\$\$\$\$
HUMULIN N	Insulin Isophane	100u/ml	Brand	\$\$\$
HUMULIN R	Insulin Isophane	100u/ml, 500u/ml	Brand	\$\$\$
NOVOLIN N	Insulin Isophane	100u/ml	Brand	\$\$\$
NOVOLIN R	Insulin Isophane	100u/ml	Brand	\$\$\$
HUMULIN	Insulin Isophane & Regular	50/50, 70/30	Brand	\$\$\$
NOVOLIN	Insulin Isophane & Regular	70/30	Brand	\$\$\$

CPA (Pen Only)  
Member must have failed Basaglar and have ONE of the following medically documented issues: (1) Unable to draw up insulin into a syringe or self-administer, due to mechanical, physical, or environmental factors (2) Visual Impairment (3) Has severe phobia to traditional syringes and needles as documented in the patient's medical records (4) use a Disetronic Insulin Pump (D-TRONplus)

CPA

HUMALOG	Insulin Lispro	50/50, 75/25, 100U/mL	Brand	\$\$\$\$
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CPA (Pen Only)  
Member must have ONE of the following medically documented issues: (1) Unable to draw up insulin into a syringe or self-administer, due to mechanical, physical, or environmental factors (2) Visual Impairment (3) Has severe phobia to traditional syringes and needles as documented in the patient's medical records

HUMALOG	Insulin Lispro	200U/mL	Brand	\$\$\$\$
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CPA  
Member must have ONE of the following medically documented issues: (1) Unable to draw up insulin into a syringe or self-administer, due to mechanical, physical, or environmental factors (2) Visual Impairment (3) Has severe phobia to traditional syringes and needles as documented in the patient's medical records (4) Documented valid reason for requiring a higher potency insulin

AFREZZA	Insulin Regular (Human) Inh Pow	4 Units, 8 Units	Brand	\$\$\$\$	
INSULIN SENSITIZERS	ACTOS	Pioglitazone HCl	15mg, 30mg, 45mg	Generic	\$\$\$\$
	DUETACT	Pioglitazone HCl-Glimepiride	30-2mg, 30-4mg	Generic	\$\$\$\$
	ACTOPLUS MET	Pioglitazone HCl-Metformin HCl	15/850mg, 30/1000mg	Generic	\$\$\$\$

CPA  
Step: Metformin  
Step: Metformin & Insulin  
Step: Metformin

LIPODYSTROPHY AGENT	MYALEPT	Metreleptin for subcutaneous inj	11.3 mg	Brand	\$\$\$\$\$\$
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Specialty CPA

METOBOLIC AGENTS	CARNITOR	Levocarnitine	200mg/mL Inj; 1GM/10mL Sol; 330mg tab	Generic	\$\$\$
MINERALOCORTICOID	FLORINEF	Fludrocortisone Acetate	0.1mg	Generic	\$\$\$
MINERALS	LURIDE	Sodium Fluoride	0.5mg	Generic	\$\$\$
ORAL HYPOGLYCEMIC	PRECOSE	Acarbose	25mg, 50mg, 100mg	Generic	\$\$\$
	AMARYL	Glimepiride	1mg, 2mg, 4mg	Generic	\$\$\$
	GLUCOTROL	Glipizide	5mg, 10mg	Generic	\$\$\$
	GLUCOTROL XL	Glipizide SR	2.5mg, 5mg, 10mg	Generic	\$\$\$
	MICRONASE	Glyburide	1.25mg, 2.5mg, 5mg	Generic	\$\$\$
	GLUCOVANCE	Glyburide-Metformin	1.25-250mg, 2.5-500mg, 5-500mg	Generic	\$\$\$\$
	GLUCOPHAGE	Metformin HCl	500mg, 750mg, 850mg, 1000mg	Generic	\$\$\$
	RIOMET	Metformin HCl	500mg/5ml	Brand	\$\$\$\$
	GLUCOPHAGE XR	Metformin HCl SR	500mg, 750mg	Generic	\$\$\$

\$ ----- \$1 to \$10  
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**GCHP List of Covered Drugs  
Therapeutic Category**

OSTEOPOROSIS	GLUMETZA	Metformin HCl Tab SR 24HR Modified	500mg, 1000mg	Generic	\$\$\$\$	CPA
	FORTAMET	Metformin HCl Tab SR 24HR Osmotic	500mg, 1000mg	Generic	\$\$\$\$	CPA
	STARLIX	Nateglinide	60mg, 120mg	Generic	\$\$\$\$	
	FOSAMAX	Alendronate Sodium	5mg, 10mg, 35mg, 70mg	Generic	\$\$\$	QL= 4 tabs/28 days CPA History of failure, intolerance, or contraindication to one of the following: Actonel, Boniva (tablets or injection), Fosamax
	MIACALCIN	Calcitonin	200u/ACT	Generic	\$\$\$\$	
	MIACALCIN Injection	Calcitonin	200u/ml	Brand	\$\$\$\$	CPA History of failure, intolerance, or contraindication to one of the following: Actonel, Boniva (tablets or injection), Fosamax, AND History of failure, intolerance, or contraindication to Miacalcin Nasal Spray
	PROLIA	Denosumab	60mg/ml	Brand	\$\$\$\$\$\$	Specialty CPA Failure on two bisphosphonates CPA Intolerance or adverse reaction to formulary bisphosphonates: Actonel and Fosamax
	DIDRONEL	Etidronate Disodium	400mg	Generic	\$\$\$\$	Specialty CPA Corticosteroids
	SYNVISC	Hylan Intra-articular	8mg/ml	Brand	\$\$\$\$\$\$	CPA
	BONIVA	Ibandronate Sodium	3mg/3ml	Generic	\$\$\$\$	
	BONIVA	Ibandronate Sodium	2.5mg, 150mg	Generic	\$\$\$\$	
	ACTONEL	Risedronate Sodium	5mg, 30mg, 35mg, 75mg, 150mg	Generic	\$\$\$	
	EUFLEXXA	Sodium Hyaluronate	10mg/ml	Brand	\$\$\$\$\$\$	Specialty CPA
	FORTEO	Teriparatide	600mcg/2.4ml	Brand	\$\$\$\$\$	Specialty CPA Failed two oral biphosphonates And one injectable biosphoshonate
	RECLAST	Zoledronic Acid	5mg/100ml	Generic	\$\$\$\$\$\$	Specialty CPA
	ZOMETA	Zoledronic Acid	4mg/5ml	Generic	\$\$\$\$\$\$	Specialty CPA
Parathyroid Agents	NATPARA	Parathyroid Hormone (recombinant)	25mcg, 50mcg, 75mcg, 100mcg	Brand	\$\$\$\$\$\$	CPA Specialty
PHENYLKETONURIA AGENTS	KUVAN	Sapropterin dihydrochloride	100mg	Brand	\$\$\$\$\$\$	CPA
SGLT - II INHIBITOR	INVOKANA	Canagliflozin	100mg, 300mg	Brand	\$\$\$\$\$	Step: Metformin
	FARXIGA	Dapagliflozin Propanediol	5mg; 10mg 5-500mg; 5-1000mg;10-500mg;10-	Brand	\$\$\$\$	Step: Metformin
	XIGDUO XR	Dapagliflozin Propanediol-Metformin	1000mg	Brand	\$\$\$\$	Step: Metformin
	JARDIANCE	Empagliflozin	25mg;10mg 50/100mg;50/500mg;150/100mg;150	Brand	\$\$\$\$	Step: Metformin
SGLT - II INHIBITOR/BIGUANIDE COMBO	INVOKAMET	Canagliflozin/Metformin HCl	/500mg 50-500mg; 50-1000mg; 150-500mg;	Brand	\$\$\$\$	Step: Metformin
	INVOKAMET XR	Canagliflozin/Metformin HCl	150-1000mg 12.5-500MG, 12.5-1000MG, 5-	Brand	\$\$\$\$	Step: Metformin
	SYNJARDY	Empagliflozin-Metformin HCL	1000MG,5-500MG	Brand	\$\$\$\$	Step: Metformin
THYROID SUPPLEMENTS	DRISDOL	Ergocalciferol	50000u 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg,	Generic	\$\$\$	
	LEVOTHROID	Levothyroxine Sodium	500mcg 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg,	Generic	\$	
	LEVOXYL	Levothyroxine Sodium	150mcg, 175mcg, 200mcg, 300mcg	Generic	\$	
	SYNTHROID	Levothyroxine Sodium	25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	Brand	\$\$\$	

