



**Pharmacy and Therapeutics Committee Decisions
March 11, 2016**

| Type of Review | Drug/Therapeutic Class | P&T Decision | | | | | | |
|---------------------------------------|--|--|----|------------------------------------|-----------------|-------------------------------------|-----------------|---|
| New Medication | Xyrem® (sodium oxybate oral solution Jazz Pharmaceuticals) | <p>Recommendation</p> <p>As such, it is recommended that Xyrem not be added to the formulary with clinical coverage criteria.</p> <p>Decision:</p> <p>Approved</p> <p>1) Alan 2) Putter</p> | | | | | | |
| | <p>Ninlaro® (ixazomib capsules – Takeda)</p> <table border="1" data-bbox="428 1219 1600 1333"> <tr> <td>Ninlaro® (ixazomib capsules – Takeda)</td> <td>NF</td> </tr> <tr> <td>Kyprolis® (carfilzomib vial –Onyx)</td> <td>Medical benefit</td> </tr> <tr> <td>Velcade® (bortezomib vial – Takeda)</td> <td>Medical benefit</td> </tr> </table> | Ninlaro® (ixazomib capsules – Takeda) | NF | Kyprolis® (carfilzomib vial –Onyx) | Medical benefit | Velcade® (bortezomib vial – Takeda) | Medical benefit | <p>Recommendation</p> <p>As such, it is recommended that Ninlaro be added to the formulary with coverage criteria.</p> |
| Ninlaro® (ixazomib capsules – Takeda) | NF | | | | | | | |
| Kyprolis® (carfilzomib vial –Onyx) | Medical benefit | | | | | | | |
| Velcade® (bortezomib vial – Takeda) | Medical benefit | | | | | | | |

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| | | Decision: Approved 1) Erica 2) Tony | | | | | | | | |
| | Veltassa™ (patiromer for oral suspension – Relypsa) <table border="1"> <tr> <td>Veltassa™ (patiromer for oral suspension – Relypsa)</td> <td>NF</td> </tr> <tr> <td>Sodium polystyrene sulfonate for oral suspension, enema (Kaexalate®, Kionex®, SPS®, generics)</td> <td>F</td> </tr> </table> | Veltassa™ (patiromer for oral suspension – Relypsa) | NF | Sodium polystyrene sulfonate for oral suspension, enema (Kaexalate®, Kionex®, SPS®, generics) | F | Recommendation As such, it is recommended that Veltassa not be added to the formulary with coverage criteria. Decision: Approved 1) Jamie 2) Erica | | | | |
| Veltassa™ (patiromer for oral suspension – Relypsa) | NF | | | | | | | | | |
| Sodium polystyrene sulfonate for oral suspension, enema (Kaexalate®, Kionex®, SPS®, generics) | F | | | | | | | | | |
| | Evzio™ (naloxone hydrochloride 0.4 mg injection – Kaleo) <table border="1"> <tr> <td>Evzio® (Kaleo)</td> <td>NF</td> </tr> <tr> <td>Narcan® Nasal Spray (Adapt Pharma)</td> <td>NF</td> </tr> <tr> <td>Naloxone Disposable Syringe (generics)</td> <td>F</td> </tr> <tr> <td>Naloxone 0.4mg/ml Injection soln (vial, generics)</td> <td>F</td> </tr> </table> | Evzio® (Kaleo) | NF | Narcan® Nasal Spray (Adapt Pharma) | NF | Naloxone Disposable Syringe (generics) | F | Naloxone 0.4mg/ml Injection soln (vial, generics) | F | Recommendation As such, it is recommended that Evzio not be added to the formulary. Decision: Approved 1) Alan |
| Evzio® (Kaleo) | NF | | | | | | | | | |
| Narcan® Nasal Spray (Adapt Pharma) | NF | | | | | | | | | |
| Naloxone Disposable Syringe (generics) | F | | | | | | | | | |
| Naloxone 0.4mg/ml Injection soln (vial, generics) | F | | | | | | | | | |

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|--|--|-----------------------|-----------|---|-----------|---|----------|--|----------|--|
| | | 2) Putter | | | | | | | | |
| | <p>NARCAN® (naloxone hydrochloride) nasal spray – Adapt Pharma</p> <table border="1"> <tr> <td>Evzio® (Kaleo)</td> <td>NF</td> </tr> <tr> <td>Narcan® Nasal Spray (Adapt Pharma)</td> <td>NF</td> </tr> <tr> <td>Naloxone Disposable Syringe (generics)</td> <td>F</td> </tr> <tr> <td>Naloxone 0.4mg/ml Injection soln (vial, generics)</td> <td>F</td> </tr> </table> | Evzio® (Kaleo) | NF | Narcan® Nasal Spray (Adapt Pharma) | NF | Naloxone Disposable Syringe (generics) | F | Naloxone 0.4mg/ml Injection soln (vial, generics) | F | <p>Recommendation</p> <p>As such, it is recommended that Narcan nasal spray be added to the formulary.</p> <p>Decision: Approved</p> <p>1) Tony 2) Alan</p> |
| Evzio® (Kaleo) | NF | | | | | | | | | |
| Narcan® Nasal Spray (Adapt Pharma) | NF | | | | | | | | | |
| Naloxone Disposable Syringe (generics) | F | | | | | | | | | |
| Naloxone 0.4mg/ml Injection soln (vial, generics) | F | | | | | | | | | |

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|--|--|--|--|--|---------------|---|---------------|--|---------------------------------------|---------------|--|---|---------------|----------------------|------------------------------------|----------------|--|------------------------------|----------------|--|-------------------------------|----------------|--|
| | <p>Cotellic™ (cobimetinib tablets – Genentech/Roche)</p> <table border="1"> <tr> <td data-bbox="428 326 768 412">Targeted Therapy</td> <td data-bbox="768 326 1367 412">Cotellic™ (cobimetinib tablets – Genentech/Roche)</td> <td data-bbox="1367 326 1604 412">NF</td> </tr> <tr> <td></td> <td data-bbox="768 412 1367 483">Zelboraf tablets (vemurafenib)</td> <td data-bbox="1367 412 1604 483">F [PA]</td> </tr> <tr> <td></td> <td data-bbox="768 483 1367 555">Tafinlar capsules (dabrafenib)</td> <td data-bbox="1367 483 1604 555">F [PA]</td> </tr> <tr> <td></td> <td data-bbox="768 555 1367 662">Mekinist tablets (trametinib dimethyl sulfoxide)</td> <td data-bbox="1367 555 1604 662">F [PA]</td> </tr> <tr> <td data-bbox="428 662 768 717">Immunotherapy</td> <td data-bbox="768 662 1367 717">Keytruda IV (pembrolizumab)</td> <td data-bbox="1367 662 1604 717">Medical</td> </tr> <tr> <td></td> <td data-bbox="768 717 1367 773">Opdivo IV (nivolumab)</td> <td data-bbox="1367 717 1604 773">Medical</td> </tr> <tr> <td></td> <td data-bbox="768 773 1367 812">Yervoy IV (ipilimumab)</td> <td data-bbox="1367 773 1604 812">Medical</td> </tr> </table> | Targeted Therapy | Cotellic™ (cobimetinib tablets – Genentech/Roche) | NF | | Zelboraf tablets (vemurafenib) | F [PA] | | Tafinlar capsules (dabrafenib) | F [PA] | | Mekinist tablets (trametinib dimethyl sulfoxide) | F [PA] | Immunotherapy | Keytruda IV (pembrolizumab) | Medical | | Opdivo IV (nivolumab) | Medical | | Yervoy IV (ipilimumab) | Medical | <p>Recommendation</p> <p>Change Cotellic to Formulary with Prior Authorization</p> <p>Decision:</p> <p>Approved</p> <p>1) Alan 2) Putter</p> |
| Targeted Therapy | Cotellic™ (cobimetinib tablets – Genentech/Roche) | NF | | | | | | | | | | | | | | | | | | | | | |
| | Zelboraf tablets (vemurafenib) | F [PA] | | | | | | | | | | | | | | | | | | | | | |
| | Tafinlar capsules (dabrafenib) | F [PA] | | | | | | | | | | | | | | | | | | | | | |
| | Mekinist tablets (trametinib dimethyl sulfoxide) | F [PA] | | | | | | | | | | | | | | | | | | | | | |
| Immunotherapy | Keytruda IV (pembrolizumab) | Medical | | | | | | | | | | | | | | | | | | | | | |
| | Opdivo IV (nivolumab) | Medical | | | | | | | | | | | | | | | | | | | | | |
| | Yervoy IV (ipilimumab) | Medical | | | | | | | | | | | | | | | | | | | | | |
| | <p>Odomzo®- (sonidegib capsules - Novartis)</p> <table border="1"> <tr> <td data-bbox="428 1148 1409 1187">Odomzo® (sonidegib capsules - Novartis)</td> <td data-bbox="1409 1148 1604 1187">NF</td> </tr> <tr> <td data-bbox="428 1187 1409 1226">Erivedge® (vismodegib capsules)</td> <td data-bbox="1409 1187 1604 1226">F [PA]</td> </tr> </table> | Odomzo® (sonidegib capsules - Novartis) | NF | Erivedge® (vismodegib capsules) | F [PA] | <p>Recommendation</p> <p>Change Odomzo to Formulary with Prior Authorization</p> <p>Decision:</p> <p>Approved</p> | | | | | | | | | | | | | | | | | |
| Odomzo® (sonidegib capsules - Novartis) | NF | | | | | | | | | | | | | | | | | | | | | | |
| Erivedge® (vismodegib capsules) | F [PA] | | | | | | | | | | | | | | | | | | | | | | |

