

RxSense Premium Plus Formulary

January 2011

TIERING

Tier 1 = Generic
 Tier 2 = Preferred Brand
 Tier 3 = Non-Preferred Brand
 Tier 4 = Preferred Specialty/Injectable
 Tier 5 = Non-Preferred Specialty/Injectable

BENEFIT NOTES

A = Age Edit
 G = Gender Edit
 OTC = Over-The-Counter Drug
 PA = Prior Authorization Recommended
 QL = Quantity Limit
 ST = Step Therapy

Please Note: This listing is not inclusive of all Generic and Non-Preferred Brand drugs available on the market.

+ = When a generic equivalent is available indicated by "Yes"), the generic will be covered at Tier 1, unless otherwise noted below

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
Abilify DISC Tab 10MG	Aripiprazole	No	3	
Abilify DISC Tab 15MG	Aripiprazole	No	3	
Abilify Inj 9.75 Mg	Aripiprazole	No	5	
Abilify Sol 1MG	Aripiprazole	No	3	
Abilify Tab 10MG	Aripiprazole	No	3	
Abilify Tab 15MG	Aripiprazole	No	3	
Abilify Tab 20MG	Aripiprazole	No	3	
Abilify Tab 2MG	Aripiprazole	No	3	
Abilify Tab 30MG	Aripiprazole	No	3	
Abilify Tab 5MG	Aripiprazole	No	3	
Accolate Tab 10MG	Zafirlukast	No	3	QL
Accolate Tab 20MG	Zafirlukast	No	3	QL
Accuneb Neb 0.63MG/3ML	Albuterol	Yes	3	
Accuneb Neb 1.25MG/3ML	Albuterol	Yes	3	
Accupril Tab 10MG	Quinapril	Yes	3	
Accupril Tab 20MG	Quinapril	Yes	3	
Accupril Tab 40MG	Quinapril	Yes	3	
Accupril Tab 5MG	Quinapril	Yes	3	
Accuretic Tab 10/12.5MG	Quinapril and Hydrochlorothiazide	Yes	3	
Accuretic Tab 20/12.5MG	Quinapril and Hydrochlorothiazide	Yes	3	
Accuretic Tab 20/25MG	Quinapril and Hydrochlorothiazide	Yes	3	
Accutane Cap 10MG	Isotretinoin	Yes	3	
Accutane Cap 20MG	Isotretinoin	Yes	3	
Accutane Cap 40MG	Isotretinoin	Yes	3	
Aceon Tab 2MG	Perindopril Erbumine	No	3	
Aceon Tab 4MG	Perindopril Erbumine	No	3	
Aceon Tab 8MG	Perindopril Erbumine	No	3	
Acetasol HC Otic Sol	Acetic Acid, Propylene Glycol Diacetate, and Hydrocortisone	Yes	3	
Aciphex Tab 20MG	Rabeprazole	No	3	QL
Acloovate Cream 0.05%	Alclometasone	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
Aclovate Ointment 0.05%	Alclometasone	Yes	3	
Acticin Cream 5%	Permethrin	Yes	3	
Actigall Cap 300MG	Ursodiol	Yes	3	
Actiq Loz 1200MCG	Fentanyl	Yes	3	QL
Actiq Loz 1600MCG	Fentanyl	Yes	3	QL
Actiq Loz 200MCG	Fentanyl	Yes	3	QL
Actiq Loz 400MCG	Fentanyl	Yes	3	QL
Actiq Loz 600MCG	Fentanyl	Yes	3	QL
Actiq Loz 800MCG	Fentanyl	Yes	3	QL
Activella Tab 0.5-0.1	Estradiol and Norethindrone	No	2	
Activella Tab 1-0.5	Estradiol and Norethindrone	No	2	
Actonel Tab 150MG	Risedronate	No	2	
Actonel Tab 30MG	Risedronate	No	2	
Actonel Tab 35MG	Risedronate	No	2	
Actonel Tab 5MG	Risedronate	No	2	
Actonel Tab 75MG	Risedronate	No	2	
Actonel Tab With Calcium	Risedronate	No	2	
Actoplus Met Tab 15/500MG	Pioglitazone and Metformin	No	3	
Actoplus Met Tab 15/850MG	Pioglitazone and Metformin	No	3	
Actos Tab 15MG	Pioglitazone	No	3	
Actos Tab 30MG	Pioglitazone	No	3	
Actos Tab 45MG	Pioglitazone	No	3	
Acular LS Sol 0.4%	Ketorolac	Yes	2	
Acular PF Sol 0.5% OP	Ketorolac	Yes	3	
Acular Sol 0.5% OP	Ketorolac	Yes	2	
ACUVAIL SOLUTION 0.45 %	Ketorolac	No	2	
Adalat CC Tab 30MG ER	Nifedipine	Yes	3	
Adalat CC Tab 60MG ER	Nifedipine	Yes	3	
Adalat CC Tab 90MG ER	Nifedipine	Yes	3	
Adderall Tab 10MG	Dextroamphetamine and Amphetamine	Yes	3	
Adderall Tab 12.5MG	Dextroamphetamine and Amphetamine	Yes	3	
Adderall Tab 15MG	Dextroamphetamine and Amphetamine	Yes	3	
Adderall Tab 20MG	Dextroamphetamine and Amphetamine	Yes	3	
Adderall Tab 30MG	Dextroamphetamine and Amphetamine	Yes	3	
Adderall Tab 5MG	Dextroamphetamine and Amphetamine	Yes	3	
Adderall XR Cap 10MG	Dextroamphetamine and Amphetamine	No	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
Adderall XR Cap 15MG	Dextroamphetamine and Amphetamine	No	3	QL
Adderall XR Cap 20MG	Dextroamphetamine and Amphetamine	No	3	QL
Adderall XR Cap 25MG	Dextroamphetamine and Amphetamine	No	3	QL
Adderall XR Cap 30MG	Dextroamphetamine and Amphetamine	No	3	QL
Adderall XR Cap 5MG	Dextroamphetamine and Amphetamine	No	3	QL
Adoxa Cap 150MG	Doxycycline Monohydrate	No	3	
Adoxa Pak Tab 1/100MG	Doxycycline Monohydrate	Yes	3	
Adoxa Pak Tab 1/150MG	Doxycycline Monohydrate	Yes	3	
Adoxa Pak Tab 1/75MG	Doxycycline Monohydrate	Yes	3	
Adoxa Tab 100MG	Doxycycline Monohydrate	Yes	3	
Adoxa Tab 50MG	Doxycycline Monohydrate	Yes	3	
Adoxa Tab 75MG	Doxycycline Monohydrate	Yes	3	
Adderall Tab 7.5MG	Dextroamphetamine and Amphetamine	Yes	3	
Adrucil Inj 50MG/ML	Fluorouracil	Yes	5	
Advair Disku MIS 100/50	Fluticasone and Salmeterol	No	3	
Advair Disku MIS 250/50	Fluticasone and Salmeterol	No	3	
Advair Disku MIS 50/100	Fluticasone and Salmeterol	No	3	
Advair Disku MIS 50/250	Fluticasone and Salmeterol	No	3	
Advair Disku MIS 500/50	Fluticasone and Salmeterol	No	3	
Advair HFA Aer 115/21	Fluticasone and Salmeterol	No	3	
Advair HFA Aer 230/21	Fluticasone and Salmeterol	No	3	
Advicor Tab 1000-20MG	Niacin and Lovastatin	No	3	
Advicor Tab 1000-40MG	Niacin and Lovastatin	No	3	
Advicor Tab 500-20MG	Niacin and Lovastatin	No	3	
Advicor Tab 750-20MG	Niacin and Lovastatin	No	3	
Aerobid Aer 250MCG	Flunisolide	No	3	
Aerobid-M Aer 250MCG	Flunisolide	No	3	
Advair HFA Aer 45/21	Fluticasone and Salmeterol	No	3	
Afeditab Tab 30MG CR	NIFEdipine	Yes	3	
Afeditab Tab 60MG CR	NIFEdipine	Yes	3	
Agenerase Cap 50MG	Amprenavir	No	2	
Aggrenox Cap 25-200MG	Aspirin and Dipyridamole	No	3	
Agenerase Oral Sol 15MG/ML	Amprenavir	No	2	
Akineton Tab 2MG	Biperiden	No	3	
Akne-Mycin Oint 2%	Erythromycin Ointment	Yes	3	
AK-Con Opth Sol 0.1%	Naphazoline	No	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
AK-Poly-Bac Opth Oint	Bacitracin and Polymyxin B	Yes	3	
AK-Pred Opth Sol 1%	Bacitracin and Polymyxin B	Yes	3	
AK-Pentolate Opth Sol 1%	Cyclopentolate	Yes	3	
Alamast Drop 0.1%	Pemirolast	No	3	
AK-Tob Opth Sol 0.3%	Tobramycin Sulfate	Yes	1	
Albalon Opth Sol 0.1%	Naphazoline	No	3	
ALBUTEIN SOLUTION 25 %	ALBUMIN	No	4	
ALBUTEIN SOLUTION 25 %	ALBUMIN	No	4	
ALBUTEIN SOLUTION 5 %	ALBUMIN	No	4	
ALBUTEIN SOLUTION 5 %	ALBUMIN	No	4	
Aldara Cream 5%	Imiquimod	No	3	
ALESSE	LEVONORGESTREL & ETHINYL ESTRADIOL	Yes	3	
ALESSE-28	LEVONORGESTREL & ETHINYL ESTRADIOL	Yes	3	
Aldactazide Tab 25/25	Hydrochlorothiazide and Spironolactone	Yes	3	
Aldactazide Tab 50/50	Hydrochlorothiazide and Spironolactone	Yes	3	
Aldactone Tab 100MG	Spironolactone	Yes	3	
Aldactone Tab 25MG	Spironolactone	Yes	3	
Aldactone Tab 50MG	Spironolactone	Yes	3	
Alimita Inj 100MG	Pemetrexed	No	5	PA
Alimita Inj 500MG	Pemetrexed	No	5	
Allegra Susp 30MG/5ML	Fexofenadine	Yes	3	
Alocril Opth Sol 2%	Nedocromil	No	3	
Allegra Tab 180MG	Fexofenadine	Yes	3	
Allegra Tab 30MG	Fexofenadine	Yes	3	
Allegra Tab 60MG	Fexofenadine	Yes	3	
Allegra-D Tab 12 Hour	Fexofenadine and Pseudoephedrine	No	3	
Allegra-D Tab 24 Hour	Fexofenadine and Pseudoephedrine	No	3	
Alomide Opth Sol 0.1%	Lodoxamide	No	3	
Aloprim Inj 500MG	Allopurinol	Yes	5	
Alora DIS 0.025MG	Estradiol	No	3	
Alora DIS 0.05MG	Estradiol	No	3	
Altace Cap 1.25MG	Ramipril	No	3	
Altace Cap 10MG	Ramipril	No	3	
Altace Cap 2.5MG	Ramipril	No	3	
Altace Cap 5MG	Ramipril	No	3	
Alora DIS 0.075MG	Estradiol	No	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
Alora DIS 0.1MG	Estradiol	No	3	
Alphagan P Sol 0.1%	Brimonidine	No	2	
Alphagan P Sol 0.15%	Brimonidine	No	2	
ALPHANATE/VON WILLEBRAND FACTOR COMPLEX/HUMAN RECON SOLN 1000 UNIT	ANTIHEMOPHILIC FACTOR/VON WILLEBRAND FACTOR COMPLEX (HUMAN)	No	4	
ALPHANATE/VON WILLEBRAND FACTOR COMPLEX/HUMAN RECON SOLN 1500 UNIT	ANTIHEMOPHILIC FACTOR/VON WILLEBRAND FACTOR COMPLEX (HUMAN)	No	4	
ALPHANATE/VON WILLEBRAND FACTOR COMPLEX/HUMAN RECON SOLN 250 UNIT	ANTIHEMOPHILIC FACTOR/VON WILLEBRAND FACTOR COMPLEX (HUMAN)	No	4	
ALPHANATE/VON WILLEBRAND FACTOR COMPLEX/HUMAN RECON SOLN 500 UNIT	ANTIHEMOPHILIC FACTOR/VON WILLEBRAND FACTOR COMPLEX (HUMAN)	No	4	
Ambien Tab 10MG	Zolpidem	Yes	3	
Ambien Tab 5MG	Zolpidem	Yes	3	
ALPHANINE SD RECON SOLN 1000 UNIT	COAGULATION FACTOR IX	No	4	
ALPHANINE SD RECON SOLN 1500 UNIT	COAGULATION FACTOR IX	No	4	
ALPHANINE SD RECON SOLN 500 UNIT	COAGULATION FACTOR IX	No	4	
Alrex Opth Sol 0.2%	Loteprednol	No	3	
Altprev Tab 40MG ER	Lovastatin	No	3	
Altprev Tab 60MG ER	Lovastatin	No	3	
Alupent Inh Aer 0.65/ACT	Metaproterenol	No	3	
Amaryl Tab 1MG	Glimepiride	Yes	3	
Amaryl Tab 2MG	Glimepiride	Yes	3	
Amaryl Tab 4MG	Glimepiride	Yes	3	
AMBIEN CR 12.5mg	Zolpidem	No	3	
AMBIEN CR 6.25MG	Zolpidem	No	3	
Amitiza Cap 24MCG	Lubiprostone	No	3	
Amitiza Cap 8MCG	Lubiprostone	No	3	
Ambifed-G CD Tab	Guaifenesin and Pseudoephedrine	Yes	3	
Ambifed-G DM Tab	Guaifenesin and Pseudoephedrine	Yes	3	
Ambifed-G Tab 20-400MG	Guaifenesin and Pseudoephedrine	Yes	3	
Amoxil Cap 250MG	Amoxicillin	Yes	3	
Amoxil Cap 500MG	Amoxicillin	Yes	3	
Amoxil Chew 200MG	Amoxicillin	Yes	3	
Amoxil Chew 250MG	Amoxicillin	Yes	3	
Amoxil Chew 400MG	Amoxicillin	Yes	3	
Amoxil Susp 125MG/5ML	Amoxicillin	Yes	3	
Amoxil Susp 200MG/5ML	Amoxicillin	Yes	3	
Amoxil Susp 250MG/5ML	Amoxicillin	Yes	3	
Amoxil Susp 400MG/5ML	Amoxicillin	Yes	3	
Amoxil Susp 50MG/ML	Amoxicillin	No	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
Amoxil Tab 500MG	Amoxicillin	Yes	3	
Amoxil Tab 875MG	Amoxicillin	Yes	3	
Ambifed-G Tab 60-1000M	Guaifenesin and Pseudoephedrine	Yes	3	
Ambifed-G Tab CDX	Guaifenesin and Pseudoephedrine	Yes	3	
Anafranil Cap 25MG	ClomiPRAMINE	Yes	3	
Anafranil Cap 50MG	ClomiPRAMINE	Yes	3	
Anafranil Cap 75MG	ClomiPRAMINE	Yes	3	
Amerge Tab 1MG	Naratriptan	No	3	QL
Amerge Tab 2.5MG	Naratriptan	No	3	QL
Amibid DM Tab 30-600CR	Guaifenesin and Dextromethorphan	Yes	3	
Amidrine Cap	Acetaminophen, Isometheptene, and Dichloralphenazone	Yes	3	
Amigesic Tab 500MG	Salsalate	Yes	3	
Amigesic Tab 750MG	Salsalate	Yes	3	
Ami-Tex PSE Tab 120-600MG	Guaifenesin and Pseudoephedrine	Yes	3	
Amnesteem Cap 10MG	Isotretinoin	Yes	3	
Amnesteem Cap 20MG	Isotretinoin	Yes	3	
Andehist NR Liq	Carbinoxamine and Pseudoephedrine	Yes	3	
Andehist NR Syrup 4-45MG/5ML	Carbinoxamine and Pseudoephedrine	Yes	3	
Androderm DIS 2.5MG/24HR	Testosterone	No	3	
Androderm DIS 5MG/24HR	Testosterone	No	3	
AndroGel Gel 1%(25MG)	Testosterone	No	3	
AndroGel Gel 1%(50MG)	Testosterone	No	3	
AndroGel Gel Pump 1%	Testosterone	No	3	
Anexsia Tab 5-325MG	Hydrocodone and Acetaminophen	Yes	3	
Anexsia Tab 7.5-325MG	Hydrocodone and Acetaminophen	Yes	3	
Anexsia Tab 7.5-650MG	Hydrocodone and Acetaminophen	Yes	3	
Amnesteem Cap 40MG	Isotretinoin	Yes	3	
Ansaid Tab 100MG	Flurbiprofen	Yes	3	
Anabuse Tab 250MG	Disulfiram	No	3	
Anabuse Tab 500MG	Disulfiram	No	3	
Antivert Tab 12.5MG	Meclizine	Yes	3	
Antivert Tab 25MG	Meclizine	Yes	3	
Antivert Tab 50MG	Meclizine	No	3	
Anzemet Tab 100MG	Dolasetron	No	3	QL
Anzemet Tab 50MG	Dolasetron	No	3	QL
Analpram-HC Cream 1-1%	Pramoxine and Hydrocortisone	No	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
Analpram-HC Cream 2.5-1%	Pramoxine and Hydrocortisone	No	3	
Analpram-HC Lotn 2.5-1%	Pramoxine and Hydrocortisone	No	3	
AnaMantle HC Cream 3-0.5%	Lidocaine and Hydrocortisone	Yes	3	
AnaMantle HC Cream Kit 3-0.5%	Lidocaine and Hydrocortisone	Yes	3	
AnaMantle HC Gel Kit 3-2.5%	Lidocaine and Hydrocortisone	Yes	3	
Anaprox DS Tab 550MG	Naproxen	Yes	3	
Anaprox Tab 275MG	Naproxen	Yes	3	
Anaspaz Tab 0.125MG	Hyoscyamine	Yes	3	
Anolor 300 Cap	Butalbital, Acetaminophen, and Caffeine	Yes	3	
AntibiOtic Ear Sol 1% Otic	Neomycin, Polymyxin B, and Hydrocortisone	Yes	3	
AntibiOtic Ear Susp 3.4MG/ML Otic	Neomycin, Polymyxin B, and Hydrocortisone	Yes	3	
Aranesp Inj 100MCG	Darbepoetin Alfa	No	5	
Aranesp Inj 150MCG	Darbepoetin Alfa	No	5	
Aranesp Inj 200MCG	Darbepoetin Alfa	No	5	
Aranesp Inj 25MCG	Darbepoetin Alfa	No	5	
Aranesp Inj 25MCG	Darbepoetin Alfa	No	5	
Aranesp Inj 300MCG	Darbepoetin Alfa	No	5	
Aranesp Inj 300MCG	Darbepoetin Alfa	No	5	
Aranesp Inj 40MCG	Darbepoetin Alfa	No	5	
Aranesp Inj 40MCG	Darbepoetin Alfa	No	5	
Aranesp Inj 500MCG	Darbepoetin Alfa	No	5	
Aranesp Inj 60MCG	Darbepoetin Alfa	No	5	
Arava Tab 20MG	Leflunomide	Yes	3	ST
Apexicon E Cream 0.05%	Difflorasone	Yes	3	
Apexicon Oint 0.05%	Difflorasone	Yes	3	
Apidra Inj	Insulin Glulisine	No	1	
Apidra Inj U-100	Insulin Glulisine	No	1	
Apidra Solostar Pen	Insulin Glulisine	No	1	
Aristocort A Cream 0.1%	Triamcinolone	Yes	3	
Aristospan Inj 20MG/ML	Triamcinolone	No	5	
Aristospan Inj 5MG/ML	Triamcinolone	No	5	
Arixtra Inj 2.5MG/0.2ML	Fondaparinux	No	5	
Arixtra Inj 2.5MG/0.5ML	Fondaparinux	No	5	
Apri Tab 0.15-30MCG	Ethinyl Estradiol and Desogestrel	Yes	1	
APRISO	Mesalamine	No	2	
APTIVUS CAP 250 MG	tipranavir	No	2	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
APTIVUS ORAL SOLN 100 MG/ML	tipranavir oral soln	No	2	
Aquachloral Sup 325MG	Chloral Hydrate	Yes	3	
Aquachloral Sup 600MG	Chloral Hydrate	Yes	3	
Aquatab D Tab	Guaifenesin and Pseudoephedrine	Yes	3	
Aquatab DM Tab	Guaifenesin and Dextromethorphan	Yes	3	
Aranelle Tab	Ethinyl Estradiol and Norethindrone	Yes	1	
Artane 2MG	Trihexyphenidyl	Yes	3	
Artane 5MG	Trihexyphenidyl	Yes	3	
Artane Elixir	Trihexyphenidyl	Yes	3	
Aricept ODT Tab 10MG	Donepezil	No	2	
Aricept ODT Tab 5MG	Donepezil	No	2	
Aricept Tab 10MG	Donepezil	No	2	
Aricept Tab 5MG	Donepezil	No	2	
ARICEPT TABLET 23 MG	Donepezil	No	2	
Armour Thyroid Tab 120MG	Thyroid	Yes	3	
Armour Thyroid Tab 15MG	Thyroid	Yes	3	
Armour Thyroid Tab 180MG	Thyroid	Yes	3	
Armour Thyroid Tab 240MG	Thyroid	Yes	3	
Armour Thyroid Tab 300MG	Thyroid	Yes	3	
Atacand HCT Tab 16-12.5MG	Candesartan and Hydrochlorothiazide	No	3	
Atacand HCT Tab 32-12.5MG	Candesartan and Hydrochlorothiazide	No	3	
Atacand HCT Tab 32-25MG	Candesartan and Hydrochlorothiazide	No	3	
Atacand Tab 16MG	Candesartan	No	3	
Atacand Tab 32MG	Candesartan	No	3	
Atacand Tab 4MG	Candesartan	No	3	
Atacand Tab 8MG	Candesartan	No	3	
Armour Thyroid Tab 30MG	Thyroid	Yes	3	
Armour Thyroid Tab 60MG	Thyroid	Yes	3	
Armour Thyroid Tab 90MG	Thyroid	Yes	3	
Arranon Inj 5MG/ML	Nelarabine	No	5	PA
Arthrotec 50 Tab	Diclofenac and Misoprostol	No	3	
Arthrotec 75 Tab	Diclofenac and Misoprostol	No	3	
Ativan Tab 0.5MG	Lorazepam	Yes	3	
Ativan Tab 1MG	Lorazepam	Yes	3	
Ativan Tab 2MG	Lorazepam	Yes	3	
Asacol Tab 400MG DR	Mesalamine	No	2	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
Asmanex 120 Aer 220MCG	Mometasone	No	2	
Asmanex 14 Aer 220MCG	Mometasone	No	2	
Atrovent Inh Sol 0.018MG/ACT	Ipratropium	Yes	3	
Atrovent Inh Sol 0.02%	Ipratropium	Yes	3	
Atrovent Nasal Sol 0.03%	Ipratropium Bromide	No	3	
Atrovent Nasal Sol 0.06%	Ipratropium Bromide	No	3	
Asmanex 30 Aer 110MCG	Mometasone	No	2	
Augmentin Chew 200MG	Amoxicillin and Clavulanate Potassium	Yes	3	
Asmanex 30 Aer 220MCG	Mometasone	No	2	
Augmentin Chew 400MG	Amoxicillin and Clavulanate Potassium	Yes	3	
Augmentin ES-600 Susp	Amoxicillin and Clavulanate Potassium	Yes	3	
Asmanex 60 Aer 220MCG	Mometasone	No	2	
Augmentin Susp 200MG/5ML	Amoxicillin and Clavulanate Potassium	Yes	3	
Augmentin Susp 250MG/5ML	Amoxicillin and Clavulanate Potassium	Yes	3	
Augmentin Susp 400MG/5ML	Amoxicillin and Clavulanate Potassium	Yes	3	
Augmentin Tab 250MG	Amoxicillin and Clavulanate Potassium	Yes	3	
Augmentin Tab 500MG	Amoxicillin and Clavulanate Potassium	Yes	3	
Augmentin Tab 875MG	Amoxicillin and Clavulanate Potassium	Yes	3	
Astepro Spray 137MCG	Azelastine	No	2	QL
Avage Cream 0.1%	Tazarotene	No	3	
Astepro Spray 205.5MCG	Azelastine	No	2	QL
Atarax Syrup 10MG/5ML	Hydroxyzine	Yes	3	
Atarax Tab 100MG	Hydroxyzine	Yes	3	
AVANDAMET TAB 2-500MG	Rosiglitazone and Metformin	No	3	
AVANDAMET TAB 4-1000MG	Rosiglitazone and Metformin	No	3	
AVANDAMET TAB 4-500MG	Rosiglitazone and Metformin	No	3	
Avandamet Tab 1-500MG	Rosiglitazone and Metformin	No	3	
Avandamet Tab 2-1000MG	Rosiglitazone and Metformin	No	3	
Atarax Tab 10MG	Hydroxyzine	Yes	3	
Atarax Tab 25MG	Hydroxyzine	Yes	3	
Atarax Tab 50MG	Hydroxyzine	Yes	3	
AVAR EMU CLEANSER	Sulfur and Sulfacetamide	Yes	3	
Atgam Inj 250MG	Antithymocyte Globulin (Equine)	No	5	
Atripla Tab	Efavirenz-Emtricitabine-Tenofovir DF	No	2	
Atropine-Care Sol 1% OP	Atropine	Yes	3	
Atrovent HFA Aero 17MCG	Ipratropium	No	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
Augmentin Chew 125MG	Amoxicillin and Clavulanate Potassium	No	3	
Augmentin Chew 250MG	Amoxicillin and Clavulanate Potassium	No	3	
Avinza Cap 120MG CR	Morphine Sulfate	No	3	
Avinza Cap 120MG ER	Morphine Sulfate	No	3	
Avinza Cap 30MG CR	Morphine Sulfate	No	3	
Avinza Cap 60MG CR	Morphine Sulfate	No	3	
Avinza Cap 60MG ER	Morphine Sulfate	No	3	
Avinza Cap 90MG CR	Morphine Sulfate	No	3	
Augmentin Susp 125MG/5ML	Amoxicillin and Clavulanate Potassium	No	3	
Augmentin XR Tab SR 12HR	Amoxicillin and Clavulanate Potassium	No	3	
Avalide Tab 150-12.5MG	Irbesartan and Hydrochlorothiazide	No	2	
Avalide Tab 300-12.5MG	Irbesartan and Hydrochlorothiazide	No	2	
Avalide Tab 300-25MG	Irbesartan and Hydrochlorothiazide	No	2	
Avapro Tab 150MG	Irbesartan	No	2	
EXALGO TABLET ER 24 HOU 8 MG	HYDROMORPHONE HCL	No	3	
EXALGO TABLET ER 24 HOU 12 MG	HYDROMORPHONE HCL	No	3	
EXALGO TABLET ER 24 HOU 16 MG	HYDROMORPHONE HCL	No	3	
Avapro Tab 300MG	Irbesartan	No	2	
Avapro Tab 75MG	Irbesartan	No	2	
AVAR GEL 10-5%	Sulfur and Sulfacetamide	No	3	
AVAR GEL GREEN	Sulfur and Sulfacetamide	No	3	
Avelox ABC Tab 400MG	Moxifloxacin	No	2	
Axert Tab 12.5MG	Almotriptan	No	3	QL
Axert Tab 6.25MG	Almotriptan	No	3	QL
Avelox Inj 400MG/250ML	Moxifloxacin	No	4	
Avelox Tab 400MG	Moxifloxacin	No	2	
AVIANE	LEVONORGESTREL & ETHINYL ESTRADIOL	Yes	1	
AYGESTIN TAB 5MG	Norethindrone	Yes	3	
AVITA CRE 0.025%	Tretinoin, Topical	Yes	3	A
AVITA GEL 0.025%	Tretinoin, Topical	Yes	3	A
Azelex Cream 20%	Azelaic Acid	No	3	PA
AVODART 0.5 MG	DUTASTERIDE	No	3	
Avonex Inj 30MCG	Interferon beta-1a	No	4	
AZMACORT AER 100MCG	Triamcinolone	Yes	3	
AZMACORT AER 75MCG	Triamcinolone	Yes	3	
Avonex Kit	Interferon beta-1a	No	4	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
AXID CAP 150MG	Nizatidine	Yes	3	
AXID SOL 15MG/ML	Nizatidine	Yes	3	
AXID CAP 300MG	Nizatidine	Yes	3	
AZASAN TAB 75 MG	Azathioprine	Yes	3	
BACTRIM DS TAB 800-160	Sulfamethoxazole and Trimethoprim	Yes	3	
BACTRIM TAB 400-80MG	Sulfamethoxazole and Trimethoprim	Yes	3	
BACTROBAN CRE 2%	Mupirocin Calcium	No	3	
BACTROBAN OIN 2%	Mupirocin	Yes	3	
BACTROBAN OIN NASAL 2%	Mupirocin	Yes	3	
BANCAP-HC CAP 500-5MG	Hydrocodone and Acetaminophen	Yes	3	
AZASAN TAB 100MG	Azathioprine	Yes	3	
Azilect Tab 0.5MG	Rasagiline	No	2	
Azilect Tab 1MG	Rasagiline	No	2	
BECONASE AQ SUS 0.042%		No	3	
BELLAMINE S TAB	Belladonna, Phenobarbital, and Ergotamine	Yes	3	
BEL-TABS TAB	Belladonna, Phenobarbital, and Ergotamine	Yes	3	
Azopt Sus 1% OP	Brinzolamide	No	2	
AZULFIDINE TAB 500MG EN	Sulfasalazine	Yes	3	
AZULFIDINE TAB 500MG	Sulfasalazine	Yes	3	
B & O 15-A SUP SUPPRETT	Belladonna and Opium	Yes	3	
B & O 16-A SUP SUPPRETT	Belladonna and Opium	Yes	3	
Baraclude Sol .05MG/ML	Entecavir	No	2	
Baraclude Tab 0.5MG	Entecavir	No	2	
Baraclude Tab 1MG	Entecavir	No	2	
BENZAC AC GEL 10%	Benzoyl Peroxide	Yes	3	
BENZAC AC GEL 2.5%	Benzoyl Peroxide	Yes	3	
BENZAC AC GEL 5%	Benzoyl Peroxide	Yes	3	
BENZAC AC LIQ WASH 10%	Benzoyl Peroxide	Yes	3	
BENZAC AC LIQ WASH 5%	Benzoyl Peroxide	Yes	3	
BENZAC AC LIQ WASH2.5%	Benzoyl Peroxide	Yes	3	
BENZAC W GEL 10%	Benzoyl Peroxide	Yes	3	
BENZAC W GEL 2.5%	Benzoyl Peroxide	Yes	3	
BENZAC W GEL 5%	Benzoyl Peroxide	Yes	3	
BENZAC W LIQ 10% WASH	Benzoyl Peroxide	Yes	3	
BENZAC W LIQ 5% WASH	Benzoyl Peroxide	Yes	3	
BENZAGEL-10 GEL 10%	Benzoyl Peroxide	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
BENZAGEL-5 GEL 5%	Benzoyl Peroxide	Yes	3	
BENZAMYCIN GEL	Erythromycin and Benzoyl Peroxide	Yes	3	
BENZAMYCIN GEL PAK	Erythromycin and Benzoyl Peroxide	No	3	
BENZASHAVE CRE 10%	Benzoyl Peroxide	Yes	3	
Benzoyl Peroxide Gel 10%	Benzoyl Peroxide	Yes	3	
BENICAR TAB 20M	Olmesartan	No	3	
BENICAR TAB 40M	Olmesartan	No	3	
BENICAR TAB 5MG	Olmesartan	No	3	
BENICAR HCT TAB 20-12.5	Olmesartan and Hydrochlorothiazide	No	3	
BENICAR HCT TAB 40-12.5	Olmesartan and Hydrochlorothiazide	No	3	
BENICAR HCT TAB 40-25MG	Olmesartan and Hydrochlorothiazide	No	3	
BENTYL CAP 10MG	Dicyclomine	Yes	3	
BIAXIN SUSP 125 MG/5ML	Clarithromycin	Yes	3	
BIAXIN SUSP 250 MG/5ML	Clarithromycin	Yes	3	
BIAXIN TAB 250MG	Clarithromycin	Yes	3	
BIAXIN TAB 500MG	Clarithromycin	Yes	3	
BIAXIN XL TAB 500MG	Clarithromycin	Yes	3	
BENTYL TAB 20MG	Dicyclomine	Yes	3	
BETADINE SOL 5% OP	Povidone-Iodine	No	3	
BETAGAN SOL 0.25% OP	Levobunolol	Yes	3	
BETAGAN SOL 0.5% OP	Levobunolol	Yes	3	
BLEPH-10 SOL 10% OP	Sulfacetamide	Yes	3	
BETAPACE TAB 80MG	Sotalol	Yes	3	
BETAPACE AF TAB 80MG	Sotalol	Yes	3	
Betaseron Inj 0.3MG	Interferon beta-1b	No	4	
Betoptic S Sus 0.2%	Betaxolol	No	3	
BICITRA SOL	Sodium Citrate and Citric Acid	Yes	3	
Boniva Kit 3MG/3ML	Ibandronate	No	3	ST/PA
Boniva Tab 150MG	Ibandronate	No	3	ST/PA
Boniva Tab 2.5MG	Ibandronate	No	3	ST/PA
BIO-STATIN CAP 1000000	Nystatin	Yes	3	
BIO-STATIN CAP 500000	Nystatin	Yes	3	
BREVICON - 28	Ethinyl Estradiol and Norethindrone	Yes	3	
BREVOXYL GEL 4%	Benzoyl Peroxide	Yes	3	
BREVOXYL GEL 8%	Benzoyl Peroxide	Yes	3	
BREVOXYL-4 LIQ CREM WSH	Benzoyl Peroxide	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
BREVOXYL-8 LIQ CREM WSH	Benzoyl Peroxide	Yes	3	
BIO-STATIN POW	Nystatin	Yes	3	
BLEPHAMIDE OIN S.O.P.	Sulfacetamide and Prednisolone	Yes	3	
BLEPHAMIDE SUS OP	Sulfacetamide and Prednisolone	Yes	3	
BUSPAR TAB 15MG	BusPIRone	Yes	3	
BUSPAR TAB 10MG	BusPIRone	Yes	3	
BUSPAR TAB 30MG	BusPIRone	Yes	3	
BUSPAR TAB 5MG	BusPIRone	Yes	3	
BLOCADREN Tab 10 MG	Timolol	Yes	3	
BLOCADREN Tab 20MG	Timolol	Yes	3	
BLOCADREN Tab 5 MG	Timolol	Yes	3	
Byetta Inj 10MCG	Exenatide	No	5	PA
Byetta Inj 5MCG	Exenatide	No	5	PA
BRETHINE TAB 2.5MG	Terbutaline	Yes	3	
BRETHINE TAB 5MG	Terbutaline	Yes	3	
BUMEX TAB 0.5MG	Bumetanide	Yes	3	
BUMEX TAB 1MG	Bumetanide	Yes	3	
BUMEX TAB 2MG	Bumetanide	Yes	3	
BUTISOL SOD TAB 30MG	Butabarbital	No	3	
BUTISOL SOD ELX 30MG/5ML	Butabarbital	No	3	
BUTISOL SOD TAB 50MG	Butabarbital	No	3	
CADUET TAB 10/10MG	Amlodipine and Atorvastatin	No	2	
