



CCHP Formulary

(List of Covered Drugs)

華人保健計劃 保障藥物目錄



This document contains information about the drugs we cover. For detailed information about your outpatient prescription drug coverage, please read your CCHP Evidence of Coverage. If you have questions, please call our Member Services Department at 415-834-2118.

What is the CCHP formulary?

The CCHP formulary is a list of drugs that we cover. We cover the drugs listed in our formulary as long as the drug is medically necessary, the prescription is filled at a network pharmacy, and other coverage rules are followed. For certain prescription drugs, we have additional requirements for coverage or limits on our coverage. In addition, we also cover drugs not on the formulary, if found to be medically necessary.

Both brand-name drugs and generic drugs are included on the formulary. A generic drug has the same active-ingredient formula as the brand-name drug. Generic drugs usually cost less than brand-name drugs and are rated by the federal Food and Drug Administration (FDA) to be as safe and as effective as brand-name drugs.

Not all drugs are included on the formulary; in some cases, we have decided not to include a particular drug.

What if your drug is not on the formulary?

If your prescription is not listed on the formulary, you should first contact Member Services to be sure it is not covered. If Member Services confirms that we do not cover your drug, you have three options:

- ◆ You can ask your doctor if you can switch to another drug covered by us.
- ◆ You can ask us to make an authorization to cover your drug.
- ◆ You can pay out-of-pocket for the drug and request that the Plan reimburse you by requesting an authorization. If the authorization request is not approved the Plan is not obligated to reimburse you. If the authorization request is not approved, you may appeal the Plan's denial.

Can the formulary change?

We may add or remove drugs from the formulary during the year. Changes in the formulary may affect which drugs are covered and how much you will pay when filling your prescription. We may add or remove drugs from the formulary, or add prior authorizations, quantity limits and/or step therapy restrictions on a drug. However, for any drug we have been covering and providing to you, we will continue to provide the drug to you, with the member cost-sharing and restrictions described in this section, as long as the prescription is required by law and your physician continues to prescribe the drug for the same condition.

Drug management programs

For certain prescription drugs, we have additional requirements for coverage or limits on our coverage. These requirements and limits ensure that our members use these drugs in the most effective way and also help us control drug plan costs. A team of doctors and pharmacists developed these requirements and limits for our Plan to help us to provide quality coverage to our members.

- ◆ **Prior Authorization:** We require you to get prior authorization for certain drugs. This means that your physician (or pharmacist) will need to get approval from us before you fill your prescription. If they don't get approval, we may not cover the drug.
- ◆ **Quantity Limits:** For certain drugs, we limit the amount of the drug that we will cover per prescription or for a defined period of time.
- ◆ **Step Therapy:** In some cases, we require you to first try one drug to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, we may require your doctor to prescribe Drug A first. If Drug A does not work for you, then we will cover Drug B.
- ◆ **Generic Substitution:** When there is a generic version of a brand-name drug available, our network pharmacies will automatically give you the generic version.

You can find out if your drug is subject to these additional requirements or limits by looking in the formulary. If your drug is subject to one of these additional restrictions or limits, and your physician determines that you are not able to meet the additional restriction or limit for medical necessity reasons, you or our physician can request an authorization for an alternate drug.

How much do you pay for drugs covered by this Plan?

When you fill a prescription for a covered drug, you must pay part of the costs for your drug. The amount you pay for your drug depends on whether it is a generic or brand name medication and whether you are using a retail pharmacy or mail order. To find the amount you must pay for covered drugs, refer to your CCHP Evidence of Coverage.

List of Network Pharmacies

With few exceptions, you must use network pharmacies to get your prescription drugs covered. To understand the plan's requirements for filling prescriptions, please read your CCHP Evidence of Coverage.

The CCHP Pharmacy List contains a list of our network pharmacies in our service area. You can use it to find the network pharmacy closest to you. If you don't have the Pharmacy List, just call Member Services Department at 415-834-2118 for information. In addition, you can find this information on our Web site at www.cchphmo.com.

CCHP's Mail Order Pharmacy Service

If your physician prescribes "maintenance medications" for you, you may order them through our mail order program. Maintenance medications are taken on a long-term basis and are available in up to 90-day supplies through the mail program.

CCHP uses Express Scripts for the mail order pharmacy service. Please note that you must use the CCHP mail order service. Drugs that you get through any other mail order service are not covered.

To get order forms and information about filling your prescriptions by mail, contact our Member Services Department.

此目錄已包括本計劃藥物保障的資料，有關詳細門診藥物保障，請參閱《華人保健計劃》的“保障說明書”。如有任何疑問，請致電 415-834-2118 與會員服務部聯絡。

甚麼是《華人保健計劃》藥物目錄表？

《華人保健計劃》藥物目錄表是列舉我們所有的保障藥物。只要所配藥物是醫療必需，在聯網藥房配購，並符合其他規定和限制，所配藥物則在保障範圍內。對於某些藥物，我們會在保障範圍內附上特別的規定或限制。此外，我們亦會包括醫療必需而又不在藥物目錄表內的藥物。

商標藥物及非商標藥物同樣會包括在藥物目錄表內；商標藥物及非商標藥物通常是採用同樣的成份制成，但非商標藥物的價格則較為廉宜，而且亦通過食品及藥物管理局（FDA）認可以確保非商標藥物的安全性及相同效力。

不是所有藥物都包括在藥物目錄表內，在某些情況下，我們可能會決定不包括某種藥物。

如果我服食的藥物不包括在藥物目錄表內又該怎樣辦呢？

如果你服食的藥物不包括在藥物目錄表內，你應該先與會員服務部聯絡；如會員服務部確認該藥物不在我們的保障範圍內，你將有下列的選擇：

- 你可以向你的醫生要求處方另一種保障的藥物
- 你可以向我們申請批准保障該藥物
- 你可以先行支付全費去配購該藥物，然後再要求本計劃批准該藥物的退款。假若不獲批准，我們則沒有責任為你作出任何退款，但你可以向本計劃提出上訴有關的否定。

藥物目錄表會否更改？

我們可能在整年期間增加或刪除某些藥物，更改藥物目錄表後可能會影響某些保障的藥物或費用。我們可能在藥物目錄表內增加或刪除某些藥物，或加入事先徵得批准程序，限制配購數量及階段治療的規定限制。只要該藥物是受法律規定及在同樣的癥狀下你的醫生繼續處方該藥物，會員是可以繼續得到我們提供你現正受保障的藥物，會員是需支付分擔費及計劃的規定限制。

藥物管理計劃

某些處方藥物，我們在保障範圍內有附加要求及限制，這些要求及限制是保證會員能有效地使用該藥物及有助我們管理藥物的價格。醫生團及藥劑師制訂這些要求及限制以便為會員提供高質素的保障。

- **事先批准：**我們要求閣下在配購某些藥物前事先徵得批准，意思是你的醫生（或藥劑師）必須取得我們的批准後方能配購某些藥物。如果他們的申請不獲得批准，你所配購的藥物可能不會受到保障。
- **數量限制：**某些藥物在保障範圍內可能有數量或規定提取日期的限制。

- **階段治療：**在某些情況下，我們要求你在治療某些疾病時，先嘗試某些建議的藥物後，方能再考慮是否保障另一種的藥物。例如，A藥物與B藥物同樣可以治療你的疾病；我們可能要求你的醫生先行處方A藥物。假若A藥物是沒有成效，我們才會保障B藥物。
- **以非商標藥物代替：**如果非商標藥物及商標藥物同時均有存貨，我們的聯網藥房將會自動提供非商標藥物給你。

你可查閱本目錄表來了解你欲配購處方藥物是否有附加特別的規定或限制。如你的藥物是其中一種受到規定或限制的藥物，而你的醫生決定你醫療上需要的理由是不符合該附加的規定或限制，你或你的醫生可以要求批准有關的代替藥物。

在計劃保障下的藥物，你需要支付多少費用呢？

當你配取保障內的處方藥物時，你必須支付部份的費用，而支付的費用是按照你的藥物是非商標藥物或是商標藥物以及到零售藥房或以郵寄方式購買而決定。欲知詳情，請參閱《華人保健計劃》的“保障說明書”。

聯網藥房目錄表

除小數特別情況，你必須到聯網藥房配購你的處方藥物方能得到保障。如欲了解計劃內配購處方藥物的規定或限制，請參閱《華人保健計劃》的“保障說明書”。

《華人保健計劃》的藥房目錄表已包括我們服務地區內的聯網藥房，你可以使用此目錄來尋找你附近的聯網藥房。如果你沒有此藥房目錄表或想查詢有關資料，請致電 415-834-2118 與會員服務部聯絡或瀏覽網址 www.cchphmo.com。

《華人保健計劃》郵寄藥物服務

如果你的醫生為你處方了“維持性藥物”，你便可以通過郵寄藥物服務來配購長期服用的藥物，每次配取可高達90天的份量。

《華人保健計劃》是採用“Express Scripts”作為專用的郵寄公司。請謹記，你必須使用《華人保健計劃》指定的郵寄公司方能得到所配購藥物的保障。

詳情請向會員服務部查詢或索取郵寄處方藥物的申請表格。

CCHP Commercial Formulary - Effective January 2010

DRUG NAME	TIER	RESTRICTIONS
CHAPTER 1: ANESTHETICS		
1.0 ANESTHETICS		
halothane	1	
1.1 LOCAL ANESTHETICS		
bupivacaine hcl	1	
bupivacaine hcl-epinephrine	1	
lidocaine hcl	1	
lidocaine hcl-epinephrine	1	
1.2 TOPICAL ANESTHETICS		
ethyl chloride	1	
lidocaine hcl	1	
lidocaine-prilocaine	1	
optacaine	1	
LIDODERM	2	PA
CHAPTER 2: ANTIINFECTIVES		
2.1.1 CEPHALOSPORINS		
cefaclor	1	
cefadroxil	1	
cefazolin sodium	1	
cefdinir	1	
cefpodoxime proxetil	1	
cefprozil	1	
cefuroxime	1	
cephalexin	1	
2.1.2 CHLORAMPHENICOLS		
chloramphenicol	1	
2.1.3 CLINDAMYCINS		
clindamycin	1	
2.1.4 ERYTHROMYCINS		
erythromycin	1	
erythromycin base	1	
erythromycin ethylsuccinate	1	
erythromycin stearate	1	
ERY-TAB	2	
2.1.4.1 OTHER MACROLIDES		
azithromycin	1	QLL
clarithromycin/er	1	

DRUG NAME	TIER	RESTRICTIONS
2.1.5 PENICILLINS		
amox tr-potassium clavulanate	1	
amoxicillin	1	
ampicillin	1	
ampicillin-sulbactam	1	
dicloxacillin sodium	1	
nafcillin	1	
oxacillin	1	
penicillin	1	
AMOXIL	2	
2.1.6 SULFONAMIDES		
erythromycin w/sulfisoxazole	1	
sulfadiazine	1	
sulfamethoxazole/trimethoprim	1	
sulfatrim	1	
GANTRISIN	2	
2.1.7 TETRACYCLINES		
demeclocycline hcl	1	
doxycycline, -hyclate	1	
minocycline hcl, -er	1	
tetracycline hcl	1	
2.1.8 URINARY ANTIINFECTIVES		
methenamine	1	
nitrofurantoin	1	
trimethoprim	1	
FURADANTIN	2	
2.1.9 QUINOLONES		
ciprofloxacin, -er, -hcl	1	
ofloxacin (tabs)	1	
AVELOX	2	
2.2 TOPICAL ANTIBACTERIAL DRUGS		
gentamicin sulfate	1	
mupirocin	1	
silver sulfadiazine	1	
BACTROBAN	2	
SULFAMYLON	2	
2.3 ORAL ANTIFUNGAL DRUGS		
clotrimazole	1	

CCHP Commercial Formulary - Effective January 2010

DRUG NAME	TIER	RESTRICTIONS
fluconazole	1	PA; QLL
griseofulvin	1	
itraconazole	1	PA; QLL
ketoconazole	1	
nystatin	1	
terbinafine hcl	1	
ANCOBON	2	
GRIFULVIN V	2	
GRIS-PEG	2	
VFEND	2	PA
2.4.1 VAGINAL ANTIFUNGALS		
clotrimazole	1	
miconazole 3	1	QLL
nystatin	1	
terconazole	1	QLL

