

Consumer Plus Covered **Drug List**

IMPORTANT: This is a brief list of common generic medications and may not be complete. The brand name and specialty medications that are listed are the only brand name and specialty medications covered under this plan.

This list was current at the time of printing and is subject to change. Additions and subtractions can be made to the list at any time.

For the latest list, go to www.pehp.org, click "Members" and then "Prescription Drug Benefits" or call PEHP at 801-366-7555 or 800-765-7347.



PEHP
Health & Benefits

PROUDLY SERVING UTAH PUBLIC EMPLOYEES

Your doctor can obtain a pre-authorization form from the provider section of www.pehp.org or may call PEHP at 801-366-7555 or 800-765-7347.

Covered Medications

Lowercase = Generic | **All Caps** = Brand name | **QL** = Quantity limit applies | **PA** = Requires pre-authorization

A

a-b otic
abacavir
abacavir/lamivudine/
zidovudine
acarbose
acebutolol
acetaminophen with codeine
(QL)
acetazolamide
acetylcysteine
acyclovir tablets
adapalene (QL)
albuterol
alendronate (QL)
alfozosin
allopurinol
allres g suspension
alprazolam, xr
amantadine
amiloride
amiloride/hctz
aminocaproic acid
amiodarone
amitriptyline
amlodipine (QL)
amlodipine/benazepril
amnestem
amoxapine
amoxicillin
amoxicillin-pot clavulanate
amphetamine salt
ampicillin
anagrelide
anastrozole (QL)
antipyrine/benzocaine (QL)
apri
APTIVUS
aranelle
aspirin-codeine
atenolol
atenolol/chlorthalidone
ATRIPLA
atropine
aviane
azathioprine

azithromycin

B

bacitracin
baclofen
balziva
benazepril
benazepril/hctz
benzonatate
benzoyl peroxide
benzoyl peroxide/clindamycin
benztropine
betamethasone
betaxolol
bisoprolol
bisoprolol/hctz
brimonidine
bromocriptine
budeprion sr, xl (QL)
budesonide respules (QL)
bumetanide
buprenorphine (PA)
bupropion, sr, xl (QL)
buspirone
butalbital-apap-caffeine
butalbital-aspirin-caffeine
butalbital-caff-apap-codeine
butorphanol (QL)

C

calcipotriene solution
calcitonin
calcitriol
cal-nate
camila
camrese
captopril
captopril/hctz
carbamazepine
carbidopa/levodopa
carbinoxamine
carisoprodol
cartia xt
carvedilol
cefaclor
cefadroxil

cefdinir
cefprozil
ceftriaxone
cefuroxime
cephalexin
cesia
chloral hydrate
chlordiazepoxide
chloroquine
chloroquine
chlorothiazide
chlorpromazine
chlorpropamide
chlorthalidone
chlorzoxazone
cholestyramine
choline & magnesium
salicylates
ciclopirox
cilostazol
cimetidine
ciprofloxacin
citalopram (QL)
claravis
clarithromycin
clemastine, syrup
clindamycin
clindinium/chlordiazepoxide
clobetasol
clomipramine
clonazepam
clonidine
clonidine patches (QL)
clopidogrel (QL)
clorazepate
clotrimazole troche
clotrimazole w/betamethasone
clozapine
codeine sulfate
colchicine
colestipol
COMPLERA
CREON
CRIXIVAN
cromolyn
cryselle

cyclafem
cyclobenzaprine
cyclopentolate
cyclophosphamide
cyclosporine

D

danocrine
dantrolene
DELZICOL
desipramine
desmopressin (PA) (QL)
desmopressin nasal (PA) (QL)
desogestrel-ethinyl estradiol
desonide
desoximetasone
dexamethasone
dexchlorpheniramine
dexmethylphenidate (QL)
dextroamphetamine
diazepam
dibenzylamine
diclofenac
dicloxacillin
dicyclomine
didanosine
diethylstilbestrol
diflorasone
diflunisal
digoxin
dihydroergotamine (PA) (QL)
diltiazem, er
diphenoxylate/atropine
dipivefrin
dipyridamole
disopyramide
disulfiram
divalproex
divalproex er
donepezil
doxazosin (QL)
doxepin
doxycycline
dronabinol (PA) (QL)