CADUET TAB 10/20MG	Amlodipine and Atorvastatin	No	2	
CADUET TAB 10/40MG	Amlodipine and Atorvastatin	No	2	
CADUET TAB 10/80MG	Amlodipine and Atorvastatin	No	2	
CADUET TAB 2.5/10MG	Amlodipine and Atorvastatin	No	2	
CADUET TAB 2.5/20MG	Amlodipine and Atorvastatin	No	2	
CADUET TAB 2.5/40MG	Amlodipine and Atorvastatin	No	2	
CADUET TAB 5MG/10MG	Amlodipine and Atorvastatin	No	2	
CADUET TAB 5MG/20MG	Amlodipine and Atorvastatin	No	2	
CADUET TAB 5MG/40MG	Amlodipine and Atorvastatin	No	2	
CADUET TAB 5MG/80MG	Amlodipine and Atorvastatin	No	2	
CAPITAL/COD SUS 120-12/5	Acetaminophen and Codeine	Yes	3	
CAFERGOT TAB 1-100MG	Ergotamine and Caffeine	No	3	
CALAN TAB 80MG	Verapamil	Yes	3	
CALAN SR TAB 120MG	Verapamil	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
CALAN SR TAB 180MG	Verapamil	Yes	3	
CALAN SR TAB 240MG	Verapamil	Yes	3	
CAMILA TAB 0.35MG	Norethindrone	Yes	1	
CANASA SUP 1000MG	Mesalamine	No	3	
CAPEX SHA 0.01%	Fluocinolone	No	3	
CAPOTEN TAB 12.5MG	Captopril	Yes	3	
CAPOTEN TAB 25MG	Captopril	Yes	3	
CAPOTEN TAB 50MG	Captopril	Yes	3	
CAPOTEN TAB 100MG	Captopril	Yes	3	
CAPOZIDE TAB 25-15MG	Captopril and Hydrochlorothiazide	Yes	3	
CAPOZIDE TAB 25-25MG	Captopril and Hydrochlorothiazide	Yes	3	
CARBAXEFED RF	Carbinoxamine and Pseudoephedrine	Yes	3	
CAPOZIDE TAB 50-15MG	Captopril and Hydrochlorothiazide	Yes	3	
CAPOZIDE TAB 50-25MG	Captopril and Hydrochlorothiazide	Yes	3	
CARAC CRE 0.5%	Fluorouracil	Yes	3	
CARAFATE SUS 1GM/10ML	Sucralfate	Yes	3	
CARAFATE TAB 1GM	Sucralfate	Yes	3	
CARBATROL CAP 100MG	Carbamazepine	No	3	
CARBATROL CAP 200MG	Carbamazepine	No	3	
CARBATROL CAP 300MG	Carbamazepine	No	3	
CARDENE CAP 20MG	NiCARDipine	Yes	3	
CARDENE CAP 30MG	NiCARDipine	Yes	3	
CARDENE SR CAP 30MG	NiCARDipine	Yes	3	
CARDENE SR CAP 45MG	NiCARDipine	Yes	3	
CARDENE SR CAP 60MG	NiCARDipine	Yes	3	
CARDIZEM TAB 120MG	Diltiazem	Yes	3	
CARDIZEM TAB 30MG	Diltiazem	Yes	3	
CARDIZEM TAB 60MG	Diltiazem	Yes	3	
CARDIZEM TAB 90MG	Diltiazem	Yes	3	
CARDIZEM Cap SR 12HR 120 MG	Diltiazem	Yes	3	
CARDIZEM Cap SR 12HR 60 MG	Diltiazem	Yes	3	
CARDIZEM Cap SR 12HR 90 MG	Diltiazem	Yes	3	
CARDIZEM CD CAP 120MG/24	Diltiazem	No	3	
CARDIZEM CD CAP 180MG/24	Diltiazem	No	3	
CARDIZEM CD CAP 240MG/24	Diltiazem	No	3	
CARDURA TAB 2MG	Doxazosin	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
CARDURA TAB 4MG	Doxazosin	Yes	3	
CARDURA TAB 8MG	Doxazosin	Yes	3	
CARDURA TAB 1MG	Doxazosin	Yes	3	
CARDURA XL TAB 4MG	Doxazosin	No	3	
CARDURA XL TAB 8MG	Doxazosin	No	3	
CARMOL SCALP LOT TREATMEN	Sulfacetamide	Yes	3	
CARDIZEM CD CAP 300MG/24	Diltiazem	No	3	
CARDIZEM CD CAP 360MG/24	Diltiazem	No	3	
CARDIZEM LA TAB 120MG	Diltiazem	No	3	
CARDIZEM LA TAB 180MG	Diltiazem	No	3	
CARDIZEM LA TAB 240MG	Diltiazem	No	3	
CARDIZEM LA TAB 300MG	Diltiazem	No	3	
CATAPRES TAB 0.1MG	Clonidine	Yes	3	
CATAPRES TAB 0.2MG	Clonidine	Yes	3	
CATAPRES TAB 0.3MG	Clonidine	Yes	3	
CATAPRES-TTS DIS 0.1/24HR	Clonidine	Yes	3	
CATAPRES-TTS DIS 0.2/24HR	Clonidine	Yes	3	
CATAPRES-TTS DIS 0.3/24HR	Clonidine	Yes	3	
CECLOR CAP 250MG	Cefaclor	Yes	3	
CECLOR CAP 500MG	Cefaclor	Yes	3	
CECLOR SUS 125/5ML	Cefaclor	Yes	3	
CECLOR SUS 375/5ML	Cefaclor	Yes	3	
CECLOR SUS 250/5ML	Cefaclor	Yes	3	
CEDAX CAP 400MG	Ceftibuten	No	3	
CEDAX SUS 90MG/5ML	Ceftibuten	No	3	
CEFTIN SUS 125/5ML	Cefuroxime	Yes	3	
CEFTIN SUS 250/5ML	Cefuroxime	Yes	3	
CEFTIN TAB 250MG	Cefuroxime	Yes	3	
CEFTIN TAB 500MG	Cefuroxime	Yes	3	
CEFZIL SUS 125/5ML	Cefprozil	Yes	3	
CEFZIL TAB 250MG	Cefprozil	Yes	3	
CEFZIL TAB 500MG	Cefprozil	Yes	3	
CEFZIL SUS 250/5ML	Cefprozil	Yes	3	
CARDIZEM LA TAB 360MG	Diltiazem	No	3	
CARDIZEM LA TAB 420MG	Diltiazem	No	3	
CARMOL-HC CRE 1%	Urea and Hydrocortisone	No	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
CELEXA TAB 20MG	Citalopram	Yes	3	
CELEXA TAB 40MG	Citalopram	Yes	3	
CELEXA SOL 10MG/5ML	Citalopram	Yes	3	
CELEXA TAB 10MG	Citalopram	Yes	3	
CARTIA XT CAP 120/24HR	Diltiazem	Yes	3	
CARTIA XT CAP 180/24HR	Diltiazem	Yes	3	
CARTIA XT CAP 240/24HR	Diltiazem	Yes	3	
CARTIA XT CAP 300/24HR	Diltiazem	Yes	3	
CATAFLAM TAB 50MG	Diclofenac	Yes	3	
Celebrex Cap 100MG	Celecoxib	No	2	
Celebrex Cap 200MG	Celecoxib	No	2	
Celebrex Cap 400MG	Celecoxib	No	2	
CENTANY OIN 2%	Mupirocin	Yes	3	
CELLCEPT CAP 250MG	Mycophenolate	No	3	
CELLCEPT TAB 500MG	Mycophenolate	No	3	
CELLCEPT SUS 200MG/ML	Mycophenolate	No	3	
CENESTIN TAB 0.3MG	Estrogens (Conjugated A/Synthetic)	No	3	
CENESTIN TAB 0.45MG	Estrogens (Conjugated A/Synthetic)	No	3	
CENESTIN TAB 0.625MG	Estrogens (Conjugated A/Synthetic)	No	3	
CILOXAN OIN 0.3% OP	Ciprofloxacin	No	3	
CILOXAN SOL 0.3% OP	Ciprofloxacin	Yes	3	
CIMZIA KIT 2 x 200MG	Certolizumab Pegol	No	5	
CIPRO (10%) SUS 500MG/5	Ciprofloxacin	Yes	3	
CIPRO (5%) SUS 250MG/5	Ciprofloxacin	Yes	3	
CENESTIN TAB 0.9MG	Estrogens (Conjugated A/Synthetic)	No	3	
CIPRO TAB 250MG	Ciprofloxacin	Yes	3	
CIPRO TAB 500MG	Ciprofloxacin	Yes	3	
CIPRO TAB 750MG	Ciprofloxacin	Yes	3	
CIPRO XR TAB 1000MG	Ciprofloxacin	Yes	3	
CIPRO XR TAB 500MG	Ciprofloxacin	Yes	3	
CENESTIN TAB 1.25MG	Estrogens (Conjugated A/Synthetic)	No	3	
CESIA	DESOGEST-ETHIN EST	Yes	1	
CETA PLUS Cap 5-500 MG	Hydrocodone and Acetaminophen	Yes	3	
CHANTIX PACK	varenicline tartrate	No	3	
CHANTIX TAB 0.5 MG	varenicline tartrate	No	3	
CHANTIX TAB 1 MG	varenicline tartrate	No	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
Cialis Tab 10MG	Tadalafil	No	3	QL / G
Cialis Tab 2.5MG	Tadalafil	No	3	QL / G
Cialis Tab 20MG	Tadalafil	No	3	QL / G
Cialis Tab 5MG	Tadalafil	No	3	QL / G
CIPRO HC SUS OTIC	Ciprofloxacin and Hydrocortisone	No	3	
Ciprodex Sus 0.3-0.1%	Ciprofloxacin and Dexamethasone	No	2	
CLEOCIN CAP 150MG	Clindamycin	Yes	3	
CLEOCIN CAP 300MG	Clindamycin	Yes	3	
CLEOCIN CAP 75MG	Clindamycin	Yes	3	
CLEOCIN PED SOL 75MG/5ML	Clindamycin	Yes	3	
CLEOCIN-T LOT 1%	Clindamycin	Yes	3	
CLEOCIN-T PAD 1%	Clindamycin	Yes	3	
CLEOCIN-T SOL 1%	Clindamycin	Yes	3	
CLEOCIN-T GEL 1%	Clindamycin	Yes	3	
CLARAVIS CAP 20MG	Isotretinoin	Yes	3	
CLARAVIS CAP 30MG	Isotretinoin	Yes	3	
CLARAVIS CAP 40MG	Isotretinoin	Yes	3	
CLARAVIS CAP 10MG	Isotretinoin	Yes	3	
CLARINEX SYP 0.5MG/ML	Desloratadine	No	3	
CLARINEX TAB 5MG	Desloratadine	No	3	
CLIMARA PRO DIS WEEKLY	Estradiol and Levonorgestrel	No	3	
CLINAC BPO GEL 7%	Benzoyl Peroxide	Yes	3	
CLARINEX RDT TAB 2.5MG	Desloratadine	No	3	
CLARINEX RDT TAB 5MG	Desloratadine	No	3	
CLARINEX-D TAB 2.5-120	Desloratadine & Pseudoephedrine	No	3	
CLARINEX-D TAB 5-240MG	Desloratadine & Pseudoephedrine	No	3	
CLENIA CRE 10-5%	Sulfur and Sulfacetamide	Yes	1	
CLIMARA DIS 0.025MG	Estradiol	No	3	
CLIMARA DIS 0.0375MG	Estradiol	No	3	
CLIMARA DIS 0.05MG	Estradiol	No	3	
CLIMARA DIS 0.06MG	Estradiol	No	3	
CLIMARA DIS 0.075MG	Estradiol	No	3	
CLODERM CRE 0.1%	Clocortolone	No	3	
CLIMARA DIS 0.1MG	Estradiol	No	3	
CLINDAGEL GEL 1%	Clindamycin	Yes	3	
CLINDAMAX CRE 2%	Clindamycin	Yes	1	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
CLINDAMAX GEL 1%	Clindamycin	Yes	1	
CLINDESSE CRE 2%	Clindamycin	No	3	
CLOZARIL TAB 100MG	Clozapine	Yes	3	
CLOZARIL TAB 25MG	Clozapine	Yes	3	
COGENTIN TAB 0.5MG	Benzotropine	Yes	3	
COGENTIN TAB 1MG	Benzotropine	Yes	3	
COGENTIN TAB 2MG	Benzotropine	Yes	3	
CLINDETS 1%	Clindamycin	Yes	1	
CLINORIL TAB 200MG	Sulindac	Yes	3	
COLESTID POW 5GM	Colestipol	Yes	3	
COLESTID TAB 1GM	Colestipol	Yes	3	
COLESTID GRA 5GM	Colestipol	Yes	3	
CLOBEVATE GEL 0.05%	Clobetasol	Yes	3	
CLOBEX LOT 0.05%	Clobetasol	Yes	3	
CLOBEX SHA 0.05%	Clobetasol	Yes	3	
COMBIPATCH DIS .05/.14	Estradiol and Norethindrone	No	3	
COMBIPATCH DIS .05/.25	Estradiol and Norethindrone	No	3	
CLOBEX SPR 0.05%	Clobetasol	Yes	3	
CLOLAR INJ 1MG/ML	Clofarabine	No	5	
CLOMID TAB 50MG	ClomiPHENE	Yes	3	
CLORPRES TAB 0.1-15MG	Clonidine and Chlorthalidone	No	3	
CLORPRES TAB 0.2-15MG	Clonidine and Chlorthalidone	No	3	
CLORPRES TAB 0.3-15MG	Clonidine and Chlorthalidone	No	3	
COLAZAL CAP 750MG	Balsalazide	Yes	3	
COLD COUGH HC SYP	Pseudoephedrine, Hydrocodone, and Chlorpheniramine	Yes	3	
COLY-MYCIN-S SUS OTIC	Neomycin, Colistin, Hydrocortisone, and Thonzonium	No	3	
COLYTE SOL	Polyethylene Glycol-Electrolyte Solution	Yes	3	
COMBIGAN Opth Soln 0.2-0.5%	Brimonidine Tartrate-Timolol Maleate Opth Soln	No	2	
Combivent Aerosol	Ipratropium and Albuterol	No	3	
COMBIVIR TAB 150/300	Zidovudine and Lamivudine	No	2	
COMPAZINE SUP 5MG	Prochlorperazine	Yes	3	
CONDYLOX GEL 0.5%	Podofilox	Yes	3	
CONDYLOX SOL 0.5%	Podofilox	Yes	3	
COMPAZINE SUP 2.5MG	Prochlorperazine	Yes	3	
COMPAZINE SYR 5MG/5ML	Prochlorperazine	Yes	3	
COMPAZINE Inj 5 MG/ML	Prochlorperazine	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
COMPAZINE Tab 10 MG	Prochlorperazine	Yes	3	
COMPAZINE Tab 5 MG	Prochlorperazine	Yes	3	
COMPRO SUP 25MG	Prochlorperazine	Yes	3	
COMTAN TAB 200MG	Entacapone	No	3	
CONCERTA TAB 18MG	Methylphenidate	No	3	QL
CONCERTA TAB 27MG	Methylphenidate	No	3	QL
CONCERTA TAB 36MG	Methylphenidate	No	3	QL
CONCERTA TAB 54MG	Methylphenidate	No	3	QL
CONSTULOSE SOL 10GM/15	Lactulose	Yes	3	
Copaxone Kit 20MG/ML	Glatiramer Acetate Inj Kit 20 MG/ML	No	4	
Copegus Tab 200MG	Ribavirin	Yes	3	PA
CORDARONE TAB 200MG	Amiodarone	Yes	3	
CORDRAN LOT 0.05%	Flurandrenolide	No	3	
CORDRAN SP CRE 0.05%	Flurandrenolide	No	3	
CORDRON-HC LIQ	Pseudoephedrine, Hydrocodone, and Chlorpheniramine	Yes	3	
COREG TAB 12.5MG	Carvedilol	Yes	3	
COREG TAB 25MG	Carvedilol	Yes	3	
COREG TAB 3.125MG	Carvedilol	Yes	3	
COREG TAB 6.25MG	Carvedilol	Yes	3	
CORTISPORIN OIN 1%	Bacitracin, Neomycin, Polymyxin B, and Hydrocortisone	No	3	
COREG CR CAPSULE 10 MG	Carvedilol	No	3	
COREG CR CAPSULE 20 MG	Carvedilol	No	3	
COREG CR CAPSULE 40 MG	Carvedilol	No	3	
COREG CR CAPSULE 80 MG	Carvedilol	No	3	
CORGARD TAB 20MG	Nadolol	Yes	3	
CORGARD TAB 40MG	Nadolol	Yes	3	
CORGARD TAB 80MG	Nadolol	Yes	3	
CORMAX CRE 0.05%	Clobetasol	Yes	3	
CORMAX OIN 0.05%	Clobetasol	Yes	3	
CORMAX SOL 0.05%	Clobetasol	Yes	3	
CORTISPORIN CRE 0.5%	Neomycin, Polymyxin B, and Hydrocortisone	No	3	
CORTISPORIN SUS OP 1%	Neomycin, Polymyxin B, and Hydrocortisone	Yes	3	
CORTISPORIN SOL 1% OTIC	Neomycin, Polymyxin B, and Hydrocortisone	Yes	3	
CORTISPORIN SUS 1% OTIC	Neomycin, Polymyxin B, and Hydrocortisone	Yes	3	
CORTISPORIN SUS -TC OTIC	Neomycin, Colistin, Hydrocortisone, and Thonzonium	No	3	
CORZIDE TAB 40-5MG	Nadolol and Bendroflumethiazide	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
CORZIDE TAB 80-5MG	Nadolol and Bendroflumethiazide	Yes	3	
COSOPT SOL 2-0.5%OP	Dorzolamide and Timolol	No	3	
COUMADIN TAB 10MG	Warfarin	Yes	3	
COUMADIN TAB 1MG	Warfarin	Yes	3	
COUMADIN TAB 2.5MG	Warfarin	Yes	3	
COUMADIN TAB 2MG	Warfarin	Yes	3	
COUMADIN TAB 3MG	Warfarin	Yes	3	
COUMADIN TAB 4MG	Warfarin	Yes	3	
COUMADIN TAB 5MG	Warfarin	Yes	3	
COUMADIN TAB 6MG	Warfarin	Yes	3	
COUMADIN TAB 7.5MG	Warfarin	Yes	3	
COVERA-HS TAB 180MG	Verapamil	No	3	
COVERA-HS TAB 240MG	Verapamil	No	3	
COZAAR TAB 100MG	Losartan	No	3	
Crinone Gel 8% Vag	Progesterone	No	3	PA
COZAAR TAB 25MG	Losartan	No	3	
COZAAR TAB 50MG	Losartan	No	3	
CREON 5 CAP DR PARTICLES 16.6-5-18.75 MU	Pancrelipase	No	3	
CREON 10 CAP DR PARTICLES 33.2-10-37.5 MU	Pancrelipase	No	3	
CREON 20 CAP	Pancrelipase	Yes	3	
CRYSELLE-28 TAB	Ethinyl Estradiol and Norgestrel	Yes	3	
CREON 20 CAP DR PARTICLES 66.4-20-75 MU	Pancrelipase	No	3	
CREON 5 CAP	Pancrelipase	Yes	3	
CRESTOR TAB 10MG	Rosuvastatin	No	3	
CRESTOR TAB 20MG	Rosuvastatin	No	3	
CRESTOR TAB 40MG	Rosuvastatin	No	3	
CYCLESSA PAK	Ethinyl Estradiol and Desogestrel	Yes	3	
CYCLOCORT Cream 0.1%	Amcinonide	Yes	3	
CYCLOCORT Lotion 0.1%	Amcinonide	Yes	3	
CYCLOCORT Oint 0.1%	Amcinonide	Yes	3	
CRESTOR TAB 5MG	Rosuvastatin	No	3	
CRIVAN CAP 100MG	Indinavir Sulfate	No	2	
CRIVAN CAP 200MG	Indinavir Sulfate	No	2	
CRIVAN CAP 333MG	Indinavir Sulfate	No	2	
CYMBALTA CAP 20MG	Duloxetine	No	3	
CYMBALTA CAP 30MG	Duloxetine	No	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
CYMBALTA CAP 60MG	Duloxetine	No	3	
CRIXIVAN CAP 400MG	Indinavir Sulfate	No	2	
CROLOM SOL 4% OP	Cromolyn	Yes	3	
CUPRIMINE CAP 125MG	Penicillamine	No	3	
CUPRIMINE CAP 250MG	Penicillamine	No	3	
CUTIVATE CRE 0.05%	Fluticasone	Yes	3	
CUTIVATE OIN 0.005%	Fluticasone	Yes	3	
CUTIVATE SPR 50MCG	Fluticasone	Yes	3	
CYCLOGYL SOL 0.5% OP	Cyclopentolate	Yes	3	
CYCLOGYL SOL 1% OP	Cyclopentolate	Yes	3	
CYCLOGYL SOL 2% OP	Cyclopentolate	Yes	3	
CYLATE SOL 1% OP	Cyclopentolate	Yes	3	
DALMANE CAP 15MG	Flurazepam	Yes	3	
DALMANE CAP 30MG	Flurazepam	Yes	3	
CYSTOSPAZ TAB 0.15MG	Hyoscyamine	Yes	3	
CYSTOSPAZ-M SR 12HR 0.375MG	Hyoscyamine	Yes	3	
CYTADREN TAB 250MG	Aminoglutethimide	No	3	
DARVOCET TAB A500	Propoxyphene and Acetaminophen	Yes	3	
DARVOCET-N TAB 100	Propoxyphene and Acetaminophen	Yes	3	
DARVOCET-N TAB 50	Propoxyphene and Acetaminophen	Yes	3	
DARVON CAP 65MG	Propoxyphene	Yes	3	
DARVON-N TAB 100MG	Propoxyphene	Yes	3	
DAYPRO TAB 600MG	Oxaprozin	Yes	3	
CYTOMEL TAB 25MCG	Liothyronine	Yes	3	
DECLOMYCIN TAB 300MG	Demeclocycline	Yes	3	
DECLOMYCIN TAB 150MG	Demeclocycline	Yes	3	
DEL-AQUA CRE 10%	Benzoyl Peroxide	Yes	3	
DEL-AQUA GEL 5%	Benzoyl Peroxide	Yes	3	
DELATESTRYL INJ 200MG/ML	Testosterone	Yes	5	
DEMEROL TAB 50MG	Meperidine	Yes	3	
DEMEROL TABLET 100 MG	Meperidine	Yes	3	
DEMULEN 1/35	ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL	Yes	3	
DEMULEN 1/50	ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL	Yes	3	
CYTOMEL TAB 50MCG	Liothyronine	Yes	3	
CYTOMEL TAB 5MCG	Liothyronine	Yes	3	
CYTOTEC TAB 100MCG	Misoprostol	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
CYTOTEC TAB 200MCG	Misoprostol	Yes	3	
CYTRA-2 SOL	Sodium Citrate and Citric Acid	Yes	3	
CYTRA-3 SYP	Citric Acid, Sodium Citrate, and Potassium Citrate	Yes	3	
CYTRA-K SOL	Potassium Citrate and Citric Acid	Yes	3	
DANTRIUM CAP 100MG	Dantrolene	Yes	3	
DANTRIUM CAP 25MG	Dantrolene	Yes	3	
DANTRIUM CAP 50MG	Dantrolene	Yes	3	
DERMATOP CRE 0.1%	Prednicarbate	Yes	3	
DECADRON ELX 0.5/5ML	Dexamethasone	Yes	3	
DESOGEN Tab 0.15 MG-30 MCG	Ethinyl Estradiol and Desogestrel	Yes	3	
DEPACON INJ 100MG/ML	Valproic Acid and Derivatives	Yes	5	
DEPADE Tab 50 MG	Naltrexone	Yes	3	
DEPAKENE CAP 250MG	Valproic Acid and Derivatives	Yes	3	
DESQUAM-E Gel 10%	Benzoyl Peroxide	Yes	3	
DESQUAM-E Gel 2.5%	Benzoyl Peroxide	Yes	3	
DESQUAM-E Gel 5%	Benzoyl Peroxide	Yes	3	
DESQUAM-X Bar 10%	Benzoyl Peroxide	Yes	3	
DESQUAM-X GEL 10%	Benzoyl Peroxide	Yes	3	
DESQUAM-X GEL 5%	Benzoyl Peroxide	Yes	3	
DESQUAM-X LIQ 10%	Benzoyl Peroxide	Yes	3	
DESQUAM-X LIQ 5%	Benzoyl Peroxide	Yes	3	
DESYREL Tab 100 MG	Trazodone	Yes	3	
DESYREL Tab 150 MG	Trazodone	Yes	3	
DESYREL Tab 300 MG	Trazodone	Yes	3	
DESYREL Tab 50 MG	Trazodone	Yes	3	
DEPAKENE SYP 250/5ML	Valproic Acid and Derivatives	Yes	3	
DEPAKOTE ER TAB 250MG	Valproic Acid and Derivatives	Yes	3	
DEPAKOTE ER TAB 500MG	Valproic Acid and Derivatives	Yes	3	
DEPAKOTE SPR CAP 125MG	Valproic Acid and Derivatives	Yes	3	
DEPEN TITRA TAB 250MG	Penicillamine	No	3	
DepoCyt Inj 50MG/5ML	Cytarabine (Liposomal)	No	5	PA
DERMA-SMOOTH OIL /FS BODY	Fluocinolone	No	3	
DERMAZENE Cream 1%	Iodoquinol and Hydrocortisone	Yes	3	
DESOWEN CREAM 0.05%	Desonide	Yes	3	
DESOWEN LOTION 0.05%	Desonide	Yes	3	
DESOWEN OINT 0.05%	Desonide	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
DEXTROSTAT Sulfate Tab 10 MG	Dextroamphetamine	Yes	3	
DEXTROSTAT Sulfate Tab 5 MG	Dextroamphetamine	Yes	3	
DETROL TAB 1MG	Tolterodine	No	2	
DETROL TAB 2MG	Tolterodine	No	2	
DETROL LA CAP 2MG	Tolterodine	No	2	
DETROL LA CAP 4MG	Tolterodine	No	2	
DETUSS Liquid 30-2-5 MG/5ML	Pseudoephedrine, Hydrocodone, and Chlorpheniramine	Yes	3	
DEXACIDIN Ophth Susp 0.1%	Neomycin, Polymyxin B, and Dexamethasone	Yes	3	
DEXASPORIN Ophth Susp 0.1%	Neomycin, Polymyxin B, and Dexamethasone	Yes	3	
DEXEDRINE Cap SR 24HR 10 MG	Dextroamphetamine	Yes	3	
DEXEDRINE Cap SR 24HR 15 MG	Dextroamphetamine	Yes	3	
DEXEDRINE Cap SR 24HR 5 MG	Dextroamphetamine	Yes	3	
DEXPAK Tab 1.5 MG Taper Pack	Dexamethasone	Yes	3	
DHT TAB 0.4MG	Dihydrotestosterone	No	3	
DHT TAB 0.125MG	Dihydrotestosterone	No	3	
DIFFERIN CRE 0.1%	Adapalene	No	3	
DIFFERIN GEL 0.1%	Adapalene	No	3	
DIFFERIN GEL 0.3%	Adapalene	No	3	
DHT INTENSOL CNT 0.2MG/ML	Dihydrotestosterone	No	3	
DIABETA Tab 1.25 MG	GlyBURIDE	Yes	3	
DIABETA Tab 2.5 MG	GlyBURIDE	Yes	3	
DIABETA Tab 5 MG	GlyBURIDE	Yes	3	
DIAMOX SR 12HR 500 MG	AcetaZOLAMIDE	Yes	3	
DIASTAT ACDL GEL 10-15-20	Diazepam	No	3	
DIASTAT ACDL GEL 5-7.5-10	Diazepam	No	3	
DIASTAT ADUL GEL 20MG GEL	Diazepam	No	3	
DIASTAT PED GEL 2.5M GEL	Diazepam	No	3	
DIBENZYLIN CAP 10MG	Phenoxybenzamine	No	3	
DIDRONEL TAB 200MG	Etidronate Disodium	No	3	
DIFLUCAN SUSP 10MG/ML	Fluconazole	Yes	3	
DIFLUCAN SUSP 40MG/ML	Fluconazole	Yes	3	
DIFLUCAN Tab 100 MG	Fluconazole	Yes	3	
DIFLUCAN Tab 150 MG	Fluconazole	Yes	3	
DIFLUCAN Tab 200 MG	Fluconazole	Yes	3	
DIFLUCAN Tab 50 MG	Fluconazole	Yes	3	
DIGITEX Tab 0.25 MG	Digoxin	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
DIHISTINE Liq 30-2-10 MG/5ML	Chlorpheniramine, Pseudoephedrine, and Codeine	Yes	3	
DIHYDRO-CP Syrup 15-2-7.5 MG/5ML	Pseudoephedrine, Dihydrocodeine, and Chlorpheniramine	Yes	3	
DILACOR XR Cap 24HR 120 MG	Diltiazem	Yes	3	
DILACOR XR Cap 24HR 180 MG	Diltiazem	Yes	3	
DILACOR XR Cap 24HR 240 MG	Diltiazem	Yes	3	
DILANTIN CHEW TAB 50MG	Phenytoin	Yes	3	
DILANTIN Extended Cap 100 MG	Phenytoin	Yes	3	
DILANTIN Extended Cap 30 MG	Phenytoin	Yes	3	
DILANTIN SUSP 125MG/5ML	Phenytoin	Yes	3	
DILATRATE SR Cap 40 MG	Isosorbide Dinitrate	Yes	3	
DILOR Tab 200 MG	Dyphylline	Yes	3	
DILOR Tab 400 MG	Dyphylline	Yes	3	
DILTIA XT Cap 24HR 120 MG	Diltiazem	Yes	3	
DILTIA XT Cap 24HR 180 MG	Diltiazem	Yes	3	
DIPENTUM CAP 250MG	Olsalazine	No	3	
DILTIA XT Cap 24HR 240 MG	Diltiazem	Yes	3	
DIOVAN CAP 160MG	Valsartan	No	3	
DIOVAN TAB 160MG	Valsartan	No	3	
DIOVAN TAB 320MG	Valsartan	No	3	
DITROPAN XL TAB 10MG	Oxybutynin	No	3	
DITROPAN XL TAB 15MG	Oxybutynin	No	3	
DITROPAN XL TAB 5MG	Oxybutynin	No	3	
DIOVAN TAB 40MG	Valsartan	No	3	
DIOVAN TAB 80MG	Valsartan	No	3	
DIOVAN HCT TAB 160/12.5	Valsartan and Hydrochlorothiazide	No	3	
DIOVAN HCT TAB 160/25MG	Valsartan and Hydrochlorothiazide	No	3	
DIOVAN HCT TAB 320/12.5	Valsartan and Hydrochlorothiazide	No	3	
DOLOPHINE Tab 10 MG	Methadone	Yes	3	
DOLOPHINE Tab 5 MG	Methadone	Yes	3	
DIOVAN HCT TAB 320/25MG	Valsartan and Hydrochlorothiazide	No	3	
DIOVAN HCT TAB 80/12.5	Valsartan and Hydrochlorothiazide	No	3	
DISALCID Tab 500 MG	Salsalate	Yes	3	
DORAL 15MG	QUAZEPAM	No	3	
DORAL 7.5MG	QUAZEPAM	No	3	
DISALCID Tab 750 MG	Salsalate	Yes	3	
DITROPAN SYRUP 5MG/5ML	Oxybutynin	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
DITROPAN Tab 5 MG	Oxybutynin	Yes	3	
DOVONEX CRE 0.005%	Calcipotriene	No	3	
DOVONEX OIN 0.005%	Calcipotriene	No	3	
DOVONEX SOL 0.005%	Calcipotriene	No	3	
DIURIL Susp 250 MG/5ML	Chlorothiazide	Yes	3	
DOLGIC Elixir 50-325-40 MG/15ML	Butalbital, Acetaminophen, and Caffeine	Yes	3	
DOLGIC TAB 50-750-40 MG/15ML	Butalbital, Acetaminophen, and Caffeine	Yes	3	
DOLOBID TAB 250MG	Diflunisal	Yes	3	
DOLOBID TAB 500MG	Diflunisal	Yes	3	
DUONEB SOL	Ipratropium and Albuterol	No	3	
DONNATAL Elixir 16 MG/5ML	Hyoscyamine, Atropine, Scopolamine, and Phenobarbital	Yes	3	
Duragesic 72HR 100 MCG/HR	Fentanyl	Yes	3	QL
Duragesic 72HR 12(12.5) MCG/HR	Fentanyl	Yes	3	QL
Duragesic 72HR 25 MCG/HR	Fentanyl	Yes	3	QL
Duragesic 72HR 50 MCG/HR	Fentanyl	Yes	3	QL
Duragesic 72HR 75 MCG/HR	Fentanyl	Yes	3	QL
DONNATAL EXTENTAB Tab CR 48 MG	Hyoscyamine, Atropine, Scopolamine, and Phenobarbital	Yes	3	
DONNATAL Tab 16.2 MG	Hyoscyamine, Atropine, Scopolamine, and Phenobarbital	Yes	3	
DURICEF Cap 500 MG	Cefadroxil	Yes	3	
DURICEF SUSP 250MG/5ML	Cefadroxil	Yes	3	
DURICEF SUSP 500MG/5ML	Cefadroxil	Yes	3	
DURICEF TAB 1 MG	Cefadroxil	Yes	3	
DORYX Tab 100 MG	Doxycycline Hyclate	No	3	
DYNABAC TAB 250MG EC	Dirithromycin	No	3	
DYNACIN Cap 100 MG	Minocycline	Yes	3	
DYNACIN Cap 50 MG	Minocycline	Yes	3	
DYNACIN Cap 75 MG	Minocycline	Yes	3	
DORYX Tab 150 MG	Doxycycline Hyclate	No	3	
DORYX Tab 75 MG	Doxycycline Hyclate	No	3	
DROXIA Cap 200 MG	Hydroxyurea	Yes	3	
DROXIA Cap 300 MG	Hydroxyurea	Yes	3	
DROXIA Cap 400 MG	Hydroxyurea	Yes	3	
Duetact Tab 30-2MG	Pioglitazone and Glimepiride	No	3	
Duetact Tab 30-4MG	Pioglitazone and Glimepiride	No	3	
E.E.S For Susp 200 MG/5ML	Erythromycin	Yes	3	
E.E.S. SUSP 200MG/5ML	Erythromycin	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
E.E.S. SUSP 400MG/5ML	Erythromycin	Yes	3	
E.E.S. TAB 400MG	Erythromycin	Yes	3	
DURADRIN Cap 325-65-100 MG	Acetaminophen, Isometheptene, and Dichloralphenazone	Yes	3	
DURATUSS DM Elixir 20-200 MG/5ML	Guaifenesin and Dextromethorphan	Yes	3	
DURATUSS DM Elixir 25-225 MG/5ML	Guaifenesin and Dextromethorphan	Yes	3	
DUREZOL EMULSION 0.05 %	DIFLUPREDNATE	No	2	
DYAZIDE Cap 37.5-25 MG	Hydrochlorothiazide and Triamterene	Yes	3	
EFFEXOR Tab 100 MG	Venlafaxine	Yes	3	
EFFEXOR Tab 25 MG	Venlafaxine	Yes	3	
EFFEXOR Tab 37.5 MG	Venlafaxine	Yes	3	
EFFEXOR Tab 50 MG	Venlafaxine	Yes	3	
EFFEXOR Tab 75 MG	Venlafaxine	Yes	3	
DYNACIRC Cap 2.5 MG	Isradipine	Yes	3	
DYNACIRC Cap 5 MG	Isradipine	Yes	3	
DYNACIRC CR Tab 10 MG	Isradipine	Yes	3	
EFLONE Ophth Susp 0.1%	Fluorometholone	Yes	3	
DYNACIRC CR Tab 5 MG	Isradipine	Yes	3	
DYNEX Tab SR 90-1200 MG	Guaifenesin and Pseudoephedrine	Yes	3	
ELDEPRYL Cap 5 MG	Selegiline	Yes	3	
ELESTAT DRO 0.05%	Epinastine	No	3	
Elidel Cream 1%	Pimecrolimus	No	3	A
DYRENIUM CAP 100MG	Triamterene	No	3	
DYRENIUM CAP 50MG	Triamterene	No	3	
EASPRIN 975 MG	Aspirin	Yes	3	
ELMIRON CAP 100MG	Pentosan Polysulfate Sodium	No	3	
ECONOPRED Ophth Susp 1%	PrednisolONE	Yes	3	
EFFER-K Tab 10 mEq	Potassium Bicarbonate and Potassium Citrate	Yes	3	
EFFER-K Tab 20 mEq	Potassium Bicarbonate and Potassium Citrate	Yes	3	
EFFER-K Tab 25 mEq	Potassium Bicarbonate and Potassium Citrate	Yes	3	
Effexor XR Tab 150MG	Venlafaxine	No	2	
Effexor XR Tab 37.5MG	Venlafaxine	No	2	
Effexor XR Tab 75MG	Venlafaxine	No	2	
Emend Cap 125MG	Aprepitant	No	3	QL
Emend Cap 40MG	Aprepitant	No	3	QL
Emend Cap 80MG	Aprepitant	No	3	QL
Emend THERAPY PACK 80 & 125 MG	aprepitant	No	3	QL