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| | | | 1) Jamie 2) Putter | | | | | | | | | | | | |
| | Tagrisso® (osimertinib tablets – AstraZeneca) <table border="1"> <tr> <td>Tagrisso® (osimertinib tablets – AstraZeneca)</td> <td>n/a</td> <td>NF</td> </tr> <tr> <td>Gilotrif™ (afatinib tablets)</td> <td>1/12/26</td> <td>NF</td> </tr> <tr> <td>Tarceva® (erlotinib tablets)</td> <td>2018-2020</td> <td>F [PA]</td> </tr> <tr> <td>Iressa® (gefitinib tablets)</td> <td>7/13/22</td> <td>NF</td> </tr> </table> | Tagrisso® (osimertinib tablets – AstraZeneca) | n/a | NF | Gilotrif™ (afatinib tablets) | 1/12/26 | NF | Tarceva® (erlotinib tablets) | 2018-2020 | F [PA] | Iressa® (gefitinib tablets) | 7/13/22 | NF | | Recommendation 1. Change Tagrisso to the Formulary with Prior Authorization 2. Change Gilotrif and Iressa from Non-Formulary to Formulary with Prior Authorization Decision: Approved 1) Tony 1) Erica |
| Tagrisso® (osimertinib tablets – AstraZeneca) | n/a | NF | | | | | | | | | | | | | |
| Gilotrif™ (afatinib tablets) | 1/12/26 | NF | | | | | | | | | | | | | |
| Tarceva® (erlotinib tablets) | 2018-2020 | F [PA] | | | | | | | | | | | | | |
| Iressa® (gefitinib tablets) | 7/13/22 | NF | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| Therapeutic Summary Class Review | Anticonvulsant –Gabapentinoids <table border="1"> <tr> <td>Gralise® (gabapentin extended-release tablets – Depomed)</td> <td>NF</td> </tr> <tr> <td>Horizant® (gabapentin enacarbil extended-release tablets – GlaxoSmithKline)</td> <td>F (PA)*</td> </tr> <tr> <td>Lyrica® (pregabalin capsules and oral solution – Pfizer)</td> <td>F (PA)*</td> </tr> </table> | Gralise® (gabapentin extended-release tablets – Depomed) | NF | Horizant® (gabapentin enacarbil extended-release tablets – GlaxoSmithKline) | F (PA)* | Lyrica® (pregabalin capsules and oral solution – Pfizer) | F (PA)* | | Recommendation 1. Retain current formulary status for all oral anticonvulsant gabapentinoid drugs. 2. Review updated PA criteria for Lyrica for | | | | | | |
| Gralise® (gabapentin extended-release tablets – Depomed) | NF | | | | | | | | | | | | | | |
| Horizant® (gabapentin enacarbil extended-release tablets – GlaxoSmithKline) | F (PA)* | | | | | | | | | | | | | | |
| Lyrica® (pregabalin capsules and oral solution – Pfizer) | F (PA)* | | | | | | | | | | | | | | |

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| | <p>Neurontin® (gabapentin tablets, capsules, and oral solution – Pfizer, generics)</p> | <p>NF</p> | <p>diagnosis of Fibromyalgia; trial and failure of Tramadol removed. Decision:</p> <p>Approved</p> <p>1) Erica 2) Putter</p> |
| | <p>gabapentin tablets, capsules (generics)</p> | <p>F</p> | |
| | <p>Injectable Long-Acting Atypical Antipsychotics</p> | | <p>Recommendation</p> <p>Retain current formulary status for all injectable long-acting atypical antipsychotics.</p> <p>Decision:</p> <p>Approved</p> <p>1) Jamie 2) Alan</p> |
| | <p>Abilify Maintena® (aripiprazole for extended-release injectable suspension – Lundbeck/Otsuka)</p> | <p>F</p> | |
| | <p>Invega® Sustenna® (paliperidone palmitate extended-release injectable suspension – Janssen)</p> | <p>F</p> | |
| | <p>Invega Trinza™ (paliperidone palmitate extended-release injectable suspension – Janssen)</p> | <p>NF</p> | |
| | <p>Risperdal® Consta® (risperidone long-acting injection – Janssen)</p> | <p>F</p> | |
| | <p>Oral Atypical Antipsychotics</p> | | <p>Recommendation</p> <p>Retain current formulary status for all oral atypical antipsychotics.</p> <p>Decision:</p> <p>Approved</p> |
| | <p>Abilify® (aripiprazole orally disintegrating tablets, and oral solution – Bristol-Myers Squibb, generics [tablets and oral solution])</p> | <p>NF</p> | |
| | <p>aripiprazole tablets (generics)</p> | <p>F</p> | |
| | <p>Fanapt® (iloperidone tablets – Vanda Pharmaceuticals)</p> | <p>F</p> | |
| | <p>Ziprasidone capsules (generics)</p> | <p>F</p> | |
| | <p>Paliperidone extended-release tablets (generics)</p> | <p>NF</p> | |