2.4.2 OTHER TOPICAL ANTIFUNGALS		
miconazole nitrate	1	
ciclopirox	1	
clotrimazole	1	
econazole nitrate	1	
ketoconazole	1	
nystatin	1	
2.4.3 TOPICAL ANTIFUNGAL-CORTICOSTEROID COMB.		
clotrimazole/betamethasone		
nystatin w/triamcinolone		

2.5.1 ANTIRETROVIRALS & PROTEASE INHIBITORS		
didanosine	1	
stavudine	1	
zidovudine	1	
AGENERASE	2	
APTIVUS	2	
ATRIPLA	2	
COMBIVIR	2	
CRIXIVAN	2	
EMTRIVA	2	
EPIVIR	2	
EPZICOM	2	

DRUG NAME	TIER	RESTRICTIONS
FORTOVASE	2	
FUZEON	2	PA
HIVID	2	
INTELENCE	2	
ISENTRESS	2	
INVIRASE	2	
KALETRA	2	
LEXIVA	2	
NORVIR	2	
PREZISTA	2	
RESCRIPTOR	2	
RETROVIR	2	
REYATAZ	2	
SELZENTRY	2	
SUSTIVA	2	
TRIZIVIR	2	
TRUVADA	2	
VIDEX	2	
VIRACEPT	2	
VIRAMUNE	2	
VIREAD	2	
ZIAGEN	2	
2.5.2 OTHER ANTIVIRAL DRUGS		
acyclovir, -sodium	1	
amantadine hcl	1	
famciclovir	1	
foscarnet sodium	1	
ribavirin	1	
rimantadine hcl	1	
BARACLUDGE	2	
EPIVIR HBV	2	
HEPSERA	2	
RELENZA	2	
TAMIFLU	2	QLL
TYZEKA	2	
VALCYTE	2	
2.6 TOPICAL ANTIVIRAL DRUGS		
ZOVIRAX	2	

CCHP Commercial Formulary - Effective January 2010

DRUG NAME	TIER	RESTRICTIONS
2.7.1 AMEBICIDES		
paromomycin sulfate	1	
2.7.2 ANTITUBERCULOSIS DRUGS		
ethambutol hcl	1	
isoniazid	1	
pyrazinamide	1	
rifampin	1	
MYCOBUTIN	2	
2.7.3 PLASMODICIDES		
chloroquine phosphate	1	
hydroxychloroquine sulfate	1	
mefloquine hcl	1	
DARAPRIM	2	
MALARONE	2	
2.7.4 SULFONES		
DAPSONE	2	
2.7.5 TRICHOMONOCIDES		
metronidazole	1	
2.7.6 ANTHELMINTICS		
mebendazole	1	
ALBENZA	2	
2.8 OTHER ANTIINFECTIVE DRUGS		
bacitracin	1	
colistimethate sodium	1	
lincomycin hcl	1	
polymyxin b sulfate	1	
vancomycin hcl	1	
MEPRON	2	
NEBUPENT	2	
VANCOCIN HCL	2	
ZYVOX	2	PA
2.8.1 PARENTERAL ANTIFUNGALS		
fluconazole	1	
VFEND IV	2	PA
2.8.2 AMINOGLYCOSIDES		
gentamicin	1	
neomycin	1	
tobramycin	1	

DRUG NAME	TIER	RESTRICTIONS
CHAPTER 3: ANTINEOPLASTIC/IMMUNOSUPPRESSANT DRUGS		
3.0 ANTINEOPLASTIC/IMMUNOSUPPRESSANT DRUGS		
adriamycin	1	
adrucil	1	
amifostine	1	
anagrelide hcl	1	
azathioprine, -sodium	1	PA
bicalutamide	1	
bleomycin sulfate	1	
carboplatin	1	
cisplatin	1	
cladribine	1	
cyclophosphamide	1	PA
cyclosporine	1	PA
cytarabine	1	
dacarbazine	1	
daunorubicin hcl	1	
dexrazoxane	1	
doxorubicin hcl	1	
etoposide	1	
floxuridine	1	
flutamide	1	
gengraf	1	PA
hydroxyurea	1	
idarubicin hcl	1	
ifosfamide	1	
ifosfamide-mesna	1	
irinotecan hcl	1	
leflunomide	1	
leucovorin calcium	1	
megestrol acetate	1	
mercaptopurine	1	
methotrexate	1	PA
mitomycin	1	
mitoxantrone hcl	1	PA
mycophenolate mofetil	1	
octreotide acetate	1	
paclitaxel	1	

CCHP Commercial Formulary - Effective January 2010

DRUG NAME	TIER	RESTRICTIONS
pentostatin	1	
tacrolimus	1	
tamoxifen	1	
thiotepa	1	
toposar	1	
vinblastine sulfate	1	
vincristine sulfate	1	
vinorelbine tartrate	1	
ABRAXANE	2	
ALIMTA	2	
AMEVIVE	2	PA
ARIMIDEX	2	
AROMASIN	2	
ARRANON	2	
AVASTIN	2	
AZASAN	2	PA
BEXXAR	2	
BICNU	2	
BUSULFEX	2	
CAMPATH	2	
CAMPTOSAR	2	
CEENU	2	
CELLCEPT	2	PA
CLOLAR	2	
COSMEGEN	2	
DACOGEN	2	
DAUNOXOME	2	
DEPOCYT	2	
DEPO-PROVERA (INJ)	2	QLL
DOXIL	2	
DROXIA	2	
ELIGARD	2	PA
ELITEK	2	
ELLENCE	2	
ELSPAR	2	
EMCYT	2	
ENBREL	2	PA; QLL
EPIRUBICIN HCL	2	

DRUG NAME	TIER	RESTRICTIONS
ERBITUX	2	
ETHYOL	2	
ETOPOPHOS	2	
FARESTON	2	
FASLODEX	2	
FEMARA	2	
FLUDARABINE PHOSPHATE	2	
GEMZAR	2	
GLEEVEC	2	
HERCEPTIN	2	
HEXALEN	2	
HUMIRA	2	PA; QLL
HYCAMTIN	2	
IRESSA	2	
IXEMPRA	2	
LEUKERAN	2	
LYSODREN	2	
MATULANE	2	
MESNA	2	
MESNEX	2	
METHOTREXATE (inj)	2	PA
MUSTARGEN	2	
MYFORTIC	2	PA
MYLERAN	2	
MYLOCEL	2	
MYLOTARG	2	
NEXAVAR	2	
NILANDRON	2	
ONCASPAR	2	
ONTAK	2	
ORENCIA	2	PA
ORTHOCLONE OKT-3	2	
PHOTOFRIN	2	
PLENAXIS	2	
PROGRAF (Capsules Tier 3)	2	PA
RAPAMUNE	2	PA
RAPTIVA	2	PA
REMICADE	2	PA

CCHP Commercial Formulary - Effective January 2010

DRUG NAME	TIER	RESTRICTIONS
REVLIMID	2	
RITUXAN	2	PA
SANDOSTATIN LAR	2	
SIMULECT	2	
SPRYCEL	2	
SUTENT	2	
TARCEVA	2	
TARGRETIN	2	
TASIGNA	2	
TAXOTERE	2	
TEMODAR	2	
TESLAC	2	
THERACYS	2	
THIOGUANINE	2	
TORISEL	2	
TREANDA	2	
TREXALL	2	PA
TRISENOX	2	
TYKERB	2	
TYSABRI	2	PA
UVADEX	2	
VANTAS (INJ)	2	
VECTIBIX	2	
VELCADE	2	
VIADUR	2	
VIDAZA	2	
VUMON	2	
XELODA	2	
ZANOSAR	2	
ZEVALIN	2	
ZOLADEX	2	
ZOLINZA	2	
CHAPTER 4: CARDIOVASCULAR MEDICATIONS		
4.1 CARDIAC GLYCOSIDES		
digoxin	1	
4.2 CALCIUM ANTAGONISTS		
amlodipine besylate	1	
diltzac er	1	

DRUG NAME	TIER	RESTRICTIONS
diltiazem cd, -er, -hcl	1	
diltiazem xr	1	
felodipine er	1	
isradipine	1	
nicardipine hcl	1	
nifedipine, -er	1	
nimodipine	1	
nisoldipine	1	
verapamil er, -hcl	1	
4.3.1 LOOP DIURETICS		
bumetanide	1	
furosemide	1	
torseamide	1	
4.3.2 THIAZIDE AND RELATED DRUGS		
chlorothiazide	1	
chlorthalidone	1	
hydrochlorothiazide	1	
indapamide	1	
metolazone	1	
4.3.3 POTASSIUM SPARING DIURETICS		
amiloride hcl	1	
amiloride hcl w/hctz	1	
spironolactone, -w/hctz	1	
triamterene w/hctz	1	
4.4 BETA-ADRENERGIC ANTAGONIST DRUGS		
acebutolol hcl	1	
atenolol	1	
betaxolol hcl	1	
bisoprolol fumarate	1	
carvedilol	1	
labetalol hcl	1	
metoprolol succinate	1	
metoprolol tartrate	1	
nadolol	1	
pindolol	1	
propranolol hcl	1	
timolol maleate	1	
4.5.1 VASODILATOR ANTIHYPERTENSIVES		

CCHP Commercial Formulary - Effective January 2010

DRUG NAME	TIER	RESTRICTIONS
doxazosin mesylate	1	QLL
hydralazine hcl	1	
minoxidil	1	
prazosin hcl	1	
terazosin hcl	1	QLL
4.5.2 CENTRALLY ACTING ANTIHYPERTENSIVES		
clonidine hcl, -patch	1	
guanabenz acetate	1	
guanfacine hcl	1	
methyldopa	1	
4.5.3 ALPHA-ADRENERGIC ANTAGONISTS		
reserpine	1	
4.5.4.1 ANGIOTENSIN CONVERTING ENZYME INHIBITORS		
benazepril hcl	1	
captopril	1	
enalapril maleate	1	
enalaprilat	1	
fosinopril sodium	1	
lisinopril	1	
moexipril hcl	1	
quinapril	1	
ramipril	1	
trandolapril	1	
4.5.4.2 ANGIOTENSIN II RECEPTOR ANTAGONISTS		
BENICAR	2	ST
COZAAR	2	ST
DIOVAN	2	ST
4.5.5 DRUGS FOR PHEOCHROMOCYTOMA		
DEMSER	2	
DIBENZYLINE	2	
4.5.6 OTHER ANTIHYPERTENSIVES		
amlodipine besylate-benazepril	1	
atenolol w/chlorthalidone	1	
benazepril hcl-hctz	1	
bisoprolol fumarate/hctz	1	
captopril/hydrochlorothiazide	1	
enalapril maleate/hctz	1	
fosinopril-hydrochlorothiazide	1	

DRUG NAME	TIER	RESTRICTIONS
lisinopril-hctz	1	
metoprolol-hydrochlorothiazide	1	
moexipril-hctz	1	
propranolol hcl w/hctz	1	
quinapril-hydrochlorothiazide	1	
AZOR	2	
EXFORGE, -HCT	2	
HYZAAR	2	ST
4.6.1 NITRATES		
isosorbide dinitrate	1	
isosorbide mononitrate	1	
nitro-bid	1	
nitroglycerin	1	
4.6.2 OTHER VASODILATING DRUGS		
papaverine hcl	1	
4.6.3 ENDOTHELIN RECEPTOR ANTAGONIST		
LETAIRIS	2	
TRACLEER	2	
4.7.1 CLASS 1 - MEMBRANE STABILIZING		
ETHMOZINE	2	
4.7.1.1 CLASS 1A		
disopyramide phosphate	1	
procainamide hcl	1	
quinidine gluconate	1	
quinidine sulfate	1	
4.7.1.2 CLASS 1B		
mexiletine hcl	1	
4.7.1.3 CLASS 1C		
flecainide acetate	1	
propafenone hcl	1	
4.7.3 AMIODARONES		
amiodarone hcl	1	
4.7.5 OTHER ANTIARRHYTHMICS		
lidocaine hcl	1	
sotalol	1	
TIKOSYN	2	
4.8.1 HYPOLIPOPROTEINEMICS		
cholestyramine	1	

