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2017 Aetna Pharmacy Drug Guide

Four Tier Open Aetna Value Plus Small Group Plan: MD, WV

www.aetna.com



Do you have questions?

Call the toll-free number on your member ID card. Or visit www.aetna.com/formulary for the most up-to-date information.

Dear Member:

We are pleased to provide you with a copy of our 2017 Aetna Pharmacy drug guide that includes information about your pharmacy benefits plan. Take this guide with you when you see your doctor if you want to talk about what medicines are covered under your plan and what they may cost.

Many commonly prescribed drugs are listed in this guide.

Note: this is not a complete list of drugs covered under your plan. We list only the most commonly prescribed medicines as thousands of drugs are covered by your plan.

Want to learn more your plan's drug coverage? Just visit the website on your member ID card and log in to your account.



What pharmacy benefits plan do I have?

You are enrolled in a Four Tier, Open Formulary plan.

Here's what that means to you:

Think of **tier** as a level. **Four tier** means you could pay four different amounts, depending on the drug you take.

A **formulary** is a list of generic and brand-name drugs that your plan covers. An **open formulary** means your plan covers most prescription drugs. But it may not cover some others.

What can I expect to pay?

With this health benefits and health insurance plan, the amount you pay depends on the drug your doctor prescribes. It's either a flat fee or a percent of the prescription's price. Each drug your plan covers falls under a different level or tier. The lower the tier, the lower the price. The higher the tier, the higher the price.

What you pay falls into one of these tiers or levels:

Tier One: You pay **the lowest cost** for drugs in this level.

Tier Two: You pay **a slightly higher cost** for drugs in this level.

Tier Three: You pay **the highest cost** for drugs in this level.

Tier Four: You pay **a higher cost** for specialty drugs in this level. Specialty prescription drugs typically include high-cost drugs that require special handling, special storage or monitoring and include but are not limited to oral, topical, inhaled and injected ways of giving them.

To find your exact costs

Check your Plan Design and Benefits summary in your enrollment kit.

Your pharmacy benefits plan may include a program that encourages you to choose a generic drug over a brand-name drug to help reduce what you pay. This means that if you fill a brand-name drug when a generic is available, that in addition to your standard copay or coinsurance, you must also pay the difference in cost between the brand-name and generic drug.

For a summary of your pharmacy benefits plan, including out-of-pocket costs, visit the website on your member ID card and log in to your account. Or call the toll-free number on your member ID card.

Where can I find more formulary information?

You and your doctor can search for a drug, find out if it's covered and see what tier it's in. You can also see if there are alternatives that cost less. **Tell your doctor that you pay more for tier four drugs** so he or she can consider this when writing a prescription.

Visit www.aetna.com/formulary. You arrive at a page that says "Find a Medication." This is where you can learn more about the types of drug coverage reviews required for your medicine(s); things like precertification, step therapy or quantity limits. You will arrive at a menu page where you can view various drug lists, including your Aetna Pharmacy drug guide and more.

How is the formulary developed?

Aetna's Pharmacy and Therapeutics (P&T) Committee meets regularly to review new drugs and new information about drugs that are already on the market. It reviews available information concerning safety, effectiveness and current use in therapy. The P&T Committee reviews scientific evidence, including relevant findings of federal government agencies, pharmaceutical manufacturers, medical professional associations, national commissions and peer-reviewed journals.

Our P&T Committee includes licensed pharmacists and doctors, including those who are currently in practice and others who are Aetna employees. All committee members must tell us if they are in a situation that can create a conflict of interest or if they have a financial stake that might affect their decisions.

Once the P&T Committee completes its clinical review, we also consider overall value (including cost and manufacturer rebate arrangements) and other factors before adding or removing a drug from the formulary. The Aetna Pharmacy drug guide shows you recent changes to the guide. For example, it could show what drugs started requiring coverage reviews like precertification, step therapy or quantity limits. Or which drugs no longer do. The P&T Committee can make recommendations to change the tier level of a drug or to place it on our Formulary Exclusions List, designating it as a drug that is no longer covered.

Why is the formulary subject to change?

We may add or remove drugs for certain reasons. We might also move a drug from one coverage tier to another.

Here are some reasons why:

- As brand-name drugs lose their patents and generic versions become available, the brand-name may be covered at a higher out-of-pocket cost while the generic may be covered at a lower out-of-pocket cost.
- The U.S. Food and Drug Administration (FDA) approves many new drugs throughout the year.
- Drugs can be withdrawn from the market or may become available without a prescription. Over-the-counter (OTC) drugs are not generally covered under a prescription plan, unless required by law.

Our website, www.aetna.com/formulary, reflects the most up-to-date formulary information – so please visit it often.

Why do some drugs require prior authorization or precertification?

This drug coverage review encourages appropriate and cost-effective use of prescription drugs by allowing coverage only when certain conditions are met.

Reasons for precertification include:

- Compliance with dosing guidelines
- Avoiding duplicate therapies
- Helping health care providers check that a drug is being used based on generally accepted medical criteria

The precertification program is based on current medical findings, FDA-approved manufacturer labeling information, and cost and manufacturer rebate arrangements.

If your plan requires precertification, you will find a list of drugs that are subject to precertification with this guide. Please keep in mind that:

- Your doctor must contact Aetna to request approval of coverage for these drugs.
- If we approve the request, we will notify your doctor. The drug will then be covered at the applicable out-of-pocket cost under your plan. You will also be notified of approvals where the state requires notification to members.

If the request is denied, you and your doctor will be notified. You can still purchase the drug, but for the full price.

Medical exceptions for non-covered drugs

In certain circumstances*, You or your prescriber can request a medical exception for a non-covered drug. To submit a request, call our Precertification Department at 1-855-582-2025, or fax a request to 1-855-330-1716. You also can mail a written request to CVS Health, ATTN: Aetna PA, 1300 E. Campbell Rd., Richardson, TX 75081. If the request is expedited a coverage determination will be made within 24 hours of receiving the request, and notify you or your prescriber of our decision. All medically necessary outpatient prescription drugs will be covered. If a medical exception is approved the member is responsible for the highest applicable copay after deductible depending upon the members pharmacy plan design.

Why do some drugs have quantity limits?

This drug coverage review limits coverage of quantities for certain drugs. These limits help your doctor and pharmacist check that your prescribed drug is used correctly and safely.

We use medical guidelines and FDA-approved recommendations from drug makers to set these coverage limits. The quantity limit program includes:

- **Dose Efficiency Edits** – Limit coverage of prescriptions to one dose per day for drugs that are approved for once-daily dosing.
- **Maximum Daily Dose** – A message is sent to the pharmacy if a prescription is less than the minimum or higher than the maximum allowed dose.
- **Quantity Limits Over Time** – Limit coverage of prescriptions to a specific number of units in a defined amount of time.

What is step therapy?

This drug coverage review promotes the appropriate use of equally effective but lower-cost drugs first. These lower-cost drugs are FDA-approved and treat the same condition as the corresponding step therapy drugs.

What is therapeutic duplication?

Therapeutic duplication means that two or more drugs of the same type are prescribed at the same time. This can occur when two doctors prescribe similar drugs or when your doctor switches from one drug to another drug in the same class without cancelling the first prescription.

It is rare that you should ever need two drugs from the same class to treat a medical condition. Since serious side effects may occur, we help bring such duplications to your pharmacist's and doctor's attention.

Learn more about drug coverage reviews

If you have a medical need for a drug that requires precertification, quantity limits or step therapy, your doctor can ask for a medical exception. The list of drugs requiring precertification, quantity limits or step therapy is subject to change. Find the most up-to-date information at www.aetna.com/formulary.

You may be able to save with generic drugs

Generic drugs are approved by FDA and proven to be just as safe and effective as brand-name drugs. They contain the same active ingredients in the same amounts as the brand-name drugs. The difference is that generics may be a different color, shape or size.

When appropriate, your doctor may decide to prescribe, or allow substitution with, a generic drug. Please talk to your doctor to find out if a generic is right for you.

Saving on prescriptions

Here are some other tips to pay less out of pocket for your prescription drugs:

- Ask your doctor to consider prescribing drugs that are on the Pharmacy Drug (formulary) Guide.
- Ask your doctor to consider prescribing generic drugs instead of brand-name drugs.
- Check to see if your plan includes our mail-order pharmacy service. Depending upon your plan, mail order may save you money. See Aetna Rx Home Delivery in this guide for details.
- Remind your doctor to check your plan to make sure you get maximum coverage.

*These circumstances exist when you are suffering from a health condition that may seriously jeopardize your life, health, or ability to regain maximum function, or undergoing a current course of treatment using a non-covered drug.

What is Aetna Rx Home Delivery?

Check your plan documents to see if your plan includes our Aetna Rx Home Delivery mail order pharmacy. It fills prescriptions for maintenance medicine. This type of medicine is used regularly, to treat conditions like arthritis, asthma, diabetes or high cholesterol. If you need this type of drug, you can get up to a 90-day supply, or the maximum supply allowed by your plan, and free delivery right to your mailbox.

You also get:

- Quick, confidential service
- Free standard shipping
- Pharmacists who check all prescriptions for accuracy and can answer questions any time

It's easy and fast to order – choose one of these ways:

- 1. CourtesyStartSM** – Fill your new mail order prescription online by visiting the website on your member ID card and logging in to your account. Or, call us toll-free at 1-888-RX AETNA (1-888-792-3862) or TDD: 1-800-823-6373. We will contact your doctor to try and get a new prescription for you. You may need to schedule a visit with your doctor before he or she will write a new prescription.
- 2. Mail** – Get a new 90-day prescription from your doctor. Mail it to us with a completed order form. Access the order form online. You'll find it by visiting the website on your member ID card.
- 3. Fax** – Ask your doctor to fax your new prescription, with your completed order form to 1-877-270-3317. Make sure your doctor includes your member ID number, your date of birth and your mailing address on the fax cover sheet. Only a doctor may fax a prescription.

If your prescription is for a controlled medicine, a written prescription from your doctor may be needed.

Generally, if your order is complete, you will receive your medicine within 10-14 days from when Aetna Rx Home Delivery receives your order. You can request expedited delivery for an additional charge.

What is Aetna Specialty Pharmacy?

Aetna Specialty Pharmacy is Aetna's in-house specialty pharmacy. It can fill your prescription specialty medicine. These types of drugs may be injected, infused or taken by mouth. Specialty medicine often needs special storage and handling. It must be delivered quickly. And a nurse or pharmacist should monitor you during your treatment. Use Aetna Specialty Pharmacy to get this medicine sent right to your mailbox. You also get:

- Free delivery that is reliable, secure and sent anywhere you choose
- Extra help when you need it – like injection training and side effect monitoring
- Refill reminders
- Proactive outreach to confirm your refills
- Free standard supplies
- Nurses and pharmacists to help 24 hours a day, every day

It's easy and fast to order – choose one of these ways:

- **Fax** – Your doctor can fax your prescription to **1-866-FAX-ASRX (1-866-329-2779)**.
- **Mail** – You or your doctor can mail your prescription order to: Aetna Specialty Pharmacy, 503 Sunport Lane, Orlando, FL 32809. If you mail in your own prescription, please send it along with a completed Patient Profile Form. Find the form at www.AetnaSpecialtyRx.com by clicking on "Specialty pharmacy: How to enroll."
- **Phone** – Your doctor can also call and speak to one of our registered pharmacists at **1-866-782-ASRX (1-866-782-2779)** during normal business hours of 8 a.m. until 7 p.m. ET.

To transfer an existing prescription order and have it filled by Aetna Specialty Pharmacy, call toll-free at **1-866-353-1892**.

Nondiscrimination Notice

Aetna complies with applicable Federal civil rights laws and does not discriminate, exclude or treat people differently based on their race, color, national origin, sex, age, or disability.

Aetna provides free aids/services to people with disabilities and to people who need language assistance.

If you need a qualified interpreter, written information in other formats, translation or other services, call the number on your ID card.

If you believe we have failed to provide these services or otherwise discriminated based on a protected class noted above, you can also file a grievance with the Civil Rights Coordinator by contacting:

Civil Rights Coordinator,
P.O. Box 14462, Lexington, KY 40512 (CA HMO customers: PO Box 24030 Fresno, CA 93779),
1-800-648-7817, TTY: 711,
Fax: 859-425-3379 (CA HMO customers: 860-262-7705), CRCoordinator@aetna.com.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, or at 1-800-368-1019, 800-537-7697 (TDD).

Aetna is the brand name used for products and services provided by one or more of the Aetna group of subsidiary companies, including Aetna Life Insurance Company, Coventry Health Care plans and their affiliates (Aetna).

