



What is the Drug List?

Also called a “formulary” by doctors and pharmacists, the Drug List is an extensive list of safe and effective, FDA-approved, brand name and generic prescription drugs used to treat the most common medical conditions.

The Health First Health Plans Pharmacy and Therapeutics Committee (P & T), a panel of physicians and pharmacists, developed our Drug List and updates it regularly. The list includes quality drugs available to you at reasonable cost. Only those medications that have successfully passed federally required clinical testing and evaluation and have been proven effective are included. The Pharmacy and Therapeutics Committee reviews and evaluates all available literature about a drug when updating the list.

About tiers

Most covered prescription drugs will be categorized into one of five tiers. The cost of drugs varies widely, even though several different medications may be used to treat the same condition. What you pay for the prescription depends upon what tier the drug is listed in. Health First Health Plans offers many benefit plans that can vary in coverage for each tier. Details about your specific benefit for each tier are included in the Health First Health Plans Summary of Benefits.

- **Tier 1** — A select list of medications
- **Tier 2** — The majority of generic drugs available on the market
- **Tier 3** — Generally brand name drugs that do not have a generic equivalent available, and some

expensive generic drugs.

- **Tier 4** — Brand name drugs that either:
 - have equally effective and less costly generic equivalents; *or*
 - may have one or more alternatives in Tier 3
- **Tier 5** — Brand name high-technology drugs that are generally the most expensive

Generic drugs are prescription drugs that are identified by their chemical name. When the patent has expired on a brand name drug, the FDA permits new manufacturers to create an equivalent of the brand name drug and make it available to the public. Generally, more than one manufacturer will create generic versions, although often the same pharmaceutical firm that produces the brand name drug also makes the generic version. This prompts competitive pricing of the generic version and usually results in a less expensive drug.

The Drug List is subject to change

In order to continue to offer a safe and cost effective selection of prescription drugs, Health First periodically makes changes to the Drug List. These changes may include removing medications, adding restrictions, and/or covering a drug at a higher tier. The following list represents some of the most common scenarios in which changes to drug coverage will occur:

- Throughout the year, new medications are approved by the FDA. It is the policy of Health First Health Plans that new drugs will be excluded for 6 months from the date of FDA approval, during which time the Health First Pharmacy and Therapeutics Committee can review the drug for

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safety and efficacy.

- The Drug List may change when a medication is withdrawn from the market due to safety reasons or if it becomes available over-the-counter (OTC). At the time that a medication on the Health First Drug List becomes available OTC, it may be excluded from coverage from that point forward.
- When a brand-name prescription drug loses its patent and the equivalent generic form is added to the Drug List, the brand-name drug may be moved to the highest non-specialty drug tier, which is generally Tier 4.

This formulary is current as of January 1, 2012. To get updated information about the drugs we cover, please visit our Web site at www.healthfirsthealthplans.org or call Customer Service at 1-800-716-7737. Between October 15 and February 14, our Customer Service hours are: 8am–8pm, 7 days per week. From February 15 to October 14, our hours are: Monday through Friday, 8am–8pm, and Saturday, 8am–Noon. TTY/TDD users should call the Florida Relay Center at 1.800.955.8771 during the same business hours.

Are there any restrictions on my coverage?

Some covered drugs may have additional requirements or limits on coverage. These requirements and limits may include:

- **Prior Authorization:** Health First requires you and/or your physician to get prior authorization for certain drugs. This means that you will need to get approval from us before you fill your prescriptions.
- **Step Therapy:** In some cases, Health First requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, we may not cover drug

B unless you try Drug A first. If Drug A does not work for you, we will then cover Drug B. Please see the reference table on page 9 for a complete listing of the drugs which currently require step therapy.

How can I make the most of my prescription drug benefit?

Prescription drug costs continue to rise every year and can represent a significant part of your healthcare expenses. Health First Health Plans can help you pay for your medications by sharing the cost with you and providing substantial discounts for medications you purchase. To help you manage your drug costs, here are some money-saving tips to consider:

- **Use Tier 1 generic medications whenever possible**

Generic drugs are the chemical equivalent of brand-name drugs, and are just as effective in most cases. If you take generic drugs you will generally pay less, so talk to your doctor about switching to a generic equivalent of any brand-name you are taking if it is appropriate. In addition, many of our prescription drug riders include a \$2 copayment for Tier 1 generic drugs ensuring affordable access to many commonly prescribed medications. Please see the list of drugs below to determine which drugs are included in Tier 1.

- **See if your prescription pills can be split in half**

For some medications, pills may be available in different strengths but still have the same price. If you need one of these select medications, your doctor may be able to write your prescription so that you can get your pills at double strength, but half of the number of pills you'd normally need, and you'd only pay half of the regular price. Then you'd split them in half, so you'd get the proper dose – saving up to 50 percent of the cost! The drugs that may be eligible for the Pill-Splitting program are marked with the symbol (1/2) on the list below, so review this information with your doctor if your drug qualifies.

For information about a specific drug not listed, please contact Customer Service. Health First Health Plans Customer Service is available Monday–Friday, 8am–8pm, and Saturday, 8am–Noon. TTY is available during the same hours.

- | | | | |
|-------------|----------------|-----------------|--|
| • Phone | (321) 434-5665 | • TDD/TTY relay | (800) 955-8771 |
| • Toll free | (800) 716-7737 | • E-mail | hfhpinfo@health-first.org |

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The following list includes the **majority** of drugs prescribed.
This list is not a complete list of all drugs covered under your benefit plan.

