

## Prior Authorization PDL Implementation Schedule

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| Item Nbr | Descriptive Therapeutic Class                        | Drugs on PDL                                            | Drugs which Require PA          | Effective Date:<br>October 1, 2003 |
|----------|------------------------------------------------------|---------------------------------------------------------|---------------------------------|------------------------------------|
| 6        | <b>DERMATOLOGY</b>                                   |                                                         |                                 |                                    |
|          | <b>Antifungals - Topical</b>                         | Clotrimazole                                            | Butenafine (Mentax®)            |                                    |
|          |                                                      | Clotrimazole/Betamethasone                              | Ciclopirox (Loprox®)            |                                    |
|          |                                                      | Ketoconazole                                            | Ciclopirox (Penlac®)            |                                    |
|          |                                                      | Ketoconazole (Nizoral Shampoo - Rx ONLY)                | Econazole (Spectazole®)         |                                    |
|          |                                                      | Miconazole Nitrate                                      | Oxiconazole (Oxistat®)          |                                    |
|          |                                                      | Miconazole/HC (Fungoid HC) Discontinued                 | Terbinafine (Lamisil®)          |                                    |
|          |                                                      | Naftifine (Naftin®)                                     |                                 |                                    |
|          |                                                      | Nystatin                                                |                                 |                                    |
|          |                                                      | Nystatin w/ Triamcinolone                               |                                 |                                    |
|          |                                                      | Sodium Thiosulfate/Salicylate (Versiclear and Generics) |                                 |                                    |
|          |                                                      | Sulconazole (Exelderm)                                  |                                 |                                    |
|          | <b>Atopic Dermatitis</b>                             | Pimecrolimus (Elidel®)                                  | NONE                            |                                    |
|          | <b>Immunomodulators</b>                              | Tacrolimus (Protopic®)                                  |                                 |                                    |
|          |                                                      |                                                         |                                 |                                    |
| 7        | <b>DIABETES</b>                                      |                                                         |                                 |                                    |
|          | <b>Hypoglycemics, Alpha - Glucosidase Inhibitors</b> | Acarbose (Precose®)                                     | NONE                            |                                    |
|          |                                                      | Miglitol (Glyset®)                                      |                                 |                                    |
|          |                                                      |                                                         |                                 |                                    |
|          | <b>Hypoglycemics, Meglitinides</b>                   | Nateglinide (Starlix®)                                  | NONE                            |                                    |
|          |                                                      | Repaglinide (Prandin®)                                  |                                 |                                    |
|          |                                                      |                                                         |                                 |                                    |
|          | <b>Hypoglycemics, Metformin Containing</b>           | Glyburide/Metformin (Glucovance®)                       | Glipizide/Metformin (Metaglip®) |                                    |
|          |                                                      | Metformin                                               | Metformin XR (Glucophage XR®)   |                                    |
|          |                                                      | Rosiglitazone/Metformin (Avandamet®)                    |                                 |                                    |
|          |                                                      |                                                         |                                 |                                    |
|          | <b>Hypoglycemics, Sulfonylureas</b>                  | Acetohexamide                                           | NONE                            |                                    |
|          |                                                      | Chlorpropamide                                          |                                 |                                    |
|          |                                                      | Glimepiride (Amaryl®)                                   |                                 |                                    |
|          |                                                      | Glipizide                                               |                                 |                                    |
|          |                                                      | Glipizide XL (Glucotrol XL®)                            |                                 |                                    |
|          |                                                      | Glyburide                                               |                                 |                                    |
|          |                                                      | Glyburide Extended Release                              |                                 |                                    |
|          |                                                      | Tolazamide                                              |                                 |                                    |
|          |                                                      | Tolbutamide                                             |                                 |                                    |
|          |                                                      |                                                         |                                 |                                    |
|          | <b>Hypoglycemics, Thiazolidinediones (TZDs)</b>      | Pioglitazone (Actos®)                                   | NONE                            |                                    |
|          |                                                      | Rosiglitazone (Avandia®)                                |                                 |                                    |
|          |                                                      |                                                         |                                 |                                    |
|          |                                                      |                                                         |                                 |                                    |
