

# January 2010 BCBSM/BCN Custom Formulary Quick Guide



(g) Indicates Generic Equivalent

## ACE Inhibitors

### Formulary Preferred/Tier 1

\$1-10 Prinivil, Zestril (g)  
\$5-15 Lotensin, HCT (g)  
\$5-15 Prinzide, Zestoretic (g)  
\$5-15 Vasotec, Vaseretic (g)  
\$5-50 Accupril, Accuretic (g)  
\$10-55 Monopril, HCT (g)  
\$15-35 Altace Capsule (g)  
\$20-40 Mavik (g)  
\$20-40 Univasc, Uniretic (g)  
\$40-120 Aceon (g)  
\$50-110 Lotrel (g) (#)

### Formulary Options/Tier 2

\$105-165 Lotrel 5/40, 10/40 (#)

## Angiotensin Receptor Blockers

### Formulary Preferred/Tier 1

-None

### Formulary Options/Tier 2

\$40-120 Benicar, HCT ST (#)  
\$55-125 Cozaar/Hyzaar ST (#)

## Anti-infectives

### Formulary Preferred/Tier 1

\$1-10 Amoxil (g)  
\$1-10 Bactrim, DS/Septra, DS (g)  
\$1-10 Cipro (g)  
\$1-10 Keflex (g)  
\$1-10 Penicillin VK (g)  
\$1-10 Tetracycline (g)  
\$1-10 Vibramycin, Vibratabs (g)  
\$5-15 Erythromycin (g)  
\$5-25 Biaxin (g)  
\$5-35 Macrobid, Macrochantin (g)  
\$10-30 Cefitin (g)  
\$10-30 Duricef (g)  
\$10-30 Zithromax (g)  
\$15-35 Augmentin, ES (g)  
\$15-35 Minocin, Dynacin (g)  
\$35-95 Cefzil (g)  
\$35-95 Cipro XR (g) PA (#)  
\$35-55 Floxin (g)  
\$45-105 Biaxin XL (g)  
\$45-105 Omnicef (g)

### Formulary Options/Tier 2

\$90-150 Avelox, ABC

## Anticonvulsants

### Formulary Preferred/Tier 1

\$1-10 Diamox (g)  
\$1-10 Klonopin (g)  
\$1-10 Phenobarbital (g)  
\$5-15 Tegretol (g)  
\$15-35 Neurontin (g)  
\$20-40 Dilantin (g)  
\$20-40 Mysoline (g)  
\$25-130 Depakote, Sprinkles (g)  
\$30-90 Zonegran (g)  
\$35-95 Klonopin Wafer (g)  
\$50-110 Zarontin (g)  
\$55-115 Topamax (g)  
\$65-125 Trileptal (g)  
\$70-130 Tegretol XR (g)  
\$120-180 Depakote ER (g)  
\$155-355 Topamax Sprinkles (g)

## Anticonvulsants (Cont.)

### Formulary Preferred/Tier 1 (cont.)

\$160-385 Lamictal, Disper Tabs (g)  
\$175-235 Keppra (g)

### Formulary Options/Tier 2

\$15-35 Dilantin Infatabs  
\$210-385 Vimpat  
\$220-420 Gabitril  
\$235-435 Banzel  
\$1635-4900 Sabril

## Antidepressants

### Formulary Preferred/Tier 1

\$1-10 Celexa (g)  
\$1-10 Desyrel (g)  
\$1-10 Elavil (g)  
\$1-10 Pamelor, Aventyl (g)  
\$1-10 Sinequan, Adapin (g)  
\$5-15 Paxil (g)  
\$5-15 Prozac, Sarafem (g)  
\$5-15 Remeron (g)  
\$5-15 Zoloft (g)  
\$10-30 Tofranil (g)  
\$30-50 Luvox (g)  
\$30-165 Wellbutrin, SR, XL (g) (#)  
\$55-115 Effexor (g)  
\$55-115 Paxil CR (g)

### Formulary Options/Tier 2

\$70-130 Lexapro ST (#)  
\$95-155 Venlafaxine ER ST (#)  
\$145-205 Effexor XR ST (#)

## Antidiabetics

### Formulary Preferred/Tier 1

\$5-15 Amaryl (g)  
\$5-25 Diabeta, Micronase (g)  
\$5-25 Glucophage, XR (g)  
\$5-30 Glucotrol, XL (g)  
\$20-40 Glucovance (g)  
\$40-100 Metaglip (g)  
\$50-110 Precose (g)

