



Quick Formulary Guide Large Group Community July 2023

This is a Quick Formulary Reference of frequently prescribed medications for our McLaren Health Advantage members. A complete full drug formulary is available at McLarenHealthAdvantage.org or by calling 888-327-0671. Formulary changes and updates are also available on our website. McLaren Health Advantage promotes the use of high-quality, cost-effective medications. If you would like to speak with the Pharmacy Director regarding the Formulary, please call 810-733-9727 for assistance.

Key	
*	Generic Required
AG	Age Restrictions
Brand	Brand Name only Covered
F	Female
M	Male
OTC	Over the Counter
P	Preventive = \$0.00
PA	Prior Authorization
QL	Quantity Limits
SP	Specialty Pharmacy Only
ST	Step Therapy
Copays	
1=Tier 1	2=Tier 2
	3=Tier 3

Quick Guides are updated twice per year: January and July.

888-327-0671

McLarenHealthPlan.org

Information is subject to change

#MHPCC42723005-LG; Reviewed 1/1/2023

ALLERGY

- 1 Allegra* Tablets
- 1 Astelin*/Astepro* (QL)
- 1 Atarax*
- 1 Atrovent Nasal Spray*
- 1 Claritin*/Claritin-D*
- 1 Elestat* (QL)
- 1 Flonase* OTC (QL)
- 1 Hycodan*(AG)(QL)
- 1 Nasalide* (QL)
- 1 Nasonex* (QL)
- 1 Optivar* (QL)
- 1 Pataday* (QL)
- 1 Patanol*
- 1 Phenergan* (QL)(AG)
- 1 Robitussin DAC* (AG)
- 1 Tavist*
- 1 Tessalon Perles*
- 1 Tussionex* (QL)(AG)
- 1 Vistaril*
- 1 Xyzal Tablets*
- 1 Zyrtec*/ Zyrtec D* 12hr

ANTI-INFECTIVES (ORAL)

- 1 Amoxil*
- 1 Augmentin*/ES*/XR*
- 1 Avelox*
- 1 Bactrim*/Bactrim DS*
- 1 Biaxin*/Biaxin XL*
- 1 Ceclor*/Ceclor XR*
- 1 Ceftin*
- 1 Cefzil*
- 1 Cipro*
- 1 Cleocin*
- 1 Diflucan*
- 1 Duricef*
- 1 Erythromycin*
- 1 Flagyl*
- 1 Floxin*
- 1 Keflex*
- 1 Lamisil*
- 1 Levaquin*
- 1 Macrodantin* (QL)
- 1 Minocin*
- 1 Nizoral*
- 1 Nystatin*
- 1 Omnicef*
- 1 Penicillin*
- 1 Stromectol*
- 1 Valtrex*
- 1 Vibramycin*
- 1 Zithromax*
- 1 Zovirax*
- 1 Zyvox*

ASTHMA/BREATHING

- 1 Accolate*
- 1 Advair Diskus (Brand) (QL)
- 1 Duoneb*
- 1 Proventil HFA*/Syrup*/Tablets*
- 1 Pulmicort Nebulizer Solution* (QL)
- 1 Singulair*
- 1 TheoDur*
- 1 Uniphyll*
- 1 Xopenex HFA*/Neb Sol*
- 2 Advair HFA (QL)
- 2 Anoro Ellipta (QL)
- 2 Arnuity Ellipta (QL)
- 2 Atrovent HFA (QL)
- 2 Breo Ellipta (QL)
- 2 Combivent Respimat
- 2 Flovent HFA/Diskus (Brand)(QL)
- 2 Serevent Diskus (QL)
- 2 Spiriva/Respimat (QL)
- 2 Symbicort (Brand) (QL)
- 2 Trelegy Ellipta (QL)