|          |                                                      |                                                         |                                 |                                    |
|          |                                                      |                                                         |                                 |                                    |
|          |                                                      |                                                         |                                 |                                    |
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| 8        | <b>DIGESTIVE DISORDERS cont'</b>               |                                                             |                                           |                                    |
|          | <b>ULCERATIVE COLITIS</b>                      |                                                             |                                           |                                    |
|          | <b>Ulcerative Colitis Agents</b>               | Mesalamine (Asacol®)                                        | Balsalazide (Colazal®)                    |                                    |
|          |                                                | Mesalamine (Pentasa®) - Pediatric only (Under 21 years old) | Mesalamine (Pentasa®) - Over 21 years old |                                    |
|          |                                                | Olsalazine (Dipentum®)                                      | Mesalamine (Rowasa®)                      |                                    |
|          |                                                | Sulfasalazine (Generic)                                     |                                           |                                    |
| 9        | <b>GROWTH DEFICIENCY</b>                       |                                                             |                                           |                                    |
|          | <b>Growth Hormones</b>                         | Somatropin (Nutropin®)                                      | Somatrem (Protropin®)                     |                                    |
|          |                                                | Somatropin (Nutropin AQ®)                                   | Somatropin (Genotropin®)                  |                                    |
|          |                                                | Somatropin (Nutropin Depot)                                 | Somatropin (Humatrope®)                   |                                    |
|          |                                                | Somatropin (Serostim®)                                      | Somatropin (Norditropin®)                 |                                    |
|          |                                                |                                                             | Somatropin (Saizen®)                      |                                    |
| 10       | <b>HEART DISEASE</b>                           |                                                             |                                           |                                    |
|          | <b>HYPERLIPIDEMIA</b>                          |                                                             |                                           |                                    |
|          | <b>Antihyperlipidemic Agents - Non Statins</b> | Cholestyramine                                              | Colesevelam (Welchol®)                    |                                    |
|          |                                                | Clofibrate                                                  | Exetimibe (Zetia)                         |                                    |
|          |                                                | Colestipol (Colestid®)                                      |                                           |                                    |
|          |                                                | Fenofibrate (Tricor®)                                       |                                           |                                    |
|          |                                                | Gemfibrozil                                                 |                                           |                                    |
|          |                                                | Niacin ER (Niaspan®)                                        |                                           |                                    |
|          |                                                | Niacin ER/Lovastatin (Advicor®)                             |                                           |                                    |
|          |                                                | Cholestyramine/Aspartane                                    |                                           |                                    |
|          | <b>Statins</b>                                 | Fluvastatin (Lescol®)                                       | Atorvastatin (Lipitor®)                   |                                    |
|          |                                                | Fluvastatin XL (Lescol XL®)                                 | Pravastatin (Pravachol®)                  |                                    |
|          |                                                | Lovastatin                                                  |                                           |                                    |
|          |                                                | Lovastatin ER (Altacor®)                                    |                                           |                                    |
|          |                                                | Simvastatin (Zocor®)                                        |                                           |                                    |
|          |                                                |                                                             |                                           |                                    |
|          | <b>HYPERTENSION</b>                            |                                                             |                                           |                                    |
|          | <b>ACE Inhibitors</b>                          | Benazepril (Lotensin®)                                      | Perindopril (Aceon®)                      |                                    |
|          |                                                | Benazepril/HCTZ (LotensinHCT®)                              | Quinapril (Accupril®)                     |                                    |
|          |                                                | Captopril                                                   | Quinapril/HCTZ (Accuretic®)               |                                    |
|          |                                                | Captopril/HCTZ                                              | Ramipril (Altace®)                        |                                    |
|          |                                                | Enalapril                                                   |                                           |                                    |
|          |                                                | Enalapril/HCTZ                                              |                                           |                                    |
|          |                                                | Fosinopril (Monopril®)                                      |                                           |                                    |
|          |                                                | Fosinopril/HCTZ (Monopril-HCT®)                             |                                           |                                    |