Drug Name	Tier
A/b otic	2
Abilify	4
Accolate	4
Accupril	4
Accuretic	4
Accutane	4
Acebutolol HCL	2
Aceon	4 (1/2)
Acetaminophen w/codeine	2
Acetasol HC	2
Acetazolamide	2
Aciphex	X
Aclovate ointment	4
Acticin	2
Activella	4
Actonel	4
Actoplus met	3
Actos	3
Acular	4
Acuvail	3
Acyclovir	2
Adalat CC	4
Adcirca	X
Adderall	4
Adderall XR	3
Adipex	PA-4
Advair diskus	3
Advair HFA	3
Advanced natalcare	2
Advicor	X
Aerobid	4
Afinitor	PA-4
Aggrenox	3
Albuterol	2
Albuterol sulfate	2
Albuterol sulfate nebulizer solution	2
Aldara	4
Alendronate	2
Alesse-28	4
Alkeran	3
Allegra	4
Allegra-D	4
Allfen	4
Allfen-DM	4

Drug Name	Tier
Allopurinol	2
Alocril	3
Alphagan P	3
Alprazolam	2
Altace	4
Altabax	3
Amantadine HCL	2
Amaryl	4
Amcinonide	2
Amerge (see Step Therapy table on p. 9)	4
Amidrine	2
Amiloride HCL w/HCTZ	2
Amiodarone HCL	2
Ami-tex LA	2
Amitiza	3
Amitriptyline HCL	2
Amitriptyline w/perphenazine	2
Amitriptyline/chlordiazepoxide	2
Amlodipine/Benazipril	2
Amlodipine	1
Ammonium lactate	2
Amox tr/potassium clavulanate	2
Amoxicillin	1
Amoxicillin trihydrate	1
Amoxil	4
Amphetamine XR	X
Amphetamine salt combo	2
Ampicillin trihydrate	2
Amrix	4
Amturnide	X
Analpram-HC cream	4
Anastrozole	2
Andehist-DM	2
Androgel	3
Antara	4
Antipyrine/Benzocaine	2
Anucort-HC	2
Anzemet	PA-4
Apri	2
Aranesp	PA-5**

Drug Name	Tier
Arava	5**
Aricept	4
Arimidex	4
Arixtra >10 days	PA-5
Armour thyroid	4
Arthrotec 50	4
Arthrotec 75	4
Asacol	3
Asacol HD	3
Ascomp w/codeine	2
Asmanex	4
Astelin	4
Astepro	3
Atacand	4 (1/2)
Atenolol	1
Atenolol w/chlorthalidone	1
Ativan	4
Atripia	4
Atrovent HFA inhaler	4
Atrovent nasal spray	4
Atrovent nebulizer solution	4
Augmentin	4
Augmentin ES-600	4
Augmentin XR	3
Auroto	2
Avalide	4
Avandamet	3
Avandaryl	3
Avandia	3
Avapro	4 (1/2)
Avelox	X
Aviane	2
Avinza	4
Avodart	3
Avonex admin. pack	X
Axert (see Step Therapy table on p. 9)	4
Azasan	4
Azathioprine	2
Azelastine hcl	2
Azithromycin	2
Azmacort	4
Azopt	3
Azulfidine	4

Drug Name	Tier
Azor	3
Azurette	2
Bacitracin	2
Baclofen	2
Bactroban cream	3
Bactroban ointment	4
Balziva	2
B-D ultra fine lancets	3
Beconase AQ	4
Belladonna w/phenobarbital	2
Bellaspas	2
Benazepril HCL	2
Benicar	3 (1/2)
Benicar w/HCTZ	3
Benzaclin	4
Benzonatate	2
Benzoyl peroxide	2
Benzotropine mesylate	2
Betamethasone dipropionate	2
Betamethasone DP augmented	2
Betamethasone valerate	2
Betapace	4
Betapace AF	4
Betaseron	5**
Betimol	3
Betoptic S	3
Beyaz	3
Biaxin	4
Biaxin XL	4
Bidil	3
Bisoprolol fumarate	2
Bisoprolol fumarate/HCTZ	2
Blephamide	3
Blephamide S.O.P.	3
Boniva oral	4
Brilinta	4
Brometane DX	2
Bromfenex-PD	2
Brompheniramine w/pseudoephed	2
Budesonide	2

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Drug Name	Tier
Bumetanide	2
Bupropion XL	2
Bupropion SR	2
Bupropion HCL	2
Buspirone HCL	2
Butalbital compound	2
Butalbital/apap /caffeine	2
Butalbital/caff/apap/ codeine	2
Butorphanol	PA-2
Byetta	3
Bystolic	3
Caduet	X
Calan SR	4
Calcitriol	2
Camila	2
Capex shampoo	3
Capital w/codeine	3
Captopril	1
Captopril/ hydrochlorothiazide	1
Carac	3
Carbamazepine	2
Carbatrol	3
Carbidopa/levodopa	2
Carbofed DM	2
Cardizem CD	4
Cardura	4
Carisoprodol	2
Carnitor	4
Carteolol HCL	2
Cartia XT	2
Carvedilol	2
Casodex	4
Catapres tabs.	4
Catapres-TTS	4
Cefaclor	2
Cefadroxil	2
Cefdinir	2
Ceftin tablets	4
Cefprozil	2
Cefuroxime	2
Cefzil	4
Celebrex	4
Celexa	4
Cellcept	4
Cenestin	2
Cephalexin	1
Chantix	3