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
EFUDEX CREAM 5%	Fluorouracil	Yes	3	
EFUDEX Soln 5%	Fluorouracil	Yes	3	
ELIMITE Cream 5%	Permethrin	Yes	3	
ELIXOPHYL GG SOL 100-100	Theophylline and Guaifenesin	No	3	
ELIXOPHYLLN Elixir 80 MG/15ML	Theophylline	Yes	3	
ELOCON Cream 0.1%	Mometasone Furoate	Yes	3	
ELOCON OINT 0.1%	Mometasone Furoate	Yes	3	
Enbrel Inj 25/0.5ML	Etanercept Subcutaneous	No	5	PA
Enbrel Inj 25MG	Etanercept Subcutaneous	No	5	PA
Enbrel Inj 50MG/ML	Etanercept Subcutaneous	No	5	PA
ELOCON SOLUTION 0.1%	Mometasone Furoate	Yes	3	
EMBEDA CAP CR 100-4 MG	MORPHINE-NALTREXONE	No	3	
EMBEDA CAP CR 20-0.8 MG	MORPHINE-NALTREXONE	No	3	
ENTOCORT EC CAP 3MG/24HR	Budesonide	No	3	
EMBEDA CAP CR 30-1.2 MG	MORPHINE-NALTREXONE	No	3	
EMBEDA CAP CR 50-2 MG	MORPHINE-NALTREXONE	No	3	
EMBEDA CAP CR 60-2.4 MG	MORPHINE-NALTREXONE	No	3	
EMBEDA CAP CR 80-3.2 MG	MORPHINE-NALTREXONE	No	3	
EMBELINE CREAM 0.05%	Clobetasol	Yes	3	
EMBELINE E Emollient Base Cream 0.05%	Clobetasol	Yes	3	
EMBELINE GEL 0.05%	Clobetasol	Yes	3	
Epogen Inj 10000/ML	Epoetin Alfa	No	5	PA
Epogen Inj 2000/ML	Epoetin Alfa	No	5	PA
Epogen Inj 20000/ML	Epoetin Alfa	No	5	PA
Epogen Inj 3000/ML	Epoetin Alfa	No	5	PA
Epogen Inj 4000/ML	Epoetin Alfa	No	5	PA
Epogen Inj 40000/ML	Epoetin Alfa	No	5	PA
EMBELINE Soln 0.05%	Clobetasol	Yes	3	
Emsam DIS 12MG/24H	Selegiline	No	3	
Emsam DIS 6MG/24HR	Selegiline	No	3	
Emsam DIS 9MG/24HR	Selegiline	No	3	
EMTRIVA CAP 200	Emtricitabine	No	2	
EMTRIVA SOL 10MG/ML	Emtricitabine	No	2	
ERYC Cap 250 MG	Erythromycin	Yes	3	
ERYDERM Soln 2%	Erythromycin	Yes	3	
ERYGEL Gel 2%	Erythromycin	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
ENABLEX TAB 15MG	Darifenacin	No	3	
ENABLEX TAB 7.5MG	Darifenacin	No	3	
ENTEX PSE Tab SR 12HR 120-400 MG	Guaifenesin and Pseudoephedrine	Yes	3	
ENTEX PSE Tab SR 12HR 120-600 MG	Guaifenesin and Pseudoephedrine	Yes	3	
ENTEX PSE Tab SR 12HR 50-525 MG	Guaifenesin and Pseudoephedrine	Yes	3	
ENULOSE Solution 10 GM/15ML	Lactulose	Yes	3	
ENZONE Cream 1-1%	Pramoxine and Hydrocortisone	No	3	
EPIFOAM AER 1%	Pramoxine and Hydrocortisone	No	3	
EPIVIR TAB 150MG	Lamivudine	No	2	
EPIVIR TAB 300MG	Lamivudine	No	2	
EPIVIR HBV SOL 5MG/ML	Lamivudine	No	2	
EPIVIR HBV TAB 100MG	Lamivudine	No	2	
EPZICOM TAB	Abacavir Sulfate-Lamivudine	No	2	
EQUETRO CAP 300MG	Carbamazepine	No	3	
EQUETRO CAP 100MG	Carbamazepine	No	3	
EQUETRO CAP 200MG	Carbamazepine	No	3	
ERGOMAR SUB 2MG	Ergotamine	No	3	
ERRIN Tab 0.35 MG	Norethindrone	Yes	1	
ERYPED Susp 100 MG/2.5ML	Erythromycin	No	3	
ERY-TAB Tab Delayed Release 250 MG	Erythromycin Delayed Release	No	3	
ESTRACE VAG CRE 0.1MG/GM	Estradiol	No	3	
ERY-TAB Tab Delayed Release 333 MG	Erythromycin Delayed Release	No	3	
ERY-TAB Tab Delayed Release 500 MG	Erythromycin Delayed Release	No	3	
ERYTHROCIN Stearate Tab 250 MG	Erythromycin	Yes	3	
ERYTHROCIN Stearate Tab 500 MG	Erythromycin	No	3	
ESTRING MIS 2MG	Estradiol	No	3	
ESCLIM TD Patch Biweekly 0.025 MG/24HR	Estradiol	No	3	
ESTROSTEP-Fe	Ethinyl Estradiol and Norethindrone	Yes	3	
ESCLIM TD Patch Biweekly 0.0375 MG/24HR	Estradiol	No	3	
ESCLIM TD Patch Biweekly 0.05 MG/24HR	Estradiol	No	3	
ESCLIM TD Patch Biweekly 0.075 MG/24HR	Estradiol	No	3	
ESCLIM TD Patch Biweekly 0.1 MG/24HR	Estradiol	No	3	
Euflexxa INJ 10MG/ML	Hyaluronate and Derivatives	No	5	
EVISTA TAB 60MG	Raloxifene	No	3	
ESGIC Cap 50-325-40 MG	Butalbital, Acetaminophen, and Caffeine	Yes	3	
ESGIC TAB 50-325-40 MG	Butalbital, Acetaminophen, and Caffeine	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
ESGIC-PLUS Cap 50-500-40 MG	Butalbital, Acetaminophen, and Caffeine	Yes	3	
ESGIC-PLUS Tab 50-500-40 MG	Butalbital, Acetaminophen, and Caffeine	Yes	3	
ESKALITH Cap 300 MG	Lithium	Yes	3	
ESKALITH CR Tab CR 450 MG	Lithium	Yes	3	
ESTRACE TAB 0.5MG	Estrogens (Esterified) and Methyltestosterone	No	3	
ESTRACE TAB 1MG	Estrogens (Esterified) and Methyltestosterone	No	3	
EXFORGE TAB 10-160MG	Amlodipine Besylate-Valsartan	No	3	
EXFORGE TAB 10-320MG	Amlodipine Besylate-Valsartan	No	3	
EXFORGE TAB 5-160MG	Amlodipine Besylate-Valsartan	No	3	
EXFORGE TAB 5-320MG	Amlodipine Besylate-Valsartan	No	3	
EXFORGE HCT TABLET 5-160-12.5 MG	Amlodipine Besylate-Valsartan	No	3	
EXFORGE HCT TABLET 5-160-25 MG	Amlodipine Besylate-Valsartan	No	3	
EXFORGE HCT TABLET 10-160-12.5 MG	Amlodipine Besylate-Valsartan	No	3	
EXFORGE HCT TABLET 10-160-25 MG	Amlodipine Besylate-Valsartan	No	3	
EXFORGE HCT TABLET 10-320-25 MG	Amlodipine Besylate-Valsartan	No	3	
ESTRACE TAB 2MG	Estrogens (Esterified) and Methyltestosterone	No	3	
ESTRADERM 0.05 MG/24HR	Estradiol	Yes	3	
ESTRADERM 0.1MG/24HR	Estradiol	Yes	3	
ESTRASORB EMU	Estradiol	No	3	
FARESTON TAB 60MG	Toremifene	No	3	
ESTRATEST HS TAB	Estrogens (Esterified) and Methyltestosterone	No	3	
ESTROGEL GEL	Estradiol	No	3	
ETHMOZINE TAB 200MG	Moricizine	No	3	
ETHMOZINE TAB 250MG	Moricizine	No	3	
ETHMOZINE TAB 300MG	Moricizine	No	3	
EUDAL SR TAB	Guaifenesin and Pseudoephedrine	Yes	3	
EVOCLIN Foam 1%	Clindamycin Phosphate	No	3	
EXELON CAP 1.5MG	Rivastigmine	No	3	
FEMHRT Tab 0.5MG-2.5 MCG	Ethinyl Estradiol and Norethindrone	Yes	3	
FEMHRT Tab 1 MG-5 MCG	Ethinyl Estradiol and Norethindrone	Yes	3	
FEMRING MIS 0.05/24H	Estradiol	No	3	
FEMRING MIS 0.1MG/24	Estradiol	No	3	
EXELON CAP 3MG	Rivastigmine	No	3	
EXELON CAP 4.5MG	Rivastigmine	No	3	
EXELON CAP 6MG	Rivastigmine	No	3	
Fentora Tab 100MCG	FentaNYL	No	3	QL

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
Fentora Tab 200MCG	FentaNYL	No	3	QL
Fentora Tab 300MCG	FentaNYL	No	3	QL
Fentora Tab 400MCG	FentaNYL	No	3	QL
Fentora Tab 600MCG	FentaNYL	No	3	QL
Fentora Tab 800MCG	FentaNYL	No	3	QL
EXELON PATCH 24HR 4.6 MG/24HR	Rivastigmine	No	3	
EXELON PATCH 24HR 9.5 MG/24HR	Rivastigmine	No	3	
EXELON SOL 2MG/ML	Rivastigmine	No	3	
EXOREX STABILIZING CRE	Coal Tar	No	3	
FAMVIR Tab 125 MG	Famciclovir	Yes	3	
FAMVIR Tab 250 MG	Famciclovir	Yes	3	
FAMVIR Tab 500 MG	Famciclovir	Yes	3	
FAZACLO Tab 100 MG	Clozapine	No	3	
FAZACLO Tab 12.5 MG	Clozapine	No	3	
FAZACLO Tab 25 MG	Clozapine	No	3	
ONSOLIS FILM 200 MCG	FENTANYL CITRATE	No	3	
ONSOLIS FILM 400 MCG	FENTANYL CITRATE	No	3	
ONSOLIS FILM 600 MCG	FENTANYL CITRATE	No	3	
ONSOLIS FILM 800 MCG	FENTANYL CITRATE	No	3	
ONSOLIS FILM 1200 MCG	FENTANYL CITRATE	No	3	
NUCYNTA TABLET 50 MG	TAPENTADOL HCL	No	3	
NUCYNTA TABLET 75 MG	TAPENTADOL HCL	No	3	
NUCYNTA TABLET 100 MG	TAPENTADOL HCL	No	3	
FINACEA GEL 15%	Azelaic Acid	No	3	
FINACEA PLUS KIT 15 %	Azelaic Acid	No	3	
FIORICET Tab 50-325-40 MG	Butalbital, Acetaminophen, and Caffeine	Yes	3	
FIORICET w/ COD Cap 50-325-40-30 MG	Butalbital, Acetaminophen, Caffeine, and Codeine	Yes	3	
FIORINAL Cap 50-325-40 MG	Butalbital, Aspirin, and Caffeine	Yes	3	
FIORINAL w/ Codeine Cap 50-325-40-30 MG	Butalbital, Aspirin, Caffeine, and Codeine	Yes	3	
FLAGY Tab 250 MG	Metronidazole	Yes	3	
FLAGYL Cap 375 MG	Metronidazole	Yes	3	
FLAGYL Tab 24HR 750 MG	Metronidazole SR	No	3	
FLAGYL Tab 500 MG	Metronidazole	Yes	3	
FLAREX Ophth Susp 0.1%	Fluorometholone	Yes	3	
FELBATOL TAB 400MG	Felbamate	No	3	
FELBATOL TAB 600MG	Felbamate	No	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
FLOMAX CAP 0.4MG	Tamsulosin	Yes	3	
FLONASE Nasal Susp 50 MCG/ACT	Fluticasone	Yes	3	
FELBATOL SUS 600/5ML	Felbamate	No	3	
FELDENE Cap 10 MG	Piroxicam	Yes	3	
FELDENE Cap 20 MG	Piroxicam	Yes	3	
FEMTRACE TAB 0.9MG	Estradiol	No	3	
FEMTRACE TAB 1.8MG	Estradiol	No	3	
FEMTRACE TAB 0.45MG	Estradiol	No	3	
FLOXIN OTIC	Ofloxacin Otic	Yes	3	
FLOXIN Tab 200 MG	Ofloxacin	Yes	3	
FLOXIN Tab 300 MG	Ofloxacin	Yes	3	
FLOXIN Tab 400 MG	Ofloxacin	Yes	3	
FLEBOGAMMA DIF SOLUTION 5 %	IMMUNE GLOBULIN (HUMAN) IV	No	4	
FLEBOGAMMA DIF SOLUTION 5 %	IMMUNE GLOBULIN (HUMAN) IV	No	4	
FLEBOGAMMA DIF SOLUTION 5 %	IMMUNE GLOBULIN (HUMAN) IV	No	4	
FLEBOGAMMA DIF SOLUTION 5 %	IMMUNE GLOBULIN (HUMAN) IV	No	4	
FLUOR-OP Ophth Susp 0.1%	Fluorometholone	Yes	3	
FLEBOGAMMA DIF SOLUTION 5 %	IMMUNE GLOBULIN (HUMAN) IV	No	4	
FML Ophth Susp 0.25%	Fluorometholone	Yes	3	
FMLOphth Susp 0.1%	Fluorometholone	Yes	3	
FLEXERIL Tab 10 MG	Cyclobenzaprine	Yes	3	
FLEXERIL Tab 5 MG	Cyclobenzaprine	Yes	3	
FOCALIN TAB 10MG	Dexmethylphenidate	Yes	3	QL
FOCALIN TAB 2.5MG	Dexmethylphenidate	Yes	3	QL
FOCALIN TAB 5MG	Dexmethylphenidate	Yes	3	QL
FOCALIN XR CAP SR 24 HR 10 MG	Dexmethylphenidate cap sr	No	3	QL
FOCALIN XR CAP SR 24 HR 15 MG	Dexmethylphenidate cap sr	No	3	QL
FOCALIN XR CAP SR 24 HR 20MG	Dexmethylphenidate cap sr	No	3	QL
FOCALIN XR CAP SR 24 HR 30 MG	Dexmethylphenidate cap sr	No	3	QL
FOCALIN XR CAP SR 24 HR 5 MG	Dexmethylphenidate cap sr	No	3	QL
FLORINEF Tab 0.1 MG	Fludrocortisone	Yes	3	
FLORONE Oint 0.05%	Difforasono	Yes	3	
FLOVENT DISK AER 50MCG	Fluticasone Propionate	No	3	
FLOVENT HFA AER 110MCG	Fluticasone	No	3	
FLOVENT HFA AER 220MCG	Fluticasone	No	3	
FLOVENT HFA AER 44MCG	Fluticasone	No	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
Fludara Inj 50MG	Fludarabine	Yes	5	PA
FLUMADINE SYRUP 50MG/5ML	Rimantadine	Yes	3	
FLUMADINE Tab 100 MG	Rimantadine	Yes	3	
FluMist Nasa Liq	Influenza Virus Vaccine	No	2	
FLUOROPLEX Cream 1%	Fluorouracil	Yes	3	
FML-S SUS LIQUIFLM	Sulfacetamide Sodium and Fluorometholone	No	3	
FOLLISTIM AQ 150U	Follitropin Beta	No	4	
FOLLISTIM AQ 300U	Follitropin Beta	No	4	
FOLLISTIM AQ 600U	Follitropin Beta	No	4	
FOLLISTIM AQ 75U	Follitropin Beta	No	4	
FOLLISTIM AQ 900U	Follitropin Beta	No	4	
FOSRENOL CHW 500	Lanthanum Carbonate	No	3	
FOSRENOL CHW 750	Lanthanum Carbonate	No	3	
FOSRENOL CHW 1000MG	Lanthanum Carbonate	No	3	
FOSRENOL CHW 250MG	Lanthanum Carbonate	No	3	
Fragmin Inj 10000/ML	Dalteparin	No	5	PA
Fragmin Inj 2500/0.2ML	Dalteparin	No	5	PA
Fragmin Inj 5000/0.2ML	Dalteparin	No	5	PA
Fragmin Inj 7500/0.3ML	Dalteparin	No	5	PA
FORADIL AER	Formoterol	No	2	
FORTAMET Tab 1000 MG	Metformin	Yes	3	
FORTAMET Tab 500 MG	Metformin	Yes	3	
FORTOVASE CAP 200MG	Saquinavir	No	2	
FOSAMAX + D TAB 70-2800	Alendronate and Cholecalciferol	No	3	
FOSAMAX + D TAB 70-5600	Alendronate and Cholecalciferol	No	3	
Frova Tab 2.5MG	Frovatriptan	No	3	QL
FOSAMAX SOLN 70MG/75ML	Alendronate	Yes	3	
FOSAMAX Tab 10 MG	Alendronate	Yes	3	
GABITRIL TAB 12MG	Tiagabine	No	3	
GABITRIL TAB 16MG	Tiagabine	No	3	
GABITRIL TAB 2MG	Tiagabine	No	3	
GABITRIL TAB 4MG	Tiagabine	No	3	
FOSAMAX Tab 35 MG	Alendronate	Yes	3	
FOSAMAX Tab 40 MG	Alendronate	Yes	3	
FOSAMAX Tab 5 MG	Alendronate	Yes	3	
FOSAMAX Tab 70 MG	Alendronate	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
FreeStyle Flash Meter		No	2	
FreeStyle Freedom Lite Meter		No	2	
FreeStyle Lite Meter		No	2	
FreeStyle Lite Test Strips 50 ct		No	2	
FreeStyle Test Strips 100 ct		No	2	
Genotropin Inj 0.2MG	Somatropin	No	5	PA
Genotropin Inj 0.4MG	Somatropin	No	5	PA
Genotropin Inj 0.6MG	Somatropin	No	5	PA
Genotropin Inj 0.8MG	Somatropin	No	5	PA
Genotropin Inj 1.2MG	Somatropin	No	5	PA
Genotropin Inj 1.4MG	Somatropin	No	5	PA
Genotropin Inj 1.6MG	Somatropin	No	5	PA
Genotropin Inj 1.8MG	Somatropin	No	5	PA
Genotropin Inj 13.8MG	Somatropin	No	5	PA
Genotropin Inj 1MG	Somatropin	No	5	PA
Genotropin Inj 2MG	Somatropin	No	5	PA
Genotropin Inj 5.8MG	Somatropin	No	5	PA
FreeStyle Test Strips 50 ct		No	2	
Fudr Inj 0.5GM	Floxuridine	Yes	5	PA
FURADANTIN Susp 25 MG/5ML	Nitrofurantoin Susp	No	3	
GANIDIN NR LIQ 100/5ML	Guaifenesin	Yes	3	
GANI-TUSS Liquid 10-100 MG/5ML	Guaifenesin and Dextromethorphan	Yes	3	
GANTRISIN Susp 500 MG/5ML	SULFISOXAZOLE ACETYL SUSP	No	3	
GASTROCROM Oral Conc 100 MG/5ML	Cromolyn	Yes	3	
Gemzar Inj 1 GM	Gemcitabine	No	5	PA
Gemzar Inj 200MG	Gemcitabine	No	5	PA
GENERLAC Solution 10 GM/15ML	Lactulose	Yes	3	
GENGRAF Cap 25 MG	CycloSPORINE	Yes	3	
GENOPTIC Ophth Soln 0.3%	Gentamicin	Yes	3	
GENTACIDIN Ophth Soln 0.3%	Gentamicin	Yes	3	
GENTAK Ophth Soln 0.3%	Gentamicin	Yes	3	
GEODON CAP 20MG	Ziprasidone	No	2	
GEODON CAP 40MG	Ziprasidone	No	2	
GEODON CAP 60MG	Ziprasidone	No	2	
GEODON CAP 80MG	Ziprasidone	No	2	
Gleevec Tab 100MG	Imatinib	No	3	PA