TTY: 711

For language assistance in your language call the number listed on your ID card at no cost. (English)

Para obtener asistencia lingüística en español, llame sin cargo al número que figura en su tarjeta de identificación. (Spanish)

欲取得繁體中文語言協助，請撥打您 ID 卡上所列的號碼，無需付費。(Chinese)

Pour une assistance linguistique en français appeler le numéro indiqué sur votre carte d'identité sans frais. (French)

Para sa tulong sa wika na nasa Tagalog, tawagan ang nakalistingang numero sa iyong ID card nang walang bayad. (Tagalog)

T'áá shí shizaad k'ehjí bee shiká a' doowoł nínízingo ÍDiné k'ehjíÓ naaltsoos bee atah nílįigo nanitinígíí béesh bee hane'é bikáá' áají' t'áá jíík'e hółne'. (Navajo)

Benötigen Sie Hilfe oder Informationen auf Deutsch? Rufen Sie kostenlos die auf Ihrer Versicherungskarte aufgeführte Nummer an. (German)

Për asistencë në gjuhën shqipe telefononi falas në numrin e regjistruar në kartën tuaj të identitetit (ID). (Albanian)

ለአማርኛ ቋንቋ እገዛ በመታወቅያዎ ላይ በተጠቀሰው ቁጥር በነጻ ይደውሉ (Amharic)

للمساعدة في (اللغة العربية)، الرجاء الاتصال على الرقم المجاني المذكور في بطاقتك التعريفية. (Arabic)

Լեզվի ցուցաբերած աջակցության (հայերեն) Զանգահարեք թիվը նշված է ձեր ID քարտի առանց գնով: (Armenian)

Niba urondera uwugufasha mu Kirundi, twakure ku busa ku inomeri iri ku ikarata karangamuntu yawe. (Bantu-Kirundi)

Alang sa pag-abag sa pinulongan sa (Binisayang Sinugboanon) tawga ang numero nga gilista sa imong kard sa kailhanan nga walay bayad. (Bisayan-Visayan)

বাংলায় ভাষা সহায়তার জন্য আপনার আইডি কার্ডে যে নম্বরটি তালিকাভুক্ত রয়েছে বিনামূল্যে তাতে কল করুন। (Bengali-Bangala)

ငွေကုန်ကျခံစရာမလိုဘဲ (မြန်မာဘာသာစကား) ဖြင့် ဘာသာစကားအကူအညီရယူရန် သင့်အိုင်ဒီကတ် ပေါ်တွင် ပေးထားသည့်ဖုန်းနံပါတ်ကိုခေါ်ဆိုပါ။ (Burmese)

Per rebre assistència en (català), truqui al número de telèfon gratuït que apareix a la seva targeta d'identificació. (Catalan)

Para ayuda gi fino' (Chamoru), ágang l numiru ni mangaige gi iyo-mu 'ID card', sin gástu.. (Chamorro)

Θεωρεστε τον αριθμό τηλεφώνου (GWY) 867-15-0000 ως τον καλύτερο αριθμό για να καλέσετε τον υπάλληλο της Aetna. (Cherokee)

(Chahta) anumpa ya apela a chi bvnna hokmvt chj holisso kallo iskitini ma holhtena yvt takanli. Na aivlli keyu hq ish j paya hinla. (Choctaw)

Tajaajila afaan Oromiffa argachuuf lakkoofsota bilbilaa waraqaa eenyummaa keessan irra jiran irratti bilisaan bilbilaa. (Cushite)

Bel voor tolk- en vertaaldiensten in het Nederlands gratis naar het nummer dat op uw identiteitskaart vermeld staat. (Dutch)

Pou jwenn asistans nan lang Kreyòl Ayisyen, rele nimewo a yo endike nan kat idantifikasyon ou gratis. (French Creole)

Για γλωσσική βοήθεια στα Ελληνικά καλέστε χωρίς χρέωση τον αριθμό που αναγράφεται στην κάρτα αναγνώρισης. (Greek)

(Gujarati) ગુજરાતીમાં ભાષા સહાય માટે તમારા આઈડી કાર્ડ પર લખેલ નંબર પર કોઈ ખર્ચ વગર કોલ કરો.

No ke kōkua ma ka ‘ōlelo Hawai‘i e kahea aku i ka helu kelepona ma kāu kaleka ID, kāki ‘ole ‘ia kēia kōkua nei. (Hawaiian)

(Hindi) हिन्दी में भाषा सहायता के लिए, अपने आईडी कार्ड पर दिये गये नम्बर पर मुफ्त कॉल करें।

Yog xav tau kev pab txhais lus Hmoob hu dawb tau rau tus xov tooj ntawm koj daim npav. (Hmong)

Maka enyemaka asusu na Igbo kpooṅṅmba edeputara na kaadi ID gi na akwughị ugwo o bula. (Ibo)

Para iti tulong ti pagsasao iti pagsasao tawagan ti numero a nakalista iti ID card yo nga awan ti bayadan yo. (Ilocano)

Untuk bantuan dalam bahasa Indonesia, silakan hubungi nomor yang tercantum di kartu ID Anda tanpa dikenakan biaya. (Indonesian)

Per ricevere assistenza linguistica in italiano, può chiamare gratuitamente il numero riportato sulla Sua scheda identificativa. (Italian)

日本語で援助をご希望の方は、IDカードに記載されている番号まで無料でお電話ください。 (Japanese)

လားရှိုးဘာသာစကားတို့အတွက် အကူအညီအတွက် အလွန်အလေးအနက်အားဖြင့် အလွန်အလေးအနက်အားဖြင့် အလွန်အလေးအနက်အားဖြင့် (Karen)

한국어로 언어 지원을 받고 싶으시면 보험 ID 카드에 수록된 무료 통화번호로 전화해 주십시오. (Korean)

Bé n̄ ké gbo-kpá-kpá dyé dé Bāsóò wùdùün wēē, dǎ n̄bà bé ɔ cééà bó n̄ dyí-dyoìn-bě̀ kōē bó pídyi.
(Kru-Bassa)

بو وەرگرتتی رینوینی پیوهندیدار به زمان به زمان به زمان به زمانه ی خۆراییی نووسراو له کارتیی پیناسی خۆتاندا پهیوهندی بکهن. (Kurdish)

ຖ້າທ່ານຕ້ອງການຄວາມຊ່ວຍເຫຼືອໃນການເປັນພາສາລາວ,
ກະລຸນາໂທຫາໜ້າຂອງພວກເຮົາໃນໂປຣແກຣມຂອງທ່ານໂດຍບໍ່ສອບຄໍາໃຫ. (Laotian)

तील भाषा (मराठी) सहाय्यासाठी तुमच्या आयडी कार्डवर सूचिबद्ध करण्यात आलेल्या क्रमांकावर
कोणत्याही खर्चाशिवाय कॉल करा. (Marathi)

Ñan bōk jipañ ilo Kajin Majol kwon kallok nōmba eo ej walok ilo kaat in ID eo am ejjelok wōnān.
(Marshallese)

Ohng palien sawas en soun kawewe ni omw lokaia Ponape koahl nempe me sansal pohn noumw ID
koard ni sohte isais. (Micronesian-Pohnpeian)

សម្រាប់ជំនួយភាសាជា ភាសាខ្មែរ
សូមទូរស័ព្ទតាមលេខដែលមាននៅលើប័ណ្ណសម្គាល់សមាជិករបស់អ្នកដោយឥតគិតថ្លៃ។ (Mon-Khmer,
Cambodian)

(नेपाली) मा निःशुल्क भाषा सहायता पाउनका लागि तपाईंको परिचय-पत्रमा उल्लेख गरिएको नम्बरमा फोन
गर्नुहोस् । (Nepali)

Tën kuwoony ë thok ë Thuwɔŋjǎŋ cɔl akuën cī reec ë kaaddu këu kec’in ayöc. (Nilotic-Dinka)

For språkassistanse på norsk, ring nummeret på ID-kortet ditt kostnadsfritt. (Norwegian)

Fer Hefle in Deitsch, ruf die Fonnummer aa die uff dei ID Kaarde iss. Es Aaruf koschtet nix.
(Pennsylvania Dutch)

برای راهنمایی به زبان فارسی، بدون هیچ هزینه ای با شماره ای که بر روی کارت شناسایی شما آمده است تماس بگیرید. انگلیسی
(Persian)

Aby uzyskać pomoc w języku polskim, zadzwoń bezpłatnie pod numer podany na karcie ID. (Polish)

Para obter assistência linguística em português ligue para o número grátis listado no seu cartão de
identificação. (Portuguese)

(Punjabi) ਪੰਜਾਬੀ ਵਿੱਚ ਭਾਸ਼ਾਈ ਸਹਾਇਤਾ ਲਈ ਆਪਣੇ ਆਈਡੀ ਕਾਰਡ ਤੇ ਦਿੱਤੇ ਨੰਬਰ ਤੇ ਕਾਲ ਕਰੋ।

Pentru asistență lingvistică în românește telefonați la numărul gratuit indicat pe cardul dvs. de membru de
la Aetna. (Romanian)

Чтобы получить помощь русскоязычного переводчика, позвоните по бесплатному номеру, указанному в вашей ID-карте удостоверения личности. (Russian)

Mo fesoasoani tau gagana I le Gagana Samoa vala'au le numera o lo'o lisiina I luga o lau pepa ID e aunoa ma se totogi. (Samoan)

Za jezičnu pomoć na hrvatskom jeziku pozovite besplatan broj naveden na poledini Vaše identifikacijske kartice. (Serbo-Croatian)

Fii yo on hefu balal e ko yowitii e haala Pular noddee e dñi numero ji lintaađi ka kaydi dantite mon. Njodi woo fawaaki on. (Sudanic-Fulfulde)

Ukikitaji usaidizi katika lugha ya Kiswahili piga simu kwa nambari iliyoorodheshwa kwenye Kitambulisho chako bila malipo. (Swahili)

ܩܘܪܕܢܐ ܕܥܘܠܡܐ ܕܡܪܝܩܐ ܕܥܘܠܡܐ ܕܡܪܝܩܐ ܕܥܘܠܡܐ ܕܡܪܝܩܐ ܕܥܘܠܡܐ

(Syriac-Assyrian). ܩܘܪܕܢܐ ܕܥܘܠܡܐ ܕܡܪܝܩܐ ܕܥܘܠܡܐ ܕܡܪܝܩܐ ܕܥܘܠܡܐ ܕܡܪܝܩܐ ܕܥܘܠܡܐ

భాషతో సాయం కొరకు ఎలాంటి ఖర్చు లేకుండా మీ ఐడి కార్డు మీద ఉన్న నెంబరుకు కాల్ చేయండి. (తెలుగు) (Telugu)

สำหรับความช่วยเหลือทางด้านภาษาเป็น (ภาษาไทย) โทรหมายเลขที่แสดงไว้บนบัตรประจำตัวของท่าน พี่ไม่มีค่าใช้จ่าย (Thai)

Kapau 'oku fiema'u hā tōkoni 'i he lea faka-Tonga telefoni ki he fika 'oku lisi 'i ho'o kaati ID 'o 'ikai hā tōtōngi (Tongan)

Ren ánninnisin chiakú ren (Kapasen Chuuk) kopwe kékkéeri ena nampaan tengewa aa makketiw wóon noumw ena chéén taropween ID nge esapw kamé ngonuk. (Turkese)

(Dilde) dil yardım için sayı hiçbir ücret ödmeden kimlik kartı listelenen diyoruz. (Turkish)

Щоб отримати допомогу перекладача української мови, зателефонуйте за безкоштовним номером, наданим у вашій ID-картці посвідчення особи. (Ukrainian)

اردو میں لسانی معاونت کے لیے اپنے ID کارڈ پر درج نمبر پر مفت کال کریں۔ (Urdu)

Để được hỗ trợ ngôn ngữ bằng (ngôn ngữ), hãy gọi miễn phí đến số được ghi trên thẻ ID của quý vị. (Vietnamese)

פאר שפראך הילף אין אידיש רופט דעם נומער וואס שטייט אויף אייער אידענטיטעט קארטל פון אפצאל. (Yiddish)

Fún irànlọwọ nípa èdè (Yorùbá) pe nọmbà tí a kọ sórí káàdì idánimọ ẹ lái san owó kankan rárá. (Yoruba)

Please note that if your prescription drug benefits plan changes, the information herein may no longer apply.

A copayment is a flat fee. Coinsurance is a percentage of the rate that Aetna negotiates with the plan sponsor for covered prescriptions except as required by law to be otherwise. Some drugs on the Preferred Drug List are subject to manufacturer rebates. Coinsurance is calculated before any rebates are subtracted. That means it may be possible for your cost of a preferred drug to be higher than your cost of a non-preferred drug.