CCHP Commercial Formulary - Effective January 2010

DRUG NAME	TIER	RESTRICTIONS
fenofibrate	1	
gemfibrozil	1	
niacin	1	
LOVAZA	2	
NIASPAN	2	
OMACOR	2	
ZETIA	2	ST
4.8.2 HMG-COA REDUCTASE INHIBITORS		
lovastatin	1	QLL
pravastatin sodium	1	QLL
simvastatin	1	QLL
CRESTOR	2	ST; QLL
LIPITOR (40 & 80mg only)	2	QLL
4.8.2.1 HMG-COA COMBINATIONS		
VYTORIN	2	ST; QLL
4.9 OTHER CARDIOVASCULAR DRUGS		
isoproterenol hcl	1	
midodrine hcl	1	
pentoxifylline	1	
phenylephrine hcl	1	
CHAPTER 5: AUTONOMIC AND CNS MEDICATIONS		
5.1.1 ANALGESICS		
butorphanol tartrate	1	QLL
tramadol hcl	1	
tramadol hcl-acetaminophen	1	
DOLOGESIC	2	
DOLOREX	2	
5.1.1.1 CLASS II NARCOTICS		
codeine sulfate	1	
endocet	1	
endodan	1	
hydromorphone hcl	1	
meprozine	1	
methadone hcl	1	
methadose	1	
morphine sulfate	1	
oxycodone apap	1	
oxycodone hcl	1	QLL

DRUG NAME	TIER	RESTRICTIONS
oxycodone hcl-ibuprofen	1	
oxycodone-acetaminophen	1	
oxycodone-aspirin	1	
OPANA ER	2	
OXYCONTIN	2	QLL
ROXICET	2	
5.1.1.2 CLASS III NARCOTICS		
acetaminophen w/codeine	1	
acetaminophen w/hydrocodone	1	
apap-caffeine-dihydrocodeine	1	
aspirin with codeine	1	
hydrocodone bit-ibuprofen	1	
SUBOXONE	2	QLL
SUBUTEX	2	
5.1.1.3 CLASS IV NARCOTICS		
pentazocine-acetaminophen	1	
pentazocine-naloxone hcl	1	
propoxacet-n 100	1	
5.1.2 DRUGS TO PREVENT AND TREAT HEADACHES		
acetaminophen-butalbital	1	
amidrine	1	
asa-butalb-caffeine-codeine	1	
ascomp with codeine	1	
bellamine-s	1	
butalbital/acetaminophen/caffeine	1	
butalbital-aspirin-caffeine	1	
butalbital-caff-apap-codeine	1	
butorphanol tartrate	1	
diacetazone	1	
dihydroergotamine mesylate	1	
epidrin	1	
ergotamine-caffeine	1	
isometh-dichloralphenaz-apap	1	
butalbital/apap/caffeine	1	
sumatriptan	1	QLL
ZOMIG/ZMT	2	QLL
5.2.1 ANXIOLYTICS		
alprazolam, -er, -intensol, -xr	1	

CCHP Commercial Formulary - Effective January 2010

DRUG NAME	TIER	RESTRICTIONS
bupirone hcl	1	
chlordiazepoxide hcl	1	
clorazepate dipotassium	1	
diazepam	1	
lorazepam, -intensol	1	
meprobamate	1	
oxazepam	1	
5.2.2 SEDATIVE/HYPNOTIC DRUGS		
chloral hydrate	1	
estazolam	1	
flurazepam hcl	1	
midazolam hcl	1	
temazepam	1	
triazolam	1	
zaleplon	1	
zolpidem tartrate	1	QLL
ROZEREM	2	QLL
5.3 ANTIMANIA DRUGS		
lithium carbonate	1	
lithium citrate	1	
5.4.1 CARBAMAZEPINES		
carbamazepine, -xr	1	
oxcarbazepine	1	
5.4.2 ANTICONVULSANT BENZODIAZEPINES		
clonazepam	1	
DIASTAT	2	
5.4.3 HYDANTOINS		
fosphenytoin sodium	1	
phenytoin sodium	1	
5.4.4 VALPROIC ACID AND DERIVATIVES		
divalproex sodium, -er	1	
valproate sodium	1	
valproic acid	1	
DEPAKOTE	2	
5.4.5 SUCCINIMIDES		
ethosuximide	1	
CELONTIN	2	

DRUG NAME	TIER	RESTRICTIONS
5.4.6 ANTICONVULSANT BARBITURATES		
phenobarbital, -sodium	1	
primidone	1	
5.4.7 OTHER ANTICONVULSANTS		
gabapentin	1	
lamotrigine	1	
topiramate	1	
zonisamide	1	PA
FELBATOL	2	
GABITRIL	2	
KEPPRA	2	
LAMICTAL	2	
LYRICA	2	ST
VIMPAT	2	
5.5.1.1 TERTIARY AMINES		
amitriptyline hcl	1	
clomipramine hcl	1	
doxepin hcl	1	
imipramine hcl, -pamoate	1	
5.5.1.2 SECONDARY AMINES		
amoxapine	1	
desipramine hcl	1	
nortriptyline hcl	1	
5.5.1.3 SELECTIVE SEROTONIN REUPTAKE INHIBITORS		
citalopram	1	QLL
fluoxetine hcl	1	
fluvoxamine maleate	1	QLL
paroxetine hcl	1	QLL
sertraline hcl	1	QLL
5.5.1.4 OTHER ANTIDEPRESSANTS		
amitriptyline-chlordiazepoxide	1	
budeprion sr (150 mg)	1	QLL
budeprion xl	1	
bupropion hcl, -sr, -xl	1	QLL
maprotiline hcl	1	
mirtazapine	1	
perphenazine-amitriptyline	1	
trazodone hcl	1	

CCHP Commercial Formulary - Effective January 2010

DRUG NAME	TIER	RESTRICTIONS
venlafaxine hcl	1	
CYMBALTA	2	ST; QLL
SAVELLA	2	
5.5.2 MAO INHIBITORS		
tranylcypromine sulfate	1	
NARDIL	2	
PARNATE	2	
5.6 ANTIVERTIGO AND ANTIEMETIC DRUGS		
dimenhydrinate	1	
granisetron hcl	1	
meclizine hcl	1	
prochlorperazine maleate	1	
promethazine hcl	1	
promethegan	1	
trimethobenzamide hcl	1	
EMEND	2	PA; QLL
5.7.1 ANTIPARKINSON ANTICHOLINERGIC DRUGS		
benztropine mesylate	1	
trihexyphenidyl hcl	1	
5.7.2 OTHER ANTIPARKINSON DRUGS		
bromocriptine mesylate	1	
carbidopa/levodopa	1	
ropinirole hcl	1	
selegiline hcl	1	
COMTAN	2	
MIRAPEX	2	
REQUIP	2	
5.8 ANTIPSYCHOTIC DRUGS		
clozapine	1	
fluphenazine	1	
haloperidol, -decanoate, -lactate	1	
loxapine	1	
perphenazine	1	
risperidone, m-tab, -odt	1	QLL
thioridazine hcl	1	
thiothixene	1	
trifluoperazine hcl	1	
ABILIFY	2	QLL

DRUG NAME	TIER	RESTRICTIONS
RISPERDAL CONSTA	2	
SEROQUEL	2	QLL
SEROQUEL XR	2	
ZYPREXA	2	QLL
5.8.1 ALIPHATIC PHENOTHIAZINES		
chlorpromazine hcl	1	
5.9.1 CNS STIMULANT DRUGS		
amphetamine salt combo	1	
dexmethylphenidate hcl	1	
dextroamphetamine-amphetamine, -er	1	
dextroamphetamine sulfate	1	
methylphenidate er, -sr, -hcl	1	
mycophenolate	1	
pemoline	1	
ADDERALL XR	2	
DESOXYN	2	
METADATE CD	2	
PROVIGIL	2	PA
VYVANSE	2	
5.9.2 OTHER CNS/AUTONOMIC DRUGS		
atropine sulfate	1	
flumazenil	1	
naloxone hcl	1	
naltrexone hcl	1	
neostigmine methylsulfate	1	
physostigmine salicylate	1	
pyridostigmine bromide	1	
MESTINON	2	
PROSTIGMIN	2	
XYREM	2	
5.9.2.1 ALCOHOL ANTAGONIST		
ANTABUSE	2	
5.9.3 ANTIDEMENTIA DRUGS		
ARICEPT, -ODT	2	
NAMENDA	2	
REMINYL	2	
5.9.4 DRUGS TO TREAT MULTIPLE SCLEROSIS		
COPAXONE	2	PA; QLL

CCHP Commercial Formulary - Effective January 2010

DRUG NAME	TIER	RESTRICTIONS
5.9.5 SMOKING CESSATION PRODUCTS		
bupropion hcl sr, -er	1	
nicotine patch	1	
CHANTIX	2	
5.9.6 OTHER DRUGS FOR ADHD		
STRATTERA	2	PA
CHAPTER 6: DERMATOLOGICAL MEDICATIONS		
6.1 TOPICAL CORTICOSTEROID DRUGS		
alclometasone dipropionate	1	
amcinonide	1	
betamethasone dipropionate	1	
betamethasone valerate	1	
clioquinol-hydrocortisone	1	
clobetasol emollient	1	
clobetasol propionate	1	
dermazene	1	
desonide	1	
desoximetasone	1	
diflorasone diacetate	1	
embeline	1	
fluocinolone	1	
fluocinonide, -emollient, -e	1	
fluticasone propionate	1	
halobetasol propionate	1	
hydrocortisone	1	
hydrocortisone-iodoquinol	1	
lidocaine-hydrocortisone	1	
mometasone furoate	1	
prednicarbate	1	
triamcinolone acetonide	1	
6.2 ANTIPRURITIC DRUGS		
hydroxyzine pamoate, -hcl	1	
6.3 ANTIACNE DRUGS		
benzoyl peroxide	1	
clenia	1	
clindamycin phosphate	1	
erythromycin-benzoyl peroxide	1	
metronidazole	1	

DRUG NAME	TIER	RESTRICTIONS
sodium sulfacetamide	1	
sodium sulfacetamide-sulfur	1	
tretinoin	1	PA
zaclir	1	
FINACEA	2	
6.3.1 ACCUTANES		
amnestem	1	
sotret	1	
6.7 KERATOLYTIC DRUGS		
podofilox	1	
salicylic acid	1	
6.8 ANTIPSORIASIS AND ANTIECZEMA DRUGS		
calcipotriene	1	
drithocrema hp	1	
salicylic acid	1	
selenium sulfide	1	
sulfacetamide sodium	1	
DOVONEX	2	
SORIATANE	2	
TAZORAC	2	PA
6.9.1 ORAL DERMATOLOGICAL DRUGS		
8-MOP		
6.9.2 TOPICAL DERMATOLOGICAL DRUGS		
benzoin	1	
fluorouracil	1	
hydroquinone	1	
lactic acid	1	
pap-urea	1	
silver nitrate	1	
sodium hyaluronate	1	
tretinoin	1	PA
urea	1	
ALERA	2	
EFUDEX	2	
FLUOROPLEX	2	
PROTOPIC	2	ST
REGANEX	2	PA; QLL
6.9.3 SCABICIDES		

CCHP Commercial Formulary - Effective January 2010

DRUG NAME	TIER	RESTRICTIONS
acticin	1	
permethrin	1	
EURAX	2	
CHAPTER 7: EAR-NOSE-THROAT MEDICATIONS		
7.1 DRUGS AFFECTING THE EAR		
acetic acid	1	
acetic acid-aluminum	1	
acetic acid-hydrocortisone	1	
antipyrine-benzocaine	1	
neomycin/polymyxin/hc	1	
neomycin-polymyxin-hc	1	
ofloxacin	1	
CIPRODEX	2	
CIPRODEX OTIC	2	
7.2 DRUGS AFFECTING THE NOSE		
cromolyn sodium	1	
flunisolide	1	QLL
fluticasone propionate	1	
ipratropium bromide	1	QLL
NASACORT AQ	2	QLL
ASTELIN	2	QLL
7.3 DRUGS AFFECTING THE THROAT AND MOUTH		
chlorhexidine gluconate		
doxycycline hyclate	1	
perio gard	1	
pilocarpine hcl	1	
triamcinolone acetonide	1	
CHAPTER 8: ENDOCRINE MEDICATIONS		
8.1.1 INSULINS		
LANTUS	2	
LEVEMIR	2	
NOVOLIN 70-30	2	
NOVOLOG	2	
NOVOLOG MIX 70-30	2	
NOVOLIN 70/30	2	
NOVOLIN N	2	
NOVOLIN R	2	