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**GCHP List of Covered Drugs  
Therapeutic Category**

VITAMINS	UNITHROID	Levothyroxine Sodium	25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	Generic	\$\$	
	ARMOUR THYRO	Thyroid	32.5mg, 65mg, 130mg, 195mg	Generic	\$\$	
	BETALIN-S	Thiamine HCL Inj Sol	100mg/mL	Generic	\$\$\$\$	

**GASTROINTESTINAL**

Therapeutic Class	Brand Names	Generic Name	Strength(s)	Coverage	Rx Cost	LMN, QL, Step, CPA
ANTIDIARRHEAL	LOMOTIL	Diphenoxylate w/ Atropine	2.5mg	Generic	\$\$	
	IMODIUM	Loperamide HCl	2mg	Generic	\$\$	
ANTIEMETIC	GRANISETRON	Granisetron HCl	1mg, 0.1mg/ml, 1mg/ml, 4mg/4ml,	Generic	\$\$\$\$\$\$	Specialty CPA
	ALOXI	Palonosetron HCl	0.25mg	Generic	\$\$\$\$\$\$	Specialty QL= 1 vial/31 days
ANTISPASMODICS/ DRUGS AFFECT GI MOTILITY	BENTYL	Dicyclomine HCl	10mg, 20mg	Generic	\$\$\$	
	LEVBID	Hyoscyamine Sulfate	0.0125mg, 0375mg	Generic	\$\$	
	REGLAN	Metoclopramide HCl	5mg, 10mg	Generic	\$\$	
ANTIULCER	PEPCID	Famotidine	40mg, 40mg/5ml	Generic	\$\$\$	QL= 150mL/30 days
	CYTOTEC	Misoprostol	100mcg, 200mcg	Generic	\$\$\$\$	QL= 372 tabs/365 days (200mcg), 372 tabs/365 days (100mcg)
	ZANTAC	Ranitidine HCl	300mg, 75mg/5ml	Generic	\$\$\$	QL= 310ml/31 days (syrup)
	CARAFATE	Sucralfate	1g	Generic	\$\$\$\$	
	SUCRALFATE	Sucralfate	1gm/10ml	Brand	\$\$	
APPETITE STIMULANT	MEGACE	Megestrol Acetate	40mg/ml	Generic	\$\$\$\$	
BILE ACID AGENTS	CHOLBAM	Cholic Acid	50mg, 250mg	Brand	\$\$\$\$\$\$\$	CPA
GI DRUGS	CREON	Amy-Lip-Prot	5, 10, 20, 6000u, 12000u, 24000u	Brand	\$\$\$\$	
	COLAZAL	Balsalazide Disodium	750mg	Generic	\$\$\$\$	
	UCERIS	Budesonide Rectal Foam	2mg/Act	Brand	\$\$\$\$	Step: Topical Mesalamine; Oral Aminosaliclates; or Topical Hydrocortisone
	CIMZIA	Certolizumab Pegol	200mg/ml	Brand	\$\$\$\$\$\$	Specialty CPA
	EVOXAC	Cevimeline HCl	30mg	Brand	\$\$\$\$\$\$	Specialty CPA
	PROCYSBI	Cysteamine Bitartrate	25mg; 75mg	Brand	\$\$\$\$\$	Specialty CPA
	RAVICTI	Glycerol Phenylbutyrate Liquid	1.1 gm	Brand	\$\$\$\$\$\$\$	CPA
	ANALPRAM-HC	Hydrocortisone Acetate w/ Pramoxine	1-1%, 1-2.5%, 2.5%, 2.5-1%	Generic	\$\$\$\$	
	ASACOL, ASACOL HD	Mesalamine	400mg, 800mg	Brand	\$\$\$	CPA
	CANASA	Mesalamine	1000mg	Generic	\$\$\$\$	
	Delzicol	Mesalamine	400mg	Brand	\$\$\$\$	CPA
	LIALDA	Mesalamine	1.2g	Brand	\$\$\$\$	CPA
	PENTASA	Mesalamine	250mg, 500mg	Brand	\$\$\$\$	CPA
	DIPENTUM	Olsalazine Sodium	250mg	Brand	\$\$\$\$	CPA
	GOLYTELY	PEG 3350-KCl-Na Bicarb-NaCl-Na Sulfate		Generic	\$\$\$\$	
	NULYTELY	PEG 3350-KCl-Sod Bicarb-NaCl		Generic	\$\$\$\$	
	SALAGEN	Pilocarpine HCl	5mg, 7.5mg	Generic	\$\$\$	
	AZULFIDINE	Sulfasalazine	500mg	Generic	\$\$\$	
	URSO, URSO FORTE	Ursodiol	250mg, 500mg	Generic	\$\$\$\$	
HELICOBACTER PYLORI	PREVPAC	Amoxicillin-Clarithro-Lansopraz		Generic	\$\$\$\$	
	HELIDAC	Metronidaz-Tetracyc-Bis		Brand	\$\$\$\$	
IRRITABLE BOWEL	LINZESS	Linaclotide	145mcg, 290mcg	Brand	\$\$\$\$	QL= 31 caps/31 days Step: IBS: Linaclotide OIC: Colace
	AMITIZA	Lubiprostone	8mcg, 24mcg	Brand	\$\$\$\$	QL=62 caps/31 days
MISCELLANEOUS GI DRUGS	PHOSLO	Calcium Acetate	667mg	Generic	\$\$	
	CEPHULAC	Lactulose	10g/15ml, 20g/30ml	Generic	\$\$\$\$	
	RENAGEL	Sevelamer	400mg, 800mg	Brand	\$\$\$\$\$	
	REVELA	Sevelamer Carbonate	800mg, 0.8g, 2.4g	Brand	\$\$\$\$\$	
PROTON PUMP INHIBITORS	DEXILANT (formerly KAPIDEX)	Dexlansoprazole	30mg, 60mg	Brand	\$\$\$\$	Step: Failure of two: omeprazole, pantoprazole QL= 31 caps/packets/31 days
	PREVACID	Lansoprazole	15mg; 30mg	Generic	\$\$\$\$	
	PRIOSECC	Omeprazole	10mg, 20mg, 40mg	Generic	\$\$\$	QL= 31 caps/31 days
	PROTONIX	Pantoprazole	20mg, 40mg	Generic	\$\$\$	QL= 31 caps/packets/31 days

**HEMATOLOGICAL**

Therapeutic Class	Brand Names	Generic Name	Strength(s)	Coverage	Rx Cost	LMN, QL, Step, CPA
CHELATING AGENTS	EXJADE	Deferasirox	125mg, 250mg, 500mg	Generic	\$\$\$\$\$\$	Specialty
	CHEMET	Succimer	100MG	Brand	\$\$\$\$\$\$	CPA

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**GCHP List of Covered Drugs  
Therapeutic Category**

