

Quick Reference Formulary - Montana University System Employee Benefits Plan (MUS Plan) Formulary

This document is subject to change. The most updated version of this document, as well as a complete formulary listing, are available at www.navitus.com or upon request. Drugs will be filled as generics when acceptable generic equivalents are available. This document is copyrighted by Navitus Health Solutions® and may be reprinted for personal use only. Reproduction of this document for any other reason is expressly prohibited, unless prior written consent is obtained from Navitus.

Reading the Drug List

Generic drugs are listed in all lower case letters. Brand name drugs are listed in all upper case letters. Each drug product is assigned a coverage tier, shown to the right of each drug product.

		Relative Cost to Member
Tier 1	Formulary generics and some lower cost brand products	\$
Tier 2	Formulary, brand products and some higher cost generic products	\$\$
Tier 3	Non-preferred formulary products	\$\$\$\$

Cases where drug products are followed by parentheses indicate that the entry relates to a certain dosage form, e.g. ESTRACE (vaginal cream) or more than one form of the drug, e.g. ZOMIG (ZMT). Quantity limits are for prescriptions filled at retail pharmacies. Please consult the complete version of the formulary for mail order quantity limits.

All newly approved drugs on the market will initially NOT be covered, pending further review by the Navitus P&T Committee.

A complete version of the Navitus Formulary, as well as information on prior authorization and clinical programs, are available at www.navitus.com

ADHD/ ANTI-NARCOLEPSY/ ANTI-OBESITY/ ANOREXIANTS

ADDERALL XR CAP	1
amphetamine/	1
dextroamphetamine tab	
dexmethylphenidate tab	1
guanfacine ER tab	1
methylphenidate tab	1
methylphenidate ER cap	2
VYVANSE CAP	2

AMINOGLYCOSIDES

TOBI PODHALER	RS SP	4
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ANALGESICS - ANTI-INFLAMMATORY

diclofenac sodium EC tab	1	
diclofenac sodium XR tab	1	
ibuprofen tab	1	
ketorolac tab	QL	
meloxicam tab	1	
nabumetone tab	1	
sulindac tab	1	
celecoxib cap	QL	
piroxicam cap	2	
diclofenac/ misoprostol DR	3	
tab		
ENBREL INJ 25MG	LSP PA QL	4
ENBREL INJ 50MG	LSP PA QL	4
ENBREL SURECLICK INJ	LSP PA QL	4
50MG		
HUMIRA INJ	LSP PA QL	4
HUMIRA PEN INJ	LSP PA QL	4

ANALGESICS - OPIOID

acetaminophen/ codeine	1
tab	
hydrocodone/	1
acetaminophen tab	
morphine sulfate ER tab	1
oxycodone/	1
acetaminophen tab	
tramadol tab	1
fentanyl patch	2
OXYCODONE ER TAB,	NC
OXYCONTIN CR TAB	
OXYCONTIN CR TAB	NC

ANTIANGINAL AGENTS

RANEXA TAB	2
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ANTIANKXIETY AGENTS

alprazolam tab	1
bupropion tab	1
hydroxyzine tab	1
lorazepam tab	1

ANTIARRHYTHMICS

MULTAQ TAB	2
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ANTIASTHMATIC AND BRONCHODILATOR AGENTS

albuterol neb soln 0.083%	1
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albuterol neb soln 0.5%	1
albuterol/ ipratropium neb	1
soln	
ARNUITY ELLIPTA	1
INHALER	
ASMANEX HFA INHALER	1
ASMANEX INHALER	1
budesonide inh susp	1
FLOVENT DISKUS	1
INHALER	
FLOVENT HFA INHALER	1
ipratropium neb soln	1
montelukast chew tab	1
montelukast tab	1
ADVAIR DISKUS	2
INHALER	
ADVAIR HFA INHALER	2
ANORO ELLIPTA	2
INHALER	
BREO ELLIPTA INHALER	2
COMBIVENT INHALER	2
COMBIVENT RESPIMAT	2
INHALER	
DULERA INHALER	2
INCRUSE ELLIPTA	2
INHALER	
SEREVENT DISKUS	2
INHALER	
VENTOLIN HFA INHALER	2
QL	
albuterol neb soln 0.63mg	3
albuterol neb soln 1.25mg	3
PROVENTIL HFA	NC
INHALER	
PULMICORT FLEXHALER	NC
QVAR INHALER	NC
SYMBICORT INHALER	NC
TUDORZA PRESSAIR	NC
INHALER	

