



2011 GHI Formulary

The following is a list of the most commonly prescribed drugs. It represents an abbreviated version of the drug list (formulary) that is at the core of your pharmacy benefit plan. The list is not all-inclusive and does not guarantee coverage. In addition to using the list, you are encouraged to ask your doctor to prescribe generic drugs whenever appropriate.

PLEASE NOTE: Drugs listed on this document may become non-Preferred if a generic equivalent product becomes available throughout the year. Not all the drugs listed are covered by all pharmacy benefit programs. Check your benefit materials for the specific drugs covered and the copay information for your pharmacy benefit program. For specific questions about your coverage, please call the phone number printed on your ID card.

A	C	E	I	M	N	P
ABILIFY	calcitriol	econazole nitrate	hydrocortisone	medroxyprogesterone	MIGRANAL	pantoprazole
acarbose	camila	EDEX [inj] [DQ]	hyoscyamine sulfate	MENEST	minocycline hcl	paroxetine hcl
ACCU-CHEK (not Voicemate)	CANASA	ELIDEL [ST]		meperidine hcl	mirtazapine	PATANOL
[DQ]	carbamazepine, -XR	eliphos	ibuprofen	mercaptapurine	mononessa	PEGASYS [inj] [PA]
acetaminophen w/codeine	CARAC CREAM	ELMIRON	imipramine hcl	METANX	mupirocin 2% oint	penicillin v potassium
ACTIVELLA *	carbidopa/levodopa	EMADINE	imiquimod	metaxalone	mycophenolate	PENTASA
ACTONEL	carvedilol	EMEND	indapamide	metformin	MYFORTIC	perindopril erbumine
ACTOS	carisoprodol	EMTRIVA	indomethacin	methamphetamine hcl		phenobarbital
ACTOPLUS MET	carteolol hcl	enalapril-hctz	INTAL inh	methotrexate		phenytoin -er
acyclovir	cartia xt	ENBREL [INJ][PA] [DQ]	ipratropium bromide	methylin -er		pilocarpine hcl
adapalene	cefaclor -er	enoxaparin sod [INJ][PA]	isosorbide mononitrate	methylphenidate er		metolopramide hcl
ADVAIR DISKUS, HFA	cefepodoxime proxetil	EPIPEN -JR. [inj]	itraconazole [PA]	methylprednisolone		metoclopramide hcl
ADVICOR [ST]	cefuroxime	EPZICOM		metoprolol, er		METROGEL
AGGRENOL	CELEBREX [ST]	errin	J, K	mexiletine hcl		mexiletine hcl
alendronate	cephalexin	erythromycin	JANUVIA	microgestin		microgestin
allopurinol	CETROTIDE [inj] [PA]	estradiol - patch	jolivet			
ALPHAGAN P *	chlorhexidine gluconate	ESTRATEST -H.S.	junel fe			
ALOMIDE	cimetidine	ESTRING	KALETRA			
ALORA	CIPRODEX	estropipate	ketoconazole			
alprazolam	ciprofloxacin	ethosuximide	ketoprofen			
amantadine hcl	CIPRO HC	etodolac	ketorolac ophth			
amcinonide	cialopram	EUFLEXXA [inj]	KINERET [inj][PA]			
amiloride hcl w/hctz	CLIMARA PRO	EVISTA				
amiodarone hcl	clarithromycin	F				
amitriptyline hcl	clindamycin, - benzoyl peroxide	famciclovir				
amlodipine	clobetasol propionate	famotidine				
amlodipine/benazepril	clomiphene citr [PA]	FAST TAKE STRIPS [DQ]				
amox clavulanate	clonazepam	fentanyl citrate [PA]				
amoxicillin	clonidine hcl, TTS	fexofenadine, -pse				
amphetamine salt combo, -XR	clonidine hcl, TTS	FINACEA				
anastrozole	clotrimazole/betameth	finasteride				
ANALPRAM HC	clozapine	flecainide acetate				
ANDRODERM	colchicine	FLOVENT HFA, DISKUS				
ANDROGEL	COMBIPATCH	fluconazole [PA]				
ANTAGON [inj] [PA]	COMBIVENT	fludrocortisone acetate				
apri	COMTAN	fluorouracil [inj]				
ARANESP [PA] [inj]	CONCERTA*	fluoetine hcl				
ARICEPT, -ODT	COPAXONE [inj] [DQ]	flurazepam hcl				
ARIXTRA	CREON 5,10,20	flutamide				
ASACOL, HD	CRESTOR [ST]	fluticasone propionate				
ASTELIN*	cromolyn sodium	fluvoxamine maleate				
atenolol w/chlorthalidone	cyclobenzaprine hcl	folic acid				
ATROVENT, HFA	cyclosporine	FORADIL				
AUGMENTIN XR	CYMBALTA [ST]	FORTEO [inj] [PA]				
AVANDAMET	cyproheptadine hcl	FOSAMAX (only Plus D, soln) *				
AVANDARYL	D	fosinopril sodium -hctz				
AVANDIA	DENAVIR	FRAGMIN [inj]				
AVELOX -ABC PACK	desmopressin	furosemide				
AVONEX [inj] [DQ]	desipramine hcl	G				
azathioprine	desoximetasone	gabapentin				
azithromycin	dexamethasone	galantamine				
B	dextroamphetamine-amphetamine	GANIRELIX [inj] [PA]				
baclofen	diazepam	gemfibrozil				
balsalazide	diclofenac sodium	gianvi				
benazepril -hctz	dicyclomine hcl	glipizide -er				
BENICAR/HCT [ST]	digitek	glyburide				
benzonatate	digoxin	glyburide metformin				
benztropine mesylate	diltiazem er	GONAL-F RFF [inj] [PA]				
betamethasone	DIOVAN, -HCT [ST]	granisetron				
BETASERON [inj] [DQ]	diphenoxylate-atropine	guaifenesin w/codeine				
BETOPTIC S	dipyridamole	H				
bicalutamide	divalproex sodium	haloperidol				
bisoprolol fumarate -hctz	doxorolamide	HUMALOG [inj]				
brimonidine tartrate	DOVONEX	HUMATROPE [inj] [PA]				
bumetanide	doxazosin mesylate	HUMIRA [inj] [PA] [DQ]				
bupropion,-sr, xr	doxepin hcl	HUMULIN [inj]				
butalbital/acet/caffeine	doxycycline hyclate	hydrochlorothiazide				
BYETTA [inj] [PA]	DUAC CS	hydrocodone/ibuprofen				