HEMOSTATICS	AMINOCAPROIC ACID	Aminocaproic Acid	250mg/ml, 500mg	Generic	\$\$\$\$\$\$	Specialty CPA
	THROMBAT III	Antithrombin III	500u, 1000u	Brand	\$\$\$\$\$\$	Specialty CPA
	REDISOL	Cyanocobalamin Inj Sol	1000mcg/mL	Generic	\$\$	CPA
	DEFEROXAMINE	Deferoxamine Mesylate	500mg, 2g	Generic	\$\$\$\$\$\$	Specialty CPA
	STIMATE	Desmopressin Acetate	1.5mg/ml	Brand	\$\$\$\$\$\$	Specialty CPA
	CEREZYME	Imiglucerase	200u, 400u	Brand	\$\$\$\$\$\$	Specialty CPA
PLATELET INHIBITORS	MEPHYTON	Phytonadione	5MG	Brand	\$\$	CPA
	AQUA-MEPHYTON	Phytonadione Inj Sol	1mg/0.5mL	Generic	\$\$\$	
	AGRYLIN	Anagrelide HCL	0.5mg, 1 mg	Generic	\$\$\$\$	

**IMMUNOLOGICALS & VACCINES**

Therapeutic Class	Brand Names	Generic Name	Strength(s)	Coverage	Rx Cost	LMN, QL, Step, CPA
IMMUNOLOGICALS & VACCINES	KINERET	Anakinra		Brand	\$\$\$\$\$\$	Specialty CPA
	THYMOGLOBULIN	Anti-Thymocyte Globulin	25mg	Brand	\$\$\$\$\$\$	Specialty CPA
	ADACEL/BOOSTRIX	Dip/Pert/Tet Adsorbed Vaccine	Unit of dose	Brand	\$\$\$\$	Approved for Age > 18
	DAPTACEL/INFANRIX	Dip/Pert/Tet Vaccine	Unit of dose	Brand	\$\$\$\$	Approved for Age > 18
	COPAXONE/GLATOPA	Glatiramer Acetate	20mg/ml; 40mg/mL	Generic	\$\$\$\$\$\$	Specialty CPA
	TWINRIX	Hepatitis A (Inact)-Hep B (Recomb) Vac		Brand	\$\$\$\$\$\$	CPA
	HYPERHEP	Hepatitis B Immune Globulin		Brand	\$\$\$\$\$\$	Specialty CPA
	ENGERIX	Hepatitis B Vaccine	10mcg/0.5ml, 20mcg/ml	Brand	\$\$\$\$\$\$	CPA
	GARDASIL/CERVARIX/GARDASIL 9	Human Pappillomavirus Vaccine	Unit of dose	Brand	\$\$\$\$	Approved for Age > 18
	CARIMUNE	Immune Globulin	3g, 6g, 12g	Brand	\$\$\$\$\$\$	Specialty; Available at Retail CPA
	FLEBOGAMMA	Immune Globulin	5%, 10%	Brand	\$\$\$\$\$\$	Specialty CPA
	GAMASTAN	Immune Globulin		Brand	\$\$\$\$\$\$	Specialty CPA
	GAMMAGARD SD	Immune Globulin	1g/10ml, 2.5g/25ml, 5g/50ml, 10g/100ml, 20g/200ml, 30g/300ml, 0.5g, 2.5g, 5g, 10g	Brand	\$\$\$\$\$\$	Specialty CPA
	GAMUNEX	Immune Globulin	10%, 1g/10ml, 2.5g/25ml, 5g/5ml, 10g/100ml, 20g/200ml	Brand	\$\$\$\$\$\$	Specialty CPA
	OCTAGAM	Immune Globulin	2.5g, 5g, 10g, 25g	Brand	\$\$\$\$\$\$	Specialty CPA
	PRIVIGEN	Immune Globulin	5g, 10g, 20g	Brand	\$\$\$\$\$\$	CPA
	FLUZONE/FLUVIRIN/ FLUMIST	Influenza Virus Vaccine	Unit of Dose	Brand	\$\$	
	INTRON-A	Interferon Alfa-2B	3u, 5u, 10u, 18u, 25u, 50u	Brand	\$\$\$\$\$\$	Specialty QL= 2 inj/31 days
	ALFERON N	Interferon Alfa-n3	5000000u/ml	Brand	\$\$\$\$\$\$	Specialty
	AVONEX	Interferon Beta-1a	30mcg	Brand	\$\$\$\$\$\$	Specialty CPA
	REBIF	Interferon Beta-1a	22mcg/0.5ml, 44mcg/0.5ml	Brand	\$\$\$\$\$\$	Specialty CPA
	BETASERON	Interferon Beta-1b	0.3mg	Brand	\$\$\$\$\$\$	Specialty Step: Extavia
	ACTIMMUNE	Interferon Gamma-1B	2000000u/0.5ml	Brand	\$\$\$\$\$\$	Specialty CPA
	M-M-R II	Measles, Mumps, and Rubella Virus Vaccine	Unit of dose	Brand	\$\$\$\$	Approved for Age > 18
	BEXSERO/ TRUMENBA	Meningococcal Group B Vaccine	Unit of dose	Brand	\$\$\$\$	Approved for Age > 18
	MENVEO	Meningococcal Oligosachcharide Diphtheria Conjugate Vaccine	Unit of dose	Brand	\$\$\$\$	Approved for Age > 18
	MENACTRA	Meningococcal Polysaccharide Diphtheria Conjugate Vaccine	Unit of dose	Brand	\$\$\$\$	Approved for Age > 18
	MENOMUNE	Meningococcal Polysaccharide Vaccine	Unit of dose	Brand	\$\$\$\$	Approved for Age > 18
	PREVNAR 13 INJ	Pneumococcal 13-Valent Conjugate Vaccine	N/A	Brand	\$\$\$\$	
	PREVNAR 23 INJ	Pneumococcal Vaccine Polyvalent Inj	N/A	Brand	\$\$\$\$	
	RABAVERT/IMOVAX	Rabies Vaccine	Unit of dose	Brand	\$\$\$\$	Approved for Age > 18
	HYPERRHO	Rho D Immune Globulin	50mcg, 300mcg	Brand	\$\$\$\$\$\$	Specialty CPA
	MICRHOGAM PL	Rho D Immune Globulin	50mcg	Brand	\$\$\$\$\$\$	
	RHOGAM PLUS	Rho D Immune Globulin	300mcg	Brand	\$\$\$\$\$\$	Specialty
	RHOPHYLAC	Rho D Immune Globulin	1500u/2ml	Brand	\$\$\$\$\$\$	Specialty CPA

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**GCHP List of Covered Drugs  
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	WINRHO SDF	Rho D Immune Globulin	600u, 1500u, 2500u, 5000u, 15000u	Brand	\$\$\$\$\$\$	Specialty CPA
	TENIVAC	Tetanus & Diphtheria Toxoids				
	VARIVAX	Adsorbed Vaccine	Unit of dose	Brand	\$\$\$\$	Approved for Age > 18
		Varicella Virus Vaccine	Unit of dose	Brand	\$\$\$\$	Approved for Age > 18
	ZOSTAVAX	Varicella-Zoster Virus Vaccine, Live	0.5mL	Brand	\$\$\$\$	Age > 60; QL One per lifetime

INTERFERONS	PLEGRIDY	Peginterferon Beta-1a	125mcg	Brand	\$\$\$\$\$\$	Specialty
RESPIRATORY	ORKAMBI	Lumacaftor-Ivacaftor	200-125MG	Brand	\$\$\$\$\$\$	CPA Specialty CPA

**LARGE VOLUME PARENTERALS**

Therapeutic Class	Brand Names	Generic Name	Strength(s)	Coverage	Rx Cost	LMN, QL, Step, CPA
MINERALS & ELECTROLYTES	LACTATED RINGERS	Lactated Ringers Inj	USP	Generic	\$\$\$	
	NORMAL SALINE	NaCl Inj	0.90%	Generic	\$\$\$	
NUTRIENTS	AMINOSYN II INJ 10%	Amino Acid Infusion 10%	10%	Brand	\$\$\$	CPA
	D10W	Dextrose Inj	10%	Generic	\$\$\$	
	D5W	Dextrose Inj	5%	Generic	\$\$\$	
	INTRALIPID INJ 20%	Fat Emulsion IV Soln	20%	Generic	\$\$\$	
	INTRALIPID INJ 30%	Fat Emulsion IV Soln	30%	Brand	\$\$\$	
	LIPOSYN III INJ 10%	Fat Emulsion IV Soln	10%	Generic	\$\$\$	