|          |                                                | Lisinopril                                                  |                                           |                                    |
|          |                                                | Lisinopril/HCTZ                                             |                                           |                                    |
|          |                                                | Moexipril (Univasc®)                                        |                                           |                                    |
|          |                                                | Moexipril/HCTZ (Uniretic®)                                  |                                           |                                    |
|          |                                                | Trandolapril (Mavik®)                                       |                                           |                                    |

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| 10       | HEART DISEASE cont'<br>HYPERTENSION                          |                                                                                                                                                                                                   |                                                                                                                                                                                                                            |                                    |
|          | ACE Inhibitors/Calcium Channel Blockers Combination Products | Amlodipine/Benazepril (Lotrel®)<br>Verapamil SR/Trandolapril (Tarka®)                                                                                                                             | Felodipine/Enalapril (Lexxel®)                                                                                                                                                                                             |                                    |
|          | Alpha Adrenergic Blocking Agents - refer to UROLOGY          |                                                                                                                                                                                                   |                                                                                                                                                                                                                            |                                    |
|          | Angiotensin II Receptor Blockers (ARBS)                      | Irbesartan (Avapro®)<br>Irbesartan/HCTZ (Avalide®)<br>Olmesartan (Benicar®)<br>Telmisartan (Micardis®)<br>Telmisartan/HCTZ (Micardis HCT®)<br>Valsartan (Diovan®)<br>Valsartan/HCTZ (Diovan HCT®) | Candesartan (Atacand®)<br>Candesartan/HCTZ (Atacand HCT®)<br>Eprosartan (Teveten®)<br>Eprosartan/HCTZ (Teveten HCT®)<br>Losartan (Cozaar®)<br>Losartan/HCTZ (Hyzaar®)                                                      |                                    |
|          | Beta Adrenergic Receptor Blocking Agents                     | Acebutolol<br>Atenolol<br>Betaxolol<br>Bisoprolol<br>Carvedilol (Coreg®)<br>Labetalol<br>Metoprolol<br>Metoprolol XL (Toprol XL)<br>Nadolol<br>Pindolol<br>Propanolol<br>Sotalol<br>Timolol       | Carteolol (Cartol®)<br>Penbutolol (Levitol®)<br>Propranolol LA (Inderal LA®)<br>Sotalol (Betapace AF®)                                                                                                                     |                                    |
|          | Calcium Channel Blockers                                     | Diltiazem<br>Diltiazem ER<br>Diltiazem ER (Cardizem LA)<br>Felodipine (Plendil®)<br>Nicardipine<br>Nifedipine<br>Nifedipine SR<br>Nisoldipine (Sular®)<br>Verapamil<br>Verapamil SR               | Amlodipine (Norvasc®)<br>Bepridil (Vasacor®)<br>Isradipine (Dynacirc®)<br>Isradipine SR (Dynacirc CR®)<br>Nicardipine SR (Cardene SR®)<br>Nimodipine (Nimotop®)<br>Verapamil ER (Covera HS®)<br>Verapamil ER (Verelan PM®) |                                    |
|          | INTERMITTENT CLAUDICATION AGENTS                             |                                                                                                                                                                                                   |                                                                                                                                                                                                                            |                                    |
|          | Intermittent Claudication Agents                             | Pentoxifylline                                                                                                                                                                                    | Cilostazol (Pletal®)                                                                                                                                                                                                       |                                    |

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| 10       | HEART DISEASE cont'                        |                                                                       |                                         |                                    |
|          | PLATELET AGGREGATION INHIBITORS            |                                                                       |                                         |                                    |
|          | Platelet Aggregation Inhibitors            | Aspirin/Dipyridamole ER (Aggrenox®)                                   | Ticlopidine                             |                                    |
|          |                                            | Clopidogrel (Plavix®)                                                 |                                         |                                    |
|          |                                            | Dipyridamole                                                          |                                         |                                    |
|          |                                            |                                                                       |                                         |                                    |
|          | ANTICOAGULANTS, INJECTABLES                |                                                                       |                                         |                                    |
|          | Anticoagulants, Injectable                 | Dalteparin (Fragmin®)                                                 | Enoxaparin (Lovenox®) Over 21 years old |                                    |
|          |                                            | Fondaparinux (Arixtra®)                                               | Tinzaparin (Innohep®)                   |                                    |
|          |                                            | Enoxaparin (Lovenox®) - Pediatric use only (under 21 years old)       |                                         |                                    |
|          |                                            |                                                                       |                                         |                                    |
| 11       | HEMATOLOGIC AGENTS                         |                                                                       |                                         |                                    |
|          | HEMATOPOIETIC AGENTS                       |                                                                       |                                         |                                    |
|          | Erythropoietins                            | Epoetin alfa (Epogen;Procrit®)                                        | NONE                                    |                                    |
