

HOW TO USE THIS DRUG LIST

How to Use this Drug List

Drug names are listed alphabetically. Generic names of drugs are shown in **bold**, lower case letters. Brand names of drugs are shown in UPPER-CASE letters (example: **diazepam** is the generic form of VALIUM).

Generic drugs are Tier 1. Single-source, brand drugs listed are Tier 2. Single-source, brand drugs not listed are Tier 3 drugs. You pay the lowest copay for Tier 1 drugs. You pay a higher copay for Tier 2 drugs, and you pay the highest copay for Tier 3 drugs. **Please refer to your Benefits Booklet to determine the Copayments for your Plan's Prescription Drug benefit.**

When available, FDA approved generic equivalents are to be used in all situations. Certain drug products with complex pharmacokinetics or a narrow therapeutic index are exempt from mandatory generic substitution. These drugs include: thyroid, Synthroid, Levothyroid, Coumadin, Dilantin, insulins, Lanoxin, Tegretol, Premairn and Neoral.

Certain drugs have applicable age restriction, step-therapy restrictions and/or quantity restrictions [example - MIGRANAL (QTY) means there is a quantity limit on the brand-name drug Migranal].

The following key explains what each means:

PA = Your doctor must call MedImpact to preauthorize these drugs.

QTY = Quantity limit.

STEP = Step-therapy.

AGE = Age restricted.

PHYSICIAN = Physician Specialty.

For more information regarding these restrictions, please call MedImpact Customer Services at 1-800-788-2949.

Drugs that have the notation Specialty means:

SPECIALTY = Not available at retail pharmacies.

Prescriptions must be authorized and are mailed directly from the Specialty Pharmacy. Please call 1-877-842-5097 with any questions.

NOTE: This drug list is continually reviewed and revised. KPS reserves the right to update this list at any time. For the most up-to-date information about the drugs covered under your Prescription Drug Plan, visit our web site at www.kpshealthplans.com, or call MedImpact Customer Service at 1-800-788-2949.

****Exclusions and Coverage Limitations**

Your Prescription Drug Plan does **not** cover the following items. This is not an all-inclusive list of coverage exclusions. For a complete list of coverage exclusions for your Plan, please refer to your Benefits Booklet.

- Over-the-counter (OTC) medications or other items, unless specifically included as a benefit of your Plan.
- Over-the-counter nicotine smoking cessation products or aids. However, the prescription smoking cessation drugs and/or products included on this list are covered if your Plan includes Smoking Cessation benefits. Please refer to your Benefits Booklet for more information.
- Any prescription or over-the-counter drug products used for cosmetic purposes.
- Drugs for the treatment of infertility and obesity.
- Drugs for the treatment of impotence, unless specifically included as a covered benefit under your Plan.
- Experimental drugs.
- Drugs used in an experimental manner.

- Drugs not yet approved by the FDA.
- Injectable drugs, except for Insulin or as otherwise noted. Prescriptions for specialty injectables must be filled through BioScrip specialty pharmacy (phone # 1-877-842-5097).
- Compounded Hormone Replacement Therapy drugs, which have not been approved by the FDA and that are not manufactured by a recognized drug company.

No coverage is provided for the replacement of lost or stolen medication. No coverage is provided if your doctor does not obtain prior authorization from MedImpact for those drugs that require authorization (see **How to Use This Drug List**).

Network Pharmacy: You must have your prescription filled by a network pharmacy except in the case of accidental injury or medical emergency. Prescriptions for specialty injectables must be filled through BioScrip specialty pharmacy (phone # 1-877-842-5097).

Diabetic Supplies: Diabetic supplies listed are covered at a Tier 1 Copay. There is no Copay for any blood glucose meter included on this list. Copays do apply to blood glucose meters that are not on this list. Coverage for blood glucose meters is limited to one per calendar year. If your Plan does not include prescription drug benefits, or if you are purchasing a diabetic supply that is not on this list, you may submit claims for payment of diabetic supplies (except insulin) as part of your durable medical equipment (DME) benefits. Coverage of diabetic supplies as a DME benefit is subject to your Plan's deductible and coinsurance requirements. Diabetic supplies include glucose meters and testing strips, insulin agents, insulin syringes and lancets (see also **Maintenance Drugs and Supplies**).

Contraceptives: Over-the-counter contraceptive aids are not covered. Prescription contraceptives, including self-injectable contraceptives, are covered under your prescription drug benefits. Contraceptives that can only be administered by your doctor (such as IUDs and Norplant implants) are covered under your medical benefits. Diaphragms obtained from your doctor are covered under your medical benefits. Diaphragms obtained from a network pharmacy are covered under your pharmacy benefits (see also **Maintenance Drugs and Supplies**).

Maintenance Drugs and Supplies: You may obtain up to a three month supply of the following: Any drug on Tier 1, only drugs on Tier 2 that are listed on the Maintenance Drug List, any diabetic supply that is listed under Tier 1 or Tier 2 (refer to Diabetic Supplies). No drugs on Tier 3 are covered as maintenance. Please refer to your Benefits Booklet for your specific copay amount.

Off-Label Drugs: Off-label use means the prescribed use of a drug for indications other than those specified by the FDA-approved labeling. Off-label drugs are covered only if their use meets medical necessity guidelines and if such off-label use is designated as a covered use by the Pharmacy and Therapeutics Committee.

For More Information:

For more information regarding your Prescription Drug Plan, or if you have questions, please visit our web site at www.kpshealthplans.com. You may also call Member Services at KPS or MedImpact Customer Service.