Health benefits and health insurance plans are offered, administered and/or underwritten by Aetna Health Inc., Aetna Health Insurance Company of New York, Aetna Health Insurance Company and/or Aetna Life Insurance Company (Aetna). In Florida, by Aetna Health Inc. and/or Aetna Life Insurance Company. In Maryland, by Aetna Health Inc., 151 Farmington Avenue, Hartford, CT 06156. Each insurer has sole financial responsibility for its own products. Aetna Pharmacy Management refers to an internal business unit of Aetna Health Management, LLC. Aetna Specialty Pharmacy refers to Aetna Specialty Pharmacy, LLC, a subsidiary of Aetna Inc., which is a licensed pharmacy that operates through specialty pharmacy prescription fulfillment.

Not all health services are covered. See plan documents for a complete description of benefits, exclusions, limitations and conditions of coverage. Plan features and availability may vary by location and are subject to change.

Aetna receives rebates from drug manufacturers that may be taken into account in determining Aetna's Pharmacy Drug (formulary) Guide. Rebates do not reduce the amount a member pays the pharmacy for covered prescriptions. Information is subject to change. For more information about Aetna plans, refer to www.aetna.com.

The drugs on the Pharmacy Drug (formulary) Guide, Formulary Exclusions, Precertification, Quantity Limit and Step Therapy Lists are subject to change. The quantity limits and step therapy drug coverage review programs are not available in all service areas. For example, step therapy programs do not apply to fully-insured members in Indiana. Step therapy does not apply to fully-insured members in New Jersey. However, these programs are available to self-funded plans.

In accordance with state law, commercial fully-insured members in Louisiana and Texas (except Federal Employee Health Benefit Plan members) who are receiving coverage for medications that are added or removed from the Pharmacy Drug (formulary) Guide, Precertification, Quantity Limits or Step-Therapy Lists during the plan year will continue to have those medications covered at the same benefit level until their plan's renewal date. In Texas, precertification approval is known as "pre-service utilization review." It is not "verification" as defined by Texas law.

In accordance with state law, fully-insured Commercial California HMO members (except Federal Employee Health Benefit Plan members) who are receiving coverage for medications that are added to the Precertification or Step-therapy Lists will continue to have those medications covered, for as long as the treating physician continues prescribing them, provided that the drug is appropriately prescribed and is considered safe and effective for treating the enrollee's medical condition. In accordance with state law, fully-insured Commercial Connecticut PPO members (except Federal Employee Health Benefit Plan members) who are receiving coverage for medications that are added to the Precertification or Step-therapy Lists will continue to have those medications covered for as long as the treating physician prescribes them, provided the drug is medically necessary and more medically beneficial than other covered drugs. Nothing in this section shall preclude the prescribing provider from prescribing another drug covered by the plan that is medically appropriate for the enrollee, nor shall anything in this section be construed to prohibit generic drug substitutions.

This material is for information only. It contains only a partial, general description of plan benefits or programs and does not constitute a contract. See plan documents for a complete description of benefits, exclusions, limitations and conditions of coverage. Plan features and availability may vary by location and are subject to change. Providers are independent contractors and are not agents of Aetna. Provider participation may change without notice. Aetna does not provide care or guarantee access to health services. Information is subject to change. For more information about Aetna plans, refer to www.aetna.com.

www.aetna.com

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Group Formulary

Table of Contents

Adhd/Anti-Narcolepsy/Anti-Obesity/Anorexiant	5
Aminoglycosides	8
Analgesics - Anti-Inflammatory	8
Analgesics - Nonnarcotic	12
Analgesics - Opioid	12
Androgens-Anabolic	17
Anorectal Agents	18
Anthelmintics	19
Antianginal Agents	19
Antianxiety Agents	20
Antiarrhythmics	21
Antiasthmatic And Bronchodilator Agents	21
Anticoagulants	24
Anticonvulsants	24
*Antidementia Agent Combinations***	27
Antidepressants	28
Antidiabetics	30
Antidiarrheals	35
Antidotes And Specific Antagonists	35
Antidotes	35
Antiemetics	36
Antifungals	36
Antihistamines	37
Antihyperlipidemics	39
Antihypertensives	41
Anti-Infective Agents - Misc.	44
Antimalarials	46
Antimyasthenic Agents	46
Antimyasthenic/Cholinergic Agents	46
Antimycobacterial Agents	46
*Antineoplastic - Bcl-2 Inhibitors***	47
Antineoplastics And Adjunctive Therapies	47
Antiparkinson Agents	51
Antipsychotics/Antimanic Agents	53
*Antiretrovirals Adjuvants***	55
Antiseptics & Disinfectants	55
Antivirals	55
Assorted Classes	59
*Atopic Dermatitis - Monoclonal Antibodies***	60
*Beta Blocker & Angiotensin Ii Receptor Antagonist Comb***	60
Beta Blockers	60
*Bile Acid Synthesis Disorder Agents***	62
Biologicals Misc	62
*Bulk Chemicals - Ny***	62
Calcium Channel Blockers	62
Cardiotonics	64
Cardiovascular Agents - Misc.	64

Cephalosporins	65
Chemicals	67
*Cic Agents - Guanylate Cyclase-C (Gc-C) Agonists***	67
Contraceptives	67
Corticosteroids	72
Cough/Cold/Allergy	73
*Cyclin-Dependent Kinases (Cdk) Inhibitors***	74
*Cystic Fibrosis Agent - Combinations***	74
Dermatologicals	74
Diagnostic Products	87
Dietary Products/Dietary Management Products	92
Digestive Aids	96
*Direct-Acting P2y12 Inhibitors***	96
Diuretics	97
Endocrine And Metabolic Agents - Misc.	98
Estrogens	102
*Estrogen-Selective Estrogen Receptor Modulator Comb***	104
*Farnesoid X Receptor (Fxr) Agonists***	104
Fluoroquinolones	104
Gastrointestinal Agents - Misc.	104
Genitourinary Agents - Miscellaneous	106
Gout Agents	107
Hematological Agents - Misc.	108
Hematopoietic Agents	110
Hemostatics	114
*Hepatitis C Agent - Combinations***	114
*Hereditary Orotic Aciduria Treatment - Agents**	114
Hypnotics	114
*Hypophosphatasia (Hpp) Agents***	115
*Ibs Agent - Mu-Opioid Receptor Agonists***	115
*Insulin-Incretin Mimetic Combinations***	115
*Integrin Receptor Antagonists***	115
*Interleukin Antagonists***	115
*Interleukin-5 Antagonists (Igg1 Kappa)***	115
*Interleukin-5 Antagonists (Igg4 Kappa)***	115
*Isocitrate Dehydrogenase-2 (Idh2) Inhibitors***	115
Laxatives	116
*Leptin Analogues***	117
*Lhrh/Gnrh Agonist Analog Combinations***	117
Local Anesthetics-Parenteral	117
*Lymphocyte Function-Associated Antigen-1 (Lfa-1) Antag***	118
*Lysosomal Acid Lipase (Lal) Deficiency - Agents***	118
Macrolides	118
Medical Devices	119
Migraine Products	124
Minerals & Electrolytes	125
Mouth/Throat/Dental Agents	127
*Mucopolysaccharidosis Iv (Mps Iv) - Agents***	128
Multivitamins	128
Musculoskeletal Therapy Agents	130

Nasal Agents - Systemic And Topical	131
*Neprilysin Inhib (Arni)-Angiotensin Ii Recept Antag Comb***	132
*Neurogenic Orthostatic Hypotension (Noh) - Agents***	132
Neuromuscular Agents	132
Ophthalmic Agents	133
*Orexin Receptor Antagonists***	138
Otic Agents	138
*Oxaborole-Related Antifungals - Topical***	138
Oxytocics	138
*Passive Immunizing Agents - Combinations***	138
Passive Immunizing Agents	139
*Pcsk9 Inhibitors***	140
Penicillins	140
Pharmaceutical Adjuvants	141
*Phosphatidylinositol 3-Kinase (Pi3k) Inhibitors***	141
*Phosphodiesterase 4 (Pde4) Inhibitors - Topical***	141
*Phosphodiesterase 4 (Pde4) Inhibitors***	141
*Poly (Adp-Ribose) Polymerase (Parp) Inhibitors**	141
*Poly (Adp-Ribose) Polymerase (Parp) Inhibitors***	142
*Potassium Removing Agents***	142
Progestins	142
*Protease-Activated Receptor-1 (Par-1) Antagonists***	142
Psychotherapeutic And Neurological Agents - Misc.	142
*Pulmonary Fibrosis Agents - Kinase Inhibitors***	146
*Pulmonary Fibrosis Agents***	146
*Pulmonary Hypertension - Prostacyclin Receptor Agonist***	146
Respiratory Agents - Misc.	146
*Serotonin Modulators***	146
*SglT2 Inhibitor - Dpp-4 Inhibitor Combinations***	147
*Sinus Node Inhibitors**	147
*Sodium-Glucose Co-Transporter 2 Inhibitor-Biguanide Comb***	147
Sulfonamides	147
Tetracyclines	147
Thyroid Agents	148
Toxoids	149
*Tryptophan Hydroxylase Inhibitors***	149
Ulcer Drugs	149
Urinary Anti-Infectives	152
Urinary Antispasmodics	152
Vaginal Products	153
Vasopressors	154
Vitamins	154

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Group Formulary

Notes

= Brand-name drug expected to become available generically in the near future. After the generic drug becomes available, the brand-name drug may be covered at a higher non-preferred copay and/or added to the Formulary Exclusion List. The brand-name drug may also be subject to precertification and/or step-therapy.

LGC = Lowest Generic Copay

MA = Step Therapy does not apply to members residing in Massachusetts.

N1 = Refer to member plan documents for Erectile Dysfunction use/coverage

N5 = Drug may be covered by some plans

PA = Prior Authorization Applies

QL = Quantity Limit

Select OTC = Select OTC

Program if your pharmacy plan includes this program you may have coverage for products noted with a doctors prescription. Please see your plan benefit information for specific coverage details.

SP = You may pay higher out of pocket costs and may be required to get these products at an Aetna Specialty Pharmacy network provider, like Aetna Specialty Pharmacy. Specialty products are limited to a 30 day supply.

ST = Step Therapy Applies

Status

CE = Copay Exception: Available to some members at no cost with a prescription from your provider when obtained at an in-network pharmacy. Certain limitations may apply.

M = Coverage where required by state law

NC = Not Covered

Tier 1 = Generic

Tier 1 = Generic

Tier 2 = Preferred Brand

Tier 3 = Non-Preferred Brand and Generic

Tier 4 = Tier 4

lowercase italics = Generic drugs
UPPERCASE = Brand name drugs

Drug	Status	Notes
Adhd/Anti-Narcolepsy/Anti-Obesity/Anorexiant		
ADDERALL	NC	N5
ADDERALL XR	NC	N5
ADZENYS XR-ODT	Tier 3	PA; ST; QL

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
<i>amphetamine-dextroamphet er</i>	Tier 1	QL
<i>amphetamine-dextroamphetamine</i>	Tier 1	QL
APTENSIO XR	Tier 3	PA; ST; QL
<i>armodafinil oral tablet 150 mg, 200 mg, 250 mg, 50 mg</i>	Tier 1	PA; QL
<i>atomoxetine hcl oral capsule 10 mg, 100 mg, 18 mg, 25 mg, 40 mg, 60 mg, 80 mg</i>	Tier 1	QL
<i>benzphetamine hcl oral tablet 50 mg</i>	M	Only covered in states: DC and excluded elsewhere; TIER 4
<i>caffeine citrate oral solution 20 mg/ml</i>	Tier 1	
<i>clonidine hcl er</i>	Tier 1	PA; QL
CONCERTA	NC	N5
COTEMPLA XR-ODT	Tier 3	PA; ST; QL
DAYTRANA	Tier 3	PA; ST; #; QL
DESOXYN	NC	N5
DEXEDRINE ORAL CAPSULE EXTENDED RELEASE 24 HOUR	NC	N5
<i>dexmethylphenidate hcl</i>	Tier 1	QL
<i>dexmethylphenidate hcl er</i>	Tier 1	QL
<i>dextroamphetamine sulfate er</i>	Tier 1	QL
<i>dextroamphetamine sulfate oral solution</i>	Tier 1	QL
<i>dextroamphetamine sulfate oral tablet</i>	Tier 1	QL
<i>diethylpropion hcl er</i>	M	Only covered in states: DC and excluded elsewhere; TIER 4
<i>diethylpropion hcl oral</i>	M	Only covered in states: DC and excluded elsewhere; TIER 3
DYANAVAL XR	Tier 3	PA; ST; QL
EVEKEO	Tier 3	PA; ST; QL
FOCALIN	NC	N5
FOCALIN XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 15 MG, 30 MG, 40 MG, 5 MG	NC	N5
FOCALIN XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 20 MG, 25 MG, 35 MG	Tier 3	ST; QL
<i>guanfacine hcl er</i>	Tier 1	PA; QL
INTUNIV	NC	N5

