



2008 Express Scripts National Preferred Formulary for the UFT Welfare Fund

The following is a list of the most commonly prescribed drugs. It represents an abbreviated version of the drug list (formulary) that is at the core of your prescription-drug benefit plan.

PLEASE NOTE: The symbol * next to a drug signifies that it may move to nonformulary status when the generic becomes available during the year. Not all the drugs listed are covered by the UFT Welfare Fund prescription-drug benefit program; check your benefit materials for the specific drugs covered and the copayment information.

A
ABILIFY (excluding Discmelt & solution)
acebutolol
acetaminophen w/codeine
acetazolamide
ACTIVELLA
ACTONEL, with calcium
ACTOPLUS MET [HP]
ACTOS [HP]
ACULAR (excluding LS & PF)
acyclovir
ADVAIR DISKUS, HFA
ADVICOR [STP]
AGGRENOX
albuterol
ALLEGRA-D*
ALORA
ALPHAGAN P
ALTACE [STP]
amantadine
AMBIEN CR [STP]
amnestem
aminophylline
amitriptyline
amlodipine besylate
ammonium lactate
amox tr/potassium clavulanate
amoxicillin
amphetamine salt combo
anagrelide
ANALPRAM-HC*
ANDRODERM [PA]
ANDROGEL [PA]
antipyrine w/benzocaine
apri
aranelle
ARANESP [CS-INJ] [PA]
ARICEPT
ASACOL
ASCENSIA AUTODISC, BREEZE/2 [HP]
ASCENSIA CONTOUR SYSTEM [HP]
ASCENSIA DEX2, ELITE/XL [HP]
ASCENSIA MICROFILL [HP]
ASTELIN
atenolol, -chlorthalidone
atropine sulfate
AUGMENTIN XR
AVANDAMET [HP]
AVANDARYL [HP]
AVANDIA [HP]
AVELOX
aviane
AVINZA
AXID solution only
azathioprine
azithromycin

cefdinir
cefepodoxime
cefprozil
cefuroxime
CELEBREX [STP]
CELLCEPT [PA]
cephalexin
cesa
CETROTIDE [CS-INJ]
chlorzoxazone
cholestyramine
choline mag trisalicylate
chorionic gonadotropin [CS-INJ]
ciclopirox
cilostazol
cimetidine
CIPRODEX*
ciprofloxacin, er
citalopram
claravis
clarithromycin, er
CLIMARA PRO
clindamycin phosphate
clobetasol propionate
clomiphene citrate
clonidine hcl
clotrimazole troche
COLAZAL*
colestipol
COMBIPATCH
COMBIVENT
CONCERTA*
COPAXONE [CS-INJ]
COSOPT*
COZAAR [STP]
CREON
CRESTOR [STP]
cromolyn sodium
cryselle
cyclobenzaprine hcl
cyclosporine, modified
CYMBALTA [SNRI] [STP]

fentanyl citrate
fexofenadine
FINACEA
finasteride
FLOMAX
FLOVENT DISKUS, HFA
fluconazole [PA]
flucanone
fluorouracil
fluoxetine hcl
flurazepam
fluticasone nasal spray
fluvoxamine maleate
folic acid
FOLLISTIM AQ [CS-INJ]
FORADIL
FORTEO [CS-INJ] [PA]
fortical
FOSAMAX, PLUS D*
fosinopril, /hctz

leena
leflunomide
lessina
leucovorin [PICA]
leuprolide acetate [CS-INJ]
LEVAQUIN
LEVEMIR, FLEXPEN [INJ] [HP]
LEVITRA [PA]
levora
levothyroxine sodium
LEVOXYL
LEXAPRO [STP]
LIPITOR [STP]
lisinopril, /hctz
LOTEMAX
LOTREL* [STP]
lovastatin
LOVAZA
low-ogestrel
LUMIGAN
lutea
LYRICA [STP]

ONETOUCH
ULTRAMINI [HP]
orphenadrine citrate
ORTHO
TRI-CYCLEN LO*
oxybutynin, er
oxycodone w/acetaminophen
OXYCONTIN
OXYTROL

STRATTERA
SULAR* [STP]
sulfacetamide sodium
sulfasalazine
SYMBICORT
SYMBYAX
SYMLIN [INJ] [HP]

KEY

The symbol [CS] next to a drug name indicates that a medication is available through the Curascript Pharmacy.

The symbol [CS-INJ] next to a drug name indicates that the injectable form of this medication is available through the Curascript Pharmacy.

The symbol [G] next to a drug name indicates that a generic is available for at least one or more strengths of the brand-name medication. Most generics are available at the lowest copayment.

The symbol [HP] next to a drug name indicates that this medication is covered through your Health Plan.

The symbol [INJ] next to a drug name indicates that the drug is available in injectable form only.

