

Ultra Protector Series
Prescription Drug
Guide

2013 Edition



Prescription Drug Guide

This Prescription Drug Guide is used in conjunction with America's underwriting guidelines and does not reflect the full underwriting standards of America or all prescription drugs considered by America. This Guide provides a list of common drugs, their uses, and eligible Ultra Protector products available to an applicant taking one of the listed drugs. America products listed below under the Benefit Eligibility column are not a guarantee of policy issuance, and prescription drug combinations may result in ineligibility. Further, any prescription drug used in combination with a related or unrelated medical condition could result in ineligibility. Each application is reviewed based on the circumstances and conditions represented therein and may involve additional requirements. Both this Guide and the full underwriting guidelines used by America are subject to change. **Note: The brand name drug is in ALL CAPS and its generic equivalent is next to it in lowercase letters. This guide allows you to search either by generic or brand name.**

Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
A/B OTIC	Ear pain	any	UP1
abacavir (ZIAGEN)	HIV/AIDS	any	UP3
abacavir/lamivudine (EPZICOM)	HIV/AIDS	any	UP3
ABILIFY (aripiprazole)	Psychotic disorders	any	UP1
ABSORBINE ARTHRITIS	Topical arthritis pain treatment	any	UP1
ABSTRAL (fentanyl) sublingual tablets	Cancer pain	3 years	UP3
acamprosate (CAMPRAL)	Alcohol dependency treatment	2 years	UP3
acarbose (PRECOSE)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
ACCOLATE (zafirlukast)	Asthma	any	UP1
ACCUNEB (albuterol)	Asthma	any	UP1
ACCUPRIL (quinapril)	Hypertension	any	UP1
ACCUZYME (papain and urea)	Dermatological treatment	any	UP1
acebutolol HCl (SECTRAL)	Hypertension	any	UP1
acebutolol HCl (SECTRAL)	Arrhythmia	any	UP3
ACEON (perindopril)	Hypertension	any	UP1
ACEON (perindopril)	Coronary artery disease	12 months/2 years	UP3/UP2
acetaminophen with codeine #3 (TYLENOL WITH CODEINE #3)	Pain relief - narcotic	any	UP1
ACETASOL HC (acetic acid w/hydrocortisone)	External ear infection	any	UP1
acetazolamide (DIAMOX)	Congestive heart failure	any	UP3
acetazolamide (DIAMOX)	Seizures	any	UP1
acetazolamide (DIAMOX)	Mountain sickness	any	UP1
acetazolamide (DIAMOX)	Glaucoma	any	UP1
ACETIC ACID	External ear infection	any	UP1
acetic acid/aluminum acetate (DOMEBORO)	External ear infection	any	UP1
acetic acid/hydrocortisone (ACETASOL HC)	External ear infection	any	UP1
acetylcysteine (MUCOMYST)	Emphysema	any	UP2
acetylcysteine (MUCOMYST)	Tuberculosis	any	UP2
acetylcysteine (MUCOMYST)	Pneumonia/bronchitis	any	UP1
acetylcysteine (MUCOMYST)	Cystic fibrosis	any	UP2
ACLOVATE (alclometasone dipropionate)	Dermatological treatment	any	UP1
ACTIGALL (ursodiol)	Gallstones	any	UP1
ACTIGALL (ursodiol)	Liver cirrhosis	2 years	UP2
ACTIQ (fentanyl citrate) lozenge	Cancer pain	3 years	UP3
ACTIVEVILLA (estradiol/norethindrone)	Menopausal symptoms	any	UP1
ACTONEL (risedronate)	Osteoporosis	any	UP1

Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
ACTOPLUS MET (metformin and pioglitazone)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
ACTOS (pioglitazone)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
ACULAR LS	Eye drops	any	UP1
acyclovir (ZOVIRAX)	Shingles/chickenpox/genital herpes	any	UP1
ADALAT (nifedipine)	Hypertension	any	UP1
adalimumab (HUMIRA)	Rheumatoid arthritis/juvenile psoriatic arthritis	any	UP1
adalimumab (HUMIRA)	Crohn's disease	any	UP1
adalimumab (HUMIRA)	Ankylosing spondylitis	any	UP1
adalimumab (HUMIRA)	Plaque psoriasis	any	UP1
ADDERALL (dextroamphetamine/amphetamine)	ADHD/narcolepsy	any	UP1
adefovir (HEPSERA)	Hepatitis B	2 years	UP2
ADVAIR DISKUS (fluticasone propionate/salmeterol)	Asthma	any	UP1
ADVAIR DISKUS (fluticasone propionate/salmeterol)	Chronic obstructive pulmonary disease (COPD)	any	UP2
ADVICOR (niacin/lovastatin)	Elevated cholesterol	any	UP1
AEROBID (flunisolide)	Asthma	any	UP1
AFEDITAB (nifedipine)	Hypertension	any	UP1
AGGRENOX (aspirin/dipyridamole)	Stroke/TIA	2 years	UP3
AGRYLIN (anagrelide HCl)	Cancer	3 years	UP3
albuterol (ACCUNEB, PROAIR HFA, PROVENTIL, VENTOLIN)	Asthma	any	UP1
albuterol/ipratropium (COMBIVENT, DUONEB)	Chronic obstructive pulmonary disease (COPD)	any	UP2
alclometasone dipropionate (ACLOVATE)	Dermatological treatment	any	UP1
ALDACTAZIDE (hydrochlorothiazide/spironolactone)	Hypertension	any	UP1
ALDACTAZIDE (hydrochlorothiazide/spironolactone)	Liver cirrhosis	2 years	UP2
ALDACTAZIDE (hydrochlorothiazide/spironolactone)	Congestive heart failure	any	UP3
ALDACTAZIDE (hydrochlorothiazide/spironolactone)	Kidney disease	any	UP3
ALDACTONE (spironolactone)	Hyperaldosteronism/low potassium	any	UP1
ALDACTONE (spironolactone)	Hypertension	any	UP1
ALDACTONE (spironolactone)	Liver cirrhosis	2 years	UP2
ALDACTONE (spironolactone)	Congestive heart failure	any	UP3
ALDACTONE (spironolactone)	Kidney disease	any	UP3
ALDARA (imiquimod)	Dermatological treatment	any	UP1
ALDOMET (methyldopa)	Hypertension	any	UP1
ALINIA	Gastrointestinal infection	any	UP1
aliskiren (TEKTURNA)	Hypertension	any	UP1
aliskiren/hydrochlorothiazide (TEKTURNA HCT)	Hypertension	any	UP1
ALLOPURINOL	Gout	any	UP1
ALLOPURINOL	Cancer treatment-related uric acid elevation	3 years	UP3
ALPHAGAN (brimonidine tartrate)	Glaucoma	any	UP1
ALPRAZOLAM	Anxiety/panic disorder	any	UP1
ALTABAX	Dermatological treatment	any	UP1
ALTACE (ramipril)	Hypertension	any	UP1

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Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
ALTACE (ramipril)	Congestive heart failure	any	UP3
ALTOCOR (lovastatin)	Elevated cholesterol	any	UP1
ALTOPREV (lovastatin)	Elevated cholesterol	any	UP1
ALUPENT (metaproterenol sulfate)	Asthma	any	UP1
ALUPENT (metaproterenol sulfate)	Emphysema	any	UP2
amantadine HCl (SYMMETREL)	Parkinson's disease	2 years	UP2
amantadine HCl (SYMMETREL)	Drug-induced movement disorders	any	UP1
AMARYL (glimepiride)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
AMBIEN (zolpidem tartrate)	Insomnia	any	UP1
AMCINONIDE	Dermatological treatment	any	UP1
AMDRY-D	Cough/cold/allergies	any	UP1
amiloride (MIDAMOR)	Congestive heart failure	any	UP3
amiloride (MIDAMOR)	Hypertension	any	UP1
AMINOPHYLLINE	Asthma	any	UP1
AMINOPHYLLINE	Emphysema/chronic obstructive pulmonary disease (COPD)	any	UP2
amiodarone (CORDARONE, PACERONE)	Heart arrhythmia	any	UP3
AMITIZA (lubiprostone)	Constipation	any	UP1
AMITRIPTYLINE HCl	Depression	any	UP1
amlodipine (NORVASC)	Hypertension	any	UP1
amlodipine (NORVASC)	Coronary artery disease	12 months/2 years	UP3/UP2
amlodipine/atorvastatin (CADUET)	Hypertension	any	UP1
amlodipine/atorvastatin (CADUET)	Coronary artery disease	12 months/2 years	UP3/UP2
amlodipine/benazepril (LOTREL)	Hypertension	any	UP1
amlodipine/olmesartan (AZOR)	Hypertension	any	UP1
amlodipine/valsartan (EXFORGE)	Hypertension	any	UP1
ammonium lactate (LAC-HYDRIN)	Dermatological treatment	any	UP1
AMOXICILLIN	Antibiotic	any	UP1
amoxicillin/potassium clavulanate (AUGMENTIN)	Antibiotic	any	UP1
AMPHOTERICIN B	Antifungal treatment	any	UP1
AMPICILLIN	Antibiotic	any	UP1
ANAFRANIL (clomipramine HCl)	Obsessive compulsive disorder	any	UP1
anagrelide HCl (AGRYLIN)	Cancer	3 years	UP3
ANAPLEX DMX	Cough/cold/allergies	any	UP1
anastrozole (ARIMIDEX)	Cancer	3 years	UP3
ANDROGEL	Testosterone replacement	any	UP1
ANEMAGEN	Iron supplementation	any	UP1
ANIMI-3	Vitamin supplement	any	UP1
ANTABUSE	Alcohol dependency treatment	2 years	UP3
ANTARA (fenofibrate)	Elevated cholesterol/triglycerides	any	UP1
ANUCORT-HC	Hemorrhoidal treatment	any	UP1
APEXICON E	Dermatological treatment	any	UP1
APIDRA (insulin glulisine)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
APLENZIN (bupropion)	Depression	any	UP1

Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
aprepitant (EMEND)	Nausea/vomiting prevention pre-SURGERY	any	UP1
aprepitant (EMEND)	Nausea/vomiting prevention pre-CHEMOTHERAPY	3 years	UP3
APRESOLINE (hydralazine HCl)	Hypertension	any	UP1
ARAVA (leflunomide)	Rheumatoid arthritis	any	UP1
AREDIA (pamidronate)	Cancer	3 years	UP3
AREDIA (pamidronate)	Paget's bone disease	any	UP1
arformoterol inhalation (BROVANA)	Chronic obstructive pulmonary disease (COPD)	any	UP2
ARICEPT (donepezil)	Alzheimer's disease	any	UP3
ARIMIDEX (anastrozole)	Cancer	3 years	UP3
aripiprazole (ABILIFY)	Psychotic disorders	any	UP1
ARIXTRA (fondaparinux sodium)	Presurgical PREVENTION of blood clot	any	UP1
ARIXTRA (fondaparinux sodium)	Treatment of blood clot	2 years	UP3
ARIXTRA (fondaparinux sodium)	Treatment of pulmonary embolism (clot)	2 years	UP3
ARMOUR THYROID	Thyroid replacement	any	UP1
AROMASIN (exemestane)	Cancer	3 years	UP3
ARTANE (trihexyphenidyl)	Parkinson's disease	2 years	UP2
ARTHROTEC 75	Pain relief - anti-inflammatory	any	UP1
ASACOL (mesalamine)	Ulcerative colitis	any	UP1
ASCOMP/CODEINE	Tension headache	any	UP1
ASMANEX	Asthma	any	UP1
ASPIRIN/CODEINE	Pain relief	any	UP1
aspirin/dipyridamole (AGGRENOX)	Stroke/TIA	2 years	UP3
ASTELIN (azelastine)	Nasal spray	any	UP1
ATACAND (candesartan)	Hypertension	any	UP1
ATACAND (candesartan)	Congestive heart failure	any	UP3
ATACAND HCT (candesartan/hydrochlorothiazide)	Hypertension	any	UP1
atazanavir (REYATAZ)	HIV-related anemia	any	UP3
atenolol (TENORMIN)	Hypertension	any	UP1
atenolol (TENORMIN)	Angina	12 months/2 years	UP3/UP2
atenolol (TENORMIN)	Heart attack	12 months/2 years	UP3/UP2
atenolol/chlorthalidone (TENORETIC)	Hypertension	any	UP1
ATIVAN (lorazepam)	Anxiety	any	UP1
atorvastatin (LIPITOR)	Elevated cholesterol	any	UP1
ATRIPLA (efavirenz/emtricitabine/tenofovir disoproxil fumarate)	HIV/AIDS	any	UP3
ATROPINE SULFATE	Eye drops	any	UP1
ATROVENT HFA (ipratropium bromide HFA)	Chronic obstructive pulmonary disease (COPD)/emphysema	any	UP2
ATROVENT NASAL SPRAY (ipratropium bromide nasal spray)	Allergic and non-allergic nasal symptoms	any	UP1
ATUSS DS	Cough/cold/allergies	any	UP1
AUGMENTED BETAMETHASONE DIPROPIONATE	Dermatological treatment	any	UP1
AUGMENTIN (amoxicillin/potassium clavulanate)	Antibiotic	any	UP1

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Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
AVALIDE (irbesartan/hydrochlorothiazide)	Hypertension	any	UP1
AVANDAMET (metformin/rosiglitazone)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
AVANDARYL (glimepiride/rosiglitazone)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
AVANDIA (rosiglitazone)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
AVAPRO (irbesartan)	Hypertension	any	UP1
AVAPRO (irbesartan)	Diabetic kidney disease	any	UP3
AVELOX (moxifloxacin)	Antibiotic	any	UP1
AVINZA (morphine sulfate)	Moderate to severe pain	any	UP1
AVODART (dutasteride)	Benign prostatic hypertrophy	any	UP1
AVONEX (interferon beta-1 a)	Multiple sclerosis	any	UP1
AXID (nizatidine)	Ulcers/esophagitis	any	UP1
AZASAN (azathioprine)	Kidney transplant rejection prevention	any	UP3
AZASAN (azathioprine)	Rheumatoid arthritis	any	UP1
AZASITE	Ophthalmic agent	any	UP1
azathioprine (IMURAN, AZASAN)	Kidney transplant rejection prevention	any	UP3
azathioprine (IMURAN, AZASAN)	Rheumatoid arthritis	any	UP1
azelastine (ASTELIN)	Nasal spray	any	UP1
AZELEX	Dermatological treatment	any	UP1
AZILECT (rasagiline)	Parkinson's disease	2 years	UP2
AZITHROMYCIN	Antibiotic	any	UP1
AZMACORT (triamcinolone oral inhalation)	Asthma	any	UP1
AZOPT	Ophthalmic agent	any	UP1
AZOR (amlodipine/olmesartan)	Hypertension	any	UP1
BACITRACIN	Dermatological treatment	any	UP1
BACITRACIN/POLYMYXIN B	Ophthalmic agent	any	UP1
BACLOFEN	Muscular sclerosis	any	UP1
BACLOFEN	Spasticity from spinal cord injury	any	UP3 (if paralyzed)
BACTROBAN	Dermatological antibiotic	any	UP1
BACTROBAN NASAL	Nasal infection	any	UP1
BARACLUDE (entecavir)	Hepatitis B	2 years	UP2
beclomethasone (QVAR)	Asthma	any	UP1
BECONASE AQ	Nasal agent	any	UP1
BELLADONNA ALKALOIDS/PHENOBARBITAL	Ulcers	any	UP1
benazepril HCl (LOTENSIN)	Hypertension	any	UP1
BENICAR HCT (olmesartan)	Hypertension	any	UP1
BENTYL (dicyclomine)	Irritable bowel syndrome	any	UP1
BENZACLIN	Dermatological treatment	any	UP1
BENZONATATE	Cough/cold/allergies	any	UP1
benztropine mesylate (COGENTIN)	Parkinson's disease	2 years	UP2
BEPREVE	Ophthalmic agent	any	UP1
BETAMETHASONE DIPROPIONATE	Dermatological treatment	any	UP1
BETAPACE (sotalol)	Heart arrhythmia	any	UP3

Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
BETHANECHOL CHLORIDE	Urinary spasm/retention	any	UP1
BETIMOL	Ophthalmic agent	any	UP1
BETOPTIC-S	Eye drops	any	UP1
BIAXIN XL	Antibiotic	any	UP1
bicalutamide (CASODEX)	Cancer	3 years	UP3
BICILLIN LA	Antibiotic	any	UP1
BIDIL (isosorbide dinitrate and hydralazine hydrochloride)	Congestive heart failure	any	UP3
BILTRICIDE	Worm infection	any	UP1
BIONECT	Dermatological treatment	any	UP1
BISACODYL EC	Constipation	any	UP1
BISMATROL	Diarrhea	any	UP1
BISOPROLOL FUMARATE	Hypertension	any	UP1
BISOPROLOL FUMARATE/HCTZ	Hypertension	any	UP1
BLEPHAMIDE	Eye drops	any	UP1
BONIVA (ibandronate)	Osteoporosis	any	UP1
BOTOX (onabotulinumtoxinA)	Spasticity/multiple indications	any	UP1
BRETHINE (terbutaline)	Asthma/bronchitis	any	UP1
BRETHINE (terbutaline)	Emphysema	any	UP2
BRICANYL (terbutaline)	Asthma/bronchitis	any	UP1
BRICANYL (terbutaline)	Emphysema	any	UP2
brimonidine tartrate (ALPHAGAN)	Glaucoma	any	UP1
BROMETANE DX	Cough/cold/allergies	any	UP1
BROVANA (arformoterol inhalation)	Chronic obstructive pulmonary disease (COPD)	any	UP2
BUDEPRION (bupropion)	Depression	any	UP1
budesonide/formoterol (SYMBICORT)	Asthma	any	UP1
budesonide/formoterol (SYMBICORT)	Chronic obstructive pulmonary disease (COPD)	any	UP2
bumetanide (BUMEX)	Congestive heart failure	any	UP3
bumetanide (BUMEX)	Liver disease	2 years	UP2
bumetanide (BUMEX)	Kidney disease	any	UP3
BUMEX (bumetanide)	Congestive heart failure	any	UP3
BUMEX (bumetanide)	Liver disease	2 years	UP2
BUMEX (bumetanide)	Kidney disease	any	UP3
BUPROBAN (bupropion)	Smoking cessation	12 months	Smoking rates (UP1)
bupropion (APLENZIN, BUDEPRION, FORFIVO, WELLBUTRIN)	Depression	any	UP1
bupropion (BUPROBAN, ZYBAN)	Smoking cessation	12 months	Smoking rates (UP1)
BUSPAR (buspirone HCl)	Anxiety	any	UP1
buspirone HCl (BUSPAR)	Anxiety	any	UP1
BUTALBITAL/ACETAMINOPHEN/CAFFEINE/CODEINE	Tension headache	any	UP1
BUTORPHANOL TARTRATE	Pain relief	any	UP1
BYETTA (exenatide)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
BYSTOLIC (nebivolol)	Hypertension	any	UP1
CABERGOLINE	Hyperprolactinemic disorders	any	UP1

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Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
CADUET (amlodipine besylate, atorvastatin calcium)	Hypertension	any	UP1
CADUET (amlodipine besylate, atorvastatin calcium)	Coronary artery disease	12 months/2 years	UP3/UP2
CALAMINE	Dermatological treatment	any	UP1
CALAN (verapamil)	Hypertension	any	UP1
CALAN (verapamil)	Angina	12 months/2 years	UP3/UP2
CALAN (verapamil)	Arrhythmia	any	UP3
CALCIFOLIC-D	Mineral/electrolyte replacement	any	UP1
calcitonin (MIACALCIN)	Osteoporosis	any	UP1
calcitonin (MIACALCIN)	Paget's bone disease	any	UP1
calcitriol (ROCALTROL)	Calcium replacement in PRIMARY parathyroid disease	any	UP1
calcitriol (ROCALTROL)	Kidney failure	any	UP3
CALCIUM ACETATE	Hyperphosphatemia in kidney failure	any	UP3
CALCIUM CARBONATE	Antacid	any	UP1
CALCIUM/VITAMIN D	Vitamin/mineral supplement	any	UP1
CAL-NATE	Vitamin supplement	any	UP1
CAMPRAL (acamprosate)	Alcohol dependency treatment	2 years	UP3
candesartan (ATACAND)	Hypertension	any	UP1
candesartan (ATACAND)	Congestive heart failure	any	UP3
candesartan hydrochlorothiazide (ATACAND HCT)	Hypertension	any	UP1
capecitabine (XELODA)	Cancer	3 years	UP3
CAPOTEN (captopril)	Hypertension	any	UP1
CAPOTEN (captopril)	Congestive heart failure	any	UP3
CAPOTEN (captopril)	Diabetic kidney disease	any	UP3
CAPOZIDE (captopril/hydrochlorothiazide)	Hypertension	any	UP1
captopril (CAPOTEN)	Hypertension	any	UP1
captopril (CAPOTEN)	Congestive heart failure	any	UP3
captopril (CAPOTEN)	Diabetic kidney disease	any	UP3
captopril/hydrochlorothiazide (CAPOZIDE)	Hypertension	any	UP1
CARAC	Dermatological treatment	any	UP1
carbamazepine (CARBATROL, TEGRETOL)	Epilepsy	any	UP1
carbamazepine (CARBATROL, TEGRETOL)	Facial nerve disorder	any	UP1
CARBATROL (carbamazepine)	Epilepsy	any	UP1
CARBATROL (carbamazepine)	Facial nerve disorder	any	UP1
CARBATUSS-CL	Cough/cold/allergies	any	UP1
carbidopa/levodopa (SINEMET)	Parkinson's disease	2 years	UP2
CARDIZEM (diltiazem)	Hypertension	any	UP1
CARDIZEM (diltiazem)	Angina	12 months/2 years	UP3/UP2
CARDOXIN (digoxin)	Heart failure	any	UP3
CARDURA (doxazosin mesylate)	Benign prostatic hypertrophy	any	UP1
CARDURA (doxazosin mesylate)	Hypertension	any	UP1
CARISOPRODOL	Muscular pain	any	UP1
CARISOPRODOL/ASPIRIN	Muscular pain	any	UP1
CARTIA XT (diltiazem)	Hypertension	any	UP1
CARTIA XT (diltiazem)	Angina	12 months/2 years	UP3/UP2
carvedilol (COREG)	Hypertension	any	UP1

Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
carvedilol (COREG)	Congestive heart failure	any	UP3
CASODEX (bicalutamide)	Cancer	3 years	UP3
CATAFLAM (diclofenac)	Pain relief - anti-inflammatory	any	UP1
CATAPRES (clonidine HCl)	Hypertension	any	UP1
CAVERJECT (alprostadil)	Erectile dysfunction	any	UP1
CEDAX	Antibiotic	any	UP1
CEFACLOR	Antibiotic	any	UP1
CEFADROXIL	Antibiotic	any	UP1
CEFPODOXIME PROXETIL	Antibiotic	any	UP1
CEFTRIAZONE SODIUM	Antibiotic	any	UP1
CEFUROXIME AXETIL	Antibiotic	any	UP1
CEFZIL	Antibiotic	any	UP1
CELEBREX (celecoxib)	Pain relief - anti-inflammatory	any	UP1
celecoxib (CELEBREX)	Pain relief - anti-inflammatory	any	UP1
CELESTONE	Multiple indications - corticosteroid	any	UP1
CELEXA (citalopram hydrobromide)	Depression	any	UP1
CELLCEPT (mycophenolate)	Organ transplant rejection prevention	any	UP3
CELLUVISC	Eye drops	any	UP1
CELONTIN (methsuximide)	Seizures	any	UP1
CENESTIN	Menopausal symptoms	any	UP1
CEPHADYN	Pain relief - nonnarcotic	any	UP1
CEPHALEXIN	Antibiotic	any	UP1
CEREFOLIN	Vitamin	any	UP1
CERON-DM	Cough/cold/allergies	any	UP1
CETAPHIL	Dermatological treatment	any	UP1
CHANTIX (varenicline)	Smoking cessation	12 months	smoking rates (UP1)
CHERATUSSIN AC	Cough/cold/allergies	any	UP1
CHLORAL HYDRATE	Insomnia	any	UP1
chlordiazepoxide (LIBRIUM)	Alcohol withdrawal	2 years	UP3
chlordiazepoxide/amitriptyline (LIMBITROL)	Depression/anxiety	any	UP1
chlordiazepoxide/clidinium (LIBRAX)	Irritable bowel syndrome	any	UP1
chlorhexidine gluconate (PERIDEX)	Antiseptic rinse	any	UP1
chloroquine phosphate	Malaria	any	UP1
chlorpheniramine/pseudoephedrine CR (DYNAHIST ER)	Cold/cough/allergies	any	UP1
chlorpromazine HCl (THORAZINE)	Schizophrenia/psychotic disorder	any	UP1
chlorthalidone (HYDONE, HYGROTON, THALITONE)	Hypertension	any	UP1
chlorthalidone (HYDONE, HYGROTON, THALITONE)	Congestive heart failure	any	UP3
chlorthalidone (HYDONE, HYGROTON, THALITONE)	Liver cirrhosis	2 years	UP2
chlorthalidone (HYDONE, HYGROTON, THALITONE)	Edema related to estrogen therapy	any	UP1
chlorzoxazone (PARAFON FORTE DSC)	Musculoskeletal pain	any	UP1
cholestyramine (QUESTRAN)	Elevated cholesterol	any	UP1
CHOLINE MAGNESIUM TRISALICYLATE	Pain relief - nonnarcotic	any	UP1
CHORIONIC GONADOTROPIN	Hormonal treatment	any	UP1
CHROMAGEN	Dietary supplement	any	UP1

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CIALIS (tadalafil)	Erectile dysfunction	any	UP1
CICLOPIROX OLAMINE	Dermatological treatment	any	UP1
cilostazol (PLETAL)	Circulatory disease	2 years	UP3
cimetidine (TAGAMET)	Heartburn	any	UP1
cinacalcet (SENSIPAR)	Primary parathyroid disease	any	UP1
cinacalcet (SENSIPAR)	Parathyroid cancer	3 years	UP3
cinacalcet (SENSIPAR)	Kidney disease	any	UP3
CIPRO (ciprofloxacin)	Antibiotic	any	UP1
CIPRODEX	External ear infection	any	UP1
ciprofloxacin HCL (CIPRO)	Antibiotic	any	UP1
citalopram hydrobromide (CELEXA)	Depression	any	UP1
CITRACAL MAXIMUM	Dietary supplement	any	UP1
CLARINEX	Cough/cold/allergies	any	UP1
CLEMASTINE FUMARATE	Antihistamine	any	UP1
CLENIA FOAMING WASH	Dermatological treatment	any	UP1
CLEOCIN (clindamycin HCl)	Antibiotic	any	UP1
clindamycin HCl (CLEOCIN)	Antibiotic	any	UP1
CLINDAMYCIN PHOSPHATE	Dermatological treatment	any	UP1
CLINDESSE	Bacterial vaginosis	any	UP1
CLOBETASOL PROPIONATE	Dermatological treatment	any	UP1
CLODERM	Dermatological treatment	any	UP1
CLOMID (clomiphene citrate)	Hormonal treatment	any	UP1
clomiphene citrate (CLOMID)	Hormonal treatment	any	UP1
clomipramine HCl (ANAFRANIL)	Obsessive compulsive disorder	any	UP1
clonazepam (KLONOPIN)	Seizures	any	UP1
clonazepam (KLONOPIN)	Panic disorder	any	UP1
clonidine/chlorthalidone (CLORPRESS)	Hypertension	any	UP1
clonidine HCl (CATAPRES)	Hypertension	any	UP1
clopidogrel (PLAVIX)	Heart attack	12 months/2 years	UP3/UP2
clopidogrel (PLAVIX)	Stroke	2 years	UP3
clorazepate dipotassium (TRANXENE)	Anxiety disorder	any	UP1
clorazepate dipotassium (TRANXENE)	Seizures	any	UP1
clorazepate dipotassium (TRANXENE)	Alcohol withdrawal	2 years	UP3
CLORPRESS (clonidine/chlorthalidone)	Hypertension	any	UP1
clotrimazole (MYCELEX)	Fungal infection	any	UP1
CODAL-DH	Cough/cold/allergies	any	UP1
COGENTIN (benztropine mesylate)	Parkinson's disease	2 years	UP2
colchicine (COLCRYS)	Gout	any	UP1
COLCRYS (colchicine)	Gout	any	UP1
colesevelam (WELCHOL)	Elevated cholesterol	any	UP1
colesevelam (WELCHOL)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
COLESTID (colestipol)	Elevated cholesterol	any	UP1
colestipol (COLESTID)	Elevated cholesterol	any	UP1
COMBIGAN	Glaucoma	any	UP1

Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
COMBIVENT (albuterol/ipratropium)	Chronic obstructive pulmonary disease (COPD)	any	UP2
COMBIVIR (lamivudine/zidovudine)	HIV/AIDS	any	UP3
COMPRO (prochlorperazine)	Nausea/vomiting	any	UP1
COMTAN (entacapone)	Parkinson's disease	2 years	UP2
CONCERTA (methylphenidate hydrochloride)	ADHD	any	UP1
CONDYLOX	Dermatological treatment	any	UP1
COPAXONE (glatiramer)	Multiple sclerosis	any	UP1
COPEGUS (ribavirin)	Hepatitis C	2 years	UP2
CORDARONE (amiodarone)	Heart arrhythmia	any	UP3
COREG (carvedilol)	Hypertension	any	UP1
COREG (carvedilol)	Congestive heart failure	any	UP3
CORGARD (nadolol)	Hypertension	any	UP1
CORGARD (nadolol)	Angina	12 months/2 years	UP3/UP2
CORICIDIN HBP FLU	Cough/cold/allergies	any	UP1
CORZIDE (nadolol/bendroflumethiazide)	Hypertension	any	UP1
COSOPT	Glaucoma	any	UP1
COUMADIN (warfarin)	Clot prevention after heart valve placement	12 months/2 years	UP3/UP2
COUMADIN (warfarin)	Atrial fibrillation	any	UP3
COVERA-HS (verapamil)	Hypertension	any	UP1
COVERA-HS (verapamil)	Angina	12 months/2 years	UP3/UP2
COVERA-HS (verapamil)	Arrhythmia	any	UP3
COZAAR (losartan)	Hypertension	any	UP1
COZAAR (losartan)	Diabetic Kidney Disease	any	UP3 if combined with diabetes treatment within the past 2 years
CREON (pancrelipase)	Pancreatic enzyme - cystic fibrosis	2 years	UP2
CREON (pancrelipase)	Pancreatic enzyme - chronic pancreatitis	any	UP1
CREON (pancrelipase)	Pancreatic enzyme - pancreatectomy	any	UP1
CRESTOR (rosuvastatin)	Elevated cholesterol	any	UP1
CRESYLATE	External ear infection	any	UP1
CROMOLYN SODIUM	Allergies	any	UP1
CUBICIN	Skin infections	any	UP1
CYANOCOBALAMIN	Vitamin supplement	any	UP1
cyclobenzaprine (FLEXERIL)	Muscle relaxant	any	UP1
CYCLOPENTOLATE HCL	Eye drops	any	UP1
cyclophosphamide (CYTOXAN)	Cancer	3 years	UP3
cyclophosphamide (CYTOXAN)	Nephrotic syndrome (kidney disease)	any	UP3
cyclophosphamide (CYTOXAN)	Juvenile rheumatoid arthritis vasculitis	any	UP1
cyclosporine (GENGRAF)	Organ transplant rejection prevention	any	UP3
CYMBALTA (duloxetine)	Depression/anxiety	any	UP1
CYMBALTA (duloxetine)	Fibromyalgia/musculoskeletal pain	any	UP1
CYMBALTA (duloxetine)	Diabetic peripheral neuropathy pain	any	UP1
CYPROHEPTADINE HCL	Antihistamine	any	UP1
CYTOMEL (liothyronine)	Thyroid replacement	any	UP1

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Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
CYTOTEC (misoprostol)	Ulcer	any	UP1
CYTOXAN (cyclophosphamide)	Cancer	3 years	UP3
CYTOXAN (cyclophosphamide)	Nephrotic syndrome (kidney disease)	any	UP3
CYTOXAN (cyclophosphamide)	Juvenile rheumatoid arthritis vasculitis	any	UP1
CYTRA K CRYSTALS	Urinary treatment/prevention of gout/kidney stones	any	UP1
DALMANE (flurazepam)	Insomnia	any	UP1
DAPSONE	Leprosy/skin infections	any	UP1
DARVON (propoxyphene)	Pain relief - narcotic	any	UP1
DEMADEX (torsemide)	Hypertension	any	UP1
DEMADEX (torsemide)	Liver disease	2 years	UP2
DEMADEX (torsemide)	Congestive heart failure	any	UP3
DEMADEX (torsemide)	Kidney disease	any	UP3
DEMSER (metyrosine)	Pheochromocytomas	any	UP1
DEPAKOTE (divalproex sodium)	Bipolar	any	UP1
DEPAKOTE (divalproex sodium)	Epilepsy	any	UP1
DEPAKOTE (divalproex sodium)	Migraine	any	UP1
DEPLIN	Depression	any	UP1
DEPO-MEDROL	Multiple indications - corticosteroid	any	UP1
DERMATOP	Dermatological treatment	any	UP1
DERMOTIC	Ear drops	any	UP1
desipramine HCl (NORPRAMIN)	Depression	any	UP1
DESMOPRESSIN ACETATE	Hormonal treatment	any	UP1
DESONIDE	Dermatological treatment	any	UP1
DESOXIMETASONE	Dermatological treatment	any	UP1
DESYREL (trazodone)	Depression	any	UP1
DETROL LA	Urinary antispasmodic	any	UP1
DEXAMETHASONE	Multiple indications - corticosteroid	any	UP1
DEXAPHEN SA	Cough/cold/allergies	any	UP1
DEXEDRINE (dextroamphetamine)	Narcolepsy	any	UP1
DEXEDRINE (dextroamphetamine)	ADHD	any	UP1
dexmethylphenidate HCl (FOCALIN)	ADHD/narcolepsy/obesity	any	UP1
dextroamphetamine (DEXEDRINE)	Narcolepsy	any	UP1
dextroamphetamine (DEXEDRINE)	ADHD	any	UP1
dextroamphetamine/amphetamine (ADDERALL)	ADHD/narcolepsy	any	UP1
DIABETA (glyburide)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
DIAMOX (acetazolamide)	Congestive heart failure	any	UP3
DIAMOX (acetazolamide)	Seizures	any	UP1
DIAMOX (acetazolamide)	Mountain sickness	any	UP1
DIAMOX (acetazolamide)	Glaucoma	any	UP1
diazepam (VALIUM)	Anxiety disorder	any	UP1
diazepam (VALIUM)	Convulsive disorder/muscle spasms	any	UP1
diazepam (VALIUM)	Alcohol withdrawal	2 years	UP3
DIBENZYLINE	Pheochromocytoma	any	UP1
diclofenac (CATAFLAM)	Pain relief - anti-inflammatory	any	UP1

Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
DICLOXACILLIN SODIUM	Antibiotic	any	UP1
dicyclomine (BENTYL)	Irritable bowel syndrome	any	UP1
diethylpropion (TENUATE)	Obesity	any	UP1
DIFFERIN	Dermatological treatment	any	UP1
DIFLORASONE DIACETATE	Dermatological treatment	any	UP1
diflunisal (DOLOBID)	Pain relief - nonnarcotic	any	UP1
DIGITEK (digoxin)	Heart failure	any	UP3
digoxin (DIGITEK, LANOXICAPS, LANOXIN, CAR-DOXIN)	Heart failure	any	UP3
DILACOR (diltiazem)	Hypertension	any	UP1
DILACOR (diltiazem)	Angina	12 months/2 years	UP3/UP2
DILANTIN (phenytoin)	Seizures	any	UP1
diltiazem (CARTIA XT, CARDIZEM, DILACOR, TIAZAC)	Hypertension	any	UP1
diltiazem (CARTIA XT, CARDIZEM, DILACOR, TIAZAC)	Angina	12 months/2 years	UP3/UP2
DIOVAN (valsartan)	Hypertension	any	UP1
DIOVAN (valsartan)	Congestive heart failure	any	UP3
DIOVAN (valsartan)	Treatment after heart attack	12 months/2 years	UP3/UP2
DIOVAN HCT (hydrochlorothiazide/valsartan)	Hypertension	any	UP1
DIPHENHYDRAMINE HCL	Antihistamine	any	UP1
DIPHENOXYLATE/ATROPINE	Diarrhea	any	UP1
dipyridamole (PERSANTINE)	Clot prevention after valve replacement	12 months/2 years	UP3/UP2
DITROPAN XL	Urinary spasm	any	UP1
divalproex sodium (DEPAKOTE)	Bipolar	any	UP1
divalproex sodium (DEPAKOTE)	Epilepsy	any	UP1
divalproex sodium (DEPAKOTE)	Migraine	any	UP1
docetaxel (TAXOTERE)	Cancer	3 years	UP3
DOC-Q-LACE	Constipation	any	UP1
DOCUSATE CALCIUM	Constipation	any	UP1
dofetilide (TIKOSYN)	Heart arrhythmia	any	UP3
DOLOBID (diflunisal)	Pain relief - nonnarcotic	any	UP1
DOMEBORO (acetic acid/aluminum acetate)	External ear infection	any	UP1
DOMPERIDONE BP	Parkinson's disease	2 years	UP2
DOMPERIDONE BP	Nausea/vomiting	any	UP1
DONATUSSIN	Cough/cold/allergies	any	UP1
donepezil (ARICEPT)	Alzheimer's disease	any	UP3
DOVONEX	Dermatological treatment	any	UP1
doxazosin mesylate (CARDURA)	Benign prostatic hypertrophy	any	UP1
doxazosin mesylate (CARDURA)	Hypertension	any	UP1
doxepin HCl (SINEQUAN)	Depression/anxiety	any	UP1
doxercalciferol (HECTOROL)	Parathyroidism due to chronic kidney disease	any	UP3
DOXYCYCLINE	Antibiotic	any	UP1
dronabinol (MARINOL)	Appetitive stimulant in patients with AIDS	any	UP3
dronabinol (MARINOL)	Nausea and vomiting related to chemotherapy	3 years	UP3

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Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
DUAC	Dermatological treatment	any	UP1
DUET DHA	Vitamin supplement	any	UP1
DUETACT (glimepiride/pioglitazone)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
duloxetine (CYMBALTA)	Depression/anxiety	any	UP1
duloxetine (CYMBALTA)	Fibromyalgia/musculoskeletal pain	any	UP1
duloxetine (CYMBALTA)	Diabetic peripheral neuropathy pain	any	UP1
DUONEB (albuterol/ipratropium)	Chronic obstructive pulmonary disease (COPD)	any	UP2
DURAFLU	Cough/cold/allergies	any	UP1
DURAGESIC (fentanyl) patch	Continuous, persistent moderate to severe chronic pain	any	UP1
DURAGESIC (fentanyl) patch	Cancer pain	3 years	UP3
DURAHIST D	Cough/cold/allergies	any	UP1
DURAPHEN FORTE	Cough/cold/allergies	any	UP1
DUREZOL	Eye drops	any	UP1
dutasteride (AVODART)	Benign prostatic hypertrophy	any	UP1
DYAZIDE (triamterene/hydrochlorothiazide)	Hypertension	any	UP1
DYAZIDE (triamterene/hydrochlorothiazide)	Edema	any	UP1
DYNA HIST ER (chlorpheniramine/pseudoephedrine CR)	Cold/cough/allergies	any	UP1
DYNACIRC-CR (isradipine)	Hypertension	any	UP1
dyphylline/guaifenesin (DYPHYLLINE-GG)	Asthma	any	UP1
dyphylline/guaifenesin (DYPHYLLINE-GG)	Emphysema/chronic bronchitis	any	UP2
DYPHYLLINE-GG (dyphylline/guaifenesin)	Asthma	any	UP1
DYPHYLLINE-GG (dyphylline/guaifenesin)	Emphysema/chronic bronchitis	any	UP2
ECONAZOLE NITRATE	Dermatological treatment	any	UP1
ED A-HIST	Cough/cold/allergies	any	UP1
efavirenz (SUSTIVA)	HIV/AIDS	any	UP3
EFFEXOR (venlafaxine)	Depression/anxiety	any	UP1
ELDEPRYL (selegiline)	Parkinson's disease	2 years	UP2
ELESTAT	Eye drops	any	UP1
ELIDEL	Dermatological treatment	any	UP1
ELMIRON	Bladder pain	any	UP1
EMEND (aprepitant)	Nausea/vomiting prevention pre-surgery	any	UP1
EMEND (aprepitant)	Nausea/vomiting prevention pre-chemotherapy	3 years	UP3
emtricitabine/tenofovir (TRUVADA)	HIV/AIDS	any	UP3
ENABLEX	Urinary spasm	any	UP1
enalapril (VASOTEC)	Hypertension	any	UP1
enalapril (VASOTEC)	Congestive heart failure	any	UP3
enalapril/hydrochlorothiazide (VASERETIC)	Hypertension	any	UP1
ENBREL (etanercept)	Rheumatoid arthritis/psoriatic arthritis/ankylosing spondylitis	any	UP1
ENCORA	Vitamin supplement	any	UP1
ENDOMETRIN	Hormonal treatment	any	UP1
ENDURON (methyclothiazide)	Hypertension	any	UP1

Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
ENDURON (methyclothiazide)	Edema due to hormone or steroid therapy	any	UP1
ENDURON (methyclothiazide)	Liver cirrhosis	2 years	UP2
ENDURON (methyclothiazide)	Congestive heart failure	any	UP3
enoxaparin (LOVENOX)	Deep vein thrombosis (clot)	2 years	UP3
enoxaparin (LOVENOX)	Unstable angina	12 months/2 years	UP3/UP2
enoxaparin (LOVENOX)	Heart attack	12 months/2 years	UP3/UP2
entacapone (COMTAN)	Parkinson's disease	2 years	UP2
entecavir (BARACLUDE)	Hepatitis B	2 years	UP2
ENTOCORT EC	Crohn's disease	any	UP1
ENULOSE	Constipation	any	UP1
EPICREAM	Dermatological treatment	any	UP1
EPINEPHRINE HCL	Asthma	any	UP1
EPIPEN	Allergic reaction	any	UP1
EPIVIR (lamivudine)	HIV/AIDS	any	UP3
eplerenone (INSPIRA)	Hypertension	any	UP1
eplerenone (INSPIRA)	Congestive heart failure	any	UP3
epoetin alfa (PROCRIT)	Cancer-related anemia	3 years	UP3
epoetin alfa (PROCRIT)	HIV-related anemia	any	UP3
epoetin alfa (PROCRIT)	Kidney disease-related anemia	any	UP3
EPZICOM (abacavir/lamivudine)	HIV/AIDS	any	UP3
ERTACZO	Dermatological treatment	any	UP1
ERY-TAB	Antibiotic	any	UP1
ERYTHROCIN STEARATE	Antibiotic	any	UP1
escitalopram (LEXAPRO)	Depression/anxiety	any	UP1
esomeprazole (NEXIUM)	GERD/ulcers	any	UP1
ESTAZOLAM	Insomnia	any	UP1
ESTRADIOL	Hormonal treatment	any	UP1
estradiol/norethindrone (ACTIVELLA)	Menopausal symptoms	any	UP1
ESTRATEST H.S.	Hormonal treatment	any	UP1
ESTRIOL	Hormonal treatment	any	UP1
ESTROPIPATE	Hormonal treatment	any	UP1
eszopiclone (LUNESTA)	Insomnia	any	UP1
etanercept (ENBREL)	Rheumatoid arthritis/psoriatic arthritis/ankylosing spondylitis	any	UP1
ETODOLAC	Pain relief - anti-inflammatory	any	UP1
etravirine (INTELENCE)	HIV/AIDS	any	UP3
EVISTA (raloxifene)	Osteoporosis	any	UP1
EVOXAC	Dry mouth due to Sjögren's syndrome	any	UP1
EXELDERM	Dermatological treatment	any	UP1
EXELON (rivastigmine transdermal)	Alzheimer's disease/dementia	any	UP3
exemestane (AROMASIN)	Cancer	3 years	UP3
exenatide (BYETTA)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
EXFORGE (amlodipine/valsartan)	Hypertension	any	UP1
ezetimibe (ZETIA)	Elevated cholesterol	any	UP1