Drug	Status	Notes
KAPVAY ORAL TABLET EXTENDED RELEASE 12 HOUR	NC	N5
METADATE ER ORAL TABLET EXTENDED RELEASE 20 MG	Tier 1	QL
<i>methamphetamine hcl</i>	Tier 1	PA; QL
METHYLIN ORAL SOLUTION	NC	N5
<i>methylphenidate hcl er (cd)</i>	Tier 1	QL
<i>methylphenidate hcl er (la) oral capsule extended release 24 hour 20 mg, 30 mg, 40 mg, 60 mg</i>	Tier 1	QL
<i>methylphenidate hcl er oral tablet extended release 10 mg, 18 mg, 20 mg, 27 mg, 36 mg, 54 mg</i>	Tier 1	QL
<i>methylphenidate hcl er oral tablet extended release 24 hour 18 mg, 27 mg, 36 mg, 54 mg</i>	Tier 1	QL
<i>methylphenidate hcl oral solution 10 mg/5ml, 5 mg/5ml</i>	Tier 1	QL
<i>methylphenidate hcl oral tablet</i>	Tier 1	QL
<i>methylphenidate hcl oral tablet chewable</i>	Tier 1	
<i>modafinil oral tablet 100 mg, 200 mg</i>	Tier 1	PA; QL
MYDAYIS	Tier 3	PA; ST; QL
NUVIGIL	Tier 3	PA; #; QL
<i>phendimetrazine tartrate</i>	M	Only covered in states: DC and excluded elsewhere; TIER 3
<i>phendimetrazine tartrate er</i>	M	Only covered in states: DC and excluded elsewhere; TIER 4
<i>phentermine hcl oral</i>	M	Only covered in states: DC and excluded elsewhere; TIER 4
PROCENTRA	NC	N5
PROVIGIL	NC	N5
QUILLICHEW ER ORAL TABLET CHEWABLE EXTENDED RELEASE 20 MG, 30 MG, 40 MG	Tier 3	PA; ST; QL
QUILLIVANT XR	Tier 3	PA; ST; QL
REGIMEX	M	Only covered in states: DC and excluded elsewhere; TIER 3
RITALIN	NC	N5

Drug	Status	Notes
RITALIN LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 20 MG, 30 MG, 40 MG	NC	N5
STRATTERA ORAL CAPSULE 10 MG, 100 MG, 18 MG, 25 MG, 40 MG, 60 MG, 80 MG	Tier 3	ST; #; QL
VYVANSE	Tier 2	QL
XENICAL	M	Only covered in states: DC and excluded elsewhere; TIER 4
ZENZEDI ORAL TABLET 10 MG, 5 MG	Tier 1	QL
ZENZEDI ORAL TABLET 15 MG, 2.5 MG, 20 MG, 30 MG, 7.5 MG	NC	
Aminoglycosides		
<i>amikacin sulfate injection solution 1 gm/4ml, 500 mg/2ml</i>	Tier 1	
BETHKIS	Tier 4	SP; QL
<i>gentamicin in saline intravenous solution 0.8-0.9 mg/ml-%, 1-0.9 mg/ml-%, 1.2-0.9 mg/ml-%, 1.6- 0.9 mg/ml-%, 2-0.9 mg/ml-%</i>	Tier 1	
<i>gentamicin sulfate injection</i>	Tier 4	
<i>gentamicin sulfate intravenous</i>	Tier 4	
KITABIS PAK	NC	N5
<i>neomycin sulfate oral</i>	Tier 1	
<i>paromomycin sulfate oral</i>	Tier 1	
<i>streptomycin sulfate intramuscular</i>	Tier 4	
TOBI	NC	N5; SP
TOBI PODHALER	Tier 4	SP; QL
<i>tobramycin inhalation</i>	Tier 4	SP; QL
<i>tobramycin sulfate injection</i>	Tier 4	
Analgesics - Anti-Inflammatory		
ACTEMRA INTRAVENOUS	Tier 4	PA; ST; SP
ACTEMRA SUBCUTANEOUS	Tier 4	PA; ST; SP; QL
ANAPROX DS	NC	N5
ARAVA ORAL TABLET 10 MG	NC	N5
ARAVA ORAL TABLET 20 MG	NC	
ARCALYST	Tier 4	PA; SP
ARTHROTEC ORAL TABLET DELAYED RELEASE	NC	N5

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
CELEBREX	NC	N5
<i>celecoxib oral</i>	Tier 1	QL
DAYPRO	NC	N5
<i>diclofenac potassium</i>	Tier 1	
<i>diclofenac sodium er</i>	Tier 1	
<i>diclofenac sodium oral tablet delayed release 25 mg, 50 mg</i>	Tier 1	
<i>diclofenac sodium oral tablet delayed release 75 mg</i>	Tier 1	LGC
<i>diclofenac-misoprostol oral tablet delayed release</i>	Tier 1	
DUEXIS	NC	
EC-NAPROSYN	NC	N5
ENBREL MINI	Tier 4	PA; ST; SP; QL
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 25 MG/0.5ML, 50 MG/ML	Tier 4	PA; ST; SP; QL
ENBREL SUBCUTANEOUS SOLUTION RECONSTITUTED	Tier 4	PA; ST; QL
ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier 4	PA; ST; SP; QL
<i>etodolac er</i>	Tier 1	
<i>etodolac oral</i>	Tier 1	
FELDENE	NC	N5
<i>fenoprofen calcium oral</i>	Tier 1	
<i>flurbiprofen oral</i>	Tier 1	
HUMIRA PEDIATRIC CROHNS START SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.8ML	Tier 4	PA; ST; SP; QL
HUMIRA PEN SUBCUTANEOUS PEN-INJECTOR KIT	Tier 4	PA; ST; SP; QL
HUMIRA PEN-CROHNS STARTER SUBCUTANEOUS PEN-INJECTOR KIT	Tier 4	PA; ST; SP; QL
HUMIRA PEN-PSORIASIS STARTER SUBCUTANEOUS PEN-INJECTOR KIT	Tier 4	PA; ST; SP; QL
HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.2ML, 20 MG/0.4ML, 40 MG/0.8ML	Tier 4	PA; ST; SP; QL

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
IBUPROFEN COMFORT PAC	NC	
<i>ibuprofen oral tablet 400 mg, 600 mg, 800 mg</i>	Tier 1	LGC
IC 400	NC	
IC 800	NC	
ILARIS	Tier 4	PA; SP
ILARIS (150MG DELIVERED)	Tier 4	PA; SP
INDOCIN ORAL	Tier 3	
INDOCIN RECTAL	Tier 3	
<i>indomethacin er</i>	Tier 1	
<i>indomethacin oral</i>	Tier 1	QL
<i>ketoprofen er</i>	Tier 1	
<i>ketoprofen oral</i>	Tier 1	
<i>ketorolac tromethamine injection solution 15 mg/ml, 60 mg/2ml</i>	Tier 1	
<i>ketorolac tromethamine intramuscular solution 60 mg/2ml</i>	Tier 1	
<i>ketorolac tromethamine oral</i>	Tier 1	QL
KEVZARA	Tier 4	PA; ST; SP; QL
KINERET SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier 4	PA; ST; SP; QL
<i>leflunomide oral</i>	Tier 1	QL
<i>meclofenamate sodium oral</i>	Tier 1	
<i>mefenamic acid oral</i>	Tier 1	
<i>meloxicam oral tablet</i>	Tier 1	LGC
MOBIC ORAL TABLET	NC	N5
<i>nabumetone oral</i>	Tier 1	
NALFON ORAL CAPSULE 400 MG	Tier 3	
NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 375 MG	NC	N5
NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 500 MG, 750 MG	NC	
NAPROSYN ORAL TABLET 250 MG, 500 MG	NC	N5
<i>naproxen dr</i>	Tier 1	
<i>naproxen oral suspension</i>	Tier 1	
<i>naproxen oral tablet</i>	Tier 1	LGC

Drug	Status	Notes
<i>naproxen sodium er</i>	NC	
<i>naproxen sodium oral tablet 275 mg, 550 mg</i>	Tier 1	
ORENCIA CLICKJECT	Tier 4	PA; ST; SP; QL
ORENCIA INTRAVENOUS	Tier 4	PA; ST; SP
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 125 MG/ML, 50 MG/0.4ML, 87.5 MG/0.7ML	Tier 4	PA; ST; SP; QL
OTREXUP SUBCUTANEOUS SOLUTION AUTO-INJECTOR 10 MG/0.4ML, 15 MG/0.4ML, 17.5 MG/0.4ML, 20 MG/0.4ML, 22.5 MG/0.4ML, 25 MG/0.4ML	Tier 4	ST; SP
OTREXUP SUBCUTANEOUS SOLUTION AUTO-INJECTOR 12.5 MG/0.4ML	Tier 4	ST
<i>oxaprozin</i>	Tier 1	
<i>piroxicam oral</i>	Tier 1	
PONSTEL	NC	N5
RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 10 MG/0.2ML, 12.5 MG/0.25ML, 15 MG/0.3ML, 17.5 MG/0.35ML, 20 MG/0.4ML, 22.5 MG/0.45ML, 25 MG/0.5ML, 30 MG/0.6ML, 7.5 MG/0.15ML	Tier 4	ST; SP
RIDAURA	Tier 3	
SIMPONI ARIA	Tier 4	PA; ST; SP; QL
SIMPONI SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier 4	PA; ST; SP; QL
SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier 4	PA; ST; SP; QL
SPRIX	NC	#
<i>sulindac oral</i>	Tier 1	
TIVORBEX	Tier 3	QL
<i>tolmetin sodium</i>	Tier 1	
VIMOVO	NC	
VIVLODEX	Tier 3	ST; QL
XELJANZ	Tier 4	PA; ST; SP; QL
XELJANZ XR	Tier 4	PA; ST; SP; QL
ZIPSOR	NC	
ZORVOLEX	Tier 3	QL

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
Analgesics - Nonnarcotic		
ALLZITAL	Tier 3	
<i>aspir-81</i>	CE	
<i>aspir-low</i>	CE	
<i>bayer aspirin ec low dose</i>	CE	
<i>bayer low dose oral tablet chewable</i>	CE	
<i>butalbital-acetaminophen oral tablet 50-325 mg</i>	Tier 1	
<i>butalbital-apap-caffeine oral capsule 50-325-40 mg</i>	Tier 1	
<i>butalbital-apap-caffeine oral tablet 50-325-40 mg</i>	Tier 1	
<i>butalbital-aspirin-caffeine oral capsule</i>	Tier 1	
<i>capacet</i>	Tier 1	
<i>childrens aspirin</i>	CE	
<i>diflunisal oral</i>	Tier 1	
<i>ec-81 aspirin</i>	CE	
ECOTRIN	CE	
<i>ecotrin low strength</i>	CE	
<i>ecpirin</i>	CE	
<i>esgic oral capsule</i>	Tier 3	
ESGIC ORAL TABLET	NC	N5
FIORINAL	NC	N5
<i>marten-tab</i>	Tier 1	
<i>miniprin low dose</i>	CE	
PRIALT	Tier 4	SP
<i>qc aspirin low dose oral tablet delayed release</i>	CE	
<i>st joseph aspirin oral tablet delayed release</i>	CE	
<i>tgt aspirin oral tablet delayed release</i>	CE	
VANATOL LQ	NC	
Analgesics - Opioid		
ABSTRAL	Tier 3	PA; ST; QL
<i>acetaminophen-codeine #2</i>	Tier 1	PA; QL
<i>acetaminophen-codeine #3</i>	Tier 1	PA; QL
<i>acetaminophen-codeine #4</i>	Tier 1	PA; QL
<i>acetaminophen-codeine oral solution</i>	Tier 1	PA