ANTICOAGULANTS

warfarin tab	1
PRADAXA CAP	2

ANTICONVULSANTS

carbamazepine tab	1
clonazepam tab	1
divalproex sodium DR tab	1
gabapentin cap	1
lamotrigine tab	1
levetiracetam tab	1
phenytoin cap	1
topiramate tab	1
BANZEL TAB	2
carbamazepine ER tab	2
LYRICA CAP	2
VIMPAT TAB	QL
lamotrigine ER tab	3

ANTIDEPRESSANTS

amitriptyline tab	1
bupropion ER tab	1
bupropion XL tab	1
citalopram soln	1
citalopram tab	1

duloxetine EC cap	1
escitalopram tab	1
fluoxetine cap	1
fluoxetine tab	1
mirtazapine tab	1
NEFAZODONE TAB	1
nefazodone tab 50mg,	1
250mg	
nortriptyline cap	1
paroxetine tab	1
sertraline conc	1
sertraline tab	1
trazodone tab	1
venlafaxine ER cap	1
venlafaxine tab	1
venlafaxine ER tab	NC

ANTIDIABETICS

metformin tab	\$0
glipizide ER tab	1
glipizide tab	1
glyburide tab	1
pioglitazone tab	1
AVANDAMET TAB	2
AVANDIA TAB	2
BYDUREON PEN INJ	QL
FARXIGA TAB	QL
JANUMET TAB	QL
JANUMET XR TAB	QL
JANUVIA TAB	QL
LANTUS INJ	QL
LEVEMIR FLEXTOUCH	2
INJ	
LEVEMIR INJ	2
NOVOLIN INJ	OTC
NOVOLOG FLEXPEN INJ,	2
FIASP FLEXTOUCH INJ	
NOVOLOG INJ, FIASP	2
INJ	
NOVOLOG MIX FLEXPEN	2
INJ	
NOVOLOG PENFILL INJ	2
pioglitazone/ metformin	2
tab	
VICTOZA INJ	QL
BASAGLAR INJ	NC
HUMALOG INJ,	NC
ADMELOG INJ	
HUMULIN N INJ	OTC
HUMULIN R INJ	OTC
KOMBIGLYZE XR TAB	NC
ONGLYZA TAB	NC

ANTIEMETICS

ondansetron tab	1
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ANTIFUNGALS

fluconazole susp	1
fluconazole tab	1
ketoconazole tab	1
nystatin tab	1
terbinafine tab	1
griseofulvin micro tab	2
griseofulvin susp	2

itraconazole cap	PA	2
voriconazole tab	RS	2

ANTIHYPERTENSIVES

cholestyramine powder	1
gemfibrozil tab	1
NIASPAN ER TAB	1
TRILIPIX CAP	1
fluvastatin cap	2

ANTIHYPERTENSIVES

amlodipine/ benazepril cap	1
benazepril tab	1
benazepril/	1
hydrochlorothiazide tab	
bisoprolol/	1
hydrochlorothiazide tab	
doxazosin tab	1
enalapril tab	1
enalapril/	1
hydrochlorothiazide tab	
irbesartan tab	1
irbesartan/	1
hydrochlorothiazide tab	
lisinopril tab	1
lisinopril/	1
hydrochlorothiazide tab	
losartan tab	1
losartan/	1
hydrochlorothiazide tab	
terazosin cap	1
valsartan tab	1
valsartan/	1
hydrochlorothiazide tab	
amlodipine/ valsartan tab	2
clonidine patch	2
metoprolol/	2
hydrochlorothiazide tab	
phenoxybenzamine cap	2
candesartan tab	NC
candesartan/	NC
hydrochlorothiazide tab	