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|--|---|--|---|---|---|---|--------|--|--------|---|---|---------------------------------|---|--|----|---|---|--|
| | <table border="1"> <tr> <td>Invega® (paliperidone extended-release tablets- Janssen)</td> <td>F</td> </tr> <tr> <td>Latuda® (lurasidone tablets – Sunovion Pharmaceuticals)</td> <td>F</td> </tr> <tr> <td>Rexulti™ (brexpiprazole tablets – Otsuka)</td> <td>NF</td> </tr> <tr> <td>Risperidone tablets, oral solution, and orally disintegrating tablets (generics)</td> <td>F</td> </tr> <tr> <td>Saphris® (asenapine sublingual tablets – Schering-Plough)</td> <td>F</td> </tr> <tr> <td>Quetiapine tablets (generics)</td> <td>F</td> </tr> <tr> <td>Seroquel XR® (quetiapine extended-release tablets - AstraZeneca)</td> <td>F</td> </tr> <tr> <td>Olanzapine tablets and orally disintegrating tablets (generics)</td> <td>F</td> </tr> </table> | Invega® (paliperidone extended-release tablets- Janssen) | F | Latuda® (lurasidone tablets – Sunovion Pharmaceuticals) | F | Rexulti™ (brexpiprazole tablets – Otsuka) | NF | Risperidone tablets, oral solution, and orally disintegrating tablets (generics) | F | Saphris® (asenapine sublingual tablets – Schering-Plough) | F | Quetiapine tablets (generics) | F | Seroquel XR® (quetiapine extended-release tablets - AstraZeneca) | F | Olanzapine tablets and orally disintegrating tablets (generics) | F | 1) Putter 2) Erica |
| Invega® (paliperidone extended-release tablets- Janssen) | F | | | | | | | | | | | | | | | | | |
| Latuda® (lurasidone tablets – Sunovion Pharmaceuticals) | F | | | | | | | | | | | | | | | | | |
| Rexulti™ (brexpiprazole tablets – Otsuka) | NF | | | | | | | | | | | | | | | | | |
| Risperidone tablets, oral solution, and orally disintegrating tablets (generics) | F | | | | | | | | | | | | | | | | | |
| Saphris® (asenapine sublingual tablets – Schering-Plough) | F | | | | | | | | | | | | | | | | | |
| Quetiapine tablets (generics) | F | | | | | | | | | | | | | | | | | |
| Seroquel XR® (quetiapine extended-release tablets - AstraZeneca) | F | | | | | | | | | | | | | | | | | |
| Olanzapine tablets and orally disintegrating tablets (generics) | F | | | | | | | | | | | | | | | | | |
| | <p>Oral Typical (First Gen) Antipsychotics</p> <table border="1"> <tr> <td>Chlorpromazine tablets (generics)</td> <td>F</td> </tr> <tr> <td>Fluphenazine tablets, soln (generics)</td> <td>F</td> </tr> <tr> <td>Haloperidol tablets, soln (generics)</td> <td>F (PA)</td> </tr> <tr> <td>Perphenazine tablets (generics)</td> <td>F (PA)</td> </tr> <tr> <td>Thiothixene capsules (generics)</td> <td>F</td> </tr> <tr> <td>Thioridazine tablets (generics)</td> <td>F</td> </tr> <tr> <td>Pimozide tablets (generics)</td> <td>NF</td> </tr> <tr> <td>Prochlorperazine tablets (generics)</td> <td>F</td> </tr> </table> | Chlorpromazine tablets (generics) | F | Fluphenazine tablets, soln (generics) | F | Haloperidol tablets, soln (generics) | F (PA) | Perphenazine tablets (generics) | F (PA) | Thiothixene capsules (generics) | F | Thioridazine tablets (generics) | F | Pimozide tablets (generics) | NF | Prochlorperazine tablets (generics) | F | <p>Recommendation</p> <p>Retain current formulary status for all oral typical (first gen) antipsychotics.</p> <p>Decision:</p> <p>Approved</p> <p>1) Erica 2) Alan</p> |
| Chlorpromazine tablets (generics) | F | | | | | | | | | | | | | | | | | |
| Fluphenazine tablets, soln (generics) | F | | | | | | | | | | | | | | | | | |
| Haloperidol tablets, soln (generics) | F (PA) | | | | | | | | | | | | | | | | | |
| Perphenazine tablets (generics) | F (PA) | | | | | | | | | | | | | | | | | |
| Thiothixene capsules (generics) | F | | | | | | | | | | | | | | | | | |
| Thioridazine tablets (generics) | F | | | | | | | | | | | | | | | | | |
| Pimozide tablets (generics) | NF | | | | | | | | | | | | | | | | | |
| Prochlorperazine tablets (generics) | F | | | | | | | | | | | | | | | | | |
| | <p>Erythroid Stimulating Agents (ESAs)</p> | <p>Recommendation</p> | | | | | | | | | | | | | | | | |

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|--|---|---|--------|---|--------|---|----|--|----|---|--------|---|----|---|
| | <table border="1"> <tr> <td data-bbox="426 238 1276 277">Aranesp® (darbepoetin alfa injection – Amgen)</td> <td data-bbox="1283 238 1602 277">F (PA)</td> </tr> <tr> <td data-bbox="426 277 1276 316">Epogen® (epoetin alfa injection – Amgen)</td> <td data-bbox="1283 277 1602 316">F (PA)</td> </tr> <tr> <td data-bbox="426 316 1276 391">Mircera® (methoxy polyethylene glycol-epoetin beta – Roche/Genentech)</td> <td data-bbox="1283 316 1602 391">NF</td> </tr> <tr> <td data-bbox="426 391 1276 466">Omontys® (peginesatide injection – Affymax) (discontinued by manufacturer)</td> <td data-bbox="1283 391 1602 466">NF</td> </tr> <tr> <td data-bbox="426 466 1276 505">Procrit® (epoetin alfa injection – Janssen)</td> <td data-bbox="1283 466 1602 505">F (PA)</td> </tr> </table> | Aranesp® (darbepoetin alfa injection – Amgen) | F (PA) | Epogen® (epoetin alfa injection – Amgen) | F (PA) | Mircera® (methoxy polyethylene glycol-epoetin beta – Roche/Genentech) | NF | Omontys® (peginesatide injection – Affymax) (discontinued by manufacturer) | NF | Procrit® (epoetin alfa injection – Janssen) | F (PA) | <p>Retain current formulary status for all erythroid stimulating agents (ESAs).</p> <p>Decision:</p> <p>Approved</p> <p>1) Jamie 2) Alan</p> | | |
| Aranesp® (darbepoetin alfa injection – Amgen) | F (PA) | | | | | | | | | | | | | |
| Epogen® (epoetin alfa injection – Amgen) | F (PA) | | | | | | | | | | | | | |
| Mircera® (methoxy polyethylene glycol-epoetin beta – Roche/Genentech) | NF | | | | | | | | | | | | | |
| Omontys® (peginesatide injection – Affymax) (discontinued by manufacturer) | NF | | | | | | | | | | | | | |
| Procrit® (epoetin alfa injection – Janssen) | F (PA) | | | | | | | | | | | | | |
| | <p>Loop Diuretics</p> <table border="1"> <tr> <td data-bbox="426 711 1509 750">bumetanide (generics)</td> <td data-bbox="1516 711 1602 750">F</td> </tr> <tr> <td data-bbox="426 750 1509 824">ethacrynic acid (Edecrin® - Valeant Pharmaceutical International, Inc.)</td> <td data-bbox="1516 750 1602 824">NF</td> </tr> <tr> <td data-bbox="426 824 1509 863">furosemide (generics)</td> <td data-bbox="1516 824 1602 863">F</td> </tr> <tr> <td data-bbox="426 863 1509 902">torsemide (generics)</td> <td data-bbox="1516 863 1602 902">F</td> </tr> </table> | bumetanide (generics) | F | ethacrynic acid (Edecrin® - Valeant Pharmaceutical International, Inc.) | NF | furosemide (generics) | F | torsemide (generics) | F | <p>Recommendation</p> <p>Retain current formulary status for all loop diuretics.</p> <p>Decision:</p> <p>Approved</p> <p>1) Tony 2) Erica</p> | | | | |
| bumetanide (generics) | F | | | | | | | | | | | | | |
| ethacrynic acid (Edecrin® - Valeant Pharmaceutical International, Inc.) | NF | | | | | | | | | | | | | |
| furosemide (generics) | F | | | | | | | | | | | | | |
| torsemide (generics) | F | | | | | | | | | | | | | |
| | <p>Oral Nonsteroidal Anti-Inflammatory Drugs</p> <table border="1"> <tr> <td data-bbox="426 1143 1392 1182">ibuprofen (generics)</td> <td data-bbox="1398 1143 1602 1182">F</td> </tr> <tr> <td data-bbox="426 1182 1392 1221">indomethacin (generics)</td> <td data-bbox="1398 1182 1602 1221">F</td> </tr> <tr> <td data-bbox="426 1221 1392 1260">meloxicam (generics)</td> <td data-bbox="1398 1221 1602 1260">F</td> </tr> <tr> <td data-bbox="426 1260 1392 1299">naproxen (generics)</td> <td data-bbox="1398 1260 1602 1299">F</td> </tr> <tr> <td data-bbox="426 1299 1392 1338">piroxicam (generics)</td> <td data-bbox="1398 1299 1602 1338">F [PA]</td> </tr> <tr> <td data-bbox="426 1338 1392 1365">celecoxib (generics)</td> <td data-bbox="1398 1338 1602 1365">NF</td> </tr> </table> | ibuprofen (generics) | F | indomethacin (generics) | F | meloxicam (generics) | F | naproxen (generics) | F | piroxicam (generics) | F [PA] | celecoxib (generics) | NF | <p>Recommendation</p> <p>Retain current formulary status for all oral nonsteroidal anti-inflammatory drugs.</p> <p>Decision:</p> |
| ibuprofen (generics) | F | | | | | | | | | | | | | |
| indomethacin (generics) | F | | | | | | | | | | | | | |
| meloxicam (generics) | F | | | | | | | | | | | | | |
| naproxen (generics) | F | | | | | | | | | | | | | |
| piroxicam (generics) | F [PA] | | | | | | | | | | | | | |
| celecoxib (generics) | NF | | | | | | | | | | | | | |