DRUG NAME	TIER	RESTRICTIONS
8.1.2 ORAL HYPOGLYCEMIC DRUGS		
acarbose	1	
glimepiride	1	
glipizide, -er, -xl	1	
glipizide-metformin	1	
glyburide, -micronized	1	
glyburide-metformin	1	
metformin er	1	
metformin hcl	1	
tolazamide	1	
tolbutamide	1	
PRANDIMET	2	
PRANDIN	2	
PRECOSE	2	
8.1.3 INSULIN SENSITIZERS		
ACTOPLUS MET	2	QLL
ACTOS	2	QLL
DUETACT	2	
8.1.4 AMYLIN ANALOGUES		
SYMLIN	2	PA; QLL
SYMLINPEN	2	PA
8.1.5.1 INCRETIN MIMETICS		
BYETTA	2	PA; QLL
8.1.5.2 DIPEPTIDYL PEPTIDASE-IV INHIBITORS		
JANUMET	2	
JANUVIA	2	QLL
8.2 GLUCOSE ELEVATING DRUGS		
GLUCAGON	2	
GLUCAGON EMERGENCY KIT	2	
8.3.1 GLUCOCORTICOID DRUGS		
cortisone	1	
dexamethasone, -intensol	1	
hydrocortisone	1	
methylprednisolone, -acetate	1	
prednisolone, -sodium phosphate	1	
prednisone	1	
triamcinolone acetonide	1	
8.3.2 MINERALOCORTICOID DRUGS		

CCHP Commercial Formulary - Effective January 2010

DRUG NAME	TIER	RESTRICTIONS
fludrocortisone acetate	1	
8.4.1 THYROID SUPPLEMENTS		
levothyroxine sodium	1	
thyroid	1	
ARMOUR THYROID	2	
LEVOXYL	2	
8.4.2 ANTITHYROID DRUGS		
methimazole	1	
propylthiouracil	1	
8.6 OTHER ENDOCRINE DRUGS		
alendronate sodium	1	QLL
cabergoline	1	QLL
desmopressin acetate	1	
etidronate disodium	1	
fortical	1	
pamidronate disodium	1	
vasopressin	1	
FORTEO	2	PA
RECLAST	2	
SAMSCA	2	
SENSIPAR	2	
ZOMETA	2	
CHAPTER 9: GASTROINTESTINAL MEDICATIONS		
9.1.2 OTC H2 ANTAGONISTS		
famotidine	1	
ranitidine hcl	1	
9.2 ANTIDIARRHEAL DRUGS		
diphenoxylate-atropine	1	
loperamide hcl	1	
paregoric	1	
9.3 ANTISPASMODICS/DRUGS AFFECT GI MOTILITY		
belladonna-phenobarbital	1	
clidinium-chlordiazepoxide	1	
dicyclomine hcl	1	
glycopyrrolate	1	
hyoscyamine, -sulfate	1	
methscopolamine bromide	1	
metoclopramide hcl	1	

DRUG NAME	TIER	RESTRICTIONS
propantheline bromide	1	
9.4 ANTIULCER DRUGS		
cimetidine	1	
famotidine	1	
nizatidine	1	
ranitidine hcl	1	
9.4.1 OTHER ANTIULCER DRUGS		
misoprostol	1	
sucralfate	1	
9.4.2 PROTON PUMP INHIBITORS		
omeprazole	1	QLL
pantoprazole sodium	1	QLL
9.5 LAXATIVES AND CATHARTICS		
glycerin	1	
glycolax	1	
polyethylene glycol	1	
9.6 OTHER GI DRUGS		
anucort-hc	1	
balsalazide disodium	1	
gavilyte-g	1	
hydrocortisone	1	
lidocaine-hydrocortisone	1	
mesalamine	1	
pancrelipase	1	
pancrelipase 8,000	1	
pancrelipase mt-16	1	
peg 3350-electrolyte	1	
peg 3350 with flavor packs	1	
procto-kit	1	
proctosol-hc	1	
sulfasalazine, -dr	1	
sulfazine	1	
sulfazine ec	1	
ursodiol	1	
ASACOL, -HD	2	
CANASA	2	
CORTIFOAM	2	
CREON	2	

CCHP Commercial Formulary - Effective January 2010

DRUG NAME	TIER	RESTRICTIONS
ENTOCORT EC	2	
PENTASA	2	
ULTRASE/MT	2	
VIOKASE	2	
9.7 IRRITABLE BOWEL DRUGS		
AMITIZA	2	
LOTRONEX	2	
CHAPTER 10: IMMUNOLOGICALS AND VACCINES		
10.0 IMMUNOLOGICALS AND VACCINES		
immune globulin	1	PA
tetanus toxoid adsorbed	1	
APLISOL	2	
BAYHEP B	2	
BAYRHO-D	2	
HAVRIX	2	
HYPERRHO S-D	2	
MENACTRA	2	
SYNAGIS	2	PA
TETANUS TOXOID (FLUID)	2	
ZOSTAVAX	2	
10.2.1 MYELOID STIMULANTS		
NEULASTA	2	PA
NEUPOGEN	2	PA
10.2.2 ERYTHROID STIMULANTS		
PROCRIT	2	PA
10.2.3 INTERFERONS		
ACTIMMUNE	2	
AVONEX	2	PA; QLL
BETASERON	2	PA; QLL
INTRON A	2	
PEGASYS	2	PA; QLL
REBIF	2	PA; QLL
10.2.4 GROWTH HORMONES AND RELATED DRUGS		
TEV-TROPIN	2	PA
10.2.4.1 INSULIN LIKE GROWTH FACTORS		
INCRELEX	2	PA
10.2.5 INTERLEUKINS		
NEUMEGA	2	QLL

DRUG NAME	TIER	RESTRICTIONS
PROLEUKIN	2	
10.2.6 INTERLEUKIN RECEPTOR ANTAGONIST		
ARCALYST	2	PA
KINERET	2	PA
10.2.7 IMMUNOGLOBULIN ANTIBODIES		
SOLIRIS	2	
XOLAIR	2	PA
10.2.8 KERATINOCYTE GROWTH FACTOR		
KEPIVANCE	2	
CHAPTER 11: MUSCULOSKELETAL MEDICATIONS		
11.1.1 SALICYLATES AND RELATED DRUGS		
aspirin ec	1	
choline mag trisalicylate	1	
diflunisal	1	
salsalate	1	
tricosal	1	
11.1.2 NON-STEROIDAL ANTIINFLAMMATORY AGENTS		
diclofenac potassium	1	
diclofenac sodium	1	
etodolac	1	
fenoprofen calcium	1	
flurbiprofen	1	
ibuprofen	1	
indomethacin	1	
ketoprofen	1	
ketorolac tromethamine	1	
meclofenamate sodium	1	
mefenamic acid	1	
meloxicam	1	QLL
nabumetone	1	
naproxen	1	
oxaprozin	1	
piroxicam	1	
sulindac	1	
tolmetin sodium	1	
CELEBREX	2	ST
11.1.4 OTHER DRUGS FOR ARTHRITIS		
gold sodium thiomalate	1	

CCHP Commercial Formulary - Effective January 2010

DRUG NAME	TIER	RESTRICTIONS
myochrysine	1	
CUPRIMINE	2	
EUFLEXXA	2	
RIDAURA	2	
11.2 DRUGS TO PREVENT AND TREAT GOUT		
allopurinol, -sodium	1	
colchicine	1	
probenecid, -colchicine	1	
ULORIC	2	
11.3.1 DIRECT MUSCLE RELAXANTS		
baclofen	1	
dantrolene sodium	1	
tizanidine hcl	1	
DANTRIUM	2	
11.3.2 CNS MUSCLE RELAXANTS		
carisoprodol	1	
carisoprodol compound	1	
carisoprodol compound-codeine	1	
chlorzoxazone	1	
cyclobenzaprine hcl	1	
methocarbamol	1	
orphenadrine citrate	1	
orphenadrine compound	1	
orphenadrine compound forte	1	
SKELAXIN	2	
11.4 OTHER MUSCULOSKELETAL DRUGS		
RILUTEK	2	
CHAPTER 12: NUTRITION,BLOOD		
12.1.1 INJECTABLE VITAMINS		
b-complex	1	
m.v.i. adult	1	
pyridoxine hcl	1	
thiamine hcl	1	
vitamin b complex	1	
12.1.2 VITAMINS & MINERALS & RELATED PRODUCTS		
b complex w-vitamin c	1	
folic acid-cyancobal-pyridoxin	1	

DRUG NAME	TIER	RESTRICTIONS
vitamin b complex	1	
vitamin b-6	1	
12.1.3 THERAPEUTIC VITAMINS & MINERALS		
calcitriol	1	
cobal-1000	1	
cpc-b12	1	
cyanocobalamin	1	
eliphos	1	
folic acid	1	
vitamin b-12	1	
vitamin d	1	
12.1.4 FLUORIDE PRODUCTS		
fluoritab	1	
sodium fluoride	1	
stannous fluoride	1	
12.2 POTASSIUM SUPPLEMENTS		
kaon-cl 10	1	
klor-con	1	
12.2.1 POTASSIUM REMOVING RESINS		
kalexate	1	
sodium polystyrene sulfonate	1	
12.3.1 ORAL ANTICOAGULANTS, VITAMIN K		
warfarin sodium	1	
MEPHYTON	2	
12.3.2 HEPARIN AND HEPARIN ANTAGONISTS		
heparin sodium	1	
hep-lock	1	
LOVENOX	2	
12.4 ANTIPLATELET DRUGS		
cilostazol	1	
clopidogrel bisulfate	1	
dipyridamole	1	
AGGRENOX	2	
PLAVIX	2	
12.5 HEMOSTATICS		
aminocaproic acid	1	
hetastarch in normal saline	1	
12.7 BLOOD DETOXICANTS		

CCHP Commercial Formulary - Effective January 2010

DRUG NAME	TIER	RESTRICTIONS
enulose	1	
lactulose	1	
RENAGEL	2	
REVELA	2	
12.8 NUTRITIONAL/SUPPLEMENT PRODUCTS		
enteral intact 1	1	
12.9 ELECTROLYTES, IRRIGATING SOLUTIONS, ETC.		
magnesium sulfate	1	
mannitol	1	
zinc sulfate	1	
CHAPTER 13: OBSTETRICAL & GYNECOLOGICAL MEDICATIONS		
13.1.1 PRENATAL VITAMINS		
prenatal rx	1	
13.1.2 SPECIALIZED OB/GYN DRUGS		
chorionic gonadotropin	1	
isoxsuprine hcl	1	
leuprolide acetate	1	PA
novarel	1	
ANTAGON	2	
GANIRELIX ACETATE	2	
LUPRON DEPOT-PED	2	PA
SUPPRELIN	2	
13.1.3 OB/GYN TOPICAL ANTIINFECTIVES		
acidic vaginal	1	
clindamycin phosphate	1	
metronidazole	1	
vandazole	1	
CLEOCIN	2	
13.2 OVULATORY STIMULANTS		
clomiphene citrate	1	
serophene	1	
FOLLISTIM/ANTAGON	2	
FOLLISTIM AQ	2	
MENOPUR	2	
13.3 ANDROGEN DRUGS		
danazol	1	
estradiol/testosterone	1	
oxandrolone	1	PA

DRUG NAME	TIER	RESTRICTIONS
testosterone	1	
ANDROXY	2	
TESTIM	2	
13.4 ESTROGEN DRUGS		
estradiol	1	
estradiol transdermal patch	1	QLL
estrogen & methyltestosterone	1	
estropipate	1	
ESTRACE	2	
MENEST	2	
VAGIFEM	2	
13.4.1 ESTROGEN/PROGESTIN COMBINATIONS		
estradiol-norethindrone acetat	1	
PREMPHASE	2	
PREMPRO	2	
13.4.3 SELECTIVE ESTROGEN RECEPTOR MODULATOR		
EVISTA	2	
13.5 PROGESTIN DRUGS		
errin	1	
jolivette	1	
medroxyprogesterone acetate	1	
nora-be	1	
norethindrone acetate	1	
progesterone	1	
CRINONE	2	
PROCHIEVE	2	
PROMETRIUM	2	
13.7 CONTRACEPTIVES		
apri	1	
aranelle	1	
aviane	1	
balziva	1	
cesia	1	
cryselle	1	
enpresse	1	
jolessa	1	
junel	1	
junel fe	1	