KPS Member Services
In Bremerton: 360-478-6796
1-800-552-7114 TTY: 360-478-6849
MedImpact Customer Service
1-800-788-2949

ARTIS	APTIVUS	butalbital/aspirin/caffeine	codeine/ chlorpheniramine/ pseudoephedrine	dexchlorpheniramine	ERYGEL
abacavir/sulfate/ lamivudine	AQUASOL A	CATERGOT		DEXEDRINE (AGE) (PA ≥ 19 YO)	ERYPED SUSPENSION
ACCOLATE	ARALEN	CALAN		dextroamphetamine	ERY-TAB
acebutolol	ARANESP	CALCIFEROL		dextromethorphan/ guaifenesin	ERYTHROCIN
acetaminophen/codeine	ARAVA (PA)	calcitriol		DIABETA	erythromycin base
acetaminophen/ hydrocodone	ARICEPT	CAPITROL		DIABINESE	erythromycin estolate
acetazolamide	ARICEPT ODT	CAPOTEN		DIAMOX	erythromycin
acetic acid	ARIMIDEX	CAPOZIDE		diazepam	ethylsuccinate
acetic acid 2%/ hydrocortisone 1%	ARIXTRA (QTY)	captopril		DIBENZYLINE	erythromycin gel
acetic acid/aluminum acetate	ARMOUR THYROID	captopril/hctz		diclofenac sodium	erythromycin solution
acetohexamide	AROMASIN	CARAFATE		dicloxacillin	erythromycin stearate
acetylcysteine	ARTANE	carbamol		dicyclomine	erythromycin swabs
ACI-JEL	ASACOL	carbamazepine		didanosine	erythromycin/ sulfisoxazole
ACTIGALL	ASENDIN	carbamazepine ir		DIDRONEL	ESKALITH
ACTONEL	ASTELIN	carbidoopa/levodopa		DIFFERIN (PA)	ESTRACE ORAL TABLETS, VAGINAL CREAM
ACTONEL WITH CALCIUM	ATARAX	carbidoopa/levodopa cr		diflorasone diacetate	estradiol/ levonorgestrel
ACULAR	atenolol atenolol/ chlorthalidone	carbinoxamine/pse		diflunisal	estradiol/noreth AC
ACULAR LS	ATIVAN	carbinoxamine/pse/ dextromethorphan		digoxin caps	ESTRATAB
acyclovir oral	atropine sulfate	CARDIZEM		DILATRATE SR	ESTRATEST
ADALAT	ATROVENT HFA	CARDIZEM CD		DILAUDID	ESTRATEST HS
ADALAT CC	ATROVENT MDI, SOLUTION, NASAL	CARDIZEM SR		diltiazem	ESTROSTEP FE
ADDERALL (AGE) (PA >19 YO)	AUGMENTIN	CARDURA		diltiazem cd	ethambutol
ADDERALL XR (AGE) (PA ≥ 19 YO)	AURALGAN	carisoprodol		diltiazem sa caps	ETHMOZINE
ADVAIR	AVANDIA (STEP)	carisoprodol/aspirin		diltiazem sr	ethosuximide
ADVICOR	AVONEX (SPECIALTY)	carteolol		DIOVAN (STEP)	etodolac
AGENERASE	AYGESTIN	CASODEX		DIOVAN HCT (STEP)	etodolac er
AGRYLIN	azathioprine	CATAPRES		DIPENTUM	etoposide
ALAMAST	azelaic acid	CATAPRES-TTS		diphenhydramine	EULEXIN
ALBALON	AZELEX	CECLOR		diphenoxylate/atropine	EURAX LOTION
albuterol oral, MDI	azithromycin	CECLOR CD		dipivefrin	EVISTA
albuterol e.r.	AZOPT	CEENU		DIPROLENE	EVOCIN
ALBUTEROL SULFATE HFA	AZULFININE	cefaclor		DIPROSONE/DIPROSONE AEROSOL	EVONAC
ALDACTAZIDE	BACITRACIN	cefadroxil		DIPROSONE LOTION	EXELDERM
ALDACTONE	bacitracin	CEFTIN		dipyridamole	FAMVIR
ALDARA	baclufen	CEFUROXIME		DISALCID	FANSIDAR
ALDOMET	BACTRIM DS	CEFZIL		disopyramide	FARESTON
ALDORIL	BACTROBAN	CELLCEPT		disopyramide cr	FAST TAKE
ALKERAN	beclomethasone	CELONTIN		DITROPAN	FELBATOL
allopurinol	belladonna/methylene blue	cephalexin		DIURIL	FELDENE
ALOCRI	belladonna/phenobarbital	CEPHULAC		DOLOBID	felodipine
ALOMIDE	BENADRYL	CERUMENEX		DOMEBORO OTIC	FEMARA
ALORA	BENEMID	CHEMET		DONNATAL	fenoprofen
ALPHAGAN	BENICAR (STEP)	chloral hydrate		DOVONEX	fentanyl patch
ALPHAGAN-P	BENICAR HCT (STEP)	chloramphenicol		doxazosin	flexofenadine
alprazolam	BENTYL	chlordiazepoxide		doxepin	FIORICET
ALUPENT	BENZACLIN	chlordiazepoxide/clidinium		doxycycline	FIORINAL
amantadine	BENZAMYCIN	chlorhexidine gluconate		DRISDOL	FIORINAL/CODEINE FLAGYL
AMBIEN	benzoyl peroxide	CHLOROMYCETIN		DUAC	flecainide
AMBIEN CR	BETAGAN	CHLOROMYCETIN OPHTHALMIC		DRYSOL	FLEXERIL
amiloride	betamethasone	CHLOROPTIC		DURA-VENT	FLORINEF
amiloride/hctz	dipropionate 0.05%	chloroquine phosphate		DURAGESIC 12mcg/HR PATCH	FLOVENT
AMINOPHYLLINE	betamethasone dipropionate aerosol 0.1%	chlorothiazide		DURICEF	FLOVENT ROTADISK
aminophylline	betamethasone valerate 0.1%	chlorpromazine		DYAZIDE	FLOXIN OTIC
amiodarone	BETAPACE	chlorpropamide		DYMELOS	flucytosine
amitriptyline	BETAPACE AF	chlorthalidone		DYNAPEN	fludrocortisone acetate
amoxapine	BETASERON (SPECIALTY)	cholesterol/cholestyramine/aspartame		EES	FLUMADINE
amoxicillin	bethanechol	cholestyramine/sucrose		EFFEXOR XR	fluocinolone
AMOXIL	BETIMOL	choline mag. trisalicylate		EFUDEK SOLUTION, CREAM	0.01%, 0.025%
amphetamine	BETOPTIC S	cilopriox		ELAVIL	fluocinolone acetone 0.2%
aspartate/ amphetamine/dextro- amphetamine ir	BICITRA	ciostazol		ELIDEL	fluocinonide 0.05%
ampicillin	BIDIL	CILOXAN		ELIGARD (PA)	fluoride/vitamins a,d,c
amylase/lipase/ protease/pancreatin	bisoprolol/hctz	cimetidine		ELIMITE	FLUOR-OP
ANAFRANIL	BLEPH-10	citalopram (1/2 tab)		ELMIRON	fluoxetine (40mg caps not covered)
ANAPROX	BLEPHAMIDE	CLIDAMYCIN		EMCYP	fluphenazine
ANAPROX DS	BLOCADREN	clindamycin solution		EMEND TRI-FOLD (QTY)	flurazepam
ANDROID (PA)	BRETHINE	clonidine		EMGEL	flurbiprofen
ANSAID	BREVICON	clonidine/chlorthalidone		EMPIRIN #2, #3, #4	flurbiprofen sodium
ANTABUSE	BRICANYL	clorazepate		EMTRIVA	flutamide
antipyrine/benzocaine	BROMFED	clozapine		E-MYCIN	fluticasone nasal
ANTIVERT	BROMFED DM	clotrimazole		ENALAPRIL	FML FORTE
ANTURANE	BROMFED PD	codeine		ENBREL (SPECIALTY)	FML-S
ANUSOL-HC SUPP	bromocriptine (tab only)	codeine/aspirin		ENDAL	FOLIC ACID
apap/ dichloralphenazone/ isometheptene	brompheniramine/ pseudoephedrine			ENDURON	foliac acid
APREPIDANT	brompheniramine/pse/ dextromethorphan			ENTEX	foliac acid/ multivitamins with minerals
APRESAZIDE	bumetanide			ENTEX LA	folinic acid
APRESOLINE	BUMEX			ENTEX PSE	
APRI	buprenorphine			ENTUSS-D	
	bupropion			EPI-PEN (QTY)	
	buspiron			EPIVIR	
	butalbital/apap/caffeine			EPIVIR HBV	
				EPZICOM	
				EQUETRO	
				ergocalciferol	
				ERYC	
				ERYCETTE	
				ERYDERM	