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|---|--|---|-----------|---|---------------|--|----------|--|-----------|--------------------------------|---------------|------------------------------|---------------|-----------------------------|-----------|---------------------------------|---------------|------------------------------|----------|-----------------------------|----------|----------------------------|----------|----------------------------|---------------|---|-----------|---|
| | <table border="1"> <tr><td>diclofenac (generics)</td><td>F</td></tr> <tr><td>diflunisal (generic)</td><td>F [PA]</td></tr> <tr><td>etodolac (generics)</td><td>F</td></tr> <tr><td>fenoprofen (generics)</td><td>NF</td></tr> <tr><td>flurbiprofen (generics)</td><td>F [PA]</td></tr> <tr><td>ketoprofen (generics)</td><td>F [PA]</td></tr> <tr><td>ketorolac (generics)</td><td>NF</td></tr> <tr><td>meclofenamate (generics)</td><td>F [PA]</td></tr> <tr><td>nabumetone (generics)</td><td>F</td></tr> <tr><td>oxaprozin (generics)</td><td>F</td></tr> <tr><td>sulindac (generics)</td><td>F</td></tr> <tr><td>tolmetin (generics)</td><td>F [PA]</td></tr> <tr><td>Vimovo (Naproxen and esomeprazole)</td><td>NF</td></tr> </table> | diclofenac (generics) | F | diflunisal (generic) | F [PA] | etodolac (generics) | F | fenoprofen (generics) | NF | flurbiprofen (generics) | F [PA] | ketoprofen (generics) | F [PA] | ketorolac (generics) | NF | meclofenamate (generics) | F [PA] | nabumetone (generics) | F | oxaprozin (generics) | F | sulindac (generics) | F | tolmetin (generics) | F [PA] | Vimovo (Naproxen and esomeprazole) | NF | <p>Approved</p> <p>1) Alan 2) Putter</p> |
| diclofenac (generics) | F | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| diflunisal (generic) | F [PA] | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| etodolac (generics) | F | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| fenoprofen (generics) | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| flurbiprofen (generics) | F [PA] | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ketoprofen (generics) | F [PA] | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ketorolac (generics) | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| meclofenamate (generics) | F [PA] | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| nabumetone (generics) | F | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| oxaprozin (generics) | F | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| sulindac (generics) | F | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| tolmetin (generics) | F [PA] | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Vimovo (Naproxen and esomeprazole) | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <p>Topical Nonsteroidal Anti-Inflammatory Drugs</p> <table border="1"> <tr> <td>Flector[®] Patch (diclofenac epolamine 1.3% topical patch – King)</td> <td>NF</td> </tr> <tr> <td>Pennsaid[®] (diclofenac sodium 1.5% and 2% topical solution – Horizon, generics [1.5% solution only])</td> <td>NF</td> </tr> <tr> <td>Voltaren[®] Gel (diclofenac sodium 1% topical gel – Endo/Novartis)</td> <td>F</td> </tr> </table> | Flector[®] Patch (diclofenac epolamine 1.3% topical patch – King) | NF | Pennsaid[®] (diclofenac sodium 1.5% and 2% topical solution – Horizon, generics [1.5% solution only]) | NF | Voltaren[®] Gel (diclofenac sodium 1% topical gel – Endo/Novartis) | F | <p>Recommendation</p> <p>Change clinical coverage criteria for Flector and Pennsaid to trial and failure of Voltaren gel and two prescription NSAIDS. Retain current formulary status for all other topical nonsteroidal anti-inflammatory drugs.</p> <p>Decision:</p> | | | | | | | | | | | | | | | | | | | | |
| Flector[®] Patch (diclofenac epolamine 1.3% topical patch – King) | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Pennsaid[®] (diclofenac sodium 1.5% and 2% topical solution – Horizon, generics [1.5% solution only]) | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Voltaren[®] Gel (diclofenac sodium 1% topical gel – Endo/Novartis) | F | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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|--|---|---|-----------|--|-----------|---|-----------|--|-----------|--|---------------|--|----------|------------------------------------|-----------|----------------------------------|----------|---|----------|--|----------|--|---------------|--|----------|---|----------|--|-----------|--|-----------|---|----------|---|----------|--|----------|---|----------|--|
| | | approved 1) Jamie 2) Alan | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Oral Opioid Analgesics | Recommendation 1. Move to NF Morphine Sulfate ER capsules. (Cover ER tablets only). 2. Retain current formulary status for all other oral narcotic analgesics. Decision: Approved 1) Erica 2) Alan | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <table border="1"> <tr> <td>Abstral[®] (fentanyl sublingual tablets- Galena Biopharma)</td> <td>NF</td> </tr> <tr> <td>Actiq[®] (fentanyl lozenge- Teva Pharmaceutical)</td> <td>NF</td> </tr> <tr> <td>Avinza[®] (morphine sulfate extended-release capsules – Ligand, generics)</td> <td>NF</td> </tr> <tr> <td>Belbuca[®] film (Endo Pharmaceuticals)</td> <td>NF</td> </tr> <tr> <td>Buprenorphine SL tablets (generics)</td> <td>F (PA)</td> </tr> <tr> <td>Buprenorphine/naloxone SL tabs (generics)</td> <td>F</td> </tr> <tr> <td>Codeine solution (generics)</td> <td>NF</td> </tr> <tr> <td>Codeine tablets(generics)</td> <td>F</td> </tr> <tr> <td>Codeine/ APAP tablets, soln (generics)</td> <td>F</td> </tr> <tr> <td>Codeine/butalbital cmpd capsules (generics)</td> <td>F</td> </tr> <tr> <td>Codeine/butalbital/Caffeine/APAP capsules (generic)</td> <td>F (PA)</td> </tr> <tr> <td>Codeine/guaifen or promethazine soln (generics)</td> <td>F</td> </tr> <tr> <td>Dihydrocodein/Caffeine/ASA capsules (generics)</td> <td>F</td> </tr> <tr> <td>Embeda[®] (morphine sulfate and naltrexone hydrochloride extended-release capsules – King Pharmaceuticals)</td> <td>NF</td> </tr> <tr> <td>Exalgo[®] (hydromorphone HCl extended release tablets – Mallinckrodt/Covidien, generics)</td> <td>NF</td> </tr> <tr> <td>Hydrocodone/APAP soln (generics)</td> <td>F</td> </tr> <tr> <td>Hydrocodone/APAP tabs (generics)</td> <td>F</td> </tr> <tr> <td>Hydrocodone/Homatropine soln (generics)</td> <td>F</td> </tr> <tr> <td>Hydrocodone/Ibuprofen tabs and soln (generics)</td> <td>F</td> </tr> </table> | Abstral[®] (fentanyl sublingual tablets- Galena Biopharma) | NF | Actiq[®] (fentanyl lozenge- Teva Pharmaceutical) | NF | Avinza[®] (morphine sulfate extended-release capsules – Ligand, generics) | NF | Belbuca[®] film (Endo Pharmaceuticals) | NF | Buprenorphine SL tablets (generics) | F (PA) | Buprenorphine/naloxone SL tabs (generics) | F | Codeine solution (generics) | NF | Codeine tablets(generics) | F | Codeine/ APAP tablets, soln (generics) | F | Codeine/butalbital cmpd capsules (generics) | F | Codeine/butalbital/Caffeine/APAP capsules (generic) | F (PA) | Codeine/guaifen or promethazine soln (generics) | F | Dihydrocodein/Caffeine/ASA capsules (generics) | F | Embeda[®] (morphine sulfate and naltrexone hydrochloride extended-release capsules – King Pharmaceuticals) | NF | Exalgo[®] (hydromorphone HCl extended release tablets – Mallinckrodt/Covidien, generics) | NF | Hydrocodone/APAP soln (generics) | F | Hydrocodone/APAP tabs (generics) | F | Hydrocodone/Homatropine soln (generics) | F | Hydrocodone/Ibuprofen tabs and soln (generics) | F | |
| Abstral[®] (fentanyl sublingual tablets- Galena Biopharma) | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Actiq[®] (fentanyl lozenge- Teva Pharmaceutical) | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Avinza[®] (morphine sulfate extended-release capsules – Ligand, generics) | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Belbuca[®] film (Endo Pharmaceuticals) | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Buprenorphine SL tablets (generics) | F (PA) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Buprenorphine/naloxone SL tabs (generics) | F | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Codeine solution (generics) | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Codeine tablets(generics) | F | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Codeine/ APAP tablets, soln (generics) | F | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Codeine/butalbital cmpd capsules (generics) | F | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Codeine/butalbital/Caffeine/APAP capsules (generic) | F (PA) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Codeine/guaifen or promethazine soln (generics) | F | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Dihydrocodein/Caffeine/ASA capsules (generics) | F | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Embeda[®] (morphine sulfate and naltrexone hydrochloride extended-release capsules – King Pharmaceuticals) | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Exalgo[®] (hydromorphone HCl extended release tablets – Mallinckrodt/Covidien, generics) | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Hydrocodone/APAP soln (generics) | F | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Hydrocodone/APAP tabs (generics) | F | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Hydrocodone/Homatropine soln (generics) | F | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Hydrocodone/Ibuprofen tabs and soln (generics) | F | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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| Hydromorphone IR/ER tablets (generics) | F |
| Hysingla™ ER (hydrocodone bitartrate extended-release tablets – Purdue) | NF |
| KadianD (morphine sulfate extended-release capsules – Actavis, generics) | NF |
| Meperidine tablets (generics) | NF |
| Methadone tablets, soln (generics) | F (PA) |
| Morphine sulfate IR/ER tablets and caps (generics) | F |
| Morphine sulfate solution (generics) | F |
| Nucynta® (tapentadol tablets – Janssen) | F (PA) |
| Nucynta® ER (tapentadol extended-release tablets – Janssen) | NF |
| OpanaD ER (oxymorphone extended-release tablets – Endo/Novartis, generics [generics are not AB-rated to the current brand formulation]) | NF |
| Oxycodone IR/ER tablets (generics) | F |
| Oxycodone solution (generics) | F |
| Oxycodone/APAP tablets (generics) | F |
| Oxycodone/IBU tablets (generics) | NF |
| Oxymorphone IR tablets (generics) | F |
| Oxymorphone ER tablets (generics) | NF |
| Suboxone® film (buprenorphine/naloxone -Indivior) | F |
| Subsys® (fentanyl sublingual spray- Insys Therapeutics) | NF |
| Zohydro® ER (hydrocodone bitartrate extended-release capsules – Zogenix) | NF |