Drug Name	Tier
Cheratussin AC	2
Chlordiazepoxide HCL	2
Chlorhexidine gluconate	2
Chlorothiazide	2
Chlorpromazine HCL	2
Chlorthalidone	2
Chlorzoxazone	2
Cholestyramine	1
Cholestyramine light	1
Choline mag trisalicylate	2
Ciloxan ophth. ointment	3
Cimetidine	2
Cimzia	X
Cipro	4
Cipro XR	4
Ciprodex	3
Ciprofloxacin	1
Citalopram	1
Citracal prenatal RX	4
Clarinox	4
Clarithromycin	2
Cleocin vaginal	3
Clidinium w/chlordiazepoxide	2
Climara	4
Clindamycin/benzoyl peroxide	2
Clindamycin HCL	2
Clindamycin phosphate	2
Clobetasol propionate	2
Clomipramine HCL	2
Clonazepam	2
Clonidine HCL	2
Clorazepate dipotassium	2
Clotrimazole	2
Clotrimazole/ betamethasone	2
Clozapine	2
Cognex	4
Colazal	4
Colcrys	3
Colyte flavored	4
Combigan	3
Combipatch	3
Combivent	3
Comtan	4
Concerta	3

Drug Name	Tier
Copaxone	5**
Coreg	4
Coreg CR	3
Cortef	4
Cortisporin cream	3
Cortisporin otic	4
Cortisporin-TC	3
Cosopt	4
Coumadin	2
Covera-HS	3
Cozaar	X
Cpm 8/pse 90/msc 2.5	2
Crantex LA	2
Crestor	3 (1/2)
Crixivan	3
Cryselle	1
Cutivate	4
Cyclessa	4
Cyclobenzaprine HCL	2
Cycloset	X
Cymbalta	3
Cyproheptadine HCL	2
Cytomel	4
Daytrana	4
Ddvp	4
Denavir	3
Depakote	4
Depakote ER	4
Depakote sprinkle	4
Depo-testosterone	4
Derma-smoothe/FS	3
Desipramine HCL	2
Desmopressin acetate	2
Desogen	4
Desonide	2
Desoximetasone	2
Detrol	3
Detrol LA	3
Dexamethasone	2
Dexilant	3
Dextroamphetamine sulfate	2
Diazepam	2
Diclofenac potassium	2
Diclofenac sodium	2
Dicloxacillin sodium	2
Dicyclomine HCL	2
Differin	3
Diflorasone diacetate	2

Drug Name	Tier
Diflucan	4
Digitek	2
Digoxin	2
Dilantin	4
Dilaudid	4
Diltia XT	2
Diltiazem HCL	2
Diovan	3 (1/2)
Diovan HCT	3
Diphenhydramine HCL	2
Diphenoxylate w/atropine	2
Dipivefrin HCL	2
Diprolene AF	4
Dipyridamole	2
Ditropan XL	4
Divalproex	2
Doryx	4
Dorzolamide	2
Dorzolamide/Timolol	2
Dostinex	4
Dovonex cream	3
Doxazosin mesylate	2
Doxepin HCL	2
Doxycycline hyclate	1
Drituss HD	2
Duac gel	3
Duet tabs	4
Duetact	3
Dulera	3
Duoneb	4
Duradrin	2
Duragesic qt. limit 10/30 days	4
Durezol	3
Duricef tablets	4
Dyazide	4
Dynacirc CR	3
Econazole nitrate	2
Edarbi	X
Effexor	4
Effexor XR	4
Effient	3
Efudex cream	4
Efudex solution	4
Elavil	4
Elidel	3
Elocon	4
Embeda	X
Emend	4**

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Drug Name	Tier
Enablex	3
Enalapril maleate	1
Enalapril maleate/HCTZ	1
Enbrel	5**
Endocet	2
Endodan	2
Enpresse	2
Entab-DM	2
Entex ER	4
Enulose	2
Epipen	3
Epipen Jr.	3
Epivir	4
Epogen	X
Errin	2
Ery	2
Ery-tab	2
Erythrocin stearate	2
Erythromycin	2
Erythromycin base tabs	3
Erythromycin ethylsuccinate	2
Erythromycin-benzoyl peroxide	2
Esgic-plus	4
Eskalith CR	4
Estazolam	2
Esterfied Estrogens/meth	2
Estrace	4
Estraderm	3
Estradiol	2
Estradiol transdermal patch	2
Estratest	4
Estratest H.S.	4
Estropipate	2
Estrostep Fe	4
Ethambutol hydrochloride	2
Etodolac	2
Euflexxa	**
Evista	3
Exelon	4
Exforge	3
Exforge HCT	3
Extavia	X
Factive	3
Famciclovir	2