T	ticlopidine hcl	triamterene w/hctz	TRUVADA	velivet 28 day	warfarin
TAMIFLU [DQ]	TILADE	triazolam	TUSSIONEX	venlafaxine hcl er	WELCHOL
tamoxifen citrate	timolol maleate	TRICOR	TWINJECT [inj]	VENTOLIN HFA	X, Y, Z
tamsulosin hcl	tobramycin sulfate	tri-lo-sprintec	U, V, W	verapamil hcl	XALATAN
TAZORAC [PA]	topiramate	trimethobenzamide	unithroid	VESICARE	XENICAL [PA]
temazepam	torsemide	trimethoprim	UROXATRAL	VIGAMOX	XOPENEX HFA
terazosin hcl	tramadol hcl	trinessa	ursodiol	VIRAMUNE	ZETIA
terbinafine [PA]	trazodone hcl	tri-previfem	VAGIFEM	VIREAD	zolpidem
tetracycline hcl	tretinoin [PA]	tri-sprintec tablet	valacyclovir	VIVELLE -DOT	ZOMIG, ZMT + nasal spray
theophylline -anhydr	triamcinolone acetoneide	trivora-28	valproic acid	VYTORIN [ST]	ZYMAR *
					ZYPREXA ZYLET*

Examples of Non-Preferred Medications with Their Preferred Alternatives

The following is a list of some non-Preferred brand medications with examples of Preferred alternatives that are on the formulary. Column 1 lists examples of non-Preferred medications. Column 2 lists some alternatives that can be prescribed. Thank you for your compliance.