**MEDICAL (MISCELLANEOUS) SUPPLIES**

Therapeutic Class	Brand Names	Generic Name	Strength(s)	Coverage	Rx Cost	LMN, QL, Step, CPA
DIABETIC SUPPLIES	TRUE - kits, strips and supplies			Brand	\$\$\$	QL= 100 strips/31 days

**MUSCULOSKELETAL**

Therapeutic Class	Brand Names	Generic Name	Strength(s)	Coverage	Rx Cost	LMN, QL, Step, CPA	
CNS MUSCLE RELAXANTS	FLEXERIL	Cyclobenzaprine HCl	5mg, 10mg	Generic	\$\$\$	QL= 93 tabs/31 days	
DIRECT MUSCLE RELAXANTS	LIORESAL	Baclofen	10mg, 20mg	Generic	\$\$\$\$		
						Step: Failure of (1) of the following: Baclofen OR Tizanidine OR Cyclobenzaprine	
	SOMA	Carisoprodol	350mg	Generic	\$\$\$\$	QL=45 tabs/ 31 days	
	TIZANIDINE	Tizanidine HCl	2mg, 4mg	Generic	\$\$\$	QL= 63 tabs/31 days	
DMARD	RIDAURA	Auranofin	3MG	Brand	\$\$\$\$\$	CPA	
DRUGS TO PREVENT & TREAT GOUT	ZYLOPRIM	Allopurinol	100mg, 300mg	Generic	\$\$\$		
	COLCRYS	Colchicine	0.6mg	Brand	\$\$\$\$	Step: NSAIDS	
	PROBEN/COLCH	Colchicine w/ Probenecid	500-0.5	Generic	\$\$\$		
	ULORIC	Febuxostat	40mg, 80mg	Brand	\$\$\$\$	Step: allopurinol Step: 1. Allopurinol 2. Uloric 3. Zurampic + Allopurinol 4. Zurampic + Uloric	
NON-STEROIDAL ANTIINFLAMMATORY AGENTS	ZURAMPIC	Lesinurad	200mg	Brand	\$\$\$\$		
	BENEMID	Probenecid	500mg	Generic	\$\$\$\$		
	CELEBREX	Celecoxib	50mg, 100mg, 200mg, 400mg	Generic	\$\$\$\$	Step: Two Oral NSAIDS, One That Must Be Meloxicam	
	VOLTAREN	Diclofenac Sodium	50mg, 75mg, 100mg	Generic	\$\$\$		
		VOLTAREN	Diclofenac Sodium Gel 1%	1%	Brand	\$\$\$	CPA QL: 500g/30days
		MOTRIN	Ibuprofen	800mg	Generic	\$\$	
		INDOCIN	Indomethacin	25mg, 50mg, 75mg	Generic	\$\$	
		ORUDIS	Ketoprofen	50mg, 75mg, 200mg	Generic	\$\$\$	
		MOBIC	Meloxicam	7.5mg, 15mg	Generic	\$\$\$\$	
		RELAFEN	Nabumetone	500mg, 750mg	Generic	\$\$\$	
		NAPROSYN	Naproxen	220mg, 250mg, 275mg, 375m g,			
		DAYPRO	Oxaprozin	500mg, 550mg	Generic	\$\$\$	
		FELDENE	Piroxicam	600mg	Generic	\$\$\$\$	
		CLINORIL	Sulindac	10mg, 20mg	Generic	\$\$\$\$	
	SALICYLATES & RELATED DRUGS	DISALCID	Salsalate	150mg, 200mg	Generic	\$\$\$	
				500mg, 750mg	Generic	\$\$	

**OBSTETRICAL & GYNECOLOGICAL**

Therapeutic Class	Brand Names	Generic Name	Strength(s)	Coverage	Rx Cost	LMN, QL, Step, CPA
ANDROGEN	ANDRODERM	Testosterone	2.5mg/24HR, 5mg/24HR	Brand	\$	CPA
	AXIRON	Testosterone	30mg/1.5ml	Brand	\$	CPA
	DEPO-TESTOSTERONE	Testosterone Cypionate in Oil	200mg/mL	Generic	\$\$	
	TESTOSTERONE GEL	Testosterone TD Gel	50mg/5GM (1%)	Brand	\$\$\$\$	CPA
CONTRACEPTIVES, NON ORAL	NUVARING	Etonogestrel-Ethinyl Estradiol VA Ring	0.120-0.015 MG/24HR	Brand	\$\$\$	
	DEPO-PROVERA	Medroxyprogesterone Acetate IM	Susp 150 MG/ML	Generic	\$\$\$	
		Medroxyprogesterone Acetate IM	Susp 400 MG/ML			
	DEPO-PROVERA	Medroxyprogesterone Acetate IM	Susp 400 MG/ML	Brand	\$\$\$\$	

\$ ----- \$1 to \$10  
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**GCHP List of Covered Drugs  
Therapeutic Category**

CONTRACEPTIVES, ORAL	ORTHO EVRA	Norelgestromin-Ethinyl Estradiol TD PTWK 150-35 MCG/24HR	Generic	\$\$\$	QL= 3 patches/28 days	
	KARIVA	Desogest-Eth Estrad & Eth Estrad Tab 0.15-0.02/0.01 MG(21/5)	Generic	\$\$\$		
	MIRCETTE	Desogest-Eth Estrad & Eth Estrad Tab 0.15-0.02/0.01 MG(21/5)	Generic	\$\$\$		
	CESIA	Desogest-Ethin Est Tab 0.1- 0.025/0.125-0.025/0.15-0.025MG-MG	Generic	\$\$		
	CYCLESSA	Desogest-Ethin Est Tab 0.1- 0.025/0.125-0.025/0.15-0.025MG-MG	Generic	\$\$		
	VELIVET	Desogest-Ethin Est Tab 0.1- 0.025/0.125-0.025/0.15-0.025MG-MG	Generic	\$\$		
	APRI	Desogestrel & Ethinyl Estradiol Tab 0.15 MG-30 MCG	Generic	\$\$\$		
	DESOGEN-28	Desogestrel & Ethinyl Estradiol Tab 0.15 MG-30 MCG	Generic	\$\$\$		
	ORTHO-CEPT	Desogestrel & Ethinyl Estradiol Tab 0.15 MG-30 MCG	Generic	\$\$		
	SOLIA	Desogestrel & Ethinyl Estradiol Tab 0.15 MG-30 MCG	Generic	\$\$		
	YAZ	Drospirenone-Ethinyl Estradiol Tab 3- 0.02 MG	Generic	\$\$\$\$		
	OCELLA	Drospirenone-Ethinyl Estradiol Tab 3- 0.03 MG	Generic	\$\$\$		
	YASMIN	Drospirenone-Ethinyl Estradiol Tab 3- 0.03 MG	Generic	\$\$\$		
	KELNOR	Ethinodiol Diacetate & Ethinyl Estradiol Tab 1 MG-35 MCG	Generic	\$\$		
	ZOVIA	Ethinodiol Diacetate & Ethinyl Estradiol Tab 1 MG-35 MCG, 1 MG-50 MCG	Generic Brand/Gen eric	\$\$ \$\$\$	QL= 2 tabs/31 days for 0.75mg QL=1 tab/31 days for 1.5mg	
	PLAN B	Levonorgestrel	0.75mg, 1.5mg			
	SEASONALE	Levonorgestrel & Ethinyl Estradiol (91- Day) Tab 0.15-0.03 MG		Generic	\$\$\$\$	
	AVIANE	Levonorgestrel & Ethinyl Estradiol Tab 0.1 MG-20 MCG		Generic	\$\$	
	LESSINA-28	Levonorgestrel & Ethinyl Estradiol Tab 0.1 MG-20 MCG		Generic	\$\$	
	LUTERA	Levonorgestrel & Ethinyl Estradiol Tab 0.1 MG-20 MCG		Generic	\$\$	
LEVORA-28	Levonorgestrel & Ethinyl Estradiol Tab 0.15 MG-30 MCG		Generic	\$\$		
NORDETTE	Levonorgestrel & Ethinyl Estradiol Tab 0.15 MG-30 MCG		Generic	\$\$\$		
ENPRESSE-28	Levonorgestrel-Eth Estra Tab 0.05- 30/0.075-40/0.125-30MG-MCG		Generic	\$\$		
TRIVORA-28	Levonorgestrel-Eth Estra Tab 0.05- 30/0.075-40/0.125-30MG-MCG		Generic	\$\$		
OVCON 35	Norethindrone & Ethinyl Estradiol Tab 0.4 MG		Generic	\$\$\$		
NECON	Norethindrone & Ethinyl Estradiol Tab 0.5 MG-35 MCG, 1 MG-35 MCG, 0.5- 35/0.75-35/1-35 MG-MCG		Generic	\$\$		
NORTREL	Norethindrone & Ethinyl Estradiol Tab 0.5 MG-35 MCG, 1 MG-35 MCG, 0.5- 35/0.75-35/1-35 MG-MCG		Generic	\$\$		
MODICON	Norethindrone & Ethinyl Estradiol Tab 0.5 MG-35MCG		Generic	\$\$\$		
ORTHO-NOVUM	Norethindrone & Ethinyl Estradiol Tab 1 MG-35 MCG, 1 MG-50MCG, 0.5- 35/0.75-35/1-35 MG-M		Generic	\$\$\$		