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E

econazole
eemt, hs
EMTRIVA ORAL SOLUTION
170ML
enalapril
enalapril/hctz
endacof dc (QL)
endocet (QL)
enpresse
epinephrine auto injector (QL)
epitol
EPIVIR, HBV
EPZICOM
errin
erythromycin
erythromycin/benzoyl peroxide
esterified estrogens
estradiol, inj (QL)
estropipate
ethosuximide
etodolac, xl
exefen ir

F

famciclovir
famotidine
felodipine er
fenofibrate (QL)
fenoprofen
fentanyl lozenge (PA) (QL)
fentanyl patch
finasteride (QL)
flavoxate
flecainide
fluconazole
fludrocortisone
flunisolide
fluocinolone
fluocinonide
fluorouracil
fluoxetine, solution (QL)
fluphenazine
flurazepam (QL)
flurbiprofen
flutamide
fluticasone
fluticasone/salmeterol inhaler
fluvoxamine

folic acid 1 mg (QL)
fortical
fosinopril
fosinopril/hctz
FREESTYLE TEST STRIPS
furosemide

G

gabapentin
ganciclovir
gemfibrozil
gentamicin
gianvi
glimepiride
glipizide, er, xl
glipizide-metformin
glyburide
glyburide/metformin
griseofulvin
guaifenesin/codeine
guanabenz
guanfacine

H

halobetasol
haloperidol
heparin lock flush
HUMULIN R U500
hydralazine
hydralazine/hctz
hydrochlorothiazide
hydrocodone/apap (QL)
hydrocodone/chlorpheniramine
(QL)
hydrocodone/homatropine
hydrocodone/ibuprofen (QL)
hydrocortisone
hydrocortisone/lidocaine
hydromet
hydromorphone
hydroxychloroquine
hydroxyurea
hydroxyzine
hyomax sl, sr
hyoscyamine
HYPER-SAL 7%

I

ibuprofen

imipramine hcl
imiquimod (QL)
indapamide
indomethacin
INTELENCE (PA) (QL)
introvale (QL)
INVIRASE
ipratropium
ipratropium-albuterol
ISENTRESS (QL)
isometheptene/acetaminophen/
dichloralphenazone
isoniazid
isosorbide
isotretinoin
itraconazole (PA) (QL)

J

jolesa
jolvette
junel fe

K

KALETRA
kariva
kelnor
ketoconazole
ketoprofen
ketorolac (QL)
klor-con (except 25 meq)
klor-con ef
klor-con m (except 15 meq)
k-phos neutral

L

labetalol
lactulose
lamivudine
lamotrigine
lansoprazole, solutab(QL)
LANTUS
latanoprost
leena
leflunomide (QL)
lessina
levalbuterol solution (QL)
levetiracetam
levobunolol
levofloxacin 0.5% ophthalmic

solution
levonorgestrel-ethinyl estradiol
levora
levothyroxine
levoxyl
LEXIVA
lexuss (QL)
lidocaine
lindane
liothyronine
lipram
lisinopril
lisinopril/hctz
lithium, er
lo-ogestrel
lorazepam
losartan, hctz (QL)
lovastatin (QL)
low-ogestrel
loxapine
lutra

M

maprotiline
mebendazole
meclizine
meclofenamate
medroxyprogesterone (QL)
megestrol
meloxicam
meperidine
mercaptapurine
mesalamine enema
metadate er
metaproterenol
metformin, er (QL)
metformin-glyburide
methadone tablet
methazolamide
methenamine
methimazole
methocarbamol
methotrexate
methyl dopa
methyl dopa/hctz
methylin er
methylphenidate ER (except
generic Concerta formulation)
methylphenidate sr
methylphenidate, solution

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methylprednisolone
metipranolol
metoclopramide
metolazone
metoprolol, xl
metoprolol/hctz
metronidazole
mexiletine
microgestin, fe
minocycline capsule
minoxidil tablet
mirtazapine (QL)
misoprostol
modafinil (PA) (QL)
moexipril
moexipril-hctz
mometasone topical
mononessa
morphine tablet, IR (QL)
mupirocin

N

nabumetone
nadolol
naloxone inj
naltrexone tablet
NAMENDA XR (QL)
naproxen
naratriptan (QL)
nateglinide
necon
nefazodone
neomycin
nevirapine, ER (QL)
next choice
nifedipine, er, xl
nimodipine
nitrofurantoin, macrocrystal
nitroglycerin
nizatidine capsules, solution
norethindrone
norethindrone-estradiol, ferrous
norethindrone-ethinyl estradiol
norgestimate-ethinyl estradiol
norgestrel-ethinyl estradiol
nor-qd
nortriptyline
NORVIR
NOVOLIN R, N, L, U, 70/30