CARDIOVASCULAR

- 1 Accupril*/Accuretic*
- 1 Aldactone*/Aldactazide*
- 1 Apresoline*
- 1 Avalide*/Avapro*
- 1 Benicar*/Benicar HCT*
- 1 Bumex*
- 1 Bystolic*
- 1 Capoten*/Capozide*
- 1 Cardizem*/CD*/LA*
- 1 Coreg*/Coreg CR*
- 1 Coumadin*
- 1 Cozaar*
- 1 Diovan*/Diovan HCT*
- 1 Dyazide*
- 1 Exforge*/Exforge HCT*
- 1 Hyzaar*
- 1 Imdur*
- 1 Inderal*/Inderal LA*
- 1 Lanoxin*
- 1 Lopressor*/Lopressor HCT*
- 1 Lotensin*/ Lotensin HCT*
- 1 Lotrel*
- 1 Mavik*
- 1 Monopril*/Monopril HCT*
- 1 Norpace*
- 1 Norvasc*
- 1 Plavix* (QL)
- 1 Plendil*
- 1 Procardia*/Procardia XL*
- 1 Rythmol*/Rythmol SR*
- 1 Tekturna*

CARDIOVASCULAR, cont

- 1 Tenormin*/Tenoretic*
- 1 Toprol XL*
- 1 Univasc*
- 1 Vasotec*/Vaseretic*
- 1 Zestril*/Zestoretic*
- 1 Ziac*
- 2 Eliquis (QL)
- 2 Xarelto (QL)
- 3 Lovenox* (QL)(SP)

CHOLESTEROL

- 1 Caduet* (QL)
- 1 Colestid*
- 1 Crestor* (QL)
- 1 Fibracor*
- 1 Lipitor* (QL)
- 1 Lofibra*
- 1 Lopid*
- 1 Lovaza* (QL)(ST)
- 1 Mevacor* (QL)
- 1 Niaspan ER*
- 1 Pravachol* (QL)
- 1 Questran*/Questran Lite*
- 1 Tricor*
- 1 Trilipix*
- 1 Vascepa (Brand)(QL)
- 1 Vytorin* (QL)
- 1 Welchol*
- 1 Zetia* (QL)
- 1 Zocor* (QL)

CONTRACEPTIVES (F) (QL) (P=\$0)

- Apri*
- Aviane*
- Camrese*/Camrese Lo*
- Depo-Provera*
- Errin*
- Jolessa*
- Junel*/Junel FE*
- Kariva*
- Lessina*
- LoEstrin*/LoEstrin FE*
- Necon*
- NuvaRing*
- Ortho-Novum*
- Ortho Tri-Cyclen*
- Seasonique*
- Sprintec*
- Triphasil*
- Trivora*
- Velivet*
- Xulane*
- Yasmin*
- Yaz*
- Zovia*

DIABETES

- 1 Actos*
- 1 Amaryl*
- 1 Diabeta*/Micronase*
- 1 Glucophage*/Glucophage XR*
- 1 Glucotrol*/Glucotrol XL*
- 1 Glucovance*
- 1 Glynase*
- 1 Metaglip*
- 1 Precose*
- 1 Starlix*
- 2 Byetta (ST)(QL)
- 2 Farxiga (QL)
- 2 Humulin/Humalog (QL)
- 2 Januvia/Janumet (QL)
- 2 Levemir (QL)
- 2 Ozempic (ST)(QL)
- 2 Soliqua (QL)
- 2 Symlin
- 2 Tresiba (QL)
- 2 Trulicity (ST)(QL)
- 2 Victoza (ST)(QL)

GASTROINTESTINAL

- 1 Aciphex Tablets* (QL)
- 1 Apriso*
- 1 Asacol HD*
- 1 Azulfidine*
- 1 Bentyl*
- 1 Carafate*
- 1 Colazal*
- 1 Levsin*/Levsin SL*
- 1 Librax*
- 1 Lomotil*
- 1 Nexium Capsules* (QL)
- 1 Pentasa*
- 1 Pepcid*
- 1 Prevacid Capsules*
- 1 Prilosec Capsules*
- 1 Protonix Tablets*
- 1 Reglan*
- 1 Tagamet*
- 2 Linzess (QL)