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**GCHP List of Covered Drugs  
Therapeutic Category**

NORINYL	Norethindrone & Mestranol Tab 1 MG-35MCG, 1 MG-50 MCG		Generic	\$\$		
MICROGESTIN	Norethindrone Ace & Ethinyl Estradiol Tab 1 MG-20 MCG, 1.5 MG-30 MCG		Generic	\$\$		
LOESTRIN FE	Norethindrone Ace & Ethinyl Estradiol-FE Tab 1 MG-20 MCG, 1.5 MG-30 MCG		Generic	\$\$		
MICROGESTIN FE	Norethindrone Ace & Ethinyl Estradiol-FE Tab 1 MG-20 MCG, 1.5 MG-30 MCG		Generic	\$\$		
JUNEL FE	Norethindrone Ace & Ethinyl Estradiol-FE Tab 1 MG-20MCG, 1.5 MG-30 MCG		Generic	\$\$		
ESTROSTEP FE	Norethindrone Ac-Ethinyl Estrad-Fe Tab 1-20/1-30/1-35 MG-MCG		Generic	\$\$\$		
ARANELLE	Norethindrone-Eth Estradiol Tab 0.5-35/1-35/0.5-35 MG-MCG		Generic	\$\$		
TRI-NORINYL	Norethindrone-Eth Estradiol Tab 0.5-35/1-35/0.5-35 MG-MCG		Generic	\$\$\$		
MONONESSA	Norgestimate & Ethinyl Estradiol Tab 0.25 MG-35 MCG		Generic	\$\$		
ORTHO-CYCLEN	Norgestimate & Ethinyl Estradiol Tab 0.25 MG-35 MCG		Generic	\$\$\$		
PREVIFEM	Norgestimate & Ethinyl Estradiol Tab 0.25 MG-35 MCG		Generic	\$\$		
SPRINTEC 28	Norgestimate & Ethinyl Estradiol Tab 0.25 MG-35 MCG		Generic	\$\$		
ORTHO TRI-CYCLEN LO	Norgestimate-Eth Estrad Tab 0.18-25/0.215-25/0.25-25 MG-MCG		Generic	\$\$		
ORTHO TRI-CYCLEN	Norgestimate-Eth Estrad Tab 0.18-35/0.215-35/0.25-35 MG-MCG		Generic	\$\$		
TRINESSA	Norgestimate-Eth Estrad Tab 0.18-35/0.215-35/0.25-35 MG-MCG		Generic	\$\$		
TRI-PREVIFEM	Norgestimate-Eth Estrad Tab 0.18-35/0.215-35/0.25-35 MG-MCG		Generic	\$\$		
TRI-SPRINTEC	Norgestimate-Eth Estrad Tab 0.18-35/0.215-35/0.25-35 MG-MCG		Generic	\$\$		
CRYSSELLE-28	Norgestrel & Ethinyl Estradiol Tab 0.3 MG-30 MCG		Generic	\$\$		
LO/OVRAL	Norgestrel & Ethinyl Estradiol Tab 0.3 MG-30 MCG		Generic	\$\$		
LOW-OGESTREL	Norgestrel & Ethinyl Estradiol Tab 0.3 MG-30 MCG		Generic	\$\$		
ELLA	Ulipristal Acetate	30mg	Brand	\$	QL= 4 tabs/365 days	
ESTROGEN	ESTRACE	Estradiol	0.5mg, 1mg, 2mg	Generic	\$\$	
	ESTRASORB	Estradiol		Brand	\$\$\$	QL= 56 units/28 days
	ESTROGEL	Estradiol		Brand	\$\$\$\$	QL= 2 pump bottles/28 days
	MENOSTAR	Estradiol	14mcg	Brand	\$\$\$\$	QL= 4 patches/28 days
	VIVELLE-DOT	Estradiol	0.0375, 0.025mg, 0.05mg, 0.075mg, 0.1mg	Generic	\$\$\$\$	QL= 8 patches/28 days
	ALORA	Estradiol	0.025mg, 0.05mg, 0.075mg, 0.1mg	Brand	\$\$\$	QL= 8 patches/31 days
	CLIMARA	Estradiol TD	0.025mg, 0.0375mg, 0.05mg, 0.06mg, 0.075mg, 0.1mg	Generic	\$\$\$\$	QL= 4 patches/28 days
	ESTRACE VAG	Estradiol Vaginal Cream		Brand	\$\$\$	
	PREMARIN	Estrogens, Conjugated	0.3mg, 0.45mg, 0.625mg, 0.9mg, 1.25mg	Brand	\$\$\$	
	PREMARIN VAG	Estrogens, Conjugated Vaginal Cream	0.625mg	Brand	\$\$	
	OGEN	Estropipate	0.75mg, 1.5mg, 3mg	Generic	\$\$	
ESTROGEN/ PROGESTIN COMBINATIONS	PREMPHASE	Conj Est/Conj Est-Medroxypro Ac Conjugated Estrogen-Medroxyprogest	0.3-1.5mg, 0.45-1.5mg, 0.625-2.5mg,	Brand	\$\$\$	
	PREMPRO	Acetate	0.625-5mg	Brand	\$\$\$	
	ANGELIQ	Drospirenone-Estradiol	0.5-1mg	Brand	\$\$\$\$	

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**GCHP List of Covered Drugs  
Therapeutic Category**