ANTI-INFECTIVE AGENTS - MISC.

clindamycin cap	1
erythromycin/ sulfisoxazole	1
susp	
metronidazole cap	1
metronidazole tab	1
smz/ tmp (DS) tab	1
vancomycin cap	QL ST

ANTIMALARIALS

hydroxychloroquine tab	1
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ANTIMYCOBACTERIAL AGENTS

rifampin cap	2
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ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

tamoxifen tab	\$0
anastrozole tab	1

NC Not Covered

INF Infertility

OTC Over-the-Counter

RS Restricted to Specialist

SP Available through Specialty Pharmacy Program
¢ RxCENTS

generic =small letters

LD Limited Distribution

PA Prior Authorization

SF Limited to Two 15 Day Fills per Month for the First Months

ST Step Therapy

BRANDS =CAPITAL LETTERS

LSP Lumicera Specialty Preferred

QL Quantity Limit

SMKG Smoking Cessation

VAC Vaccine Program

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letrozole tab	1
methotrexate tab	1
AFINITOR DISPERZ	LSP PA QL 4
	SF
AFINITOR TAB	LSP PA QL 4
	SF
bexarotene cap	LSP PA SF 4
BOSULIF TAB	PA SF SP 4
ERIVEDGE CAP	PA SF SP 4
IMBRUVICA CAP	LD PA QL SF 4

ANTIPARKINSON AGENTS

amantadine cap	1
carbidopa/ levodopa tab	1
ropinirole tab	1
selegiline cap	1
pramipexole ER tab	3
ropinirole ER tab	3

ANTIPSYCHOTICS/ ANTIMANIC AGENTS

lithium carbonate cap	1
lithium carbonate tab	1
olanzapine tab	1
quetiapine tab	1
risperidone tab	1
aripiprazole tab	¢
clozapine tab	2
olanzapine ODT	2
paliperidone ER tab	PA 2
ziprasidone cap	2
ABILIFY SOLN	PA 3

ANTIVIRALS

acyclovir cap	1
acyclovir susp	1
nevirapine tab	1
rimantadine tab	1
valacyclovir tab	1
entecavir tab	QL ¢
RELENZA DISKHALER	QL 2
zidovudine cap	2
FUZEON INJ	LSP 4
PEG-INTRON INJ	LSP 4
PEGASYS INJ	LSP 4

ASSORTED CLASSES

azathioprine tab	1
mycophenolate mofetil tab	1
cyclosporine cap	2

BETA BLOCKERS

atenolol tab	1
carvedilol tab	1
labetalol tab	1
metoprolol ER tab	1
metoprolol tab	1
propranolol tab	1
BYSTOLIC TAB	¢
nadolol tab	2

CALCIUM CHANNEL BLOCKERS

amlodipine tab	1
diltiazem ER cap	1
diltiazem tab	1
nifedipine cap	1
nifedipine ER tab	1
verapamil SR cap	1
verapamil SR tab	1
diltiazem ER tab	2
nisoldipine ER tab	2
felodipine ER tab	3
verapamil SR cap	3

CEPHALOSPORINS

cefadroxil cap	1
cefuroxime susp	1
cephalexin cap	1
cefdinir cap	2
cefdinir susp	2

cefprozil susp	2
cefprozil tab	2
cefaclor cap	3
cefepodoxime proxetil tab	3

CONTRACEPTIVES

necon tab	\$0
NUVARING	\$0
tri-nessa (LO) tab	\$0
YASMIN TAB	\$0
YAZ TAB	\$0

CORTICOSTEROIDS

prednisolone soln	1
PREDNISON TAB	1

COUGH/ COLD/ ALLERGY

guaifenesin/ codeine syrup	OTC QL 1
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DERMATOLOGICALS

clindamycin gel	1
clotrimazole/	1
betamethasone cream	
erythromycin gel	1
ketoconazole cream	1
lidocaine/ prilocaine cream	1
mupirocin oint	1
nystatin cream	1
adapalene cream	PA 2
adapalene gel	PA 2
calcipotriene cream	2
ELIDEL CREAM	2
imiquimod cream	2
isotretinoin cap	2
metronidazole cream	2
metronidazole gel	2
mupirocin cream	2
tacrolimus oint	2
tretinoin cream	2
tretinoin gel	PA 2
AZELEX CREAM	PA 3
clindamycin/ benzoyl	3
peroxide gel	
lidocaine patch	QL 3
nystatin/ triamcinolone oint	NC
ZOVIRAX OINT	NC