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|---|--|---|------|---|----|---|----|--|--------|--|----|---|--------|--|--------|------------------------------|---|--|
| | <p>Oral Quinolones</p> <table border="1"> <tr> <td data-bbox="426 318 1451 358">ciprofloxacin tablets (Cipro[®] – Bayer; generics)</td> <td data-bbox="1451 318 1598 358">F</td> </tr> <tr> <td data-bbox="426 358 1451 399">ciprofloxacin oral suspension (Cipro[®] – Bayer; generics)</td> <td data-bbox="1451 358 1598 399">F</td> </tr> <tr> <td data-bbox="426 399 1451 440">ciprofloxacin XR tablets (Cipro XR[®] – Bayer)</td> <td data-bbox="1451 399 1598 440">NF</td> </tr> <tr> <td data-bbox="426 440 1451 480">gemifloxacin tablets (Factive[®] - Merus Labs)</td> <td data-bbox="1451 440 1598 480">F [PA]</td> </tr> <tr> <td data-bbox="426 480 1451 521">levofloxacin tablets (Levaquin[®] Janssen; generics)</td> <td data-bbox="1451 480 1598 521">F</td> </tr> <tr> <td data-bbox="426 521 1451 561">moxifloxacin tablets (Avelox[®] – Schering-Plough; generics)</td> <td data-bbox="1451 521 1598 561">F [PA]</td> </tr> <tr> <td data-bbox="426 561 1451 602">norfloxacin tablets (Noroxin[®] - Merck)</td> <td data-bbox="1451 561 1598 602">F [PA]</td> </tr> <tr> <td data-bbox="426 602 1451 630">ofloxacin tablets (generics)</td> <td data-bbox="1451 602 1598 630">F</td> </tr> </table> | ciprofloxacin tablets (Cipro [®] – Bayer; generics) | F | ciprofloxacin oral suspension (Cipro [®] – Bayer; generics) | F | ciprofloxacin XR tablets (Cipro XR [®] – Bayer) | NF | gemifloxacin tablets (Factive [®] - Merus Labs) | F [PA] | levofloxacin tablets (Levaquin [®] Janssen; generics) | F | moxifloxacin tablets (Avelox [®] – Schering-Plough; generics) | F [PA] | norfloxacin tablets (Noroxin [®] - Merck) | F [PA] | ofloxacin tablets (generics) | F | <p>Recommendation</p> <p>Retain current formulary status for all oral quinolone antibiotics.</p> <p>Decision: Approved</p> <p>1) Putter 2) Alan</p> |
| ciprofloxacin tablets (Cipro [®] – Bayer; generics) | F | | | | | | | | | | | | | | | | | |
| ciprofloxacin oral suspension (Cipro [®] – Bayer; generics) | F | | | | | | | | | | | | | | | | | |
| ciprofloxacin XR tablets (Cipro XR [®] – Bayer) | NF | | | | | | | | | | | | | | | | | |
| gemifloxacin tablets (Factive [®] - Merus Labs) | F [PA] | | | | | | | | | | | | | | | | | |
| levofloxacin tablets (Levaquin [®] Janssen; generics) | F | | | | | | | | | | | | | | | | | |
| moxifloxacin tablets (Avelox [®] – Schering-Plough; generics) | F [PA] | | | | | | | | | | | | | | | | | |
| norfloxacin tablets (Noroxin [®] - Merck) | F [PA] | | | | | | | | | | | | | | | | | |
| ofloxacin tablets (generics) | F | | | | | | | | | | | | | | | | | |
| | <p>Otic Quinolone Antibiotics</p> <table border="1"> <tr> <td data-bbox="426 711 1486 784">ciprofloxacin 0.2% and hydrocortisone 1% otic suspension (Cipro[®] HC Otic – Alcon)</td> <td data-bbox="1486 711 1598 784">F-PA</td> </tr> <tr> <td data-bbox="426 784 1486 857">ciprofloxacin 0.2% otic solution (Cetraxal[®] – WraSer) (unavailable from manufacturer)</td> <td data-bbox="1486 784 1598 857">NF</td> </tr> <tr> <td data-bbox="426 857 1486 930">ciprofloxacin 0.3% and dexamethasone 0.1% sterile otic suspension (Ciprodex[®] – Alcon)</td> <td data-bbox="1486 857 1598 930">F</td> </tr> <tr> <td data-bbox="426 930 1486 971">ofloxacin 0.3% otic solution (generics)</td> <td data-bbox="1486 930 1598 971">F</td> </tr> </table> | ciprofloxacin 0.2% and hydrocortisone 1% otic suspension (Cipro [®] HC Otic – Alcon) | F-PA | ciprofloxacin 0.2% otic solution (Cetraxal [®] – WraSer) (unavailable from manufacturer) | NF | ciprofloxacin 0.3% and dexamethasone 0.1% sterile otic suspension (Ciprodex [®] – Alcon) | F | ofloxacin 0.3% otic solution (generics) | F | <p>Recommendation</p> <p>1. Retain formulary status of all otic quinolone antibiotics.</p> <p>Decision: Approved</p> <p>1) Erica 2) Jamie</p> | | | | | | | | |
| ciprofloxacin 0.2% and hydrocortisone 1% otic suspension (Cipro [®] HC Otic – Alcon) | F-PA | | | | | | | | | | | | | | | | | |
| ciprofloxacin 0.2% otic solution (Cetraxal [®] – WraSer) (unavailable from manufacturer) | NF | | | | | | | | | | | | | | | | | |
| ciprofloxacin 0.3% and dexamethasone 0.1% sterile otic suspension (Ciprodex [®] – Alcon) | F | | | | | | | | | | | | | | | | | |
| ofloxacin 0.3% otic solution (generics) | F | | | | | | | | | | | | | | | | | |
| | <p>Oral Benzodiazepines</p> <table border="1"> <tr> <td data-bbox="426 1179 1440 1219">Alprazolam tablets (generics)</td> <td data-bbox="1440 1179 1598 1219">F</td> </tr> <tr> <td data-bbox="426 1219 1440 1260">Alprazolam ODT, ER tabs, Soln (generics)</td> <td data-bbox="1440 1219 1598 1260">NF</td> </tr> <tr> <td data-bbox="426 1260 1440 1300">Chlordiazepoxide hydrochloride capsules (generics)</td> <td data-bbox="1440 1260 1598 1300">F</td> </tr> <tr> <td data-bbox="426 1300 1440 1341">Clonazepam tablets (generics)</td> <td data-bbox="1440 1300 1598 1341">F</td> </tr> <tr> <td data-bbox="426 1341 1440 1365">Clonazepam ODT (generics)</td> <td data-bbox="1440 1341 1598 1365">NF</td> </tr> </table> | Alprazolam tablets (generics) | F | Alprazolam ODT, ER tabs, Soln (generics) | NF | Chlordiazepoxide hydrochloride capsules (generics) | F | Clonazepam tablets (generics) | F | Clonazepam ODT (generics) | NF | <p>Recommendation</p> <p>Retain current formulary status for all oral benzodiazepines.</p> | | | | | | |
| Alprazolam tablets (generics) | F | | | | | | | | | | | | | | | | | |
| Alprazolam ODT, ER tabs, Soln (generics) | NF | | | | | | | | | | | | | | | | | |
| Chlordiazepoxide hydrochloride capsules (generics) | F | | | | | | | | | | | | | | | | | |
| Clonazepam tablets (generics) | F | | | | | | | | | | | | | | | | | |
| Clonazepam ODT (generics) | NF | | | | | | | | | | | | | | | | | |