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
Gleevec Tab 400MG	Imatinib	No	3	PA
GLUCAGEN INJ HYPOKIT	Glucagon	No	5	
GLUCAGEN DIA INJ 1MG	Glucagon	No	3	
GLUCAGON KIT 1MG	Glucagon	No	3	
GLUCOPHAGE Tab 100 MG	Metformin	Yes	3	
GLYNASE Tab 1.5 MG	GlyBURIDE	Yes	3	
GLYNASE Tab 3 MG	GlyBURIDE	Yes	3	
GLYNASE Tab 6 MG	GlyBURIDE	Yes	3	
GLUCOPHAGE Tab 500 MG	Metformin	Yes	3	
GLUCOPHAGE Tab 850 MG	Metformin	Yes	3	
GLUCOPHAGE Tab SR 500 MG	Metformin	Yes	3	
GLUCOPHAGE Tab SR 750 MG	Metformin	Yes	3	
GLUCOTROL Tab 10MG	GlipiZIDE	Yes	3	
GLUCOTROL Tab 5 MG	GlipiZIDE	Yes	3	
GLUCOTROL XL Tab 10 MG	GlipiZIDE	Yes	3	
GLUCOTROL XL Tab 5 MG	GlipiZIDE	Yes	3	
GLUCOVANCE Tab 1.25-250 MG	Glyburide and Metformin	Yes	3	
GLUCOVANCE Tab 2.5-500 MG	Glyburide and Metformin	Yes	3	
GLUCOVANCE Tab 5-500 MG	Glyburide and Metformin	Yes	3	
GLYCOLAX 3350 Oral Powder	Polyethylene Glycol-Electrolyte Solution	Yes	3	
GOLYTELY For Soln 236 GM	Polyethylene Glycol-Electrolyte Solution	Yes	3	
GOLYTELY PACKET 227.1 GM	Polyethylene Glycol-Electrolyte Solution	Yes	3	
G-PHED Cap CR 120-250 MG	Guaifenesin and Pseudoephedrine	Yes	3	
GRANULEX	Trypsin, Balsam Peru, and Castor Oil	Yes	3	
GRIFULVIN Susp 125 MG/5ML	Griseofulvin	Yes	3	
GRIFULVIN TAB 500MG	Griseofulvin	Yes	3	
HALCION Tab 0.125 MG	Triazolam	Yes	3	
HALCION Tab 0.25 MG	Triazolam	Yes	3	
GRIS-PEG Tab 125 MG	Griseofulvin	Yes	3	
GRIS-PEG Tab 250 MG	Griseofulvin	Yes	3	
GUAIFENESIN DM Tab 12HR 30-600 MG	Guaifenesin and Dextromethorphan	Yes	3	
GUAIFENESIN GP Tab 12HR 120-1200 MG	Guaifenesin and Pseudoephedrine	Yes	3	
GUAIFENEX Tab 120-1200 MG	Guaifenesin and Pseudoephedrine	Yes	3	
GUAIFENEX Tab 60-600 MG	Guaifenesin and Pseudoephedrine	Yes	3	
HECTOROL CAP 0.5MCG	Doxercalciferol	No	3	
HECTOROL CAP 2.5MCG	Doxercalciferol	No	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
GUAIFENEX Tab 80-800 MG	Guaifenesin and Pseudoephedrine	Yes	3	
GUAIFENEX-RX DM TAB	Guaifenesin and Pseudoephedrine	Yes	3	
HIPREX Tab 1 GM	Methenamine	Yes	3	
GUAIMAX-D Tab 120-600 MG	Guaifenesin and Pseudoephedrine	Yes	3	
GYNODIOL TAB 1.5MG	Estradiol	No	3	
GYNODIOL TAB 1MG	Estradiol	No	3	
GYNODIOL TAB 2MG	Estradiol	No	3	
HALDOL Soln 100 MG/ML	Haloperidol	Yes	3	
HALDOL Soln 50 MG/ML	Haloperidol	Yes	3	
HUMALOG INJ 100/ML	Insulin Lispro	No	3	
HUMALOG MIX INJ 50/50KWP	Insulin Lispro	No	3	
HUMALOG MIX INJ 75/25KWP	Insulin Lispro	No	3	
Humatrope Inj 12MG	Somatropin	No	5	PA
Humatrope Inj 24MG	Somatropin	No	5	PA
Humatrope Inj 5MG	Somatropin	No	5	PA
Humatrope Inj 6MG	Somatropin	No	5	PA
HALOG OIN 0.1%	Halcinonide	No	3	
HALOG CRE 0.1%	Halcinonide	No	3	
HALOG SOL 0.1%	Halcinonide	No	3	
HALOG-E Cream 0.1%	Halcinonide	No	3	
HELIDAC MIS	Bismuth Subsalicylate, Metronidazole, and Tetracycline	No	3	
HEPSERA TAB 10MG	Adefovir Dipivoxil	No	2	
HISTINEX PV	Pseudoephedrine, Hydrocodone, and Chlorpheniramine	Yes	3	
HIVID TAB 0.375MG	Zalcitabine	No	2	
HIVID TAB 0.75MG	Zalcitabine	No	2	
HURRICAIN SPR 20%	Benzocaine	Yes	3	
HMS OPTH SUS 1%	Medrysone	No	3	
Homatropine HBr Opth Soln 2%	Homatropine	No	3	
Homatropine HBr Opth Soln 5%	Homatropine	No	3	
HUMIBID DM CAP ER	Guaifenesin and Dextromethorphan	Yes	3	
HYCET Soln 7.5-325 MG/15ML	Hydrocodone and Acetaminophen	Yes	3	
Humira Inj Kit 20MG/0.4ML	Adalimumab	No	4	
Humira Inj Kit 40MG/0.8ML	Adalimumab	No	4	
HYDRO-TUSSIN CBX	Carbinoxamine and Pseudoephedrine	Yes	3	
Humira Pen Kit 40MG/0.8ML	Adalimumab	No	4	
Humira Pen Kit Starter 40MG/0.8ML	Adalimumab	No	4	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
HUMULIN INJ 70/30	Insulin NPH and Insulin Regular	No	3	
Humulin 50/50	Insulin NPH and Insulin Regular	No	3	
HUMULIN N INJ U-100	Insulin NPH and Insulin Regular	No	3	
HYTRIN Cap 1 MG	Terazosin	Yes	3	
HYTRIN Cap 10 MG	Terazosin	Yes	3	
HYTRIN Cap 2MG	Terazosin	Yes	3	
HYTRIN Cap 5MG	Terazosin	Yes	3	
HUMULIN R INJ U-100	Insulin NPH and Insulin Regular	No	3	
Hyalgan Inj 20MG/2ML	Hyaluronate Intra-articular	No	4	PA
Hyalgan Inj 20MG/2ML	Hyaluronate Intra-articular	No	4	PA
Hyalgan Inj 20MG/2ML	Hyaluronate Intra-articular	No	4	PA
Hyalgan Inj 20MG/2ML	Hyaluronate Intra-articular	No	4	PA
Hydrea Cap 500 MG	Hydroxyurea	Yes	3	
HYDRON Liquid 30-2-5 MG/5ML	Pseudoephedrine, Hydrocodone, and Chlorpheniramine	Yes	3	
HYDRO-TUSSIN DHC Syrup	Pseudoephedrine, Dihydrocodeine, and Chlorpheniramine	Yes	3	
HYDRO-TUSSIN DM ELIXIR	Guaifenesin and Dextromethorphan	Yes	3	
HYDRO-TUSSIN HC SYRUP	Pseudoephedrine, Hydrocodone, and Chlorpheniramine	Yes	3	
HYPHED SYRUP	Pseudoephedrine, Hydrocodone, and Chlorpheniramine	Yes	3	
HYTAKEROL CAP 0.125MG	Dihydrotachysterol	No	3	
HYZAAR TAB 100-12.5	Losartan and Hydrochlorothiazide	No	3	
HYZAAR TAB 100-25	Losartan and Hydrochlorothiazide	No	3	
HYZAAR TAB 50-12.5	Losartan and Hydrochlorothiazide	No	3	
IMDUR 120MG	Isosorbide Mononitrate	Yes	3	
IMDUR 30MG	Isosorbide Mononitrate	Yes	3	
IMDUR 60MG	Isosorbide Mononitrate	Yes	3	
Imitrex Inj 6MG/0.5	Sumatriptan	Yes	3	QL
Imitrex Kit 4MG/0.5	Sumatriptan	Yes	3	QL
Imitrex Kit 6MG/0.5	Sumatriptan	Yes	3	QL
Imitrex Spr 20MG/ACT	Sumatriptan	Yes	3	QL
Imitrex Spr 5MG/ACT	Sumatriptan	Yes	3	QL
Imitrex Tab 100MG	Sumatriptan	Yes	3	QL
Imitrex Tab 25MG	Sumatriptan	Yes	3	QL
Imitrex Tab 50MG	Sumatriptan	Yes	3	QL
IMURAN 50MG	Azathioprine	Yes	3	
INDERAL 10MG	Propranolol	Yes	3	
INDOCIN SR Cap 75 MG	Indomethacin	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
INDERAL 20MG	Propranolol	Yes	3	
Innohep Inj 20000/ML	Tinzaparin	No	5	PA
INDERAL 40MG	Propranolol	Yes	3	
INDERAL 60MG	Propranolol	Yes	3	
INSPIRA TAB 25MG	Eplerenone	No	3	
INSPIRA TAB 50MG	Eplerenone	No	3	
INDERAL 80MG	Propranolol	Yes	3	
INDERAL LA CAP 120MG	Propranolol	Yes	3	
INDERAL LA CAP 160MG	Propranolol	Yes	3	
INDERAL LA CAP 60MG	Propranolol	Yes	3	
INDERAL LA CAP 80MG	Propranolol	Yes	3	
INDERIDE Tab 40-25 MG	Propranolol and Hydrochlorothiazide	Yes	3	
INDERIDE Tab 80-25 MG	Propranolol and Hydrochlorothiazide	Yes	3	
INDOCIN Cap 25 MG	Indomethacin	Yes	3	
IOPIDINE SOL 0.5% OP	Apraclonidine	Yes	3	
IQUIX SOL 1.5%	Levofloxacin	No	3	
INDOCIN Cap 50MG	Indomethacin	Yes	3	
INDOCIN SUSP 25 MG/5ML	Indomethacin	Yes	3	
INNOPRAN XL CAP 120MG	Propranolol	No	3	
INNOPRAN XL CAP 80MG	Propranolol	No	3	
INTAL INH	Cromolyn	Yes	3	
INTAL SOL NEB 20MG/2ML	Cromolyn	Yes	3	
INTELENCE TAB 100 MG	etravirine	No	2	
INVEGA TAB 3MG	Paliperidone	No	3	
INVEGA TAB 6MG	Paliperidone	No	3	
INVEGA TAB 9MG	Paliperidone	No	3	
INVIRASE CAP 200MG	Saquinavir Mesylate	No	2	
INVIRASE TAB 500	Saquinavir Mesylate	No	2	
IOPHEN-NR LIQ 100MG/5ML	Guaifenesin	Yes	3	
ISENTRESS TAB 400MG	Raltegravir Potassium	No	2	
ISMO TAB 20MG	Isosorbide Mononitrate	Yes	3	
ISOCHRON TAB 40MG	Isosorbide Dinitrate	Yes	3	
ISOPTIN SR TAB 120MG	Verapamil	No	3	
ISOPTIN SR TAB 180MG	Verapamil	No	3	
ISOPTIN SR TAB 240MG	Verapamil	No	3	
ISOPTO ATROPINE OPH SOL 1%	Atropine	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
ISOPTO CARPINE OPH SOL 2%	Pilocarpine	Yes	3	
ISOPTO CARPINE OPH SOL 4%	Pilocarpine	Yes	3	
ISOPTO CARPINE OPH SOL 6%	Pilocarpine	Yes	3	
ISORDIL TAB 10MG	Isosorbide Dinitrate	Yes	3	
ISORDIL TAB 40MG	Isosorbide Dinitrate	Yes	3	
ISORDIL TAB 5MG	Isosorbide Dinitrate	Yes	3	
ISTALOL SOL 0.5% OP	Timolol	No	3	
Jantoven Tab 10MG	Warfarin	Yes	3	
Jantoven Tab 1MG	Warfarin	Yes	3	
Jantoven Tab 2.5MG	Warfarin	Yes	3	
Jantoven Tab 2MG	Warfarin	Yes	3	
Jantoven Tab 3MG	Warfarin	Yes	3	
Jantoven Tab 4MG	Warfarin	Yes	3	
KADIAN CAP 100MG CR	Morphine Sulfate	No	3	
KADIAN CAP 10MG CR	Morphine Sulfate	No	3	
KADIAN CAP 200MG CR	Morphine Sulfate	No	3	
KADIAN CAP 20MG CR	Morphine Sulfate	No	3	
KADIAN CAP 30MG CR	Morphine Sulfate	No	3	
KADIAN CAP 50MG CR	Morphine Sulfate	No	3	
KADIAN CAP 60MG CR	Morphine Sulfate	No	3	
KADIAN CAP 80MG	Morphine Sulfate	No	3	
Jantoven Tab 5MG	Warfarin	Yes	3	
Jantoven Tab 6MG	Warfarin	Yes	3	
Jantoven Tab 7.5MG	Warfarin	Yes	3	
Janumet Tab 50-1000 MG	Sitagliptin-Metformin HCl	No	2	
Janumet Tab 50-500 MG	Sitagliptin-Metformin HCl	No	2	
Januvia Tab 100 MG	Sitagliptin Phosphate	No	2	
Januvia Tab 25 MG	Sitagliptin Phosphate	No	2	
Januvia Tab 50 MG	Sitagliptin Phosphate	No	2	
JOLIVETTE Tab 0.35 MG	Norethindrone	Yes	1	
JUNEL 1.5/30	Ethinyl Estradiol and Norethindrone	Yes	1	
JUNEL 1/20	Ethinyl Estradiol and Norethindrone	Yes	1	
KEFLEX Cap 250 MG	Cephalexin	Yes	3	
KEFLEX Cap 500 MG	Cephalexin	Yes	3	
KEFLEX Cap 750MG	Cephalexin	No	3	
KEFLEX Susp 125 MG/5ML	Cephalexin	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
KEFLEX Susp 250 MG/5ML	Cephalexin	Yes	3	
JUNEL FE 1.5/30	Ethinyl Estradiol and Norethindrone	Yes	1	
JUNEL FE 1/20	Ethinyl Estradiol and Norethindrone	Yes	1	
KALETRA CAP 133.3-33.3 MG	LOPINAVIR-RITONAVIR	No	2	
KALETRA SOL	LOPINAVIR-RITONAVIR	No	2	
KENALOG Inj Susp 10 MG/ML	Triamcinolone	No	3	
KENALOG Inj Susp 40 MG/ML	Triamcinolone	No	3	
KALETRA TAB 100-25MG	LOPINAVIR-RITONAVIR	No	2	
KEPPRA SOL 100MG/ML	Levetiracetam	Yes	3	
KEPPRA TAB 1000MG	Levetiracetam	No	3	
KEPPRA TAB 250MG	Levetiracetam	No	3	
KEPPRA TAB 500MG	Levetiracetam	No	3	
KEPPRA TAB 750MG	Levetiracetam	No	3	
KEPPRA XR TABLET EXTENDED RELEASE 24 HOU	Levetiracetam	No	3	
KEPPRA XR TABLET EXTENDED RELEASE 24 HOU	Levetiracetam	No	3	
KERLONE Tab 10 MG	Betaxolol	Yes	3	
KERLONE Tab 20 MG	Betaxolol	Yes	3	
Kineret Inj 100MG/0.67ML	Anakinra	No	5	ST
KALETRA TAB 200-50MG	LOPINAVIR-RITONAVIR	No	2	
KLARON LOT 10%	Sulfacetamide	Yes	3	
KLONOPIN TAB 0.5MG	Clonazepam	Yes	3	
KLONOPIN TAB 1MG	Clonazepam	Yes	3	
KLONOPIN TAB 2MG	Clonazepam	Yes	3	
KAON-CL-10MEQ TAB	Potassium Chloride	Yes	3	
KARIVA TAB	Ethinyl Estradiol and Desogestrel	Yes	1	
KAY CIEL ORAL LIQ 10% 20MEQ/15ML	Potassium Chloride	Yes	3	
KAY CIEL POWDER PKT 20MEQ	Potassium Chloride	Yes	3	
KAYEXALATE	Sodium Polystyrene Sulfonate	Yes	3	
K-DUR 10MEQ	Potassium Chloride	Yes	3	
K-DUR 20MEQ	Potassium Chloride	Yes	3	
KEMADRIN TAB 5MG	Procyclidine	No	3	
KENALOG Aerosol Soln	Triamcinolone	Yes	3	
KENALOG Cream 0.1%	Triamcinolone	Yes	3	
KENALOG IN ORABASE 0.1%	Triamcinolone Acetonide Paste	Yes	3	
KENALOG Oint 0.1%	Triamcinolone	Yes	3	
KIONEX POWDER	Sodium Polystyrene Sulfonate	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
K-LOR POWDER PKT 20MEQ	Potassium Chloride	Yes	3	
KLOR-CON 10MEQ CR TAB	Potassium Chloride	Yes	3	
KLOR-CON 8MEQ CR TAB	Potassium Chloride	Yes	3	
KLOR-CON Powder Packet 25 MEQ	Potassium Chloride	Yes	3	
KLOR-CON POWDER PKT 20MEQ	Potassium Chloride	Yes	3	
KLOR-CON/EF TAB 10MEQ	Potassium Bicarbonate and Potassium Citrate	Yes	3	
KLOR-M CR Tab 10 MEQ	Potassium Chloride	Yes	3	
KLOR-M CR Tab 15 MEQ	Potassium Chloride	Yes	3	
KLOTRIX TAB CR 10MEQ	Potassium Chloride	Yes	3	
K-LYTE DS EFFER TAB 50MEQ	Potassium Bicarbonate and Potassium Citrate	Yes	3	
K-LYTE EFFER TAB 25MEQ	Potassium Bicarbonate and Potassium Citrate	Yes	3	
K-LYTE/CL 50 TAB 50MEQ	Potassium Bicarbonate and Potassium Chloride	No	3	
K-LYTE/CL TAB CITRUS	Potassium Bicarbonate and Potassium Chloride	No	3	
K-LYTE/CL TAB FRUIT	Potassium Bicarbonate and Potassium Chloride	No	3	
K-PHOS TAB	Potassium Acid Phosphate	No	3	
LAMICTAL Tab 100 MG	Lamotrigine	Yes	3	
LAMICTAL Tab 150 MG	Lamotrigine	Yes	3	
LAMICTAL Tab 200 MG	Lamotrigine	Yes	3	
LAMICTAL Tab 25 MG	Lamotrigine	Yes	3	
LAMICTAL ODT TABLET DISPERSIBLE 25 MG	Lamotrigine	Yes	3	
LAMICTAL ODT TABLET DISPERSIBLE 50 MG	Lamotrigine	Yes	3	
LAMICTAL ODT TABLET DISPERSIBLE 100 MG	Lamotrigine	Yes	3	
LAMICTAL ODT TABLET DISPERSIBLE 200 MG	Lamotrigine	Yes	3	
LAMICTAL XR TABLET EXTENDED RELEASE 24 HO	Lamotrigine	Yes	3	
LAMICTAL XR TABLET EXTENDED RELEASE 24 HO	Lamotrigine	Yes	3	
LAMICTAL XR TABLET EXTENDED RELEASE 24 HO	Lamotrigine	Yes	3	
LAMICTAL XR TABLET EXTENDED RELEASE 24 HO	Lamotrigine	Yes	3	
K-PHOS MF TAB 155-350MG	Potassium Phosphate and Sodium Phosphate	Yes	3	
K-PHOS NEUTRAL TAB	Potassium Phosphate and Sodium Phosphate	Yes	3	
K-PHOS NO 2 TAB	Potassium Phosphate and Sodium Phosphate	Yes	3	
KRISTALOSE PKT 10GM	Lactulose	Yes	3	
KRISTALOSE PKT 20GM	Lactulose	Yes	3	
K-TABS 10MEQ	Potassium Chloride	Yes	3	
Ku-Zyme HP Cap	Pancrelipase	Yes	3	
Kytril Oral Soln	Granisetron	Yes	3	QL
Kytril Tab 1MG	Granisetron	Yes	3	QL

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
LAC-HYDRIN CREAM 12%	Lactic Acid and Ammonium Hydroxide	Yes	3	
LAC-HYDRIN LOTION 12%	Lactic Acid and Ammonium Hydroxide	Yes	3	
LAC-HYDRIN LOTION 5%	Lactic Acid and Ammonium Hydroxide	Yes	3	
LACLOTION LOTION	Lactic Acid and Ammonium Hydroxide	Yes	3	
LAMISIL Granules Packet 125 MG	Terbinafine	Yes	3	
LAMISIL Granules Packet 187.5 MG	Terbinafine	Yes	3	
LESCOL CAP 20MG	Fluvastatin	No	3	
LESCOL CAP 40MG	Fluvastatin	No	3	
LESCOL XL TAB 80MG	Fluvastatin	No	3	
Leukine INJ 250	Sargramostim	N	5	
Leukine INJ 500	Sargramostim	N	5	
LAMISIL Soln 1%	Terbinafine	No	3	
LAMISIL Tab 250 MG	Terbinafine	Yes	3	
LEVAQUIN TAB 250MG	Levofloxacin	No	3	
LEVAQUIN TAB 500MG	Levofloxacin	No	3	
LEVAQUIN TAB 750MG	Levofloxacin	No	3	
LEVAQUIN ORAL SOL 25MG/ML	Levofloxacin	No	3	
LANOXICAPS CAP 0.05MG	Digoxin	No	3	
LANOXICAPS CAP 0.1MG	Digoxin	No	3	
LANOXICAPS CAP 0.2MG	Digoxin	No	3	
LANOXICAPS CAP 0.1MG	Digoxin	No	3	
LANOXIN Tab 0.125 MG	Digoxin	Yes	3	
LANOXIN Tab 0.25 MG	Digoxin	Yes	3	
Lantus Inj 100/ML	Insulin Glargine	No	1	
LEVLEN-28	LEVONORGESTREL & ETHINYL ESTRADIOL	Yes	3	
LEVLITE-28	LEVONORGESTREL & ETHINYL ESTRADIOL	Yes	3	
Lantus Inj Solostar	Insulin Glargine	No	1	
LASIX TAB 20MG	Furosemide	Yes	3	
LASIX TAB 40MG	Furosemide	Yes	3	
LASIX TAB 80MG	Furosemide	Yes	3	
Leustatin Inj 1MG/ML	Cladribine	Yes	5	PA
LEVALL G CAP SR	Guaifenesin and Pseudoephedrine	Yes	3	
LEVBID	Hyoscyamine	Yes	3	
Levemir Inj	Insulin Detemir	No	1	
Levemir Inj Flexpen	Insulin Detemir	No	1	
Levitra Tab 10MG	Vardenafil	No	3	QL / G

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
Levitra Tab 2.5MG	Vardenafil	No	3	QL / G
Levitra Tab 20MG	Vardenafil	No	3	QL / G
Levitra Tab 5MG	Vardenafil	No	3	QL / G
LEVORA 0.15/30-28	LEVONORGESTREL & ETHINYL ESTRADIOL	Yes	1	
LEVOTHROID TAB 100MCG	Levothyroxine	Yes	3	
LEVOTHROID TAB 125MCG	Levothyroxine	Yes	3	
LEVOTHROID TAB 150MCG	Levothyroxine	Yes	3	
LEVOXYL Tab 100 MCG	Levothyroxine	Yes	3	
LEXXEL TAB 5-5MG	Enalapril and Felodipine	No	3	
LIALDA TAB 1.2GM	Mesalamine	No	3	
LEVOXYL Tab 25 MCG	Levothyroxine	Yes	3	
LEVOXYL Tab 50 MCG	Levothyroxine	Yes	3	
LEVOXYL Tab 75 MCG	Levothyroxine	Yes	3	
LEVOXYL Tab 88 MCG	Levothyroxine	Yes	3	
LEVSIN TAB 0.125MG	Hyoscyamine	Yes	3	
LEVSIN/SL TAB 0.125MG	Hyoscyamine	Yes	3	
LEVSINEX CAP	Hyoscyamine	Yes	3	
LEXAPRO SOL 5MG/5ML	Escitalopram	No	3	
LEXAPRO TAB 10MG	Escitalopram	No	3	
LEXAPRO TAB 20MG	Escitalopram	No	3	
LEXAPRO TAB 5MG	Escitalopram	No	3	
LEXIVA SUS 50M	Fosamprenavir Calcium	No	2	
LEXIVA TAB 700MG	Fosamprenavir Calcium	No	2	
LIBRIUM Cap 10 MG	Chlordiazepoxide	Yes	3	
LIBRIUM Cap 25 MG	Chlordiazepoxide	Yes	3	
LIBRIUM Cap 5 MG	Chlordiazepoxide	Yes	3	
LIDAMANTLE HC CREAM	Lidocaine and Hydrocortisone	Yes	3	
LIDAMANTLE HC LOTION	Lidocaine and Hydrocortisone	Yes	3	
LIDEX Cream 0.05%	Fluocinonide	Yes	3	
LIDEX GEL 0.05%	Fluocinonide	Yes	3	
LIDEX OINT 0.05%	Fluocinonide	Yes	3	
LIDEX-E CREAM 0.05%	Fluocinonide	Yes	3	
LIMBITROL DS TAB 10-25MG	Amitriptyline and Chlordiazepoxide	Yes	3	
LIMBITROL TAB 5-12.5MG	Amitriptyline and Chlordiazepoxide	Yes	3	
LIPITOR TAB 10MG	Atorvastatin	No	2	
LO/OVRAL 21	Ethinyl Estradiol and Norgestrel	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
LO/OVRAL-28	Ethinyl Estradiol and Norgestrel	Yes	3	
LIPITOR TAB 20MG	Atorvastatin	No	2	
LIPITOR TAB 40MG	Atorvastatin	No	2	
LIPITOR TAB 80MG	Atorvastatin	No	2	
LIPRAM 4500 CAP	Pancrelipase	Yes	3	
LIPRAM-CR10 CAP	Pancrelipase	Yes	3	
LIPRAM-CR5 CAP	Pancrelipase	Yes	3	
LIPRAM-PN10 CAP	Pancrelipase	Yes	3	
LIPRAM-PN16 CAP	Pancrelipase	Yes	3	
LOESTRIN 1.5/30-21	Ethinyl Estradiol and Norethindrone	Yes	3	
LOESTRIN 1/20-21	Ethinyl Estradiol and Norethindrone	Yes	3	
LOESTRIN 24 FE	Ethinyl Estradiol and Norethindrone	No	3	
LOESTRIN FE 1.5/30	Ethinyl Estradiol and Norethindrone	Yes	3	
LOESTRIN FE 1/20	Ethinyl Estradiol and Norethindrone	Yes	3	
LOFIBRA Cap 134 MG	Fenofibrate	Yes	3	
LOFIBRA Cap 160 MG	Fenofibrate	Yes	3	
LOFIBRA Cap 200 MG	Fenofibrate	Yes	3	
LOFIBRA Cap 54 MG	Fenofibrate	Yes	3	
LOFIBRA Cap 67 MG	Fenofibrate	Yes	3	
LIPRAM-PN20 CAP	Pancrelipase	Yes	3	
LIPRAM-UL12 CAP	Pancrelipase	Yes	3	
LIPRAM-UL18 CAP	Pancrelipase	Yes	3	
LIPRAM-UL20 CAP	Pancrelipase	Yes	3	
LOPID Tab 600 MG	Gemfibrozil	Yes	3	
LITHOBID Tab CR 300 MG	Lithium	Yes	3	
LODINE Cap 200 MG	Etodolac	Yes	3	
LODINE Cap 300 MG	Etodolac	Yes	3	
LODINE TAB 400 MG	Etodolac	Yes	3	
LODINE TAB 500 MG	Etodolac	Yes	3	
LODINE XL 400 MG	Etodolac	Yes	3	
LORCET 10/650	Hydrocodone and Acetaminophen	Yes	3	
LORCET PLUS	Hydrocodone and Acetaminophen	Yes	3	
LORCET-HD	Hydrocodone and Acetaminophen	Yes	3	
LORTAB TAB 10-500MG	Hydrocodone and Acetaminophen	Yes	3	
LORTAB TAB 2.5-500MG	Hydrocodone and Acetaminophen	Yes	3	
LORTAB TAB 5-500MG	Hydrocodone and Acetaminophen	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
LOSEASONIQUE	LEVONORG-ETH EST	No	3	
LODINE XL 500 MG	Etodolac	Yes	3	
LOTENSIN HCT Tab 10-12.5 MG	Benazepril and Hydrochlorothiazide	Yes	3	
LOTENSIN HCT Tab 10-25 MG	Benazepril and Hydrochlorothiazide	Yes	3	
LOTENSIN HCT Tab 20-12.5 MG	Benazepril and Hydrochlorothiazide	Yes	3	
LOTENSIN Tab 10 MG	Benazepril	Yes	3	
LOTENSIN Tab 20 MG	Benazepril	Yes	3	
LOTENSIN Tab 40 MG	Benazepril	Yes	3	
LOTENSIN Tab 5 MG	Benazepril	Yes	3	
LOTREL Cap 10-20 MG	Amlodipine and Benazepril	Yes	3	
LOTREL Cap 10-40 MG	Amlodipine and Benazepril	Yes	3	
LOTREL Cap 5-10 MG	Amlodipine and Benazepril	Yes	3	
LOTREL Cap 5-20 MG	Amlodipine and Benazepril	Yes	3	
LOTREL Cap 5-40 MG	Amlodipine and Benazepril	Yes	3	
LODINE XL 600 MG	Etodolac	Yes	3	
LODOSYN TAB 25MG	Carbidopa	No	3	
LOW-OGESTREL	Ethinyl Estradiol and Norgestrel	Yes	3	
LOKARA Lotion 0.05%	Desonide	Yes	3	
LOMOTIL LIQ 2.5-0.025MG	Diphenoxylate and Atropine	Yes	3	
LOMOTIL TAB 2.5-0.025MG	Diphenoxylate and Atropine	Yes	3	
LONOX TAB	Diphenoxylate and Atropine	Yes	3	
LOPRESSOR Tab 100 MG	Metoprolol	Yes	3	
LOPRESSOR Tab 50 MG	Metoprolol	Yes	3	
LORABID CAP 200MG	Loracarbef	No	3	
LORABID CAP 400MG	Loracarbef	No	3	
LORABID SUS 100/5ML	Loracarbef	No	3	
LORABID SUS 200/5ML	Loracarbef	No	3	
LUNESTA TAB 1MG	Eszopiclone	No	3	
LUNESTA TAB 2MG	Eszopiclone	No	3	
LUNESTA TAB 3MG	Eszopiclone	No	3	
LOTEMAX SUS 0.5%	Loteprednol	No	3	
LOTRISONE Cream 1-0.05%	Betamethasone and Clotrimazole	Yes	3	
LOTRISONE LOTION 1-0.05%	Betamethasone and Clotrimazole	Yes	3	
LOXITANE Cap 10 MG	Loxapine	Yes	3	
LOXITANE Cap 25 MG	Loxapine	Yes	3	
LOXITANE Cap 5 MG	Loxapine	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
LOXITANE Cap 50 MG	Loxapine	Yes	3	
LOZOL Tab 1.25 MG	Indapamide	Yes	3	
LOZOL Tab 2.5 MG	Indapamide	Yes	3	
LUFYLLIN Elixir 100 MG/15ML	Dyphylline	Yes	3	
LUFYLLIN Tab 200 MG	Dyphylline	Yes	3	
MACROBID CAP 100MG	Nitrofurantoin	Yes	3	
MACRODANTIN Cap 100 MG	Nitrofurantoin	Yes	3	
MACRODANTIN Cap 25 MG	Nitrofurantoin	No	3	
MACRODANTIN Cap 50 MG	Nitrofurantoin	Yes	3	
MANDELAMINE Tab 0.5 GM	Methenamine	Yes	3	
MANDELAMINE Tab 1 GM	Methenamine	Yes	3	
LUFYLLIN Tab 400 MG	Dyphylline	Yes	3	
Lumigan Sol 0.03%	Bimatoprost	No	3	
LUVOX CR 100MG	FLUVOXAMINE	No	3	
LUVOX CR 150MG	FLUVOXAMINE	No	3	
MAVIK TAB 1MG	Trandolapril	Yes	3	
MAVIK TAB 2MG	Trandolapril	Yes	3	
MAVIK TAB 4MG	Trandolapril	Yes	3	
MAXAIR AUTOH AER 200MCG	Pirbuterol	No	3	
LYBREL Tab 90-20MCG	Levonorgestrel-Ethinyl Estradiol	No	2	
LYRICA CAP 100MG	Pregabalin	No	2	
LYRICA CAP 150MG	Pregabalin	No	2	
LYRICA CAP 200MG	Pregabalin	No	2	
LYRICA CAP 225MG	Pregabalin	No	2	
MAXIDONE TAB	Hydrocodone and Acetaminophen	Yes	3	
LYRICA CAP 25MG	Pregabalin	No	2	
LYRICA CAP 300MG	Pregabalin	No	2	
LYRICA CAP 50MG	Pregabalin	No	2	
LYRICA CAP 75MG	Pregabalin	No	2	
Marinol Cap 10MG	Dronabinol	Yes	3	QL
Marinol Cap 2.5MG	Dronabinol	Yes	3	QL
Marinol Cap 5MG	Dronabinol	Yes	3	QL
MARPLAN TAB 10MG	Isocarboxazid	No	3	
Maxalt Tab 10MG	Rizatriptan	No	2	QL
Maxalt Tab 5MG	Rizatriptan	No	2	QL
Maxalt-MLT Tab 10MG	Rizatriptan	No	2	QL