DIAGNOSTIC PRODUCTS

ACCU-CHEK TEST STRIP	OTC 1
FREESTYLE LITE TEST	OTC 1
STRIP	
FREESTYLE TEST STRIP	OTC 1
PRECISION XTRA TEST	OTC 1
STRIP	
TEST STRIP (all other test	OTC NC
strips)	

DIGESTIVE AIDS

ZENPEP CAP	NC
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DIURETICS

amiloride/	1
hydrochlorothiazide tab	
CHLORTHALIDONE TAB	1
furosemide tab	1
hydrochlorothiazide tab	1
spironolactone tab	1
triamterene/	1
hydrochlorothiazide cap	
triamterene/	1
hydrochlorothiazide tab	
acetazolamide ER cap	2

ENDOCRINE AND METABOLIC AGENTS - MISC.

raloxifene tab	\$0
alendronate tab	1
ibandronate tab 150mg	QL 1
FORTICAL NASAL	2
SPRAY	

ACTONEL TAB	3
FORTEO INJ	LSP 4

ESTROGENS

estradiol patch	1
estradiol tab	1
estradiol patch	2
PREMARIN TAB	2
PREMPHASE TAB,	2
PREMPRO TAB	
estradiol/ norethindrone	3
tab	

FLUOROQUINOLONES

ciprofloxacin tab	1
levofloxacin tab	1
ofloxacin tab	1
moxifloxacin tab	2
ciprofloxacin ER tab	3

GENITOURINARY AGENTS - MISCELLANEOUS

alfuzosin SR tab	1
finasteride tab	1
tamsulosin cap	1

GOUT AGENTS

allopurinol tab	1
ULORIC TAB	¢ ST 2

HEMATOLOGICAL AGENTS - MISC.

clopidogrel tab 75mg	1
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HYPNOTICS/ SEDATIVES/ SLEEP DISORDER AGENTS

phenobarbital tab	1
temazepam cap 15mg	1
temazepam cap 30mg	1
zaleplon cap	1
ROZEREM TAB	NC

MACROLIDES

azithromycin susp	1
azithromycin tab	1
clarithromycin tab	1
DIFICID TAB	QL ST 2

MEDICAL DEVICES AND SUPPLIES

ACCU-CHEK AVIVA	OTC	\$0
PLUS METER		
FREESTYLE FREEDOM	OTC	\$0
LITE METER		
FREESTYLE LITE METER	OTC	\$0
PRECISION XTRA	OTC	\$0
METER		
B-D INSULIN SYRINGE	OTC	1
B-D PEN NEEDLE	OTC	1
FREESTYLE INSULIN	OTC	1
SYRINGE		
NOVOFINE PEN NEEDLE	OTC	1
NOVOTWIST PEN	OTC	1
NEEDLE		
PRECISION INSULIN	OTC	1
SYRINGE		

MIGRAINE PRODUCTS

acetaminophen/	1
isometheptene/ dichloral	
cap	
rizatriptan ODT	QL 1
rizatriptan tab	QL 1
sumatriptan tab	QL 1
naratriptan tab	QL 2
sumatriptan inj	QL 2
sumatriptan vial inj	QL 2
zolmitriptan ODT	QL 3
zolmitriptan tab	QL 3

MOUTH/ THROAT/ DENTAL AGENTS

clotrimazole troches	1
nystatin susp	1

MULTIVITAMINS

PRENATAL VITAMINS	1
(PRENATAL PLUS,	
PREPLUS, PRENAPLUS)	