NOVOLOG, 70/30
nystatin
ocella
ofloxacin
ogestrel
olanzapine
omeprazole (QL)
omeprazole sodium (QL)
ondansetron (QL)
orphenadrine, compound forte
oxaprozin
oxazepam
oxcarbazepine tablets, suspension
oxybutynin, er (QL)
oxycodone (QL)
oxycodone/apap (QL)
oxycodone/aspirin (QL)
oxymorphone (PA) (QL)
oxymorphone er (PA) (QL)

P

pancrelipase
pantoprazole (QL)
paromomycin
paroxetine (QL)
pemoline
penicillin
pentoxifylline
perindopril (QL)
permethrin
perphenazine
phenazopyridine
phenobarbital
phenytoin
pilocarpine
pindolol
piroxicam
podofilox
polyethylene glycol
portia
potassium chloride
potassium citrate
pramipexole
pramoxine/hc
pravastatin (QL)
prazosin

prednisolone
prednisone
prenatal vitamin
prevalite
PREZISTA
primidone
PROAIR HFA (QL)
probenecid
procainamide
prochlorperazine
proctosol-hc
progesterone
promethazine
promethazine/codeine
propafenone
propranethine
propranolol
propranolol/hctz
propylthiouracil
protriptyline
PULMICORT (QL)
pyrazinamide

Q

quasense
quinapril
quinapril/hctz
QVAR (QL)

R

ramipril (QL)
ranitidine
RENAGEL
RESCRIPTOR
REYATAZ
ribasphere
rifampin
risperidone, odt (QL)
rivastigmine (QL)
ropinirole

S

salsalate
SAVELLA (QL)
se bpo foaming cloths (QL)
selegiline
SELZENTRY (QL)
SEREVENT DISKUS
sertraline (QL)

sildec-dm
silver sulfadiazine
simvastatin (QL)
sodium fluoride (age 1-11)
sodium polystyrene sulfonate
solia
sotalol
sotret
SPIRIVA (QL)
spironolactone
spironolactone/hctz
sprintec
stavudine
STRIBILD
sucralfate
sulfacetamide prednisolone
sulfacetamide topical sol (QL)
sulfamethoxazole/trimethoprim
sulfasalazine, EC
sulindac
sumatriptan (QL)
sure fine pen needle
SUSTIVA
syntest

T

tamoxifen
tamsulosin (QL)
tannate pediatric suspension
tazia xt
temazepam (QL)
terazosin
terbinafine (PA) (QL)
terbutaline
terconazole
testosterone cypionate (QL)
testosterone enanthate (QL)
tetracycline
theophylline
thioridazine
thiothixene
ticlopidine
TIKOSYN (QL)
timolol
timolol-dorzolamide
tizanidine
tobramycin
tolazamide
tolbutamide

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tolmetin
tolterodine tartrate
topiramate
torsemide
tramadol
tramadol/apap (QL)
trandolapril
trandolapril/verapamil
tranlycypromine
trazodone
tretinoin (PA) (QL)
triamcinolone
triamterene
triamterene/hctz

triazolam (QL)
trifluoperazine
trifluridine
trihexyphenidyl
trimethobenzamide
trimethoprim
trimethoprim-polymyxin B
trinessa
triprevifem
tri-sprintec
trivora
TRUVADA

U
ursodiol

V
valacyclovir (QL)
valproic acid
velivet
venlafaxine, er
verapamil, er
VIDEX CHEW, SOLUTION
VIRACEPT
VIREAD

W
warfarin

Z
zafirlukast
zaleplon (QL)
zidovudine
zolpidem, er (QL)
zonisamide
zovia

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Specialty Medications

QL = Quantity limit applies | **PA** = Requires pre-authorization | **^** = Must use specialty pharmacy Accredo | **All Caps** = Brand name | **Lowercase** = Generic

What are specialty medications?

They are costly drugs that require special handling and shipping or are required by the manufacturer to be dispensed by a specific pharmacy, such as PEHP's specialty pharmacy, Accredo. PEHP may require you to buy your specialty medications through Accredo for coverage. You can find out where to buy your specialty medication for coverage at www.pehp.org.

