



## DRUG PRIOR AUTHORIZATION LIST

The following drugs require prior-authorization:

Accolate  
Aciphex (Non-Formulary)  
Actos  
Aggrenox  
Altace  
Atacand (Non-Formulary)  
Atacand HCT (Non-Formulary)  
Avalide (Non-Formulary)  
Avandia (Non-Formulary)  
Avapro (Non-Formulary)  
Blood Glucose Monitors (Only Lifescan products are covered)  
Cozaar  
Diflucan (2 x 150mg covered without prior authorization)  
Diovan (Non-Formulary)  
Diovan HCT (Non-Formulary)  
Gleevec  
Hyzaar  
Insulin Cartridges and Pre-filled Pens  
Lamisil (oral only)  
Micardis  
Micardis HCT  
Nexium (Non-Formulary)  
Oxycontin  
Prevacid  
Prilosec (Non-Formulary)  
Protonix  
Protopic  
Pulmicort Respules (For ages greater than 4)  
Rebetol  
Singulair  
Sporanox (tablets and oral solution)  
Temodar  
Teveten (Non-Formulary)  
Thalomid  
Viagra  
Wellbutin SR  
Zyflo (Non-Formulary)  
Zyprexa