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| | Clorazepate dipotassium tablets (generics) | F | Decision: Approved 1) Jamie 2) Putter |
| | Diazepam tablets, soln (generics) | F | |
| | Estazolam tablets (generics) | NF | |
| | Flurazepam capsules (generics) | F (PA) | |
| | Lorazepam tablets, soln (generics) | F | |
| | Oxazepam capsules (generics) | F (PA) | |
| | Quazepam tablets (generics) | NF | |
| | Temazepam tablets (generics) | F (PA) | |
| | Triazolam tablets (generics) | F (PA) | |
| | Sedative Hypnotics | | Recommendation 1. Place Prior Authorization criteria on eszopiclone for trial and failure of zaleplon and zolpidem. 2. Approve Rozerem for patients equal to or over the age of 65. Decision: Approved 1) Tony 2) Alan |
| | suvorexant (Belsomra® - Merck) | NF | |
| | eszopiclone (generics) | F [QL] | |
| | eszopiclone (Lunesta® - Sunovion Pharmaceuticals) | NF | |
| | ramelteon (Rozerem® – Takeda) | NF | |
| | zaleplon (generics) | F[QL] | |
| | zolpidem tartrate (generics) | F[QL] | |
| | zolpidem tartrate extended-release (generics) | NF | |
| | zolpidem tartrate sublingual (Intermezzo – Purdue Pharma) | NF | |
| | zolpidem tartrate sublingual (Edluar – Meda Pharmaceuticals) | NF | |
| | zolpidem tartrate oral solution (Zolpimist – Valeant) | NF | |
| | tasimelteon (Hetlioz® - Vanda Pharmaceuticals) | NF | |
| | Alzheimer’s Disease Agents | | Recommendation 1. Change Namenda XR |
| | donepezil tablets & orally disintegrating tablets (generics) | F | |

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|--|---|-----------|---|
| | donepezil 23mg tablet | NF | from formulary to Non-formulary 2. Retain all other formulary status Decision: Approved 1) Tony 2) Putter |
| | galantamine tablets (generics) | F | |
| | galantamine extended-release capsules (generics) | F | |
| | memantine tablets (generics) | F | |
| | memantine oral solution (generics) | NF | |
| | memantine extended-release capsules (Namenda XR [®] – Forest Lab) | F | |
| | memantine (Namenda) 5-10mg IR/XR Titration Pack | NF | |
| | memantine extended-release/donepezil capsules (Namzarc [™] – Forest) | NF | |
| | rivastigmine capsules (generics) | NF | |
| | rivastigmine transdermal patches (generics) | F | |
| | Tacrine capsules **Discontinued** | n/a | |
| | Anti-gout Agents | | Recommendation 1. Change colchicine (capsules) to NF 2. Change colchicine (generic) tablets to F 2. Change febuxostat to Formulary w/ ST 3. Keep the current formulary status for the remaining drugs Decision: |
| | allopurinol tablets (generics) | F | |
| | colchicine capsules (generics) | NF | |
| | colchicine tablets (generics) | NF | |
| | colchicine tablets (Colcrys) | F | |
| | colchicine/probenecid tablets (generics) | F | |
| | febuxostat tablets (Uloric) | NF | |
| | pegloticase injection (Krystexxa) | [medical] | |
| | probenecid (generics) | F | |