Non-Preferred	Preferred Alternative	Non-Preferred	Preferred Alternative
ACCOLATE [ST]	SINGULAIR [ST]	KAPIDEX/DEXILANT	omeprazole, lansoprazole, pantoprazole, NEXIUM [ST]
ACIPHEX [ST]	omeprazole, lansoprazole, pantoprazole, NEXIUM [ST]	KETEK	clarithromycin, erythromycin
ACULAR	diclofenac, ketorolac ophth	LESCOL XL [ST]	lovastatin, CRESTOR, VYTORIN, simvastatin
AEROBID	QVAR, FLOVENT HFA, DISKUS	LEXEL [ST]	amlodipine/benazepril
ALAMAST	cromolyn sodium, ALOMIDE, PATANOL	LIPITOR [ST]	lovastatin, simvastatin, & [ST]CRESTOR, VYTORIN, ADVICOR
ALOCRIL	cromolyn sodium, ALOMIDE, PATANOL	LOPROX	OTCs, MENTAX
ALORA	generics, ESCLIM	LUNESTA	zolpidem, SONATA
ALREX	generic steroids	LYRICA	gabapentin
ALTOCOR	lovastatin, CRESTOR, VYTORIN, simvastatin	MAVIK [ST]	benazepril, enalapril, lisinopril, ramipril
Ambien CR	zolpidem, Sonata	MAXALT MLT [DQ]	sumatriptan, ZOMIG/ZMT
AMERGE [DQ]	sumatriptan, ZOMIG/ZMT	MIACALCIN NASAL	alendronate, ACTONEL
ANZEMET	ondansetron, granisetron	MICARDIS/HCT [ST]	Losartan/hctz, BENICAR/HCT, DIOVAN/HCT [ST]
APRIDRA	Humalog, Novolog	MOBIC [ST]	generic NSAIDs
APRISO	balsalazide, Asacol/HD	MULTAQ	amiodarone
ASTEPRO	NASONEX, fluticasone	MUSE [DQ]	EDEX [inj]
ASCENSIA [PA]	ACCU-CHEK, ONE TOUCH	NASACORT AQ	NASONEX, fluticasone
ATACAND/HCT [ST]	Losartan/hctz, BENICAR/HCT, DIOVAN/HCT [ST]	NASAREL	NASONEX, fluticasone
AVALIDE AVAPRO [ST]	Losartan/hctz, BENICAR/HCT, DIOVAN/HCT [ST]	NUVIGIL	amphetamine salt combo, methylphenidate, Provigil[PA]
AVINZA	generics	OPTIVAR	azelastine, PATANOL
AVITA [PA]	generic tretinoin, adapalene	ORAPRED	prednisolone soln
AXERT [DQ]	sumatriptan, ZOMIG/ZMT	OVIDREL	chorionic gonadotropin
AZELEX	generic tretinoin, adapalene	OXYIR	oxycodone hcl caps immediate release
AZMACORT	QVAR, FLOVENT HFA, DISKUS	PAXIL CR	paroxetine
AZOPT	ALPHAGAN P *	PCE	erythromycin
BENZAMYCIN	erythromycin/benzoyl peroxide	PEDIAPRED	prednisolone soln
BETIMOL	betaxolol, timolol, other generics	PERGONAL [inj] [PA]	REPRONEX [inj] [PA]
BIAXIN -XL	clarithromycin	PHENYTEK	phenytoin sodium extended release
BONIVA	alendronate, ACTONEL	PRECISION (not XTRA) [PA]	ACCU-CHEK, ONE TOUCH
CARDIZEM LA	diltiazem extended release, VERELAN PM	PRISTIQ [ST]	Venlafaxine ER/XR, CYMBALTA [ST]
CAVERJECT [DQ]	EDEX	PROZAC WEEKLY [ST]	fluoxetine
CECLOR CD	cefaclor extended release	QUIXIN	ciprofloxacin, ofloxacin, VIGAMOX, ZYMAR
CENESTIN	MENEST, PREMARIN	RAPAFLO	doxazosin, tamsulosin hcl, Uroxatral
CIALIS [DQ]	LEVITRA [DQ]	RELENZA [DQ]	rimantadine, TAMIFLU [DQ]
CIPRO XR	ciprofloxacin, AVELOX	RELPAK [DQ]	sumatriptan, ZOMIG/ZMT