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
Maxalt-MLT Tab 5MG	Rizatriptan	No	2	QL
MAXIDEX SUS 0.1% OP	Dexamethasone	Yes	3	
MAXIFED TAB 60-400MG	Guaifenesin and Pseudoephedrine	Yes	3	
MAXIFED TAB 80-780MG	Guaifenesin and Pseudoephedrine	Yes	3	
MAXIFED-G TAB 40-400MG	Guaifenesin and Pseudoephedrine	Yes	3	
MAXIFLOR Cream 0.05%	Diflorasone	Yes	3	
MAXIFLOR Oint 0.05%	Diflorasone	Yes	3	
Maxitrol Oint 0.1% Opth	Neomycin, Polymyxin B, and Dexamethasone	Yes	3	
Maxitrol Sus 0.1% Opth	Neomycin, Polymyxin B, and Dexamethasone	Yes	3	
MAXZIDE TAB 75-50	Hydrochlorothiazide and Triamterene	Yes	3	
MAXZIDE-25 TAB	Hydrochlorothiazide and Triamterene	Yes	3	
MEBARAL TAB 32MG	Mephobarbital	No	3	
MEBARAL TAB 50MG	Mephobarbital	No	3	
Metadate CD Cap 10MG	Methylphenidate	No	3	QL
Metadate CD Cap 20MG	Methylphenidate	No	3	QL
Metadate CD Cap 30MG	Methylphenidate	No	3	QL
Metadate CD Cap 40MG	Methylphenidate	No	3	QL
Metadate CD Cap 50MG	Methylphenidate	No	3	QL
Metadate CD Cap 60MG	Methylphenidate	No	3	QL
METAGLIP TAB 2.5-500M	Glipizide and Metformin	Yes	3	
METAGLIP TAB 5-500MG	Glipizide and Metformin	Yes	3	
METAGLIP TAB 5-500MG	Glipizide and Metformin	Yes	3	
Medi-gesic tab 30-325 MG	Butalbital, Acetaminophen, and Caffeine	Yes	3	
Megace oral Sus 40MG/ML	Megestrol	Yes	3	
MELLARIL TAB 15MG	Thioridazine	Yes	3	
MELLARIL TAB 200MG	Thioridazine	Yes	3	
MELLARIL Tab 100 MG	Thioridazine	Yes	3	
MELLARIL CNT 100MG/ML	Thioridazine	Yes	3	
MENEST TAB 0.3MG	Estrogens (Esterified)	No	3	
MENEST TAB 0.625MG	Estrogens (Esterified)	No	3	
MENEST TAB 1.25MG	Estrogens (Esterified)	No	3	
MENEST TAB 2.5MG	Estrogens (Esterified)	No	3	
MENOSTAR DIS 14MCG	Estradiol	No	3	
METROCREAM CRE 0.75%	Metronidazole	Yes	3	
METROGEL GEL 1%	Metronidazole	No	3	
METROGEL-VAG GEL 0.75%	Metronidazole	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
METROLOTION LOT 0.75%	Metronidazole	Yes	3	
MEVACOR TAB 10MG	Lovastatin	Yes	3	
MEVACOR TAB 20MG	Lovastatin	Yes	3	
MEVACOR TAB 40MG	Lovastatin	Yes	3	
METADATE ER TAB 10MG	Methylphenidate	No	3	
METADATE ER TAB 20MG	Methylphenidate	Yes	3	
METHADEX SUS 0.1% OP	Neomycin, Polymyxin B, and Dexamethasone	Yes	3	
METHYLIN SOL 10MG/5ML	Methylphenidate	No	3	
METHYLIN SOL 5MG/5ML	Methylphenidate	No	3	
METHYLIN TAB 10MG	Methylphenidate	Yes	1	
MICROGESTIN TAB 1.5/30	Ethinyl Estradiol and Norethindrone	Yes	3	
MICROGESTIN TAB 1/20	Ethinyl Estradiol and Norethindrone	Yes	3	
MICROGESTIN TAB 1/20	Ethinyl Estradiol and Norethindrone	Yes	3	
MICROGESTIN TAB FE1.5/30	Ethinyl Estradiol and Norethindrone	Yes	3	
METHYLIN TAB 20MG	Methylphenidate	Yes	1	
METHYLIN TAB 5MG	Methylphenidate	Yes	1	
METHYLIN CHEW TAB 10MG	Methylphenidate	No	3	
METHYLIN CHEW TAB 2.5MG	Methylphenidate	No	3	
METHYLIN CHEW TAB 5MG	Methylphenidate	No	3	
MICRONOR Tab 0.35 MG	Norethindrone	Yes	3	
METHYLIN ER TAB 10MG	Methylphenidate	Yes	1	
METHYLIN ER TAB 20MG	Methylphenidate	Yes	1	
Micardis HCT Tab 40/12.5MG	Telmisartan and Hydrochlorothiazide	No	3	
Micardis HCT Tab 80/12.5MG	Telmisartan and Hydrochlorothiazide	No	3	
Micardis HCT Tab 80/25MG	Telmisartan and Hydrochlorothiazide	No	3	
Micardis Tab 20MG	Telmisartan	No	3	
Micardis Tab 40MG	Telmisartan	No	3	
Micardis Tab 80MG	Telmisartan	No	3	
MICRO-K CAP 10MEQ CR	Potassium Chloride	Yes	3	
MICRO-K CAP 8MEQ CR	Potassium Chloride	Yes	3	
MICRONASE TAB 1.25MG	GlyBURIDE	Yes	3	
MICRONASE TAB 2.5MG	GlyBURIDE	Yes	3	
MICRONASE TAB 5MG	GlyBURIDE	Yes	3	
MICROZIDE CAP 12.5MG	Hydrochlorothiazide	Yes	3	
MIDRIN CAP	Acetaminophen, Isometheptene, and Dichloralphenazone	Yes	3	
MINOCIN CAP 100MG	Minocycline	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
MINOCIN CAP 50MG	Minocycline	Yes	3	
MIGRIN-A	Acetaminophen, Isometheptene, and Dichloralphenazone	Yes	3	
MILTOWN TAB 200MG	Meprobamate	Yes	3	
MILTOWN TAB 400MG	Meprobamate	Yes	3	
MINIPRESS CAP 1MG	Prazosin	Yes	3	
MINIPRESS CAP 2MG	Prazosin	Yes	3	
MINIPRESS CAP 5MG	Prazosin	Yes	3	
MINITRAN DIS 0.1MG/HR	Nitroglycerin	Yes	3	
MINITRAN DIS 0.2MG/HR	Nitroglycerin	Yes	3	
MIRCETTE TAB 28 DAY	Ethinyl Estradiol and Desogestrel	Yes	3	
MINITRAN DIS 0.4MG/HR	Nitroglycerin	Yes	3	
MINITRAN DIS 0.6MG/HR	Nitroglycerin	Yes	3	
MINIZIDE CAP 0.5 MG-5MG	Prazosin and Polythiazide	No	3	
MINIZIDE CAP 0.5MG-1MG	Prazosin and Polythiazide	No	3	
MINIZIDE CAP 0.5MG-2MG	Prazosin and Polythiazide	No	3	
MIRALAX POW 3350 NF	Polyethylene Glycol-Electrolyte Solution	Yes	3	
MIRAPEX TAB 0.125MG	Pramipexole	No	3	
Modicon Tab 0.5/35	Ethinyl Estradiol and Norethindrone	Yes	3	
MIRAPEX TAB 0.25MG	Pramipexole	No	3	
MONODOX CAP 100MG	Doxycycline	Yes	3	
MONODOX CAP 50MG	Doxycycline	Yes	3	
MONODOX CAP 75MG	Doxycycline	Yes	3	
MIRAPEX TAB 0.5MG	Pramipexole	No	3	
MIRAPEX TAB 0.75MG	Pramipexole	No	3	
MIRAPEX TAB 1.5MG	Pramipexole	No	3	
MIRAPEX TAB 1MG	Pramipexole	No	3	
MIRAPHEN PSE 120-600	Guaifenesin and Pseudoephedrine	Yes	3	
Mirena IUD System	Levonorgestrel	No	4	
MOBAN TAB 10MG	Molindone	No	3	
MOBAN TAB 25MG	Molindone	No	3	
MOBAN TAB 50MG	Molindone	No	3	
MOBAN TAB 5MG	Molindone	No	3	
MOBIC TAB 15MG	Meloxicam	Yes	3	
MOBIC TAB 7.5MG	Meloxicam	Yes	3	
Monistat Cre Derm 2%	Miconazole	Yes	3	
MS CONTIN TAB 100MG CR	Morphine Sulfate	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
MS CONTIN TAB 15MG CR	Morphine Sulfate	Yes	3	
MS CONTIN TAB 200MG CR	Morphine Sulfate	Yes	3	
MS CONTIN TAB 30MG CR	Morphine Sulfate	Yes	3	
MS CONTIN TAB 60MG CR	Morphine Sulfate	Yes	3	
MONO-GESIC Tab 750 MG	Salsalate	Yes	3	
Monoket Tab 10MG	Isosorbide Mononitrate	Yes	3	
Monoket Tab 20MG	Isosorbide Mononitrate	Yes	3	
Mononessa Tab	Ethinyl Estradiol and Norgestimate	Yes	1	
MONOPRIL TAB 10MG	Fosinopril	Yes	3	
MONOPRIL TAB 20MG	Fosinopril	Yes	3	
MONOPRIL TAB 40MG	Fosinopril	Yes	3	
MONOPRIL-HCT TAB 10/12.5	Fosinopril and Hydrochlorothiazide	Yes	3	
MONOPRIL-HCT TAB 20/12.6	Fosinopril and Hydrochlorothiazide	Yes	3	
MOTRIN TAB 400MG	Ibuprofen	Yes	3	
MOTRIN TAB 600MG	Ibuprofen	Yes	3	
MOTRIN TAB 800MG	Ibuprofen	Yes	3	
MOVIPREP Soln 100 GM	PEG 3350-KCl-NaCl-Na Sulfate-Na Acorbate-C	No	2	
MULTAQ TABLET 400 MG	DRONEDARONE HCL	No	2	
MYCOLOG-II CREAM	Nystatin and Triamcinolone	Yes	3	
MYCOLOG-II OINT	Nystatin and Triamcinolone	Yes	3	
MYCOSTATIN POW 100000	Nystatin	Yes	3	
MYFORTIC TAB 180MG	Mycophenolate	No	3	
MYFORTIC TAB 360MG	Mycophenolate	No	3	
MYLOCEL TAB 1GM	Hydroxyurea	Yes	3	
MYSOLINE TAB 250MG	Primidone	Yes	3	
MYSOLINE TAB 50MG	Primidone	Yes	3	
NAFTIN CRE 1%	Naftifine	No	3	
NAFTIN GEL 1%	Naftifine	No	3	
Namenda Sol 10MG/5ML	Memantine	No	3	
Namenda Tab 10MG	Memantine	No	3	
Namenda Tab 5-10MG	Memantine	No	3	
Namenda Tab 5MG	Memantine	No	3	
NAPRELAN TAB 375MG CR	Naproxen	Yes	3	
NAPRELAN TAB 500MG CR	Naproxen	Yes	3	
NAPROSYN SUS 125/5ML	Naproxen	Yes	3	
NECON Tab 0.5 MG-35 MCG	Ethinyl Estradiol and Norethindrone	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
NECON Tab 0.5-35/0.75-35/1-35 MG-MCG	Ethinyl Estradiol and Norethindrone	Yes	3	
NECON Tab 0.5-35/1-35 MG-MCG (10/11)	Ethinyl Estradiol and Norethindrone	Yes	3	
NECON Tab 1 MG-35 MCG	Ethinyl Estradiol and Norethindrone	Yes	3	
NECON Tab 1 MG-50 MCG	Mestranol and Norethindrone	Yes	3	
NEO-DECADRON OCUMETER SOL	Neomycin and Dexamethasone	No	3	
NAPROSYN TAB 375MG	Naproxen	Yes	3	
NAPROSYN TAB 500MG	Naproxen	Yes	3	
NAPROSYN Tab EC 375 MG	Naproxen	Yes	3	
NEOSPORIN SOL OP	Neomycin, Polymyxin B, and Gramicidin	Yes	3	
Neulasta Inj 6MG/0.6ML	Pegfilgrastim	No	5	PA
Neupogen Inj 300/0.5	Filgrastim	No	5	PA
Neupogen Inj 300MCG	Filgrastim	No	5	PA
Neupogen Inj 480/0.8	Filgrastim	No	5	PA
Neupogen Inj 480MCG	Filgrastim	No	5	PA
NAPROSYN Tab EC 500 MG	Naproxen	Yes	3	
NARDIL TAB 15MG	Phenelzine	No	3	
Nasacort AQ Aer 55MCG/AC	Triamcinolone	No	2	QL
Nasarel Spr 29MCG	Flunisolide	No	3	
NASATAB LA TAB	Guaifenesin and Pseudoephedrine	Yes	3	
Nasonex Spr 50MCG/AC	Mometasone Furoate	No	2	
NATURE-THROID Tab 130 MG	Thyroid	Yes	3	
NATURE-THROID Tab 16.25 MG	Thyroid	No	3	
NATURE-THROID Tab 195 MG	Thyroid	Yes	3	
NATURE-THROID Tab 32.5 MG	Thyroid	Yes	3	
NATURE-THROID Tab 65 MG	Thyroid	Yes	3	
NEORAL CAP 100MG	CycloSPORINE	Yes	3	
NEORAL CAP 25MG	CycloSPORINE	Yes	3	
NEORAL SOL 100MG/ML	CycloSPORINE	Yes	3	
NEUPRO DIS 2MG/24HR	Rotigotine	No	3	
NEUPRO DIS 4MG/24HR	Rotigotine	No	3	
NEUPRO DIS 6MG/24HR	Rotigotine	No	3	
NEURONTIN CAP 100MG	Gabapentin	Yes	3	
NICOTROL INH	Nicotine	No	3	
NICOTROL NS SPR 10MG/ML	Nicotine	No	3	
NEURONTIN CAP 300MG	Gabapentin	Yes	3	
NEURONTIN CAP 400MG	Gabapentin	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
NEURONTIN TAB 600MG	Gabapentin	Yes	3	
NEURONTIN TAB 800MG	Gabapentin	Yes	3	
Nevanac Sus 0.1%	Nepafenac	No	2	
NEXIUM CAP 20MG	Esomeprazole	No	2	QL
NEXIUM CAP 40MG	Esomeprazole	No	2	QL
NEXIUM GRA 10MG DR	Esomeprazole	No	2	QL
NEXIUM GRA 20MG DR	Esomeprazole	No	2	QL
NEXIUM GRA 40MG DR	Esomeprazole	No	2	QL
Niacor Tab 500MG	Niacin	Yes	3	
NIASPAN TAB 1000 ER	Niacin	No	2	
NIASPAN TAB 500MG ER	Niacin	No	2	
NIASPAN TAB 750MG ER	Niacin	No	2	
NIFEDIAC CC TAB 30MG ER	NIFEdipine	Yes	3	
NIFEDIAC CC TAB 60MG	NIFEdipine	Yes	3	
NIFEDIAC CC TAB 90MG ER	NIFEdipine	Yes	3	
NIFEDICAL XL TAB 30MG	NIFEdipine	Yes	3	
NITROLINGUAL SPR PUMPSRA	Nitroglycerin	No	3	
NIFEDICAL XL TAB 60MG	NIFEdipine	Yes	3	
NIMOTOP CAP 30MG	Nimodipine	Yes	3	
Nipent Inj 10MG	Pentostatin	Yes	5	PA
NITREK DIS 0.2MG/HR	Nitroglycerin	Yes	3	
NITREK DIS 0.4MG/HR	Nitroglycerin	Yes	3	
NITREK DIS 0.6MG/HR	Nitroglycerin	Yes	3	
NITRO-BID Oint 2%	Nitroglycerin	Yes	3	
NITRO-DUR DIS 0.1MG/HR	Nitroglycerin	Yes	3	
NITRO-DUR DIS 0.2MG/HR	Nitroglycerin	Yes	3	
NITRO-DUR DIS 0.3MG/HR	Nitroglycerin	No	3	
NITRO-DUR DIS 0.4MG/HR	Nitroglycerin	Yes	3	
NITRO-DUR DIS 0.6MG/HR	Nitroglycerin	Yes	3	
NITRO-DUR DIS 0.8MG/HR	Nitroglycerin	No	3	
NORCO TAB 10-325MG	Hydrocodone and Acetaminophen	Yes	3	
NORCO TAB 5-325MG	Hydrocodone and Acetaminophen	Yes	3	
NORCO TAB 7.5-325	Hydrocodone and Acetaminophen	Yes	3	
NORDETTE	LEVONORGESTREL & ETHINYL ESTRADIOL	Yes	3	
NITROGARD TAB 3MG CR	Nitroglycerin	No	3	
NITROQUICK SUB 0.3MG	Nitroglycerin	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
NITROQUICK SUB 0.4MG	Nitroglycerin	Yes	3	
NITROQUICK SUB 0.6MG	Nitroglycerin	Yes	3	
NITROSTAT SUB 0.4MG	Nitroglycerin	Yes	3	
NORINYL TAB 1+35-28	Ethinyl Estradiol and Norethindrone	Yes	3	
NORINYL TAB 1+50-28	Mestranol and Norethindrone	Yes	3	
NORITATE CRE 1%	Metronidazole	No	3	
NITROTAB SL Tab 0.3 MG	Nitroglycerin	Yes	3	
NITROTAB SL Tab 0.4 MG	Nitroglycerin	Yes	3	
NITROTAB SL Tab 0.6 MG	Nitroglycerin	Yes	3	
NOROXIN TAB 400MG	Norfloxacin	No	3	
NITRO-TIME CAP 2.5MG CR	Nitroglycerin	Yes	3	
NITRO-TIME CAP 9MG CR	Nitroglycerin	Yes	3	
NIZORAL CRE 2%	Ketoconazole	Yes	3	
NIZORAL SHA 2%	Ketoconazole	Yes	3	
NORPRAMIN TAB 100MG	Desipramine	Yes	3	
NORPRAMIN TAB 10MG	Desipramine	Yes	3	
NORPRAMIN TAB 150MG	Desipramine	Yes	3	
NORPRAMIN TAB 25MG	Desipramine	Yes	3	
NORPRAMIN TAB 50MG	Desipramine	Yes	3	
NORPRAMIN TAB 75MG	Desipramine	Yes	3	
NOR-QD TAB 0.35MG	Norethindrone	Yes	3	
Nolvadex Tab 10MG	Tamoxifen	Yes	3	
NORA-BE TAB 0.35MG	Norethindrone	Yes	1	
Norditropin Inj 10/1.5ML	Somatropin	No	4	
NORVASC TAB 10MG	Amlodipine	Yes	3	
NORVASC TAB 2.5MG	Amlodipine	Yes	3	
NORVASC TAB 5MG	Amlodipine	Yes	3	
Norditropin Inj 15/1.5ML	Somatropin	No	4	
Norditropin Inj 5/1.5ML	Somatropin	No	4	
NORGESIC FORTE Tab 50-770-60 MG	Orphenadrine, Aspirin, and Caffeine	Yes	3	
NORGESIC Tab 25-385-30 MG	Orphenadrine, Aspirin, and Caffeine	Yes	3	
NORMODYNE IV Soln 5 MG/ML	Labetalol	Yes	3	
NORMODYNE Tab 100 MG	Labetalol	Yes	3	
NORMODYNE Tab 200 MG	Labetalol	Yes	3	
NORPACE CAP 100MG	Disopyramide	Yes	3	
NORPACE CAP 100MG CR	Disopyramide	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
NORPACE CAP 150MG	Disopyramide	Yes	3	
NORPACE CAP 150MG CR	Disopyramide	Yes	3	
NORTREL (28) TAB 1/35	Ethinyl Estradiol and Norethindrone	Yes	1	
NORTREL 28 TAB 0.5/35	Ethinyl Estradiol and Norethindrone	Yes	1	
Nutropin AQ Inj 20MG/2ML	Somatropin	No	5	
Nutropin AQ Inj 5MG/ML	Somatropin	No	5	
Nutropin Inj 10MG	Somatropin	No	5	PA
Nutropin INJ 5MG	Somatropin	No	5	PA
NORTREL7/7/7 TAB 28 DAYS	Ethinyl Estradiol and Norethindrone	Yes	1	
NORVIR CAP 100MG	Ritonavir	No	2	
NORVIR SOL 80MG/ML	Ritonavir	No	2	
OCUFEN SOL 0.03% OP	Flurbiprofen	Yes	3	
OCUFLOX SOL 0.3% OP	Ofloxacin	Yes	3	
NOVOFINE 30GX8MM	Insulin Pen Needle	No	2	
NOVOFINE 31	Insulin Pen Needle	No	2	
NOVOFINE 32GX6MM	Insulin Pen Needle	No	2	
NOVOFINE AUTOCOVER 30GX8M M	Insulin Pen Needle	No	2	
Novolin 70/30	Insulin	No	1	
Novolin N	Insulin NPH	No	1	
OMNICEF CAP 300MG	Cefdinir	Yes	3	
OMNICEF SUS 125/5ML	Cefdinir	Yes	3	
OMNICEF SUS 250/5ML	Cefdinir	Yes	3	
Omnitrope Inj 5.8MG	Somatropin	No	5	PA
Novolin R	Insulin Reg	No	1	
NovoLog	Insulin Aspart	No	1	
NovoLog Mix 70/30	Insulin Aspart Protamine and Insulin Aspart	No	1	
NULEV TAB 0.125MG	Hyoscyamine	Yes	3	
NULYTELY SOL	Polyethylene Glycol-Electrolyte Solution	Yes	3	
NUVARING MIS	Ethinyl Estradiol and Etonogestrel	No	2	
NYSTAT-RX POW	Nystatin	Yes	3	
NYSTOP POW 100000	Nystatin	Yes	3	
OCUSULF-10 SOL 10% OP	Sulfacetamide	Yes	3	
OGEN TAB 0.625	Estropipate	Yes	3	
OGEN TAB 1.25	Estropipate	Yes	3	
OGEN TAB 2.5	Estropipate	Yes	3	
OGESTREL TAB	Ethinyl Estradiol and Norgestrel	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
OLUX AER 0.05%	Clobetasol	Yes	3	
OneTouch Basic		No	2	
OneTouch Basic/Profile 100's		No	2	
OneTouch Basic/Profile 25's		No	2	
OneTouch Basic/Profile 50's		No	2	
OneTouch SureStep 100's		No	2	
OneTouch SureStep 50's		No	2	
OneTouch Ultra		No	2	
OneTouch Ultra 100's		No	2	
OneTouch Ultra 25's		No	2	
OneTouch Ultra 50's		No	2	
ORAP TAB 1MG	Pimozide	No	3	
ORAP TAB 2MG	Pimozide	No	3	
OneTouch Ultra2		No	2	
OneTouch UltraMini™ System Kit		No	2	
OneTouch UltraMini™ System Kit Black		No	2	
OneTouch UltraMini™ System Kit Green		No	2	
OneTouch UltraMini™ System Kit Pink		No	2	
OneTouch UltraSmart		No	2	
ONGLYZA TABLET 2.5 MG	Saxagliptin	No	2	
ONGLYZA TABLET 5 MG	Saxagliptin	No	2	
OPANA ER TABLET 12/10 MG	OXYMORPHONE HCL	No	2	QL
ORTHO EVRA	NORELGESTROMIN-ETHINYL ESTRADIOL	No	3	
ORTHO TRI-CYCLEN TAB	Ethinyl Estradiol and Norgestimate	Yes	3	
ORTHO TRI-CYCLEN TAB LO	Ethinyl Estradiol and Norgestimate	Yes	3	
ORTHO-CEPT TAB 28	Ethinyl Estradiol and Desogestrel	Yes	3	
OPANA ER TABLET 12/15 MG	OXYMORPHONE HCL	No	2	QL
ORTHO-CYCLEN TAB 0.25/35	Ethinyl Estradiol and Norgestimate	Yes	3	
OPANA ER TABLET 12/20 MG	OXYMORPHONE HCL	No	2	QL
OPANA ER TABLET 12/30 MG	OXYMORPHONE HCL	No	2	QL
ORTHO-NOVUM TAB 1/35-28	Ethinyl Estradiol and Norethindrone	Yes	3	
ORTHO-NOVUM TAB 1/50-28	Mestranol and Norethindrone	Yes	3	
ORTHO-NOVUM TAB 10/11-28	Mestranol and Norethindrone	Yes	3	
ORTHO-NOVUM TAB 7/7/7-28	Ethinyl Estradiol and Norethindrone	Yes	3	
Orthovisc Inj 15MG/ML	Hyaluronan Intra-articular	No	5	PA
OPANA ER TABLET 12/40 MG	OXYMORPHONE HCL	No	2	QL

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
OPANA ER TABLET 12/5 MG	OXYMORPHONE HCL	No	2	QL
OPANA ER TABLET 12/7.5 MG	OXYMORPHONE HCL	No	2	QL
OPANA SOLUTION 1 MG/ML	OXYMORPHONE HCL	No	3	QL
OTICAINE SOL 20% OTIC	Benzocaine	Yes	3	
OVACE WASH LIQ PLUS 10%	Sulfacetamide	Yes	3	
OVCON 50 TAB 28	Ethinyl Estradiol and Norethindrone	No	3	
OVCON FE	Ethinyl Estradiol and Norethindrone	No	3	
OVCON-35 TAB	Ethinyl Estradiol and Norethindrone	Yes	3	
OVRAL Tab 0.5 MG-50 MCG	Ethinyl Estradiol and Norgestrel	Yes	3	
OVRETTE TAB 0.075MG	Norgestrel	No	3	
OPANA TABLET 10 MG	OXYMORPHONE HCL	No	3	QL
OPANA TABLET 5 MG	OXYMORPHONE HCL	No	3	QL
OXYIR CAP 5MG	Oxycodone	Yes	3	
OPTICROM Ophth Soln 4%	Cromolyn	Yes	3	
OPTIPRANOLOL SOL 0.3% OP	Metipranolol	Yes	3	
Optivar Dro 0.05%	Azelastine	No	2	
ORACEA CAP DELAYED RELEASE 40 MG	doxycycline	No	3	
ORACIT	Sodium Citrate and Citric Acid	Yes	3	
ORAMORPH SR TAB 100MG	Morphine Sulfate	Yes	3	
ORAMORPH SR TAB 15MG	Morphine Sulfate	Yes	3	
ORAMORPH SR TAB 30MG	Morphine Sulfate	Yes	3	
ORAMORPH SR TAB 60MG	Morphine Sulfate	Yes	3	
ORAPRED ODT TAB 10MG	PrednisoLONE	Yes	3	
ORAPRED ODT TAB 15MG	PrednisoLONE	Yes	3	
ORAPRED ODT TAB 30MG	PrednisoLONE	Yes	3	
PALGIC D TAB	Carbinoxamine and Pseudoephedrine	No	3	
PALGIC DS SYR	Carbinoxamine and Pseudoephedrine	No	3	
PAMELOR CAP 10MG	Nortriptyline	Yes	3	
PAMELOR CAP 25MG	Nortriptyline	Yes	3	
PAMELOR CAP 50MG	Nortriptyline	Yes	3	
PAMELOR CAP 75MG	Nortriptyline	Yes	3	
ORAPRED SOL 15MG/ML	PrednisoLONE	Yes	3	
ORGAN-1 NR TAB 200MG	Guaifenesin	Yes	3	
ORGANIDIN NR LIQ 100/5ML	Guaifenesin	Yes	3	
ORGANIDIN NR TAB 200MG	Guaifenesin	Yes	3	
ORPHENGESIC FORTE Tab 50-770-60 MG	Orphenadrine, Aspirin, and Caffeine	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
ORPHENGESIC Tab 25-385-30 MG	Orphenadrine, Aspirin, and Caffeine	Yes	3	
ORTHOCLONE INJ OKT3	Muromonab-CD3	No	3	
ORTHO-EST TAB 0.625	Estropipate	Yes	3	
ORTHO-EST TAB 1.25	Estropipate	Yes	3	
ORUVAIL CAP 100MG	Ketoprofen	Yes	3	
ORUVAIL CAP 150MG	Ketoprofen	Yes	3	
ORUVAIL CAP SR 24HR 200 MG	Ketoprofen	Yes	3	
OSMOPREP Tabs	Sod Phos Mono-Sod Phos Di	No	2	
OXISTAT CRE 1%	Oxiconazole	No	3	
OXISTAT LOT 1%	Oxiconazole	No	3	
OxyContin Tab 10MG CR	Oxycodone	Yes	2	QL
OxyContin Tab 15MG CR	Oxycodone	No	2	QL
OxyContin Tab 20MG CR	Oxycodone	Yes	2	QL
OxyContin Tab 30MG CR	Oxycodone	No	2	QL
OxyContin Tab 40MG CR	Oxycodone	Yes	2	QL
OxyContin Tab 60MG CR	Oxycodone	No	2	QL
OxyContin Tab 80MG CR	Oxycodone	Yes	2	QL
Oxytrol DIS 3.9MG/24	Oxybutynin	No	3	
PACERONE TAB 100MG	Amiodarone	Yes	3	
PACERONE TAB 200MG	Amiodarone	Yes	3	
PACERONE TAB 300MG	Amiodarone	Yes	3	
PANOXYL Bar 10%	Benzoyl Peroxide	No	3	
PANOXYL Bar 5%	Benzoyl Peroxide	No	3	
PANOXYL AQ Gel 10%	Benzoyl Peroxide	Yes	3	
PANOXYL AQ Gel 2.5%	Benzoyl Peroxide	Yes	3	
PANOXYL AQ Gel 5%	Benzoyl Peroxide	Yes	3	
PANOXYL AQUA GEL 10%	Benzoyl Peroxide	Yes	3	
PANOXYL Gel 10%	Benzoyl Peroxide	Yes	3	
PANOXYL Gel 5%	Benzoyl Peroxide	Yes	3	
PACERONE TAB 400MG	Amiodarone	Yes	3	
PARCOPA TAB 10-100MG	Levodopa and Carbidopa	Yes	3	
PARCOPA TAB 25-100MG	Levodopa and Carbidopa	Yes	3	
PARCOPA TAB 25-250MG	Levodopa and Carbidopa	Yes	3	
PARLODEL CAP 2.5MG	Bromocriptine	Yes	3	
PARLODEL CAP 5MG	Bromocriptine	Yes	3	
PARNATE TAB 10MG	Tranylcypromine	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
PANCOF SYP	Pseudoephedrine, Dihydrocodeine, and Chlorpheniramine	Yes	3	
PATANASE	Olopatadine HCl	No	3	QL
PANCREASE MT CAP 10	Pancrelipase	Yes	3	
PAXIL TAB 10MG	Paroxetine	Yes	3	
PAXIL TAB 20MG	Paroxetine	Yes	3	
PAXIL TAB 30MG	Paroxetine	Yes	3	
PAXIL TAB 40MG	Paroxetine	Yes	3	
PAXIL CR TAB 12.5MG	Paroxetine	Yes	3	
PAXIL CR TAB 25MG	Paroxetine	Yes	3	
PAXIL CR TAB 37.5MG	Paroxetine	No	3	
PANCREASE MT CAP 16	Pancrelipase	Yes	3	
PANCREASE MT CAP 20	Pancrelipase	Yes	3	
PANCREASE MT CAP 4	Pancrelipase	Yes	3	
PANCRECARB CAP MS-16	Pancrelipase	Yes	3	
PEDIATEX TD LIQ	Carbinoxamine and Pseudoephedrine	Yes	3	
PEDIATEX-D LIQ	Carbinoxamine and Pseudoephedrine	Yes	3	
PEDIAZOLE SUS 200/600	Erythromycin and Sulfisoxazole	Yes	3	
PANCRECARB CAP MS-16	Pancrelipase	Yes	3	
PANCRECARB CAP MS-4	Pancrelipase	Yes	3	
PANCRECARB CAP MS-4	Pancrelipase	Yes	3	
Pegasys Inj 180MCG	Peginterferon alfa-2a	No	5	PA
Pegasys Kit 180MCG	Peginterferon alfa-2a	No	5	PA
PANCRECARB CAP MS-8	Pancrelipase	Yes	3	
PANCRECARB CAP MS-8	Pancrelipase	Yes	3	
PANCRELIPASE CAP 10000	Pancrelipase	Yes	3	
PANCRELIPASE CAP 16000	Pancrelipase	Yes	3	
PANCRELIPASE CAP 20000	Pancrelipase	Yes	3	
PANCRELIPASE CAP 450	Pancrelipase	Yes	3	
PANCRELIPASE TAB	Pancrelipase	Yes	3	
PANGES CN 10 CAP	Pancrelipase	Yes	3	
PANGES CN 20 CAP	Pancrelipase	Yes	3	
PERCOCET TAB 10-325MG	Oxycodone and Acetaminophen	Yes	3	
PERCOCET TAB 10-650MG	Oxycodone and Acetaminophen	Yes	3	
PERCOCET TAB 2.5-325	Oxycodone and Acetaminophen	Yes	3	
PERCOCET TAB 5-325MG	Oxycodone and Acetaminophen	Yes	3	
PERCOCET TAB 7.5-325M	Oxycodone and Acetaminophen	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
PERCOCET TAB 7.5-500	Oxycodone and Acetaminophen	Yes	3	
PERCODAN TAB	Oxycodone and Aspirin	Yes	3	
PANGES MT 16 CAP	Pancrelipase	Yes	3	
PANGES UL 12 CAP	Pancrelipase	Yes	3	
PERIOSTAT TAB	Doxycycline	Yes	3	
PERMAX TAB 0.05MG	Pergolide	Yes	3	
PERMAX TAB 0.25MG	Pergolide	Yes	3	
PERMAX TAB 1MG	Pergolide	Yes	3	
PANGES UL 18 CAP	Pancrelipase	Yes	3	
PANGES UL 20 CAP	Pancrelipase	Yes	3	
PANGESTYM EC CAP	Pancrelipase	Yes	3	
PEXEVA TAB 20MG	Paroxetine	No	3	
PEXEVA TAB 30MG	Paroxetine	No	3	
PEXEVA TAB 40MG	Paroxetine	No	3	
PANMIST JR Tab SR 12HR 48-595 MG	Guaifenesin and Pseudoephedrine	Yes	3	
PANMIST S Syrup 40-200 MG/5ML	Guaifenesin and Pseudoephedrine	Yes	3	
PANMIST-LA Tab SR 12HR 80-800 MG	Guaifenesin and Pseudoephedrine	Yes	3	
PARA-TIME CAP 150MG ER	Papaverine	Yes	3	
PATADAY Sol	Olopatadine	No	2	
PATANOL Sol 0.1% Op	Olopatadine	No	2	
PCE TAB 333MG EC	Erythromycin	Yes	3	
PCE TAB 500MG EC	Erythromycin	Yes	3	
PEDIAPRED LIQ 6.7/5ML	PrednisoLONE	Yes	3	
PEDIATEX HC LIQ	Pseudoephedrine, Hydrocodone, and Chlorpheniramine	Yes	3	
PEDI-DRI POW 100000	Nystatin	Yes	3	
PEDIOTIC SUS 1% OTIC	Neomycin, Polymyxin B, and Hydrocortisone	Yes	3	
PEGANONE TAB 250MG	Ethotoin	No	3	
PEG-INTRON KIT 150MCG	Peginterferone Alfa-2b	No	4	
PEG-INTRON KIT 120MCG	Peginterferone Alfa-2b	No	4	
PEG-INTRON KIT 50MCG	Peginterferone Alfa-2b	No	4	
PEG-INTRON KIT 80MCG	Peginterferone Alfa-2b	No	4	
PENTASA CAP 250MG CR	Mesalamine	No	3	
PENTASA CAP 500MG CR	Mesalamine	No	3	
PENTOXIL TAB 400MG CR	Pentoxifylline	Yes	3	
PEPCID TAB 20MG	Famotidine	Yes	3	
PEPCID TAB 40MG	Famotidine	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
PERIDEX Soln 0.12%	Chlorhexidine Gluconate	Yes	3	
PERIOGARD SOL 0.12%	Chlorhexidine Gluconate	Yes	3	
PLAN B TAB 0.75MG	Levonorgestrel	Yes	3	
PERSANTINE TAB 25MG	Dipyridamole	Yes	3	
PERSANTINE TAB 50MG	Dipyridamole	Yes	3	
PLAVIX Tab 75MG	Clopidogrel	No	3	
PERSANTINE TAB 75MG	Dipyridamole	Yes	3	
PHENADOZ SUP 12.5MG	Promethazine	Yes	3	
PLETAL TAB 100MG	Cilostazol	Yes	3	
PLETAL TAB 50MG	Cilostazol	Yes	3	
PLEXION Emulsion 10-5%	Sulfur and Sulfacetamide	Yes	3	
PLEXION SCT CRE 10-5%	Sulfur and Sulfacetamide	Yes	3	
PLEXION TS Susp 10-5%	Sulfur and Sulfacetamide	Yes	3	
PHENADOZ SUP 25MG	Promethazine	Yes	3	
PHENERGAN Inj 25 MG/ML	Promethazine	Yes	3	
PHENERGAN SUP 12.5MG	Promethazine	Yes	3	
PHENERGAN SUP 25MG	Promethazine	Yes	3	
POLYSPORIN Ophth Oint	Bacitracin and Polymyxin B	Yes	3	
POLYSPORIN Powder	Bacitracin and Polymyxin B	Yes	3	
PHENERGAN SUP 50MG	Promethazine	Yes	3	
PHENERGAN Inj 50 MG/ML	Promethazine	Yes	3	
PHENERGAN Tab 12.5 MG	Promethazine	Yes	3	
PHENERGAN Tab 25 MG	Promethazine	Yes	3	
PHENERGAN Tab 50 MG	Promethazine	Yes	3	
PHENERGAN/CODEINE Syrup 6.25-10 MG/5ML	Promethazine and Codeine	Yes	3	
PHENYTEK CAP 200MG	Phenytoin	Yes	3	
PHENYTEK CAP 300MG	Phenytoin	Yes	3	
PHISOHEX LIQ 3%	Hexachlorophene	No	3	
PHOSLO CAP 667MG	Calcium Acetate	No	3	
PRAVACHOL TAB 10MG	Pravastatin	Yes	3	
PRAVACHOL TAB 20MG	Pravastatin	Yes	3	
PRAVACHOL TAB 40MG	Pravastatin	Yes	3	
PRAVACHOL TAB 80MG	Pravastatin	Yes	3	
PHRENILIN Tab 50-325 MG	Butalbital, Aspirin, Caffeine, and Codeine	Yes	3	
PILOCAR SOL 0.5% OP	Pilocarpine	Yes	3	
PILOCAR SOL 2% OP	Pilocarpine	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
PILOCAR SOL 4% OP	Pilocarpine	Yes	3	
PILOCAR SOL 6% OP	Pilocarpine	Yes	3	
PILOCAR TAB 5MG	Pilocarpine	Yes	3	
PILOCAR TAB 7.5MG	Pilocarpine	Yes	3	
PILOCAR SOL 1% OP	Pilocarpine	Yes	3	
PREFEST TAB	Estradiol and Norgestimate	No	3	
PILOPINE HS GEL 4% OP	Pilocarpine	No	3	
PLAQUENIL Tab 200 MG	Hydroxychloroquine	Yes	3	
PLAVIX Tab 300MG	Clopidogrel	No	3	
PLENDIL TAB 10MG CR	Felodipine	Yes	3	
PLENDIL TAB 5MG CR	Felodipine	Yes	3	
POLYCITRA Syrup 550-500-334 MG/5ML	Citric Acid, Sodium Citrate, and Potassium Citrate	Yes	3	
POLYCITRA-K SOL 1100-334 MG/5ML	Potassium Citrate and Citric Acid	Yes	3	
POLYCITRA-LC Soln 550-500-334 MG/5ML	Citric Acid, Sodium Citrate, and Potassium Citrate	Yes	3	
POLY-PRED SUS OP	Neomycin, Polymyxin B, and Prednisolone	No	3	
PRAMOSONE CRE 1%	Pramoxine and Hydrocortisone	No	3	
PRAMOSONE CRE 2.5%	Pramoxine and Hydrocortisone	No	3	
PRAMOSONE LOT 1%	Pramoxine and Hydrocortisone	No	3	
PRAMOSONE LOT 2.5%	Pramoxine and Hydrocortisone	No	3	
PRAMOSONE OIN 2.5%	Pramoxine and Hydrocortisone	No	3	
Prandimet Tab 1-500MG	Repaglinide and Metformin	No	2	
Prandimet Tab 2-500MG	Repaglinide and Metformin	No	2	
PRANDIN Tab 0.5MG	Repaglinide	No	2	
PRANDIN Tab 1MG	Repaglinide	No	2	
PRANDIN Tab 2MG	Repaglinide	No	2	
PREVACID NAP KIT 500MG	Lansoprazole and Naproxen	No	3	
PRECISION Xtr Beta Ketone Test Strips 10 ct		No	2	
PRECISION Xtr Meter		No	2	
PRECISION Xtr Test Strips 100 ct		No	2	
PRECISION Xtr Test Strips 50 ct		No	2	
PRED FORTE SUS 1% OP	PrednisoLONE	Yes	3	
PRED MILD SUS 0.12% OP	PrednisoLONE	Yes	3	
PRED-G SUS OP	Prednisolone and Gentamicin	No	3	
PREDNISONE CONC 5 MG/ML	PredniSONE	Yes	3	
PREFERA OB	PRENAT VIT-FE POLY CMLX-FE HEME POLY-FA TAB	No	2	
PREFERA OB + DHA	PRENAT-FE POLY CMLX-FE HEME POLY-FA TAB & DHA CAP	No	2	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
PRELONE SYP 5MG/5ML	PrednisoLONE	Yes	3	
PREMARIN Tab 0.3MG	Estrogens (Conjugated/Equine)	No	2	
PREMARIN Tab 0.45MG	Estrogens (Conjugated/Equine)	No	2	
PRIMSOL Oral Soln 50 MG/5ML (Base Equiv)	Trimethoprim	No	3	
PREMARIN Tab 0.625MG	Estrogens (Conjugated/Equine)	No	2	
PREMARIN Tab 0.9MG	Estrogens (Conjugated/Equine)	No	2	
PREMARIN Tab 1.25MG	Estrogens (Conjugated/Equine)	No	2	
Premarin Vag Cre 0.625MG	Estrogens (Conjugated/Equine)	No	2	
Premarin Vag Cre Refill 0.625MG	Estrogens (Conjugated/Equine)	No	2	
PREMPHASE Tab	Estrogens (Conjugated/Equine) and Medroxyprogesterone	No	2	
PREMPRO Tab 0.3-1.5MG	Estrogens (Conjugated/Equine) and Medroxyprogesterone	No	2	
PREMPRO Tab 0.45-1.5MG	Estrogens (Conjugated/Equine) and Medroxyprogesterone	No	2	
PREMPRO Tab 0.625-2.5MG	Estrogens (Conjugated/Equine) and Medroxyprogesterone	No	2	
PREMPRO Tab 0.625-5MG	Estrogens (Conjugated/Equine) and Medroxyprogesterone	No	2	
PREVACID CAP 15MG DR	Lansoprazole	No	3	QL
PREVACID CAP 30MG DR	Lansoprazole	No	3	QL
PREVACID GRA 15MG	Lansoprazole	No	3	QL
PREVACID GRA 30M	Lansoprazole	No	3	QL
PREVACID TAB 15MG STB	Lansoprazole	No	3	QL
PROAMATINE TAB 10MG	Midodrine	Yes	3	
PROAMATINE TAB 5MG	Midodrine	Yes	3	
PREVACID TAB 30MG STB	Lansoprazole	No	3	QL
PREVALITE Powder 4 GM/DOSE	Cholestyramine Resin	Yes	3	
PREVALITE Powder Packets 4 GM	Cholestyramine Resin	Yes	3	
PREVIFEM Tab 0.25 MG-35 MCG	Ethinyl Estradiol and Norgestimate	Yes	1	
PREZISTA 75 MG	Darunavir	No	2	
PREZISTA TAB 150MG	Darunavir	No	2	
Prochieve Gel 8% Vag	Progesterone	No	3	PA
PREZISTA TAB 300MG	Darunavir	No	2	
PREZISTA TAB 400MG	Darunavir	No	2	
PREZISTA TAB 600MG	Darunavir	No	2	
PRILOSEC SUSP PACKET 2.5 MG	Omeprazole	No	3	QL
PRILOSEC CAP 10MG CR	Omeprazole	Yes	3	QL
PRILOSEC CAP 20MG CR	Omeprazole	Yes	3	QL
PRILOSEC CAP 40MG CR	Omeprazole	Yes	3	QL
PRILOSEC SUSP PACKET 10 MG	Omeprazole	No	3	QL

