

Performance PCS

Preferred Drug List

Performance PCS is a drug program that gives physicians, pharmacists, and patients the opportunity to select quality medications from a formulary of preferred brand-name prescriptions, when medically appropriate. A drug formulary is a list of medications we use to administer prescription benefits. Though your plan includes a formulary, it's an *open* formulary. This means that certain nonformulary drugs also may be covered; however, they would always be subject to the highest copay level.

As well as prescribing from the formulary, your health plan covers prescription drugs at three-tiered levels. The following provides a brief overview on the types of prescriptions covered and the level of cost associated with each:

- **Generics** contain the same active ingredients as brand-name drugs but will give you the most cost savings. These are always subject to the lowest copay.
- **Preferred** are brand-name drugs and will cost you more out-of-pocket expense. These would be subject to the lowest *brand-name* copay.

- **Nonpreferred** are therapeutically equivalent to the preferred drugs, but will cost you the most out-of-pocket expense. These are subject to the highest *brand-name* copay.

The primary focus of this list is to help promote the use of more economical brands, thus avoiding the highest copay when possible. To help keep your costs down, it's always a good idea to consult with your physician when a more expensive drug has been prescribed. This list is reviewed periodically by both physicians and pharmacists.

Important note

Some plans may not cover some types of drugs, such as infertility and weight loss medication, which appear on this list. Please consult your official Insurance Certificate or Summary of Plan Description details on your specific plan features, including what drugs are covered and not covered, quantity limits, days of supply limits, etc.

Questions?

If you have any questions or concerns, please call Member Services at (800) ONE-8081 or (800) 663-8081.

The following list contains brand-name drugs that are subject to the Preferred copay level. Brand-name drugs not found on this are subject to the Nonpreferred copay level. This list is in alphabetical order

A			
ACCOLATE®		ALESSE®	ARICEPT®
ACCU-CHEK™ kits and test strips		ALKERAN® TABS	ARIMIDEX®
ACCUPRIL®		ALLEGRA®	AROMASIN®
ACCURETIC™		ALLEGRA-D®	ASACOL®
ACUTANE®		ALOCRI™	ASTELIN®
ACIPHEX®		ALOMIDE®	ATROVENT®
ACLOVATE®		ALPHAGAN®	AUGMENTIN®
ACTOS®		ALPHAGAN® P	AVANDIA®
ACULAR®		ALREX™	AVELOX®
ADVAIR™ DISKUS®		ALTACE®	AVONEX®
ADVICOR™		AMARYL®	AXERT™
AGENERASE®		AMBIEN®	AZOPT®
AGGRENOLX®		ANDRODERM®	AZULFIDINE EN-TABS®
AGRYLIN®		ANDROGEL®	
ALAMAST™		ANTABUSE®	B
ALDARA™		ARAVA™	BACTROBAN®
			BENZAMYCIN®

This list may be subject to change. Members, please call our toll-free (800) number on your ID card for the most up-to-date listing.

BETAPACE AF™
BETASERON®
BETIMOL®
BIAXIN®
BIAXIN® XL

C

CAFERGOT®
CANASA®
CAPITROL®
CARACT™
CARBATROL®
CASODEX®
CATAPRES-TTS®
CEDAX®
CEENU®
CELEBREX®
CELEXA™
CELLCEPT® CAPS
CERUMENEX®
CETROTIDE™
CHEMSTRIP BG® test strips
CILOXAN® ophth ointment
CIPRO® (except 100MG tabs)
CIPRO® HC OTIC
CLARINEX®
CLARITIN®
CLARITIN-D® 12 HOUR
CLARITIN-D® 24 HOUR
CLEOCIN® vaginal cream & supp
CLEOCIN T® lotion
CODEINE
COLESTID®
COMBIPATCH™
COMBIVENT®
COMBIVIR®
COMTAN®
CONCERTA™
CONDYLOX®
COPAXONE®
CORDRAN®
COREG®
CORTEF®
CORTIFOAM®
CORTISPORIN®
COZAAR®
CRIXIVAN®
CUPRIMINE®
CUTIVATE®
CYCLESSA™
CYTOTEC®
CYTOVENE®
CYTOXAN® TABS