COVERA-HS	verapamil extended release, VERELAN PM	RESCULA	XALATAN
DIDRONEL	alendronate, ACTONEL	RETIN-A liquid MICRO [PA]	generic, tretinoin
DIPENTUM	ASACOL, PENTASA	RITALIN LA	amphetamine salt combo, methylphenidate, Concerta*
DYNABAC	erythromycin	RYNATAN	fexofenadine, -pse
DYNACIRC CR	nifedipine extended release, amlodipine	SIMPONI	ENBREL, HUMIRA[PA]
EPOGEN [PA]	ARANESP [PA], PROCIT [PA]	SKELID	alendronate, ACTONEL
ESTRADERM	generics, ESCLIM	SOF-TACT [PA]	ACCU-CHEK, ONE TOUCH
FAMVIR	acyclovir, valacyclovir	SPORANOX [PA]	itraconazole
FERTINEX [inj] [PA]	GONAL-F [inj] [PA]	SULAR	nisoldipine, nifedipine extended release, amlodipine
FLOXIN	ciprofloxacin, AVELOX	SYNTHROID	levothyroxine
FML FORTE	generic steroids, LOTEMAX	TARKA [ST]	verapamil + ACE, amlodipine besylate-benazepril
FOCALIN	methylphenidate, CONCERTA	TESTIM	ANDROGEL, ANDRODERM
FREESTYLE [PA]	ACCU-CHEK, ONE TOUCH	TESTODERM	ANDROGEL, ANDRODERM
FROVA [DQ]	sumatriptan, ZOMIG/ZMT	TEVETEN/HCT [ST]	Losartan/hctz, BENICAR/HCT, DIOVAN/HCT [ST]
GEODON	risperidone, ABILIFY, SEROQUEL, ZYPREXA(nonZydis)	TOVIAZ	oxybutynin/er, Vesicare
GLUCOMETER [PA]	ACCU-CHEK, ONE TOUCH	TRAVATAN	LUMIGAN
GLYSET	acarbose	UNIRETIC [ST]	benazepril/HCTZ, enalapril/hctz, lisinopril/hctz
IOPIDINE	ALPHAGAN P*	VANTIN	generics, amox tr/potassium clavulanate, AUGMENTIN XR
KADIAN	morphine sulfate	VIAGRA [DQ]	LEVITRA [DQ]
		VYVANSE	amphetamine salt combo, methylphenidate, Concerta*

Key:

Brand name drugs are listed in CAPITAL letters. **Generic drugs** are listed in lower case letters.

The symbol * next to a drug signifies brand drug will convert to non-Preferred status when generic is available throughout the year.

The symbol [inj] next to a drug indicates that the drug is available in injectable form only.

The symbol [PA] next to a drug stands for Prior Authorization, which is needed prior to coverage of this drug, plan dependent.

The symbol [ST] next to a drug name stands for Step Therapy which is in place on this drug, plan dependent.

The symbol [DQ] next to a drug stands for Drug Quantity, which is a limitation on amount dispensed.

For the member: Generic medications contain the same active ingredients as their corresponding brand name medications, although they may look different in color or shape. They have been FDA-approved under strict standards.

For the physician: Please prescribe preferred products and allow generic substitutions when medically appropriate.

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