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
PRIMABELLA	Nerve Stimulator	No	4	
PRINIVIL Tab 10 MG	Lisinopril	Yes	3	
PRINIVIL Tab 2.5 MG	Lisinopril	Yes	3	
PRINIVIL Tab 20 MG	Lisinopril	Yes	3	
PRINIVIL Tab 40 MG	Lisinopril	Yes	3	
PRINIVIL Tab 5 MG	Lisinopril	Yes	3	
PRINZIDE TAB 10/12.5	Lisinopril and Hydrochlorothiazide	Yes	3	
PRINZIDE TAB 20-12.5	Lisinopril and Hydrochlorothiazide	Yes	3	
PRISTIQ Tab SR 24HR 100 MG	Desvenlafaxine Succinate	No	2	
PRISTIQ Tab SR 24HR 50 MG	Desvenlafaxine Succinate	No	2	
ProAir HFA Aer	Albuterol	No	2	
ProAir HFA Aer	Albuterol	No	2	
ProAir HFA Aer	Albuterol	No	2	
ProAir HFA Aer	Albuterol	No	2	
ProAir HFA Aer	Albuterol	No	2	
ProAir HFA Aer	Albuterol	No	2	
PROCANBID Tab SR 12HR 1000 MG	Procainamide	No	3	
PROCANBID Tab SR 12HR 500 MG	Procainamide	No	3	
PROCARDIA CAP 10MG	NIFEdipine	Yes	3	
PROCARDIA XL TAB 30MG CR	NIFEdipine	Yes	3	
PROCARDIA XL TAB 60MG CR	NIFEdipine	Yes	3	
PROCARDIA XL TAB 90MG CR	NIFEdipine	Yes	3	
Procrit Inj 10000/ML	Epoetin Alfa	No	4	
Procrit Inj 10000/ML	Epoetin Alfa	No	4	
PROLOPRIM Tab 100 MG	Trimethoprim	Yes	3	
Procrit Inj 10000/ML	Epoetin Alfa	No	4	
Procrit Inj 10000/ML	Epoetin Alfa	No	4	
Procrit Inj 10000/ML	Epoetin Alfa	No	4	
PROMETRIUM CAP 100MG	Progesterone	No	3	
PROMETRIUM CAP 200MG	Progesterone	No	3	
PROPECIA TAB 1MG	Finasteride	No	3	
Procrit Inj 10000/ML	Epoetin Alfa	No	4	
Procrit Inj 10000/ML	Epoetin Alfa	No	4	
PROSCAR TAB 5MG	Finasteride	Yes	3	
PROSOM Tab 1 MG	Estazolam	Yes	3	
PROSOM Tab 2 MG	Estazolam	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
Procrit Inj 10000/ML	Epoetin Alfa	No	4	
Procrit Inj 2000/ML	Epoetin Alfa	No	4	
Procrit Inj 2000/ML	Epoetin Alfa	No	4	
Procrit Inj 20000/ML	Epoetin Alfa	No	4	
Procrit Inj 20000/ML	Epoetin Alfa	No	4	
Procrit Inj 20000/ML	Epoetin Alfa	No	4	
Procrit Inj 20000/ML	Epoetin Alfa	No	4	
Procrit Inj 20000/ML	Epoetin Alfa	No	4	
Procrit Inj 3000/ML	Epoetin Alfa	No	4	
Procrit Inj 3000/ML	Epoetin Alfa	No	4	
Procrit Inj 4000/ML	Epoetin Alfa	No	4	
Procrit Inj 4000/ML	Epoetin Alfa	No	4	
Procrit Inj 40000/ML	Epoetin Alfa	No	4	
Provigil Tab 100MG	Modafinil	No	3	QL
Provigil Tab 200MG	Modafinil	No	3	QL
PROZAC CAP 10MG	Fluoxetine	Yes	3	
PROZAC CAP 20MG	Fluoxetine	Yes	3	
PROZAC CAP 40MG	Fluoxetine	Yes	3	
PROZAC WEEKLY CAP 90MG	Fluoxetine	Yes	3	
Procrit Inj 40000/ML	Epoetin Alfa	No	4	
PROCTOFOAM AER -HC 1%	Pramoxine and Hydrocortisone	No	3	
PROFEN FORTE Tab SR 12HR 90-800 MG	Guaifenesin and Pseudoephedrine	Yes	3	
PROFEN II Tab SR 12HR 45-800 MG	Guaifenesin and Pseudoephedrine	Yes	3	
PROFILNINE SD RECON SOLN 1000 -1500 UNIT	FACTOR IX COMPLEX	No	4	
PROFILNINE SD RECON SOLN 1000 UNIT	FACTOR IX COMPLEX	No	4	
PROFILNINE SD RECON SOLN 1500 UNIT	FACTOR IX COMPLEX	No	4	
PROFILNINE SD RECON SOLN 500 UNIT	FACTOR IX COMPLEX	No	4	
PROGRAF CAP 0.5MG	Tacrolimus	No	3	
PROGRAF CAP 1MG	Tacrolimus	No	3	
PROGRAF CAP 5MG	Tacrolimus	No	3	
PROGRAF INJ 5MG/ML	Tacrolimus	No	5	
QUESTRAN LIGHT Powder 4 GM/DOSE	Cholestyramine Resin	Yes	3	
QUESTRAN LIGHT Powder Packets 4 GM	Cholestyramine Resin	Yes	3	
QUESTRAN Powder 4 GM/DOSE	Cholestyramine Resin	Yes	3	
QUESTRAN Powder Packets 4 GM	Cholestyramine Resin	Yes	3	
PROLIXIN Inj 25 MG/ML	Fluphenazine	Yes	3	
PROLIXIN Elixir 2.5 MG/5ML	Fluphenazine	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
PROLIXIN Oral Conc 5 MG/ML	Fluphenazine	Yes	3	
QUIXIN SOL 0.5	Levofloxacin	No	3	
PROLIXIN Tab 10 MG	Fluphenazine	Yes	3	
PROLIXIN Tab 5 MG	Fluphenazine	Yes	3	
PROMETHEGAN SUP 12.5MG	Promethazine	Yes	3	
RANICLOR Chew Tab 250 MG	Cefaclor	No	3	
RAPAFLO 4MG	SILODOSIN	No	3	
RAPAFLO 8MG	SILODOSIN	No	3	
PROMETHEGAN SUP 25MG	Promethazine	Yes	3	
PROMETHEGAN SUP 50MG	Promethazine	Yes	3	
PROPINE Ophth Soln 0.1%	Dipivefrin	Yes	3	
PROPRANOLOL CONC 80MG/ML	Propranolol	No	3	
Protonix Inj 40MG	Pantoprazole	No	4	
Rebif Inj 22/0.5	Interferon Beta-1a	No	5	PA
Rebif Inj 44/0.5	Interferon Beta-1a	No	5	PA
Protonix Pak	Pantoprazole	No	3	QL
Protonix Tab 20MG	Pantoprazole	Yes	3	QL
Protonix Tab 40MG	Pantoprazole	Yes	3	QL
PROTOPIC OIN 0.03%	Tacrolimus	No	3	A
PROTOPIC OIN 0.1%	Tacrolimus	No	3	A
Proventil Aer HFA	Albuterol	No	2	
Proventil Aer HFA	Albuterol	No	2	
REMERON SLTB TAB 15MG	Mirtazapine	No	3	
REMERON SLTB TAB 30MG	Mirtazapine	No	3	
REMERON SLTB TAB 45MG	Mirtazapine	No	3	
REMERON TAB 15 MG	Mirtazapine	Yes	3	
REMERON TAB 30 MG	Mirtazapine	Yes	3	
REMERON TAB 45 MG	Mirtazapine	Yes	3	
Remicade Inj 100MG	Infliximab	No	5	PA
REMINYL Tab 12 MG	Galantamine Hydrobromide	No	3	
REMINYL Tab 4 MG	Galantamine Hydrobromide	No	3	
REMINYL Tab 8 MG	Galantamine Hydrobromide	No	3	
Proventil Aer HFA	Albuterol	No	2	
Proventil Aer HFA	Albuterol	No	2	
Proventil Aer HFA	Albuterol	No	2	
PROVENTIL REPETA TAB 4MG	Albuterol	No	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
PRUDOXIN CRE 5%	Doxepin	No	3	
PSE/GG TAB 12HR 48-595 MG	Guaifenesin and Pseudoephedrine	Yes	3	
PSORCON E OIN 0.05%	Difflorason	No	3	
PSORCON Emollient Base Cream 0.05%	Difflorason	No	3	
PSORCON OINT. 0.05%	Difflorason Diacetate	Yes	3	
REQUIP TAB 0.25MG	Ropinirole	Yes	3	
REQUIP TAB 0.5MG	Ropinirole	Yes	3	
REQUIP TAB 1MG	Ropinirole	Yes	3	
REQUIP TAB 2MG	Ropinirole	Yes	3	
REQUIP TAB 3MG	Ropinirole	Yes	3	
REQUIP TAB 4MG	Ropinirole	Yes	3	
REQUIP TAB 5MG	Ropinirole	Yes	3	
PULMICORT INH 180MCG	Budesonide	No	2	
PULMICORT INH 200MCG	Budesonide	No	2	
PULMICORT INH 90MCG	Budesonide	No	2	
PULMICORT SUS 0.25MG/2	Budesonide	No	2	
PULMICORT SUS 0.5MG/2	Budesonide	No	2	
PULMICORT SUS 1MG/2ML	Budesonide	No	2	
PULMOZYME	Dornase Alfa	No	5	
QUIBRON-300 CAP	Theophylline and Guaifenesin	No	3	
QUIBRON-T TAB 300MG	Theophylline	Yes	3	
RESTORIL Cap 15 MG	Temazepam	Yes	3	
RESTORIL Cap 22.5 MG	Temazepam	Yes	3	
RESTORIL Cap 30 MG	Temazepam	Yes	3	
RESTORIL Cap 7.5 MG	Temazepam	Yes	3	
QUIBRON-T/SR Tab SR 12HR 300 MG	Theophylline	Yes	3	
Q-V TUSSIN SYR 30-2-2.5 MG/5ML	Pseudoephedrine, Hydrocodone, and Chlorpheniramine	Yes	3	
QVAR Aer 40MCG	Beclomethasone	No	2	
Retin-A Micro Gel 0.04%	Tretinoin, Topical	Yes	3	A
Retin-A Micro Gel 0.1%	Tretinoin, Topical	Yes	3	A
QVAR Aer 80MCG	Beclomethasone	No	2	
RAPAMUNE TAB 1MG	Sirolimus	No	3	
RAPAMUNE TAB 2MG	Sirolimus	No	3	
Raptiva Inj Kit 125MG	Efalizumab	No	5	PA
Rebetol Cap 200 MG	Ribavirin	Yes	3	PA
Rebetol Soln 40 MG/ML	Ribavirin Soln	No	3	PA