Drug	Status	Notes
<i>acetaminophen-codeine oral tablet</i>	Tier 1	PA; QL
ACTIQ	NC	N5
<i>apap-caff-dihydrocodeine oral capsule</i>	Tier 1	PA; QL
<i>apap-caff-dihydrocodeine oral tablet 325-30-16 mg</i>	NC	
ARYMO ER	Tier 3	PA; ST; QL
<i>ascomp-codeine</i>	Tier 1	PA; QL
BELBUCA	Tier 3	PA; QL
BUNAVAIL BUCCAL FILM 2.1-0.3 MG, 4.2-0.7 MG, 6.3-1 MG	Tier 3	ST; MA; QL
<i>buprenorphine</i>	Tier 1	PA; QL
<i>buprenorphine hcl injection solution 0.3 mg/ml</i>	Tier 1	
<i>buprenorphine hcl sublingual</i>	Tier 1	QL
<i>buprenorphine hcl-naloxone hcl</i>	Tier 1	QL
<i>butalbital-apap-caff-cod</i>	Tier 1	PA; QL
<i>butalbital-asa-caff-codeine</i>	Tier 1	PA; QL
<i>butorphanol tartrate injection</i>	Tier 1	
<i>butorphanol tartrate nasal</i>	Tier 1	PA; QL
BUTRANS	Tier 3	PA; #; QL
<i>codeine sulfate oral tablet</i>	Tier 1	PA; QL
CONZIP	NC	
DEMEROL INJECTION SOLUTION 75 MG/1.5ML	Tier 3	
DEMEROL INJECTION SOLUTION 75 MG/ML	NC	
DEMEROL ORAL	NC	N5
DILAUDID INJECTION SOLUTION 2 MG/ML, 4 MG/ML	Tier 3	
DILAUDID ORAL	NC	N5
DOLOPHINE ORAL TABLET 10 MG	Tier 3	PA; QL
DOLOPHINE ORAL TABLET 5 MG	NC	N5
DURAGESIC-100	NC	N5
DURAGESIC-12	NC	N5
DURAGESIC-25	NC	N5
DURAGESIC-50	NC	N5
DURAGESIC-75	NC	N5

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
<i>duramorph</i>	Tier 1	
EMBEDA	Tier 2	PA; QL
<i>endocet oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg</i>	Tier 1	PA; QL
ENDOCET ORAL TABLET 2.5-325 MG	Tier 1	PA; QL
EXALGO ORAL TABLET ER 24 HOUR ABUSE-DETERRENT 12 MG, 16 MG, 8 MG	NC	N5
EXALGO ORAL TABLET ER 24 HOUR ABUSE-DETERRENT 32 MG	Tier 3	PA; ST; QL
<i>fentanyl</i>	Tier 1	PA; QL
<i>fentanyl citrate buccal</i>	Tier 1	PA; ST; QL
FENTORA BUCCAL TABLET 100 MCG, 200 MCG, 400 MCG, 600 MCG, 800 MCG	Tier 3	PA; ST; #; QL
FIORICET/CODEINE ORAL CAPSULE 50-300-40-30 MG	Tier 3	PA; QL
FIORINAL/CODEINE #3	NC	N5
HYCET	NC	N5
<i>hydrocodone-acetaminophen oral solution 2.5-108 mg/5ml, 5-217 mg/10ml, 7.5-325 mg/15ml</i>	Tier 1	PA
<i>hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg, 2.5-325 mg, 5-300 mg, 5-325 mg, 7.5-300 mg, 7.5-325 mg</i>	Tier 1	PA; QL
<i>hydrocodone-ibuprofen oral tablet 10-200 mg, 5-200 mg, 7.5-200 mg</i>	Tier 1	PA; QL
<i>hydromorphone hcl er oral tablet er 24 hour abuse-deterrent 12 mg, 16 mg, 32 mg, 8 mg</i>	Tier 1	PA; QL
<i>hydromorphone hcl injection solution 1 mg/ml, 2 mg/ml, 4 mg/ml</i>	Tier 1	
<i>hydromorphone hcl oral liquid</i>	Tier 1	PA
<i>hydromorphone hcl oral tablet</i>	Tier 1	PA; QL
<i>hydromorphone hcl pf injection solution 50 mg/5ml</i>	Tier 1	
<i>hydromorphone hcl rectal</i>	Tier 1	PA
HYSINGLA ER	Tier 2	PA; #; QL
IBUDONE ORAL TABLET 10-200 MG	NC	N5
<i>ibudone oral tablet 5-200 mg</i>	Tier 1	PA; QL
INFUMORPH 200	Tier 3	

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
INFUMORPH 500	Tier 3	
KADIAN ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 100 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG	NC	N5
KADIAN ORAL CAPSULE EXTENDED RELEASE 24 HOUR 200 MG, 40 MG	Tier 3	PA; ST; QL
LAZANDA NASAL SOLUTION 100 MCG/ACT, 300 MCG/ACT, 400 MCG/ACT	Tier 3	PA; ST; QL
<i>levorphanol tartrate oral</i>	Tier 1	PA; QL
LORCET	Tier 1	PA; QL
LORCET HD	Tier 1	PA; QL
LORCET PLUS ORAL TABLET 7.5-325 MG	Tier 1	PA; QL
<i>meperidine hcl injection solution 10 mg/ml, 100 mg/ml, 25 mg/ml, 50 mg/ml</i>	Tier 1	
<i>meperidine hcl oral solution</i>	Tier 1	PA
<i>meperidine hcl oral tablet</i>	Tier 1	PA; QL
<i>methadone hcl intensol</i>	Tier 1	PA
<i>methadone hcl oral concentrate</i>	Tier 1	PA
<i>methadone hcl oral solution 10 mg/5ml, 5 mg/5ml</i>	Tier 1	PA; QL
<i>methadone hcl oral tablet</i>	Tier 1	PA; QL
METHADOSE ORAL CONCENTRATE 10 MG/ML	NC	
METHADOSE SUGAR-FREE	NC	
MORPHABOND ER	Tier 3	PA; ST; QL
<i>morphine sulfate (concentrate) oral solution 100 mg/5ml, 20 mg/ml</i>	Tier 1	PA
<i>morphine sulfate (pf) injection solution 0.5 mg/ml</i>	Tier 1	
<i>morphine sulfate (pf) intravenous solution 10 mg/ml, 15 mg/ml</i>	Tier 1	
<i>morphine sulfate er beads</i>	Tier 1	PA; QL
<i>morphine sulfate er oral capsule extended release 24 hour</i>	Tier 1	PA; QL
<i>morphine sulfate er oral tablet extended release 100 mg, 15 mg, 200 mg, 30 mg, 60 mg</i>	Tier 1	PA; QL
<i>morphine sulfate injection solution 10 mg/ml, 5 mg/ml, 8 mg/ml</i>	Tier 1	

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
<i>morphine sulfate oral solution</i>	Tier 1	PA
<i>morphine sulfate oral tablet</i>	Tier 1	PA; QL
<i>morphine sulfate rectal</i>	Tier 1	PA
MS CONTIN ORAL TABLET EXTENDED RELEASE 100 MG, 15 MG, 30 MG, 60 MG	NC	
MS CONTIN ORAL TABLET EXTENDED RELEASE 200 MG	NC	N5
<i>nalbuphine hcl injection</i>	Tier 4	
NORCO	NC	N5
NUCYNTA	Tier 3	PA; ST; QL
NUCYNTA ER	Tier 3	PA; ST; QL
OPANA ER ORAL TABLET ER 12 HOUR ABUSE-DETERRENT	Tier 3	PA; ST; QL
OPANA ORAL	NC	N5
OXAYDO	Tier 2	PA; QL
<i>oxycodone hcl er oral tablet er 12 hour abuse-deterrent 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 60 mg, 80 mg</i>	Tier 1	PA; QL
<i>oxycodone hcl oral capsule</i>	Tier 1	PA; QL
<i>oxycodone hcl oral concentrate 100 mg/5ml</i>	Tier 1	PA
<i>oxycodone hcl oral solution</i>	Tier 1	PA
<i>oxycodone hcl oral tablet</i>	Tier 1	PA; QL
<i>oxycodone-acetaminophen oral solution</i>	Tier 1	PA
<i>oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg</i>	Tier 1	PA; QL
<i>oxycodone-aspirin oral tablet 4.8355-325 mg</i>	Tier 1	PA; QL
<i>oxycodone-ibuprofen</i>	Tier 1	PA; QL
OXYCONTIN ORAL TABLET ER 12 HOUR ABUSE-DETERRENT	Tier 2	PA; QL
<i>oxymorphone hcl</i>	Tier 1	PA; QL
<i>oxymorphone hcl er</i>	Tier 1	PA; QL
<i>pentazocine-naloxone hcl</i>	Tier 1	PA; QL
PERCOCET ORAL TABLET 10-325 MG, 2.5-325 MG, 5-325 MG, 7.5-325 MG	NC	N5
PRIMLEV	Tier 3	PA; QL
ROXICODONE ORAL TABLET	NC	N5

Drug	Status	Notes
SUBOXONE SUBLINGUAL FILM 12-3 MG, 2-0.5 MG, 4-1 MG, 8-2 MG	Tier 3	#; QL
SUBSYS	Tier 3	PA; ST; QL
SYNALGOS-DC	Tier 3	PA; QL
TALWIN	Tier 3	
<i>tramadol hcl er (biphasic)</i>	Tier 1	PA; QL
<i>tramadol hcl er oral capsule extended release 24 hour</i>	NC	
<i>tramadol hcl er oral tablet extended release 24 hour</i>	Tier 1	PA; QL
<i>tramadol hcl oral</i>	Tier 1	PA; QL
<i>tramadol-acetaminophen</i>	Tier 1	PA; QL
TREZIX ORAL CAPSULE 320.5-30-16 MG	Tier 3	PA; QL
TYLENOL WITH CODEINE #3	NC	N5
TYLENOL WITH CODEINE #4	NC	N5
ULTRACET	NC	N5
ULTRAM	NC	N5
VERDROCET	Tier 1	PA; QL
<i>vicodin es oral tablet 7.5-300 mg</i>	Tier 1	PA; QL
<i>vicodin hp oral tablet 10-300 mg</i>	Tier 1	PA; QL
<i>vicodin oral tablet 5-300 mg</i>	Tier 1	PA; QL
XODOL	NC	N5
XTAMPZA ER	Tier 3	PA; ST; QL
XYLON	Tier 1	QL
ZOHYDRO ER ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT	Tier 3	PA; ST; QL
ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 0.7-0.18 MG, 1.4-0.36 MG, 11.4-2.9 MG, 2.9-0.71 MG, 5.7-1.4 MG, 8.6-2.1 MG	Tier 3	ST; MA; QL
Androgens-Anabolic		
ANADROL-50	Tier 3	
ANDRODERM TRANSDERMAL PATCH 24 HOUR	NC	
ANDROGEL PUMP TRANSDERMAL GEL 20.25 MG/ACT (1.62%)	Tier 2	PA; #; QL

Drug	Status	Notes
ANDROGEL TRANSDERMAL GEL 20.25 MG/1.25GM (1.62%), 40.5 MG/2.5GM (1.62%)	Tier 2	PA; #; QL
ANDROGEL TRANSDERMAL GEL 25 MG/2.5GM (1%), 50 MG/5GM (1%)	NC	N5; #
ANDROID	NC	N5
<i>danazol oral</i>	Tier 1	
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION	NC	N5
FORTESTA	NC	
METHITEST	Tier 2	
<i>methyltestosterone oral</i>	Tier 1	
NATESTO	NC	
OXANDRIN	NC	N5
<i>oxandrolone oral</i>	Tier 1	
STRIANT	NC	
TESTIM	NC	N5
<i>testosterone cypionate intramuscular solution 100 mg/ml, 200 mg/ml</i>	Tier 1	QL
<i>testosterone enanthate intramuscular solution</i>	Tier 1	
<i>testosterone transdermal gel 10 mg/lact (2%)</i>	Tier 1	QL
<i>testosterone transdermal gel 12.5 mg/lact (1%), 25 mg/2.5gm (1%), 50 mg/5gm (1%)</i>	Tier 1	PA; QL
<i>testosterone transdermal solution</i>	Tier 3	PA; QL
TESTRED	NC	N5; #
VOGELXO PUMP	NC	N5
VOGELXO TRANSDERMAL GEL 50 MG/5GM (1%)	NC	N5
Anorectal Agents		
ANA-LEX	NC	
ANALPRAM-HC RECTAL CREAM	NC	
ANALPRAM-HC RECTAL LOTION 2.5-1 %	Tier 3	
ANUSOL-HC RECTAL CREAM	NC	N5
<i>colocort</i>	Tier 1	
CORTENEMA	NC	N5