### Formulary Options/Tier 2

\$155-250 Actos ST (#)  
\$155-250 Avandia ST (#)  
\$160-220 Prandin

## Insulins

\$35-95 Humulin R, N (Vial)  
\$75-135 Humulin 70/30 (Vial)  
\$130-190 Humulin N (Pen/Cartridge)  
\$150-210 Lantus (Vial)  
\$155-215 Levemir (Vial)  
\$160-260 Humalog Mix (Vial)  
\$160-360 Levemir (Pen)  
\$175-375 Humalog, Mix (Pen/Cartridge)  
\$180-240 Humulin 70/30 (Pen/Cartridge)  
\$190-250 Novolin (Pen/Cartridge)  
\$195-260 Apidra (Pen/Cartridge)  
\$195-255 Lantus (Pen/Cartridge)  
\$205-265 Apidra (Vial)  
\$210-270 Novolog (Vial)  
\$220-280 Novolog (Pen/Cartridge)  
\$220-420 Novolog Mix (Pen/Cartridge)

## Antifungals – oral

### Formulary Preferred/Tier 1

\$1-10 Diflucan (g)  
\$5-15 Lamisil (g)  
\$25-85 Mycelex Troche (g)  
\$30-50 Nystatin (g)  
\$70-130 Grifulvin V Susp (g)

## Antifungals – oral (Cont.)

### Formulary Options/Tier 2

\$80-140 Gris-Peg  
\$90-150 Grifulvin V 500MG

## Antihistamines/Decongestants

### Formulary Preferred/Tier 1

\$1-10 Atarax, Vistaril (g)  
\$1-10 Benadryl (g)  
\$1-30 Claritin, D; Alavert OTC (g)  
\$5-25 Periactin (g)  
\$5-50 Zyrtec, D OTC (g)  
\$30-50 Allegra (g)  
\$30-50 Rynatan, Suspension (g)  
\$50-100 Allegra-D 12 hr (g) ST (#)

### Formulary Options/Tier 2

\$60-120 Astelin, Astepro  
\$95-155 Allegra-D 24 hr ST (#)

## Antilipemics

### Formulary Preferred/Tier 1

\$5-15 Lipid (g)  
\$5-15 Zocor (g) (#)  
\$10-30 Mevacor (g) (#)  
\$10-30 Pravachol (g) (#)  
\$30-95 Lofibra (g)  
\$35-105 Fibricor (g)  
\$40-60 Colestid (g)  
\$40-100 Questran, Light (g)

### Formulary Options/Tier 2

\$80-140 Zetia ST (#)  
\$90-150 Crestor ST (#)  
\$95-155 Tricor  
\$105-165 Niaspan  
\$160-220 Welchol

## Antipsychotics

*Risperdal (g) is available for BCN members at a Tier 0 copay (\$0) BCBSM requires Tier 1 copay.*

### Formulary Preferred/Tier 1

\$1-10 Haldol (g)  
\$5-15 Navane (g)  
\$5-15 Prolixin (g)  
\$10-30 Mellaril (g)  
\$20-40 Thorazine (g)  
\$25-45 Stelazine (g)  
\$75-135 Clozaril (g)  
\$120-280 Risperdal (g)  
\$190-250 Risperdal M-Tab (g)

### Formulary Options/Tier 2

\$35-95 Orap  
\$135-195 Moban  
\$155-355 Seroquel  
\$290-490 Geodon  
\$300-500 Abilify  
\$345-545 Zyprexa, Zydis

## Antivirals

### Formulary Preferred/Tier 1

\$1-10 Zovirax caps, tabs, susp. (g)  
\$5-25 Symmetrel (g)  
\$10-30 Flumadine (g)  
\$160-220 Famvir (g) (#)  
\$210-420 Valtrex (g) (#)  
\$480-680 Rebetol (g)  
\$645-845 Cytovene (g)

### Formulary Options/Tier 2

\$25-85 Relenza (#)  
\$50-115 Tamiflu Caps, Susp (#)  
\$280-480 Epivir HBV

## Antivirals (Cont.)

### Formulary Options/Tier 2 (cont.)

\$645-845 Baraclude  
\$700-900 Hepsera  
\$1450-1950 Valcyte

## Beta-blockers

### Formulary Preferred/Tier 1

\$1-10 Lopressor (g)  
\$1-10 Tenormin, Tenoretic (g)  
\$1-15 Inderal, Inderide (g)  
\$5-15 Coreg (g)  
\$5-15 Ziac (g)  
\$5-25 Corgard (g)  
\$10-30 Betapace, AF (g)  
\$10-30 Normodyne (g)  
\$20-40 Zebeta (g)  
\$25-45 Toprol XL (g)  
\$30-50 Inderal LA (g)  
\$30-50 Lopressor HCT (g)