Drug Name	Tier
Famotidine	2
Famvir	4
Fanapt	X
Fast Take	X
Felodipine	2
Femara	4
Femhrt	3
Fenofibrate	2
Fentanyl patch qty. limit 10/30 days	2
Flector	X
Finasteride	2
Fioricet	4
Fiorinal w/codeine #3	4
Flecainide acetate	2
Flexeril	4
Flomax	4
Flonase	4
Florinef acetate	4
Flovent	3
Flovent Disk	3
Floxin	4
Fluconazole	2
Fludrocortisone acetate	2
Fluocinolone acetonide	2
Fluocinonide	2
Fluocinonide-e	2
Fluorouracil	2
Fluoxetine HCL	1
Fluoxetine 40mg	X
Flurazepam HCL	2
Flurbiprofen	2
Fluticasone	2
Fluvoxamine maleate	2
Focalin	4
Foradil	4
Fortamet	3
Forteo	PA-5**
Fortesta	4
Fortical	3
Fosamax	4
Fosamax Plus D	4
Fragmin >10 days	PA-5
FreeStyle Freedom Lite Meter	*
FreeStyle Lite Meter	*
FreeStyle Lite test strips	3
FreeStyle test strips	3

Drug Name	Tier
Frova (see Step Therapy table on p. 9)	4
Furosemide	1
Gabapentin	2
Gabitril	4
Gelnique	X
Gemfibrozil	1
Genotropin	X
Gentamicin sulfate	2
Geodon	4
Gilenya	X
Gleevec	PA-5**
Gildess	2
Glimeperide	2
Glipizide	1
Glucophage	4
Glucophage XR	4
Glucotrol XL	4
Glucovance	X
Glyburide	1
Glyburide micronized	2
Grifulvin V tabs.	4
Guaifen PSE	2
Guaifenesin	2
Guaifenesin 600/pse 120	2
Guaifenesin LA	2
Guaifenesin w/codeine	2
Guaifenesin w/pseudoephedrine	2
Guaifenesin phenylephrine	2
Guaifenex DM	2
Guaifenex G	2
Guaifenex GP	2
Guaifenex LA	2
Guaifenex PSE	2
Guaifen-PSE	2
Guanfacine HCL	2
Guiatuss AC	2
Haloperidol	2
H-C Tussive	2
Hemorrhoidal HC	2
Histinex HC	2
Humalog	X
Humalog mix 75/25	X
Humatrope	X
Humira	5**
Humulin 70/30	X
Humulin N	X
Humulin R	X

Drug Name	Tier
Hyalgan	PA**
Hydralazine HCL	2
Hydrochlorothiazide	1
Hydrocodone bit-ibuprofen	2
Hydrocodone BT/homatropine mbr	2
Hydrocodone compound	2
Hydrocodone w/acetaminophen	2
Hydrocodone/acetaminophen	2
Hydrocodone-acetaminophen	2
Hydrocortisone	2
Hydrocortisone w/iodoquinol	2
Hydromorphone HCL	2
Hydro-CHP susp	2
Hydroxychloroquine sulfate	2
Hydroxyurea	2
Hydroxyzine HCL	2
Hydroxyzine pamoate	2
Hyoscyamine sulfate	2
Hyzaar	X
Ibuprofen	1
Imipramine HCL	2
Imiquimod	2
Imitrex qty. limit 12/30	4
Incivek	PA-5
Indapamide	2
Inderal LA	4
Indomethacin	2
Inspra	4
Insulin syringe	3
Insulin syringe ultra fine II	3
Intal Inhaler	3
Intuniv	3
Invega Sustenna	X
Ipratropium bromide nasal spray	2
Ipratropium nebulizer solution	2
Isosorbide dinitrate	1
Isosorbide mononitrate	2
Istalol	3
Jalyn	3
Janumet	3
Januvia	3

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Drug Name	Tier
Jolessa	2
Jolivet	2
Junel	2
Kadian	4
Kariva	2
K-dur	4
Keppra	4
Ketek	3
Ketoconazole	2
Ketoprofen	2
Ketorolac tromethamine	2
Ketorolac ophth	2
Kineret	PA-5**
Klaron	4
Klor-con	1
Klonopin	4
Kombiglyze	3
Kristalose	3
Kuvan	PA-5**
Kytril	PA-4
Labetalol HCL	2
Lac-hydrin	4
Laclotion	2
Lactulose	2
Lamictal	4
Lamictal ODT	3
Lamictal XR	3
Lamisil	X
Lamotrigine	2
Lancets	3
Lanoxin tabs.	4
Lantus	3
Lasix	4
Lastacaft	4
Latanoprost	2
Lescol	4
Lescol XL	4
Lessina	2
Leukeran	3
Levaquin	4
Levemir	3
Levetiracetam	2
Levlen 28	4
Levlite-28	4
Levobunolol HCL	2
Levofloxacin	2
Levora-28	2
Levothroid	2
Levothyroxine sodium	2

Drug Name	Tier
Levoxyl	2
Lexapro	3 (1/2)
Lialda	3
Lidocaine HCL	2
Lidocaine HCL viscous	2
Lidoderm	4
Lindane lotion	2
Lipitor (see Step Therapy table on p. 9)	4 (step therapy) (1/2)
Lisinopril	1
Lisinopril-HCTZ	1
Lithium carbonate	2
Lithobid	4
Liothyronine	2
Livalo	X
Lo/ovral-28	4
Locoid Lipocream	3
Loestrin	4
Loestrin Fe	4
Lonox	2
Loperamide HCL	2
Lopressor	4
Lopressor HCT	4
Loprox cream	4
Loprox gel	4
Lorazepam	2
Lortab	4
Losartan	2
Losartan/HCTZ	2
Lotemax	3
Lotensin	4
Lotensin HCT	4
Lotrel	4
Lotrisone	4
Lotronex	PA-4
Lovastatin	1
Lovaza	3
Lovenox > 10 days	PA-5
Low-ogestrel	1
Lumigan	3
Lupron	** **
Lutera	2
Luxiq	3
Lybrel	3
Lyrica (See Step Therapy table on p. 9)	4 (step therapy)
Lysteda qty. limit 30/30	PA-4
Macrobid	4
Marinol	4