|          |                                            | Darbepoetin alfa (Aranesp®) - Children and Adults                     |                                         |                                    |
|          |                                            |                                                                       |                                         |                                    |
|          | Anticoagulants - refer to HEART DISEASE    |                                                                       |                                         |                                    |
|          |                                            |                                                                       |                                         |                                    |
|          |                                            |                                                                       |                                         |                                    |
| 12       | HEMODIALYSIS                               |                                                                       |                                         |                                    |
|          | Phosphate Binders                          | Calcium Acetate (PhosLo®)                                             | NONE                                    |                                    |
|          |                                            | Magnesium Carbonate, Calcium Carbonate, Folic Acid (Magnebind 400 Rx) |                                         |                                    |
|          |                                            | Sevelamer (RenaGel®)                                                  |                                         |                                    |
|          |                                            |                                                                       |                                         |                                    |
| 13       | HORMONE THERAPY                            |                                                                       |                                         |                                    |
|          | Contraceptives                             | <u>MONOPHASIC</u>                                                     | <u>MONOPHASIC</u>                       |                                    |
|          | All covered contraceptives are on the PDL. | Alesse; Apri; Aviane                                                  | NONE                                    |                                    |
|          |                                            | Brevicon                                                              |                                         |                                    |
|          |                                            | Demulen; Desogen                                                      |                                         |                                    |
|          |                                            | Lessina; Levien; Levlite; Levora                                      |                                         |                                    |
|          |                                            | Lo/Ovral; Loestrin, FE; Low-Ogestrel                                  |                                         |                                    |
|          |                                            | Microgestin FE; Modicon                                               |                                         |                                    |
|          |                                            | Necon; Nelova; Nordette; Norinyl; Notrel                              |                                         |                                    |
|          |                                            | Ogestrel; Ortho-Cept; Ortho-Cyclen; Ortho-Novum                       |                                         |                                    |
|          |                                            | Ovcon; Ovral                                                          |                                         |                                    |
|          |                                            | Portia                                                                |                                         |                                    |
|          |                                            | Yasmin                                                                |                                         |                                    |
|          |                                            | Zovia 1/50                                                            |                                         |                                    |
|          |                                            | <u>BIPHASIC</u>                                                       | <u>BIPHASIC</u>                         |                                    |
|          |                                            | Karvia                                                                | NONE                                    |                                    |
|          |                                            | Mircette                                                              |                                         |                                    |
|          |                                            | Necon                                                                 |                                         |                                    |
|          |                                            | Ortho-Novum 10/11                                                     |                                         |                                    |
|          |                                            |                                                                       |                                         |                                    |
|          |                                            |                                                                       |                                         |                                    |
|          |                                            |                                                                       |                                         |                                    |
|          |                                            |                                                                       |                                         |                                    |

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| 13       | <b>HORMONE THERAPY Cont'</b>                          |                                                                         |                                                  |                                    |
|          | <b>Contraceptives</b>                                 | <u><b>TRIPHASIC</b></u>                                                 | <u><b>TRIPHASIC</b></u>                          |                                    |
|          | <b>All covered contraceptives are on the PDL.</b>     | Cyclessa                                                                | NONE                                             |                                    |
|          |                                                       | Enpresse; Estrostep                                                     |                                                  |                                    |
|          |                                                       | Ortho TriCyclen; Ortho-Novum 7/7/7                                      |                                                  |                                    |
|          |                                                       | Tri-Levlen; Tri-Norinyl; Triphasil; Trivora                             |                                                  |                                    |