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Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
FACTIVE	Antibiotic	any	UP1
famciclovir (FAMVIR)	Cold sores/shingles/herpes	any	UP1
famciclovir (FAMVIR)	Herpes in HIV-infected patients	any	UP3
FAMOTIDINE	Heartburn	any	UP1
FAMVIR (famciclovir)	Cold sores/shingles/herpes	any	UP1
FAMVIR (famciclovir)	Herpes in HIV-infected patients	any	UP3
felbamate (FELBATOL)	Epilepsy	any	UP1
FELBATOL (felbamate)	Epilepsy	any	UP1
felodipine (PLENDIL)	Hypertension	any	UP1
FEMARA (letrozole)	Breast cancer/cancer remission maintenance	any	UP1
FEMHRT 1/5	Hormonal treatment	any	UP1
fenofibrate (ANTARA)	Elevated cholesterol/triglycerides	any	UP1
fenofibrate (TRICOR)	Elevated cholesterol/triglycerides	any	UP1
FENOPROFEN CALCIUM	Pain relief - anti-inflammatory	any	UP1
fentanyl citrate (ACTIQ lozenge, ABSTRAL sublingual tablets, DURAGESIC patch, FENTORA tablet, IONSYS (inpatient hospital use only), LAZANDA nasal spray, ONSOLIS buccal soluble film, SUBSYS sublingual spray)	Continuous, persistent moderate to severe chronic pain	any	UP1
fentanyl citrate (ACTIQ lozenge, ABSTRAL sublingual tablets, DURAGESIC patch, FENTORA tablet, IONSYS (inpatient hospital use only), LAZANDA nasal spray, ONSOLIS buccal soluble film, SUBSYS sublingual spray)	Cancer pain	3 years	UP3
FENTORA (fentanyl) tablet	Cancer pain	3 years	UP3
FERRALET 90	Iron supplementation	any	UP1
FERREX 150 FORTE	Iron supplementation	any	UP1
FERROGELS FORTE	Iron supplementation	any	UP1
FERROUS FUMARATE 324	Iron supplementation	any	UP1
FERROUS GLUCONATE	Iron supplementation	any	UP1
FERROUS SULFATE	Iron supplementation	any	UP1
FEXOFENADINE HCL	Antihistamine	any	UP1
filgrastim (NEUPOGEN)	Cancer	3 years	UP3
FINACEA	Dermatological treatment	any	UP1
finasteride (PROPECIA, PROSCAR)	Benign prostatic hypertrophy/male pattern baldness	any	UP1
FLAREX	Eye drops	any	UP1
FLAVOXATE HCL	Urinary spasm	any	UP1
flecainide (TAMBOCOR)	Heart arrhythmia	any	UP3
FLECTOR	Dermatological treatment	any	UP1
FLEXERIL (cyclobenzaprine)	Muscle relaxant	any	UP1
FLEXTRA-650	Pain relief - nonnarcotic	any	UP1
FLOMAX (tamsulosin)	Benign prostatic hypertrophy	any	UP1
FLORICAL	Calcium supplement	any	UP1
FLOVENT (fluticasone)	Asthma	any	UP1
FLOXIN OTIC	Ear infection	any	UP1
FLUCONAZOLE	Fungal infection	any	UP1
FLUDROCORTISONE ACETATE	Addison's disease	any	UP1

Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
flumazenil (ROMAZICON)	Drug overdose management	2 years	UP3
flunisolide (AEROBID)	Asthma	any	UP1
FLUOCINONIDE	Dermatological treatment	any	UP1
FLUOCINONIDE-E	Dermatological treatment	any	UP1
FLUOROMETHOLONE	Eye drops	any	UP1
fluoxetine (PROZAC)	Depression/OCD/panic disorder	any	UP1
fluoxetine/olanzapine (SYMBYAX)	Depression/bipolar disorder	any	UP1
fluphenazine (PROLIXIN)	Schizophrenia/psychotic disorder	any	UP1
flurazepam (DALMANE)	Insomnia	any	UP1
FLURBIPROFEN SODIUM drops	Eye drops	any	UP1
FLURBIPROFEN tablet	Rheumatoid arthritis/osteoarthritis	any	UP1
fluticasone (FLOVENT)	Asthma	any	UP1
fluticasone propionate	Allergies	any	UP1
fluticasone propionate/salmeterol (ADVAIR DISKUS)	Chronic obstructive pulmonary disease (COPD)	any	UP2
fluticasone propionate/salmeterol (ADVAIR DISKUS)	Asthma	any	UP1
fluvastatin (LESCOL)	Elevated cholesterol	any	UP1
fluvoxamine (LUVOX)	Obsessive compulsive disorder	any	UP1
FOCALIN (dexmethylphenidate HCl)	ADHD/narcolepsy/obesity	any	UP1
FOLBEE	Iron supplementation	any	UP1
FOLBIC	Vitamin supplement	any	UP1
FOLGARD OS	Vitamin supplement	any	UP1
FOLITAB	Vitamin supplement	any	UP1
FOLTRIN	Vitamin supplement	any	UP1
fondaparinux sodium (ARIXTRA)	Presurgical prevention of blood clot	any	UP1
fondaparinux sodium (ARIXTRA)	Treatment of blood clot	2 years	UP3
fondaparinux sodium (ARIXTRA)	Treatment of pulmonary embolism (clot)	2 years	UP3
FORADIL AEROLIZER (formoterol)	Asthma	any	UP1
FORADIL AEROLIZER (formoterol)	Chronic obstructive pulmonary disease (COPD)/emphysema/chronic bronchitis	any	UP2
FORFIVO (bupropion)	Depression	any	UP1
formoterol (FORADIL AEROLIZER)	Asthma	any	UP1
formoterol (FORADIL AEROLIZER)	Chronic obstructive pulmonary disease (COPD)/emphysema/chronic bronchitis	any	UP2
FORTAMET (metformin)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
FORTEO	Osteoporosis	any	UP1
FOSAMAX	Osteoporosis	any	UP1
fosinopril (MONOPRIL)	Hypertension	any	UP1
fosinopril (MONOPRIL)	Congestive heart failure	any	UP3
fosinopril/hydrochlorothiazide (MONOPRIL HCT)	Hypertension	any	UP1
FOSRENOL (lanthanum carbonate)	Kidney disease	any	UP3
FRESHKOTE	Eye drops	any	UP1
FROVA	Migraine	any	UP1
furosemide (LASIX)	Hypertension	any	UP1

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Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
furosemide (LASIX)	Congestive heart failure	any	UP3
furosemide (LASIX)	Kidney disease	any	UP3
furosemide (LASIX)	Liver disease	2 years	UP2
gabapentin (NEURONTIN)	Nerve pain	any	UP1 (UP3 if combined with diabetes treatment within the past 2 years)
gabapentin (NEURONTIN)	Epilepsy	any	UP1
GABITRIL (tiagabine)	Seizures	any	UP1
galantamine (RAZADYNE)	Alzheimer's disease	any	UP3
GAMMAGARD LIQUID	Primary immunodeficiency	any	UP1
GEMFIBROZIL	Elevated triglycerides	any	UP1
GENGRAF (cyclosporine)	Transplant rejection	any	UP3
GENTAMICIN SULFATE	Antibiotic	any	UP1
GEODON (ziprasidone)	Schizophrenia/bipolar disorder	any	UP1
glatiramer (COPAXONE)	Multiple sclerosis	any	UP1
glimepiride (AMARYL)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
glimepiride/pioglitazone (DUETACT)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
glimepiride/rosiglitazone (AVANDARYL)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
glipizide (GLUCOTROL)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
glipizide/metformin (METAGLIP)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
GLUCAGEN	Diabetes - Hypoglycemia treatment	any	UP1 (with no diabetic complications or diabetes-related illnesses)
GLUCOPHAGE (metformin)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
GLUCOTROL (glipizide)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
GLUCOVANCE (glyburide/metformin)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
GLUMETZA (metformin)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
glyburide (DIABETA, MICRONASE)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
glyburide/metformin (GLUCOVANCE)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
GLYCOLAX	Constipation	any	UP1
glycopyrrolate (ROBINUL)	Ulcers	any	UP1
GLYSET (miglitol)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
golimumab (SIMPONI)	Rheumatoid arthritis/psoriatic arthritis	any	UP1
golimumab (SIMPONI)	Ankylosing spondylitis	any	UP1
granisetron (KYTRIL)	Nausea and vomiting, postoperative	any	UP1
granisetron (KYTRIL)	Nausea and vomiting, pre-chemotherapy	3 years	UP3
GRIFULVIN V	Antifungal	any	UP1
GRIS-PEG	Antifungal	any	UP1
GUAIFENEX DM	Cough/cold/allergies	any	UP1

Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
guanfacine (INTUNIV, TENEX)	Hypertension	any	UP1
GUIADEX DM	Cough/cold/allergies	any	UP1
HALCION (triazolam)	Insomnia	any	UP1
HALDOL (haloperidol)	Schizophrenia/psychosis	any	UP1
HALDOL (haloperidol)	Tourette's disorder	any	UP1
HALOBETASOL PROPIONATE	Dermatological treatment	any	UP1
haloperidol (HALDOL)	Schizophrenia/psychosis	any	UP1
haloperidol (HALDOL)	Tourette's disorder	any	UP1
HECTOROL (doxercalciferol)	Parathyroidism due to chronic kidney disease	any	UP3
HELIDAC	Ulcers	any	UP1
HEMATINIC	Vitamin supplement	any	UP1
HEMAX	Vitamin supplement	any	UP1
HEPSERA (adefovir)	Hepatitis B	2 years	UP2
HISTA-VENT DA	Cough/cold/allergies	any	UP1
HISTINEX HC	Cough/cold/allergies	any	UP1
HUMALOG (insulin)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
HUMIRA (adalimumab)	Rheumatoid arthritis/juvenile psoriatic arthritis	any	UP1
HUMIRA (adalimumab)	Crohn's disease	any	UP1
HUMIRA (adalimumab)	Ankylosing spondylitis	any	UP1
HUMIRA (adalimumab)	Plaque psoriasis	any	UP1
HUMULIN (insulin)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
HYALGAN	Osteoarthritis	any	UP1
HYDONE (chlorthalidone)	Hypertension	any	UP1
HYDONE (chlorthalidone)	Congestive heart failure	any	UP3
HYDONE (chlorthalidone)	Liver cirrhosis	2 years	UP2
HYDONE (chlorthalidone)	Edema related to estrogen therapy	any	UP1
hydralazine (APRESOLINE)	Hypertension	any	UP1
HYDREA (hydroxyurea)	Cancer	3 years	UP3
HYDREA (hydroxyurea)	Essential thrombocytopenia	any	UP1
hydrochlorothiazide	Hypertension	any	UP1
hydrochlorothiazide/losartan (HYZAAR)	Hypertension	any	UP1
hydrochlorothiazide/losartan (HYZAAR)	Left ventricular hypertrophy	any	UP1
hydrochlorothiazide/moexipril (UNIRETIC)	Hypertension	any	UP1
hydrochlorothiazide/spironolactone (ALDACTAZIDE)	Hypertension	any	UP1
hydrochlorothiazide/spironolactone (ALDACTAZIDE)	Liver cirrhosis	2 years	UP2
hydrochlorothiazide/spironolactone (ALDACTAZIDE)	Congestive heart failure	any	UP3
hydrochlorothiazide/spironolactone (ALDACTAZIDE)	Kidney disease	any	UP3
hydrochlorothiazide/telmisartan (MICARDIS)	Hypertension	any	UP1
hydrochlorothiazide/valsartan (DIOVAN HCT)	Hypertension	any	UP1
HYDROCODONE BITARTRATE	Cough/cold/allergies	any	UP1
HYDROCODONE/ACETAMINOPHEN	Pain relief - narcotic	any	UP1
HYDROCODONE/GUAIFENESIN	Cough syrup	any	UP1
HYDROCODONE/HOMATROPINE	Cough syrup	any	UP1

Prescription Drug Guide

Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
HYDROCODONE/IBUPROFEN	Pain relief - narcotic	any	UP1
HYDROCORTISONE	Dermatological treatment	any	UP1
HYDRO-DP	Cough/cold/allergies	any	UP1
HYDROMORPHONE HCL	Pain relief - narcotic	any	UP1
HYDRON PSC	Cough/cold/allergies	any	UP1
HYDROQUINONE	Dermatological treatment	any	UP1
HYDRO-TUSSIN	Cough syrup	any	UP1
HYDROXYCHLOROQUINE SULFATE	Malaria	any	UP1
hydroxyurea (HYDREA)	Cancer	3 years	UP3
hydroxyurea (HYDREA)	Essential thrombocytopenia	any	UP1
HYDROXYZINE HCL	Anxiety	any	UP1
HYDROXYZINE HCL	Itching due to allergies	any	UP1
HYGROTON (chlorthalidone)	Hypertension	any	UP1
HYGROTON (chlorthalidone)	Congestive heart failure	any	UP3
HYGROTON (chlorthalidone)	Liver cirrhosis	2 years	UP2
HYGROTON (chlorthalidone)	Edema related to estrogen therapy	any	UP1
HYOSCYAMINE SULFATE ER	Ulcers	any	UP1
HYTRIN (terazosin)	Benign prostatic hypertrophy	any	UP1
HYZAAR (hydrochlorothiazide/losartan)	Hypertension	any	UP1
HYZAAR (hydrochlorothiazide/losartan)	Left ventricular hypertrophy	any	UP1
ibandronate (BONIVA)	Osteoporosis	any	UP1
imipramine (TOFRANIL)	Depression	any	UP1
imiquimod (ALDARA)	Dermatological treatment	any	UP1
IMITREX (sumatriptan)	Migraine	any	UP1
IMURAN (azathioprine)	Kidney transplant rejection prevention	any	UP3
IMURAN (azathioprine)	Rheumatoid arthritis	any	UP1
indapamide (LOZOL)	Hypertension	any	UP1
indapamide (LOZOL)	Congestive heart failure	any	UP3
INDERAL (propranolol)	Hypertension	any	UP1
INDERAL (propranolol)	Migraine	any	UP1
INDERAL (propranolol)	Angina	12 months/2 years	UP3/UP2
INDERAL (propranolol)	Hypertrophic subaortic stenosis (cardiomyopathy)	any	UP3
INDOCIN (indomethacin)	Rheumatoid arthritis	any	UP1
indomethacin (INDOCIN)	Rheumatoid arthritis	any	UP1
INSPIRA (eplerenone)	Hypertension	any	UP1
INSPIRA (eplerenone)	Congestive heart failure	any	UP3
insulin glulisine (APIDRA)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
INTELENCE (etravirine)	HIV/AIDS	any	UP3
interferon alfa-2b (INTRON)	Cancer	3 years	UP3
interferon alfa-2b (INTRON)	Hepatitis C	2 years	UP2
interferon alfa-2b (INTRON)	AIDS-related Kaposi's sarcoma	any	UP3
interferon alfa-2b (INTRON)	Genital warts	any	UP1
Interferon beta-1a (AVONEX, REBIF)	Multiple sclerosis	any	UP1
INTRON-A (interferon alfa-2b)	Cancer	3 years	UP3

Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
INTRON-A (interferon alfa-2b)	Hepatitis C	2 years	UP2
INTRON-A (interferon alfa-2b)	AIDS-related Kaposi's sarcoma	any	UP3
INTRON-A (interferon alfa-2b)	Genital warts	any	UP1
INTUNIV (guanfacine)	Hypertension	any	UP1
INVEGA (paliperidone)	Schizophrenia	any	UP1
IONSYS (fentanyl) HOSPITAL USE ONLY	Continuous, persistent moderate to severe chronic pain	any	UP1
ipratropium bromide HFA (ATROVENT HFA)	Chronic obstructive pulmonary disease (COPD)/emphysema	any	UP2
ipratropium bromide nasal spray (ATROVENT NASAL SPRAY)	Allergic and non-allergic nasal symptoms		
IQUIX	Eye drops	any	UP1
irbesartan (AVAPRO)	Hypertension	any	UP1
irbesartan (AVAPRO)	Diabetic kidney disease	any	UP3
irbesartan and hydrochlorothiazide (AVALIDE)	Hypertension	any	UP1
ISOMETHEPTENE/DICHLORALPHENAZONE/ACETAMINOPHEN	Migraine	any	UP1
isoniazid (NYDRAZID)	Tuberculosis	2 years	UP2
ISOPTIN (verapamil)	Hypertension	any	UP1
ISOPTIN (verapamil)	Angina	12 months/2 years	UP3/UP2
ISOPTIN (verapamil)	Arrhythmia	any	UP3
ISOPTO HOMATROPINE	Eye drops	any	UP1
ISORDIL (isosorbide)	Angina	12 months/2 years	UP3/UP2
isosorbide (ISORDIL)	Angina	12 months/2 years	UP3/UP2
isosorbide dinitrate and hydralazine hydrochloride (BIDIL)	Congestive heart failure	any	UP3
isradipine (DYNACIRC-CR)	Hypertension	any	UP1
JALYN	Benign prostatic hypertrophy	any	UP1
JANUMET (metformin/sitagliptin)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
JANUVIA (sitagliptin)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
KALETRA (lopinavir/ritonavir)	HIV/AIDS	any	UP3
KAPIDEX	Esophagitis/heartburn/GERD	any	UP1
KENALOG-40	Multiple indications - corticosteroid	any	UP1
KEPPRA (levetiracetam)	Epilepsy	any	UP1
KEROL	Dermatological treatment	any	UP1
KETOCONAZOLE	Fungal infection	any	UP1
KETOPROFEN	Pain relief - anti-inflammatory	any	UP1
KETOROLAC TROMETHAMINE	Seasonal allergic symptoms	any	UP1
KLARON	Dermatological treatment	any	UP1
KLONOPIN (clonazepam)	Seizures	any	UP1
KLONOPIN (clonazepam)	Panic disorder	any	UP1
KLOR-CON 10	Potassium supplementation	any	UP1
KYTRIL (granisetron)	Nausea and vomiting, postoperative	any	UP1
KYTRIL (granisetron)	Nausea and vomiting, pre-chemotherapy	3 years	UP3
labetalol (NORMODYNE, TRANDATE)	Hypertension	any	UP1

Prescription Drug Guide

Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
LAC-HYDRIN (ammonium lactate)	Dermatological treatment	any	UP1
LACTULOSE	Constipation	any	UP1
LAMICTAL (lamotrigine)	Epilepsy	any	UP1
LAMICTAL (lamotrigine)	Bipolar disorder	any	UP1
LAMISIL	Fungal infection	any	UP1
lamivudine (EPIVIR)	HIV/AIDS	any	UP3
lamivudine/zidovudine (COMBIVIR)	HIV/AIDS	any	UP3
lamotrigine (LAMICTAL)	Epilepsy	any	UP1
lamotrigine (LAMICTAL)	Bipolar disorder	any	UP1
LANOXICAPS (digoxin)	Heart failure	any	UP3
LANOXIN (digoxin)	Heart failure	any	UP3
lansoprazole (PREVACID)	Ulcers	any	UP1
lanthanum carbonate (FOSRENOL)	Kidney disease	any	UP3
LANTUS (insulin)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
LASIX (furosemide)	Hypertension	any	UP1
LASIX (furosemide)	Congestive heart failure	any	UP3
LASIX (furosemide)	Kidney disease	any	UP3
LASIX (furosemide)	Liver disease	2 years	UP2
LAZANDA (fentanyl) nasal spray	Cancer pain	3 years	UP3
leflunomide (ARAVA)	Rheumatoid arthritis	any	UP1
lenalidomide (REVLIMID)	Cancer	3 years	UP1
LESCOL (fluvastatin)	Elevated cholesterol	any	UP1
letrozole (FEMARA)	Breast cancer/cancer remission maintenance	any	UP1
LEUCOVORIN CALCIUM	Cancer	3 years	UP3
LEVAQUIN	Antibiotic	any	UP1
LEVEMIR FLEXPEN (insulin)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
levetiracetam (KEPPRA)	Epilepsy	any	UP1
LEVITRA	Erectile dysfunction	any	UP1
LEVOBUNOLOL HCL	Eye drops	any	UP1
LEXAPRO (escitalopram)	Depression/anxiety	any	UP1
LIBRAX (chlordiazepoxide/clidinium)	Irritable bowel syndrome	any	UP1
LIBRIUM (chlordiazepoxide HCl)	Alcohol withdrawal	2 years	UP3
LIDODERM	Dermatological treatment	any	UP1
LIMBITROL (chlordiazepoxide/amitriptyline)	Depression/anxiety	any	UP1
LIMBREL	Osteoarthritis	any	UP1
LINCOCIN	Antibiotic	any	UP1
liothyronine (CYTOMEL)	Thyroid replacement	any	UP1
LIPITOR (atorvastatin)	Elevated cholesterol	any	UP1
LIQUITEARS	Eye drops	any	UP1
liraglutide (VICTOZA)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
lisinopril (PRINIVIL, ZESTRIL)	Hypertension	any	UP1
lisinopril (PRINIVIL, ZESTRIL)	Congestive heart failure	any	UP3
lisinopril (PRINIVIL, ZESTRIL)	Heart attack	12 months/2 years	UP3/UP2

Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
lisinopril/hydrochlorothiazide (PRINZIDE, ZESTORETIC)	Hypertension	any	UP1
LITHIUM CARBONATE	Bipolar disorder	any	UP1
LOCOID LIPOCREAM	Dermatological treatment	any	UP1
LODRANE 24D	Cough/cold/allergies	any	UP1
LOPERAMIDE HCL	Diarrhea	any	UP1
lopinavir/ritonavir (KALETRA)	HIV/AIDS	any	UP3
LOPRESSOR (metoprolol)	Hypertension	any	UP1
LOPRESSOR (metoprolol)	Angina	12 months/2 years	UP2/UP3
LOPRESSOR (metoprolol)	Congestive heart failure	any	UP3
LORATADINE	Antihistamine	any	UP1
lorazepam (ATIVAN)	Anxiety	any	UP1
losartan (COZAAR)	Hypertension	any	UP1
losartan (COZAAR)	Diabetic Kidney Disease	any	UP3 if combined with diabetes treatment within the past 2 years
LOTEMAX	Eye drops	any	UP1
LOTENSIN (benazepril HCl)	Hypertension	any	UP1
LOTREL (amlodipine/benazepril)	Hypertension	any	UP1
LOTRONEX	Irritable bowel syndrome	any	UP1
lovastatin (ALTOPREV, MEVACOR, ALTOCOR)	Elevated cholesterol	any	UP1
LOVAZA (omega-3-acid ethyl esters)	Elevated triglycerides	any	UP1
LOVENOX (enoxaparin)	Deep vein thrombosis (clot)	2 years	UP3
LOVENOX (enoxaparin)	Unstable angina	12 months/2 years	UP3/UP2
LOVENOX (enoxaparin)	Heart attack	12 months/2 years	UP3/UP2
LOXAPINE SUCCINATE	Schizophrenia	any	UP1
LOZOL (indapamide)	Hypertension	any	UP1
LOZOL (indapamide)	Congestive heart failure	any	UP3
lubiprostone (AMITIZA)	Constipation	any	UP1
LUMIGAN	Eye drops	any	UP1
LUNESTA (eszopiclone)	Insomnia	any	UP1
LUPRON DEPOT	Cancer	3 years	UP3
LUVOX (fluvoxamine)	Obsessive compulsive disorder	any	UP1
LUXIQ	Dermatological treatment	any	UP1
LYRICA (pregabalin)	Neuropathic pain - diabetic/postherpetic	any	UP1 (UP3 if combined with diabetes treatment taken within the past 2 years)
LYRICA (pregabalin)	Seizures	any	UP1
LYRICA (pregabalin)	Fibromyalgia	any	UP1
MAGNESIUM SULFATE	Convulsion	any	UP1
MAGNESIUM SULFATE	Magnesium deficiency	any	UP1
MALARONE	Malaria	any	UP1
MAPAP	Pain relief - nonnarcotic	any	UP1
MAPAP PM	Insomnia	any	UP1
MAPAP SINUS MAXIMUM STRENGTH	Cough/cold/allergies	any	UP1
MARINOL (dronabinol)	Appetite stimulant in patients with AIDS	any	UP3
MARINOL (dronabinol)	Nausea and vomiting related to chemotherapy	3 years	UP3

Prescription Drug Guide

Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
MARPLAN	Depression	any	UP1
MAVIK (trandolapril)	Hypertension	any	UP1
MAVIK (trandolapril)	Congestive heart failure	any	UP3
MAXAIR AUTOHALER (pirbuterol inhaler)	Asthma	any	UP1
MAXALT	Migraine	any	UP1
MAXARON FORTE	Iron supplementation	any	UP1
MAXIDEX	Eye drops	any	UP1
MAXZIDE (triamterene/hydrochlorothiazide)	Hypertension	any	UP1
MAXZIDE (triamterene/hydrochlorothiazide)	Edema	any	UP1
MEBENDAZOLE	Worm infection	any	UP1
MECLIZINE HCL	Nausea	any	UP1
MEFLOQUINE HCL	Malaria	any	UP1
MEGACE ES (megestrol) liquid	Appetite stimulant in patients with AIDS	any	UP3
MEGACE ES (megestrol) liquid	Cancer-related weight loss	3 years	UP3
MEGACE ES (megestrol) tablets	Breast or uterine cancer palliative therapy	3 years	UP3
megestrol (MEGACE) liquid	Appetite stimulant in patients with AIDS	any	UP3
megestrol (MEGACE) liquid	Cancer-related weight loss	3 years	UP3
megestrol (MEGACE) tablets	Breast or uterine cancer palliative therapy	3 years	UP3
memantine (NAMENDA)	Alzheimer's disease	any	UP3
MENEST (esterified estrogen)	Menopausal symptoms	any	UP1
MENEST (esterified estrogen)	Breast and prostatic cancer	3 years	UP3
MENTAX	Dermatological treatment	any	UP1
MEPERIDINE HCL	Moderate to severe pain - narcotic	any	UP1
MEPHYTON	Coagulation disorder	any	UP1
MEPROZINE	Moderate to severe pain - narcotic	any	UP1
mercaptopurine (PURINETHOL)	Cancer	3 years	UP3
mesalamine (ASACOL)	Ulcerative colitis	any	UP1
mesalamine (ROWASA)	Ulcerative colitis/proctitis	any	UP1
METAGLIP (glipizide/meformin)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
METANX	Diabetic neuropathy	any	UP1 (UP3 if combined with diabetes treatment taken within the past 2 years)
metaproterenol sulfate (ALUPENT)	Asthma	any	UP1
metaproterenol sulfate (ALUPENT)	Emphysema	any	UP2
meformin (FORTAMET, GLUCOPHAGE, GLUMETZA, RIOMET)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
meformin/pioglitazone (ACTOPLUS MET)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
meformin/repaglinide (PRANDIMET)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
meformin/rosiglitazone (AVANDAMET)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
meformin/sitagliptin (JANUMET)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)

Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
methadone HCl (DISKETS, DOLOPHINE, METHADOSE)	Moderate to severe pain - narcotic	any	UP1
methadone HCl (DISKETS, DOLOPHINE, METHADOSE)	Opiate addiction	2 years	UP3
METHAZOLAMIDE	Glaucoma	any	UP1
METHENAMINE HIPPURATE	Urinary tract infection	any	UP1
METHERGINE	Obstetric care	any	UP1
METHIMAZOLE	Thyroid	any	UP1
methocarbamol (ROBAXIN)	Muscle relaxer	any	UP1
methotrexate (RHEUMATREX DOSE PACK, TREXALL)	Rheumatoid arthritis	any	UP1
methotrexate (RHEUMATREX DOSE PACK, TREXALL)	Psoriasis, severe	any	UP1
methotrexate (RHEUMATREX DOSE PACK, TREXALL)	Cancer	3 years	UP3
methsuximide (CELONTIN)	Seizures	any	UP1
methylclothiazide (ENDURON)	Hypertension	any	UP1
methylclothiazide (ENDURON)	Edema due to hormone or steroid therapy	any	UP1
methylclothiazide (ENDURON)	Liver cirrhosis	2 years	UP2
methylclothiazide (ENDURON)	Congestive heart failure	any	UP3
methyl dopa (ALDOMET)	Hypertension	any	UP1
methylphenidate hydrochloride (CONCERTA)	ADHD	any	UP1
methylprednisolone	Multiple indications - corticosteroid	any	UP1
methyltestosterone (TESTRED)	Males: hormonal treatment	any	UP1
methyltestosterone (TESTRED)	Females: Inoperable breast cancer	3 years	UP3
METIPRANOLOL	Eye drops	any	UP1
metoclopramide HCl (REGLAN)	GERD	any	UP1
metoclopramide HCl (REGLAN)	Diabetic gastroparesis (delayed digestion)	any	UP1 (UP3 if combined with diabetes treatment taken within the past 2 years)
metoclopramide HCl (REGLAN)	Nausea and vomiting related to chemotherapy	3 years	UP3
metolazone (ZAROXOLYN)	Hypertension	any	UP1
metolazone (ZAROXOLYN)	Congestive heart failure	any	UP3
metolazone (ZAROXOLYN)	Kidney disease	any	UP3
metoprolol (LOPRESSOR, TOPROL-XL)	Hypertension	any	UP1
metoprolol (LOPRESSOR, TOPROL-XL)	Angina	12 months/2 years	UP3/UP2
metoprolol (LOPRESSOR, TOPROL-XL)	Congestive heart failure	any	UP3
METROGEL	Dermatological treatment	any	UP1
METRONIDAZOLE	Antibiotic	any	UP1
metyrosine (DEMSER)	Pheochromocytomas	any	UP1
MEVACOR (lovastatin)	Elevated cholesterol	any	UP1
mexiletine (MEXITIL)	Heart arrhythmia	any	UP3
MEXITIL (mexiletine)	Heart arrhythmia	any	UP3
MIACALCIN (calcitonin)	Osteoporosis	any	UP1
MIACALCIN (calcitonin)	Paget's bone disease	any	UP1
MI-ACID	Antacid	any	UP1
MICARDIS (hydrochlorothiazide/telmisartan)	Hypertension	any	UP1
MICRONASE (glyburide)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)