FORADIL
FORTEO (QTY)
FORTOVASE
fosamprenavir calcium
FULVICIN P/G
furosemide
FUZEON (QTY)
gabapentin
GABARONE
GABITRIL
GANTRISIN
GARAMYCIN
gemfibrozil
GENOTROPIN (SPECIALTY)
GENTACIDIN
gentamicin
gentamicin sulfate
GLEEVEC
glipizide ir
GLUCAGON
GLUCOMETER
GLUCOMETER DEX
GLUCOMETER ELITE
GLUCOMETER ENCORE
GLUCOPHAGE
GLUCOTROL
GLUCOTROL XL
glyburide
GLYNASE
GRANULEX
GRIFULVIN V
griseofulvin ultramicrosize
GUAIFED
GUAIFED PD
guaifenesin sr
guaifenesin/codeine
**guaifenesin/codeine/
pseudoephedrine**
**guaifenesin/
dextromethorphan**
**guaifenesin/
hydrocodone/
pseudoephedrine**
**guaifenesin/
pseudoephedrine**
guanfacine
HALCION
HALDOL
halobetasol propionate
haloperidol
HALOTESTIN (PA)
HELIDAC
HEPSERA (QTY)
HEXALEN
HIPREX
HISTUSSIN HC
HIVID
HUMALOG
HUMATIN
HUMATROPE (SPECIALTY)
HUMBID DM
HUMBID LA
HUMIRA (SPECIALTY)
HUMORSOL
HUMULIN
hydralazine
hydralazine/hctz
HYDREA
hydrochlorothiazide (hctz)
**hydrocodone/
chlorpheniramine**
**hydrocodone/pse/
guaifenesin**
**hydrocortisone 0.1%,
2.5%, 1%**
**hydrocortisone enema,
oral, suppository**
**hydrocortisone/
neomycin/polymyxin**
HYDRODIURIL
hydromorphone
hydroxychloroquine
hydroxyurea
hydroxyzine
hydroxyzine pamoate