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
REGLAN Tab 10 MG	Metoclopramide	Yes	3	
REGLAN Tab 5 MG	Metoclopramide	Yes	3	
RELAFEN TAB 500 MG	Nabumetone	Yes	3	
RELAFEN TAB 750 MG	Nabumetone	Yes	3	
Relenza Aer Diskhale	Zanamivir	No	2	QL
Relpax Tab 20MG	Eletriptan	No	2	QL
Relpax Tab 40MG	Eletriptan	No	2	QL
RHINOCORT SUS AQUA	Budesonide	No	3	
Renagel Tab 400MG	Sevelamer	No	3	
Renagel Tab 800MG	Sevelamer	No	3	
RENOVA (Facial Wrinkles) Cream 0.02%	Tretinoin, Topical	Yes	3	
RENOVA (Facial Wrinkles) Cream 0.05%	Tretinoin, Topical	Yes	3	
REVELA PACKET 0.8 GM	Sevelamer	No	3	
REVELA PACKET 2.4 GM	Sevelamer	No	3	
RISPERDAL INJ 25MG	Risperidone	No	5	
RISPERDAL INJ 37.5MG	Risperidone	No	5	
RISPERDAL INJ 50MG	Risperidone	No	5	
RISPERDAL TAB 0.25MG	Risperidone	Yes	3	
RISPERDAL TAB 0.5MG	Risperidone	Yes	3	
RISPERDAL TAB 1MG	Risperidone	Yes	3	
RISPERDAL TAB 2MG	Risperidone	Yes	3	
RISPERDAL TAB 3MG	Risperidone	Yes	3	
RISPERDAL TAB 4MG	Risperidone	Yes	3	
Renvela Tab 800MG	Sevelamer	No	3	
REPAN Tab 50-325-40 MG	Butalbital, Acetaminophen, and Caffeine	Yes	3	
REPAN-CFTab 50-650 MG	Butalbital, Acetaminophen, and Caffeine	Yes	3	
REQUIP XL TAB 4MG	Ropinirole	No	3	
REQUIP XL TAB 8MG	Ropinirole	No	3	
RESCRIPTOR TAB 100MG	Delavirdine	No	2	
RITALIN LA CAP 10MG	Methylphenidate	No	3	QL
RITALIN LA CAP 20MG	Methylphenidate	No	3	QL
RITALIN LA CAP 30MG	Methylphenidate	No	3	QL
RITALIN LA CAP 40MG	Methylphenidate	No	3	QL
RESCRIPTOR TAB 200MG	Delavirdine	No	2	
RESPA DM Tab SR 12HR 28-600 MG	Guaifenesin and Dextromethorphan	Yes	3	
RESPIRE Cap 30-150 MG	Guaifenesin and Pseudoephedrine	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
RESPIRE Cap 60-200 MG	Guaifenesin and Pseudoephedrine	Yes	3	
RESPIRE Cap CR 120-250 MG	Guaifenesin and Pseudoephedrine	Yes	3	
RESTASIS (Ophth) Emulsion 0.05%	Cyclosporine	No	2	
Retin-A Cream 0.025%	Tretinoin, Topical	Yes	3	A
Retin-A Cream 0.05%	Tretinoin, Topical	Yes	3	A
Retin-A Cream 0.1%	Tretinoin, Topical	Yes	3	A
RETROVIR CAP 100 MG	Zidovudine	Yes	3	
RETROVIR SYRUP 10 MG/ML	Zidovudine Syrup	Yes	3	
RETROVIR TAB 300 MG	Zidovudine	Yes	3	
REVIA TAB 50 MG	Naltrexone	Yes	3	
Revlimid Cap 10MG	Lenalidomide	No	3	PA
Revlimid Cap 15MG	Lenalidomide	No	3	PA
Revlimid Cap 25MG	Lenalidomide	No	3	PA
Rituxan Inj 100MG	Rituximab	No	5	PA
Rituxan Inj 500MG	Rituximab	No	5	PA
RMS SUPPOSITORIES 10 MG	Morphine Sulfate	Yes	3	
RMS SUPPOSITORIES 20 MG	Morphine Sulfate	Yes	3	
RMS SUPPOSITORIES 30 MG	Morphine Sulfate	Yes	3	
RMS SUPPOSITORIES 5 MG	Morphine Sulfate	Yes	3	
Revlimid Cap 5MG	Lenalidomide	No	3	PA
Reyataz Cap 100MG	Atazanavir	No	2	
Reyataz Cap 150MG	Atazanavir	No	2	
Reyataz Cap 200MG	Atazanavir	No	2	
Reyataz Cap 300MG	Atazanavir	No	2	
RHEUMATREX Tab 2.5 MG (Antirheumatic)	Methotrexate	Yes	3	
RIBASPHERE Cap 200 MG	Ribavirin	Yes	1	
RIFADIN Cap 150 MG	Rifampin	Yes	3	
RIFADIN Cap 300 MG	Rifampin	Yes	3	
RIFAMATE CAP 150-300 MG	Rifampin and Isoniazid	Yes	3	
RONDEC LIQ	Carbinoxamine and Pseudoephedrine	No	3	
RONDEC TAB	Carbinoxamine and Pseudoephedrine	Yes	3	
RONDEC DM LIQ	Carbinoxamine and Pseudoephedrine	No	3	
RONDEC DM SYRUP 45-4-15 MG/5ML	Carbinoxamine and Pseudoephedrine	No	3	
RONDEC SYRUP 4-45 MG/5ML	Carbinoxamine and Pseudoephedrine	No	3	
RONDEC-TR TAB	Carbinoxamine and Pseudoephedrine	Yes	3	
ROSANIL EMUL 10-5%	Sulfur and Sulfacetamide	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
ROSANIL EMUL 10-5% & Skin Cleanser Kit***	Sulfur and Sulfacetamide	Yes	3	
ROSULA EMULSION 10-5%	Sulfur and Sulfacetamide	Yes	3	
ROSULA GEL 10-5%	Sulfur and Sulfacetamide	Yes	3	
RIFATER TAB 50-120-300 MG	Rifampin, Isoniazid, and Pyrazinamide	No	3	
RIOMET ORAL SOLN 500 MG/5ML	Metformin	No	3	
ROXANOL Oral Soln 20 MG/ML	Morphine Sulfate	Yes	3	
RISPERDAL M TAB 0.5MG	Risperidone	Yes	3	
ROXICODONE Conc 20 MG/ML	Oxycodone	Yes	3	
ROXICODONE Soln 5 MG/5ML	Oxycodone	Yes	3	
ROXICODONE Tab 15 MG	Oxycodone	Yes	3	
ROXICODONE Tab 30 MG	Oxycodone	Yes	3	
ROXICODONE Tab 5 MG	Oxycodone	Yes	3	
Rozerem Tab 8MG	Ramelteon	No	3	
ROZEX Emulsion 0.75%	Metronidazole Emulsion	No	3	
RISPERDAL M TAB 1MG	Risperidone	Yes	3	
RISPERDAL M TAB 2MG	Risperidone	Yes	3	
RISPERDAL M TAB 3MG	Risperidone	Yes	3	
RISPERDAL M TAB 4MG	Risperidone	Yes	3	
RISPERDAL SOLN	Risperidone	Yes	3	
RITALIN SR TAB 20MG	Methylphenidate	Yes	3	
RITALIN SR TAB 20MG	Methylphenidate	Yes	3	
Saizen Inj 5MG	Somatropin	No	5	PA
Saizen Inj 8.8MG	Somatropin	No	5	PA
RITALIN SR TAB 20MG	Methylphenidate	Yes	3	
RITALIN SR TAB 20MG	Methylphenidate	Yes	3	
RITALIN SR TAB 20MG	Methylphenidate	Yes	3	
RITALIN TAB 10 MG	Methylphenidate	Yes	3	
RITALIN TAB 10 MG	Methylphenidate	Yes	3	
RITALIN TAB 20 MG	Methylphenidate	Yes	3	
RITALIN TAB 20 MG	Methylphenidate	Yes	3	
RITALIN TAB 20 MG	Methylphenidate	Yes	3	
RITALIN TAB 5 MG	Methylphenidate	Yes	3	
SARAFEM (PMDD) CAP 10 MG	Fluoxetine	Yes	3	
SARAFEM (PMDD) CAP 20 MG	Fluoxetine	Yes	3	
SARAFEM (PMDD) TAB 10 MG	Fluoxetine	Yes	3	
SARAFEM (PMDD) TAB 20 MG	Fluoxetine	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
RITALIN TAB 5 MG	Methylphenidate	Yes	3	
SEASONALE TAB 0.15-0.03MG	Ethinyl Estradiol and Levonorgestrel	Yes	3	
SEASONIQUE	LEVONORG-ETH EST	No	3	
SEBA-GEL Gel 10%	Benzoyl Peroxide	Yes	3	
SEBA-GEL Gel 5%	Benzoyl Peroxide	Yes	3	
RITALIN TAB 5 MG	Methylphenidate	Yes	3	
RITALIN TAB 5 MG	Methylphenidate	Yes	3	
SEPTRA Tab 400-80 MG	Sulfamethoxazole and Trimethoprim	Yes	3	
SEPTRA Susp 200-40 MG/5ML	Sulfamethoxazole and Trimethoprim	Yes	3	
SEPTRA Tab 800-160 MG	Sulfamethoxazole and Trimethoprim	Yes	3	
RITALIN TAB 5 MG	Methylphenidate	Yes	3	
RITALIN TAB 5 MG	Methylphenidate	Yes	3	
ROBAXIN INJ 100 MG/ML	Methocarbamol	No	3	
ROBAXIN TAB 500 MG	Methocarbamol	Yes	3	
ROBAXIN TAB 750 MG	Methocarbamol	Yes	3	
ROBINUL INJ 0.2 MG/ML	Glycopyrrolate	Yes	3	
ROBINUL TAB 1 MG	Glycopyrrolate	Yes	3	
ROBINUL TAB 2 MG	Glycopyrrolate	Yes	3	
ROCALTROL Oral Soln 1 MCG/ML	Calcitriol	Yes	3	
ROCALTROL CAP 0.25 MCG	Calcitriol	Yes	3	
ROCALTROL CAP 0.5 MCG	Calcitriol	Yes	3	
ROMYCIN Ophth Oint 5 MG/GM	Erythromycin	Yes	3	
ROWASA ENEMA 4 GM	Mesalamine	Yes	3	
ROWASA Rectal Enema 4 GM & Cleanser Wipe Kit**	Mesalamine	No	3	
ROXICET Soln 5-325 MG/5ML	Oxycodone and Acetaminophen	No	3	
RUM-K LIQ 30MEQ/15ML	Potassium Chloride	Yes	3	
Serostim Inj 4MG	Somatropin (Non-Refrigerated)	No	5	PA
Serostim Inj 5MG	Somatropin (Non-Refrigerated)	No	5	PA
Serostim Inj 6MG	Somatropin (Non-Refrigerated)	No	5	PA
Serostim Inj 8.8MG	Somatropin (Non-Refrigerated)	No	5	PA
SERZONE Tab 100 MG	Nefazodone	Yes	3	
SERZONE Tab 150 MG	Nefazodone	Yes	3	
SERZONE Tab 200 MG	Nefazodone	Yes	3	
SERZONE Tab 250 MG	Nefazodone	Yes	3	
SERZONE Tab 50 MG	Nefazodone	Yes	3	
SILDEC LIQ	Brompheniramine & Pseudoephedrine	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
SILDEC Syrup 4-45 MG/5ML	Brompheniramine & Pseudoephedrine	Yes	3	
SILDEC-DM LIQ	Brompheniramine, Pseudoephedrine, Dextromethorphan	Yes	3	
SILDEC-DM Syrup 45-4-15 MG/5ML	Brompheniramine, Pseudoephedrine, Dextromethorphan	Yes	3	
SILDEC-PE Liquid 1-3.5 MG/ML	Chlorpheniramine & Phenylephrine	Yes	3	
SILDEC-PE Syrup 12.5-4-15 MG/5ML	Chlorpheniramine & Phenylephrine	Yes	3	
SILDEC-PE Syrup 1-3.5 MG/ML	Chlorpheniramine & Phenylephrine	Yes	3	
SILDEC-PE-DM Liquid 3.5-1-3 MG/ML	Chlorpheniramine & Phenylephrine	Yes	3	
SILVADENE Cream 1%	Silver Sulfadiazine	Yes	3	
RYTHMOL Cap SR 12HR 225 MG	Propafenone	Yes	3	
RYTHMOL Cap SR 12HR 325 MG	Propafenone	Yes	3	
RYTHMOL Cap SR 12HR 425 MG	Propafenone	Yes	3	
SINEMET Tab 25-250 MG	Levodopa and Carbidopa	Yes	3	
SINEMET Tab 10-100 MG	Levodopa and Carbidopa	Yes	3	
SINEMET Tab 25-100 MG	Levodopa and Carbidopa	Yes	3	
SINEMET Tab CR 25-100 MG	Levodopa and Carbidopa	Yes	3	
SINEMET Tab CR 50-200 MG	Levodopa and Carbidopa	Yes	3	
SINEQUAN CAP 10 MG	Doxepin	Yes	3	
SINEQUAN CAP 100 MG	Doxepin	Yes	3	
SINEQUAN CAP 150 MG	Doxepin	Yes	3	
SINEQUAN CAP 25 MG	Doxepin	Yes	3	
SINEQUAN CAP 50 MG	Doxepin	Yes	3	
SINEQUAN CAP 75 MG	Doxepin	Yes	3	
SINEQUAN CONC 10 MG/ML	Doxepin	Yes	3	
RYTHMOL Tab 150 MG	Propafenone	Yes	3	
RYTHMOL Tab 225 MG	Propafenone	Yes	3	
RYTHMOL Tab 300 MG	Propafenone	Yes	3	
SALAGEN Tab 5 MG	Pilocarpine	Yes	3	
SALFLEX Tab 500 MG	Salsalate	Yes	3	
SALFLEX Tab 750 MG	Salsalate	Yes	3	
SOMA COMPOUND Tab 200-325 MG	Carisoprodol and Aspirin	Yes	3	
SOMA COMPOUND/CODEINE Tab 200-325-16 MG	Carisoprodol, Aspirin, and Codeine	No	3	
SOMA Tab 250 MG	Carisoprodol	Yes	3	
SOMA Tab 350 MG	Carisoprodol	Yes	3	
SAL-TROPINE Tab 0.4 MG	Atropine	No	3	
SONATA CAP 10MG	Zaleplon	No	3	
SONATA CAP 5MG	Zaleplon	No	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
SANCTURA TAB 20MG	Trospium	No	2	
SANCTURA XR CAP 60MG	Trospium	No	2	
SANDIMMUNE Oral Soln 100 MG/ML	CycloSPORINE	Yes	3	
SANDIMMUNE Cap 100 MG	CycloSPORINE	Yes	3	
SANDIMMUNE Cap 25 MG	CycloSPORINE	Yes	3	
SAVELLA	MILNACIPRAN	No	3	
SECTRAL CAP 200 MG	Acebutolol	Yes	3	
SECTRAL CAP 400 MG	Acebutolol	Yes	3	
SPECTAZOLE Cream 1%	Econazole	Yes	3	
SELZENTRY TAB 150 MG	maraviroc	No	2	
SELZENTRY TAB 300 MG	maraviroc	No	2	
SERAX Cap 10 MG	Oxazepam	Yes	3	
SERAX Cap 15 MG	Oxazepam	Yes	3	
SERAX Cap 30 MG	Oxazepam	Yes	3	
SERAX TAB 15 MG	Oxazepam	No	3	
SERENTIL TAB 100MG	Mesoridazine	No	3	
SEREVENT DIS AER 50MCG	Salmeterol	No	3	
STADOL Inj 1 MG/ML	Butorphanol	Yes	3	
STADOL Inj 2 MG/ML	Butorphanol	Yes	3	
STADOL Nasal Soln 10 MG/ML	Butorphanol	Yes	3	QL
SEROPHENE Tab 50 MG	Clomiphene	Yes	3	
SEROQUEL TAB 100MG	Quetiapine	No	2	
SEROQUEL TAB 200MG	Quetiapine	No	2	
SEROQUEL TAB 25MG	Quetiapine	No	2	
STARLIX TAB 120MG	Nateglinide	No	3	
STARLIX TAB 60MG	Nateglinide	No	3	
SEROQUEL TAB 300MG	Quetiapine	No	2	
SEROQUEL TAB 400MG	Quetiapine	No	2	
SEROQUEL TAB 50MG	Quetiapine	No	2	
STRATTERA CAP 100MG	Atomoxetine	No	3	
STRATTERA CAP 10MG	Atomoxetine	No	3	
STRATTERA CAP 18MG	Atomoxetine	No	3	
STRATTERA CAP 25MG	Atomoxetine	No	3	
STRATTERA CAP 40MG	Atomoxetine	No	3	
STRATTERA CAP 60MG	Atomoxetine	No	3	
STRATTERA CAP 80MG	Atomoxetine	No	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
STRIANT Buccal Mucoadhesive System 30 MG	Testosterone	Yes	3	
SUBLIMAZE Inj 0.05 MG/ML	Fentanyl	Yes	3	
SEROQUEL XR TAB 200MG	Quetiapine Fumarate	No	2	
SEROQUEL XR TAB 300MG	Quetiapine Fumarate	No	2	
SEROQUEL XR TAB 400MG	Quetiapine Fumarate	No	2	
SFROWASA	MESALAMINE SULFITE-FREE	No	2	
SIMCOR 24HR 1000-20 MG	NIACIN-SIMVASTATIN	No	2	
SULFAMYLON CRE 85MG/GM	Mafenide	No	3	
SULFAMYLON PAK 5%	Mafenide	No	3	
SUMYCIN CAP 250 MG	Tetracycline	Yes	3	
SUMYCIN CAP 500 MG	Tetracycline	Yes	3	
SUMYCIN Syrup 125 MG/5ML	Tetracycline	No	3	
SUMYCIN Tab 250 MG	Tetracycline	No	3	
SUMYCIN Tab 500 MG	Tetracycline	No	3	
SIMCOR 24HR 500-20 MG	NIACIN-SIMVASTATIN	No	2	
SIMCOR 24HR 750-20 MG	NIACIN-SIMVASTATIN	No	2	
Singulair Chew 4 MG	Montelukast	No	2	QL
Singulair Chew 5 MG	Montelukast	No	2	QL
Singulair Oral Granules 4 MG	Montelukast	No	2	QL
Singulair Tab 10MG	Montelukast	No	2	QL
SURMONTIL CAP 100MG	Trimipramine	Yes	3	
SURMONTIL CAP 25MG	Trimipramine	Yes	3	
SURMONTIL CAP 50MG	Trimipramine	Yes	3	
SOLARAZE (Actinic Keratoses) Gel 3%	Diclofenac	Yes	3	
SOLIA Tab 0.15 MG-30 MCG	Ethinyl Estradiol and Desogestrel	Yes	1	
SOMNOTE Cap 500 MG	Chloral Hydrate	No	3	
SORINE TAB 120 MG	Sotalol	Yes	3	
SORINE TAB 160 MG	Sotalol	Yes	3	
SORINE TAB 240 MG	Sotalol	Yes	3	
SORINE TAB 80 MG	Sotalol	Yes	3	
SOTRET CAP 20MG	Isotretinoin	Yes	3	
SOTRET CAP 30MG	Isotretinoin	Yes	3	
SOTRET CAP 40MG	Isotretinoin	Yes	3	
SPACOL T/S TAB SR 12HR 0.375 MG	Hyoscyamine	Yes	3	
SPECTRACEF TAB 200 MG	cefditoren pivoxil	No	3	
SPECTRACEF TAB 400 MG	cefditoren pivoxil	No	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
Spiriva Cap Handihlr	Tiotropium	No	2	
SPORANOX CAP 100MG	Itraconazole	No	3	
Symlin Inj 600MCG	Pramlintide Acetate	No	5	PA
SymlinPen 120 Inj 1000MCG	Pramlintide Acetate	No	5	PA
SymlinPen 60 Inj 1000MCG	Pramlintide Acetate	No	5	PA
SYMMETREL Syrup 50 MG/5ML	Amantadine	Yes	3	
SYMMETREL Tab 100 MG	Amantadine	Yes	3	
SPORANOX SOL 10MG/ML	Itraconazole	No	3	
SPRINTEC 28 TAB 0.25 MG-35 MCG	Ethinyl Estradiol and Norgestimate	Yes	1	
SPS Oral Susp 15 GM/60ML	Sodium Polystyrene Sulfonate	Yes	3	
SYNALGOS DC CAP	Dihydrocodeine, Aspirin, and Caffeine	No	3	
SPS Rectal Susp 30 GM/120ML	Sodium Polystyrene Sulfonate	Yes	3	
SSD AF Cream 1%	Silver Sulfadiazine	Yes	3	
SSD Cream 1%	Silver Sulfadiazine	Yes	3	
STALEVO 100 TAB	Levodopa, Carbidopa, and Entacapone	No	3	
STALEVO 150 TAB	Levodopa, Carbidopa, and Entacapone	No	3	
STALEVO 200 TAB	Levodopa, Carbidopa, and Entacapone	No	3	
STALEVO 50 TAB	Levodopa, Carbidopa, and Entacapone	No	3	
STELAZINE Tab 5 MG	Trifluoperazine	Yes	3	
STERAPRED Tab 10 MG Dose Pack	PredniSONE	Yes	3	
STERAPRED Tab 5 MG Dose Pack	PredniSONE	Yes	3	
SULAR TAB 17MG	Nisoldipine	No	3	
SULAR TAB 25.5MG	Nisoldipine	No	3	
SULAR TAB 34MG	Nisoldipine	No	3	
SULAR TAB 8.5MG	Nisoldipine	No	3	
SULF-10 Opth Soln 10%	Sulfacetamide	Yes	3	
Supartz INJ 25/2.5ML	Hyaluronate and Derivatives	No	4	
Supartz INJ 25/2.5ML	Hyaluronate and Derivatives	No	4	
TALACEN Tab 25-650 MG	Pentazocine and Acetaminophen	Yes	3	
Supartz INJ 25/2.5ML	Hyaluronate and Derivatives	No	4	
TALWIN NX Tab 50-0.5 MG	Pentazocine w/ Naloxone	Yes	3	
SUPRAX SUS 100/5ML	Cefixime	No	3	
SUPRAX SUS 200/5ML	Cefixime	No	3	
SUPRAX TAB 400MG	Cefixime	No	3	
Sustiva Cap 100MG	Efavirenz	No	2	
Sustiva Cap 200MG	Efavirenz	No	2	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
Sustiva Cap 50MG	Efavirenz	No	2	
TANAFED DMX Sus 75-2.5-25 MG/5ML	Chlorpheniramine, Pseudoephedrine, and Dextromethorphan	Yes	3	
Sustiva Tab 600MG	Efavirenz	No	2	
SYMAX DUOTAB Tab CR 0.375 MG (0.125 MG IR/0.25 MG CR)	Hyoscyamine	Yes	3	
TARKA TAB 1-240 CR	Trandolapril and Verapamil	No	3	
TARKA TAB 2-180 CR	Trandolapril and Verapamil	No	3	
TARKA TAB 2-240 CR	Trandolapril and Verapamil	No	3	
TARKA TAB 4-240 CR	Trandolapril and Verapamil	No	3	
TASMAR TAB 100MG	Tolcapone	No	3	
TASMAR TAB 200MG	Tolcapone	No	3	
TAZORAC CRE 0.05%	Tazarotene	No	3	
TAZORAC CRE 0.1%	Tazarotene	No	3	
TAZORAC GEL 0.05%	Tazarotene	No	3	
TAZORAC GEL 0.1%	Tazarotene	No	3	
SYMAX FASTABS Tab Disp 0.125 MG	Hyoscyamine	Yes	3	
SYMAX-SL Tab SL 0.125 MG	Hyoscyamine	Yes	3	
SYMAX-SR Tab SR 12HR 0.375 MG	Hyoscyamine	Yes	3	
SYMBICORT AER 160-4.5MCG/ACT	Budesonide and Formoterol	No	2	
SYMBICORT AER 80-4.5MCG/ACT	Budesonide and Formoterol	No	2	
SYMBYAX CAP 12-25MG	Olanzapine and Fluoxetine	No	3	
SYMBYAX CAP 12-50MG	Olanzapine and Fluoxetine	No	3	
SYMBYAX CAP 3-25MG	Olanzapine and Fluoxetine	No	3	
SYMBYAX CAP 6-25MG	Olanzapine and Fluoxetine	No	3	
SYMBYAX CAP 6-50MG	Olanzapine and Fluoxetine	No	3	
SYNALAR Oint 0.025%	Fluocinolone	Yes	3	
Temodar Cap 100MG	Temozolomide	No	3	PA
Temodar Cap 140MG	Temozolomide	No	3	PA
Temodar Cap 20MG	Temozolomide	No	3	PA
Temodar Cap 250MG	Temozolomide	No	3	PA
Temodar Cap 5MG	Temozolomide	No	3	PA
SYNALAR Cream 0.025%	Fluocinolone	Yes	3	
SYNALAR Soln 0.01%	Fluocinolone	Yes	3	
SYNTEST D.S. Tab 1.25-2.5 MG	Estrogens (Esterified) and Methyltestosterone	Yes	3	
SYNTEST H.S. Tab 0.625-1.25 MG	Estrogens (Esterified) and Methyltestosterone	Yes	3	
SYNTHROID Tab 112 MCG	Levothyroxine	Yes	3	
SYNTHROID Tab 75 MCG	Levothyroxine	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
SYNTHROID Tab 88 MCG	Levothyroxine	Yes	3	
SYNTHROID Tab 100 MCG	Levothyroxine	Yes	3	
SYNTHROID Tab 125 MCG	Levothyroxine	Yes	3	
SYNTHROID Tab 150 MCG	Levothyroxine	Yes	3	
SYNTHROID Tab 200 MCG	Levothyroxine	Yes	3	
SYNTHROID Tab 25 MCG	Levothyroxine	Yes	3	
SYNTHROID Tab 50 MCG	Levothyroxine	Yes	3	
TEQUIN TAB 200MG	Gatifloxacin	No	3	
TEQUIN TAB 400MG	Gatifloxacin	No	3	
TEQUIN INJ 2MG/ML	Gatifloxacin	No	5	
Synvisc Inj 8MG/ML	Hylan Intra-articular	No	4	PA
SYNVISC ONE	Hylan Intra-articular	No	4	PA
Tabloid Tab 40MG	Thioguanine	No	3	PA
TESSALON Cap 200 MG	Benzonatate	Yes	3	
TESSALON PERLES Cap 100 MG	Benzonatate	Yes	3	
TESTIM TD Gel 1%	Testosterone	No	3	
TESTOPEL Implant Pellets 75 MG	Testosterone	No	3	
TEVETEN TAB 400MG	Eprosartan	No	3	
TEVETEN TAB 600MG	Eprosartan	No	3	
TEVETEN HCT TAB 600-12.5	Eprosartan and Hydrochlorothiazide	No	3	
TEVETEN HCT TAB 600-25MG	Eprosartan and Hydrochlorothiazide	No	3	
TAGAMET Tab 300 MG	Cimetidine	Yes	3	
TAGAMET Tab 400 MG	Cimetidine	Yes	3	
TAGAMET Tab 800 MG	Cimetidine	Yes	3	
Thalomid Cap 100MG	Thalidomide	No	3	PA
Thalomid Cap 150MG	Thalidomide	No	3	PA
Thalomid Cap 200MG	Thalidomide	No	3	PA
Thalomid Cap 50MG	Thalidomide	No	3	PA
TALWIN Soln 30 MG/ML	Pentazocine	No	3	
TAMBOCOR Tab 100 MG	Flecainide	Yes	3	
TAMBOCOR Tab 50 MG	Flecainide	Yes	3	
TAMIFLU CAP 30 MG	OSELTAMIVIR PHOSPHATE	No	3	QL
Tamiflu Cap 45MG	OSELTAMIVIR PHOSPHATE	No	3	QL
Tamiflu Cap 75MG	OSELTAMIVIR PHOSPHATE	No	3	QL
Tamiflu Sus 12MG/ML	OSELTAMIVIR PHOSPHATE	No	3	QL
TAPAZOLE Tab 10 MG	Methimazole	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
TAPAZOLE Tab 5 MG	Methimazole	Yes	3	
TAZTIA XT Extended Release Beads Cap SR 24HR 120 MG	Diltiazem	Yes	3	
TAZTIA XT Extended Release Beads Cap SR 24HR 180 MG	Diltiazem	Yes	3	
TAZTIA XT Extended Release Beads Cap SR 24HR 240 MG	Diltiazem	Yes	3	
TAZTIA XT Extended Release Beads Cap SR 24HR 300 MG	Diltiazem	Yes	3	
TAZTIA XT Extended Release Beads Cap SR 24HR 360 MG	Diltiazem	Yes	3	
TEGRETOL Chew Tab 100 MG	Carbamazepine	Yes	3	
TEGRETOL Susp 100 MG/5ML	Carbamazepine	Yes	3	
TEGRETOL TAB 200 MG	Carbamazepine	Yes	3	
TEGRETOL XR TAB 100MG	Carbamazepine	Yes	3	
TEGRETOL XR TAB 200MG	Carbamazepine	Yes	3	
TEGRETOL XR TAB 400MG	Carbamazepine	Yes	3	
TEMOVATE Cream 0.05%	Clobetasol	Yes	3	
TEMOVATE E Emollient Base Cream 0.05%	Clobetasol	Yes	3	
TEMOVATE Gel 0.05%	Clobetasol	Yes	3	
TEMOVATE Oint 0.05%	Clobetasol	Yes	3	
TILADE AER 1.75/ACT	Nedocromil	No	3	
TEMOVATE Soln 0.05%	Clobetasol	Yes	3	
TENEX Tab 1 MG	Guanfacine	Yes	3	
TIMOPTIC Ophth Soln 0.25%	Timolol	Yes	3	
TENEX Tab 2 MG	Guanfacine	Yes	3	
TIMOPTIC Ophth Soln 0.5%	Timolol	Yes	3	
TENORETIC Tab 100-25 MG	Atenolol and Chlorthalidone	Yes	3	
TENORETIC Tab 50-25 MG	Atenolol and Chlorthalidone	Yes	3	
TENORMIN Inj 5 MG/10ML	Atenolol	No	3	
TENORMIN Tab 100 MG	Atenolol	Yes	3	
TENORMIN Tab 25 MG	Atenolol	Yes	3	
TOBEX Ophth Soln 0.3%	Tobramycin	Yes	3	
TOFRANIL Tab 10 MG	Imipramine	Yes	3	
TOFRANIL Tab 25 MG	Imipramine	Yes	3	
TOFRANIL Tab 50 MG	Imipramine	Yes	3	
TOFRANIL-PM CAP 100MG	IMIPRAMINE PAMOATE	Yes	3	
TOFRANIL-PM CAP 125 MG	IMIPRAMINE PAMOATE	Yes	3	
TOFRANIL-PM CAP 150MG	IMIPRAMINE PAMOATE	Yes	3	
TOFRANIL-PM CAP 75MG	IMIPRAMINE PAMOATE	Yes	3	
TENORMIN Tab 50 MG	Atenolol	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
TERAZOL 3 Vaginal Cream 0.8%	Terconazole	Yes	3	
TOPAMAX TAB 100MG	Topiramate	Yes	3	
TOPAMAX TAB 200MG	Topiramate	Yes	3	
TOPAMAX TAB 25MG	Topiramate	Yes	3	
TOPAMAX TAB 50MG	Topiramate	Yes	3	
TERAZOL 3 Vaginal Suppos 80 MG	Terconazole	Yes	3	
TERAZOL 7 Vaginal Cream 0.4%	Terconazole	Yes	3	
Tev-tropin INJ 5 MG	Somatropin	No	4	
Tev-tropin INJ 5 MG	Somatropin	No	4	
THALITONE TAB 15 MG	Chlorthalidone	Yes	3	
THEO-24 CAP SR 24HR 100 MG	Theophylline	Yes	3	
THEO-24 CAP SR 24HR 200 MG	Theophylline	Yes	3	
THEO-24 CAP SR 24HR 300 MG	Theophylline	Yes	3	
THEOCHRON TAB SR 12HR 100 MG	Theophylline	Yes	3	
THEOLAIR TAB 125MG	Theophylline	Yes	3	
THERMAZENE Cream 1%	Silver Sulfadiazine	Yes	3	
THORAZINE Inj 25 MG/ML	Chlorpromazine	Yes	3	
THORAZINE SUP 100MG	Chlorpromazine	No	3	
THORAZINE Tab 200 MG	Chlorpromazine	Yes	3	
THYROLAR-1 TAB 60MG	Liotrix	No	3	
THYROLAR-1/2 TAB 30MG	Liotrix	No	3	
THYROLAR-1/4 TAB 15MG	Liotrix	No	3	
THYROLAR-2 TAB 120MG	Liotrix	No	3	
THYROLAR-3 TAB 180MG	Liotrix	No	3	
TIAZAC EXTENDED RELEASE BEADS CAP SR 24HR 120 MG	Diltiazem	Yes	3	
TRANXENE-SD Tab SR 24HR 11.25 MG	Clorazepate	Yes	3	
TRANXENE-SD Tab SR 24HR 22.5 MG	Clorazepate	Yes	3	
TIAZAC EXTENDED RELEASE BEADS CAP SR 24HR 180 MG	Diltiazem	Yes	3	
TIAZAC EXTENDED RELEASE BEADS CAP SR 24HR 240 MG	Diltiazem	Yes	3	
TIAZAC EXTENDED RELEASE BEADS CAP SR 24HR 300 MG	Diltiazem	Yes	3	
TIAZAC EXTENDED RELEASE BEADS CAP SR 24HR 360 MG	Diltiazem	Yes	3	
TIAZAC EXTENDED RELEASE BEADS CAP SR 24HR 420 MG	Diltiazem	Yes	3	
TICLID TAB 250MG	Ticlopidine	Yes	3	
TIGAN CAP 250MG	Trimethobenzamide	Yes	3	
TRIAZ GEL 3%	Benzoyl Peroxide	Yes	3	
TRIAZ GEL 6%	Benzoyl Peroxide	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
TRIAZ GEL 9%	Benzoyl Peroxide	Yes	3	
TRIAZ CLEANSER Lotion 3%	Benzoyl Peroxide	Yes	3	
TRIAZ CLEANSER Lotion 6%	Benzoyl Peroxide	Yes	3	
TRIAZ CLEANSER Lotion 9%	Benzoyl Peroxide	Yes	3	
TRIAZ Pad 3%	Benzoyl Peroxide	Yes	3	
TRIAZ Pad 6%	Benzoyl Peroxide	Yes	3	
TRIAZ Pad 9%	Benzoyl Peroxide	Yes	3	
Tricor Tab 145MG	Fenofibrate	No	3	
Tricor Tab 160MG	Fenofibrate	Yes	3	
Tricor Tab 48MG	Fenofibrate	No	3	
Tricor Tab 54MG	Fenofibrate	Yes	3	
TRIDERM Cream 0.1%	Triamcinolone	Yes	3	
TRIDERM Ointment 0.1%	Triamcinolone	Yes	3	
TIGAN CAP 300 MG	Trimethobenzamide	Yes	3	
TIGAN INJ 100 MG/ML	Trimethobenzamide	Yes	3	
TILIA FE	NORETHINDRONE AC-ETHINYL ESTRAD-FE	Yes	1	
TRILEPTAL SUS 300MG/5M	Oxcarbazepine	No	3	
TRILEPTAL TAB 150MG	Oxcarbazepine	Yes	3	
TRILEPTAL TAB 300MG	Oxcarbazepine	Yes	3	
TRILEPTAL TAB 600MG	Oxcarbazepine	Yes	3	
TRI-LEVLEN	LEVONORGESTREL-ETH ESTRA	Yes	3	
TIMOPTIC Ophth Soln 0.25%	Timolol	Yes	3	
TIMOPTIC Ophth Soln 0.5%	Timolol	Yes	3	
TRI-LUMA CRE	Fluocinolone, Hydroquinone, and Tretinoin	No	3	
TIMOPTIC-XE SOL 0.25% OP	Timolol	Yes	3	
TIMOPTIC-XE SOL 0.5% OP	Timolol	Yes	3	
TobraDex Oint Op	Tobramycin and Dexamethasone	No	3	
TobraDex Sus Op	Tobramycin and Dexamethasone	No	3	
TOBREX Ophth Ointment 0.3%	Tobramycin	No	3	
TOLECTIN DS Cap 400 MG	Tolmetin	Yes	3	
TRINORINYL Tab 0.5-35/1-35/0.5-35 MG-MCG	Ethinyl Estradiol and Norethindrone	Yes	3	
TOLECTIN Tab 600 MG	Tolmetin	Yes	3	
TRIPHASIL 28	LEVONORGESTREL-ETH ESTRA	Yes	3	
TOPICORT Cream 0.05%	Desoximetasone	Yes	3	
TOPICORT Cream 0.25%	Desoximetasone	Yes	3	
TOPICORT Gel 0.05%	Desoximetasone	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
TOPICORT Oint 0.25%	Desoximetasone	Yes	3	
TOPROL XL Tab SR 24HR 100 MG	Metoprolol XL	Yes	3	
TOPROL XL Tab SR 24HR 200 MG	Metoprolol XL	Yes	3	
TOPROL XL Tab SR 24HR 25 MG	Metoprolol XL	Yes	3	
TOPROL XL Tab SR 24HR 50 MG	Metoprolol XL	Yes	3	
TORADOL IM Inj 30 MG/ML	Ketorolac	Yes	3	
TUSSIONEX SUS EXT-REL	Hydrocodone and Chlorpheniramine	No	3	
TORADOL INJ 15 MG/ML	Ketorolac	Yes	3	
TORADOL INJ 30 MG/ML	Ketorolac	Yes	3	
TORADOL ORAL Tab 10 MG	Ketorolac	Yes	3	
TOURO DM Tab SR 12HR 30-575 MG	Guaifenesin and Dextromethorphan	Yes	3	
TOURO LA Tab SR 12HR 120-525 MG	Guaifenesin and Pseudoephedrine	Yes	3	
TOVIAZ 4 MG	fesoterodine fumarate	No	2	
TOVIAZ 8 MG	fesoterodine fumarate	No	2	
TYLENOL/CODEINE #3 Tab 300-30 MG	Acetaminophen and Codeine	Yes	3	
TYLENOL/CODEINE #4 Tab 300-30 MG	Acetaminophen and Codeine	Yes	3	
TYLOX Cap 5-500 MG	Oxycodone and Acetaminophen	Yes	3	
TYSABRI INJ	Natalizumab	No	5	
TRANDATE Tab 100 MG	Labetalol	Yes	3	
TRANDATE Tab 200 MG	Labetalol	Yes	3	
TRANDATE Tab 300 MG	Labetalol	Yes	3	
ULTRACET Tab 37.5-325 MG	Acetaminophen and Tramadol	Yes	3	
ULTRAM ER Tab ER 24HR 300 MG	Tramadol	No	3	
ULTRAM ER TAB ER 24HR 100 MG	Tramadol	Yes	3	
ULTRAM ER TAB ER 24HR 200 MG	Tramadol	Yes	3	
ULTRAM Tab 50 MG	Tramadol	Yes	3	
TRANXENE T Tab 15 MG	Clorazepate	Yes	3	
TRANXENE T Tab 3.75 MG	Clorazepate	Yes	3	
TRANXENE T Tab 7.5 MG	Clorazepate	Yes	3	
Travatan Sol 0.004%	Travoprost	No	2	
Travatan Z Sol 0.004%	Travoprost	No	2	
Trelstar Dep Inj 3.75MG	Triptorelin	No	4	
Trelstar LA Inj 11.25MG	Triptorelin	No	4	
TRENTAL Tab CR 400 MG	Pentoxifylline	Yes	3	
Trexall Tab 10MG	Methotrexate	Yes	3	PA
Trexall Tab 15MG	Methotrexate	Yes	3	PA