### Formulary Options/Tier 2

-None

## BPH Treatment

### Formulary Preferred/Tier 1

\$1-10 Cardura (g)  
\$5-15 Hytrin (g)  
\$35-95 Proscar (g)

### Formulary Options/Tier 2

\$80-140 Uroxatral

## Calcium Channel Blockers

### Formulary Preferred/Tier 1

\$5-15 Norvasc (g)  
\$5-25 Calan/Isoptin, SR (g)  
\$25-45 Cardizem, SR, CD (g)  
\$25-85 Plendil (g)  
\$25-110 Verelan, PM (g)  
\$30-90 Sular 20, 30, 40mg (g)  
\$35-55 Procardia XL, Adalat CC (g)  
\$50-110 Lotrel (g)

### Formulary Options/Tier 2

\$65-125 Covera-HS  
\$105-165 Lotrel 5/40, 10/40 (#)

## Contraceptives

### Formulary Preferred/Tier 1

\$10-30 Depo-Provera 150MG (g)  
\$10-30 Desogen, Ortho Cept (g)  
\$10-30 Ortho-Cyclen (g)  
\$10-30 Ortho Tri-Cyclen (g)  
\$15-35 Alesse, Levilite (g)  
\$15-35 Cyclessa (g)  
\$15-35 Demulen (g)  
\$15-35 Loestrin, Fe (g)  
\$15-35 Nordette, Levlen (g)  
\$15-35 Ortho Micronor, Nor-QD (g)  
\$15-35 Ortho-Novum 7/7/7 (g)  
\$15-35 Triphasil, TriLevlen (g)  
\$15-40 Ovral, Lo/Ovral (g)  
\$25-45 Ovcon-35 (g)  
\$25-45 Tri-Norinyl (g)  
\$25-85 Seasonale (g) (#)  
\$35-55 Estrostep Fe (g)  
\$35-55 Mircette (g)  
\$40-60 Yasmin (g)

### Formulary Options/Tier 2

\$30-90 Ortho Evra (#)  
\$30-90 Ortho Tri-Cyclen Lo  
\$30-90 Yaz  
\$40-60 Lybrel