HYGROTON
hyoscine sulfate
HYTONE
HYTRIN
ibuprofen
ILOSONE
ILOTYCIN
IMDUR
imipramine
IMITREX ORAL, INJ (QTY)
IMODIUM
IMURAN
indapamide
INDERAL
INDERAL LA
INDERIDE
INDOCIN
INDOCIN SR
indomethacin
indomethacin sr
INFERGEN (SPECIALTY)
INFLAMASE FORTE
INH
INNOHEP (QTY)
INSULIN SYRINGES
INTAL MDI, SOLUTION
INTRON A (SPECIALTY)
INVIRASE
ipratropium nasal
IRESSA (PA)
ISMO
isoniazid
ISOPTIN
ISOPTO ATROPINE
ISOPTO CARBACHOL
ISORDIL
ISORDIL TEMBIDS
isosorbide dinitrate
isosorbide dinitrate sr
isosorbide mononitrate
isotretinoin (physician)
isoxsuprine
JENEST
K PHOS NEUTRAL
KALETRA
KAON
KAON-CL 10
KARIVA
KAYCIEL ELIXIR
KAYEXALATE
K-DUR
KEFLEX
KENALOG IN ORABASE
KENALOG LOTION
KEPPRA
KERLONE
KETEK
ketoconazole
ketoprofen
ketoprofen sr
ketorolac
KLONOPIN
K-LOR
KLOR-CONEF
K-LYTE/CL
K-TABS
KWELL
KYTRIL (QTY)
labetalol
lactulose
LAMICTAL
LAMISIL (PA)
LAMPRENE
LANCETS
LANOXIN
LANTUS
LARIAM
LARODOPA
LASIX
LESCOL (STEP)
LESCOL XL (STEP)
LESSINA
LEUCOVORIN
LEUKERAN
LEUKINE
LEVBID
LEVLEN
levobunolol
LEVOTHROID
levothyroxine
LEVOXYL
LEVSIN

LEVSINEX
LEXIVA
LIBRAX
LIBRIUM
LIDEX
LIDEX E
lidocaine
lidocaine, viscous
LILLY INSULINS
lindane
LIORESAL
LIPITOR
lisinopril
lisinopril/hctz
lithium carbonate
LITHIUM CITRATE
lithium citrate
LITHOBID
LITHONATE
LODINE
LODINE XL
LODOSYN
LOMOTIL
LONITEN ORAL
loperamide
LOPID
LOPRESSOR
lorazepam
LOTENSIN
LOTENSIN HCT
LOTREL
lovastatin
LOVENOX (QTY)
LOW OGESTREL
loxapine
LOXITANE
LOZOL
LUDIOMIL
LUMIGAN
LUPRON (PA)
LURIDE
LYSODREN
MACRODANTIN
maprotiline
MATERNA
MATULANE
MAVIK
MAXALT (QTY)
MAXALT MLT (QTY)
MAX HC
MAXITROL
MAXIVATE
MAXZIDE 25, 50
**me-testosterone/
estrogen, ester**
MEBARAL
mebendazole
meclizine
meclofenamate
MECLOMEN
MEDROL
medroxyprogesterone
MEGACE
megestrol
MELLARIL
MENEST
meperidine
mephenytoin
MEPHYTON
MEPRON
MESNEX
MESTINON
METADATE CD (AGE) (PA ≥ 19 YO)
metaproterenol
metaproterenol, oral
metformin
methazolamide
methenamine hippurate
methenamine
mandelate
meloxicam
METHERGINE
methimazole
methocarbamol
METHOTREXATE
methotrexate
methylclothiazide

methyl dopa
methyl dopa/hctz
methylphenidate ir, sr
methylprednisolone
METIMYD
metipranolol
metoclopramide
metolazone
metoprolol tartrate
METROCREAM
METROGEL
METROGEL-VAGINAL
metronidazole oral
MEVACOR
mexiletine
MEXITIL
miconazole
miconazole nitrate
MICRO K
MICRO-K 10
MICROGESTIN FE
MICRONASE
MICROZIDE
MIDAMOR
MIDRIN
MIGRANAL (QTY)
MINIPRESS
MINOCIN
minocycline
minoxidil
MINTEZOL
MIRAPEX
MIRCETTE
mirtazapine
misoprostol
MODURETIC
MONISTAT 3, DUAL PACK
MONISTATE-DERM
MONOKET
**morphine, solution,
concentrate, sr,
suppository**
MOTRIN
MS CONTIN
MSIR
MUCOMYST
MUCELEX TROCHE
MYAMBUTOL
MYCOBUTIN
MYCOLOG II
MYCOSTATIN
MYDRIACYL
MYLERAN
MYSOLINE
nadolol
NAFTIN
NALEX DH
NALFON
naltrexone
naphazoline
NAPROSYN
naprofen
naprofen sodium
NARDIL
NASONEX
NAVANE
NEBUPENT
NECON
NEO-DECADRON
NEOMYCIN
neomycin sulfate
**neomycin/bacitracin/
polymyxin**
**neomycin/gramicidin
/polymyxin**
NEOSPORIN OINTMENT
OPHTHALMIC SOLUTION
NEO-SYNEPHRINE
NEPTAZANE
NEULASTA (QTY)
NEUMEGA
NEUPOGEN
niacin
NIASPAN
nicotine inhaler
NICOTINE PATCH
nicotine transdermal
NICOTROL