|          |                                                       | <u><b>PROGESTIN ONLY</b></u>                                            | <u><b>PROGESTIN ONLY</b></u>                     |                                    |
|          |                                                       | Nor-Q.D.                                                                | NONE                                             |                                    |
|          |                                                       | Ortho Micronor                                                          |                                                  |                                    |
|          |                                                       | Ovrette                                                                 |                                                  |                                    |
|          |                                                       | <u><b>EMERGENCY CONTRACEPTION</b></u>                                   | <u><b>EMERGENCY CONTRACEPTION</b></u>            |                                    |
|          |                                                       | Preven                                                                  | NONE                                             |                                    |
|          |                                                       | <u><b>TRANSDERMAL &amp; VAGINAL RING</b></u>                            | <u><b>TRANSDERMAL &amp; VAGINAL RING</b></u>     |                                    |
|          |                                                       | NuvaRing                                                                | NONE                                             |                                    |
|          |                                                       | Ortho Evra                                                              |                                                  |                                    |
|          | <b>Estrogen Agents - Oral and Transdermal</b>         | <u><b>ORAL</b></u>                                                      |                                                  |                                    |
|          |                                                       | Conjugated Estrogens (Premarin®)                                        | Esterified Estrogens (Estratab)                  |                                    |
|          |                                                       | Diethylstilbestrol                                                      |                                                  |                                    |
|          |                                                       | Esterified Estrogens (Menest®)                                          |                                                  |                                    |
|          |                                                       | Estradiol                                                               |                                                  |                                    |
|          |                                                       | Estropipate                                                             |                                                  |                                    |
|          |                                                       | Synthetic Conjugated Estrogens (Cenestin®)                              |                                                  |                                    |
|          |                                                       | <u><b>TRANSDERMAL PATCH</b></u>                                         |                                                  |                                    |
|          |                                                       | Estradiol                                                               | Estradiol (Climara®)                             |                                    |
|          | <b>Combination Estrogen Agents</b>                    | 17β-Estradiol/Norgestimate (Ortho-Prefest®)                             | 17β-Estradiol/Norethindrone Acetate (Activella®) |                                    |
|          |                                                       | Conjugated Estrogens (CE)/Medroxyprogesterone Acetate (MPA) (Premphase) | 17β-Estradiol/Norethindrone Acetate (CombiPatch) |                                    |
|          |                                                       | Conjugated Estrogens /Medroxyprogesterone Acetate (Prempro)             | Ethinyl Estradiol/Norethindrone Acetate (Femhrt) |                                    |
| 14       | <b>HYPERLIPIDEMIA - REFER TO HEART DISEASE</b>        |                                                                         |                                                  |                                    |
| 15       | <b>IMMUNE DISORDERS - REFER TO MULTIPLE SCLEROSIS</b> |                                                                         |                                                  |                                    |
| 16       | <b>INFECTIOUS DISORDERS</b>                           |                                                                         |                                                  |                                    |
|          | <b>ANTIBIOTICS</b>                                    |                                                                         |                                                  |                                    |
|          | <b>Cephalosporin and Related Antibiotics</b>          | Amoxicillin/Clavulanate                                                 | Cefprozil (Cefzil®)                              |                                    |
|          |                                                       | Amoxicillin/Clavulanate (Augmentin ES-600®)                             | Cefpodoxime Proxetil (Vantin®)                   |                                    |
|          |                                                       | Amoxicillin/Clavulanate XR (Augmentin XR®)                              | Ceftibuten (Cedax®)                              |                                    |
|          |                                                       | Cefaclor                                                                | Loracarbef (Lorabid®)                            |                                    |
|          |                                                       | Cefaclor ER (Ceclor CD®)                                                |                                                  |                                    |
|          |                                                       | Cefadroxil Monohydrate                                                  |                                                  |                                    |
|          |                                                       | Cefdinir (Omnicef®)                                                     |                                                  |                                    |
|          |                                                       | Cefditoren Pivoxil (Spectracef®)                                        |                                                  |                                    |
|          |                                                       | Cefuroxime Axetil                                                       |                                                  |                                    |
|          |                                                       | Cephalexin                                                              |                                                  |                                    |
|          |                                                       | Cephadrine                                                              |                                                  |                                    |



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