	ACTIVELLA	Estradiol & Norethindrone Acetate	1-0.5mg	Generic	\$\$\$\$	
	PREFEST	Estradiol/Estrad-Norgestimate		Brand	\$\$\$\$	
	CLIMARA PRO	Estradiol-Levonorgestrel		Brand	\$\$\$	QL= 4 patches/28 days
	COMBIPATCH	Estradiol-Norethindrone Ace	0.05/0.14mg, 0.05/0.25mg	Brand	\$\$\$	QL= 8 patches/28 days
	FEMHRT	Norethindrone Acetate-Ethinyl Estradiol	0.5mg-2.5mcg, 1mg-5mcg	Generic	\$\$\$\$	
OB/GYN MISC	NOVAREL	Chorionic Gonadotropin	10000u	Generic	\$\$\$\$\$\$	Specialty CPA
	Brisdelle	Paroxetine Mesylate	7.5mg	Brand	\$\$\$\$	CPA
PRENATAL VITAMINS	PRENATAL	Prenatal Rx		Generic	\$	Step: Prenatal OTC
	NATALCARE PLUS	Prenatal Vit w/ Fe Fumarate-FA		Generic	\$	Step: Prenatal OTC
	PRENATE ELITE	Prenatal Vit w/ Fe Fum-Methylfolate-FA		Brand	\$\$\$\$	Step: Prenatal OTC
PROGESTIN	PROVERA	Medroxyprogesterone Acetate	2.5mg, 5mg, 10mg	Generic	\$\$\$	
	NOR-QD	Norethindrone	0.35mg	Generic	\$\$\$	
	AYGESTIN	Norethindrone Acetate	5mg	Generic	\$\$\$\$	
SELECTIVE ESTROGEN RECEPTOR MODULATOR	Duavee	Conjugated Estrogens-Bazedoxifene	45-20mg	Brand	\$\$\$	CPA Trial and failure of BOTH Evista and Alendronate
	EVISTA	Raloxifene HCl	60mg	Generic	\$\$\$\$	Step: Alendronate

**OPHTHALMIC**

Therapeutic Class	Brand Names	Generic Name	Strength(s)	Coverage	Rx Cost	LMN, QL, Step, CPA
ANTIGLAUCOMA	BETOPIC	Betaxolol HCL	0.50%	Generic	\$\$\$	
	LUMIGAN	Bimatoprost	0.01%, 0.03%	Generic	\$\$\$	
	ALPHAGAN P	Brimonidine Tartrate	0.15%	Generic	\$\$\$	Age < 21
	TRUSOPT	Dorzolamide HCL	2%	Generic	\$	
	XALATAN	Latanoprost	0.005%	Generic	\$\$\$	
	PILOCARPINE	Pilocarpine HCl	1%, 2%, 3%, 4%, 6%	Generic	\$	
	TIMOPTIC	Timolol Maleate	0.25%, 0.5%	Generic	\$\$\$	
	TIMOPTIC-XE	Timolol Maleate	0.25%, 0.5%	Generic	\$\$\$	
OPHTHALMIC	LASTACRAFT	Alcaftadine	0.25%	Brand	\$\$\$\$	
	ISO ATROPINE	Atropine Sulfate	1%	Generic	\$	
	CROLOM	Cromolyn Sodium	4%	Generic	\$	
	RESTASIS	Cyclosporine	0.05%	Brand	\$\$\$\$	QL= 60 vials/31 days
	ZIRGAN	Ganciclovir	0.15%	Brand	\$\$\$\$	Step: Failure of Viroptic
	ACULAR LS	Ketorolac Tromethamine	0.40%	Generic	\$	
	PATANOL	Olopatadine HCl	0.1%	Generic	\$\$\$\$	
	MACUGEN	Pegaptanib Sodium		Brand	\$\$\$\$\$\$	Specialty CPA
	AK-DILATE	Phenylephrine HCL	10% Opth Sol	Generic	\$	
	OMNIPRED	Prednisolone Acetate	1%	Generic	\$\$\$\$	
	ALCAINE	Proparacaine HCL	0.5% Opth Sol	Generic	\$	
	LUCENTIS	Ranibizumab		Brand	\$\$\$\$\$\$	Specialty CPA
	PONTOCAINE	Tetracaine HCL	0.5% Opth Sol	Generic	\$	
	VIROPTIC	Trifluridine	1%	Brand	\$\$\$	
	VISUDYNE	Verteporfin	15mg	Brand	\$\$\$\$\$\$	Specialty CPA
OPHTHALMIC ANTIINFECTIVE/ CORTICOSTEROIDS	MAXITROL	Neomycin-Polymyxin-Dexamethasone	0.1%	Generic	\$	
	CORTISPORIN OPTH	Neomycin-Polymyxin-HC	1.0%	Generic	\$	
	TOBRADEX	Tobramycin-Dexamethasone Opth		Generic	\$\$\$	
OPHTHALMIC CORTICOSTEROID	FML FORTE	Fluorometholone	0.25%	Brand	\$	
	ALREX	Loteprednol Etabonate	0.2%	Brand	\$\$\$\$	
	LOTEMAX	Loteprednol Etabonate	0.5%	Brand	\$\$\$	
	PRED FORTE	Prednisolone Acetate	1%	Generic	\$	
OPHTHALMIC TOPICAL ANTIBACTERIAL	AZASITE	Azithromycin	1%	Brand	\$	
	CILOXAN	Ciprofloxacin HCl	3%	Generic	\$\$\$	
	ILOTYCIN	Erythromycin		Generic	\$	
	VIGAMOX	Moxifloxacin HCL	0.50%	Brand	\$\$\$	
	POLYTRIM	Polymyxin B-Trimethoprim		Generic	\$	
	BLEPH-10	Sulfacetamide Sodium	10%	Generic	\$	

**OVER THE COUNTER**

Therapeutic Class	Brand Names	Generic Name	Strength(s)	Coverage	Rx Cost	LMN, QL, Step, CPA
ALLYLAMINE	CLOTRIMAZOLE	Clotrimazole Cream	1%	OTC	\$ to \$\$\$\$	
ANALGESICS	TYLENOL CHLD	Acetaminophen Elixir	160mg/5ml	OTC	\$	Age < 10 QL= 240ml/31 days
	MAPAP	Acetaminophen Liquid	160mg/ml	OTC	\$	Age <10 QL= 248ml/31 days
	ASA	Aspirin	81mg, 325mg	OTC	\$	QL= 122 tabs/31 days
	ADVIL	Ibuprofen	200mg	OTC	\$	QL= 106 tabs/31 days Age <10
	MOTRIN	Ibuprofen	100mg/5ml	OTC	\$	QL= 248ml/31 days

\$ ----- \$1 to \$10  
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**GCHP List of Covered Drugs  
Therapeutic Category**