HORMONE REPLACEMENT

- 1 Alora* (QL)
- 1 Aygestin*
- 1 Climara* (QL)
- 1 Estrace Tablets/Cream*
- 1 Estratest*/Estratest HS*
- 1 FemHRT*
- 1 Prometrium*
- 1 Provera*
- 1 Yuvaferm*
- 2 Premarin/Prempro/Premphase Tab

MEN'S HEALTH

- 1 Androgel* (PA)
- 1 Android* (PA)
- 1 Avodart*
- 1 Cardura*
- 1 Depo-Testosterone* (PA)
- 1 Flomax*
- 1 Hytrin*
- 1 Jalyn* (ST)
- 1 Minipres*
- 1 Proscar*
- 1 Rapaflo*
- 1 Testim* (PA)
- 1 Uroxatral*
- 3 Androderm (PA)

MENTAL HEALTH

- 1 Abilify Tablets*
- 1 Adderall* (QL)
- 1 Adderall XR (Brand)(QL)
- 1 Ambien*/Ambien CR* (QL)
- 1 Ativan*
- 1 Celexa*
- 1 Concerta (Brand)(QL)
- 1 Desyrel*
- 1 Effexor*/Effexor XR*
- 1 Elavil*
- 1 Focalin*/Focalin XR* (QL)
- 1 Lexapro*
- 1 Librium*
- 1 Lunesta* (QL)
- 1 Paxil*/Paxil CR*
- 1 Prozac*
- 1 Remeron*/Remeron ODT*
- 1 Restoril*
- 1 Risperdal*/Risperdal ODT*
- 1 Ritalin*/SR*/LA* (QL)
- 1 Seroquel*/Seroquel XR*
- 1 Sonata* (QL)
- 1 Strattera*
- 1 Valium*
- 1 Wellbutrin*/SR*/XL*
- 1 Xanax*/XR*/ODT*
- 1 Zoloft* (QL)
- 1 Zyprexa*/Zyprexa Zydis*

PAIN AND INFLAMMATION (QL)

- 1 Anaprox*/Anaprox DS*
- 1 Butrans* (ST)
- 1 Celebrex*
- 1 Demerol* 50mg
- 1 Dilaudid*
- 1 Duragesic* (PA)(ST)
- 1 Flector*
- 1 Flexeril*
- 1 Indocin*/Indocin ER*

PAIN & INFALM (QL), cont

- 1 Lodine*/Lodine XL*
- 1 Mobic*
- 1 Motrin*
- 1 MS Contin* (ST)
- 1 Naprosyn*
- 1 Norco*
- 1 Norflex*
- 1 Oxycontin* (ST)
- 1 Percocet*
- 1 Relafen*
- 1 Robaxin*
- 1 Soma*
- 1 Tylenol with Codeine* (AG)
- 1 Ultracet*(AG)
- 1 Ultram*(AG)
- 1 Vicodin*/ES*/HP*
- 1 Voltaren Gel*
- 1 Voltaren*/Voltaren XR*
- 1 Zanaflex*

SMOKING CESSATION(AG)(P)(QL)18yrs & older

\$0.00 only if 18 years and older

- Chantix*
- Nicotine Gum*
- Nicotine Patches*
- Nicotine Lozenges*
- Zyban*
- Nicotrol Inhaler (ST)
- Nicotrol Nasal Spray (ST)

TOPICALS

- 1 Bactroban Cream* (QL)
- 1 Benzamycin Packet*
- 1 Cleocin* (QL)
- 1 Cutivate*
- 1 Desowen*
- 1 Diprolene*/Diprosone
- 1 Elidel* (ST)
- 1 Elimite*
- 1 Garamycin* (QL)
- 1 Hytone*
- 1 Lidex*
- 1 Lotrisone*
- 1 Nizoral* (QL)
- 1 Ovace*
- 1 Penlac* (QL)
- 1 Retin-A*/Retin-A micro* (AG)
- 1 Selsun*
- 1 Silvadene*
- 1 Spectazole* (QL)
- 1 Sulfacet-R*
- 1 Valisone*
- 1 Westcort Cream*
- 1 Zovirax Ointment*