AFINITOR[^] (PA), (QL)
CAPRELSA[^] (PA)
CARBAGLU[^]
CAYSTON[^] (PA)
COPAXONE[^] (PA)
ENBREL[^] (PA)
enoxaparin
EXJADE[^]
fondaparinux (QL)
GLEEVEC (400mg only)[^] (PA)
KUVAN[^] (PA)
MATULANE[^] (PA)
NEXAVAR[^] (PA) (QL)
NOXAFIL[^] (PA) (QL)
PULMOZYME[^] (PA) (QL)
REBIF[^] (PA)
REVLIMID[^] (PA)

RIBAVIRIN (tablet/capsule)[^] (PA)
SABRIL[^] (PA)
SENSIPAR[^]
SILDENAFIL[^] (PA)
SPRYCEL[^] (PA) (QL)
SUTENT[^] (PA)
TEMODAR (5mg, 20mg, 140mg only)[^] (PA)
THALOMID[^] (QL)
TOBI[^] (PA)
TRACLEER[^] (PA) (QL)
TYKERB[^] (PA)
VIEKIRA PAK[^](PA)(QL)
XALKORI[^] (PA)
XELODA[^] (PA)
XENAZINE[^] (PA) (QL)
ZYTIGA[^] (PA)

ACA Medication List

Under the Affordable Care Act, PEHP Pharmacy offers the following preventive services covered at no cost to you, payable through the Pharmacy Plan when received at a participating pharmacy with a prescription from your doctor. Over-the-counter purchases are not covered.

DRUG NAME	RESTRICTIONS
aspirin 325mg	Female age 55-79 Male age 45-79
aspirin 81mg	Female age 55-79 Male age 45-79
buproban	Over age 18
bupropion HCL SR (generic Zyban)	Over age 18
calcium 500+vitamin D	Over age 65
CHANTIX	Over age 18
Chicken Pox vaccine	No Restriction
children's iron	Age 6 months - 1 year
children's vitamin D	Over age 65
cholecalciferol (vitamin D3) 400u	Over age 65
ergocalciferol (vitamin D2) 400u	Over age 65
FC CONDOM, FEMALE	Female under age 50
fer-iron	Age 6 months - 1 year
FLUORABON	Age 6 months - 5 years
FLUOR-A-DAY	Age 6 months - 5 years
fluoride	Age 6 months - 5 years
fluoritab	Age 6 months - 5 years
FLURA-DROPS	Age 6 months - 5 years
folic acid 0.4mg	Female age 10-50
folic acid 0.8mg	Female age 10-50
generic oral contraceptives	Female under age 50
generic bowel preparations	Age 50-75
Hepatitis A vaccine	No Restriction
Hepatitis B vaccine	No Restriction
HPV vaccine	Female age 11-27 Male age 11-22

DRUG NAME	RESTRICTIONS
Influenza vaccine	6 months and older
LO LOESTRIN 24 FE	Female under age 50
LOESTRIN 24 FE	Female under age 50
Meningitis vaccine	Age 2-56
MMR vaccine	No Restriction
MMR-Varicella vaccine	Under age 13
MY WAY	Female under age 50
NEXT CHOICE ONE DOSE	Female under age 50
NICOTROL	Over age 18
NICOTROL NS	Over age 18
NUVARING	Female under age 50
ORTHO TRI-CYCLEN LO	Female under age 50
OTC SMOKING CESSATION	Available through the PEHP Quitline 1-855-366-7500
peg 3350-electrolyte	Age 50-75
PLAN B ONE-STEP	Female under age 50
Pneumonia vaccine	2 years and older
raloxifene	Female over age 35
Shingles Zoster vaccine	60 years and older
tamoxifen	Female over age 35
Tetanus vaccine	7 years and older
Tetanus-Diphtheria vaccine	Age 7-65
VCF	Female under age 50
vitamin D-400	Over age 65
Whooping cough, Tetanus, Diphtheria vaccine	No Restriction
VCF	Female under age 50
vitamin D-400	Over age 65
Whooping cough, Tetanus, Diphtheria vaccine	No Restriction

Individual pharmacies may have their own restrictions on age and immunizations offered.

PEHP covers Smoking Cessation for up to 180 days per rolling 365 days.