NASAL AGENTS - SYSTEMIC AND TOPICAL

fluticasone nasal spray	QL 1
azelastine nasal spray	2
VERAMYST NASAL	NC
SPRAY	

OPHTHALMIC AGENTS

azelastine ophth soln	1
bacitracin/ polymyxin b	1
ophth oint	
ciprofloxacin ophth soln	1
dorzolamide/ timolol ophth	1
soln	
gentamicin ophth soln	1
ketorolac ophth soln	1
ketotifen ophth soln	OTC 1
latanoprost ophth soln	QL 1
neomycin/ polymyxin/	1
hydrocortisone ophth soln	
ofloxacin ophth soln	1
pilocarpine ophth soln	1
prednisolone ophth soln	1
timolol maleate ophth soln	1
tobramycin ophth soln	1
tobramycin/	1
dexamethasone ophth soln	
ALPHAGAN P OPHTH	2
SOLN 0.1%	
ALREX OPHTH SUSP,	2
LOTEMAX OPHTH SUSP	
AZOPT OPHTH SUSP	2
BETIMOL OPHTH SOLN	2
BIMATOPROST OPHTH	QL 2
SOLN, LUMIGAN OPHTH	
SOLN	
PROLENSA OPHTH	2
SOLN	
RESTASIS OPHTH	RS 2
EMULSION	
TOBRADEX OPHTH OINT	2
TRAVATAN Z OPHTH	QL 2
SOLN	

OTIC AGENTS

acetic acid otic soln	1
neomycin/ polymix/	1
hydrocortisone otic susp	
CIPRODEX OTIC SUSP	2
ofloxacin otic soln	3

PENICILLINS

amoxicillin cap	1
amoxicillin/ clavulanate tab	1
penicillin vk tab	1
amoxicillin/ clavulanate ER	3
tab	

PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.

bupropion SR tab	QL SMKG	\$0
CHANTIX PAK	QL SMKG	\$0
CHANTIX TAB	QL SMKG	\$0
nicotine gum	OTC QL	\$0
	SMKG	
nicotine lozenge	OTC QL	\$0
	SMKG	

NC Not Covered **generic** =small letters **BRANDS** =CAPITAL LETTERS
INF Infertility **LD** Limited Distribution **LSP** Lumicera Specialty Preferred
OTC Over-the-Counter **PA** Prior Authorization **QL** Quantity Limit
RS Restricted to Specialist **SF** Limited to Two 15 Day Fills per Month for the First Months **SMKG** Smoking Cessation
SP Available through Specialty Pharmacy Program **ST** Step Therapy **VAC** Vaccine Program
¢ RxCENTS

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nicotine patch	OTC QL	\$0
	SMKG	
NICOTROL INHALER	QL SMKG	\$0
NICOTROL NASAL	QL SMKG	\$0
SPRAY		
donepezil ODT	QL	1
donepezil tab	QL	1
galantamine tab	¢	1
memantine tab		1
rivastigmine cap		1
galantamine ER cap		2
NAMENDA XR CAP		2

TETRACYCLINES

doxycycline hyclate cap		1
minocycline cap		1

THYROID AGENTS

liothyronine tab		1
methimazole tab		1
SYNTHROID TAB		1
THYROLAR TAB		2

ULCER DRUGS

cimetidine tab		1
famotidine tab		1
pantoprazole EC tab		1
ZEGERID CAP OTC	OTC	1
famotidine susp		2
PREVACID OTC CAP	OTC	3
rabeprazole EC tab		3
DEXILANT CAP		NC

URINARY ANTI-INFECTIVES

nitrofurantoin monohydrate cap		1
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URINARY ANTISPASMODICS

oxybutynin ER tab		1
oxybutynin tab		1
tolterodine SR cap		2
tolterodine tab	¢	2
VESICARE TAB	¢	2

VAGINAL PRODUCTS

vcf vaginal gel	OTC	\$0
PREMARIN VAGINAL CREAM		2

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