Drug	Status	Notes
CORTIFOAM	Tier 3	
<i>hydrocortisone ace-pramoxine rectal cream 1-1 %</i>	Tier 1	
<i>hydrocortisone rectal enema</i>	Tier 1	
<i>lidocaine-hydrocortisone ace rectal</i>	NC	
<i>pramcort rectal</i>	Tier 1	
PROCTOCORT RECTAL CREAM	NC	
PROCTOFOAM HC	Tier 3	
<i>procto-pak</i>	Tier 1	
<i>proctosol hc</i>	Tier 1	
<i>proctozone-hc rectal</i>	Tier 1	
RECTIV	Tier 3	QL
UCERIS RECTAL	Tier 3	PA; #; QL
Anthelmintics		
ALBENZA	Tier 3	QL
BILTRICIDE	Tier 2	
EMVERM	Tier 1	QL
<i>ivermectin oral</i>	Tier 1	
STROMEKTOL	NC	N5
Antianginal Agents		
DILATRATE-SR	Tier 3	
GONITRO	Tier 3	
ISORDIL TITRADOSE ORAL TABLET 40 MG	Tier 3	
ISORDIL TITRADOSE ORAL TABLET 5 MG	NC	N5
<i>isosorbide dinitrate er</i>	Tier 1	
<i>isosorbide dinitrate oral</i>	Tier 1	
<i>isosorbide mononitrate</i>	Tier 1	
<i>isosorbide mononitrate er</i>	Tier 1	
<i>minitran</i>	Tier 1	
NITRO-BID	Tier 3	
NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.3 MG/HR, 0.8 MG/HR	Tier 3	
<i>nitroglycerin in d5w</i>	Tier 1	
<i>nitroglycerin intravenous</i>	Tier 1	

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
<i>nitroglycerin sublingual</i>	Tier 1	
<i>nitroglycerin transdermal patch 24 hour</i>	Tier 1	
<i>nitroglycerin translingual aerosol solution</i>	Tier 1	
<i>nitroglycerin translingual solution</i>	Tier 1	QL
NITROLINGUAL	NC	N5
NITROMIST	Tier 3	
NITROSTAT	Tier 3	ST
<i>nitro-time oral capsule extended release 2.5 mg, 6.5 mg</i>	Tier 1	
RANEXA	Tier 3	QL
Antianxiety Agents		
<i>alprazolam er</i>	Tier 1	QL
ALPRAZOLAM INTENSOL	Tier 3	
<i>alprazolam oral</i>	Tier 1	
<i>alprazolam xr</i>	Tier 1	QL
ATIVAN ORAL	NC	
<i>buspirone hcl oral tablet 10 mg, 5 mg</i>	Tier 1	LGC
<i>buspirone hcl oral tablet 15 mg, 30 mg, 7.5 mg</i>	Tier 1	
<i>chlordiazepoxide hcl</i>	Tier 1	
<i>clorazepate dipotassium</i>	Tier 1	
<i>diazepam intensol</i>	Tier 3	
<i>diazepam oral concentrate</i>	Tier 1	
<i>diazepam oral solution 1 mg/ml</i>	Tier 1	
<i>diazepam oral tablet</i>	Tier 1	
<i>hydroxyzine hcl intramuscular</i>	Tier 1	
<i>hydroxyzine hcl oral syrup</i>	Tier 1	
<i>hydroxyzine pamoate oral</i>	Tier 1	
<i>lorazepam oral</i>	Tier 1	
<i>meprobamate</i>	Tier 1	
<i>oxazepam</i>	Tier 1	
TRANXENE-T ORAL TABLET 7.5 MG	NC	N5
VALIUM	NC	N5
VISTARIL	NC	N5
XANAX	NC	N5
XANAX XR	NC	N5

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
Antiarrhythmics		
<i>amiodarone hcl oral tablet 200 mg, 400 mg</i>	Tier 1	
<i>disopyramide phosphate oral</i>	Tier 1	
<i>dofetilide</i>	Tier 1	
<i>flecainide acetate</i>	Tier 1	
<i>lidocaine hcl (cardiac) intravenous solution 20 mg/ml</i>	Tier 1	
<i>lidocaine in d5w</i>	Tier 1	
<i>mexiletine hcl oral</i>	Tier 1	
MULTAQ	Tier 3	QL
NEXTERONE	Tier 3	
NORPACE CR	Tier 3	
<i>pacerone oral tablet 100 mg, 200 mg, 400 mg</i>	Tier 1	
<i>procainamide hcl injection</i>	Tier 1	
<i>propafenone hcl</i>	Tier 1	
<i>propafenone hcl er</i>	Tier 1	SP; QL
<i>quinidine gluconate er</i>	Tier 1	
<i>quinidine gluconate injection</i>	Tier 1	
<i>quinidine sulfate oral</i>	Tier 1	
RYTHMOL SR	NC	N5
TIKOSYN	Tier 3	#
Antiasthmatic And Bronchodilator Agents		
ACCOLATE	Tier 3	QL
ADVAIR DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100-50 MCG/DOSE, 250-50 MCG/DOSE, 500-50 MCG/DOSE	Tier 3	#, QL
ADVAIR HFA	Tier 3	#, QL
AEROSPAN	Tier 3	PA; ST; QL
AIRDUO RESPICLICK 113/14	Tier 3	PA; ST; QL
AIRDUO RESPICLICK 232/14	Tier 3	PA; ST; QL
AIRDUO RESPICLICK 55/14	Tier 3	PA; ST; QL
<i>albuterol sulfate er</i>	Tier 1	
<i>albuterol sulfate inhalation</i>	Tier 1	
<i>albuterol sulfate oral</i>	Tier 1	
ALVESCO	Tier 3	PA; ST; QL

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
<i>aminophylline intravenous</i>	Tier 1	
ANORO ELLIPTA	Tier 2	QL
ARCAPTA NEOHALER	Tier 3	PA; ST; QL
ARMONAIR RESPICLICK 113	Tier 3	PA; ST; QL
ARMONAIR RESPICLICK 232	Tier 3	PA; ST; QL
ARMONAIR RESPICLICK 55	Tier 3	PA; ST; QL
ARNUITY ELLIPTA	Tier 3	QL
ASMANEX 120 METERED DOSES	Tier 2	
ASMANEX 14 METERED DOSES	Tier 2	
ASMANEX 30 METERED DOSES	Tier 2	
ASMANEX 60 METERED DOSES	Tier 2	
ASMANEX HFA	Tier 2	
ATROVENT HFA	Tier 3	QL
BEVESPI AEROSPHERE	Tier 3	PA; ST; QL
BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-25 MCG/INH, 200-25 MCG/INH	Tier 2	QL
BROVANA	Tier 3	PA; ST; QL
<i>budesonide inhalation</i>	Tier 1	PA; QL
COMBIVENT RESPIMAT	Tier 2	QL
<i>cromolyn sodium inhalation</i>	Tier 1	
DALIRESP	Tier 3	PA; ST; QL
DULERA	Tier 2	QL
ELIXOPHYLLIN	Tier 3	
FLOVENT DISKUS	Tier 3	#; QL
FLOVENT HFA	Tier 3	QL
<i>fluticasone-salmeterol</i>	Tier 1	QL
<i>ipratropium bromide inhalation</i>	Tier 1	
<i>ipratropium-albuterol</i>	Tier 1	
<i>levalbuterol hcl inhalation nebulization solution 0.31 mg/3ml, 0.63 mg/3ml, 1.25 mg/3ml</i>	Tier 1	
<i>metaproterenol sulfate oral</i>	Tier 1	
<i>montelukast sodium oral</i>	Tier 1	QL
PERFOROMIST	Tier 3	PA; ST; QL
PROAIR HFA	Tier 2	#

Drug	Status	Notes
PROVENTIL HFA	Tier 3	ST; #
PULMICORT	NC	N5
PULMICORT FLEXHALER	Tier 3	PA; ST; QL
QVAR INHALATION AEROSOL SOLUTION	Tier 2	
SEEBRI NEOHALER	Tier 3	PA; ST; QL
SEREVENT DISKUS	Tier 3	QL
SINGULAIR	NC	N5
SPIRIVA HANDIHALER	Tier 2	QL
SPIRIVA RESPIMAT	Tier 2	QL
STIOLTO RESPIMAT	Tier 2	QL
STRIVERDI RESPIMAT	Tier 3	PA; ST; QL
SYMBICORT	Tier 2	QL
<i>terbutaline sulfate injection</i>	Tier 1	
<i>terbutaline sulfate oral</i>	Tier 1	
THEO-24 ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 400 MG	Tier 2	
<i>theochron oral tablet extended release 12 hour 100 mg, 200 mg, 300 mg</i>	Tier 1	
<i>theophylline</i>	Tier 1	
<i>theophylline er</i>	Tier 1	
TRELEGY ELLIPTA	Tier 3	QL
TUDORZA PRESSAIR INHALATION AEROSOL POWDER BREATH ACTIVATED	Tier 3	ST; QL
UTIBRON NEOHALER	Tier 3	PA; ST; QL
VENTOLIN HFA	Tier 2	
XOLAIR	Tier 4	PA; ST; SP
XOPENEX	NC	N5
XOPENEX CONCENTRATE	NC	N5
XOPENEX HFA	Tier 3	ST; QL
<i>zafirlukast</i>	Tier 1	QL
<i>zileuton er</i>	Tier 1	QL
ZYFLO	Tier 3	QL
ZYFLO CR	Tier 3	QL

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
Anticoagulants		
ARIXTRA	NC	N5
BEVYXXA	Tier 3	PA; ST; QL
COUMADIN ORAL	NC	N5
ELIQUIS	Tier 2	
<i>enoxaparin sodium</i>	Tier 1	QL
<i>fondaparinux sodium</i>	Tier 1	QL
FRAGMIN SUBCUTANEOUS SOLUTION 10000 UNIT/ML, 12500 UNIT/0.5ML, 15000 UNIT/0.6ML, 18000 UNIT/0.72ML, 2500 UNIT/0.2ML, 5000 UNIT/0.2ML, 7500 UNIT/0.3ML, 95000 UNIT/3.8ML	Tier 3	QL
<i>heparin sodium (porcine) injection solution 1000 unit/ml, 10000 unit/ml, 20000 unit/ml, 5000 unit/ml</i>	Tier 1	
<i>heparin sodium (porcine) pf</i>	Tier 1	
IPRIVASK	Tier 3	QL
<i>jantoven</i>	Tier 1	LGC
LOVENOX	NC	N5
PRADAXA	Tier 3	ST
SAVAYSA	Tier 3	ST
<i>warfarin sodium oral</i>	Tier 1	LGC
XARELTO	Tier 2	
XARELTO STARTER PACK	Tier 2	
Anticonvulsants		
APTIOM ORAL TABLET 200 MG, 400 MG, 600 MG, 800 MG	Tier 3	QL
BANZEL ORAL SUSPENSION	Tier 3	
BANZEL ORAL TABLET	Tier 3	QL
BRIVIACT ORAL SOLUTION	Tier 3	PA; QL
BRIVIACT ORAL TABLET	Tier 3	PA; QL
<i>carbamazepine er</i>	Tier 1	
<i>carbamazepine oral suspension</i>	Tier 1	
<i>carbamazepine oral tablet</i>	Tier 1	LGC
<i>carbamazepine oral tablet chewable</i>	Tier 1	
CARBATROL	NC	N5

Drug	Status	Notes
CELONTIN	Tier 2	
CEREBYX	Tier 4	
<i>clonazepam oral</i>	Tier 1	
DEPAKENE ORAL CAPSULE	NC	N5
DEPAKENE ORAL SOLUTION	NC	N5
DEPAKOTE	NC	N5
DEPAKOTE ER	NC	N5
DEPAKOTE SPRINKLES ORAL CAPSULE DELAYED RELEASE SPRINKLE	NC	N5
DIASTAT ACUDIAL	Tier 2	
DIASTAT PEDIATRIC	Tier 2	
<i>diazepam rectal</i>	Tier 1	QL
DILANTIN INFATABS	NC	N5
DILANTIN ORAL CAPSULE 100 MG	NC	N5
DILANTIN ORAL CAPSULE 30 MG	Tier 2	
DILANTIN ORAL SUSPENSION	NC	N5
<i>divalproex sodium er oral tablet extended release 24 hour</i>	Tier 1	
<i>divalproex sodium oral tablet delayed release</i>	Tier 1	
<i>epitol</i>	Tier 1	LGC
<i>ethosuximide oral</i>	Tier 1	
<i>felbamate</i>	Tier 1	
FELBATOL	NC	N5
<i>fosphenytoin sodium</i>	Tier 4	
FYCOMPA ORAL SUSPENSION	Tier 3	
FYCOMPA ORAL TABLET	Tier 3	QL
<i>gabapentin oral capsule</i>	Tier 1	QL
<i>gabapentin oral solution 250 mg/5ml</i>	Tier 1	
<i>gabapentin oral tablet</i>	Tier 1	QL
GABITRIL ORAL TABLET 12 MG, 16 MG	Tier 3	QL
GABITRIL ORAL TABLET 2 MG, 4 MG	NC	N5
KEPPRA ORAL	NC	N5
KEPPRA XR	NC	N5
KLONOPIN	NC	N5