Drug Name	Tier
Mavik	4 (1/2)
Maxair autohaler	3
Maxalt (see Step Therapy table on p. 9)	3
Maxalt MLT (see Step Therapy table on p. 9)	3
Maxifed	4
Maxifed DM	2
Maxifed-G	4
Maxzide-25mg	4
Mebendazole	2
Meclizine HCL	2
Medroxyprogesterone acetate	2
Mefloquine HCL	2
Megestrol acetate	2
Meloxicam	2
Menest	3
Mentax	3
Meperidine HCL	2
Meperidine w/promethazine	2
Meprobamate	2
Meprozone	4
Meridia	PA-3
Metadate CD	4
Metadate ER	4
Metformin HCL	1
Metformin ER	1
Methadone HCL	2
Methadose	2
Methimazole	2
Methocarbamol	2
Methotrexate	2
Methyldopa	2
Methylin	2
Methylin er	2
Methylphenidate HCL	2
Methylprednisolone	2
Metipranolol	2
Metoclopramide HCL	2
Metoprolol succ	2
Metoprolol tartrate	1
Metrocream	4
Metrogel	3
Metrogel-vaginal	4
Metro lotion	4
Metronidazole	2
Miacalcin	3
Micardis	4
Microgestin Fe	2

Drug Name	Tier
Migrazone	2
Migrin-A	2
Minitran	2
Minocycline HCL	2
Minoxidil	2
Miralax	4
Mirapex	4
Mircette	4
Mirtazapine	2
Misoprostol	2
Mobic	4
Moexipril HCL	2
Mometasone furoate	2
Mononessa	2
Monopril	4
Monopril HCT	4
Morphine sulfate	2
Morphine sulfate IR	2
Moxeza	3
Mupirocin	2
Multaq	4
Mycellex troche	4
Mycophenolate	2
Mytussin AC	2
Nabumetone	2
Nadolol	2
Namenda	4
Naproxen	1
Naproxen sodium	1
Nasacort	4
Nasacort AQ	4
Nasarel 29mcg.	4
Nasonex	4
Natalcare	2
Natatab	2
Necon	1
Neo/polymyxin/dexamethasone	2
Neomycin sulfate	2
Neomycin/polymyxin/dexameth	2
Neomycin/polymyxin/gramicidin	2
Neomycin/polymyxin/H C	2
Neoral	4
Neupogen	5 **
Neurontin	4
Nevanac	3
Nexium	X
Niaspan	3

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Drug Name	Tier
Nifedical XL	2
Nifedipine	2
Nifedipine ER	2
Nisoldipine	2
Nitro-dur	4
Nitrofurantoin macrocrystal	2
Nitroglycerin	2
Nitroglycerin transdermal	2
Nitrolingual	3
Nitroquick	2
Nitrostat	4
Nitrotab	2
Nizatidine	2
Nizoral	4
Nora-Be	2
Norco	4
Nordette-28	4
Norditropin	5**
Norethindrone acetate	2
Norgestrel/Ethinyl Estradiol	2
Noritate	3
Nor-Q-D	4
Nortrel	1
Nortriptyline HCL	2
Norvasc	4
Novofine 30	3
Novofine 31	3
Novofine 32	3
Novolin 70/30	3
Novolin N	3
Novolin R	3
Novolog	3
Novolog mix 70/30	3
Nplate	X
Nulytely	4
Nutrinat	2
Nutropin	X
Nuvaring	4
Nuvigil qty. limit 30/30	PA-4
Nystatin	2
Nystatin w/triamcinolone	2
Nystop	2
Ocuflox	4
Oleptro	X
Olux	4
Omeprazole	2

Drug Name	Tier
Omeprazole/Sodium Bicarbonate	X
Omnicef	4
Ondansetron	2**
One touch basic system®	X
One touch lancets	X
One touch test strips®	X
One touch ultra system®	X
One touch ultra test strips ®	X
Onglyza	3
Onsolis	X
Opana ER	3
Optivar	4
Oramorph SR	4
Orapred	4
Orapred ODT	3
Orphenadrine citrate	2
Ortho evra	4
Ortho tri-cyclen	4
Ortho tri-cyclen lo	4
Ortho-cyclen	4
Ortho-novum	4
Orthovisc	PA**
Osmoprep	3
OT ultra/fast tk cntrl soln	X
Ovcon-35	4
Ovide	4
Oxaprozin	2
Oxazepam	2
Oxcarbazepine	2
Oxistat	3
Oxybutynin chloride	1
Oxycodone HCL	2
Oxycodone w/acetaminophen	2
Oxycodone/apap	2
Oxycontin	X
Pacerone	2
Pantoprazole	2
Paroxetine	2
Paroxetine ER	2
Pataday	3
Patanase	4
Patanol	3
Paxil	4
Paxil CR	4
Pegasys	5**