The symbol [PA] next to a drug name indicates that this medication is subject to the Prior Authorization Program.

The symbol [PICA] next to a drug name indicates that this drug should be obtained through the NYC PICA program.

The symbol [SNRI] stands for Serotonin-Norepinephrine Reuptake Inhibitor.

The symbol [STP] next to a drug name indicates that the medication is part of the Step Therapy Program.

For the member: Generic medications contain the same active ingredients as their corresponding brand-name medications, although they may look different in color or shape. They have been FDA-approved under strict standards.

For the physician: Please prescribe preferred products and allow generic substitutions when medically appropriate. Thank you.

Brand-name drugs are listed in CAPITAL letters.

Generic drugs are listed in lower case letters.

EXAMPLES OF NONFORMULARY MEDICATIONS WITH SELECTED FORMULARY ALTERNATIVES

The following is a list of some nonformulary brand-name medications with examples of selected alternatives that are on the formulary. Column 1 lists examples of nonformulary medications. Column 2 lists some alternatives that can be prescribed. Thank you for your compliance.

NONFORMULARY

ACCOLATE [STP]
ACCU-CHEK [HP]
ACEON [STP]
ACIPHEX [STP]
AEROBID, M
ALAMAST
ALOCRIL
ALREX
ALTOPREV [STP]

AMBIEN [STP]

AMERGE

ANGELIQ

ANTARA

AZEMET [PICA]

APIDRA [HP]

ASMANEX

ATACAND [STP]

ATACAND HCT [STP]

AVALIDE [STP]

AVAPRO [STP]

AVITA [PA]

AVODART

AXERT

AZELEX

AZMACORT

AZOPT

BECONASE AQ

BENICAR [STP]

BENICAR HCT [STP]

BENZAMYCIN, PAK

BETIMOL

BIAXIN, XL

BONIVA tabs

CARDENE SR [STP]

CARDIZEM LA [STP]

CEDAX

CENESTIN

CIALIS [PA]

CIPRO HC

COVERA-HS [STP]

CYCLESSA

DETROL, LA

DIPENTUM

DITROPAN XL

DIVIGEL

DYNACIRC [STP]

ELESTAT

ELESTRIN

ENJUVA

EPOGEN [CS-INJ] [PA]

ESTRADERM

ESTRASORB

ESTROGEL

FACTIVE

FAMVIR

FEM HRT

FEMTRACE

FML FORTE

FOCALIN, XR

FOSRENOL

FREESTYLE [HP]

FROVA

GEODON

HELIDAC

HYALGAN [CS-INJ] [HP]

INNOPRAN XL

INVEGA

IOPIDINE

ISTALOL

LAMISIL tabs [PA]

FORMULARY ALTERNATIVE

SINGULAIR [STP]

ASCENSIA/GLUCOMETER [HP], ONETOUCH [HP]

generic ace inhibitor, ALTACE [STP]

omeprazole, NEXIUM [STP], PREVACID [STP]

FLOVENT DISKUS/HFA, PULMICORT, QVAR

cromolyn sodium, PATADAY, PATANOL

cromolyn sodium, PATADAY, PATANOL

generic steroids

lovastatin, pravastatin, simvastatin, CRESTOR [STP],

LIPITOR [STP], VYTORIN [STP]

zolpidem tartrate

IMITREX*, ZOMIG/ZMT

ACTIVEVILLA, PREMPRO/PREMPHASE

fenofibrate, TRICOR

ondansetron [PICA], KYTRIL* (soln, tabs) [PICA]

HUMALOG [HP], NOVLOG [HP]

FLOVENT DISKUS/HFA, PULMICORT, QVAR

COZAAR [STP], DIOVAN [STP]

DIOVAN HCT [STP], HYZAAR [STP]

DIOVAN HCT [STP], HYZAAR [STP]

COZAAR [STP], DIOVAN [STP]

tretinoin [PA], DIFFERIN [PA]

finasteride, FLOMAX, UROXATRAL

IMITREX*, ZOMIG/ZMT

tretinoin [PA], DIFFERIN [PA], FINACEA

FLOVENT DISKUS/HFA, PULMICORT, QVAR

brimonidine tartrate, ALPHAGAN P, COSOPT*, TRUSOPT*

fluticasone, NASACORT AQ, NASONEX

COZAAR [STP], DIOVAN [STP]

DIOVAN HCT [STP], HYZAAR [STP]

erythromycin/benzoyl peroxide

betaxolol, timolol, other generics

clarithromycin, er

ACTONEL, FOSAMAX*

amlodipine, felodipine er, nifedipine er, DYNACIRC CR* [STP],

SULAR* [STP]

diltiazem er

amox tr/potassium clavulanate, cefdinir, AUGMENTIN XR

MENEST, PREMARIN

LEVITRA [PA]