D

D.H.E. 45®
DANTRIUM®
DAPSONE
DDAVP®
DEPAKOTE®
DEPAKOTE® ER
DEPO-PROVERA® (150 MG/ML only)
DETROL®
DETROL® LA
DEXEDRINE® SPANSULE®
DIAMOX® SEQUELS®
DIASTAT®
DIDRONEL®
DIFLUCAN®
DIFLUCAN® 150 oral
DILANTIN® INFATABS®
DIOVAN®
DIOVAN HCT®
DIPENTUM®
DIPROLENE®
DIPROLENE AF®
DOSTINEX®
DOVONEX®
DUONEB™
DURAGESIC®

E

EDEX®
EFUDEX®
ELMIRON®
ELOCON®
EMCYT®
EMLA®
ENBREL®
ENTOCORT™ EC
EPIPEN®
EPIPEN® JR.
EPIVIR®
EPIVIR-HBV®
ERY-TAB®
ESCLIM™
ESKALITH CR®
ESTRADERM®
ESTRATEST®
ESTRING®
ESTROSTEP® FE
ETHMOZINE®
EULEXIN®
EURAX®
EVISTA®
EVOXAC™
EXELON®

F

FARESTON®
FEMARA®
FEMHRT®
FERTINEX®
FLONASE®
FLORINEF®
FLOVENT®
FLOVENT® ROTADISK®
FLOXIN® OTIC
FLUOROPLEX®
FOLLISTIM®
FOLLISTIM® ANTAGON KIT™
FORTOVASE®
FOSAMAX®

G

GABITRIL®
GANTRISIN®
GLEEVEC™
GLUCAGON
GLUCOPHAGE®
GLUCOPHAGE® XR
GLUCOTROL XL®
GLUCOVANCE®
GONAL-F®

H

HELIDAC®
HEXALEN®
HIVID®
HUMALOG®
HUMALOG® MIX 75/25™
HUMATROPE®
HUMULIN® 50/50
HUMULIN® 70/30
HUMULIN® L
HUMULIN® N
HUMULIN® R
HUMULIN® U
HYDREA®
HYZAAR®

I

IMITREX®
IMURAN® TABS
INDERAL® LA
INFERGEN®
INTAL®
INTRON® A

K

KALETRA™
KEPPRA™
KLARON®
KYTRIL®

L

LAC-HYDRIN®
 LAMICTAL®
 LAMISIL®
 LANTUS®
 LARIAM®
 LESCOL®
 LESCOL® XL
 LEUKERAN®
 LEVAQUIN®
 LIDODERM®
 LIPITOR®
 LITHOBID®
 LIVOSTIN®
 LOESTRIN® 1.5/30
 LOESTRIN® 1/20
 LOESTRIN® FE 1.5/30
 LOESTRIN® FE 1/20
 LOPROX®
 LOTEMAX™
 LOTREL®
 LOVENOX®
 LUMIGAN™
 LUNELLE™
 LUPRON®
 LUPRON DEPOT®
 LUPRON DEPOT-PED®
 LYSODREN®

M

MACROBID®
 MALARONE™
 MATULANE®
 MAVIK®
 MAXAIR™ autohaler
 MAXALT®
 MAXALT-MLT®
 MEGACE®
 MENTAX®
 MEPHYTON®
 MERIDIA®
 MESTINON®
 MESTINON® TIMESPAN®
 METADATE™ ER
 METADATE CD®
 METHERGINE®
 METROGEL®
 METROGEL-VAGINAL®
 MIACALCIN®
 MICRO-K®
 MICRONOR®
 MIGRANAL®
 MIRALAX®

MIRAPEX®
 MIRCETTE®
 MODICON®
 MONISTAT-DERM®
 MUSE®
 MYAMBUTOL®
 MYCELEX® TROCHE
 MYLERAN®
 MYLOCEL™

N

NARDIL®
 NASACORT®
 NASACORT® AQ
 NASONEX®
 NEORAL®
 NEUPOGEN®
 NEURONTIN®
 NEXIUM™
 NIASPAN®
 NILANDRON®
 NIZORAL® shampoo
 NOLVADEX®
 NORITATE™
 NOROXIN®
 NOR-QD®
 NORVASC®
 NORVIR®
 NOVOLIN® 70/30
 NOVOLIN® L
 NOVOLIN® N
 NOVOLIN® R
 NOVOLOG®
 NULYTELY®
 NUTROPIN® / NUTROPIN AQ®
 NUTROPIN DEPOT™