Drug Name	Tier
Peg 3350/electrolyte	2
Peg-intron	PA-5**
Pen needle	3
Penicillin V potassium	1
Pentasa	4
Pentazocine and naloxone HCL	2
Pentazocine/naloxone	2
Pentoxifylline	2
Percocet	4
Pergolide mesylate	2
Periogard	2
Periostat	4
Permethrin	2
Phenazopyridine HCL	2
Phenergan	4
Phenobarbital	2
Phentermine	PA-2
Phenytoin sodium, extended	2
Phoslo	4
Phrenilin forte	4
Pilocarpine HCL	2
Piroxicam	2
Plavix	3
Plendil	4
Pletal	4
PNV-DHA	3
Polymyxin B sul/ trimethoprim	2
Portia	2
Potassium chloride	1
Pradaxa	3
Pramipexole	2
Pramosone	3
Prandin	3
Pravachol	4
Pravastatin	3
Prazosin HCL	2
Precare	4
Precision Xtra Meter	*
Precision Xtra test strips	3
Precose	4
Prednisolone	2
Prednisone	2
Premarin tabs.	2
Premarin vaginal cream	3
Premesis RX	4
Premphase	3

Drug Name	Tier
Prempro	3
Prenatal optima advance	2
Prenatal RX	2
Prenatal 19 chew	1
Prenate essential	3
Prenate GT	4
Prevacid	X
Previfem	2
Prevident 5000 plus	4
Prevpac	4
Prilosec	X
Primacare	3
Primidone	2
Principen	2
Prinivil	4
Pristiq	3
Proair	X
Proamatine	4
Probenecid	2
Procainamide HCL	2
Procardia XL	4
Prochlorperazine maleate	2
Procrit	PA-5**
Proctofoam-HC	3
Proctosol-HC	2
Proctozone-HC	2
Progesterone	3
Prograf	4
Promacet	4
Promethazine HCL	2
Promethazine VC	2
Promethazine VC w/codeine	2
Promethazine w/codeine	2
Promethazine w/DM	2
Promethegan	2
Prometrium	3
Propafenone HCL	2
Propranolol HCL	1
Propranolol HCL w/HCTZ	1
Propylthiouracil	2
Proscar	4
Protonix	X
Protopic	4
Proventil HFA	X
Provera	4

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Drug Name	Tier
Provigil qty. limit 30/30	PA-4
Prozac	4
Prozac 40mg	X
Pulmicort	4
Pulmicort flexhaler	3
Pulmozyme	5**
Purinethol	4
Q-bid LA	2
Q-bid-DM	2
Quasense	2
Quinapril	2
Quinidine gluconate	2
Quinine sulfate	3
Quixin	3
Ranitidine HCL	2
Ramipril	2
Rebetol	**
Rebif	X
Reclipsen	2
Regranex	PA-5**
Relagard	4
Relpax (see Step Therapy table on p. 9)	4
Relistor	PA-5**
Remeron	4
Remeron soltab	4
Reminyl	4
Remodulin	X
Renagel	3
Requip	4
Requip XL	3
Rescon MX	4
Restasis	3
Restoril	4
Retin-A micro	3
Revelmid	PA-5**
Rhinocort aqua	3
Rifampin	2
Risperdal	4
Risperidone	2
Ritalin	4
Ritalin LA	3
Ropinirole	2
Rosanil	4
Rowasa	4
Roxicet	2
Rx-otic	2
Sabril	X
Saizen	X

Drug Name	Tier
Salagen	4
Samsca	PA-T5**
Sanctura	3
Sanctura XR	3
Sancuso	X
Sandostatin	5**
Sandostatin LAR	5**
Saphris	4
Savella	3
Seasonale (3 copays)	4
Selegiline HCL	2
Selenium sulfide	2
Serevent diskus	3
Seroquel	4
Sertraline	2
Serzone	4
SF 5000 plus	2
Silver sulfadiazine	2
Simcor	X
Simponi	PA-T5**
Simvastatin	2
Singulair	3
Skelaxin	4
Sodium chloride	2
Sodium sulfacetamide/sulfur	2
Solaraze	3
Sotalol	2
Spiriva	3
Spironolactone	2
Spironolactone w/HCTZ	2
Sprintec	2
SPS	2
SSD	2
Starlix	4
Strattera	3
Suboxone	4
Sucalfate	2
Sular	3
Sulfacetamide sodium	2
Sulfamethoxazole/trimethoprim	1
Sulfasalazine	2
Sulfazine EC	2
Sulindac	2
Sumatriptan qty. limit 12/30	2
Sumavel	X

Drug Name	Tier
Supartz	PA**
Suprax	X
Surestep	X
Sustiva	4
Su-tuss HD	2
Symbiax	4
Symbicort	4
Symlin	3
Synagis	PA*
Syntest D.S.	2
Syntest H.S.	2
Synthroid	2
Synvisc	PA**
Tamiflu	4
Tamoxifen citrate	2
Tamsulosin	2
Tarka	4
Tazorac	4
Taztia XT	2
Tegretol	4
Tegretol XR	3
Tekamlo	3
Tekturna	3
Tekturna HCT	3
Temazepam	2
Temodar	5**
Tenormin	4
Tenuate dosepan tab.	PA-4
Terazol vaginal	4
Terazosin HCL	2
Terbinafine qty. limit 84/84	2
Terconazole	2
Testim	4
Testosterone	3
Tetracycline HCL	2
Thalomid	5**
Theo-24	3
Theophylline anhydrous	2
Thiothixene	2
Thyroid	2
Thyrolar-1	3
Tiazac	4
Ticlopidine HCL	2
Timolol maleate	2
Timoptic-XE	4
Tizanidine HCL	2
Tobradex	4