Prescription Drug Guide

Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
MIDAMOR (amiloride HCl)	Hypertension	any	UP1
MIDAMOR (amiloride HCl)	Congestive heart failure	any	UP3
MIDODRINE HCL	Low blood pressure	any	UP1
miglitol (GLYSET)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
MIGRANAL	Migraine	any	UP1
MIGRATEN	Migraine	any	UP1
milnacipran (SAVELLA)	Fibromyalgia	any	UP1
MIMYX	Dermatological treatment	any	UP1
MINIPRESS (prazosin)	Hypertension	any	UP1
MINOCYCLINE HCL	Antibiotic	any	UP1
MINOXIDIL	Hypertension	any	UP1
MINOXIDIL	Hair regrowth treatment	any	UP1
MINTOX PLUS	Antacid	any	UP1
MIRAPEX (pramipexole)	Restless legs syndrome	any	UP1
MIRAPEX (pramipexole)	Parkinson's disease	2 years	UP2
mirtazapine (REMERON)	Depression	any	UP1
misoprostol (CYTOTEC)	Ulcers	any	UP1
MOBIC	Pain relief - anti-inflammatory	any	UP1
MOBISYL	Dermatological treatment	any	UP1
modafinil (PROVIGIL)	Narcolepsy (improves excessive sleepiness)	any	UP1
moexipril (UNIVASC)	Hypertension	any	UP1
MOMETASONE FUROATE	Dermatological treatment	any	UP1
MONOPRIL (fosinopril)	Hypertension	any	UP1
MONOPRIL (fosinopril)	Congestive heart failure	any	UP3
MONOPRIL HCT (fosinopril/hydrochlorothiazide)	Hypertension	any	UP1
montelukast (SINGULAIR)	Allergies/asthma	any	UP1
morphine sulfate (AVINZA)	Moderate to severe pain - narcotic	any	UP1
MOVIPREP	Constipation	any	UP1
moxifloxacin (AVELOX)	Antibiotic	any	UP1
MST 600	Pain relief - nonnarcotic	any	UP1
MUCOMYST (acetylcysteine)	Emphysema	any	UP2
MUCOMYST (acetylcysteine)	Tuberculosis	any	UP2
MUCOMYST (acetylcysteine)	Pneumonia/bronchitis	any	UP1
MUCOMYST (acetylcysteine)	Cystic fibrosis	any	UP2
MULTAQ	Heart arrhythmia	any	UP3
MULTIRET FOLIC-500	Vitamin supplement	any	UP1
MUPIROCIN	Dermatological treatment	any	UP1
MYCELEX (clotrimazole)	Fungal infection	any	UP1
mycophenolate (CELLCEPT)	Transplant rejection	any	UP3
mycophenolic acid (MYFORTIC)	Organ transplant rejection	any	UP3
MYFORTIC (mycophenolic acid)	Organ transplant rejection	any	UP3
nabumetone (RELAFEN)	Rheumatoid arthritis/osteoarthritis	any	UP1
nadolol (CORCARD)	Hypertension	any	UP1
nadolol (CORCARD)	Angina	12 months/2 years	UP3/UP2

Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
nadolol/bendroflumethiazide (CORZIDE)	Hypertension	any	UP1
NAFCILLIN SODIUM	Antibiotic	any	UP1
NAFTIN	Dermatological treatment	any	UP1
NALDEX	Cough/cold/allergies	any	UP1
naloxone (NARCAN)	Opiate overdose	2 years	UP3
naltrexone (REVIA)	Alcohol dependence	2 years	UP3
naltrexone (VIVITROL)	Alcohol dependence/opiate dependence	2 years	UP3
NAMENDA (memantine)	Alzheimer's disease	any	UP3
NAPROXEN	Pain relief - anti-inflammatory	any	UP1
NARCAN (naloxone)	Opiate overdose	2 years	UP3
NASACORT AQ	Allergy symptoms	any	UP1
NASAREL	Allergy symptoms	any	UP1
NASONEX	Allergy symptoms	any	UP1
NATAFORT	Vitamin supplement	any	UP1
NATALCARE GLOSSTABS	Vitamin supplement	any	UP1
NATATAB RX	Vitamin supplement	any	UP1
nateglinide (STARLIX)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
nebivolol (BYSTOLIC)	Hypertension	any	UP1
NEEVO DHA	Vitamin supplement	any	UP1
NEFAZODONE HCL	Depression	any	UP1
NEO AC	Cough/cold/allergies	any	UP1
NEOMYCIN/POLYMYXIN/BACITRACIN	Eye drops	any	UP1
NEOMYCIN/POLYMYXIN/DEXAMETHASONE	Eye drops	any	UP1
NEOMYCIN/POLYMYXIN/GRAMICIDIN	Eye drops	any	UP1
NEOMYCIN/POLYMYXIN/HYDROCORTISONE	Eye drops	any	UP1
NEOMYCIN SULFATE	Topical antibiotic	any	UP1
NERVO B-12 SL	Vitamin supplement	any	UP1
NEUPOGEN (filgrastim)	Cancer	3 years	UP3
NEURONTIN (gabapentin)	Nerve pain	any	UP1 (UP3 if combined with diabetes treatment within the past 2 years)
NEURONTIN (gabapentin)	Epilepsy	any	UP1
NEUTRA-PHOS	Mineral/electrolyte supplement	any	UP1
NEVANAC	Eye drops	any	UP1
NEXAVAR (sorafenib)	Cancer	3 years	UP3
NEXIUM (esomeprazole)	GERD/ulcers	any	UP1
niacin (NIASPAN)	Elevated cholesterol	any	UP1
niacin/lovastatin (ADVICOR)	Elevated cholesterol	any	UP1
NIACOR	Vitamin supplement/elevated cholesterol	any	UP1
NIASPAN (niacin)	Elevated cholesterol	any	UP1
NICORETTE STARTER KIT	Smoking cessation	12 months	Smoker rates (UP1)
NICOTINE	Smoking cessation	12 months	Smoker rates (UP1)
NIFEDICAL (nifedipine)	Hypertension	any	UP1
nifedipine (ADALAT, PROCARDIA, NIFEDICAL, AFEDITAB)	Hypertension	any	UP1

Prescription Drug Guide

Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
NIFEREX	Iron supplementation	any	UP1
nisoldipine (Sular)	Hypertension	any	UP1
NITROFURANTOIN	Urinary tract antibiotic	any	UP1
nitroglycerine (NITRO-TIME, NITROLINGUAL, NITROMIST, NITROSTAT, NITROQUICK)	Angina	12 months/2 years	UP3/UP2
NITROLINGUAL (nitroglycerin)	Angina	12 months/2 years	UP3/UP2
NITROMIST (nitroglycerin)	Angina	12 months/2 years	UP3/UP2
NITROQUICK (nitroglycerin)	Angina	12 months/2 years	UP3/UP2
NITROSTAT (nitroglycerin)	Angina	12 months/2 years	UP3/UP2
NITRO-TIME (nitroglycerin)	Angina	12 months/2 years	UP3/UP2
nizatidine (AXID)	Ulcers/esophagitis	any	UP1
NOHIST-EXT	Antihistamine	any	UP1
NOREL SR	Cough/cold/allergies	any	UP1
NORETHINDRONE ACETATE	Hormonal treatment	any	UP1
NORFLEX (orphenadrine)	Muscle relaxer	any	UP1
NORMODYNE (labetalol)	Hypertension	any	UP1
NOROXIN	Antibiotic	any	UP1
NORPRAMIN (desipramine HCl)	Depression	any	UP1
NORTRIPTYLINE HCL	Depression	any	UP1
NORVASC (amlodipine)	Hypertension	any	UP1
NORVASC (amlodipine)	Coronary artery disease	12 months/2 years	UP3/UP2
NORVIR (ritonavir)	HIV/AIDS	any	UP3
NOVACORT	Dermatological treatment	any	UP1
NOVOLOG (insulin)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
NUCYNTA	Moderate to severe pain - narcotic	any	UP1
NUTROPIN AQ PEN	Hormonal treatment	any	UP1
NUVIGIL	Narcolepsy (improves excessive sleepiness)	any	UP1
NYDRAZID (isoniazid)	Tuberculosis	2 years	UP2
NYSTATIN	Fungal infection	any	UP1
NYSTATIN/TRIAMCINOLONE	Dermatological treatment	any	UP1
NYSTOP	Dermatological treatment	any	UP1
OFLOXACIN	Eye drops	any	UP1
olanzapine (ZYPREXA)	Schizophrenia/bipolar disorder	any	UP1
olmesartan (BENICAR HCT)	Hypertension	any	UP1
OLUX-E	Dermatological treatment	any	UP1
omega-3-acid ethyl esters (LOVAZA)	Elevated triglycerides	any	UP1
omeprazole (PRILOSEC)	Ulcers/GERD/esophagitis	any	UP1
omeprazole/sodium bicarbonate (ZEGERID)	Ulcers/GERD/esophagitis	any	UP1
OMNARIS	Allergies	any	UP1
OMNICEF	Antibiotic	any	UP1
onabotulinumtoxinA (BOTOX)	Spasticity/multiple indications	any	UP1
ondansetron (ZOFRAN)	Nausea/vomiting related to chemotherapy	3 years	UP3
ONGLYZA (saxagliptin)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)

Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
ONSOLIS (fentanyl) buccal soluble film	Cancer pain	3 years	UP3
OPANA ER	Moderate to severe pain - narcotic	any	UP1
OPTI-CLEAR	Eye drops	any	UP1
OPTIVAR	Eye drops	any	UP1
ORACEA	Dermatological treatment	any	UP1
ORAP	Tourette's disorder	any	UP1
orphenadrine (NORFLEX)	Muscle relaxer	any	UP1
OVIDE	Dermatological treatment	any	UP1
OXAPROZIN	Pain relief - anti-inflammatory	any	UP1
oxazepam (SERAX)	Anxiety	any	UP1
oxcarbazepine (TRILEPTAL)	Seizures	any	UP1
OXISTAT	Dermatological treatment	any	UP1
OXSORALEN ULTRA	Psoriasis, severe	any	UP1
OXYCODONE	Moderate to severe pain - narcotic	any	UP1
OXYTROL	Urinary spasm	any	UP1
OYSCO 500	Mineral/electrolyte supplement	any	UP1
OYST-CAL	Mineral/electrolyte supplement	any	UP1
PACERONE (amiodarone)	Heart arrhythmia	any	UP3
paliperidone (INVEGA)	Schizophrenia	any	UP1
pamidronate (AREDIA)	Cancer	3 years	UP3
pamidronate (AREDIA)	Paget's bone disease	any	UP1
PAMINE FORTE	Ulcer	any	UP1
pancrelipase (CREON)	Pancreatic enzyme - cystic fibrosis	2 years	UP2
pancrelipase (CREON)	Pancreatic enzyme - chronic pancreatitis	any	UP1
pancrelipase (CREON)	Pancreatic enzyme - pancreatectomy	any	UP1
PANLOR SS	Moderate to severe pain - narcotic	any	UP1
pantoprazole (PROTONIX)	GERD/ulcers	any	UP1
papain and urea (ACCUZYME)	Dermatological treatment	any	UP1
PARAFON FORTE DSC (chlorzoxazone)	Musculoskeletal pain	any	UP1
PAREGORIC	Diarrhea	any	UP1
paricalcitol (ZEMPLAR)	Kidney disease	any	UP3
paroxetine (PAXIL, PEVEVA)	Depression/OCD/panic disorder	any	UP1
PATANASE	Allergies	any	UP1
PATANOL	Eye drops	any	UP1
PAXIL (paroxetine)	Depression/OCD/panic disorder	any	UP1
PEDIOX-S	Antihistamine	any	UP1
PEGASYS (peginterferon alfa-2a)	Hepatitis B and C	2 years	UP2
PEG-INTRON	Hepatitis C	2 years	UP2
PENICILLIN V POTASSIUM	Antibiotic	any	UP1
PENLAC NAIL LACQUER	Dermatological treatment	any	UP1
PENTAZOCINE/ACETAMINOPHEN	Pain relief - narcotic	any	UP1
PENTAZOCINE/NALOXONE HCL	Moderate to severe pain - narcotic	any	UP1
pentoxifylline (PENTOXIL, TRENTAL)	Circulation disorder	2 years	UP3
PENTOXIL (pentoxifylline)	Circulation disorder	2 years	UP3
PERIDEX (chlorhexidine gluconate)	Antiseptic rinse	any	UP1

Prescription Drug Guide

Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
perindopril (ACEON)	Hypertension	any	UP1
perindopril (ACEON)	Coronary artery disease	12 months/2 years	UP3/UP2
PERMETHRIN	Dermatological treatment	any	UP1
PERPHENAZINE	Schizophrenia	any	UP1
PERPHENAZINE	Severe nausea/vomiting	any	UP1
PERPHENAZINE/AMITRIPTYLINE	Depression/anxiety	any	UP1
PERSANTINE (dipyridamole)	Clot prevention after valve replacement	12 months/2 years	UP3/UP2
PEXEVA (paroxetine)	Depression/OCD/panic disorder	any	UP1
PHENAVENT LA	Cough/cold/allergies	any	UP1
PHENAZOPYRIDINE HCL	Urinary spasm	any	UP1
PHENDIMETRAZINE TARTRATE	Obesity	any	UP1
PHENOBARBITAL	Sedative/seizures	any	UP1
PHENTERMINE HCL	ADHD/narcolepsy/obesity	any	UP1
phenytoin (DILANTIN)	Seizures	any	UP1
PHENYTOIN SODIUM EXTENDED	Seizures	any	UP1
P-HIST	Cough/cold/allergies	any	UP1
PHOSPHA 250 NEUTRAL	Mineral/electrolyte supplement	any	UP1
PILOCARPINE HCL (Ophthalmic)	Eye drops	any	UP1
PILOCARPINE HCL (Oral)	Dry mouth	any	UP1
PILOCARPINE HCL (Oral)	Dry mouth due to cancer radiation treatment	3 years	UP3
PINDOLOL	Hypertension	any	UP1
pioglitazone (ACTOS)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
pirbuterol inhaler (MAXAIR AUTOHALER)	Asthma	any	UP1
PIROXICAM	Pain relief - anti-inflammatory	any	UP1
PLAVIX (clopidogrel)	Heart attack	12 months/2 years	UP3/UP2
PLAVIX (clopidogrel)	Stroke	2 years	UP3
PLENDIL (felodipine)	Hypertension	any	UP1
PLETAL (cilostazol)	Circulatory disease	2 years	UP3
POLY HIST FORTE	Cough/cold/allergies	any	UP1
POLYMYXIN B SULFATE/TRIMETHOPRIM SULFATE	Eye drops	any	UP1
pramipexole (MIRAPEX)	Restless legs syndrome	any	UP1
pramipexole (MIRAPEX)	Parkinson's disease	2 years	UP2
pramlintide (SYMLIN)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
PRAMOSONE	Dermatological treatment	any	UP1
PRANDIMET (metformin/repaglinide)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
PRANDIN (repaglinide)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
PRAVACHOL (pravastatin)	Elevated cholesterol	any	UP1
pravastatin (PRAVACHOL)	Elevated cholesterol	any	UP1
prazosin (MINIPRESS)	Hypertension	any	UP1
PRECOSE (acarbose)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
PREDNISOLONE	Multiple indications - corticosteroid	any	UP1

Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
PREDNISOLONE ACETATE	Eye drops	any	UP1
PREDNISONE	Multiple indications - corticosteroid	any	UP1
pregabalin (LYRICA)	Neuropathic pain - diabetic/postherpetic	any	UP1 (UP3 if combined with diabetes treatment taken within the past 2 years)
pregabalin (LYRICA)	Seizures	any	UP1
pregabalin (LYRICA)	Fibromyalgia	any	UP1
PREMARIN	Hormonal treatment	any	UP1
PREMPRO	Hormonal treatment	any	UP1
PRENATAL 19	Vitamin supplement	any	UP1
PRENATAL PLUS	Vitamin supplement	any	UP1
PREVACID (lansoprazole)	Ulcers	any	UP1
PREVPAC	Ulcers	any	UP1
PRILOSEC (omeprazole)	Ulcers/GERD/esophagitis	any	UP1
PRIMACARE ONE	Vitamin supplement	any	UP1
PRIMIDONE	Epilepsy	any	UP1
PRINIVIL (lisinopril)	Hypertension	any	UP1
PRINIVIL (lisinopril)	Congestive heart failure	any	UP3
PRINIVIL (lisinopril)	Heart attack	12 months/2 years	UP3/UP2
PRINZIDE (lisinopril/hydrochlorothiazide)	Hypertension	any	UP1
PRISTIQ	Depression	any	UP1
PROAIR HFA (albuterol)	Asthma	any	UP1
PROBENECID	Gout	any	UP1
PROCARDIA (nifedipine)	Hypertension	any	UP1
prochlorperazine (COMPRO)	Nausea/vomiting	any	UP1
PROCHLORPERAZINE MALEATE	Nausea/vomiting, severe	any	UP1
PROCHLORPERAZINE MALEATE	Schizophrenia/anxiety	any	UP1
PROCRIT (epoetin alfa)	Cancer-related anemia	3 years	UP3
PROCRIT (epoetin alfa)	HIV-related anemia	any	UP3
PROCRIT (epoetin alfa)	Kidney disease-related anemia	any	UP3
PROCTOFOAM HC	Hemorrhoids	any	UP1
PROCTOSOL HC	Hemorrhoids	any	UP1
PROGRAF (tacrolimus)	Organ transplant rejection	any	UP3
PROLIXIN (fluphenazine)	Schizophrenia/psychotic disorder	any	UP1
PROMETHAZINE	Cough/cold/allergies	any	UP1
PROMETHAZINE HCL	Antihistamine	any	UP1
PROMETRIUM	Hormonal treatment	any	UP1
PROPAFENONE HCL	Heart arrhythmia	any	UP3
PROPANTHELINE BROMIDE	Ulcers	any	UP1
PROPECIA (finasteride)	Male pattern baldness	any	UP1
propoxyphene (DARVON)	Pain relief - narcotic	any	UP1
propoxyphene-N/acetaminophen	Pain relief - narcotic	any	UP1
propranolol (INDERAL)	Hypertension	any	UP1
propranolol (INDERAL)	Migraine	any	UP1
propranolol (INDERAL)	Angina	12 months/2 years	UP3/UP2
propranolol (INDERAL)	Hypertrophic subaortic stenosis (cardiomyopathy)	any	UP3

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Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
PROPYLTHIOURACIL	Thyroid	any	UP1
PROSCAR (finasteride)	Benign prostatic hypertrophy	any	UP1
PROSED/DS	Urinary antibiotic	any	UP1
PROTONIX (pantoprazole)	GERD/ulcers	any	UP1
PROTOPIC	Dermatological treatment	any	UP1
PROVENTIL (albuterol)	Asthma	any	UP1
PROVIGIL (modafinil)	Narcolepsy (improves excessive sleepiness)	any	UP1
PROZAC (fluoxetine)	Depression/OCD/panic disorder	any	UP1
PRUDOXIN	Dermatological treatment	any	UP1
PSEUDOEPHEDRINE/GUAIFENESIN/ DEXTROMETHORPHAN	Cough/cold/allergies	any	UP1
PSEUDOVENT 400	Cough/cold/allergies	any	UP1
PURINETHOL (mercaptopurine)	Cancer	3 years	UP3
PYLERA	Ulcers	any	UP1
PYRIDOSTIGMINE BROMIDE	Myasthenia gravis	any	UP1
QDALL AR	Antihistamine	any	UP1
QUALAQUIN	Malaria	any	UP1
QUESTRAN (cholestyramine)	Elevated cholesterol	any	UP1
quetiapine (SEROQUEL)	Schizophrenia/bipolar disorder	any	UP1
quinapril (ACCUPRIL)	Hypertension	any	UP1
quinapril/hydrochlorothiazide (QUINARETIC)	Hypertension	any	UP1
QUINARETIC (quinapril/hydrochlorothiazide)	Hypertension	any	UP1
QUINIDINE SULFATE	Heart arrhythmia	any	UP3
QUINIDINE SULFATE	Malaria	any	UP1
QVAR (beclomethasone)	Asthma	any	UP1
raloxifene (EVISTA)	Osteoporosis	any	UP1
ramelteon (ROZEREM)	Insomnia	any	UP1
ramipril (ALTACE)	Hypertension	any	UP1
ramipril (ALTACE)	Congestive heart failure	any	UP3
RANEXA (ranolazine)	Angina	12 months/2 years	UP3/UP2
RANITIDINE HCL	Heartburn/indigestion	any	UP1
ranolazine (RANEXA)	Angina	12 months/2 years	UP3/UP2
RAPAFLO	Benign prostatic hypertrophy	any	UP1
RAPAMUNE (sirolimus)	Organ transplant rejection prevention	any	UP3
rasagiline (AZILECT)	Parkinson's disease	2 years	UP2
RAZADYNE (galantamine)	Alzheimer's disease	any	UP3
RE 10 WASH	Dermatological treatment	any	UP1
REBIF (interferon beta-1a)	Multiple sclerosis	any	UP1
RECLAST (zoledronic acid)	Osteoporosis	any	UP1
REGLAN (metoclopramide)	GERD	any	UP1
REGLAN (metoclopramide)	Diabetic gastroparesis (delayed digestion)	any	UP1 (UP3 if combined with diabetes treatment taken within the past 2 years)
REGLAN (metoclopramide)	Nausea and vomiting related to chemotherapy	3 years	UP3
REGRANEX	Dermatological treatment	any	UP1

Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
RELAFEN (nabumetone)	Rheumatoid arthritis/osteoarthritis	any	UP1
RELISTOR	Constipation	any	UP1
RELPAK	Migraine	any	UP1
REMERON (mirtazapine)	Depression	any	UP1
RENACIDIN	Kidney stones	any	UP1
RENAGEL (sevelamer)	Kidney disease	any	UP3
RENAL	Vitamin supplement	any	UP1
REVELA (sevelamer)	Kidney disease	any	UP3
repaglinide (PRANDIN)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
REPLIVA 21/7	Iron supplementation	any	UP1
REQUIP (ropinirole)	Restless legs syndrome	any	UP1
REQUIP (ropinirole)	Parkinson's disease	2 years	UP2
RESTASIS	Eye drops	any	UP1
RESTORIL (temazepam)	Insomnia	any	UP1
RETIN-A MICRO	Dermatological treatment	any	UP1
RETROVIR (zidovudine)	HIV/AIDS	any	UP3
RE VIA (naltrexone)	Alcohol dependence	2 years	UP3
REVLIMID (lenalidomide)	Cancer	3 years	UP3
REYATAZ (atazanavir)	HIV-related anemia	any	UP3
RHINOCORT AQUA	Nasal spray	any	UP1
ribavirin (COPEGUS)	Hepatitis C	2 years	UP2
RIFAMPIN	Tuberculosis	2 years	UP2
RIMANTADINE HCL	Influenza	any	UP1
RINNOVI NAIL SYSTEM	Dermatological treatment	any	UP1
RIOMET (metformin)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
risedronate (ACTONEL)	Osteoporosis	any	UP1
RISPERDAL (risperidone)	Schizophrenia/bipolar disorder	any	UP1
risperidone (RISPERDAL)	Schizophrenia/bipolar disorder	any	UP1
ritonavir (NORVIR)	HIV/AIDS	any	UP3
rivastigmine transdermal (EXELON)	Alzheimer's disease/dementia	any	UP3
ROBAXIN (methocarbamol)	Muscle relaxer	any	UP1
ROBINUL (glycopyrrolate)	Ulcers	any	UP1
ROCALTROL (calcitriol)	Calcium replacement in PRIMARY parathyroid disease	any	UP1
ROCALTROL (calcitriol)	Kidney failure; SECONDARY parathyroid disease	any	UP3
ROMAZICON (flumazenil)	Drug overdose management	2 years	UP3
ropinirole (REQUIP)	Restless legs syndrome	any	UP1
ropinirole (REQUIP)	Parkinson's disease	2 years	UP2
ROSAC	Dermatological treatment	any	UP1
rosiglitazone (AVANDIA)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
rosuvastatin (CRESTOR)	Elevated cholesterol	any	UP1
ROWASA (mesalamine)	Ulcerative colitis/proctitis	any	UP1
ROZEREM (ramelteon)	Insomnia	any	UP1

Prescription Drug Guide

Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
R-TANNA	Cough/cold/allergies	any	UP1
SALKERA	Dermatological treatment	any	UP1
salmeterol (SEREVENT)	Asthma	any	UP1
salmeterol (SEREVENT)	Chronic obstructive pulmonary disease (COPD)	any	UP2
SALSALATE	Pain relief - nonnarcotic	any	UP1
SANCTURA XR	Overactive bladder	any	UP1
SANTYL	Dermatological treatment	any	UP1
SAVELLA (milnacipran)	Fibromyalgia	any	UP1
saxagliptin (ONGLYZA)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
SECTRAL (acebutolol HCl)	Hypertension	any	UP1
SECTRAL (acebutolol HCl)	Arrhythmia	any	UP3
selegiline (ELDEPRYL, ZELAPAR)	Parkinson's disease	2 years	UP2
SELENIUM SULFIDE	Dermatological treatment	any	UP1
SENNA	Constipation	any	UP1
SENNA S	Constipation	any	UP1
SENSIPAR (cinacalcet)	Primary parathyroid disease	any	UP1
SENSIPAR (cinacalcet)	Parathyroid cancer	3 years	UP3
SENSIPAR (cinacalcet)	Kidney disease	any	UP3
SERAX (oxazepam)	Anxiety	any	UP1
SEREVENT DISKUS (salmeterol)	Asthma	any	UP1
SEREVENT DISKUS (salmeterol)	Chronic obstructive pulmonary disease (COPD)	any	UP2
SEROQUEL (quetiapine)	Schizophrenia/bipolar disorder	any	UP1
sertraline (ZOLOFT)	Depression	any	UP1
sevelamer (RENAGEL, RENEVA)	Kidney disease	any	UP3
SILVER SULFADIAZINE	Dermatological treatment	any	UP1
SIMCOR (simvastatin/niacin)	Elevated cholesterol	any	UP1
SIMPONI (golimumab)	Rheumatoid arthritis/psoriatic arthritis	any	UP1
SIMPONI (golimumab)	Ankylosing spondylitis	any	UP1
simvastatin (ZOCOR)	Elevated cholesterol	any	UP1
simvastatin/niacin (SIMCOR)	Elevated cholesterol	any	UP1
SINEMET (carbidopa/levodopa)	Parkinson's disease	2 years	UP2
SINEQUAN (doxepin HCl)	Depression/anxiety	any	UP1
SINGULAIR (montelukast)	Allergies/asthma	any	UP1
sirolimus (RAPAMUNE)	Organ transplant rejection prevention	any	UP3
sitagliptin (JANUVIA)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
SKELAXIN	Muscle relaxer	any	UP1
SODIUM SULFACETAMIDE	Eye drops	any	UP1
SOLARAZE	Dermatological treatment	any	UP1
SOLTAMOX (tamoxifen)	Breast cancer/cancer remission maintenance	any	UP1
SONATA (zaleplon)	Insomnia	any	UP1
sorafenib (NEXAVAR)	Cancer	3 years	UP3

Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
SORBITOL	Constipation	any	UP1
SORBUTUSS	Cough/cold/allergies	any	UP1
SORIATANE	Dermatological treatment	any	UP1
SORIATANE CK	Dermatological treatment	any	UP1
SORINE (sotalol)	Heart arrhythmia	any	UP3
sotalol (BETAPACE, SORINE)	Heart arrhythmia	any	UP3
SPECTRACEF	Antibiotic	any	UP1
SPIRIVA (tiotropium)	Chronic obstructive pulmonary disease (COPD)	any	UP2
spironolactone (ALDACTONE)	Hyperaldosteronism/low potassium	any	UP1
spironolactone (ALDACTONE)	Hypertension	any	UP1
spironolactone (ALDACTONE)	Liver cirrhosis	2 years	UP2
spironolactone (ALDACTONE)	Congestive heart failure	any	UP3
spironolactone (ALDACTONE)	Kidney disease	any	UP3
STALEVO 100	Parkinson's disease	2 years	UP2
STARLIX (nateglinide)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
STRATTERA	ADHD	any	UP1
STROMECTOL	Worm infection	any	UP1
STROVITE ADVANCE	Vitamin supplement	any	UP1
SUBOXONE	Opiate dependency	2 years	UP3
SUBSYS (fentanyl) sublingual spray	Cancer pain	3 years	UP3
SUBUTEX	Opiate dependency	2 years	UP3
SUCRALFATE	Ulcers	any	UP1
SULAR (nisoldipine)	Hypertension	any	UP1
SULFAMETHOXAZOLE/TRIMETHOPRIM DS	Antibiotic	any	UP1
SULFASALAZINE	Ulcerative colitis	any	UP1
SULINDAC	Pain relief - anti-inflammatory	any	UP1
sumatriptan (IMITREX)	Migraine	any	UP1
SUSTIVA (efavirenz)	HIV/AIDS	any	UP3
SYMBICORT (budesonide/formoterol)	Asthma	any	UP1
SYMBICORT (budesonide/formoterol)	Chronic obstructive pulmonary disease (COPD)	any	UP2
SYMBYAX (fluoxetine/olanzapine)	Depression/bipolar disorder	any	UP1
SYMLIN (pramlintide)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
SYMMETREL (amantadine HCl)	Parkinson's disease	2 years	UP2
SYMMETREL (amantadine HCl)	Drug-induced movement disorders	any	UP1
SYNTHROID	Thyroid	any	UP1
SYNVISC	Osteoarthritis	any	UP1
SYSTANE	Eye drops	any	UP1
TACLONEX	Dermatological treatment	any	UP1
tacrolimus (PROGRAF)	Organ transplant rejection	any	UP3
tadalafil (CIALIS)	Erectile dysfunction	any	UP1
TAGAMET (cimetidine)	Heartburn	any	UP1
TAMBOCOR (flecainide)	Heart arrhythmia	any	UP3
TAMIFLU	Influenza	any	UP1