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
TRIDESILON Cream 0.05%	Desonide	Yes	3	
TRIDESILON Ointment 0.05%	Desonide	Yes	3	
TRI-LEGEST FE	NORETHINDRONE AC-ETHINYL ESTRAD-FE	Yes	1	
TRILIPIX 135MG	CHOLINE FENOFIBRATE	No	2	
TRILIPIX 45MG	CHOLINE FENOFIBRATE	No	2	
TRILYTE Soln 420 GM	Polyethylene Glycol-Electrolyte Solution	Yes	3	
TRIMOX Cap 250 MG	Amoxicillin	Yes	3	
TRIMOX Cap 500 MG	Amoxicillin	Yes	3	
TRIMOX For Susp 125 MG/5ML	Amoxicillin	Yes	3	
TRIMOX For Susp 250 MG/5ML	Amoxicillin	Yes	3	
TRINESSA Tab 0.18-35/0.215-35/0.25-35 MG-MCG	Ethinyl Estradiol and Norgestimate	Yes	1	
TRIOSTAT INJ 10MCG/ML	Liothyronine	No	5	
TRI-PREVIFEM Tab 0.18-35/0.215-35/0.25-35 MG-MCG	Ethinyl Estradiol and Norgestimate	Yes	1	
TRI-SPRINTEC Tab 0.18-35/0.215-35/0.25-35 MG-MCG	Ethinyl Estradiol and Norgestimate	Yes	1	
TRIVORA-28	LEVONORGESTREL-ETH ESTRA	Yes	1	
TRIZIVIR TAB	Abacavir Sulfate-Lamivudine-Zidovudine	No	2	
URECHOLINE Tab 10 MG	Bethanechol	Yes	3	
URECHOLINE Tab 25 MG	Bethanechol	Yes	3	
URECHOLINE Tab 5 MG	Bethanechol	Yes	3	
URECHOLINE Tab 50 MG	Bethanechol	Yes	3	
UREX Tab 1 GM	Methenamine	Yes	3	
TRUSOPT SOL 2% OP	Dorzolamide	No	3	
UROCIT-K 10 TAB	Potassium Citrate	No	3	
TRUVADA TAB	Emtricitabine-Tenofovir Disoproxil Fumarate	No	2	
TUSSEND TAB	Pseudoephedrine, Hydrocodone, and Chlorpheniramine	No	3	
URSO 250 Tab 250 MG	Ursodiol	No	3	
URSO 250 Tab 500 MG	Ursodiol	No	3	
TUSSEND Soln 30-2.5-100 MG/5ML	Pseudoephedrine, Hydrocodone, and Chlorpheniramine	No	3	
TUSSEND Syr 30-2-2.5 MG/5ML	Pseudoephedrine, Hydrocodone, and Chlorpheniramine	Yes	3	
VALIUM Inj 5 MG/ML	Diazepam	Yes	3	
VALIUM Tab 10 MG	Diazepam	Yes	3	
VALIUM Tab 2 MG	Diazepam	Yes	3	
VALIUM Tab 5 MG	Diazepam	Yes	3	
TUSSI-ORGANIDIN DM NR Liquid 10-100 MG/5ML	Guaifenesin and Dextromethorphan	Yes	3	
TUSSI-ORGANIDIN DM NR Liquid 10-300 MG/5ML	Guaifenesin and Dextromethorphan	Yes	3	
TUSSI-ORGANIDIN NR Liquid 300-10 MG/5ML	Guaifenesin and Codeine	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
TUSSI-ORGANIDIN NR Soln 100-10 MG/5ML	Guaifenesin and Codeine	Yes	3	
TUSSI-ORGANIDIN-S NR LIQ	Guaifenesin and Codeine	Yes	3	
TWINJECT INJ 0.15MG	Epinephrine	No	5	
TWINJECT INJ 0.3MG	Epinephrine	No	5	
TYZEKA TAB 600MG	Telbivudine	No	2	
TYZINE Nasal Soln 0.05%	Tetrahydrozoline	No	3	
TYZINE Nasal Soln 0.1%	Tetrahydrozoline	No	3	
ULTRASE DR Particles Cap 20000-4500-25000 Unit	Pancrelipase	Yes	3	
ULTRASE MT 12 DR Particles Cap 39000-12000-39000 Unit	Pancrelipase	Yes	3	
ULTRASE MT 12 DR Particles Cap 58500-18000-58500 Unit	Pancrelipase	Yes	3	
ULTRASE MT 12 DR Particles Cap 65000-20000-65000 Unit	Pancrelipase	Yes	3	
Ultravate Cream 0.05%	Halobetasol	Yes	3	
Ultravate Oint 0.05%	Halobetasol	Yes	3	
Ultravate PAC Oint 0.05%	Halobetasol and mmonium Lactate	No	3	
UNI-COF EXP Syrup 15-7.5-100 MG/5ML	Pseudoephedrine, Dihydrocodeine, GG	Yes	3	
UNI-COF Syrup 15-2-7.5 MG/5ML	Pseudoephedrine, Dihydrocodeine, and Chlorpheniramine	Yes	3	
UNIPHYL Tab SR 24HR 400 MG	Theophylline	Yes	3	
UNIPHYL Tab SR 24HR 600 MG	Theophylline	Yes	3	
UNIRETIC TAB 15-12.5	Moexipril and Hydrochlorothiazide	Yes	3	
VERAMYST SPR 27.5MCG		No	3	
UNIRETIC TAB 15-25MG	Moexipril and Hydrochlorothiazide	Yes	3	
UNIRETIC TAB 7.5-12.5	Moexipril and Hydrochlorothiazide	Yes	3	
UNITHROID TAB 112 MCG	Levothyroxine	Yes	3	
UNITHROID TAB 125 MCG	Levothyroxine	Yes	3	
UNITHROID TAB 137 MCG	Levothyroxine	Yes	3	
UNITHROID TAB 150 MCG	Levothyroxine	Yes	3	
UNITHROID TAB 175 MCG	Levothyroxine	Yes	3	
VFEND TAB 200MG	Voriconazole	No	3	
UNITHROID TAB 200 MCG	Levothyroxine	Yes	3	
UNITHROID TAB 300 MCG	Levothyroxine	Yes	3	
UNITHROID TAB 50 MCG	Levothyroxine	Yes	3	
UNITHROID TAB 75 MCG	Levothyroxine	Yes	3	
UNITHROID TAB 88 MCG	Levothyroxine	Yes	3	
VIBRAMYCIN Cap 100 MG	Doxycycline	Yes	3	
VIBRAMYCIN Cap 50 MG	Doxycycline	Yes	3	
VIBRATAB Tab 100 MG	Doxycycline	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
VICODIN HP Tab 10-660 MG	Hydrocodone and Acetaminophen	Yes	3	
VICODIN Tab 5-500 MG	Hydrocodone and Acetaminophen	Yes	3	
VICODIN Tab 7.5-750 MG	Hydrocodone and Acetaminophen	Yes	3	
VICOPROFEN Tab 7.5-200 MG	Hydrocodone and Ibuprofen	Yes	3	
UNIVASC Tab 15 MG	Moexipril	Yes	3	
UNIVASC Tab 7.5 MG	Moexipril	Yes	3	
URISPAS Tab 100 MG	Flavoxate	Yes	3	
URO-KP-NEUTRAL Tab 49.25-250-250 MG	Potassium Phosphate and Sodium Phosphate	Yes	3	
Uroxatral Tab 10MG	Alfuzosin	No	3	
Vagifem Tab 25MCG	Estradiol	No	2	
Valcyte Tab 450MG	Valganciclovir	No	2	PA
VALTREX TAB 1000 MG	Valacyclovir	Yes	3	
VALTREX TAB 500MG	Valacyclovir	Yes	3	
VANOS Cream 0.1%	Fluocinonide	Yes	3	
VASERETIC Tab 10-25 MG	Enalapril and Hydrochlorothiazide	Yes	3	
VASERETIC Tab 5-12.5 MG	Enalapril and Hydrochlorothiazide	Yes	3	
VASOCIDIN Ophth Soln 10-0.23(0.25)%	Sulfacetamide and Prednisolone	Yes	3	
VASOTEC Tab 10 MG	Enalapril	Yes	3	
VASOTEC Tab 2.5 MG	Enalapril	Yes	3	
VASOTEC Tab 20 MG	Enalapril	Yes	3	
VASOTEC Tab 5 MG	Enalapril	Yes	3	
VEETIDS Soln 125 MG/5ML	Penicillin V Potassium	Yes	3	
VEETIDS Soln 250 MG/5ML	Penicillin V Potassium	Yes	3	
VEETIDS Tab 250 MG	Penicillin V Potassium	Yes	3	
VEETIDS Tab 500 MG	Penicillin V Potassium	Yes	3	
VELIVET Tab 0.1-0.025/0.125-0.025/0.15-0.025MG-MG	Ethinyl Estradiol and Desogestrel	Yes	1	
VENTOLIN HFA AER	Albuterol	No	3	
VENTOLIN HFA AER	Albuterol	No	3	
VENTOLIN HFA AER	Albuterol	No	3	
VENTOLIN HFA AER	Albuterol	No	3	
VENTOLIN HFA AER	Albuterol	No	3	
VIVACTIL TAB 10MG	Protriptyline	Yes	3	
VIVACTIL TAB 5MG	Protriptyline	Yes	3	
VENTOLIN HFA AER	Albuterol	No	3	
VENTOLIN HFA AER	Albuterol	No	3	
VERELAN CAP 180MG	Verapamil	No	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
VERELAN PM CAP 100MG	Verapamil	Yes	3	
VERELAN PM CAP 200MG	Verapamil	Yes	3	
VERELAN PM CAP 300MG	Verapamil	Yes	3	
VESICARE TAB 10MG	Solifenacin	No	3	
VESICARE TAB 5MG	Solifenacin	No	3	
VEXOL SUS 1% OP	Rimexolone	No	3	
Viagra Tab 100MG	Sildenafil	No	2	QL / G
Viagra Tab 25MG	Sildenafil	No	2	QL / G
Viagra Tab 50MG	Sildenafil	No	2	QL / G
VIBRAMYCIN Syrup 50 MG/5ML	Doxycycline	No	3	
VOLTAREN-XR Tab SR 24HR 100 MG	Diclofenac	Yes	3	
VIBRAMYCIN Susp 25 MG/5ML	Doxycycline	Yes	3	
Videx Buffer Chw 100MG	Didanosine	No	2	
Videx Buffer Chw 150MG	Didanosine	No	2	
Videx Buffer Chw 200MG	Didanosine	No	2	
Videx Buffer Chw 25 MG	Didanosine	No	2	
Videx Buffer Chw 50 MG	Didanosine	No	2	
Videx EC Cap 125MG	Didanosine	no	2	
Videx EC Cap 200MG	Didanosine	No	2	
Videx EC Cap 400MG	Didanosine	No	2	
WELCHOL TAB 625MG	Colesevelam	No	3	
WELLBUTRIN Tab 100 MG	Bupropion	Yes	3	
WELLBUTRIN Tab 75 MG	Bupropion	Yes	3	
WELLBUTRIN Tab SR 12HR 100 MG	Bupropion	Yes	3	
WELLBUTRIN Tab SR 12HR 150 MG	Bupropion	Yes	3	
WELLBUTRIN Tab SR 12HR 200 MG	Bupropion	Yes	3	
WELLBUTRIN XL Tab SR 24HR 150 MG	Bupropion	Yes	3	
WELLBUTRIN XL Tab SR 24HR 300 MG	Bupropion	Yes	3	
Videx EX Cap 250MG	Didanosine	No	2	
Videx Sol 2GM	Didanosine	No	2	
Videx Sol 4GM	Didanosine	No	2	
Vigamox Dro 0.5%	Moxifloxacin	No	2	
VIKASE Powd 70000-16800-70000 Unit	Pancrelipase	No	3	
XANAX Tab 0.25 MG	Alprazolam	Yes	3	
XANAX Tab 0.5 MG	Alprazolam	Yes	3	
XANAX Tab 1 MG	Alprazolam	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
XANAX Tab 2 MG	Alprazolam	Yes	3	
XANAX XR Tab SR 24HR 0.5 MG	Alprazolam	Yes	3	
XANAX XR Tab SR 24HR 1 MG	Alprazolam	Yes	3	
XANAX XR Tab SR 24HR 2 MG	Alprazolam	Yes	3	
XANAX XR Tab SR 24HR 3 MG	Alprazolam	Yes	3	
VIOKASE TAB 30000-8000-30000 Unit	Pancrelipase	Yes	3	
VIOKASE TAB 60000-16000-60000 Unit	Pancrelipase	No	3	
VIRACEPT POW 50MG/GM	Nelfinavir	No	2	
Xibrom Ophth Soln	Bromfenac Sodium	No	3	
VIRACEPT TAB 250MG	Nelfinavir	No	2	
Xopenex Neb 0.31MG	Levalbuterol	No	3	ST
Xopenex Neb 0.63MG	Levalbuterol	No	3	ST
Xopenex Neb 1.25/3ML	Levalbuterol	No	3	ST
Xyrem Sol 500MG/ML	Sodium Oxybate	No	3	PA
VIRACEPT TAB 625MG	Nelfinavir	No	2	
VIRAMUNE SUS 50MG/5ML	Nevirapine	No	2	
YASMIN 28 TAB 3-0.03MG	Ethinyl Estradiol and Drospirenone	Yes	3	
VIRAMUNE TAB 200MG	Nevirapine	No	2	
ZANAFLEX Cap 2 MG	Tizanidine	No	3	
ZANAFLEX Cap 4 MG	Tizanidine	No	3	
ZANAFLEX Cap 6 MG	Tizanidine	No	3	
ZANAFLEX Tab 2 MG	Tizanidine	Yes	3	
ZANAFLEX Tab 4 MG	Tizanidine	Yes	3	
ZANTAC Effer Granules Packet 150 MG	Ranitidine	No	3	
ZANTAC TAB 25MG EF	Ranitidine	No	3	
VIRAZOLE For Inhal Soln 6 GM	Ribavirin	No	2	
VIREAD TAB 300MG	Tenofovir	No	2	
VIROPTIC Ophth Soln 1%	Trifluridine	Yes	3	
VISICOL Tabs 1.102-0.398 GM(1.5GM Na Phos)	Sodium Phosphates	No	3	
VISTARIL Cap 25 MG	Hydroxyzine	Yes	3	
VISTARIL Cap 50 MG	Hydroxyzine	Yes	3	
VISTARIL Susp 25 MG/5ML	Hydroxyzine	No	3	
VIVELLE DIS 0.025MG	Estradiol	No	3	
VIVELLE DIS 0.05MG	Estradiol	No	3	
VIVELLE-DOT DIS 0.025MG	Estradiol	No	3	
VIVELLE-DOT DIS 0.0375MG	Estradiol	No	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
VIVELLE-DOT DIS 0.05MG	Estradiol	No	3	
VIVELLE-DOT DIS 0.075MG	Estradiol	No	3	
VIVELLE-DOT DIS 0.1MG	Estradiol	No	3	
ZEBETA Tab 10 MG	Bisoprolol	Yes	3	
ZEBETA Tab 5 MG	Bisoprolol	Yes	3	
VOLMAX TAB 4MG	Albuterol	Yes	3	
ZELAPAR TAB 1.25MG	Selegiline	No	3	
VOLMAX TAB 8MG	Albuterol	No	3	
VOLTAREN TAB 50MG	Diclofenac	Yes	3	
VOLTAREN Tab Delayed Release 75 MG	Diclofenac	Yes	3	
VOLTAREN Ophth Soln 0.1%	Diclofenac	Yes	3	
VOLTAREN Sodium Gel 1%	Diclofenac	No	3	
VOSOL Otic Soln 2%	Acetic Acid, Propylene Glycol Diacetate, and Hydrocortisone	Yes	3	
VOSOL-HC Otic Soln 1-2%	Acetic Acid, Propylene Glycol Diacetate, and Hydrocortisone	Yes	3	
VOSPIRE ER TAB 4MG	Albuterol	No	3	
VOSPIRE ER TAB 8MG	Albuterol	No	3	
VYTON Cream 1%	Iodoquinol and Hydrocortisone	Yes	3	
Vytorin Tab 10-10MG	Ezetimibe and Simvastatin	No	2	
Vytorin Tab 10-20MG	Ezetimibe and Simvastatin	No	2	
Vytorin Tab 10-40MG	Ezetimibe and Simvastatin	No	2	
Vytorin Tab 10-80MG	Ezetimibe and Simvastatin	No	2	
WESTHROID 180 MG (3 Grain)	Thyroid	Yes	3	
WESTHROID Tab 130 MG	Thyroid	Yes	3	
WESTHROID Tab 32.5 MG	Thyroid	Yes	3	
WESTHROID Tab 65 MG	Thyroid	Yes	3	
XALATAN SOL 0.005%	Latanoprost	No	2	
Xeloda Tab 150MG	Capecitabine	No	3	PA
Xeloda Tab 500MG	Capecitabine	No	3	PA
Xenaderm Oint	Trypsin, Balsam Peru, and Castor Oil	Yes	3	
Xopenex HFA Aer	Levalbuterol	No	3	ST
XYZAL SOLN	Levocetirizine Dihydrochloride	No	2	
XYZAL TAB 5MG	Levocetirizine Dihydrochloride	No	2	
Yaz Tab 3-0.02 MG	Drospirenone-Ethinyl Estradiol	Yes	2	
ZANTAC Inj 25 MG/ML	Ranitidine	Yes	3	
ZITHROMAX Powd Pack for Susp 1 GM	Azithromycin	Yes	3	
ZITHROMAX Susp 100 MG/5ML	Azithromycin	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
ZITHROMAX Susp 200 MG/5ML	Azithromycin	Yes	3	
ZITHROMAX Tab 250 MG	Azithromycin	Yes	3	
ZITHROMAX Tab 500 MG	Azithromycin	Yes	3	
ZITHROMAX Tab 600 MG	Azithromycin	Yes	3	
ZOCOR Tab 10 MG	Simvastatin	Yes	3	
ZOCOR Tab 20 MG	Simvastatin	Yes	3	
ZOCOR Tab 40 MG	Simvastatin	Yes	3	
ZOCOR Tab 5 MG	Simvastatin	Yes	3	
ZOCOR Tab 80 MG	Simvastatin	Yes	3	
ZOFRAN ODT TAB 4MG	Ondansetron	Yes	3	
ZOFRAN ODT TAB 8MG	Ondansetron	Yes	3	
ZANTAC Syrup 15 MG/ML (75 MG/5ML)	Ranitidine	Yes	3	
ZANTAC Tab 150 MG	Ranitidine	Yes	3	
ZANTAC Tab 300 MG	Ranitidine	Yes	3	
ZOLOFT Oral Conc 20 MG/ML	Sertraline	Yes	3	
ZOLOFT Tab 100 MG	Sertraline	Yes	3	
ZOLOFT Tab 25 MG	Sertraline	Yes	3	
ZOLOFT Tab 50 MG	Sertraline	Yes	3	
Zomig Spr 5MG	Zolmitriptan	No	3	QL
Zomig Tab 2.5MG	Zolmitriptan	No	3	QL
Zomig Tab 5MG	Zolmitriptan	No	3	QL
Zomig ZMT Tab 2.5 MG	Zolmitriptan	No	3	QL
Zomig ZMT Tab 5MG	Zolmitriptan	No	3	QL
ZARONTIN Cap 250 MG	Ethosuximide	Yes	3	
ZARONTIN Cap 250 MG	Ethosuximide	Yes	3	
ZARONTIN Soln 250 MG/5ML	Metolazone	Yes	3	
ZONEGRAN Cap 100 MG	Zonisamide	Yes	3	
ZONEGRAN Cap 25 MG	Zonisamide	Yes	3	
ZONEGRAN Cap 50 MG	Zonisamide	Yes	3	
Zorbtive Inj 8.8MG	Somatropin	No	5	PA
Z-COF HC Liqd 8-2.5-3.25 MG/5ML	Phenyleph, Chlorpheniramine w/ Hydrocodone	Yes	3	
Z-COF HC Liqd 8-2.5-3.5 MG/5ML	Phenyleph, Chlorpheniramine w/ Hydrocodone	Yes	3	
Z-COF HC Syrup 10-2.5-3.5 MG/5ML	Phenyleph, Chlorpheniramine w/ Hydrocodone	No	3	
Z-COF HXC Liqd Liquid 7.5-200 MG/5ML	Hydrocodone and Guaifenesin	Yes	3	
Z-COF LA Tab SR 12HR 30-650 MG	Guaifenesin and Dextromethorphan	Yes	3	
Z-COF LAX Tab SR 12HR 30-835 MG	Guaifenesin and Dextromethorphan	Yes	3	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
ZEBUTAL Cap 50-500-40 MG	Butalbital, Acetaminophen, and Caffeine	Yes	3	
ZEMPLAR 1 MCG	PARICALCITOL	No	2	
ZEMPLAR 2 MCG	PARICALCITOL	No	2	
Zyban Tab 150MG SR	Bupropion	Yes	3	QL
ZYDONE Tab 10-400 MG	Hydrocodone and Acetaminophen	No	3	
ZYDONE Tab 5-400 MG	Hydrocodone and Acetaminophen	No	3	
ZYDONE Tab 7.5-400 MG	Hydrocodone and Acetaminophen	No	3	
ZEMPLAR 4 MCG	PARICALCITOL	No	2	
ZENAPAX INJ 25MG/5ML	Daclizumab	No	5	
ZEPHREX LA Tab SR 12HR 120-600 MG	Guaifenesin and Pseudoephedrine	Yes	3	
ZEPHREX Tab 60-400 MG	Guaifenesin and Pseudoephedrine	Yes	3	
Zerit Cap 15MG	Stavudine	No	2	
Zerit Cap 20MG	Stavudine	No	2	
Zerit Cap 30MG	Stavudine	No	2	
Zerit Cap 40MG	Stavudine	No	2	
Zerit Sol 1MG/ML	Stavudine	No	2	
ZESTORETIC Tab 20-25 MG	Lisinopril and Hydrochlorothiazide	Yes	3	
ZESTORETIC Tab 10-12.5 MG	Lisinopril and Hydrochlorothiazide	Yes	3	
ZESTORETIC Tab 20-12.5 MG	Lisinopril and Hydrochlorothiazide	Yes	3	
ZESTRIL Tab 10 MG	Lisinopril	Yes	3	
ZYRTEC Chew Tab 10 MG	Cetirizine	Yes	3	
ZYRTEC Chew Tab 5 MG	Cetirizine	Yes	3	
ZYRTEC Syrup 1 MG/ML (5 MG/5ML)	Cetirizine	Yes	3	
ZYRTEC Tab 10 MG	Cetirizine	Yes	3	
ZYRTEC Tab 5 MG	Cetirizine	Yes	3	
ZYRTEC-D TAB 5-120MG	Cetirizine and Pseudoephedrine	No	3	
ZESTRIL Tab 2.5 MG	Lisinopril	Yes	3	
ZESTRIL Tab 20 MG	Lisinopril	Yes	3	
ZESTRIL Tab 30 MG	Lisinopril	Yes	3	
ZESTRIL Tab 40 MG	Lisinopril	Yes	3	
ZESTRIL Tab 5 MG	Lisinopril	Yes	3	
Zetia Tab 10MG	Ezetimibe	No	2	
ZIAC Tab 10-6.25 MG	Bisoprolol and Hydrochlorothiazide	Yes	3	
ZIAC Tab 2.5-6.25 MG	Bisoprolol and Hydrochlorothiazide	Yes	3	
ZIAC Tab 5-6.25 MG	Bisoprolol and Hydrochlorothiazide	Yes	3	
ZIAGEN SOL 20MG/ML	Abacavir Sulfate	No	2	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
ZIAGEN TAB 300MG	Abacavir Sulfate	No	2	
ZINCATE Cap 220 MG	Zinc Sulfate	Yes	3	
ZMAX EXTENDED RELEASE ORAL SUSP 2 GM	azithromycin	No	3	
ZOFRAN ORAL SOLN 4 MG/5ML	Ondansetron	Yes	3	QL
ZOFRAN TAB 4MG	Ondansetron	Yes	3	QL
ZOFRAN TAB 8MG	Ondansetron	Yes	3	QL
ZONALON Cream 5%	Doxepin	No	3	
ZONE-A FORTE Lotion 1-2.5%	Pramoxine and Hydrocortisone	No	3	
ZONE-A Lotion 1-1%	Pramoxine and Hydrocortisone	No	3	
ZORPRIN Tab CR 800 MG	Aspirin	Yes	3	
ZOVIA 1/35	ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL	Yes	1	
ZOVIA 1/50	ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL	No	1	
ZOVIRAX Cap 200 MG	Acyclovir	Yes	3	
ZOVIRAX Cap 800 MG	Acyclovir	Yes	3	
ZOVIRAX Cream 5%	Acyclovir	No	2	
ZOVIRAX Oint 5%	Acyclovir	No	2	
ZOVIRAX Susp 200 MG/5ML	Acyclovir	Yes	3	
ZOVIRAX Tab 400 MG	Acyclovir	Yes	3	
ZYLOPRIM Tab 100 MG	Allopurinol	Yes	3	
ZYLOPRIM Tab 300 MG	Allopurinol	Yes	3	
ZYMAR DRO 0.3	Gatifloxacin	No	2	
ZYMAXID SOLUTION 0.5 %	Gatifloxacin	No	2	
ZYPREXA TAB 10MG	Olanzapine	No	3	
ZYPREXA TAB 15MG	Olanzapine	No	3	
ZYPREXA TAB 2.5MG	Olanzapine	No	3	
ZYPREXA TAB 20MG	Olanzapine	No	3	
ZYPREXA TAB 5MG	Olanzapine	No	3	
ZYPREXA TAB 7.5MG	Olanzapine	No	3	
ZYPREXA ZYDI TAB 10MG	Olanzapine	No	3	
ZYPREXA ZYDI TAB 15MG	Olanzapine	No	3	
ZYPREXA ZYDI TAB 20MG	Olanzapine	No	3	
ZYPREXA ZYDI TAB 5MG	Olanzapine	No	3	
	Acebutolol	Yes	1	
	Acetaminophen and Codeine	Yes	1	
	Acetaminophen and Tramadol	Yes	1	
	Acetaminophen, Isometheptene, and Dichloralphenazone	Yes	1	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
	Acetazolamide	Yes: Injection, tablet	1	
	Acetic Acid, Propylene Glycol Diacetate, and Hydrocortisone	Yes	1	
	Acyclovir	Yes: Excludes cream, ointment	1	
	Albuterol	Yes: Excludes extended	1	
	Alclometasone	Yes	1	
	Alendronate	Yes	1	
	Allopurinol	Yes	1	
	Alprazolam	Yes	1	
	Amantadine	Yes	1	
	Amincinonide	Yes	1	
	Aminophylline	Yes	1	
	Amiodarone	Yes	1	
	Amitriptyline	Yes	1	
	Amitriptyline and Chlordiazepoxide	Yes	1	
	Amitriptyline and Perphenazine	Yes	1	
	Amlodipine	Yes	1	
	Amlodipine and Benazepril	Yes	1	
	Amoxapine	Yes	1	
	Amoxicillin	Yes: Excludes drops, tablet for	1	
	Amoxicillin and Clavulanate Potassium	Yes: Excludes extended	1	
	Ampicillin	Yes	1	
	Apraclonidine	Yes	1	
	Aspirin	Yes: Excludes gum	1	
	Atenolol	Yes: Tablet	1	
	Atenolol and Chlorthalidone	Yes	1	
	Atropine	Yes: Excludes tablet	1	
	Azathioprine	Yes	1	
	Azithromycin	Yes: Injection, tablet	1	
	Bacitracin and Polymyxin B	Yes	1	
	Bacitracin, Neomycin, and Polymyxin B	Yes	1	
	Bacitracin, Neomycin, Polymyxin B, and Hydrocortisone	Yes: Ophthalmic ointment	1	
	Baclofen	Yes: Tablets only	1	
	Balsalazide	Yes	1	
	Belladonna and Opium	Yes	1	
	Belladonna, Phenobarbital, and Ergotamine	Yes	1	
	Benazepril	Yes	1	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
	Benazepril and Hydrochlorothiazide	Yes	1	
	Benzocaine	Yes: Lozenge, otic drops	1	
	Benzonatate	Yes	1	
	Benzoyl Peroxide	Yes: Excludes cream, pads,	1	
	Benztropine	Yes: Tablet	1	
	Betamethasone and Clotrimazole	Yes	1	
	Betaxolol	Yes: Solution, tablet	1	
	Bethanechol	Yes	1	
	Bisoprolol	Yes	1	
	Bisoprolol and Hydrochlorothiazide	Yes	1	
	Brimonidine	Yes	1	
	Bromocriptine	Yes	1	
	Bumetanide	Yes	1	
	BuPROPion		1	
	BusPIRone	Yes	1	
	Butalbital, Acetaminophen, and Caffeine	Yes: Excludes elixir	1	
	Butalbital, Acetaminophen, Caffeine, and Codeine	Yes	1	
	Butalbital, Aspirin, and Caffeine	Yes	1	
	Butalbital, Aspirin, Caffeine, and Codeine	Yes	1	
	Butorphanol	Yes	1	
	Calcitriol	Yes	1	
	Calcium Glubionate	Yes	1	
	Calcium Lactate	Yes	1	
	Captopril	Yes	1	
	Captopril and Hydrochlorothiazide	Yes	1	
	Carbamazepine	Yes: Excludes capsule	1	
	Carbinoxamine and Pseudoephedrine	Yes	1	
	Carisoprodol	Yes	1	
	Carisoprodol and Aspirin	Yes	1	
	Carisoprodol, Aspirin, and Codeine	Yes	1	
	Carvedilol	Yes	1	
	Cefaclor	Yes: Excludes chewable tablet	1	
	Cefadroxil	Yes	1	
	Cefdinir	Yes	1	
	Cefprozil	Yes	1	
	Cefuroxime	Yes	1	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
	Cephalexin	Yes: Excludes tablet for oral	1	
	Cetirizine	Yes	1	
	Chloral Hydrate	Yes: Syrup	1	
	Chlordiazepoxide	Yes: Capsule	1	
	Chlorhexidine Gluconate	Yes: Oral liquid	1	
	Chlorothiazide	Yes: Tablet	1	
	Chlorpheniramine, Pseudoephedrine, and Codeine	Yes	1	
	Chlorpheniramine, Pseudoephedrine, and Dextromethorphan	Yes: Liquid	1	
	ChlorproMAZINE	Yes	1	
	Chlorthalidone	Yes	1	
	Cholestyramine Resin	Yes	1	
	Cilostazol	Yes	1	
	Cimetidine	Yes	1	
	Ciprofloxacin	Yes: Suspension,	1	
	Citalopram	Yes	1	
	Citric Acid, Sodium Citrate, and Potassium Citrate	Yes	1	
	Clarithromycin	Yes: Tablet	1	
	Clindamycin	Yes: Excludes foam, vaginal	1	
	Clobetasol	Yes: Excludes foam, lotion,	1	
	ClomiPHENE	Yes	1	
	ClomiPRAMINE	Yes	1	
	Clonazepam	Yes	1	
	Clonidine	Yes: Tablet	1	
	Clorazepate	Yes	1	
	Cloxacillin	Yes	1	
	Clozapine	Yes	1	
	Codeine	Yes	1	
	Colchicine and Probenecid	Yes	1	
	Colestipol	Yes	1	
	Cortisone	Yes	1	
	Cromolyn	Yes: Excludes aerosol, oral	1	
	Cyclobenzaprine	Yes	1	
	Cyclopentolate	Yes	1	
	CycloSPORINE	Yes	1	
	Cyproheptadine	Yes	1	
	Dantrolene	Yes: Capsule	1	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
	Demeclocycline	Yes	1	
	Desipramine	Yes	1	
	Desonide	Yes	1	
	Desoximetasone	Yes	1	
	Dexamethasone	Yes: Excludes ophthalmic	1	
	Dexbrompheniramine and Pseudoephedrine	Yes	1	
	Dextroamphetamine	Yes	1	
	Dextroamphetamine and Amphetamine	Yes: Tablet	1	
	Diazepam	Yes: Injection, tablet, solution	1	
	Diclofenac	Yes: Excludes gel	1	
	Dicloxacillin	Yes	1	
	Dicyclomine	Yes: Excludes syrup	1	
	Diflorasone	Yes	1	
	Diffunisal	Yes	1	
	Digoxin	Yes: Excludes capsule	1	
	Diltiazem	Yes	1	
	DiphenhydrAMINE	Yes: Excludes chewable tablet,	1	
	Diphenoxylate and Atropine	Yes	1	
	Dipivefrin	Yes	1	
	Dipyridamole	Yes	1	
	Disopyramide	Yes	1	
	Doxazosin	Yes: Excludes extended	1	
	Doxepin	Yes: Capsule, solution	1	
	Doxycycline	Yes: Excludes powder for oral	1	
	Drospirenone-Ethinyl Estradiol	Yes	1	
	Dyphylline	Yes: Elixir	1	
	Econazole	Yes	1	
	Enalapril	Yes	1	
	Enalapril and Hydrochlorothiazide	Yes	1	
	Epinephrine	Yes: Solution for injection	1	
	Ergoloid Mesylates	Yes	1	
	Erythromycin	Yes	1	
	Erythromycin and Benzoyl Peroxide	Yes	1	
	Erythromycin and Sulfisoxazole	Yes	1	
	Estazolam	Yes	1	
	Estradiol	Yes: Oral tablet, patch	1	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
	Estrogens (Esterified) and Methyltestosterone	Yes	1	
	Estropipate	Yes	1	
	Ethinyl Estradiol and Desogestrel	Yes	1	
	Ethinyl Estradiol and Norethindrone	Yes	1	
	Ethinyl Estradiol and Norgestimate	Yes	1	
	Ethinyl Estradiol and Norgestrel	Yes	1	
	Ethosuximide	Yes	1	
	Etodolac	Yes	1	
	Famciclovir	Yes	1	
	Famotidine	Yes: Injection, tablet	1	
	Felodipine	Yes	1	
	Fenofibrate	Yes: Micronized capsule and	1	
	Fentanyl	Yes: Excludes lozenge and	1	
	Fexofenadine	Yes	1	
	Finasteride	Yes	1	
	Flavoxate	Yes	1	
	Flecainide	Yes	1	
	Fluconazole	Yes	1	
	Fludrocortisone	Yes	1	
	Flunisolide	Yes: Nasal spray	1	
	Fluocinolone	Yes: Excludes ocular implant,	1	
	fluocinolone, Hydroquinone, and Tretinoin	Yes	1	
	Fluocinonide	Yes	1	
	Fluorometholone	Yes: Suspension (as base)	1	
	Fluoxetine	Yes: Excludes delayed release	1	
	Fluphenazine	Yes: Injection, tablet	1	
	Flurazepam	Yes	1	
	Flurbiprofen	Yes	1	
	Fluticasone	Yes: Cream, nasal spray,	1	
	Fluvoxamine	Yes	1	
	Fosinopril	Yes	1	
	Fosinopril and Hydrochlorothiazide	Yes	1	
	Furosemide	Yes	1	
	Gabapentin	Yes: Capsule, tablet	1	
	Gemfibrozil	Yes	1	
	Gentamicin	Yes	1	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
	Glimepiride	Yes	1	
	GlipiZIDE	Yes	1	
	Glipizide and Metformin	Yes	1	
	GlyBURIDE	Yes	1	
	Glyburide and Metformin	Yes	1	
	Glycopyrrolate	Yes: Injection	1	
	Granisetron	Yes	1	QL
	Griseofulvin	Yes: Suspension,	1	
	Guaifenesin and Dextromethorphan	Yes	1	
	Guaifenesin and Pseudoephedrine	Yes	1	
	Guanfacine	Yes	1	
	Halobetasol	Yes	1	
	Haloperidol	Yes	1	
	HydrALAZINE	Yes	1	
	Hydrochlorothiazide	Yes	1	
	Hydrochlorothiazide and Spironolactone	Yes	1	
	Hydrochlorothiazide and Triamterene	Yes	1	
	Hydrocodone and Acetaminophen	Yes	1	
	Hydrocodone and Ibuprofen	Yes	1	
	Hydroflumethiazide and Reserpine	Yes	1	
	Hydroxychloroquine	Yes	1	
	Hydroxyurea	Yes: Capsule	1	
	HydroXYzine	Yes	1	
	Hyoscyamine	Yes	1	
	Hyoscyamine, Atropine, Scopolamine, and Phenobarbital	Yes: Elixir, tablet	1	
	Ibuprofen	Yes: Caplet, suspension,	1	
	Imipramine	Yes: Tablet	1	
	Indapamide	Yes	1	
	Indomethacin	Yes: Capsule, suspension	1	
	Iodoquinol and Hydrocortisone	Yes	1	
	Ipecac Syrup	Yes	1	
	Ipratropium	Yes: Excludes solution for oral	1	
	Isosorbide Dinitrate	Yes: Tablet, sublingual tablet	1	
	Isosorbide Mononitrate	Yes	1	
	Isotretinoin	Yes	1	
	Isradipine	Yes: Capsule	1	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
	Ketoconazole	Yes: Cream, shampoo, tablet	1	
	Ketoprofen	Yes: Capsule	1	
	Ketorolac	Yes: Injection, tablet	1	
	Labetalol	Yes	1	
	Lactic Acid and Ammonium Hydroxide	Yes	1	
	Lactulose	Yes	1	
	Lamotrigine	Yes: Chewable tablet	1	
	Leflunomide	Yes	1	
	Levetiracetam	Yes; Sol only	1	
	Levobunolol	Yes	1	
	Levodopa and Carbidopa	Yes: Excludes orally-	1	
	LEVONORGESTREL & ETHINYL ESTRADIOL	Yes	1	
	LEVONORGESTREL-ETH ESTRA	Yes	1	
	Levothyroxine	Yes	1	
	Lidocaine and Hydrocortisone	Yes: Topical cream	1	
	Liothyronine	Yes	1	
	Lisinopril	Yes	1	
	Lisinopril and Hydrochlorothiazide	Yes	1	
	Lithium	Yes	1	
	Lorazepam	Yes	1	
	Lovastatin	Yes: Immediate release tablet	1	
	Loxapine	Yes	1	
	Magnesium Citrate	Yes	1	
	Maprotiline	Yes	1	
	Meclizine	Yes	1	
	Meclofenamate	Yes	1	
	Megestrol	Yes	1	
	Meloxicam	Yes: Tablet	1	
	Meperidine	Yes	1	
	Meprobamate	Yes	1	
	Mesalamine	Yes: Rectal suspension	1	
	Mestranol and Norethindrone	Yes	1	
	Metaproterenol	Yes: Excludes inhaler	1	
	Metformin	Yes: Excludes solution	1	
	Methadone	Yes	1	
	Methazolamide	Yes	1	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
	Methenamine	Yes	1	
	Methimazole	Yes	1	
	Methocarbamol	Yes: Tablet	1	
	Methotrexate	Yes	1	
	Methyldopa	Yes	1	
	Methylphenidate	Yes: Immediate release tablet,	1	
	Metipranolol	Yes	1	
	Metoclopramide	Yes	1	
	Metolazone	Yes	1	
	Metoprolol	Yes	1	
	Metoprolol XL	Yes	1	
	Metronidazole	Yes: Cream, gel, infusion, lotion,	1	
	Miconazole	Yes	1	
	Midodrine	Yes	1	
	Minocycline	Yes: Excludes extended	1	
	Mirtazapine	Yes	1	
	Misoprostol	Yes	1	
	Moexipril	Yes	1	
	Mometasone Furoate	Yes: Ointment	1	
	Morphine Sulfate	Yes	1	
	Mupirocin	Yes: Topical ointment	1	
	Nabumetone	Yes	1	
	Nadolol	Yes	1	
	Naltrexone	Yes: Tablet	1	
	Naproxen	Yes	1	
	Nefazodone	Yes	1	
	Neomycin, Polymyxin B, and Dexamethasone	Yes	1	
	Neomycin, Polymyxin B, and Gramicidin	Yes	1	
	Neomycin, Polymyxin B, and Hydrocortisone	Yes	1	
	Niacin	Yes	1	
	NiCARdipine	Yes: Capsule	1	
	Nicotine	Yes: Transdermal	1	
	NIFEdipine	Yes	1	
	Nitrofurantoin	Yes: Excludes suspension	1	
	Nitroglycerin	Yes: Capsule, injection, patch,	1	
	Nizatidine	Yes: Capsule	1	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
	Norethindrone	Yes	1	
	NORETHINDRONE AC-ETHINYL ESTRAD-FE	Yes	1	
	Nortriptyline	Yes: Excludes solution	1	
	Nystatin	Yes: Cream, ointment,	1	
	Nystatin and Triamcinolone	Yes	1	
	Ofloxacin	Yes: Tablet, ophthalmic	1	
	Omeprazole	Yes: Delayed release capsule	1	
	Ondansetron	Yes	1	
	Orphenadrine, Aspirin, and Caffeine	Yes	1	
	Oxaprozin	Yes	1	
	Oxazepam	Yes: Capsule	1	
	Oxybutynin	Yes: Excludes extended	1	
	Oxycodone	Yes	1	
	Oxycodone and Acetaminophen	Yes: Excludes caplet and	1	
	Oxycodone and Aspirin	Yes	1	
	Pancrelipase	Yes: Excludes powder	1	
	Papaverine	Yes	1	
	Paroxetine	Yes: Tablet, as hydrochloride	1	
	Penicillin V Potassium	Yes	1	
	Pentazocine	Yes: Tablet	1	
	Pentazocine and Acetaminophen	Yes	1	
	Pentoxifylline	Yes	1	
	Pergolide	Yes	1	
	Permethrin	Yes: Excludes spray	1	
	Perphenazine	Yes	1	
	Phenobarbital	Yes	1	
	Phenytoin	Yes: Excludes chewable tablet	1	
	Pilocarpine	Yes: Hydrochloride	1	
	Pindolol	Yes	1	
	Piroxicam	Yes	1	
	Podofilox	Yes: Topical solution	1	
	Polyethylene Glycol-Electrolyte Solution	Yes	1	
	Potassium Bicarbonate and Potassium Citrate	Yes	1	
	Potassium Chloride	Yes	1	
	Potassium Citrate and Citric Acid	Yes	1	
	Potassium Phosphate and Sodium Phosphate	Yes	1	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
	Povidone-Iodine	Yes	1	
	Pravastatin	Yes	1	
	Prazosin	Yes	1	
	PrednisoLONE	Yes	1	
	PredniSONE	Yes	1	
	Primidone	Yes	1	
	Probenecid	Yes	1	
	Procainamide	Yes	1	
	Prochlorperazine	Yes: Injection, tablet,	1	
	Progesterone	Yes: Injection	1	
	Promethazine	Yes	1	
	Promethazine and Codeine	Yes	1	
	Propafenone	Yes: Tablet	1	
	Propantheline	Yes	1	
	Propoxyphene	Yes: Capsule	1	
	Propoxyphene and Acetaminophen	Yes	1	
	Propranolol	Yes: Excludes capsule	1	
	Propranolol and Hydrochlorothiazide	Yes	1	
	Propylthiouracil	Yes	1	
	Protriptyline	Yes	1	
	Pseudoephedrine, Dihydrocodeine, and Chlorpheniramine	Yes	1	
	Pseudoephedrine, Hydrocodone, and Chlorpheniramine	Yes: Excludes capsule, tablet	1	
	Psyllium	Yes: Capsule, powder	1	
	Quinapril	Yes	1	
	Quinapril and Hydrochlorothiazide	Yes	1	
	Quinidine	Yes	1	
	Ranitidine	Yes: Excludes effervescent	1	
	Ribavirin	Yes: Capsule, tablet	1	
	Rifampin	Yes	1	
	Rifampin and Isoniazid	Yes	1	
	Rimantadine	Yes: Tablet	1	
	Risperidone	Yes; Soln only	1	
	Ropinirole	Yes	1	
	Salsalate	Yes	1	
	Selegiline	Yes: Capsule, tablet	1	
	Sertraline	Yes: Tablet	1	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
	Silver Sulfadiazine	Yes	1	
	Simvastatin	Yes	1	
	Sodium Citrate and Citric Acid	Yes	1	
	Sodium Phosphates	Yes: Enema, injection	1	
	Sodium Polystyrene Sulfonate	Yes	1	
	Sotalol	Yes	1	
	Spironolactone	Yes	1	
	Sucralfate	Yes	1	
	Sulfacetamide	Yes: Ointment, solution	1	
	Sulfacetamide and Prednisolone	Yes: Solution	1	
	SulfaDIAZINE	Yes	1	
	Sulfamethoxazole and Trimethoprim	Yes	1	
	Sulfasalazine	Yes	1	
	Sulfinpyrazone	Yes	1	
	SulfiSOXAZOLE	Yes: Tablet	1	
	Sulfur and Sulfacetamide	Yes: Lotion, wash	1	
	Sulindac	Yes	1	
	Tamoxifen	Yes: Tablet	1	
	Tamsulosin	Yes	1	
	Temazepam	Yes	1	
	Terazosin	Yes	1	
	Terbinafine	Yes: Excludes solution	1	
	Terbutaline	Yes	1	
	Terconazole	Yes: Cream	1	
	Testosterone	Yes: Injection	1	
	Tetracycline	Yes: Capsule	1	
	Tetrahydrozoline	Yes: Ophthalmic solution	1	
	Theophylline	Yes: Extended release capsule	1	
	Thioridazine	Yes	1	
	Thyroid	Yes	1	
	Ticlopidine	Yes	1	
	Timolol	Yes: Excludes hemihydrate	1	
	Tizanidine	Yes: Tablet	1	
	Tobramycin	Yes: Excludes ophthalmic	1	
	Tolmetin	Yes	1	
	Topiramate	Yes	1	

RxSense Premium Plus Formulary
January 2011

Brand Name	Generic Name	Generic Available / Notes+	Premium Plus Tier	Benefit Notes
	Tramadol	Yes: Excludes extended	1	
	Trandolapril	Yes	1	
	Tranlycypromine	Yes	1	
	Trazodone	Yes	1	
	Tretinoin, Topical	Yes: Cream, gel	1	
	Triamcinolone	Yes: Cream, lotion, ointment,	1	
	Triamcinolone Acetonide Paste	Yes	1	
	Triazolam	Yes	1	
	Trifluoperazine	Yes	1	
	Trifluridine	Yes	1	
	Trihexyphenidyl	Yes	1	
	Trimethobenzamide	Yes	1	
	Trimethoprim	Yes: Tablet	1	
	Trimipramine	Yes	1	
	Trypsin, Balsam Peru, and Castor Oil	Yes: Spray (aerosol)	1	
	Ursodiol	Yes: Capsule	1	
	Valacyclovir	Yes	1	
	Valproic Acid and Derivatives	Yes: Capsule (excluding	1	
	Venlafaxine	Yes: Tablet	1	
	Verapamil	Yes: Excludes controlled onset	1	
	Warfarin	Yes: Tablet	1	
	Zidovudine	Yes: Except IV S	1	
	Zinc Sulfate	Yes	1	
	Zolpidem	Yes: Excludes extended	1	
	Zonisamide	Yes	1	