Drug Name	Tier
Tobramycin sulfate	2
Tobramycin/Dexamethasone	2
Topamax	4
Topiramate	2
Toprol XL	4
Torse mide	2
Tracleer	PA-5**
Trajenta	3
Tramadol w/ APAP	2
Tramadol HCL	2
Transderm scop patches	PA-4
Travatan	3
Travatan Z	3
Trazodone HCL	1
Treanda	PA-5
Tretinoin	2
Tretinoin cap	X
Treximet (see Step Therapy table on p. 9)	3
Triamcinolone acetonide	2
Triamterene w/HCTZ	1
Triaz	4
Triazolam	2
Tribenzor	3
Tricor	3
Triglide	X
Trihexyphenidyl HCL	2
Trileptal	4
Trilipix	3
Trimethobenzamide HCL	2
Trimethoprim	2
Trimox	2
Trimox 250	2
Trinessa	1
Tri-norinyl	4
Triphasil-28	4
Tri-Previfem	1
Tri-Sprintec	1
Trivora-28	2
Trusopt	4
Tussi-bid	2
Tussionex	4
Tykerb	PA-4
Tyvaso	X
Uloric (see Step Therapy table on p. 9)	3 (step therapy)

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Drug Name	Tier
Ultracet	4
Ultram	4
Ultravate	4
Uniphyl	2
Uniretic	4
Univasc	4
Urecholine	4
Urocit-K	4
Ursodiol	2
Usept	2
Uroxatral	X
Valacyclovir	2
Vagifem	3
Vancocin >14 days	PA-5**
Valium	4
Valproic acid	2
Valtrex	4
Valturna	3
Vasotec	4
Venlafaxine	2
Vectical	X
Ventolin HFA	2
Veramyst	3

Drug Name	Tier
Verapamil HCL	2
Verelan PM	4
Vesicare	3
Vicodin ES	4
Vicoprofen	4
Victoza	X
Vigamox	3
Vimovo	X
Vinate GT	2
Vi-Q-tuss	2
Viramune	4
Viread	4
Visicol	3
Vivelle	3
Vivelle-dot	3
Voltaren gel	3
Vytorin	3
Vyvance	3
Warfarin sodium	2
Welchol	X
Wellbutrin SR	4
Wellbutrin XL	4
Xalatan	4

Drug Name	Tier
Xanax	4
Xanax XR	4
Xarelto 10 mg qty. limit 35/35 days	3
Xarelto 15 and 20mg	X
Xeloda	5**
Xenazine	PA-5**
Xenical	PA-3
Xifaxan	PA-4
Xolair	PA-5**
Xopenex	3
Xopenex HFA	X
Xyzal	X
Yasmin 28	4
Yaz	2
Zaditor	4
Zafirlukast	2
Zantac	4
Zarah	2
Zaroxolyn	4
Zatean	4
Zegerid	4
Zelnorm	4

Drug Name	Tier
Zenchant	2
Zetia	3
Ziagen	4
Zithromax	4
Zocor	4
Zofran	4**
Zofran ODT	4**
Zoloft	4
Zolpidem (qty . limit 1 tab per day)	2
Zomig (see Step Therapy table on p. 9)	4
Zonegran	4
Zonisamide	2
Zovia 1/35e	2
Zovirax	4
Zyban	4
Zydone	3
Zymar	3
Zymaxid	3
Zyprexa	4
Zyrtec	4
Zyrtec-D	4
Zyvox	PA-5**

Step Therapy Reference Table

Step 2 Drugs	Step Therapy Criteria	Step 1 Drugs
AMERGE (page 3)	Before using AMERGE, you must first try the following Step 1 drug:	<i>sumatriptan</i>
AXERT (page 3)	Before using AXERT, you must first try the following Step 1 drug:	<i>sumatriptan</i>
FROVA (page 5)	Before using FROVA, you must first try the following Step 1 drug:	<i>sumatriptan</i>
LIPITOR (page 6)	Before using LIPITOR, you must first try at least 1 of the following <u>generic</u> Step 1 drugs and at least 1 of the following <u>brand</u> Step 1 drugs:	<i>pravastatin</i> <i>lovastatin</i> <i>simvastatin</i> CRESTOR VYTORIN
LYRICA (page 6)	Before using LYRICA, you must first try the following Step 1 drug:	<i>gabapentin</i>
MAXALT & MAXALT MLT (page 6)	Before using MAXALT or MAXALT MLT, you must first try the following Step 1 drug:	<i>sumatriptan</i>
RELPAX	Before using RELPAX, you must first try the following Step 1 drug:	<i>sumatriptan</i>
TREXIMET (page 8)	Before using TREXIMET, you must first try the following Step 1 drug:	<i>sumatriptan</i>
ULORIC (page 8)	Before using Uloric, you must first try the following Step 1 drug:	<i>allopurinol</i>
ZOMIG (page 8)	Before using ZOMIG you must first try the following Step 1 drug:	<i>sumatriptan</i>

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* Brand-name drugs are capitalized (e.g., LIPITOR) and generic drugs are listed in lower-case italics (e.g., *lovastatin*)

Notes

Drugs needing prior HFHP authorization: Some covered drugs require proof of medical necessity from the physician before filling the prescription. In order for the plan to pay for these drugs, the physician ordering the prescription is required to submit all medical information to Health First Health Plans documenting the medical necessity. These drugs are identified in the Drug List.