	ALEVE	Naproxen Sodium	220mg	OTC	\$	QL= 106 tabs/31 days
ANTACIDS	MYLANTA	Alum & Mag Hydroxide-Simethicone	200-200-20MG/5mL, 400-400-40/5mL	Generic	\$\$	
ANTIACNE	BENZOYL	Benzoyl Peroxide	5% GEL	OTC	\$\$	QL= 85g/31 days Step: Claritin
ANTIHISTAMINE	ZYRTEC	Cetirizine HCl	5mg, 10mg	OTC	\$\$	QL= 31 tabs/31 days
	ZYRTEC	Cetirizine HCl Syrup	1mg/ml	OTC	\$\$	QL= 480ml/31 days Step: Claritin
	ZYRTEC-D	Cetirizine -Pseudoephedrine	5mg/120mg	OTC	\$\$	QL= 31 tabs/31 days
	BENADRYL	Diphenhydramine HCl	25mg, 50mg	OTC	\$	QL= 104 caps/31 days Age <=12
	BENADRYL LIQUID	Diphenhydramine HCl		OTC	\$	QL= 240ml/31 days Age <12
	BENADRYL-D	Diphenhydramine-Phenylephrine	12.5mg/5ml	OTC	\$	QL= 248ml/31 days Step: Claritin
	ALLEGRA	Fexofenadine	30mg, 60mg, 180mg	OTC	\$\$	QL= 62 tabs/31 days
	ALLEGRA-D	Fexofenadine-Pseudoephedrine	12 hour, 24 hour	OTC	\$\$	QL= 62 tabs/31 days for 12 hour
	CLARITIN	Loratadine	5mg/5mL	OTC	\$\$	QL= 31 tabs/31 days for 24 hour
	CLARITIN	Loratadine	10mg	OTC	\$\$	QL= 310ml/31 days
ANTIPARASITICS	NIX	Permethrin Lotion	1%	OTC	\$\$	QL= 31 caps/31 days
BIRTH CONTROL	CONDOMS	Condoms		OTC	\$\$	QL= 240ml/31 days
	SPERMICIDAL PRODUCTS	Spermicidal Products	Sponge, Foam, Cream, Gel	OTC	\$\$	QL= 14/31 days
COUGH SUPPRESSANT	DELSYM	Dextromethorphan Polistirex	30mg/5ml	OTC	\$\$	QL= 148ml/31 days
DIABETIC SUPPLIES	LANCETS	Lancets		OTC	\$	QL= 200/31 days
	PEN NEEDLES	Pen Needles		OTC	\$	QL= 200/31 days
	INSULIN SYRINGES	Syringes		OTC	\$	QL= 110/31 days
DIETARY	OYSTER CAL	Calcium carbonate	500MG, 600MG, 1250MG, 1500MG	Generic	\$\$\$	
	CALCIUM GLUCONATE	Calcium Gluconate	50MG, 500MG	Generic	\$\$	
	FERROUS SULF	Ferrous Sulfate		OTC	\$	QL= 100 caps/31 days QL= 480ml/31 days
	POLY-VITA DROPS	Pediatric Multiple Vitamin w/ C Soln	35 MG/ML	Generic	\$\$	
	POLY_VIT DROPS /FL	Pediatric Multiple Vitamins w/ Fluoride Soln	0.25 MG/ML	Generic	\$\$	
	POLY-VI-SOL DROPS /IRON	Pediatric Multiple Vitamins w/ Iron Drops	10 MG/ML	Generic	\$\$	
	VITAMIN K	Phytonadione	100mcg	OTC	\$\$	QL= 62 tabs/31 days
	PRENATAL VITAMINS	Prenatal Vitamins	25mg, 50mg, 100mg, 200mg, 250mg,	OTC	\$\$	QL= 100 tabs/31 days
H2 ANTAGONIST	PYRIDOXINE	Pyridoxine HCl	500mg	OTC	\$\$	QL= 62 tabs/31 days
	PEPCID	Famotidine	10mg, 20mg	OTC	\$\$	QL= 93 tabs/31 days
	ZANTAC	Ranitidine HCl	75mg, 150mg	OTC	\$\$	QL= 67 tabs/31 days
LAXATIVES & CATHARTICS	COLACE	Docusate Sodium	50mg, 100mg, 250mg	OTC/ Generic	\$	
	EMETROL	Fructose-Dextrose-Phosphoric Acid		OTC	\$	QL= 240ml/ 31 days
NASAL DECONGESTANT	GLYCOLAX	Polyethylene Glycol		OTC	\$\$	
	SUDAFED PE	Phenylephrine HCL	10MG	Generic	\$\$	
	SUDAFED	Pseudoephedrine	30MG	Generic	\$\$	
OPHTHALMIC	MURO	Sodium Chloride	5% Solution	Generic	\$\$	
ORAL ELECTROLYTES	PEDIALYTE SOL	Oral Electrolyte Solution	N/A	Generic	\$\$	
PROTON PUMP INHIBITORS	PRIOSEAC OTC	Omeprazole	20mg	OTC	\$\$	QL= 62 tabs/31 days
SMOKING CESSATION	NICORETTE	Nicotine Gum/Lozenge	2mg, 4mg	OTC	\$\$\$\$	QL= 180 days/year
	NICODERM CQ	Nicotine TD Patch	7mg, 12mg, 21mg	OTC	\$\$	QL= 180 days/year

**RESPIRATORY**

Therapeutic Class	Brand Names	Generic Name	Strength(s)	Coverage	Rx Cost	LMN, QL, Step, CPA
ANTIHISTAMINE/ DECONGESTANT COMBINATIONS	ZYRTEC-D	Cetirizine-Pseudoephedrine	5mg/120mg	Generic	\$\$\$	
ANTIHISTAMINES	ALLEGRA-D	Fexofenadine-Pseudoephedrine	60mg/120mg, 180mg/240mg	Generic	\$\$	
	PERIACTIN	Cyproheptadine HCl	4mg	Generic	\$\$	CPA
ANTITUSSIVE & EXPECTORANT	PHENERGAN	Promethazine HCl	12.5mg, 25mg, 50mg	Generic	\$\$	Age < 4
	PROMETHAZINE	Promethazine HCl	6.25mg/5ml	Generic	\$	
	TESSALON	Benzonate	100mg, 200mg	Generic	\$\$	
	TUSSIONEX	Hydrocod Polst-Chlorphen Polst		Generic	\$\$\$	
	PHENERGAN/CODEINE	Promethazine w/ Codeine	6.25-10mg	Generic	\$\$	CPA Age < 4 CPA
	PHENERGAN DM	Promethazine-DM		Generic	\$\$	Age < 4
BETA-2 ADRENERGIC	VENTOLIN HFA AER	Albuterol	90mcg HFA	Brand	\$\$\$\$	QL= 2 inhrs/31 days
	PROVENTIL	Albuterol Sulfate	2mg, 4mg	Generic	\$\$	

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**GCHP List of Covered Drugs  
Therapeutic Category**