CCHP Commercial Formulary - Effective January 2010

DRUG NAME	TIER	RESTRICTIONS
kariva	1	
kelnor 1/35	1	
leena	1	
lessina	1	
levora-28	1	
low-ogestrel	1	
lutera	1	
microgestin	1	
microgestin fe	1	
mononessa	1	
necon	1	
norgestrel-ethiny estra	1	
nortrel	1	
ocella	1	
ogestrel	1	
portia	1	
previfem	1	
quasense	1	
reclipsen	1	
solia	1	
sprintec	1	
sronyx	1	
tilia fe	1	
tri-legest fe	1	
trinessa	1	
tri-previfem	1	
tri-sprintec tablet	1	
trivora-28	1	
velivet 28 day	1	
zenchent	1	
zovia	1	
PLAN B	2	QLL
13.8 ABORTIFACIENTS		
HEMABATE	2	
13.9 OXYTOCICS		
oxytocin	1	
METHERGINE	2	

DRUG NAME	TIER	RESTRICTIONS
CHAPTER 14: OPHTHALMIC MEDICATIONS		
14.1.1 OPHTHALMIC TOPICAL ANTIBACTERIAL DRUGS		
bacitracin	1	
bacitracin-polymyxin	1	
ciprofloxacin hcl (ophth drops)	1	
erythromycin	1	
gentamicin sulfate	1	
neomycin-bacitracin-polymyxin	1	
neomycin-polymyxin-gramicidin	1	
polymyxin b sul/trimethoprim	1	
sulfacetamide sodium	1	
tobramycin sulfate	1	
triple antibiotic	1	
ZYMAR	2	
14.1.2 OPHTHALMIC TOPICAL ANTIVIRAL DRUGS		
trifluridine	1	
14.2 OPHTHALMIC CORTICOSTEROID DRUGS		
dexamethasone sodium phosphate	1	
fluorometholone	1	
prednisolone acetate	1	
prednisolone sodium phosphate	1	
DECADRON	2	
PRED MILD	2	
14.3 OPHTHALMIC ANTIINFECTIVE/CORTICOSTEROIDS		
neomycin/polymixin/hc	1	
neomycin/polymyxin/dexameth	1	
neomycin-bacitracin-poly-hc	1	
neomycin-polymyxin-dexameth	1	
poly-dex	1	
sulfacetamide-prednisolone	1	
triple antibiotic hc	1	
ZYLET	2	
14.5 ANTIGLAUCOMA DRUGS		
acetazolamide	1	
betaxolol hcl	1	
brimonidine tartrate	1	
carteolol hcl	1	
dipivefrin hcl	1	

CCHP Commercial Formulary - Effective January 2010

DRUG NAME	TIER	RESTRICTIONS
levobunolol hcl	1	
methazolamide	1	
metipranolol	1	
pilocarpine hcl	1	
timolol maleate	1	
ALPHAGAN P	2	
LUMIGAN	2	
PHOSPHOLINE IODIDE	2	
XALATAN	2	
14.6 OTHER OPHTHALMIC DRUGS		
atropine sulfate	1	
cromolyn sodium	1	
cyclopentolate hcl	1	
diclofenac sodium	1	
fluorescein-benoxinate	1	
flurbiprofen sodium	1	
homatropine	1	
ketotifen fumarate	1	
naphazoline hcl	1	
phenylephrine hcl	1	
proparacaine hcl	1	
tropicamide	1	
RESTASIS	2	QLL
ZADITOR	2	
CHAPTER 15: RESPIRATORY MEDICATIONS		
15.1.1 BETA-2 ADRENERGIC DRUGS		
albuterol, -sulfate	1	QLL
ephedrine sulfate	1	
isoetharine	1	
metaproterenol sulfate	1	
terbutaline sulfate	1	
ALBUTEROL SULFATE HFA	2	QLL
FORADIL	2	QLL
PERFORMIST	2	QLL
PROAIR HFA	2	QLL
15.1.2 METHYL XANTHINE DRUGS		
aminophylline	1	
theophylline	1	

DRUG NAME	TIER	RESTRICTIONS
SLO-BID 200	2	
15.1.3 OTHER DRUGS FOR ASTHMA		
acetylcysteine	1	
albuterol/cromolyn cmpd	1	
albuterol/cromolyn/atropine	1	
atropine cmpd	1	
atropine/cromolyn cmpd	1	
atropine/metaproterenol	1	
cromolyn cmpd	1	
cromolyn sodium	1	
epinephrine	1	
ipratropium bromide	1	
ipratropium-albuterol	1	
metaproterenol/cromolyn cmpd	1	
metaproterenol/cromolyn/atrop	1	
sodium chloride	1	
ADVAIR DISKUS	2	PA; QLL
ADVAIR HFA	2	PA; QLL
ATROVENT	2	QLL
ATROVENT HFA	2	
COMBIVENT	2	QLL
EPIPEN	2	QLL
EPIPEN JR	2	QLL
GASTROCROM	2	
INTAL	2	
PULMICORT	2	QLL
PULMICORT FLEXHALER	2	QLL
QVAR	2	QLL
SPIRIVA	2	QLL
SYMBICORT	2	PA; QLL
TILADE	2	QLL
TWINJECT	2	QLL
15.1.4 LEUKOTRIENE MODIFIERS		
SINGULAIR	2	ST
15.2.1 ANTIHISTAMINES		
brompheniramine tannate	1	
carbinoxamine	1	
carbinoxamine maleate	1	

CCHP Commercial Formulary - Effective January 2010

DRUG NAME	TIER	RESTRICTIONS
carbinoxamine maleate-tannate	1	
carboxine	1	
cetirizine	1	
chlorpheniramine maleate	1	
clemastine fumarate	1	
cyproheptadine hcl	1	
dexchlorpheniramine maleate	1	
diphenhydramine hcl	1	
fexofenadine hcl	1	QLL
promethazine hcl	1	
15.2.2 DECONGESTANTS		
pseudoephedrine hcl	1	
15.2.3 ANTIHISTAMINE/DECONGESTANT COMBINATIONS		
CORDRON-12 D	2	
15.3 ANTITUSSIVE AND EXPECTORANT DRUGS		
guaifenesin/codiene	1	
DYNATUSS	2	
G/P 1200/60	2	
GENEPATUSS	2	
GFN 500/DM 30	2	
NASATAB LA	2	
RELACON-HC	2	
RU-TUSS DM	2	
SINUTUSS DM	2	
TRICOLD	2	
TRITUSSIN	2	
XEDEC	2	
15.4 OTHER RESPIRATORY DRUGS		
ARALAST	2	PA
ARALAST NP	2	
PROLASTIN	2	PA
PULMOZYME	2	
ZEMAIRA	2	PA
CHAPTER 16: UROLOGICAL MEDICATIONS		
16.1.1 ANTICHOLINERGIC ANTISPASMODICS		
flavoxate hcl	1	
oxybutynin chloride	1	
oxybutynin chloride er	1	

DRUG NAME	TIER	RESTRICTIONS
16.1.2 CHOLINERGIC STIMULANTS		
bethanechol chloride	1	
16.1.3 URINARY ANESTHETICS		
phenazopyridine hcl	1	
16.1.4 OTHER GENITOURINARY PRODUCTS		
acetic acid	1	
neomycin-polymyxin b	1	
phenazopyridine plus	1	
potassium citrate	1	
potassium citrate-citric acid	1	
tricitrates	1	
uriseptic	1	
yohimbine hcl	1	
CAVERJECT	2	
CYSTADANE	2	
ELMIRON	2	
FLOMAX	2	
K-PHOS M.F.	2	
K-PHOS NO.2	2	
K-PHOS ORIGINAL	2	
MUSE	2	
RENACIDIN	2	
UROXATRAL	2	
VIAGRA	2	
CHAPTER 17: DIAGNOSTIC & MISCELLANEOUS MEDICATIONS		
17.1 DIAGNOSTIC PRODUCTS		
deferoxamine mesylate	1	
dipyridamole	1	
ipecac	1	
methylene blue	1	
sodium thiosulfate	1	
CHEMET	2	
EXJADE	2	
MD-GASTROVIEW	2	
THYROGEN	2	
17.2 MISCELLANEOUS DRUGS		
ergoloid mesylates	1	
THALOMID	2	

CCHP Commercial Formulary - Effective January 2010

DRUG NAME	TIER	RESTRICTIONS
17.3.1 WEIGHT LOSS PRODUCTS		
benzphetamine hcl	1	
MERIDIA	2	
CHAPTER 18: MEDICAL (MISCELLANEOUS) SUPPLIES		
18.1 DIABETIC SUPPLIES		
ACCU-CHEK RAPID D	2	
ACCU-CHEK SPIRIT	2	
ACCU-CHEK TENDER	2	
ACCU-CHEK TENDER 1	2	
ACCU-CHEK TENDER 2	2	
ACCU-CHEK ULTRAFLEX	2	
ACCU-CHEK ULTRAFLEX-1	2	
ACCU-CHEK ULTRAFLEX-2	2	
ACCUSURE	2	
ALCOHOL SWABS, WIPES	2	
ANTI-STICK INSULIN	2	
ASCENSIA AUTODISC	2	
ASCENSIA AUTODISC (SOLN)	2	
ASCENSIA BREEZE	2	
ASCENSIA BREEZE 2	2	
ASCENSIA BRIO	2	
ASCENSIA CONTOUR	2	
ASCENSIA DEX2	2	
ASCENSIA ELITE	2	
ASCENSIA ELITE (SOLN)	2	
ASCENSIA ELITE XL	2	
ASCENSIA MICROFILL	2	
AUTOJECT 2	2	
AUTO-LANCET	2	
AUTOLANCET DEVICE W-LANCETS	2	
AUTOLET	2	
AUTOLET IMPRESSION	2	
AUTOLET LITE CLINISAFE	2	
AUTOLET MINI	2	
AUTOLET MKII CLINISAFE	2	
AUTOLET PLATFORMS	2	
B-D AUTO INJECTOR	2	
BD AUTOSHIELD PEN NEEDLE	2	

DRUG NAME	TIER	RESTRICTIONS
BD ECLIPSE	2	
BD GENIE LANCET	2	
BD INSULIN PEN NEEDLE UF ORIG	2	
BD INSULIN SYRINGE	2	
BD INSULIN SYRINGE MICRO-FINE	2	
BD INSULIN SYRINGE ULT-FINE II	2	
BD INSULIN SYRINGE ULTRA-FINE	2	
BD INTEGRA SYRINGE	2	
B-D LANCET DEVICE	2	
BD LUER-LOK	2	
BD LUER-LOK SYRINGE-NEEDLE	2	
B-D MAGNI-GUIDE MAGNIFIER	2	
B-D PEN	2	
B-D PEN MINI	2	
BD REGULAR BEVEL NEEDLES	2	
B-D SAFE CLIP	2	
BD SAFETYGLIDE	2	
BD SAFETYGLIDE SYRINGE	2	
B-D SINGLE USE ALCOHOL SWAB	2	
BD ULTRA FINE 33 LANCETS	2	
B-D ULTRA FINE LANCETS	2	
BD ULTRA-FINE MINI PEN NEEDLE	2	
BD ULTRA-FINE SHORT PEN NEEDLE	2	
BLOOD/URINE CONTROL TABS/STRIP	2	
CALIBRATION CONTROL /PKG OF 2	2	
CALIBRATION STANDARD /PKG OF 2	2	
CLINISTIX REAGENT	2	
CLINITEST REAGENT	2	
DIASTIX REAGENT	2	
FREESTYLE LANCETS	2	
FREESTYLE UNISTIK 2	2	
GLUCOLET	2	
GLUCOLET 2	2	
GLUCOLET ENDCAPS	2	
GLUCOMETER DEX	2	
GLUCOMETER ELITE	2	
GLUCOMETER ENCORE	2	
HYPODERMIC NEEDLE	2	

