

Quick Formulary Guide McLaren Health Advantage

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.

ALLERGY
1 Allegra 180mg*/Allegra-D*
1 Astelin* (QL)
1 Atarax*
1 Atrovent Nasal Spray*
1 Clarinex* (QL)
1 Elestat*
1 Flonase* (QL)
1 Hycodan*(AG) (QL)
1 Nasalide* (QL)
1 Nasonex* (QL)
1 Optivar*
1 Pataday* (QL)
1 Patanol*
1 Phenegan Products* (QL) (AG)
1 Robitussin AC*/DAC* (AG)
1 Tavist*
1 Tessalon Perles*
1 Tussionex* (QL)(AG)
1 Vistaril*
1 Xyzal Tablets*
1 Zyrtec*/Zyrtec-D 12hr*

ASTHMA/BREATHING
1 Accolate*
1 Advair Diskus (Brand) (QL)
1 Alupent*
1 Proair HFA*
1 Proventil Tablets*
1 Pulmicort Nebulizer Solution* (QL)
1 Singulair*
1 TheoDur*
1 Uniphyll*
1 Xopenex HFA*/Neb Sol*
2 Atrovent HFA (QL)
2 Breo Ellipta (QL)
2 Combivent Respimat
2 Flovent HFA/Diskus (Brand)(QL)
2 ProAir Respiclick
2 Serevent Diskus (QL)
2 Spiriva/Respimat (QL)
2 Symbicort (QL)
2 Trelegly Ellipta (QL)

CARDIOVASCULAR, cont.
1 Vasotec*/Vaseretic*
1 Zestril*/Zestoretic*
1 Ziac*
2 Bystolic
2 Xarelto (QL)

CHOLESTEROL
1 Caduet* (QL)
1 Colestid*
1 Crestor* (QL)
1 Fibracor*
1 Lipitor* (QL)
1 Lofibra*
1 Lopid*
1 Lovaza* (QL)
1 Mevacor* (QL)
1 Pravachol* (QL)
1 Questran*
1 Tricor*
1 Trilipix*
1 Vytorin* (QL)
1 Welchol*
1 Zetia* (QL)
1 Zocor* (QL)

ANTI-INFECTIVES (ORAL)
1 Amoxil*
1 Augmentin*/ES*/XR*
1 Avelox*
1 Bactrim*/Bactrim DS*
1 Biaxin*/Biaxin XL*
1 Ceclor*/Ceclor XR 500mg*
1 Ceftin*
1 Cefzil*
1 Cipro*
1 Cleocin*
1 Diflucan*
1 Duricef*
1 Ery-Tabs*
1 Famvir*
1 Flagyl*
1 Floxin*
1 Keflex*
1 Lamisil*
1 Levaquin*
1 Macrodantin* (QL)
1 Minocin Capsules*
1 Nizoral Tablets*
1 Nystatin*
1 Omnicef*
1 Penicillin*
1 Stromectol*
1 Valtrex*
1 Vibramycin*
1 Zithromax*
1 Zovirax*
1 Zyvox*

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

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

* = Generic Required	P = Preventive = \$0.00
AG = Age Restrictions	PA = Prior Authorization
F = Female	QL = Quantity Limits
M = Male	ST = Step Therapy
OTC = Over-the-Counter	

1 = Tier 1	2 = Tier 2	3 = Tier 3
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888-327-0671 (TTY:711)

McLarenHealthAdvantage.org

Information is subject to change

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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 Basaglar (QL)
- 2 Bydureon (QL)
- 2 Byetta (QL)
- 2 Farxiga (QL)
- 2 Humulin/Humalog Vials/Pens (QL)
- 2 Januvia/Janumet (QL)
- 2 Levemir Vials/Pens (QL)
- 2 Ozempic (QL)
- 2 Symlin
- 2 Tresiba vial/pen (QL)
- 2 Trulicity (QL)
- 2 Victoza (QL)

GASTROINTESTINAL

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

HORMONE REPLACEMENT

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

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* (ST)
- 1 Testim* (PA)
- 1 Uroxatral*
- 3 Androderm (PA)

MENTAL HEALTH

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

PAIN & INFLAMMATION (QL)

- 1 Anaprox*/Anaprox DS*
- 1 Butrans* (ST)
- 1 Cataflam*
- 1 Celebrex*
- 1 Demerol*
- 1 Dilaudid*
- 1 Duragesic* (PA) (ST)
- 1 Flector*
- 1 Flexeril*
- 1 Indocin*/ER*
- 1 Lodine*/Lodine XL*
- 1 Mobic*
- 1 Motrin*
- 1 MS Contin* (ST)
- 1 Naprosyn*

PAIN & INFLAMMATION (QL), cont.

- 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*/XR*
- 1 Zanaflex*
- 2 Nucynta

SMOKING CESSATION (AG)(P)(QL)

- P Chantix
- P Nicotine Gum*
- P Nicotine Patches*
- P Nicotine Lozenges*
- P Nicotrol Inhaler (ST)
- P Nicotrol NS (ST)
- P Zyban*

TOPICALS

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

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