CIPRODEX*

verapamil er, VERELAN PM* [STP]

cesia, velivet

oxybutynin/er, ENABLEX, VESICARE

ASACOL, COLAZAL*, PENTASA

oxybutynin cl er

generic patches, ALORA, VIVELLE/-DOT

amlodipine, felodipine er, nifedipine er, DYNACIRC CR* [STP],

SULAR* [STP]

cromolyn sodium, PATADAY, PATANOL

generic patches, ALORA, VIVELLE/-DOT

MENEST, PREMARIN

ARANESP [CS-INJ] [PA], PROCIT [CS-INJ] [PA]

generic patches, ALORA, VIVELLE/-DOT

generic patches, ALORA, VIVELLE/-DOT

generic patches, ALORA, VIVELLE/-DOT

generic patches, ALORA, VIVELLE/-DOT

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NONFORMULARY

LANTUS

cartridges, solostar [HP]

LESCOL, XL [STP]

LOFIBRA

LUNESTA [STP]

MAXAIR AUTOHALER

MAXALT, MLT

MENOSTAR

METADATE CD

MICARDIS [STP]

MICARDIS HCT [STP]

NASAREL

NEVANAC

NORDITROPIN [CS-INJ] [PA]

NOROXIN

NORVASC [STP]

NUVARING

OMNICEF

OMNITROPE [CS-INJ] [PA]

OPTIVAR

ORTHO EVRA

ORTHOVISG [CS-INJ] [HP]

OVIDREL [CS-INJ]

PAXIL CR [STP]

PEG-INTRON, REDIPEN

[CS-INJ]

PRECISION QID, PCX [HP]

PREFEST

PRIOLOSEC [STP]

PROTONIX [STP]

PROTROPIN [CS-INJ] [PA]

PROZAC WEEKLY [STP]

PYLERA

QUIXIN

RELENZA

RELPAX

RESTORIL

RETIN-A, MICRO [PA]

RHINOCORT AQUA

RITALIN LA

SAIZEN [CS-INJ] [PA]

SANCTURA

SEASONIQUE

SKELID

SOFTACT [HP]

SONATA [STP]

SPECTRACEF

SYNTHROID

SYNVISC [CS-INJ] [HP]

TACLONEX

TESTIM [PA]

TEVETEN [STP]

TEVETEN HCT [STP]

TEV-TROPIN [CS-INJ] [PA]

TOBRADEX

TRAVATAN, Z

TRIGLIDE

VERAMYST

VEXOL

VIAGRA [PA]

VYVANSE

XIBROM

ZEGERID [STP]

ZIANA [PA]

ZOFRAN, ODT [PICA]

FORMULARY ALTERNATIVE

LANTUS vials [HP], LEVEMIR [HP]

lovastatin, pravastatin, simvastatin, CRESTOR [STP],

LIPITOR [STP], VYTORIN [STP]

fenofibrate, TRICOR

zolpidem tartrate, AMBIEN CR [STP]

albuterol, PROAIR HFA, PROVENTIL HFA, VENTOLIN HFA,

XOPENEX HFA

IMITREX*, ZOMIG/ZMT

generic patches, ALORA, VIVELLE/-DOT

methylphenidate, CONCERTA*

COZAAR [STP], DIOVAN [STP]

DIOVAN HCT [STP], HYZAAR [STP]

fluticasone, NASACORT AQ, NASONEX

ACULAR (non LS/PF), VOLTAREN OPTH.

GENOTROPIN [CS-INJ] [PA], HUMATROPE [CS-INJ] [PA],

NUTROPIN/AQ [CS-INJ] [PA]

ciprofloxacin/er, ofloxacin, AVELOX, LEVAQUIN

amlodipine besylate

ORTHO TRI-CYCLEN LO*, YASMIN, YAZ

cefdinir

GENOTROPIN [CS-INJ] [PA], HUMATROPE [CS-INJ] [PA],

NUTROPIN/AQ [CS-INJ] [PA]

cromolyn sodium, PATADAY, PATANOL

ORTHO TRI-CYCLEN LO* YASMIN, YAZ

supartz [CS-INJ] [HP], EUFLEXXA [CS-INJ] [HP]

chorionic gonadotropin [CS-INJ], NOVAREL [CS-INJ]

paroxetine (immediate release), citalopram, fluoxetine (daily),

sertraline, LEXAPRO [STP]

PEGASYS [CS-INJ]

ASCENSIA/GLUCOMETER [HP], ONETOUCH [HP]

ACTIVEVILLA, PREMPRO/PREMPHASE

omeprazole

omeprazole, NEXIUM [STP], PREVACID [STP]

GENOTROPIN [CS-INJ] [PA], HUMATROPE [CS-INJ] [PA],