O

OCUFLOX®
 OMNICEF®
 ONE TOUCH® kits and test strips
 OPTIVAR™
 ORTHO-CEPT®
 ORTHO-CYCLEN®
 ORTHO EVRA™
 ORTHO-NOVUM® 1/35
 ORTHO-NOVUM® 1/50
 ORTHO-NOVUM® 10/11
 ORTHO-NOVUM 7/7/7
 ORTHO TRI-CYCLEN®
 OVIDE®
 OVIDREL®
 OXISTAT®
 OXSORALEN-ULTRA®

OXYCONTIN®**P**

PARLODEL®
 PARNATE®
 PATANOL®
 PAXIL®
 PEDIAPRED®
 PEG-INTRON™
 PENTASA®
 PERGONAL®
 PERIOSTAT®
 PERMAX®
 PHOSLO®
 PLAN B®
 PLAVIX®
 PLETAL®
 PLEXION™
 PRANDIN®
 PRECOSE®
 PRED-G®
 PRED MILD®
 PREMARIN®
 PREMPHASE®
 PREMPRO™
 PREVEN™
 PREVPAC®
 PRILOSEC®
 PROAMATINE®
 PROCANBID®
 PROCRIT®
 PROCTOFOAM® HC
 PROGRAF® CAPS
 PROMETRIUM®
 PROSCAR®
 PROTOPIC®
 PROTROPIN®
 PROVENTIL® HFA
 PROVENTIL® REPETABS®
 PROVIGIL®
 PULMICORT TURBUHALER®
 PULMICORT RESPULES™
 PULMOZYME®
 PURINETHOL®

R

RAPAMUNE®
 REBETOL®
 REBETRON™
 REGRANEX®
 REMERON®
 REMERON SOLTAB®
 REMINYL®
 RENAGEL®

REQUIP®
RESCRIPTOR®
RESCULA®
RETIN-A® MICRO®
RETROVIR®
RHEUMATREX®
RHINOCORT®
RHINOCORT® AQUA™
RIDAURA®
RISPERDAL®
ROCALTROL®
RONDEC® (1MG carbinoxamine /
15MG pseudoephedrine per ML
drops only)
ROWASA®

S

SAIZEN®
SALAGEN®
SANDIMMUNE® caps & solution
SARAFEM™
SEREVENT®
SEREVENT® DISKUS®
SEROQUEL®
SINGULAIR®
SKELAXIN®
SONATA®
SORIATANE®
SPECTAZOLE®
STARLIX®
SUSTIVA™
SYNAREL®
SYNTHROID®

T

TAMBOCOR™
TAMIFLU™
TAMOXIFEN
TARGRETIN® CAPS
TARKA®
TAZORAC®

TEGRETOL® -XR
TEMODAR®
TERAZOL® 3/7
TESLAC®
TESTODERM®
THEO-24®
THIOGUANINE®
TIAZAC®
(360MG & 420MG caps only)
TILADE®
TOBI®
TOBRADEX®
TOBRADEX® ophthalmic ointment
TOPAMAX®
TOPROL-XL®
TRIAZ® 6% and 10%
TRICOR®
TRILEPTAL®
TRI-NORINYL®
TRIZIVIR™

U

ULTRAVATE®
UNIPHYL®
UNIRETIC®
UNIVASC®
URECHOLINE®
URSO®

V

VAGIFEM®
VALCYTE®
VALTRESX®
VANCERIL®
VANCOCIN®
VEPESID® CAPS
VIAGRA®
VIDEX®
VIDEX® EC
VIOXX®
VIRA-A®

VIRACEPT®
VIRAMUNE®
VIREAD™
VISICOL™
VIVELLE®
VIVELLE-DOT™
VOLMAX®
VOLTAREN™ ophthalmic

W

WELCHOL™
WELLBUTRIN SR®

X

XELODA®
XENICAL®
XOPENEX®

Y

YASMIN®

Z

ZADITOR™
ZANAFLEX®
ZARONTIN®
ZAROXOLYN®
ZERIT®
ZESTORETIC®
ZESTRIL®
ZIAGEN®
ZITHROMAX®
ZOFRAN®
ZOLOFT®
ZOMIG®
ZOMIG-ZMT®
ZONEGRAN®
ZOVIRAX® ointment
ZYBAN®
ZYPREXA®
ZYVOX™