Drug	Status	Notes
LAMICTAL ODT ORAL KIT	Tier 3	
LAMICTAL ODT ORAL TABLET DISPERSIBLE	NC	N5
LAMICTAL ORAL TABLET	NC	N5
LAMICTAL ORAL TABLET CHEWABLE 25 MG, 5 MG	NC	N5
LAMICTAL STARTER	Tier 3	
LAMICTAL XR ORAL KIT	Tier 3	
LAMICTAL XR ORAL TABLET EXTENDED RELEASE 24 HOUR	NC	N5
<i>lamotrigine er oral tablet extended release 24 hour 100 mg, 200 mg, 25 mg, 250 mg, 300 mg, 50 mg</i>	Tier 1	QL
<i>lamotrigine oral tablet</i>	Tier 1	
<i>lamotrigine oral tablet chewable</i>	Tier 1	
<i>lamotrigine oral tablet dispersible 100 mg, 200 mg, 25 mg, 50 mg</i>	Tier 1	QL
<i>lamotrigine starter kit-blue</i>	Tier 1	
<i>lamotrigine starter kit-green</i>	Tier 1	
<i>lamotrigine starter kit-orange</i>	Tier 1	
<i>levetiracetam er oral tablet extended release 24 hour 500 mg, 750 mg</i>	Tier 1	QL
<i>levetiracetam in nacl</i>	Tier 1	
<i>levetiracetam oral</i>	Tier 1	
LYRICA	Tier 2	
MYSOLINE	NC	N5
NEURONTIN	NC	N5
ONFI ORAL SUSPENSION	Tier 3	
ONFI ORAL TABLET 10 MG, 20 MG	Tier 3	QL
<i>oxcarbazepine</i>	Tier 1	
OXTELLAR XR ORAL TABLET EXTENDED RELEASE 24 HOUR 150 MG, 300 MG, 600 MG	Tier 3	QL
PEGANONE	Tier 3	
PHENYTEK	Tier 2	
<i>phenytoin infatabs</i>	Tier 1	
<i>phenytoin oral suspension 125 mg/5ml</i>	Tier 1	

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
<i>phenytoin oral tablet chewable</i>	Tier 1	
<i>phenytoin sodium extended oral capsule 100 mg</i>	Tier 1	
<i>phenytoin sodium injection</i>	Tier 1	
<i>primidone oral</i>	Tier 1	
QUDEXY XR ORAL CAPSULE ER 24 HOUR SPRINKLE 100 MG, 150 MG, 200 MG, 25 MG, 50 MG	Tier 3	QL
SABRIL	Tier 4	PA; #; SP; QL
SPRITAM	Tier 3	ST; QL
TEGRETOL ORAL SUSPENSION	NC	N5
TEGRETOL ORAL TABLET	NC	N5
TEGRETOL-XR ORAL TABLET EXTENDED RELEASE 12 HOUR 100 MG	NC	N5; #
TEGRETOL-XR ORAL TABLET EXTENDED RELEASE 12 HOUR 200 MG, 400 MG	NC	N5
<i>tiagabine hcl oral tablet 2 mg, 4 mg</i>	Tier 1	QL
TOPAMAX	NC	N5
TOPAMAX SPRINKLE	NC	N5
<i>topiramate oral capsule sprinkle</i>	NC	
<i>topiramate oral tablet</i>	Tier 1	
TRILEPTAL	NC	N5
TROKENDI XR	Tier 3	#; QL
<i>valproate sodium intravenous solution 100 mg/ml</i>	Tier 1	
<i>valproic acid oral capsule</i>	Tier 1	
<i>vigabatrin</i>	Tier 4	PA; SP; QL
VIMPAT INTRAVENOUS	Tier 3	
VIMPAT ORAL SOLUTION	Tier 3	#; QL
VIMPAT ORAL TABLET	Tier 3	#; QL
ZARONTIN	NC	N5
ZONEGRAN	NC	
<i>zonisamide oral</i>	Tier 1	
*Antidementia Agent Combinations***		
NAMZARIC ORAL CAPSULE ER 24 HOUR THERAPY PACK	Tier 2	PA

Drug	Status	Notes
NAMZARIC ORAL CAPSULE EXTENDED RELEASE 24 HOUR 14-10 MG, 28-10 MG	Tier 2	PA; QL
NAMZARIC ORAL CAPSULE EXTENDED RELEASE 24 HOUR 21-10 MG, 7-10 MG	Tier 2	PA
Antidepressants		
<i>amitriptyline hcl oral tablet 10 mg, 100 mg, 25 mg, 50 mg, 75 mg</i>	Tier 1	LGC
<i>amitriptyline hcl oral tablet 150 mg</i>	Tier 1	
<i>amoxapine</i>	Tier 1	
ANAFRANIL	NC	N5
APLENZIN	NC	
<i>bupropion hcl er (sr)</i>	Tier 1	QL
<i>bupropion hcl er (xl)</i>	Tier 1	QL
<i>bupropion hcl oral</i>	Tier 1	QL
CELEXA ORAL TABLET	NC	N5
<i>citalopram hydrobromide oral solution</i>	Tier 1	
<i>citalopram hydrobromide oral tablet 10 mg, 20 mg, 40 mg</i>	Tier 1	LGC; QL
<i>clomipramine hcl oral</i>	Tier 1	
CYMBALTA	NC	N5
<i>desipramine hcl oral</i>	Tier 1	
<i>desvenlafaxine er</i>	Tier 1	
<i>desvenlafaxine succinate er</i>	Tier 1	PA; ST; QL
<i>doxepin hcl oral</i>	Tier 1	
<i>duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg</i>	Tier 1	QL
<i>duloxetine hcl oral capsule delayed release particles 40 mg</i>	Tier 1	
EFFEXOR XR	NC	N5
EMSAM	Tier 3	QL
<i>escitalopram oxalate oral solution</i>	Tier 1	QL
<i>escitalopram oxalate oral tablet 10 mg, 20 mg, 5 mg</i>	Tier 1	QL
FETZIMA	Tier 3	PA; ST; QL
FETZIMA TITRATION	Tier 3	PA; ST; QL

Drug	Status	Notes
<i>fluoxetine hcl oral capsule 10 mg, 20 mg, 40 mg</i>	Tier 1	LGC; QL
<i>fluoxetine hcl oral capsule delayed release</i>	Tier 1	QL
<i>fluoxetine hcl oral solution</i>	Tier 1	
<i>fluoxetine hcl oral tablet 10 mg</i>	Tier 1	
<i>fluoxetine hcl oral tablet 20 mg</i>	Tier 1	QL
<i>fluoxetine hcl oral tablet 60 mg</i>	Tier 3	QL
<i>fluvoxamine maleate er</i>	Tier 1	QL
<i>fluvoxamine maleate oral tablet 100 mg, 25 mg, 50 mg</i>	Tier 1	QL
FORFIVO XL	NC	
<i>imipramine pamoate</i>	Tier 1	
KHEDEZLA	Tier 3	PA; ST; QL
LEXAPRO ORAL TABLET	NC	N5
<i>maprotiline hcl</i>	Tier 1	QL
MARPLAN	Tier 3	
<i>mirtazapine oral</i>	Tier 1	QL
NARDIL	NC	N5
<i>nefazodone hcl</i>	Tier 1	
NORPRAMIN ORAL TABLET 10 MG, 25 MG	NC	N5
<i>nortriptyline hcl oral capsule 10 mg, 25 mg</i>	Tier 1	LGC
<i>nortriptyline hcl oral capsule 50 mg, 75 mg</i>	Tier 1	
<i>nortriptyline hcl oral solution</i>	Tier 1	
PAMELOR ORAL CAPSULE	NC	N5
PARNATE	NC	N5
<i>paroxetine hcl er oral tablet extended release 24 hour 12.5 mg, 25 mg, 37.5 mg</i>	Tier 1	QL
<i>paroxetine hcl oral tablet 10 mg, 20 mg, 30 mg, 40 mg</i>	Tier 1	LGC; QL
PAXIL CR	NC	N5
PAXIL ORAL SUSPENSION	Tier 3	QL
PAXIL ORAL TABLET	NC	N5
PEXEVA	NC	
<i>phenelzine sulfate oral</i>	Tier 1	
PRISTIQ ORAL TABLET EXTENDED RELEASE 24 HOUR 100 MG, 50 MG	Tier 3	PA; ST; #; QL

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
PRISTIQ ORAL TABLET EXTENDED RELEASE 24 HOUR 25 MG	Tier 3	PA; ST; #
<i>protriptyline hcl</i>	Tier 1	
PROZAC ORAL CAPSULE	NC	N5
REMERON	NC	N5
REMERON SOLTAB	NC	N5
<i>sertraline hcl oral concentrate</i>	Tier 1	
<i>sertraline hcl oral tablet 100 mg, 25 mg, 50 mg</i>	Tier 1	LGC; QL
SURMONTIL ORAL CAPSULE 25 MG, 50 MG	Tier 3	
TOFRANIL ORAL TABLET 50 MG	Tier 3	
<i>tranylepromine sulfate</i>	Tier 1	
<i>trazodone hcl oral tablet 100 mg, 150 mg, 50 mg</i>	Tier 1	LGC
<i>trazodone hcl oral tablet 300 mg</i>	Tier 1	
TRINTELLIX	Tier 3	PA; ST; QL
<i>venlafaxine hcl er oral capsule extended release 24 hour 150 mg, 37.5 mg, 75 mg</i>	Tier 1	QL
<i>venlafaxine hcl er oral tablet extended release 24 hour 150 mg, 37.5 mg, 75 mg</i>	NC	
<i>venlafaxine hcl er oral tablet extended release 24 hour 225 mg</i>	Tier 1	QL
<i>venlafaxine hcl oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg</i>	Tier 1	QL
VIIBRYD ORAL TABLET	Tier 3	QL
VIIBRYD STARTER PACK	Tier 3	
WELLBUTRIN SR	NC	N5
WELLBUTRIN XL	NC	
ZOLOFT	NC	
Antidiabetics		
<i>acarbose</i>	Tier 1	
ACTOPLUS MET	NC	N5
ACTOPLUS MET XR	Tier 3	QL
ACTOS	NC	N5
ADLYXIN	NC	
ADLYXIN STARTER PACK	NC	

Drug	Status	Notes
AFREZZA INHALATION POWDER 12 UNIT, 4 & 8 & 12 UNIT, 4 (30) & 8 (60) UNIT, 4 (60) & 8 (30) UNIT, 4 (90) & 8 (90) UNIT, 4 UNIT, 8 (60)& 12 (30) UNIT, 8 UNIT	Tier 3	PA
<i>alogliptin benzoate</i>	Tier 1	QL
<i>alogliptin-metformin hcl</i>	Tier 1	QL
<i>alogliptin-pioglitazone</i>	Tier 1	QL
AMARYL	NC	N5
APIDRA	Tier 3	ST
APIDRA SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier 3	ST
AVANDIA ORAL TABLET 2 MG, 4 MG	Tier 3	QL
BASAGLAR KWIKPEN	Tier 3	ST
BYDUREON SUBCUTANEOUS PEN-INJECTOR	Tier 3	ST; QL
BYETTA 10 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier 3	ST; #; QL
BYETTA 5 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier 3	ST; #; QL
<i>chlorpropamide</i>	Tier 1	
CYCLOSET	Tier 3	QL
DUETACT	NC	N5
FARXIGA	Tier 3	QL
FIASP	Tier 3	ST
FIASP FLEXTOUCH	Tier 3	ST
FORTAMET	NC	
<i>glimepiride</i>	Tier 1	LGC
<i>glipizide er oral tablet extended release 24 hour 10 mg, 5 mg</i>	Tier 1	LGC
<i>glipizide oral</i>	Tier 1	LGC
<i>glipizide xl oral tablet extended release 24 hour 10 mg, 5 mg</i>	Tier 1	LGC
<i>glipizide xl oral tablet extended release 24 hour 2.5 mg</i>	Tier 1	
<i>glipizide-metformin hcl</i>	Tier 1	
GLUCAGEN HYPOKIT	Tier 3	QL