CCHP Commercial Formulary - Effective January 2010

DRUG NAME	TIER	RESTRICTIONS
INFUSION PUMP	2	
INNOVO	2	
INSULIN PEN NEEDLE	2	
INSULIN PUMP	2	
INSULIN SYRINGE	2	
INSULIN SYRINGE LO-DOSE	2	
INSULIN SYRINGE ULTRA FINE II	2	
KETO-DIASTIX REAGENT	2	
LANCETS	2	
LANCING DEVICE	2	
LIFESCAN	2	
LIFESCAN UNISTIK 2	2	
LITE TOUCH INSULIN PEN NEEDLES	2	
MEDTRONIC MINIMED INSULIN	2	
MEDTRONIC REMOTE CONTROL	2	
MICROLET	2	
MICROLET VACULANCE	2	
MICROTAINER SAFETY FLOW LANCET	2	
MONOJECT	2	
MONOJECT INSULIN SAFETY SYRNG	2	
MONOJECT INSULIN SYRINGE	2	
MONOJECT SYRINGE	2	
MONOJECTOR LANCET DEVICE	2	
MONOLET LANCETS	2	
MONOLET NEOLET	2	
MONOLET THIN LANCETS	2	
NEEDLES, STERILE	2	
NOVA SUREFLEX	2	
NOVOFINE	2	

DRUG NAME	TIER	RESTRICTIONS
NOVOFINE 30	2	
NOVOFINE 32	2	
NOVOFINE AUTOCOVER	2	
NOVOPEN 3	2	
NOVOPEN JR	2	
ONE TOUCH LANCETS	2	
ONE TOUCH SURESOFT	2	
PEN NEEDLE	2	
PEN NEEDLES	2	
PRECISION	2	
PRESTIGE LANCETS	2	
SOFT TOUCH	2	
SOFTCLIX	2	
TERUMO INSULIN SYRINGE	2	
TERUMO SURGUARD	2	
ULTRA COMFORT	2	
ULTRA FINE II	2	
ULTRA THIN LANCETS	2	
ULTRACOMFORT	2	
ULTRATLC LANCETS	2	
ULTRATLC LANCETS-DEVICE	2	
UNIFINE PENTIPS	2	
UNISTIK	2	
UNISTIK 2	2	
UNISTIK 2 NORMAL	2	
UNISTIK 3	2	
UNISTIK 3 EXTRA	2	
UNISTIK CZT	2	

Index

8

8-MOP..... 15

A

ABILIFY 14
 ABRAXANE 9
acarbose 16
 ACCU-CHEK RAPID D 24
 ACCU-CHEK SPIRIT 24
 ACCU-CHEK TENDER 24
 ACCU-CHEK TENDER 1 24
 ACCU-CHEK TENDER 2 24
 ACCU-CHEK ULTRAFLEX 24
 ACCU-CHEK ULTRAFLEX-1 24
 ACCU-CHEK ULTRAFLEX-2 24
 ACCUSURE 24
acebutolol hcl 10
acetaminophen w/codeine 12
acetaminophen w/hydrocodone 12
acetaminophen-butalbital 12
acetazolamide 21
acetic acid 16, 23
acetic acid-aluminum 16
acetic acid-hydrocortisone 16
acetylcysteine 22
acidic vaginal 20
acticin 16
 ACTIMMUNE 18
 ACTOPLUS MET 16
 ACTOS 16
acyclovir, -sodium 7
 ADDERALL XR 14
adriamycin 8
adrucil 8
 ADVAIR DISKUS 22
 ADVAIR HFA 22
 AGENERASE 7
 AGGRENOX 19
 ALBENZA 8
 ALBUTEROL SULFATE HFA 22
albuterol, -sulfate 22

albuterol/cromolyn compd 22
albuterol/cromolyn/atropine 22
alclometasone dipropionate 15
 ALCOHOL SWABS, WIPES 24
alendronate sodium 17
 ALERA 15
 ALIMTA 9
allopurinol, -sodium 19
 ALPHAGAN P 22
alprazolam, -er, -intensol, -xr 12
amantadine hcl 7
amcinonide 15
 AMEVIVE 9
amidrine 12
amifostine 8
amiloride hcl 10
amiloride hcl w/hctz 10
aminocaproic acid 19
aminophylline 22
amiodarone hcl 11
 AMITIZA 18
amitriptyline hcl 13
amitriptyline-chlordiazepoxide 13
amlodipine besylate 10, 11
amlodipine besylate-benazepril 11
amnesteem 15
amox tr-potassium clavulanate 6
amoxapine 13
amoxicillin 6
 AMOXIL 6
amphetamine salt combo 14
ampicillin 6
ampicillin-sulbactam 6
anagrelide hcl 8
 ANCOBON 7
 ANDROXY 20
 ANTABUSE 14
 ANTAGON 20
antipyrine-benzocaine 16
 ANTI-STICK INSULIN 24
anucort-hc 17
apap-caffeine-dihydrocodeine 12
 APLISOL 18
apri 20
 APTIVUS 7
 ARALAST 23

ARALAST NP	23
aranelle	20
ARCALYST	18
ARICEPT, -ODT	14
ARIMIDEX	9
ARMOUR THYROID	17
AROMASIN	9
ARRANON	9
asa-butalb-caffeine-codeine	12
ASACOL, -HD	17
ASCENSIA AUTODISC	24
ASCENSIA AUTODISC (SOLN)	24
ASCENSIA BREEZE	24
ASCENSIA BREEZE 2	24
ASCENSIA BRIO	24
ASCENSIA CONTOUR	24
ASCENSIA DEX2	24
ASCENSIA ELITE	24
ASCENSIA ELITE (SOLN)	24
ASCENSIA ELITE XL	24
ASCENSIA MICROFILL	24
ascomp with codeine	12
aspirin ec	18
aspirin with codeine	12
ASTELIN	16
atenolol	10, 11
atenolol w/chlorthalidone	11
ATRIPLA	7
atropine cmpd	22
atropine sulfate	14, 22
atropine/cromolyn cmpd	22
atropine/metaproterenol	22
ATROVENT	22
ATROVENT HFA	22
AUTOJECT 2	24
AUTO-LANCET	24
AUTOLANCET DEVICE W-LANCETS	24
AUTOLET	24
AUTOLET IMPRESSION	24
AUTOLET LITE CLINISAFE	24
AUTOLET MINI	24
AUTOLET MKII CLINISAFE	24
AUTOLET PLATFORMS	24
AVASTIN	9
AVELOX	6
aviane	20
AVONEX	18

AZASAN	9
azathioprine, -sodium	8
azithromycin	6
AZOR	11

B

b complex w-vitamin c	19
bacitracin	8, 21
bacitracin-polymyxin	21
baclofen	19
BACTROBAN	6
balsalazide disodium	17
balziva	20
BARACLUDGE	7
BAYHEP B	18
BAYRHO-D	18
b-complex	19
B-D AUTO INJECTOR	24
BD AUTOSHIELD PEN NEEDLE	24
BD ECLIPSE	24
BD GENIE LANCET	24
BD INSULIN PEN NEEDLE UF ORIG	24
BD INSULIN SYRINGE	24
BD INSULIN SYRINGE MICRO-FINE	24
BD INSULIN SYRINGE ULT-FINE II	24
BD INSULIN SYRINGE ULTRA-FINE	24
BD INTEGRA SYRINGE	24
B-D LANCET DEVICE	24
BD LUER-LOK	24
BD LUER-LOK SYRINGE-NEEDLE	24
B-D MAGNI-GUIDE MAGNIFIER	24
B-D PEN	24
B-D PEN MINI	24
BD REGULAR BEVEL NEEDLES	24
B-D SAFE CLIP	24
BD SAFETYGLIDE	24
BD SAFETYGLIDE SYRINGE	24
B-D SINGLE USE ALCOHOL SWAB	24
BD ULTRA FINE 33 LANCETS	24
B-D ULTRA FINE LANCETS	24
BD ULTRA-FINE MINI PEN NEEDLE	24
BD ULTRA-FINE SHORT PEN NEEDLE	24
belladonna-phenobarbital	17
bellamine-s	12
benazepril hcl	11

CCHP Commercial Formulary - Effective January 2010

benazepril hcl-hctz	11
BENICAR	11
benzoin	15
benzoyl peroxide	15
benzphetamine hcl	24
benztropine mesylate	14
betamethasone dipropionate	15
betamethasone valerate	15
BETASERON	18
betaxolol hcl	10, 21
bethanechol chloride	23
BEXXAR	9
bicalutamide	8
BICNU	9
bisoprolol fumarate	10, 11
bisoprolol fumarate/hctz	11
bleomycin sulfate	8
BLOOD/URINE CONTROL TABS/STRIP	24
brimonidine tartrate	21
bromocriptine mesylate	14
brompheniramine tannate	22
budeprion sr (150 mg)	13
budeprion xl	13
bumetanide	10
bupivacaine hcl	6
bupivacaine hcl-epinephrine	6
bupropion hcl sr, -er	15
bupropion hcl, -sr, -xl	13
bupirone hcl	13
BUSULFEX	9
butalbital/acetaminophen/caffeine	12
butalbital/apap/caffeine	12
butalbital-aspirin-caffeine	12
butalbital-caff-apap-codeine	12
butorphanol tartrate	12
BYETTA	16

C

cabergoline	17
calcipotriene	15
calcitriol	19
CALIBRATION CONTROL /PKG OF 2	24
CALIBRATION STANDARD /PKG OF 2	24
CAMPATH	9
CAMPTOSAR	9

CANASA	17
captopril	11
captopril/hydrochlorothiazide	11
carbamazepine, -xr	13
carbidopa/levodopa	14
carbinoxamine	22, 23
carbinoxamine maleate	22, 23
carbinoxamine maleate-tannate	23
carboplatin	8
carboxine	23
carisoprodol	19
carisoprodol compound	19
carisoprodol compound-codeine	19
carteolol hcl	21
carvedilol	10
CAVERJECT	23
CEENU	9
cefaclor	6
cefadroxil	6
cefazolin sodium	6
cefdinir	6
cefpodoxime proxetil	6
cefprozil	6
cefuroxime	6
CELEBREX	18
CELLCEPT	9
CELONTIN	13
cephalexin	6
cesia	20
cetirizine	23
CHANTIX	15
CHEMET	23
chloral hydrate	13
chloramphenicol	6
chlordiazepoxide hcl	13
chlorhexidine gluconate	16
chloroquine phosphate	8
chlorothiazide	10
chlorpheniramine maleate	23
chlorpromazine hcl	14
chlorthalidone	10
chlorzoxazone	19
cholestyramine	11
choline mag trisalicylate	18
chorionic gonadotropin	20
ciclopirox	7
cilostazol	19

cimetidine	17
CIPRODEX	16
CIPRODEX OTIC	16
ciprofloxacin hcl (ophth drops)	21
ciprofloxacin, -er, -hcl	6
cisplatin	8
citalopram	13
cladribine	8
clarithromycin/er	6
clemastine fumarate	23
clenia	15
CLEOCIN	20
clidinium-chlordiazepoxide	17
clindamycin	6, 15, 20
clindamycin phosphate	15, 20
CLINISTIX REAGENT	24
CLINITEST REAGENT	24
clioquinol-hydrocortisone	15
clobetasol emollient	15
clobetasol propionate	15
CLOLAR	9
clomiphene citrate	20
clomipramine hcl	13
clonazepam	13
clonidine hcl, -patch	11
clopidogrel bisulfate	19
clorazepate dipotassium	13
clotrimazole	6, 7
clotrimazole/betamethasone	7
clozapine	14
cobal-1000	19
codeine sulfate	12
colchicine	19
colistimethate sodium	8
COMBIVENT	22
COMBIVIR	7
COMTAN	14
COPAXONE	14
CORDRON-12 D	23
CORTIFOAM	17
cortisone	16
COSMEGEN	9
COZAAR	11
cpc-b12	19
CREON	17
CRESTOR	12
CRINONE	20

CRIXIVAN	7
cromolyn compd	22
cromolyn sodium	16, 22
cryselle	20
CUPRIMINE	19
cyanocobalamin	19
cyclobenzaprine hcl	19
cyclopentolate hcl	22
cyclophosphamide	8
cyclosporine	8
CYMBALTA	14
cyproheptadine hcl	23
CYSTADANE	23
cytarabine	8