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|--|---|--|--|--|-----------|--|---------------|---|--|---|------------|--|---------------|--|--|--|--|--|-----------|--|--|-----------|-----------|--|----------|-----------|---|-----------|--|
| | | Approved 1) Tony 2) Erica | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <p>Psoriasis Biologics</p> <table border="1"> <tr> <td>SC</td> <td>Cimzia[®] (certolizumab pegol for SC injection)</td> <td>NF</td> </tr> <tr> <td></td> <td>Cosentyx[™] pens (secukinumab for SC injection)</td> <td>F [PA]</td> </tr> <tr> <td></td> <td>Cosentyx[™] syringes (secukinumab for SC injection)</td> <td>NF</td> </tr> <tr> <td></td> <td>Enbrel[®] (etanercept for SC injection)</td> <td>F [PA]</td> </tr> <tr> <td></td> <td>Humira[®] (adalimumab for SC injection)</td> <td>F [PA]</td> </tr> <tr> <td></td> <td>Simponi[®] (golimumab for SC injection)</td> <td>NF</td> </tr> <tr> <td></td> <td>Stelara[®] (ustekinumab for SC injection)</td> <td>NF</td> </tr> <tr> <td>IV</td> <td>Remicade[®] (infliximab recombinant for IV injection)</td> <td>F</td> </tr> <tr> <td>PO</td> <td>Otezla[®] (apremilast tablets)</td> <td>NF</td> </tr> </table> | SC | Cimzia [®] (certolizumab pegol for SC injection) | NF | | Cosentyx [™] pens (secukinumab for SC injection) | F [PA] | | Cosentyx [™] syringes (secukinumab for SC injection) | NF | | Enbrel [®] (etanercept for SC injection) | F [PA] | | Humira [®] (adalimumab for SC injection) | F [PA] | | Simponi [®] (golimumab for SC injection) | NF | | Stelara [®] (ustekinumab for SC injection) | NF | IV | Remicade [®] (infliximab recombinant for IV injection) | F | PO | Otezla [®] (apremilast tablets) | NF | <p>Recommendation</p> <p>1. Change Cosentyx pens to Non-Formulary with FCR criteria 2. Keep the remaining medications with the current formulary status</p> <p>Decision:</p> <p>Approved</p> <p>1) Jamie 2) Erica</p> |
| SC | Cimzia [®] (certolizumab pegol for SC injection) | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Cosentyx [™] pens (secukinumab for SC injection) | F [PA] | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Cosentyx [™] syringes (secukinumab for SC injection) | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Enbrel [®] (etanercept for SC injection) | F [PA] | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Humira [®] (adalimumab for SC injection) | F [PA] | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Simponi [®] (golimumab for SC injection) | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Stelara [®] (ustekinumab for SC injection) | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| IV | Remicade [®] (infliximab recombinant for IV injection) | F | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| PO | Otezla [®] (apremilast tablets) | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <p>Growth Hormone Products</p> <table border="1"> <tr> <td>Egrifta (tesamorelin injection)</td> <td>NF</td> </tr> <tr> <td>Genotropin[®] (somatropin for injection – Pharmacia & Upjohn Company)</td> <td>NF</td> </tr> <tr> <td>Humatrope[®] (somatropin for injection – Lilly USA)</td> <td>NF</td> </tr> <tr> <td>Norditropin[®] Flexpro (somatropin injection – Novo Nordisk)</td> <td>NF</td> </tr> <tr> <td>Nutropin[®] (somatropin injection – Genentech) <i>Discontinued</i></td> <td>n/a</td> </tr> <tr> <td>Norditropin Nordiflex (somatropin injection)</td> <td>F [PA]</td> </tr> <tr> <td>Nutropin AQ[®] (somatropin injection – Genentech)</td> <td>NF</td> </tr> </table> | Egrifta (tesamorelin injection) | NF | Genotropin [®] (somatropin for injection – Pharmacia & Upjohn Company) | NF | Humatrope [®] (somatropin for injection – Lilly USA) | NF | Norditropin [®] Flexpro (somatropin injection – Novo Nordisk) | NF | Nutropin [®] (somatropin injection – Genentech) <i>Discontinued</i> | n/a | Norditropin Nordiflex (somatropin injection) | F [PA] | Nutropin AQ [®] (somatropin injection – Genentech) | NF | <p>Recommendation</p> <p>1. Change Humatrope to Formulary w/ same PA criteria 2. Change Norditropin Flexpro to Non-Formulary 3. Keep the current formulary status for the remaining drugs</p> <p>Decision:</p> | | | | | | | | | | | | | |
| Egrifta (tesamorelin injection) | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Genotropin [®] (somatropin for injection – Pharmacia & Upjohn Company) | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Humatrope [®] (somatropin for injection – Lilly USA) | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Norditropin [®] Flexpro (somatropin injection – Novo Nordisk) | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Nutropin [®] (somatropin injection – Genentech) <i>Discontinued</i> | n/a | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Norditropin Nordiflex (somatropin injection) | F [PA] | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Nutropin AQ [®] (somatropin injection – Genentech) | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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| | <table border="1"> <tr> <td>Omnitrope[®] (somatropin injection – Sandoz)</td> <td>NF</td> </tr> <tr> <td>Saizen[®] (somatropin for injection – EMD Serono)</td> <td>NF</td> </tr> <tr> <td>Serostim[®] (somatropin for injection – EMD Serono)</td> <td>NF</td> </tr> <tr> <td>Tev-Tropin[®] /Tjet[®] (somatropin for injection – Teva Pharmaceuticals) - <i>discontinued</i></td> <td>NF</td> </tr> <tr> <td>Zorbtive[®] (somatropin for injection – EMD Serono)</td> <td>NF</td> </tr> </table> | Omnitrope[®] (somatropin injection – Sandoz) | NF | Saizen[®] (somatropin for injection – EMD Serono) | NF | Serostim[®] (somatropin for injection – EMD Serono) | NF | Tev-Tropin[®] /Tjet[®] (somatropin for injection – Teva Pharmaceuticals) - <i>discontinued</i> | NF | Zorbtive[®] (somatropin for injection – EMD Serono) | NF | <p>Approved</p> <p>1) Erica 2) Alan</p> | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Omnitrope[®] (somatropin injection – Sandoz) | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Saizen[®] (somatropin for injection – EMD Serono) | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Serostim[®] (somatropin for injection – EMD Serono) | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Tev-Tropin[®] /Tjet[®] (somatropin for injection – Teva Pharmaceuticals) - <i>discontinued</i> | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Zorbtive[®] (somatropin for injection – EMD Serono) | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <p>Proton Pump Inhibitors</p> <table border="1"> <tr> <td>dexlansoprazole (Dexilant[®] – Takeda)</td> <td>NF</td> </tr> <tr> <td>esomeprazole magnesium delayed-release (generics)</td> <td>F</td> </tr> <tr> <td>esomeprazole magnesium delayed-release</td> <td>NF</td> </tr> <tr> <td>lansoprazole delayed-release capsules (generics)</td> <td>NF</td> </tr> <tr> <td>lansoprazole delayed-release (Prevacid[®])</td> <td>NF</td> </tr> <tr> <td>lansoprazole delayed-release (Prevacid OTC)</td> <td>F</td> </tr> <tr> <td>omeprazole delayed-release capsule (generics)</td> <td>F</td> </tr> <tr> <td>omeprazole magnesium delayed-release tablet</td> <td>NF</td> </tr> <tr> <td>omeprazole/sodium bicarbonate (generics and</td> <td>NF</td> </tr> <tr> <td>pantoprazole sodium delayed-release tablets</td> <td>F</td> </tr> <tr> <td>rabeprazole delayed-release (Aciphex[®] – Eisai)</td> <td>NF</td> </tr> <tr> <td>rabeprazole (generics)</td> <td>NF</td> </tr> <tr> <td>rabeprazole sprinkle (Aciphex)</td> <td>NF</td> </tr> <tr> <td>lansoprazole suspension (First Lansoprazole)</td> <td>NF</td> </tr> <tr> <td>omeprazole suspension (First Omeprazole)</td> <td>NF</td> </tr> <tr> <td>lansoprazole disintegrating tablet (Prevacid SoluTab)</td> <td>NF</td> </tr> <tr> <td>omeprazole suspension packet (Prilosec Rx)</td> <td>NF</td> </tr> <tr> <td>pantoprazole granules DR for suspension packet (Protonix)</td> <td>NF</td> </tr> </table> | dexlansoprazole (Dexilant[®] – Takeda) | NF | esomeprazole magnesium delayed-release (generics) | F | esomeprazole magnesium delayed-release | NF | lansoprazole delayed-release capsules (generics) | NF | lansoprazole delayed-release (Prevacid[®]) | NF | lansoprazole delayed-release (Prevacid OTC) | F | omeprazole delayed-release capsule (generics) | F | omeprazole magnesium delayed-release tablet | NF | omeprazole/sodium bicarbonate (generics and | NF | pantoprazole sodium delayed-release tablets | F | rabeprazole delayed-release (Aciphex[®] – Eisai) | NF | rabeprazole (generics) | NF | rabeprazole sprinkle (Aciphex) | NF | lansoprazole suspension (First Lansoprazole) | NF | omeprazole suspension (First Omeprazole) | NF | lansoprazole disintegrating tablet (Prevacid SoluTab) | NF | omeprazole suspension packet (Prilosec Rx) | NF | pantoprazole granules DR for suspension packet (Protonix) | NF | <p>Recommendation</p> <p>1. Change lansoprazole and rabeprazole to Formulary w/ Prior Authorization</p> <p>2. Change esomeprazole to Non-Formulary w/ FCR criteria</p> <p>3. Change omeprazole tablets to Non-Formulary w/ FCR criteria</p> <p>4. Change First-Omeprazole and First-Lansoprazole to Formulary</p> <p>5. Change all other easy to swallow formulations (Aciphex Sprinkle, Prevacid SoluTab,</p> |
| dexlansoprazole (Dexilant[®] – Takeda) | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| esomeprazole magnesium delayed-release (generics) | F | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| esomeprazole magnesium delayed-release | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| lansoprazole delayed-release capsules (generics) | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| lansoprazole delayed-release (Prevacid[®]) | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| lansoprazole delayed-release (Prevacid OTC) | F | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| omeprazole delayed-release capsule (generics) | F | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| omeprazole magnesium delayed-release tablet | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| omeprazole/sodium bicarbonate (generics and | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| pantoprazole sodium delayed-release tablets | F | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| rabeprazole delayed-release (Aciphex[®] – Eisai) | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| rabeprazole (generics) | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| rabeprazole sprinkle (Aciphex) | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| lansoprazole suspension (First Lansoprazole) | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| omeprazole suspension (First Omeprazole) | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| lansoprazole disintegrating tablet (Prevacid SoluTab) | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| omeprazole suspension packet (Prilosec Rx) | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| pantoprazole granules DR for suspension packet (Protonix) | NF | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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| | | <p>Prilosec Suspension Packet, Protonix Packets) to Non-Formulary w/ FCR criteria</p> <p>6. Keep the current formulary status for the remaining drugs</p> <p>Decision:</p> <p>Approved</p> <p>1) Tony 2) Putter</p> | | | | | | | | | | | | | | | | |
| | <p>Topical and Nasal Testosterone Products</p> <table border="1" data-bbox="428 846 1602 1349"> <tr> <td data-bbox="428 846 1499 919">Androderm[®] (testosterone transdermal system {2, 2.5, 4, and 5 mg/day} – Watson)</td> <td data-bbox="1499 846 1602 919">NF</td> </tr> <tr> <td data-bbox="428 919 1499 992">AndroGel[®] (testosterone 1% and 1.62% gel – Solvay; generic for 1% gel)</td> <td data-bbox="1499 919 1602 992">NF</td> </tr> <tr> <td data-bbox="428 992 1499 1032">Axiron[™] (testosterone 2% solution – Lilly)</td> <td data-bbox="1499 992 1602 1032">NF</td> </tr> <tr> <td data-bbox="428 1032 1499 1073">Fortesta[™] (testosterone 2% gel – Endo)</td> <td data-bbox="1499 1032 1602 1073">NF</td> </tr> <tr> <td data-bbox="428 1073 1499 1154">Natesto[™] (testosterone nasal gel – Endo Pharmaceuticals)</td> <td data-bbox="1499 1073 1602 1154">NF</td> </tr> <tr> <td data-bbox="428 1154 1499 1227">Striant[®] (testosterone buccal system – Actient Pharmaceuticals)</td> <td data-bbox="1499 1154 1602 1227">NF</td> </tr> <tr> <td data-bbox="428 1227 1499 1268">Testim[®] (testosterone 1% gel – Auxilium; generic)</td> <td data-bbox="1499 1227 1602 1268">F</td> </tr> <tr> <td data-bbox="428 1268 1499 1349">Vogelxo[™] (testosterone 1% metered gel – Upsher-Smith Laboratories; generic)</td> <td data-bbox="1499 1268 1602 1349">NF</td> </tr> </table> | Androderm [®] (testosterone transdermal system {2, 2.5, 4, and 5 mg/day} – Watson) | NF | AndroGel [®] (testosterone 1% and 1.62% gel – Solvay; generic for 1% gel) | NF | Axiron [™] (testosterone 2% solution – Lilly) | NF | Fortesta [™] (testosterone 2% gel – Endo) | NF | Natesto [™] (testosterone nasal gel – Endo Pharmaceuticals) | NF | Striant [®] (testosterone buccal system – Actient Pharmaceuticals) | NF | Testim [®] (testosterone 1% gel – Auxilium; generic) | F | Vogelxo [™] (testosterone 1% metered gel – Upsher-Smith Laboratories; generic) | NF | <p>Recommendation</p> <p>1. Change Testim to Non-Formulary</p> <p>2. Change testosterone generics to Formulary with the attached prior authorization</p> <p>3. Retain Non-Formulary for all other topical testosterone products.</p> <p>Decision: Approved</p> |
| Androderm [®] (testosterone transdermal system {2, 2.5, 4, and 5 mg/day} – Watson) | NF | | | | | | | | | | | | | | | | | |
| AndroGel [®] (testosterone 1% and 1.62% gel – Solvay; generic for 1% gel) | NF | | | | | | | | | | | | | | | | | |
| Axiron [™] (testosterone 2% solution – Lilly) | NF | | | | | | | | | | | | | | | | | |
| Fortesta [™] (testosterone 2% gel – Endo) | NF | | | | | | | | | | | | | | | | | |
| Natesto [™] (testosterone nasal gel – Endo Pharmaceuticals) | NF | | | | | | | | | | | | | | | | | |
| Striant [®] (testosterone buccal system – Actient Pharmaceuticals) | NF | | | | | | | | | | | | | | | | | |
| Testim [®] (testosterone 1% gel – Auxilium; generic) | F | | | | | | | | | | | | | | | | | |
| Vogelxo [™] (testosterone 1% metered gel – Upsher-Smith Laboratories; generic) | NF | | | | | | | | | | | | | | | | | |

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|--|--|-----------|-------------------|
| | testosterone 1 and 2% gel and metered-dose pump (generics) | NF | 1)Erica 2)Alan |
| | Depo-testosterone injections (testosterone cypionate injections – generics) | F | |
| | testosterone cypionate injections (generics) | F | |
| | testosterone enanthate IM injections (generics) | F | |