nifedipine
nifedipine sr
NILANDRON
NILSTAT
NITREK
NITROBID
NITROBID CAPSULES
NITRO-DUR
nitrofurantoin acrocrystals
**nitroglycerin ointment,
oral, patches, sublingual**
NITROL
NITROLINGUAL SPRAY
NITROSTAT SL
NIZORAL
NOCTEC
NOLVADEX
NORDETTE
NORBITROPIN (PA) (SPECIALTY)
NORFLEX
NORGESIC
NORGESIC FORTE
NORINYL 1/35, 1/50
NORMODYNE
NORPACE
NORPACE CR
NORPRAMIN
NOR-QD
NORTREL
nortriptyline
NORVASC
NORVIR
NOVAHISTINE DH
NOVOLIN
NOVO-NORDISK INSULINS
NOVOLOG
NUOX
NUTROPIN (SPECIALTY)
NUTROPIN AQ (SPECIALTY)
NUTROPIN DEPOT (SPECIALTY)
nystatin
OCUFEN
OCUFLOX
OCUPRESS
OGESTREL
OLUX
omalizumab
OMNICEF
OMS
ONE TOUCH
OPTIPRANOLOL
OPTIVAR
oral colon lavage solution
ORASONE
ORETIC
ORINASE
orphenadrine citrate
**orphenadrine/aspirin/
caffeine**
ORUDIS
ORUVAIL
OVACE
OVIDE
oxazepam
OXSORALEN (PA)
oxybutynin
oxycodone ir
oxycodone/apap capsule
oxycodone/apap tablet
oxycodone/aspirin
OXYFAST
OXYIR
PAMELOR
PANCREASE
PARAFLEX
PARAFON FORTE DSC
paregoric
PAREGORIC USP
PARLODEL (TAB ONLY)
PARNATE
paromomycin
PCE
PEDIAPRED
PEDIAZOLE
PEGASYS (SPECIALTY)
PEG-INTRON (SPECIALTY)
pemoline
PEN VK
penicillin vk
pentoxifylline
PERCODAN

PERIACTIN
PERIDEX
permethrin
perphenazine
PERSANTINE
phenazopyridine
PHENERGAN
PHENERGAN VC/CODEINE
PHENERGAN W/
DEXTROMETHORPHAN
PHENERGAN/CODEINE
PHENOBARBITAL
phenobarbital
phenyleph/ pyril
phenylephrine
**phenylephrine/
hydrocodone**
**phenylephrine/
hydrocodone/
chlorpheniramine**
phenytoin
PHOS LO
PHOSPHOLINE IODIDE
PILOCAR
pilocarpine
pindolol
piroxicam
PLAQUENIL
PLAVIX
podofilox
POLARAMINE
POLYCYLLIN
POLY-HISTINE CS
POLY-HISTINE DM
**polymixin b
sulfate/tmp**
POLY-PRED
POLYTRIM
POLY-VI-FLOR
PORTIA
potassium chloride
10% powder, tabs
potassium gluconate
potassium phosphate
PRAMOTIC
pramoxine/hydrocortisone
pravastatin
prazosin
ORASONE
PREDFORTE
PRED MILD OPHTHALMIC
PRED-G
prednisolone acetate
prednisolone phosphate
prednisone
PRELONE
PREMARIN
PREMPHASE
PREMPRO
prenatal multivitamins
PRENATE ADVANCE
PREVEN
PRIMAQUINE
primaquine
primidone
PROAMATINE
PROBANTHINE
probenecid
procainamide
PROCANABID
PROCARDIA
prochlorperazine maleate
PROCRIT (SPECIALTY)
PROCTOCORT
PROCTOCREAM HC
PROCTOFOAM HC
PROGRAF
PROLIXIN
PROLOPRIM
promethazine
promethazine/codeine
**promethazine/
dextromethorphan**
**promethazine/
phenylephrine/codeine**

PROMETRIUM
 PRONESTYL
propafenone
 PROPINE
propoxyphene
propoxyphene
 napsylate/apap
propoxyphene/apap
propoxyphene/asal
 caffeine
propranolol
propranolol/hctz
 PROPYLTHIOURACIL
propylthiouracil
 PROSCAR (STEP)
 PROSTIGMIN
 PROTOPIC
 PROTROPIN (SPECIALTY)
 PROVENTIL
 PROVENTIL HFA
 PROVERA
pseudoephedrine/
 chlorpheniramine
 PSORCON
 PULMICORT RESPULES (AGE)
 PULMOZYME
 PURINETHOL
 PYRAZINAMIDE
pyrazinamide
 PYRIDIDIUM
pyridostigmine
 QUESTRAN
 QUESTRAN LIGHT
 QUBRON-T
 QUINAGLUTE
 QUINIDEX
quinidine gluconate
quinidine sulfate
quinidine sulfate sr
 QUININE
quinine
 QVAR
ranitidine
 REBETOL (SPECIALTY)
 REBETRON (SPECIALTY)
 REBIF (SPECIALTY)
recombinant insulin
 REGLAN
 RELENZA (QTY)
 REQUIP
 RESCRIPTOR
reserpine
 RESTASIS (PA)
 RESTORIL
 RETIN A MICRO (PA)
 RETROVIR
 REVIA
 REYATAZ
 RHEUMATREX
 RIDAURA
 RIFADIN
rifampin
 RILUTEK (PA)
rimantadine
 RISPERDAL
 RITALIN (AGE) (PA ≥ 19 YO)
 RITALIN SR (AGE) (PA ≥ 19 YO)
 RMS SUPP
 ROBAXIN
 ROBITUSSIN A-C, DAC
 ROCALTROL
 ROFERON-A (PA)
 RONDEC
 RONDEC DM
 RONDEC TR
 ROXICODONE
 ROZEX
 RYNATAN
 RYTHMOL
 SAIZEN (SPECIALTY)
salsalate
 SANCTURA
 SANGCYA
 SECTRAL
selegiline
selenium sulfide 2.5%
 SELSUN RX
 SEPTRA DS
 SERAX
 SEREVENT