Prescription Drug Guide

Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
tamoxifen (SOLTAMOX)	Breast cancer/cancer remission maintenance	any	UP1
tamsulosin (FLOMAX)	Benign prostatic hypertrophy	any	UP1
TANDEM	Iron supplementation	any	UP1
TARKA (trandolapril/verapamil)	Hypertension	any	UP1
TAXOTERE (docetaxel)	Cancer	3 years	UP3
TEBAMIDE	Nausea/vomiting	any	UP1
TEGRETOL (carbamazepine)	Epilepsy	any	UP1
TEGRETOL (carbamazepine)	Facial nerve disorder	any	UP1
TEKTURNA (aliskiren)	Hypertension	any	UP1
TEKTURNA HCT (aliskiren/hydrochlorothiazide)	Hypertension	any	UP1
temazepam (RESTORIL)	Insomnia	any	UP1
TENEX (guanfacine)	Hypertension	any	UP1
tenofovir (VIREAD)	Hepatitis B	2 years	UP2
tenofovir (VIREAD)	HIV/AIDS	any	UP3
TENORETIC (atenolol/chlorthalidone)	Hypertension	any	UP1
TENORMIN (atenolol)	Hypertension	any	UP1
TENORMIN (atenolol)	Angina	12 months/2 years	UP3/UP2
TENORMIN (atenolol)	Heart attack	12 months/2 years	UP3/UP2
TENUATE (diethylpropion)	Obesity	any	UP1
terazosin (HYTRIN)	Benign prostatic hypertrophy	any	UP1
terbutaline (BRETHINE, BRICANYL)	Asthma/bronchitis	any	UP1
terbutaline (BRETHINE, BRICANYL)	Emphysema	any	UP2
TERCONAZOLE	Fungal infection	any	UP1
TESTOSTERONE CYPIONATE	Hormonal treatment	any	UP1
TESTOSTERONE PROPIONATE	Hormonal treatment	any	UP1
TESTRED (methyltestosterone)	Males: hormonal treatment	any	UP1
TESTRED (methyltestosterone)	Females: Inoperable breast cancer	3 years	UP3
TETRACAINE HCL	Eye drops	any	UP1
TETRACYCLINE HCL	Antibiotic	any	UP1
THALITONE (chlorthalidone)	Hypertension	any	UP1
THALITONE (chlorthalidone)	Congestive heart failure	any	UP3
THALITONE (chlorthalidone)	Liver cirrhosis	2 years	UP2
THALITONE (chlorthalidone)	Edema related to estrogen therapy	any	UP1
THALOMID	Cancer	any	UP3
THEOPHYLLINE	Asthma	any	UP1
THEOPHYLLINE	Emphysema	any	UP2
THIAMINE HCL	Vitamin supplement	any	UP1
THIORIDAZINE HCL	Schizophrenia/psychotic disorder	any	UP1
THIOTHIXENE	Schizophrenia	any	UP1
THORAZINE (chlorpromazine HCl)	Schizophrenia/psychotic disorder	any	UP1
tiagabine (GABTRIL)	Seizures	any	UP1
TIAZAC (diltiazem)	Hypertension	any	UP1
TIAZAC (diltiazem)	Angina	12 months/2 years	UP3/UP2
TICLID (ticlopidine)	Stroke	2 years	UP3

Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
TICLID (ticlopidine)	Clot prevention after heart stent placement	12 months/2 years	UP3/UP2
ticlopidine (TICLID)	Stroke	2 years	UP3
ticlopidine (TICLID)	Clot prevention after heart stent placement	12 months/2 years	UP3/UP2
TIKOSYN (dofetilide)	Heart arrhythmia	any	UP3
TIMOLOL MALEATE OPHTHALMIC GEL FORMING	Eye drops	any	UP1
TINDAMAX	Antibiotic	any	UP1
tiotropium (SPIRIVA)	Chronic obstructive pulmonary disease (COPD)	any	UP2
TIZANIDINE HCL	Muscle relaxer	any	UP1
TOBI	Antibiotic	any	UP1
TOBRADEX	Eye drops	any	UP1
TOBRAMYCIN SULFATE	Eye drops	any	UP1
TOFRANIL (imipramine)	Depression	any	UP1
TOLNAFTATE	Dermatological treatment	any	UP1
TOPAMAX (topiramate)	Epilepsy	any	UP1
TOPAMAX (topiramate)	Migraine	any	UP1
topiramate (TOPAMAX)	Epilepsy	any	UP1
topiramate (TOPAMAX)	Migraine	any	UP1
TOPROL-XL (metoprolol)	Hypertension	any	UP1
TOPROL-XL (metoprolol)	Angina	12 months/2 years	UP3/UP2
TOPROL-XL (metoprolol)	Congestive heart failure	any	UP3
torsemide (DEMADEX)	Hypertension	any	UP1
torsemide (DEMADEX)	Liver disease	2 years	UP2
torsemide (DEMADEX)	Congestive heart failure	any	UP3
torsemide (DEMADEX)	Kidney disease	any	UP3
TOVIAZ	Overactive bladder	any	UP1
TRAMADOL HCL	Moderate to severe pain - narcotic	any	UP1
TRANDATE (labetalol)	Hypertension	any	UP1
trandolapril (MAVIK)	Hypertension	any	UP1
trandolapril (MAVIK)	Congestive heart failure	any	UP3
trandolapril/verapamil (TARKA)	Hypertension	any	UP1
TRANSDERM-SCOP	Nausea/vomiting	any	UP1
TRANXENE (clorazepate dipotassium)	Anxiety disorder	any	UP1
TRANXENE (clorazepate dipotassium)	Seizures	any	UP1
TRANXENE (clorazepate dipotassium)	Alcohol withdrawal	2 years	UP3
TRAVATAN	Eye drops	any	UP1
trazodone (DESYREL)	Depression	any	UP1
TRENTAL (pentoxifylline)	Circulation disorder	2 years	UP3
TRETINOIN	Dermatological treatment	any	UP1
TREXIMET	Migraine	any	UP1
TRIAMCINOLONE ACETONIDE	Dermatological treatment	any	UP1
triamcinolone oral inhalation (AZMACORT)	Asthma	any	UP1
triamterene/hydrochlorothiazide (DYAZIDE, MAXZIDE)	Hypertension	any	UP1

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Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
triamterene/hydrochlorothiazide (DYAZIDE, MAXZIDE)	Edema	any	UP1
triazolam (HALCION)	Insomnia	any	UP1
TRICOR (fenofibrate)	Elevated cholesterol/triglycerides	any	UP1
TRIFLUOPERAZINE HCL	Schizophrenia/anxiety	any	UP1
TRIFLURIDINE	Eye drops	any	UP1
trihexyphenidyl (ARTANE)	Parkinson's disease	2 years	UP2
TRILEPTAL (oxcarbazepine)	Seizures	any	UP1
TRILIPIX	Elevated cholesterol/triglycerides	any	UP1
TRI-LUMA	Dermatological treatment	any	UP1
TRILYTE	Constipation	any	UP1
TRIMETHOBENZAMIDE HCL	Nausea/vomiting	any	UP1
TRIMETHOPRIM	Antibiotic	any	UP1
TRIPLE ANTIBIOTIC	Dermatological treatment	any	UP1
TRIXACIN HP	Dermatological treatment	any	UP1
TROPICAMIDE	Eye drops	any	UP1
TRUSOPT	Eye drops	any	UP1
TRUVADA (emtricitabine/tenofovir)	HIV/AIDS	any	UP3
TUSNEL-HC	Cough/cold/allergies	any	UP1
TUSSI-12D	Cough/cold/allergies	any	UP1
TUSSIONEX PENNKINETIC EXTENDED RELEASE	Cough/cold/allergies	any	UP1
TYGACIL	Antibiotic	any	UP1
TYLENOL WITH CODEINE #3 (acetaminophen with codeine #3)	Pain relief - narcotic	any	UP1
UDAMIN SP	Vitamin supplement	any	UP1
ULORIC	Gout	any	UP1
ULTRACET	Pain relief - narcotic	any	UP1
UMECTA PD	Dermatological treatment	any	UP1
UNIRETIC (hydrochlorothiazide/moexipril)	Hypertension	any	UP1
UNIVASC (moexipril)	Hypertension	any	UP1
UREA	Dermatological treatment	any	UP1
URISED	Urinary antibiotic	any	UP1
UROQID #2	Urinary antibiotic	any	UP1
UROXATRAL	Benign prostatic hypertrophy	any	UP1
URSO (ursodiol)	Gallstones	any	UP1
URSO (ursodiol)	Liver cirrhosis	2 years	UP2
ursodiol (ACTIGALL, URSO)	Gallstones	any	UP1
ursodiol (ACTIGALL, URSO)	Liver cirrhosis	2 years	UP2
UTA	Urinary antibiotic	any	UP1
VALCYTE (valganciclovir)	Cytomegalovirus-AIDS	any	UP3
VALCYTE (valganciclovir)	Cytomegalovirus-organ transplant	any	UP3
valganciclovir (VALCYTE)	Cytomegalovirus-AIDS	any	UP3
valganciclovir (VALCYTE)	Cytomegalovirus-organ transplant	any	UP3
VALIUM (diazepam)	Anxiety disorder	any	UP1
VALIUM (diazepam)	Convulsive disorder/muscle spasms	any	UP1
VALIUM (diazepam)	Alcohol withdrawal	2 years	UP3

Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
VALPROIC ACID	Seizures	any	UP1
valsartan (DIOVAN)	Hypertension	any	UP1
valsartan (DIOVAN)	Congestive heart failure	any	UP3
valsartan (DIOVAN)	Treatment after heart attack	12 months/2 years	UP3/UP2
VALTREX	Cold sores/herpes/chickenpox	any	UP1
VALTURNA	Hypertension	any	UP1
VANCOGIN HCL	Antibiotic	any	UP1
VANIQA	Dermatological treatment	any	UP1
varenicline (CHANTIX)	Smoking cessation	12 months	smoking rates (UP1)
VASERETIC (enalapril/hydrochlorothiazide)	Hypertension	any	UP1
VASOTEC (enalapril)	Hypertension	any	UP1
VASOTEC (enalapril)	Congestive heart failure	any	UP3
VAZOTAN	Cough/cold/allergies	any	UP1
VAZOTUSS HC	Cough/cold/allergies	any	UP1
venlafaxine (EFFEXOR)	Depression/anxiety	any	UP1
VENTOLIN (albuterol)	Asthma	any	UP1
VERAMYST	Nasal allergy symptoms	any	UP1
verapamil (CALAN, COVERA-HS, ISOPTIN, VERELAN)	Hypertension	any	UP1
verapamil (CALAN, COVERA-HS, ISOPTIN, VERELAN)	Angina	12 months/2 years	UP3/UP2
verapamil (CALAN, COVERA-HS, ISOPTIN, VERELAN)	Arrhythmia	any	UP3
VERELAN (verapamil)	Hypertension	any	UP1
VERELAN (verapamil)	Angina	12 months/2 years	UP3/UP2
VERELAN (verapamil)	Arrhythmia	any	UP3
VERTIGOHEEL	Vertigo	any	UP1
VESICARE	Overactive bladder	any	UP1
VFEND	Fungal infection	any	UP1
VIAGRA	Erectile dysfunction	any	UP1
VICKS NYQUIL	Cough/cold/allergies	any	UP1
VICTOZA (liraglutide)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
VIGAMOX	Eye drops	any	UP1
VIMOVO	Pain relief- anti-inflammatory	any	UP1
VIREAD (tenofovir)	Hepatitis B	2 years	UP2
VIREAD (tenofovir)	HIV/AIDS	any	UP3
VIVITROL (naltrexone)	Alcohol dependence/opiate dependence	2 years	UP3
VYTORIN	Elevated cholesterol	any	UP1
VYVANSE	ADHD	any	UP1
warfarin (COUMADIN)	Clot prevention after heart valve placement	12 months/2 years	UP3/UP2
warfarin (COUMADIN)	Atrial fibrillation	any	UP3
WELCHOL (colesevelam)	Elevated cholesterol	any	UP1
WELCHOL (colesevelam)	Diabetes	any	UP1 (with no diabetic complications or diabetes-related illnesses)
WELLBUTRIN (bupropion)	Depression	any	UP1
XALATAN	Eye drops	any	UP1
XELODA (capecitabine)	Cancer	3 years	UP3

Prescription Drug Guide

Drug Name	Drug Indication or Drug Category	Rx Fill Within	Benefit Eligibility
XENADERM	Dermatological treatment	any	UP1
XENICAL	Obesity	any	UP1
XERAC AC	Dermatological treatment	any	UP1
XIBROM	Eye drops	any	UP1
XIFAXAN	Antibiotic	any	UP1
XOPENEX	Asthma	any	UP1
XPECT-AT	Cough/cold/allergies	any	UP1
XYZAL	Antihistamine	any	UP1
ZADITOR	Eye drops	any	UP1
zafirlukast (ACCOLATE)	Asthma	any	UP1
zaleplon (SONATA)	Insomnia	any	UP1
ZAROXOLYN (metolazone)	Hypertension	any	UP1
ZAROXOLYN (metolazone)	Congestive heart failure	any	UP3
ZAROXOLYN (metolazone)	Kidney disease	any	UP3
ZEGERID (omeprazole/sodium bicarbonate)	Ulcers/GERD/esophagitis	any	UP1
ZELAPAR (selegiline)	Parkinson's disease	2 years	UP2
ZEMPLAR (paricalcitol)	Kidney disease	any	UP3
ZESTORETIC (lisinopril/hydrochlorothiazide)	Hypertension	any	UP1
ZESTRIL (lisinopril)	Hypertension	any	UP1
ZESTRIL (lisinopril)	Congestive heart failure	any	UP3
ZESTRIL (lisinopril)	Heart attack	12 months/2 years	UP3/UP2
ZETIA (ezetimibe)	Elevated cholesterol	any	UP1
ZIAGEN (abacavir)	HIV/AIDS	any	UP3
zidovudine (RETROVIR)	HIV/AIDS	any	UP3
ZINC SULFATE	Mineral supplementation	any	UP1
ziprasidone (GEODON)	Schizophrenia/bipolar disorder	any	UP1
ZOCOR (simvastatin)	Elevated cholesterol	any	UP1
ZOFRAN (ondansetron)	Nausea/vomiting related to chemotherapy	3 years	UP3
zoledronic acid (RECLAST, ZOMETA)	Osteoporosis	any	UP1
ZOLOFT (sertraline)	Depression	any	UP1
zolpidem tartrate (AMBIEN)	Insomnia	any	UP1
ZOMETA (zoledronic acid)	Osteoporosis	any	UP1
ZOMIG	Migraine	any	UP1
ZONEGRAN (zonisamide)	Epilepsy	any	UP1
zonisamide (ZONEGRAN)	Epilepsy	any	UP1
ZOTANE HC	External ear infection	any	UP1
ZOVIRAX	Herpes	any	UP1
ZOVIRAX (acyclovir)	Shingles/chickenpox/genital herpes	any	UP1
ZYBAN (bupropion)	Smoking cessation	12 months	Smoker rates (UP1)
ZYLET	Eye drops	any	UP1
ZYMAR	Eye drops	any	UP1
ZYPREXA (olanzapine)	Schizophrenia/bipolar disorder	any	UP1
ZYRTEC	Antihistamine	any	UP1
ZYRTEC-D	Cough/cold/allergies	any	UP1
ZYVOX	Antibiotic	any	UP1



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About Americo

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Innovative thinking and sound investment decisions have helped us build a strong financial foundation for our business. Today, Americo Financial Life and Annuity Insurance Company is the lead company in one of the largest independent, privately held insurance groups in the United States², with over 718,000 policies, over \$35 billion of life insurance in force, and \$6.1 billion in assets for year-end 2011.³

¹Americo Life, Inc. is a holding company and is not responsible for the financial condition or contractual obligations of its affiliate insurance companies.

²"Admitted Assets, Top Life Writers-2011," A.M. Best Co., as of July 2011.

³Information is as of year end 2011 on a consolidated basis for Americo Financial Life and Annuity Insurance Company and the other life insurance subsidiaries of Americo Life, Inc., unless otherwise indicated. Information is prepared on the basis of generally accepted accounting principles (GAAP).

Important Information

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