Diuretics	Hypnotics & Anxiolytics (Cont.)	Osteoporosis	Skeletal Muscle Relaxants
<b>Formulary Preferred/Tier 1</b> \$1-10 Diamox (g) \$1-10 Diuril (g) \$1-10 Hydrodiuril, Microzide (g) \$1-10 Hygroton, Thalitone (g) \$1-10 Lasix (g) \$1-10 Lozol (g) \$1-10 Maxzide, Dyazide (g) \$1-10 Moduretic (g) \$5-15 Aldactazide (g) \$5-15 Bumex (g) \$5-25 Aldactone (g) \$10-30 Zaroxolyn (g) \$20-40 Demadex (g) \$105-165 Inspra (g) <b>Formulary Options/Tier 2</b> \$30-90 Dyrenium	<b>Formulary Options/Tier 2</b> -None <b>Inhaled Beta Agonists</b> <b>Formulary Preferred/Tier 1</b> \$1-10 Proventil soln (g) \$40-100 Accuneb (g) <b>Formulary Options/Tier 2</b> \$35-55 Proair HFA, Ventolin HFA \$70-130 Maxair Autohaler \$120-180 Foradil \$130-190 Serevent Diskus <b>Inhaled Steroids</b> <b>Formulary Preferred/Tier 1</b> <i>These brand name drugs are available at the Preferred/Tier 1 copay for BCN members only. BCBSM requires Tier 2 copay.</i> \$60-120 QVAR \$100-160 Asmanex \$105-165 Pulmicort Flexhaler \$120-180 Flovent Diskus, HFA \$130-260 Alvesco \$140-200 Azmacort \$210-410 Pulmicort Respules <b>Intranasal Steroids</b> <b>Formulary Preferred/Tier 1</b> \$15-35 Flonase (g) \$25-45 Nasalide, Nasarel (g) <b>Formulary Options/Tier 2</b> \$65-125 Nasacort AQ <b>ST</b> <b>Migraine &amp; Cluster Headache</b> <b>Formulary Preferred/Tier 1</b> \$5-15 Fioricet/Esgic, Plus (g) \$5-35 Fiorinal (g) \$10-30 Midrin (g) \$20-40 Cafegot (g) (#) \$155-355 D.H.E. 45 (g) (#) \$165-225 Imitrex tablet (g) (#) \$170-230 Imitrex nasal spray (g) (#) \$220-420 Imitrex injection (g) (#) <b>Formulary Options/Tier 2</b> \$185-385 Ergomar (#) \$215-275 Maxalt, MLT <b>ST</b> (#) \$330-530 Migranal (#) <b>NSAIDs</b> <b>Formulary Preferred/Tier 1</b> \$1-10 Mobic (g) \$1-10 Motrin (g) \$1-10 Naprosyn, EC Naprosyn (g) \$5-15 Anaprox, DS (g) \$5-15 Ansaid (g) \$5-15 Indocin (g) \$5-25 Clinoril (g) \$5-25 Daypro (g) \$5-25 Lodine (g) \$15-40 Voltaren, XR (g) \$20-40 Cataflam (g) \$20-40 Relafen (g) \$35-95 Lodine XL (g) \$70-130 Indocin SR (g) <b>Formulary Options/Tier 2</b> \$100-160 Indocin Suppository \$160-360 Ponstel	<b>Formulary Preferred/Tier 1</b> <i>See Estrogens &amp; Progestins</i> \$10-30 Fosamax (g) \$15-35 Fosamax Weekly (g) (#) \$80-140 Miacalcin Nasal Spray (g) \$170-230 Didronel (g) (#) <b>Formulary Options/Tier 2</b> \$70-135 Actonel (All) <b>ST</b> (#) \$70-130 Fortical Nasal Spray \$90-150 Evista \$125-185 Miacalcin Injection <b>Psychotherapeutic Agents-Misc.</b> <b>Formulary Preferred/Tier 1</b> \$10-30 Eskalith, CR (g) \$20-40 Lithobid (g) \$30-50 Lithium Citrate (g) \$40-100 Requip (g) \$140-170 Razadyne, ER (g) <b>Formulary Options/Tier 2</b> \$140-200 Namenda, solution \$175-235 Aricept, ODT \$190-250 Exelon (#) <b>Respiratory - Misc.</b> <b>Formulary Preferred/Tier 1</b> \$5-35 Atrovent soln, NS (g) \$220-280 Duoneb (g) <b>Formulary Options/Tier 2</b> \$50-90 Intal Inhaler (Tier 1-BCN only) \$75-135 Accolate (#) \$85-145 Atrovent Inhaler \$95-155 Singulair <b>ST</b> (#) \$105-165 Combivent \$155-215 Spiriva \$160-220 Symbicort \$185-245 Advair \$1215-1715 Revatio <b>PA</b> (#) \$1905-2405 Pulmozyme \$4690-5190 Letairis <b>PA</b> (#) \$4700-5200 Tracleer <b>PA</b> \$7655-8155 Ventavis <b>PA</b> (#) \$13420-15050 Tyvaso <b>PA</b> (#)	<b>Formulary Preferred/Tier 1</b> \$1-10 Flexeril (g) \$1-10 Lioresal (g) \$1-10 Paraflex, Parafon Forte DSC (g) \$1-10 Robaxin (g) \$1-10 Soma (g) \$1-10 Valium (g) \$15-35 Norflex (g) \$55-115 Norgestic, Forte (g) \$60-120 Soma Compound (g) \$95-155 Dantrium (g) \$140-200 Soma Cmpd w/ Cod (g) <b>Formulary Options/Tier 2</b> \$175-235 Skelaxin <b>Smoking Cessation Agents</b> <i>OTC products are not a covered benefit for BCBSM members.</i> <b>Formulary Preferred/Tier 1</b> \$30-50 Nicotine Gum OTC (g) (#) \$35-55 Nicotine Patches Rx, OTC (g) (#) \$40-60 Commit Lozenge OTC (g) (#) \$35-95 Zyban (g) <b>Formulary Options/Tier 2</b> \$85-145 Chantix (#) <b>Stimulants - CNS</b> <b>Formulary Preferred/Tier 1</b> \$10-30 Ritalin, SR, Methylin, ER (g) \$15-35 Adderall (g) \$30-50 Dexedrine (g) \$150-210 Adderall XR (g) <b>Formulary Options/Tier 2</b> \$105-165 Metadate CD \$115-175 Concerta \$395-595 Provigil <b>PA</b> (#) \$415-615 Desoxyn