D

dacarbazine	8
DACOGEN	9
danazol	20
DANTRIUM	19
dantrolene sodium	19
DAPSONE	8
DARAPRIM	8
daunorubicin hcl	8
DAUNOXOME	9
DECADRON	21
deferoxamine mesylate	23
demeclocycline hcl	6
DEMSEK	11
DEPAKOTE	13
DEPOCYT	9
DEPO-PROVERA (INJ)	9
dermazene	15
desipramine hcl	13
desmopressin acetate	17
desonide	15
desoximetasone	15
DESOXYN	14
dexamethasone sodium phosphate	21
dexamethasone, -intensol	16
dexchlorpheniramine maleate	23
dexmethylphenidate hcl	14
dextrazoxane	8
dextroamphetamine sulfate	14
dextroamphetamine-amphetamine, -er	14

diacetazone	12
DIASTAT	13
DIASTIX REAGENT	24
diazepam	13
DIBENZYLIN	11
diclofenac potassium	18
diclofenac sodium	18, 22
dicloxacillin sodium	6
dicyclomine hcl	17
didanosine	7
diflorasone diacetate	15
diflunisal	18
digoxin	10
dihydroergotamine mesylate	12
diltiazem cd, -er, -hcl	10
diltiazem xr	10
diltzac er	10
dimenhydrinate	14
DIOVAN	11
diphenhydramine hcl	23
diphenoxylate-atropine	17
dipivefrin hcl	21
dipyridamole	19, 23
disopyramide phosphate	11
divalproex sodium, -er	13
DOLOGESIC.....	12
DOLOREX.....	12
DOVONEX	15
doxazosin mesylate	11
doxepin hcl	13
DOXIL	9
doxorubicin hcl	8
doxycycline hyclate	16
doxycycline, -hyclate	6
drithocrema hp	15
DROXIA.....	9
DUETACT.....	16
DYNATUSS.....	23

E

econazole nitrate	7
EFUDEX	15
ELIGARD.....	9
eliphos	19
ELITEK	9

ELLEENCE	9
ELMIRON.....	23
ELSPAR	9
embeline	15
EMCYT.....	9
EMEND.....	14
EMTRIVA	7
enalapril maleate	11
enalapril maleate/hctz	11
enalaprilat	11
ENBREL	9
endocet	12
endodan	12
enpresse	20
enteral intact 1	20
ENTOCORT EC.....	18
enulose	20
ephedrine sulfate	22
epidrin	12
epinephrine	22
EPIPEN	22
EPIPEN JR.....	22
EPIRUBICIN HCL.....	9
EPIVIR.....	7
EPIVIR HBV.....	7
EPZICOM.....	7
ERBITUX.....	9
ergoloid mesylates	23
ergotamine-caffeine	12
errin	20
ERY-TAB.....	6
erythromycin	6, 15, 21
erythromycin base	6
erythromycin ethylsuccinate	6
erythromycin stearate	6
erythromycin w/sulfisoxazole	6
erythromycin-benzoyl peroxide	15
estazolam	13
ESTRACE	20
estradiol	20
estradiol transdermal patch	20
estradiol/testosterone	20
estradiol-norethindrone acetat	20
estrogen & methyltestosterone	20
estropipate	20
ethambutol hcl	8
ETHMOZINE.....	11

ethosuximide	13
ethyl chloride	6
ETHYOL	9
etidronate disodium	17
etodolac	18
ETOPOPHOS	9
etoposide	8
EUFLEXXA	19
EURAX	16
EVISTA	20
EXFORGE, -HCT	11
EXJADE	23

F

famciclovir	7
famotidine	17
FARESTON	9
FASLODEX	9
FELBATOL	13
felodipine er	10
FEMARA	9
fenofibrate	12
fenoprofen calcium	18
fexofenadine hcl	23
FINACEA	15
flavoxate hcl	23
flecainide acetate	11
FLOMAX	23
floxuridine	8
fluconazole	7, 8
FLUDARABINE PHOSPHATE	9
fludrocortisone acetate	17
flumazenil	14
flunisolide	16
fluocinolone	15
fluocinonide, -emollient, -e	15
fluorescein-benoxinate	22
fluoritab	19
fluorometholone	21
FLUOROPLEX	15
fluorouracil	15
fluoxetine hcl	13
fluphenazine	14
flurazepam hcl	13
flurbiprofen	18, 22

flurbiprofen sodium	22
flutamide	8
fluticasone propionate	15, 16
fluvoxamine maleate	13
folic acid	19
folic acid-cyancobal-pyridoxin	19
FOLLISTIM AQ	20
FOLLISTIM/ANTAGON	20
FORADIL	22
FORTEO	17
fortical	17
FORTOVASE	7
foscarnet sodium	7
fosinopril sodium	11
fosinopril-hydrochlorothiazide	11
fosphenytoin sodium	13
FREESTYLE LANCETS	24
FREESTYLE UNISTIK 2	24
FURADANTIN	6
furosemide	10
FUZEON	7

G

G/P 1200/60	23
gabapentin	13
GABITRIL	13
GANIRELIX ACETATE	20
GANTRISIN	6
GASTROCROM	22
gavilyte-g	17
gemfibrozil	12
GEMZAR	9
GENEPATUSS	23
gengraf	8
gentamicin	6, 8, 21
gentamicin sulfate	6, 21
GFN 500/DM 30	23
GLEEVEC	9
glimepiride	16
glipizide, -er, -xl	16
glipizide-metformin	16
GLUCAGON	16
GLUCAGON EMERGENCY KIT	16
GLUCOLET	24
GLUCOLET 2	24

GLUCOLET ENDCAPS	24
GLUCOMETER DEX	24
GLUCOMETER ELITE	24
GLUCOMETER ENCORE	24
glyburide, -micronized	16
glyburide-metformin	16
glycerin	17
glycolax	17
glycopyrrolate	17
gold sodium thiomalate	18
granisetron hcl	14
GRIFULVIN V	7
griseofulvin	7
GRIS-PEG	7
guaifenesin/codiene	23
guanabenz acetate	11
guanfacine hcl	11

H

halobetasol propionate	15
haloperidol, -decanoate, -lactate	14
halothane	6
HAVRIX	18
HEMABATE	21
heparin sodium	19
hep-lock	19
HEPSERA	7
HERCEPTIN	9
hetastarch in normal saline	19
HEXALEN	9
HIVID	7
homatropine	22
HUMIRA	9
HYCAMTIN	9
hydralazine hcl	11
hydrochlorothiazide	10
hydrocodone bit-ibuprofen	12
hydrocortisone	15, 16, 17
hydrocortisone-iodoquinol	15
hydromorphone hcl	12
hydroquinone	15
hydroxychloroquine sulfate	8
hydroxyurea	8
hydroxyzine pamoate, -hcl	15
hyoscyamine, -sulfate	17

HYPERRHO S-D	18
HYPODERMIC NEEDLE	24
HYZAAR	11

I

ibuprofen	18
idarubicin hcl	8
ifosfamide	8
ifosfamide-mesna	8
imipramine hcl, -pamoate	13
immune globulin	18
INCRELEX	18
indapamide	10
indomethacin	18
INFUSION PUMP	25
INNOVO	25
INSULIN PEN NEEDLE	25
INSULIN PUMP	25
INSULIN SYRINGE	25
INSULIN SYRINGE LO-DOSE	25
INSULIN SYRINGE ULTRA FINE II	25
INTAL	22
INTELENCE	7
INTRON A	18
INVIRASE	7
ipecac	23
ipratropium bromide	16, 22
ipratropium-albuterol	22
IRESSA	9
irinotecan hcl	8
ISENTRESS	7
isoetharine	22
isometh-dichloralphenaz-apap	12
isoniazid	8
isoproterenol hcl	12
isosorbide dinitrate	11
isosorbide mononitrate	11
isoxsuprine hcl	20
isradipine	10
itraconazole	7
IXEMPRA	9

J

JANUMET	16
---------------	----

CCHP Commercial Formulary - Effective January 2010

JANUVIA	16
jolessa	20
jolivette	20
junel	20
junel fe	20

K

KALETRA	7
kalexate	19
kaon-cl 10	19
kariva	21
kelnor 1/35	21
KEPIVANCE	18
KEPPRA	13
ketoconazole	7
KETO-DIASTIX REAGENT	25
ketoprofen	18
ketorolac tromethamine	18
ketotifen fumarate	22
KINERET	18
klor-con	19
K-PHOS M.F.	23
K-PHOS NO.2	23
K-PHOS ORIGINAL	23

L

labetalol hcl	10
lactic acid	15
lactulose	20
LAMICTAL	13
lamotrigine	13
LANCETS	25
LANCING DEVICE	25
LANTUS	16
leena	21
leflunomide	8
lessina	21
LETAIRIS	11
leucovorin calcium	8
LEUKERAN	9
leuprolide acetate	20
LEVEMIR	16
levobunolol hcl	22
levora-28	21

levothyroxine sodium	17
LEVOXYL	17
LEXIVA	7
lidocaine hcl	6, 11
lidocaine hcl-epinephrine	6
lidocaine-hydrocortisone	15, 17
lidocaine-prilocaine	6
LIDODERM	6
LIFESCAN	25
LIFESCAN UNISTIK 2	25
lincomycin hcl	8
LIPITOR (40 & 80mg only)	12
lisinopril	11
lisinopril-hctz	11
LITE TOUCH INSULIN PEN NEEDLES	25
lithium carbonate	13
lithium citrate	13
loperamide hcl	17
lorazepam, -intensol	13
LOTRONEX	18
lovastatin	12
LOVAZA	12
LOVENOX	19
low-ogestrel	21
loxapine	14
LUMIGAN	22
LUPRON DEPOT-PED	20
lutera	21
LYRICA	13
LYSODREN	9

M

m.v.i. adult	19
magnesium sulfate	20
MALARONE	8
mannitol	20
maprotiline hcl	13
MATULANE	9
MD-GASTROVIEW	23
mebendazole	8
meclizine hcl	14
meclufenamate sodium	18
medroxyprogesterone acetate	20
MEDTRONIC MINIMED INSULIN	25
MEDTRONIC REMOTE CONTROL	25

CCHP Commercial Formulary - Effective January 2010

mefenamic acid	18
mefloquine hcl	8
megestrol acetate	8
meloxicam	18
MENACTRA	18
MENEST	20
MENOPUR	20
MEPHYTON	19
meprobamate	13
MEPRON	8
meprozine	12
mercaptapurine	8
MERIDIA	24
mesalamine	17
MESNA	9
MESNEX	9
MESTINON	14
METADATE CD	14
metaproterenol sulfate	22
metaproterenol/cromolyn compd	22
metaproterenol/cromolyn/atrop	22
metformin er	16
metformin hcl	16
methadone hcl	12
methadose	12
methazolamide	22
methenamine	6
METHERGINE	21
methimazole	17
methocarbamol	19
methotrexate	8
METHOTREXATE (inj)	9
methscopolamine bromide	17
methyldopa	11
methylene blue	23
methylphenidate er, -sr, -hcl	14
methylprednisolone, -acetate	16
metipranolol	22
metoclopramide hcl	17
metolazone	10
metoprolol succinate	10
metoprolol tartrate	10
metoprolol-hydrochlorothiazide	11
metronidazole	8, 15, 20
mexiletine hcl	11
miconazole 3	7
miconazole nitrate	7

microgestin	21
microgestin fe	21
MICROLET	25
MICROLET VACULANCE	25
MICROTAINER SAFETY FLOW LANCET	25
midazolam hcl	13
midodrine hcl	12
minocycline hcl, -er	6
minoxidil	11
MIRAPEX	14
mirtazapine	13
misoprostol	17
mitomycin	8
mitoxantrone hcl	8
moexipril hcl	11
moexipril-hctz	11
mometasone furoate	15
MONOJECT	25
MONOJECT INSULIN SAFETY SYRNG	25
MONOJECT INSULIN SYRINGE	25
MONOJECT SYRINGE	25
MONOJECTOR LANCET DEVICE	25
MONOLET LANCETS	25
MONOLET NEOLET	25
MONOLET THIN LANCETS	25
mononessa	21
morphine sulfate	12
mupirocin	6
MUSE	23
MUSTARGEN	9
MYCOBUTIN	8
mycophenolate	8, 14
mycophenolate mofetil	8
MYFORTIC	9
MYLERAN	9
MYLOCEL	9
MYLOTARG	9
myochrysin	19