SEREVENT DISKUS
 SEROMYCIN
 SEROQUEL
 SEROSTIM (PA)
sertraline hcl
 SERZONE
 SILVADENE
silver sulfadiazine
simvastatin
 SINEMET
 SINEMET CR
 SINEQUAN
 SINGULAIR 4mg, 5mg (AGE)
 SITREX
 SKELAXIN
 SLO-BID/SLO-PHYLLIN/
 SLO-PHYLLIN 80
 SLOW K
sodium citrate/citric acid
sodium fluoride
sodium polystyrene
 sulfonate
 SODIUM SULAMYD
 SOMA COMPOUND
 SONATA
 SORIATANE
sotalol
 SOTRET (PHYSICIAN)
 SPRINTEC
spironolactone
spironolactone/hctz
 SPORANOX (PA)
 SSKI
 STELAZINE
 STRATTERA (QTY #30) (PA ≥ 19 YO)
 SUBOXONE (QTY)
 SUBUTEX (QTY)
sucralfate
 SULFACET R
sulfacetamide
sulfacetamide 10%/
 prednisolone .25%, 0.5%
sulfacetamide/
 fluorometholone
sulfacetamide/sulfur
 SULFADIAZINE
sulfadiazine
sulfadoxine/pyrimethamine
sulfamethoxazole/
 trimethoprim (smz/tmp)
sulfanilamide compound
sulfasalazine
sulfapyrazone
sulindac
 SUMYCIN
 SUPRAX
 SURE STEP
 SURE STEP PRO
 SUSTIVA
 SYMMETREL
 SYNALAR
 SYNALAR HP
 SYN-RX
 SYNTHROID
 TAGAMET
 TAMIFLU (QTY)
tamoxifen
 TAPAZOLE
 TARCEVA
 TARGRETIN
 TAZORAC
 TEGRETOL XR
temazepam
 TEMODAR
 TEMOVATE
 TENEX
 TENORETIC
 TENORMIN
terazosin
terbutaline sulfate
 TESLAC
 TESTRED (PA)
tetracycline
theophylline
theophylline, 80mg/15cc
theophylline sr
 THIOGUANINE

thioguanine (6-TG)
thioridazine
thiothixene
 THORAZINE
thyroid, desiccated
 THYROLAR
 TICLID
ticlopidine
 TIGAN
 TIKOSYN
 TILADE INHALER
timolol
 TIMOPTIC
 TIMOPTIC-XE
 TOBREX
 TOFRANIL
tolazamide
tolbutamide
 TOLECTIN DS
 TOLINASE
tolmetin
 TONOCARD
 TOPAMAX
 TOPICORT
 TOPICORT LP
 TOPROL XL
 TORADOL (QTY)
 TRACLEER
 TRANDATE
 TRANSDERM-NITRO
 TRANXENE
trazodone
 TRENAL
tretinoin topical
triamcinolone
triamcinolone
 0.025%, 0.1%, 0.5%
triamcinolone 0.1%
 in orabase
triamcinolone oral
triamcinolone/nystatin
triamterene
 37.5mg/hctz 25mg
triamterene
 75mg/hctz 50mg
triazolam
 TRIDESILON
trifluoperazine
trifluridine ophthalmic
 solution
trihexyphenidyl
 TRILAFON
 TRILEPTAL
 TRI-LEVELN
trimethobenzamide
trimethoprim
 TRI-NASAL
 TRI-NORINYL
triple sulfa vaginal
 TRIVORA
 TRI-VI-FLOR
 TRIZIVIR
tropicamide
trospium chloride
 TRUSOPT
 TRUVADA
 TUSSI-ORGANIDIN DM
 TUSSI-ORGANIDIN NR
 TUSSIONEX
 TYLENOL/CODEINE
 TYLOX
 UNIPHYL
 UNITHROID
 URECHOLINE
 URISED
 URISPAS
ursodiol
 VALCYTE
 VALISONE
valproic acid
 VASOCIDIN
 VASODILAN
 VELOSEF
venlafaxine hcl
 VENTOLIN
 VENTOLIN HFA
 VENTOLIN ROTACAPS

VEPESID
verapamil
verapamil la caps
verapamil la tablets
 VERMOX
 VESANOID
 VASOTEC
 VIBRAMYCIN
 VICON FORTE
 VIDEX
 VIDEX EC 125mg
 (all other strengths are available
 as generic)
 VIOKASE
 VIRA A
 VIREAD
 VIRACEPT
 VIRAMUNE
 VIRAZOLE
 VIROPTIC
 VISCOUS XYLOCAINE
 VISKEN
 VISTARIL
vitamin a, d
 VIVACTIL
 VOLMAX
 VOLTAREN
 VOSOL
 VOSOL HC
warfarin sodium
 WELLBUTRIN
 WESTCORT
 XALATAN
 XELODA
 XYLOCAINE
 YASMIN
 YODOXIN
 ZADITOR
 ZARONTIN
 ZAROXOLYN
 ZELNORM (PA)
 ZEPHREX LA
 ZERIT
 ZETIA
 ZIAC
 ZIAGEN
 ZMAX
 ZOLADEX (PA)
 ZOMIG (QTY)
 ZOMIG NASAL (QTY)
 ZOMIG ZMT (QTY)
 ZONEGRAN
zonisamide
 ZOVIRAX CREAM, OINT., ORAL
 ZOVIA
 ZYBAN
 ZYLOPRIM
 ZYVOX (PA)