<b>Estrogens &amp; Progestins</b> <b>Formulary Preferred/Tier 1</b> \$1-10 Estrace (g) \$1-10 Ogen, Ortho-Est (g) \$1-10 Provera (g) \$20-40 Climara (g) (#) \$30-50 Estratest, HS (g) \$40-60 Aygestin (g) <b>Formulary Options/Tier 2</b> \$25-85 Alora (#) \$25-85 Vivelle-DOT (#) \$30-90 Estraderm (#) \$30-90 Premarin, Low Dose \$35-55 Depo-SubQ Provera 104 \$35-95 FemHRT \$35-95 Prempro/Premphase \$35-95 Prometrium \$55-115 Estring (#) \$75-135 Prochieve \$160-360 Crinone	<b>Formulary Preferred/Tier 1</b> \$1-10 Pepcid (g) (Rx only) \$1-10 Reglan tabs, soln (g) \$5-25 Zantac (g) (Rx only) \$10-30 Carafate tabs (g) \$15-35 Cytotec (g) \$15-35 Prilosec, OTC (g) \$80-140 Protonix (g) <b>ST</b> \$85-145 Prilosec 40mg (g) <b>PA</b> \$130-260 Prevacid (g) <b>ST</b> <b>Formulary Options/Tier 2</b> \$60-120 Carafate susp \$155-215 Prevacid Solutab <b>ST</b> \$205-405 Helidac \$250-450 PREVPAC	<b>Rheumatologic Agents</b> <b>Formulary Preferred/Tier 1</b> \$5-15 Methotrexate (g) \$5-15 Plaquenil (g) \$10-30 Imuran (g) \$25-45 Arava (g) \$25-45 Azulfidine EN-Tab (g) <b>Formulary Options/Tier 2</b> \$55-115 Rheumatrex, Trexall \$1430-1930 Enbrel <b>PA</b> (#) \$1535-2035 Humira <b>PA</b> (#)	<b>Urinary Antispasmodics</b> <b>Formulary Preferred/Tier 1</b> \$1-10 Bentyl (g) \$1-10 Ditropan (g) \$25-45 Levsin, SL (g) \$30-50 Levsinex (g) \$40-60 Levbid (g) \$40-100 Urispas (g) \$55-115 Ditropan XL (g) <b>Formulary Options/Tier 2</b> \$105-170 Detrol, LA
<b>Gastrointestinal Agents</b> <b>Formulary Preferred/Tier 1</b> \$1-10 Pepcid (g) (Rx only) \$1-10 Reglan tabs, soln (g) \$5-25 Zantac (g) (Rx only) \$10-30 Carafate tabs (g) \$15-35 Cytotec (g) \$15-35 Prilosec, OTC (g) \$80-140 Protonix (g) <b>ST</b> \$85-145 Prilosec 40mg (g) <b>PA</b> \$130-260 Prevacid (g) <b>ST</b> <b>Formulary Options/Tier 2</b> \$60-120 Carafate susp \$155-215 Prevacid Solutab <b>ST</b> \$205-405 Helidac \$250-450 PREVPAC	<b>Hypnotics &amp; Anxiolytics</b> <b>Formulary Preferred/Tier 1</b> \$1-10 Ambien (g) (#) \$1-10 Ativan (g) \$1-10 Restoril (g) (#) \$1-10 Valium (g) \$1-10 Xanax (g) \$5-25 Buspar (g) \$5-25 ProSom (g) (#) \$5-25 Tranxene (g) \$20-40 Sonata (g) (#) \$25-45 Serax (g) \$25-85 Xanax XR (g) (#)	<b>Formulary Options/Tier 2</b> \$55-115 Humira <b>PA</b> (#)	<b>Formulary Options/Tier 2</b> \$105-170 Detrol, LA
<p>For all BCN members and some BCBSM members, depending on type of coverage:  <b>PA/ST:</b> May require <b>Prior Authorization</b> or <b>Step Therapy</b>. Member must meet clinical criteria for approval. Please refer to our Web site at: <a href="http://bcbsm.com/providers">bcbsm.com/providers</a>.  <b>(#):</b> Quantity limits may apply. Visit us online at: <a href="http://bcbsm.com/providers">bcbsm.com/providers</a> for more information.  <b>For BCBSM/BCN Prior Authorization, call 800-437-3803.</b>            Non-Formulary (Tier 3) medications are not included on this list.  <b>(g)</b> Indicates Generic Equivalent</p>			

This is not a complete formulary listing. Please visit our Web site to view the complete BCBSM/BCN Custom Formulary. It can also be downloaded from [epocrates.com](http://epocrates.com). Select ePrescribing vendors may offer BCBSM/BCN Custom Formulary information - check with your technology vendor for availability. Cost ranges reflect actual BCBSM and BCN claims data and are exclusive of rebate and copayment amounts. January 2010