N

nabumetone	18
nadolol	10
nafcillin	6
naloxone hcl	14
naltrexone hcl	14

CCHP Commercial Formulary - Effective January 2010

NAMENDA	14
naphazoline hcl	22
naproxen	18
NARDIL	14
NASACORT AQ	16
NASATAB LA	23
NEBUPENT	8
necon	21
NEEDLES, STERILE	25
neomycin	8, 16, 21, 23
neomycin/polymixin/hc	16, 21
neomycin/polymyxin/dexameth	21
neomycin-bacitracin-poly-hc	21
neomycin-bacitracin-polymyxin	21
neomycin-polymyxin b	23
neomycin-polymyxin-dexameth	21
neomycin-polymyxin-gramicidin	21
neomycin-polymyxin-hc	16
neostigmine methylsulfate	14
NEULASTA	18
NEUMEGA	18
NEUPOGEN	18
NEXAVAR	9
niacin	12
NIASPAN	12
nicardipine hcl	10
nicotine patch	15
nifedipine, -er	10
NILANDRON	9
nimodipine	10
nisoldipine	10
nitro-bid	11
nitrofurantoin	6
nitroglycerin	11
nizatidine	17
nora-be	20
norethindrone acetate	20
norgestrel-ethiny estra	21
nortrel	21
nortriptyline hcl	13
NORVIR	7
NOVA SUREFLEX	25
novarel	20
NOVOFINE	25
NOVOFINE 30	25
NOVOFINE 32	25
NOVOFINE AUTOCOVER	25

NOVOLIN 70/30	16
NOVOLIN 70-30	16
NOVOLIN N	16
NOVOLIN R	16
NOVOLOG	16
NOVOLOG MIX 70-30	16
NOVOPEN 3	25
NOVOPEN JR	25
nystatin	7
nystatin w/triamcinolone	7

O

ocella	21
octreotide acetate	8
ofloxacin	6, 16
ofloxacin (tabs)	6
ogestrel	21
OMACOR	12
omeprazole	17
ONCASPAR	9
ONE TOUCH LANCETS	25
ONE TOUCH SURESOFT	25
ONTAK	9
OPANA ER	12
opticaïne	6
ORENCIA	9
orphenadrine citrate	19
orphenadrine compound	19
orphenadrine compound forte	19
ORTHOCLONE OKT-3	9
oxacillin	6
oxandrolone	20
oxaprozin	18
oxazepam	13
oxcarbazepine	13
oxybutynin chloride	23
oxybutynin chloride er	23
oxycodone apap	12
oxycodone hcl	12
oxycodone hcl-ibuprofen	12
oxycodone-acetaminophen	12
oxycodone-aspirin	12
OXYCONTIN	12
oxytocin	21

P

paclitaxel	8
pamidronate disodium	17
pancrelipase	17
pancrelipase 8,000	17
pancrelipase mt-16	17
pantoprazole sodium	17
papaverine hcl	11
pap-urea	15
paregoric	17
PARNATE	14
paromomycin sulfate	8
paroxetine hcl	13
peg 3350 with flavor packs	17
peg 3350-electrolyte	17
PEGASYS	18
pemoline	14
PEN NEEDLE	25
PEN NEEDLES	25
penicillin	6
PENTASA	18
pentazocine-acetaminophen	12
pentazocine-naloxone hcl	12
pentostatin	9
pentoxifylline	12
PERFOROMIST	22
periogard	16
permethrin	16
perphenazine	13, 14
perphenazine-amitriptyline	13
phenazopyridine hcl	23
phenazopyridine plus	23
phenobarbital, -sodium	13
phenylephrine hcl	12, 22
phenytoin sodium	13
PHOSPHOLINE IODIDE	22
PHOTOFRIN	9
physostigmine salicylate	14
pilocarpine hcl	16, 22
pindolol	10
piroxicam	18
PLAN B	21
PLAVIX	19
PLENAXIS	9
podofilox	15

poly-dex	21
polyethylene glycol	17
polymyxin b sul/trimethoprim	21
polymyxin b sulfate	8
portia	21
potassium citrate	23
potassium citrate-citric acid	23
PRANDIMET	16
PRANDIN	16
pravastatin sodium	12
prazosin hcl	11
PRECISION	25
PRECOSE	16
PRED MILD	21
prednicarbate	15
prednisolone acetate	21
prednisolone sodium phosphate	21
prednisolone, -sodium phosphate	16
prednisone	16
PREMPHASE	20
PREMPRO	20
prenatal rx	20
PRESTIGE LANCETS	25
previfem	21
PREZISTA	7
primidone	13
PROAIR HFA	22
probenecid, -colchicine	19
procainamide hcl	11
PROCHIEVE	20
prochlorperazine maleate	14
PROCRIT	18
procto-kit	17
proctosol-hc	17
progesterone	20
PROGRAF (Capsules Tier 3)	9
PROLASTIN	23
PROLEUKIN	18
promethazine hcl	14, 23
promethegan	14
PROMETRIUM	20
propafenone hcl	11
propantheline bromide	17
proparacaine hcl	22
propoxacet-n 100	12
propranolol hcl	10, 11
propranolol hcl w/hctz	11

propylthiouracil	17
PROSTIGMIN	14
PROTOPIC.....	15
PROVIGIL.....	14
pseudoephedrine hcl	23
PULMICORT	22
PULMICORT FLEXHALER.....	22
PULMOZYME	23
pyrazinamide	8
pyridostigmine bromide	14
pyridoxine hcl	19

Q

quasense	21
quinapril	11
quinapril-hydrochlorothiazide	11
quinidine gluconate	11
quinidine sulfate	11
QVAR.....	22

R

ramipril	11
ranitidine hcl	17
RAPAMUNE	9
RAPTIVA	9
REBIF	18
RECLAST	17
reclipsen	21
REGRANEX	15
RELACON-HC	23
RELENZA	7
REMICADE	9
REMINYL.....	14
RENACIDIN.....	23
RENAGEL	20
REVELA.....	20
REQUIP.....	14
RESCRIPTOR	7
reserpine	11
RESTASIS.....	22
RETROVIR.....	7
REVLIMID.....	10
REYATAZ.....	7
ribavirin	7

RIDAURA	19
rifampin	8
RILUTEK	19
rimantadine hcl	7
RISPERDAL CONSTA.....	14
risperidone, m-tab, -odt	14
RITUXAN.....	10
ropinirole hcl	14
ROXICET	12
ROZEREM	13
RU-TUSS DM	23

S

salicylic acid	15
salsalate	18
SAMSCA	17
SANDOSTATIN LAR.....	10
SAVELLA	14
selegiline hcl	14
selenium sulfide	15
SELZENTRY.....	7
SENSIPAR	17
serophene	20
SEROQUEL.....	14
SEROQUEL XR.....	14
sertraline hcl	13
silver nitrate	15
silver sulfadiazine	6
SIMULECT	10
simvastatin	12
SINGULAIR.....	22
SINUTUSS DM	23
SKELAXIN.....	19
SLO-BID 200.....	22
sodium chloride	22
sodium fluoride	19
sodium hyaluronate	15
sodium polystyrene sulfonate	19
sodium sulfacetamide	15
sodium sulfacetamide-sulfur	15
sodium thiosulfate	23
SOFT TOUCH.....	25
SOFTCLIX.....	25
solia	21
SOLIRIS	18

SORIATANE	15
sotalol	11
sotret	15
SPIRIVA	22
spironolactone, -w/hctz	10
sprintec	21
SPRYCEL	10
sronyx	21
stannous fluoride	19
stavudine	7
STRATTERA	15
SUBOXONE	12
SUBUTEX	12
sucalfate	17
sulfacetamide sodium	15, 21
sulfacetamide-prednisolone	21
sulfadiazine	6
sulfamethoxazole/trimethoprim	6
SULFAMYLON	6
sulfasalazine, -dr	17
sulfatrim	6
sulfazine	17
sulfazine ec	17
sulindac	18
sumatriptan	12
SUPPRELIN	20
SUSTIVA	7
SUTENT	10
SYMBICORT	22
SYMLIN	16
SYMLINPEN	16
SYNAGIS	18

T

tacrolimus	9
TAMIFLU	7
tamoxifen	9
TARCEVA	10
TARGRETIN	10
TASIGNA	10
TAXOTERE	10
TAZORAC	15
temazepam	13
TEMODAR	10
terazosin hcl	11

terbinafine hcl	7
terbutaline sulfate	22
terconazole	7
TERUMO INSULIN SYRINGE	25
TERUMO SURGUARD	25
TESLAC	10
TESTIM	20
testosterone	20
TETANUS TOXOID (FLUID)	18
tetanus toxoid adsorbed	18
tetracycline hcl	6
TEV-TROPIN	18
THALOMID	23
theophylline	22
THERACYS	10
thiamine hcl	19
THIOGUANINE	10
thioridazine hcl	14
thiotepa	9
thiothixene	14
THYROGEN	23
thyroid	17
TIKOSYN	11
TILADE	22
tilia fe	21
timolol maleate	10, 22
tizanidine hcl	19
tobramycin	8, 21
tobramycin sulfate	21
tolazamide	16
tolbutamide	16
tolmetin sodium	18
topiramate	13
toposar	9
TORISEL	10
torseamide	10
TRACLEER	11
tramadol hcl	12
tramadol hcl-acetaminophen	12
trandolapril	11
tranylcypromine sulfate	14
trazodone hcl	13
TREANDA	10
tretinoin	15
TREXALL	10
triamcinolone acetoneide	15, 16
triamterene w/hctz	10

triazolam	13
tricitrates	23
TRICOLD	23
tricosal	18
trifluoperazine hcl	14
trifluridine	21
trihexyphenidyl hcl	14
tri-legest fe	21
trimethobenzamide hcl	14
trimethoprim	6
trinessa	21
triple antibiotic	21
triple antibiotic hc	21
tri-previfem	21
TRISENOX	10
tri-sprintec tablet	21
TRITUSSIN	23
trivora-28	21
TRIZIVIR	7
tropicamide	22
TRUVADA	7
TWINJECT	22
TYKERB	10
TYSABRI	10
TYZEKA	7

U

ULORIC	19
ULTRA COMFORT	25
ULTRA FINE II	25
ULTRA THIN LANCETS	25
ULTRACOMFORT	25
ULTRASE/MT	18
ULTRATLC LANCETS	25
ULTRATLC LANCETS-DEVICE	25
UNIFINE PENTIPS	25
UNISTIK	25
UNISTIK 2	25
UNISTIK 2 NORMAL	25
UNISTIK 3	25
UNISTIK 3 EXTRA	25
UNISTIK CZT	25
urea	15
uriseptic	23
UROXATRAL	23

ursodiol	17
UVADEX	10

V

VAGIFEM	20
VALCYTE	7
valproate sodium	13
valproic acid	13
VANCOGIN HCL	8
vancomycin hcl	8
vandazole	20
VANTAS (INJ)	10
vasopressin	17
VECTIBIX	10
VELCADE	10
velivet 28 day	21
venlafaxine hcl	14
verapamil er, -hcl	10
VFEND	7, 8
VFEND IV	8
VIADUR	10
VIAGRA	23
VIDAZA	10
VIDEX	7
VIMPAT	13
vinblastine sulfate	9
vincristine sulfate	9
vinorelbine tartrate	9
VIOKASE	18
VIRACEPT	7
VIRAMUNE	7
VIREAD	7
vitamin b complex	19
vitamin b-12	19
vitamin b-6	19
vitamin d	19
VUMON	10
VYTORIN	12
VYVANSE	14

W

warfarin sodium	19
-----------------	----

CCHP Commercial Formulary - Effective January 2010

X

XALATAN	22
XEDEC	23
XELODA	10
XOLAIR	18
XYREM	14

Y

yohimbine hcl	23
---------------------	----

Z

zaclir	15
ZADITOR	22
zaleplon	13
ZANOSAR	10

ZEMAIRA	23
zenchent	21
ZETIA	12
ZEVALIN	10
ZIAGEN	7
zidovudine	7
zinc sulfate	20
ZOLADEX	10
ZOLINZA	10
zolpidem tartrate	13
ZOMETA	17
ZOMIG/ZMT	12
zonisamide	13
ZOSTAVAX	18
zovia	21
ZOVIRAX	7
ZYLET	21
ZYMAR	21
ZYPREXA	14
ZYVOX	8

CCHP FORMULARY (List of Covered Drugs)



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