Maintenance Drug List*
 *(Drugs provided by a specialty
 pharmacy not included on this
 list)

actonel
 allopurinol
 antiarrhythmics
 anticonvulsants
 antihypertensives
 arthritis agents
 asthma agents
 beta blockers
 birth control agents
 colchicine
 diabetic supplies
 digoxin
 diuretics
 esterified or
 conjugated
 estrogens
 folic acid
 glaucoma medications
 glucocorticoid steroids
 hormones
 insulin
 lipid lowering agents
 lithium
 metoclopramide
 multi-vitamins
 w/fluoride
 nitroglycerin
 oral hypoglycemic
 agents
 oxybutynin
 pancrease
 parkinson agents
 prempo
 potassium
 supplements
 prenatal vitamins
 pulmozyme
 ranitidinerosuvastatin
 calcium
 sodium fluoride
 tamoxifen
 thyroid preparation
 warfarin

Glucose Monitoring Devices

ASCENSIA CONTOUR
 GLUCOMETER
 ASCENSIA DEX2
 ASCENSIA ELITE XL
 ENCORE
 FAST TAKE
 GLUCOMETER ELITE
 GLUCOMETER
 MICROFILL TEST
 STRIPS
 ONE TOUCH BASIC
 ONE TOUCH PROFILE
 ONE TOUCH ULTRA
 SURFSTFP PR

This is not a drug list. The following list is **INFORMATIONAL ONLY** about drugs that are covered at the Tier 3 copay amount. The purpose of this list is to identify Tier 1 and Tier 2 drugs that are in the same drug class as the Tier 3 drugs, but are available at a lower copay amount. **Any changes in your prescription must be discussed with your provider.** KPS reserves the right to change this list at any time.

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Abilify... ..misc.	Cognex..... misc.	Frova 9	Nexiummisc.	Sandostatin..... 15
AccuNeb 16	Colestid. misc.	Flonase.....21	Norethin 9	Soma Com/codeine.. ..2
Accupril22	Covera-HS 5	Genora 9	NuLev 24	Spectazole20
Aceon.....22	Cozaar 22	Geodon... ..misc.	Ogen.....9	Starlix.....4
Aciphex.....misc.	Cryelle 9	Glucophage XR4	Ortho Cept.....9	Sular5
Aclovate 18	Cyclocort 18	Glucovance 4	Ortho Cyclen.9	Testim 11
Activella9	Cycrin..... 13	Glyset 4	Ortho Novum... ..9	Tevetin22
Adrenalin inhaled..16	Cystospaz 24	Halog..... 18	Ortho Tri-Cyclen.. ...9	Theo24 17
AeroBid 16	Demadex... ..misc.	Hycort..... 18	Ortho Micronor.. 9	Theolair..... 17
Alesse9	Demulin..... 9	Hyzaar 22	Ovcon 35 & 50... 9	Torse mide... ..misc.
Allegramisc.	Depakote Sprinkles...15	Imitrex nasal... ..15	Ovrette..... 9	Triazac.....5
Altace22	Depo-Testosterone...11	Inderide LA..... 6	Oxandrin 11	Triphasil9
Altocor.....23	Dermatop 18	Lanoxicaps... ..misc.	OxyContin..... 2	Ultracet misc.
Amaryl.....4	Detrol 24	Levatol..... 6	Oxytrol 24	Ultram misc.
Amerge 15	Diprolene AF ...18	Levlite 9	Pentasa 10	Uniretic.....7
Anaspaz.....24	Ditropan LA 24	Lo Ovral..... 9	Permaxmisc.	Univasc.....5
Androderm 11	Dizac..... 5	Loestrin 21..... 9	Plan B.....misc.	Vancenase.....21
Androgel 11	Donnagel..... 24	Loestrin FE..... 9	Prandin 4	Vaseretic.....22
Aristocort A18	Doral 3	Maxair	Pravachol 23	Vicodin.....2
Arthrotec..... misc.	Duradrin 15	Autoinhaler 16	Prefest 13	Vicoprofen.....2
Atacand.....22	Dynacirc 5	Maxiflor..... 18	Prevacid... ..misc.	Vioxx..... 1
Avandamet.....4	Dynacirc CR..... 5	Mentax 18	Prinivil.....22	WelChol misc.
Avapro22	Edecrin..... misc.	Metaglip..... 4	Procardia XL.....5	Xanax XR.....3
Axert 15	Elocon 18	Micardis.....22	Prosom 3	Xopenex 16
Axid..... misc.	Enpresse..... 9	Mobic..... 1	Protonixmisc.	Zanaflex..... 14
Azasan..... 10	Entocort EC..... 10	Modicon..... 9	Provigil..... 8	Zebeta 6
Azulfidine EN-tab.10	Esidrix 25	Monopril 22	Pulmicort	Zestril.....22
Beconase AQ...21	Estraderm 12	Motofen 19	Turbuhaler. 16	Zyprexa.....misc.
Bextra 1	Exelon misc.	Mykrox..... 7	Relafen 1	Zyrtecmisc.
BuSpar.....3	Flomax.....misc.	Nasacort..... 21	Relpax 15	
Cardizem LA5	Flonase.....21	Nasacort AQ.... 21	Reminylmisc.	
Celebrex 1	Flutex 18	Nasarel..... 21	Rhinocort 21	
Cenestin..... 12	Foradil Aerolizer...16	Nelova 9	Ritalin LA 8	
Cholestyramide.....17	Fosamaxmisc.		Rowasa 10	
Clarinetmisc.				
Codran 18				