Excluded drugs: Health First Health Plans does not provide coverage for all drugs. In addition to the drugs marked “excluded” in this drug list, newly FDA approved drugs are not covered unless the P & T Committee in its sole discretion approves these drugs for coverage. Health First Health Plans will automatically exclude a particular drug if a generic version becomes available and an entire class of drugs if a particular drug within that class becomes available over the counter.

The following are NOT covered by HFHP:

- Compounded drugs
- Cosmetics or any drugs used for cosmetic purposes (such as Retin-A, Rogaine, Topical Minoxidil, and Vaniqa)
- Diabetic supplies, blood glucose monitors and test strips other than those manufactured by Abbott under the product name Freestyle, Precision, and test strips®
- Erectile dysfunction drugs (such as Viagra)
- Infertility drugs (such as Clomid) and abortive drugs such as Plan B and RU486
- Injectables (except insulin, Imitrex, and those requiring prior authorization)
- Multivitamins and nutritional supplements (except prescription pre-natal vitamins)
- Nicotine products
- Nonprescriptive supplies or substances
- Oral and topical antifungals for onychomycosis (such as Lamisil, Sporanox, and Penlac)
- Outpatient drugs for influenza (such as Relenza)
- Over-the-counter medications (such as Lotrimin, Zantac 75, Pepcid AC), or any drug for which a similar over-the-counter version is available
- All new drugs approved by the FDA will be excluded from the preferred drug list/formulary unless HFHP’s Pharmacy and Therapeutics Committee, in its sole discretion, decides to waive this exclusion for a particular drug.
- Sleeping agents (such as Ambien and Sonata)
- Support garments
- Syringes, needles, or other disposable supplies (except those used with insulin)

Participating pharmacies

As a Health First Plans member, you can use any of these pharmacies for your covered prescription drug needs. With so many convenient locations, there’s probably a location just around the corner from you!

- Albertson’s Sav-On
- Bay Street Pharmacy
- Browning’s Pharmacy
- Circles of Care
- CVS
- Family Drug Mart
- Five Points Pharmacy
- Health First Family Pharmacy
- Hobbs Pharmacy
- K-Mart
- Osceola Pharmacy (Vero Beach)
- Palm Bay Pharmacy
- Publix
- Sam’s Club
- Savers’ Drug Mart
- Segos
- Suntime Pharmacy
- Target
- Wal-Mart
- Walgreen’s

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- The Medicine Shoppe

- Winn-Dixie

This list shows only pharmacies in Brevard County who participate with Health First Health Plans. Prescriptions may also be obtained at participating pharmacies nationwide. For more information about home infusion, long-term care pharmacies, or other locations, please refer to the provider directory for your plan or contact Customer Service. Health First Health Plans Customer Service is available Monday–Friday, 8am–8pm, and Saturday, 8am–Noon. TTY is available during the same hours.

- Phone (321) 434-5665
- Toll free (800) 716-7737

- TDD/TTY relay (800) 955-8771
- E-mail hfhpinfo@health-first.org

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Health First Health Plans is pleased to offer our members additional SAVINGS on select medications filled at participating retail pharmacies (not available through home delivery). We have reduced the copayment you pay for these medications. The following medications have been selected for their effectiveness in treating some chronic and serious diseases. The select list will be updated periodically.

Non-Steroidal Anti-Inflammatory Drugs

ibuprofen
naproxen
naproxen sodium

Heart and Blood Pressure Medications

amlodipine
Atenolol
Atenolol with Chlorthalidone
Captopril
Captopril/HCTZ
Enalapril
Enalapril/HCTZ
HCTZ
Isosorbide Dinitrate
Lisinopril
Lisinopril HCTZ
Metoprolol
Propranolol
Propranolol/HCTZ
Triamterene/HCTZ

Antidepressant Drugs

Citalopram
Fluoxetine (all dosage strengths except 40mg)
Trazodone (all dosage strengths except 300mg)

Oral Contraceptives

Cryselle
Low-ogestral
Necon
Nortrel
Trinessa
Tri-Previfem
Tri-Sprintec

Diuretic and Electrolyte Replacement

Potassium Chloride
Furosemide

Antibiotics

Amoxicillin

Cephalexin
Ciprofloxacin
Doxycycline
Pen-V-K
SMZ-TMP
SMZ-TMP DS

Cholesterol Lowering Drugs

Lovastatin
Gemfibrozil
Cholestyramine

Diabetes Drugs

Glyburide
Glipizide
Metformin & Metformin ER

Overactive Bladder

Oxybutynin

Prenatal Vitamin

Prenatal 19 chewable

If you have any questions, please contact HFHP's Customer Service at 321.434.5665 or 1.800.716.7737 Between October 15 and February 14, our Customer Service hours are: Monday through Friday, 8am–8pm, and Saturday, 8am–Noon. TTY/TDD users should call the Florida Relay Center at 1.800.955.8771 during the same business hours.

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