BRONCHODILATORS DRUGS FOR ASTHMA	BROVANA	Arformoterol Tartrate	15mcg	Brand	\$\$\$\$	Step: Foradil Step: Striverdi QL= 12 caps/12 days (12pk)
	FORADIL	Formoterol Fumarate		Brand	\$\$\$\$	QL= 60caps/30 days (60pk) CPA
	PERFORMIST	Formoterol Fumarate	20mcg	Brand	\$\$\$\$	QL= 120 vials/31 days
	XOPENEX	Levalbuterol HCl	0.31mg, 0.63mg, 1.25mg/3ml	Brand	\$\$\$\$	Step: albuterol Step: albuterol
	XOPENEX HFA	Levalbuterol Tartrate		Brand	\$\$\$\$	QL= 2 inh/31 days
	SEREVENT DISKUS	Salmeterol Xinafoate	50mcg	Brand	\$\$\$\$	Step: Striverdi
	ANORO ELLIPT	Umeclidinium-Vilanterol Aero Pow	62.5-25 mcg/Inh	Brand	\$\$\$\$	CPA for Age <18 yoa
	TUDORZA PRES	Acidinium Bromide	400/ACT	Brand	\$\$\$\$	QL= 1 inh/31 days
	QVAR	Beclomethasone Dipropionate	40mcg; 80mcg	Brand	\$\$\$	
	PULMICORT	Budesonide	0.25mg/2ml, 0.5mg/2ml, 1mg/ml	Generic	\$\$\$\$	CPA
	PULMICORT FLEXHALER	Budesonide	90mcg, 180mcg	Brand	\$\$\$\$	QL= 1 inh/31 days (90 mcg) QL= 1 inh/31 days (180 mcg)
	SYMBICORT	Budesonide-Formoterol Fumarate	80-4.5mcg/ACT, 160-4.5mcg/ACT	Brand	\$\$\$\$	QL= 1 inh/31 days QL= 3 units/31 days (pkg size 1)
	EIPEN, EIPEN-JR	Epinephrine	0.15mg, 0.3mg	Brand	\$\$\$\$	QL= 4 units/31 days (pkg size 2)
	AEROSPAN	Flunisolide HFA Aero	80mcg	Brand	\$\$\$	
	ARNUITY ELLIPTA	Fluticasone Furoate Aero Pow	100mcg; 200mcg	Brand	\$\$\$	Step: Arnuity Ellipta for age >12 QL= 1 inh/31 days (44mcg) QL= 1 inh/31 days (110mcg) QL= 1 inh/31 days (220mcg)
FLOVENT HFA	Fluticasone Propionate HFA	44mcg, 110mcg, 220mcg	Brand	\$\$\$\$	QL= 1 Diskus / 30 days	
ADVAIR DISKUS	Fluticasone-Salmeterol	100/50, 250/50, 500/50	Brand	\$\$\$\$	QL= 1 inh/30 days	
ADVAIR HFA	Fluticasone-Salmeterol	45/21, 115/21, 230/21	Brand	\$\$\$\$	STEP: Symbicort or Advair HFA	
BREO ELLIPTA	Fluticasone-Vilanterol	100/25; 200-25	Brand	\$\$\$		
ATROVENT	Ipratropium Bromide	0.02%	Generic	\$\$\$\$		
ATROVENT HFA	Ipratropium Bromide HFA	17mcg	Brand	\$\$\$\$	QL= 2 inh/31 days	
ASMANEX	Mometasone Furoate	110mcg, 220mcg	Brand	\$\$\$\$	Step: Flovent HFA Specialty CPA Age > 12 Step: Inhaled corticosteroid AND long acting beta agonist (Foradil OR Serevent)	
XOLAIR	Omalizumab	150mg	Brand	\$\$\$\$\$\$		
AEROCHAMBER	Spacer/Aerosol-Holding Chambers		Brand	\$\$\$	QL= 1/year CPA	
LAB2A - ANTICOLINERGIC COMBO	STIOLTO	Tiotropium Br-Olodaterol	2.5-2.5mcg/act	Brand	\$\$\$\$	STEP: ANORO ELLIPT
LEUKOTRIENE MODIFIERS	SINGULAIR	Montelukast Sodium	4mg, 5mg, 10mg	Generic	\$\$\$\$	
	ACCOLATE	Zafirlukast	10mg, 20mg	Brand	\$\$\$\$	CPA
LONG ACTING BETA-2 AGONIST	STRIVERDI AER RESPIMAT	Olodaterol HCl	2.5mcg/act Inhaled Aer Sol	Brand	\$\$\$\$	
METHYL XANTHINE	THEO-DUR	Theophylline	100mg, 200mg, 300mg	Generic	\$\$\$	
	THEOPHYLLINE ANHYDROUS	Theophylline		Brand	\$\$	
MUCOLYTIC AGENTS	MUCOMYST	Acetylcysteine Inh Sol	10%, 20%	Generic	\$\$\$	
	HYPER-SAL	Sodium Chloride Inh Sol	3.5%, 7%	Generic	\$\$	
RESPIRATORY ANTICHOLINERGICS	SPIRIVA	Tiotropium Bromide Monohydrate	18mcg	Brand	\$\$\$\$	QL= 1 pkg/90 days ( 90 caps) QL= 1 pkgs/30 days (30 caps)
	SPIRIVA RESPIMAT	INH Sol	2.5mch/actuation	Brand	\$\$\$\$	
	INCRUSE ELLIPTA	Umeclidinium Br Aer Pow	62.5mcg/Inh	Brand	\$\$\$\$	
RESPIRATORY MISC	PULMOZYME	Dornase Alfa	1mg/ml	Brand	\$\$\$\$\$\$	Specialty CPA
	ALDURAZYME	Laronidase	2.9mg/5ml	Brand	\$\$\$\$\$\$	Specialty CPA
	ESBRIET	Pirfenidone Cap	267mg	Brand	\$\$\$\$\$\$	Specialty CPA
	ARALAST	Proteinase Inhibitor	400mg, 500mg, 800mg, 1000mg	Brand	\$\$\$\$\$\$	Specialty CPA
	KITABIS	Tobramycin	300mg/5ml	Brand	\$\$\$\$	Specialty Specialty
	TOBI	Tobramycin	300mg/5ml	Generic	\$\$\$\$	Step: KITABIS

**SMOKING CESSATION**

Therapeutic Class	Brand Names	Generic Name	Strength(s)	Coverage	Rx Cost	LMN, QL, Step, CPA
SMOKNG CESSATION	CHANTIX	Varenicline Tartrate	0.5mg, 1mg	Brand	\$\$\$\$	CPA
SMOKING CESSATION	Nicotrol Inh	Nicotine Inhaler System	10mg (4mg delivered)	Brand	\$\$	Step: Nicotine Patch TD (62100050085) OR Nicotine Gum (621000100028) OR Nicotine Lozenge (621000100047); QL=180 days/365 days

\$ ----- \$1 to \$10  
 \$\$ ----- \$11 to \$50  
 \$\$\$ ----- \$51 to \$100  
 \$\$\$\$ ----- \$101 to \$500  
 \$\$\$\$\$ ----- \$501 to \$1,000  
 \$\$\$\$\$\$ ----- \$1,001 to \$5,000  
 \$\$\$\$\$\$\$ ----- \$5,001 to \$10,000

**GCHP List of Covered Drugs  
Therapeutic Category**

Step: Nicotine Patch TD  
(62100050085) OR Nicotine Gum  
(621000100028) OR Nicotine Lozenge  
(621000100047); QL=180 days/365  
days

SMOKING CESSATION      Nicotrol NS      Nicotine Nasal Spray      10mg/mL      Brand      \$\$

**UROLOGICAL**

Therapeutic Class	Brand Names	Generic Name	Strength(s)	Coverage	Rx Cost	LMN, QL, Step, CPA
ANTICHOLINERGIC ANTISPASMODICS	ENABLEX	Darifenacin Hydrobromide	7.5mg, 15mg	Generic	\$\$\$	Step: Oxybutynin
	OXYTROL	Oxybutynin	3.9mg/24HR	Brand	\$\$\$	Step: Oxybuttnin
	DITROPAN XL	Oxybutynin Chloride	5mg, 10mg	Generic	\$\$	
	GELNIQUE	Oxybutynin Chloride	10%	Brand	\$\$\$	
	VESICARE	Solifenacin Succinate	5mg, 10mg	Brand	\$\$\$	Step: Oxybutynin
	DETROL, DETROL LA	Tolterodine Tartrate	1mg, 2mg, 4mg	Generic	\$\$\$	Step: Enablex OR Oxyrol OR Vesicare
	SANCTURA, SANCTURA XR	Tropium Chloride	20mg, 60mg	Generic	\$\$\$	Step: Enablex OR Oxyrol OR Vesicare Step: Tamsulosin OR Doxazosin OR Terazosin
GENITOURINARY PRODUCTS	UROXATRAL	Alfuzosin HCl	10mg	Generic	\$\$	
	RIMSO-50	Dimethyl Sulfoxide	50%	Brand	\$\$\$\$\$	CPA Step: Tamsulosin OR Doxazosin OR Terazosin
	AVODART	Dutasteride	0.5mg	Brand	\$\$\$\$	
	PROSCAR	Finasteride	5mg	Generic	\$\$\$\$	
	MYRBETRIQ	MIRABEGRON	25mg, 50mg	Brand	\$\$\$\$	STEP: Oxybutynin Step: Tamsulosin OR Doxazosin OR Terazosin
	RAPAFLO	Silodosin	4mg, 8mg	Brand	\$\$\$\$	
	FLOMAX	Tamsulosin HCl	0.4mg	Generic	\$\$\$\$	
URINARY ANESTHETICS	PYRIDIUM	Phenazopyridine HCl	100mg, 200mg	Generic	\$\$	

\$ ----- \$1 to \$10  
 \$\$ ----- \$11 to \$50  
 \$\$\$ ----- \$51 to \$100  
 \$\$\$\$ ----- \$101 to \$500  
 \$\$\$\$\$ ----- \$501 to \$1,000  
 \$\$\$\$\$\$ ----- \$1,001 to \$5,000  
 \$\$\$\$\$\$\$ ----- \$5,001 to \$10,000