KPS
health plans

Each Tier 3 drug that is listed on the first page has a number or "misc." listed next to it. Please refer to the number that is noted to identify drugs that are in the same drug class as the Tier 3 drugs, but are available at a lower copay amount. Drugs that are covered at the Tier 1 copay are written in lower case bold letters, and drugs that are covered at the Tier 2 copay are written in UPPER CASE LETTERS.

List 1
naproxen
ibuprofen
diclofenac sodium
sulindac
ketoprofen

List 2
Oxycodone
codeine
propoxyphene
DILAUDID
DURAGESIC
meperidine
levorphanol
hydromorphone
MS CONTIN
ORAMORPH SR

List 3
alprazolam
lorazepam
diazepam
temazepam
estazolam

List 4
AVANDIA
glyburide
GLUCOPHAGE
metformin
GLUCOTROL XL
Glipizide

List 5
PROCARDIA
nifedipine
nicardipine
NORVASC
verapamil
CARDIZEM SR
diltiazem
DILACOR
PLENDIL
ADALAT

List 6
sotalol

BETAPACE
timolol
BLOCADREN
TENORMIN
atenolol
TOPROL XL
metoprolol
LOPRESSOR
bisoprolol

LIST 7 CORGAARD
nadolol
indapamide
chlorothiazide
hydrochlorothiazide
DYAZIDE
HCTZ triamterene
ZAROXOLYN

List 8
DEXEDRINE
CYLERT
RITALIN/RITALIN SR

List 9 *Covered as Tier 1
APRI

AVIANE*
BREVICON
DESOGEN
LEVLEN*
LOW OGESTROL
NECON*
NORDETTE
SPRINTEC
YASMIN
ZOVIA 1/35 AND 1/50*
CYCLESSA
NECON 0.5/35, 1/35, 1/50*
TRI-LEVLEN*
TRIVORA*
CAMILA*
ERRIN*
NOR QD
MICROGESTIN FE*

List 10
ASACOL
azathioprine
AZULFIDINE

COLAZAL
CORTENEMA
DIPENTUM
sulfasalazine

List 11
ANDROID
fluoxymesterone
HALOTESTIN
methyltestosterone
testosterone cypionate

List 12
estradiol
estropipate
MENEST
PREMARIN
ESTRACE

List 13
PREMPRO
PREMPHASE

List 14
NORGESIC
SOMA COMPOUND
asa/carisoprodol/codeine

List 15
CAFERGOT
D.H.E. 45
DEPAKOTE ER
DEPAKENE
IMITREX
MAXALT
MIDRIN
MIGRANAL
ZOMIG

List 16
QVAR
FLOVENT
AZMACORT
ADVAIR DISKUS
PULMICORT
RESPULES
ADVAIR
albuterol
ALUPENT

metaproterenol
ATROVENT
ipatroprium
BRETHINE
COMBIVENT
SEREVENT
PROVENTIL
VENTOLIN
VOLMAX

List 17
theophylline
THEO-DUR
aminophylline
cromolyn inhaled
ACCOLATE
TILADE

List 18
PSORCON E
betamethasone
clobetasol topical
fluocinonide topical
TOPICORT
DIPROSONE
triamcinolone
CUTIVATE
KENALOG
SYNALAR

List 19
LOMOTIL
IMODIUM
atropine-diphenoxylate

List 20
selenium sulfide
topical
NIZORAL
nystatin
NAFTIN
LAMISIL
ketoconazole

List 21
ATROVENT NASAL
NASONEX

fluticasone nasal

List 22
lisinopril
CAPOTEN
captopril
LOTENSIN
MAVIK

List 23
MEVACOR
ADVICOR
lovastatin
LESCOL
LESCOLXL
LIPITOR
CRESTOR
NIASPAN

List 24
BENTYL
dicyclomine
DONNATAL
atropine-hyoscyamine
PRO-BANTHINE
LIBRAX

List 25
HCTZ
hydrochlorothiazide
DYAZIDE

MISCELLANEOUS LIST

Fosamax
Actonel Evista
DIDRONEL

WelChol; Colestid
cholestyramine

Arthrotec
Naproxen misoprostol
NAPROSYN

Ultram; Ultracet
tramadol

Cognex; Exelon; Reminyl

ARICEPT

Flomax
CARDURA MINIPRESS
prazosin **terazosin**
doxazosin **HYTRIN**

Demadex; Torsemide; Edecrin
furosemide
LASIX

Permax
MIRAPEX SYMMETREL

Aciphex; Nexium; Prevacid; Protonix
THERE IS NO TIER 1 OR TIER 2 DRUGS
RECOMMEND PRILOSEC OTC

Plan B
PREVEN

Allegra; Clarinex; Zyrtec
Fexofenadine
recommend Claritin OTC

Zyprexa; Geodon; Abilify
RISPERDAL M-TAB CLOZARIL
Clozapine SEROQUEL

Axid
Recommend OTC Pepcid
famotidine
nizatidine