Drug	Status	Notes
GLUCAGON EMERGENCY	Tier 2	
GLUCOPHAGE ORAL TABLET 1000 MG	NC	
GLUCOPHAGE ORAL TABLET 500 MG, 850 MG	NC	N5
GLUCOPHAGE XR ORAL TABLET EXTENDED RELEASE 24 HOUR 500 MG	Tier 3	
GLUCOPHAGE XR ORAL TABLET EXTENDED RELEASE 24 HOUR 750 MG	NC	N5
GLUCOTROL	NC	N5
GLUCOTROL XL	NC	N5
GLUCOVANCE ORAL TABLET 2.5-500 MG, 5-500 MG	NC	N5
GLUMETZA	NC	
<i>glyburide micronized oral tablet 1.5 mg</i>	Tier 1	
<i>glyburide micronized oral tablet 3 mg, 6 mg</i>	Tier 1	LGC
<i>glyburide oral tablet 1.25 mg</i>	Tier 1	
<i>glyburide oral tablet 2.5 mg, 5 mg</i>	Tier 1	LGC
<i>glyburide-metformin</i>	Tier 1	
GLYNASE	NC	N5
GLYSET	Tier 3	
HUMALOG	Tier 2	
HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML, 200 UNIT/ML	Tier 2	
HUMALOG MIX 50/50	Tier 2	
HUMALOG MIX 50/50 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	Tier 2	
HUMALOG MIX 75/25	Tier 2	
HUMALOG MIX 75/25 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	Tier 2	
HUMULIN 70/30	Tier 2	QL
HUMULIN 70/30 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	Tier 2	
HUMULIN N	Tier 2	QL

Drug	Status	Notes
HUMULIN N KWIKPEN SUBCUTANEOUS SUSPENSION PEN- INJECTOR	Tier 2	
HUMULIN R	Tier 2	
HUMULIN R U-500 (CONCENTRATED)	Tier 2	
HUMULIN R U-500 KWIKPEN SUBCUTANEOUS SOLUTION PEN- INJECTOR	Tier 2	
INVOKANA	Tier 2	QL
JANUMET	Tier 2	QL
JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR 100-1000 MG, 50-1000 MG, 50-500 MG	Tier 2	QL
JANUVIA	Tier 2	QL
JARDIANCE	Tier 3	QL
JENTADUETO	Tier 2	QL
JENTADUETO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG, 5-1000 MG	Tier 2	QL
KAZANO	Tier 3	ST; QL
KOMBIGLYZE XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG, 5-1000 MG, 5-500 MG	Tier 3	ST; QL
KORLYM	Tier 4	PA; SP; QL
LANTUS	Tier 3	ST
LANTUS SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier 3	ST
LEVEMIR	Tier 2	
LEVEMIR FLEXTOUCH	Tier 2	
<i>metformin hcl er (mod)</i>	NC	
<i>metformin hcl er (osm) oral tablet extended release 24 hour 1000 mg, 500 mg</i>	NC	
<i>metformin hcl er oral tablet extended release 24 hour 500 mg</i>	Tier 1	LGC
<i>metformin hcl er oral tablet extended release 24 hour 750 mg</i>	Tier 1	
<i>metformin hcl oral</i>	Tier 1	LGC
<i>miglitol</i>	Tier 1	

Drug	Status	Notes
<i>nateglinide</i>	Tier 1	
NESINA	Tier 3	ST; QL
NOVOLIN 70/30	Tier 3	ST
NOVOLIN 70/30 RELION	Tier 3	ST
NOVOLIN N	Tier 3	ST
NOVOLIN N RELION	Tier 3	ST
NOVOLIN R	Tier 3	ST
NOVOLIN R RELION	Tier 3	ST
NOVOLOG	Tier 3	ST
NOVOLOG FLEXPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier 3	ST
NOVOLOG MIX 70/30	Tier 3	ST
NOVOLOG MIX 70/30 FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	Tier 3	ST
NOVOLOG PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE	Tier 3	ST
ONGLYZA	Tier 3	ST; QL
OSENI	Tier 3	ST; QL
<i>pioglitazone hcl</i>	Tier 1	QL
<i>pioglitazone hcl-glimepiride</i>	Tier 1	QL
<i>pioglitazone hcl-metformin hcl</i>	Tier 1	QL
PRANDIN ORAL TABLET 1 MG, 2 MG	NC	N5
PRECOSE	NC	N5
PROGLYCEM	Tier 3	
<i>repaglinide</i>	Tier 1	
<i>repaglinide-metformin hcl</i>	Tier 1	QL
RIOMET	Tier 3	
STARLIX	NC	N5
SYMLINPEN 120 SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier 3	PA
SYMLINPEN 60 SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier 3	PA
TANZEUM	Tier 3	ST; QL
<i>tolazamide</i>	Tier 1	
<i>tolbutamide</i>	Tier 1	

Drug	Status	Notes
TOUJEO SOLOSTAR	Tier 3	ST
TRADJENTA	Tier 2	QL
TRESIBA FLEXTOUCH	Tier 2	
TRULICITY	Tier 2	QL
VICTOZA SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier 2	QL
Antidiarrheals		
<i>diphenoxylate-atropine</i>	Tier 1	
LOMOTIL ORAL TABLET	NC	N5
MOTOFEN	Tier 3	
MYTESI	Tier 3	PA; ST; QL
<i>opium</i>	Tier 1	
VSL#3 DS	Tier 3	
Antidotes And Specific Antagonists		
<i>deferoxamine mesylate</i>	Tier 4	SP
DEFERAL INJECTION SOLUTION RECONSTITUTED 500 MG	NC	N5; SP
VISTOGARD	Tier 4	SP; QL
Antidotes		
CHEMET	Tier 3	
<i>deferoxamine mesylate</i>	Tier 4	SP
DEFERAL INJECTION SOLUTION RECONSTITUTED 500 MG	NC	N5; SP
EVZIO	NC	
EXJADE	Tier 4	PA; SP
FERRIPROX ORAL SOLUTION	Tier 4	PA
FERRIPROX ORAL TABLET	Tier 4	PA; SP
JADENU	Tier 4	PA; SP
JADENU SPRINKLE	Tier 4	PA; SP
<i>naloxone hcl injection solution 0.4 mg/ml</i>	Tier 1	
<i>naltrexone hcl oral</i>	Tier 1	
NARCAN	Tier 2	
VISTOGARD	Tier 4	SP; QL
VIVITROL	Tier 3	

Drug	Status	Notes
Antiemetics		
AKYNZEO	Tier 3	PA; ST; QL
ALOXI INTRAVENOUS SOLUTION 0.25 MG/5ML	Tier 4	#
ANZEMET ORAL	Tier 3	QL
<i>aprepitant oral capsule 125 mg, 40 mg, 80 & 125 mg, 80 mg</i>	Tier 1	QL
CESAMET	Tier 3	QL
DICLEGIS	Tier 3	PA; QL
<i>dronabinol</i>	Tier 1	PA; QL
EMEND ORAL CAPSULE 125 MG, 40 MG, 80 MG	Tier 3	QL
EMEND ORAL SUSPENSION RECONSTITUTED	Tier 2	
<i>granisetron hcl intravenous</i>	Tier 4	
<i>granisetron hcl oral</i>	Tier 1	
MARINOL	NC	N5
<i>meclizine hcl oral tablet</i>	Tier 1	
<i>ondansetron</i>	Tier 1	
<i>ondansetron hcl injection solution 4 mg/2ml</i>	Tier 1	
<i>ondansetron hcl oral</i>	Tier 1	
SANCUSO	Tier 3	QL
<i>scopolamine</i>	Tier 1	
SYNDROS	NC	
TIGAN INTRAMUSCULAR	Tier 3	
TIGAN ORAL	NC	N5
TRANSDERM-SCOP (1.5 MG)	Tier 3	
<i>trimethobenzamide hcl oral</i>	Tier 1	
VARUBI ORAL	Tier 3	QL
ZOFRAN ODT	Tier 3	
ZOFRAN ORAL SOLUTION	Tier 3	
ZOFRAN ORAL TABLET 4 MG	Tier 3	
ZOFRAN ORAL TABLET 8 MG	NC	
ZUPLENZ	NC	
Antifungals		
AMBISOME	Tier 3	

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
ANCOBON	Tier 3	
CRESEMBA ORAL	Tier 3	
DIFLUCAN	NC	N5
<i>fluconazole in sodium chloride intravenous solution 400-0.9 mg/200ml-%</i>	Tier 1	
<i>fluconazole oral</i>	Tier 1	
<i>flucytosine oral</i>	Tier 1	
<i>griseofulvin microsize oral</i>	Tier 1	
<i>griseofulvin ultramicrosize</i>	Tier 1	
GRIS-PEG	NC	N5
<i>itraconazole oral</i>	Tier 1	QL
<i>ketoconazole oral</i>	Tier 1	QL
LAMISIL ORAL TABLET	NC	N5
NOXAFIL INTRAVENOUS	Tier 3	
NOXAFIL ORAL SUSPENSION	Tier 3	
NOXAFIL ORAL TABLET DELAYED RELEASE	Tier 3	QL
<i>nystatin oral tablet</i>	Tier 1	
ONMEL	NC	
SPORANOX ORAL CAPSULE	NC	N5
SPORANOX ORAL SOLUTION	Tier 3	
SPORANOX PULSEPAK	NC	N5
<i>terbinafine hcl oral</i>	Tier 1	
VFEND	NC	N5
<i>voriconazole intravenous</i>	Tier 1	
<i>voriconazole oral tablet</i>	Tier 1	
Antihistamines		
ALAVERT ORAL TABLET	Tier 1	
<i>alavert oral tablet dispersible</i>	Tier 1	Select OTC
ALLEGRA ALLERGY	Tier 1	Select OTC
ALLEGRA ALLERGY CHILDRENS ORAL SUSPENSION	Tier 1	Select OTC
ALLEGRA ALLERGY CHILDRENS ORAL TABLET DISPERSIBLE	Tier 1	Select OTC
<i>allergy relief oral tablet dispersible</i>	Tier 1	Select OTC
<i>carbinoxamine maleate oral solution</i>	Tier 1	

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
<i>carbinoxamine maleate oral tablet</i>	Tier 1	
<i>cetirizine hcl oral syrup 1 mg/ml</i>	Tier 1	LGC
<i>cetirizine hcl oral tablet 10 mg</i>	Tier 1	LGC; Select OTC
<i>cetirizine hcl oral tablet 5 mg</i>	Tier 1	LGC
<i>cetirizine hcl oral tablet chewable</i>	Tier 1	Select OTC
<i>childrens loratadine</i>	Tier 1	Select OTC
CLARINEX ORAL SYRUP	Tier 3	
CLARINEX ORAL TABLET	NC	N5
CLARITIN ORAL SYRUP	NC	N5; Select OTC
CLARITIN ORAL TABLET	NC	Select OTC
CLARITIN ORAL TABLET CHEWABLE	Tier 1	Select OTC
CLARITIN REDITABS ORAL TABLET DISPERSIBLE 5 MG	Tier 1	
<i>cyproheptadine hcl oral</i>	Tier 1	
<i>desloratadine</i>	Tier 1	QL
<i>diphenhydramine hcl injection</i>	Tier 1	
<i>fexofenadine hcl childrens</i>	Tier 1	Select OTC
<i>fexofenadine hcl oral tablet 180 mg, 60 mg</i>	Tier 1	Select OTC
<i>hm fexofenadine hcl</i>	Tier 1	Select OTC
<i>kls aller-tec childrens oral solution 1 mg/ml</i>	Tier 1	LGC
<i>levocetirizine dihydrochloride oral</i>	NC	
<i>loratadine allergy relief oral tablet dispersible</i>	Tier 1	Select OTC
<i>loratadine childrens</i>	Tier 1	Select OTC
<i>loratadine oral solution</i>	Tier 1	Select OTC
<i>loratadine oral syrup</i>	Tier 1	Select OTC
<i>loratadine oral tablet</i>	Tier 1	LGC; Select OTC
<i>phenadoz rectal suppository 12.5 mg</i>	Tier 1	
<i>promethazine hcl injection</i>	Tier 1	
<i>promethazine hcl oral syrup</i>	Tier 1	
<i>promethazine hcl oral tablet</i>	Tier 1	
<i>promethazine hcl rectal suppository 12.5 mg, 25 mg</i>	Tier 1	
<i>promethegan</i>	Tier 1	
<i>qc allergy relief childrens oral syrup 5 mg/5ml</i>	Tier 1	LGC; Select OTC
RYVENT	NC	

Drug	Status	Notes
TRIAMINIC ALLERCHEWS	Tier 1	Select OTC
WAL-ITIN CHILDRENS	Tier 1	Select OTC
WAL-ITIN ORAL SYRUP	Tier 1	Select OTC
WAL-ITIN ORAL TABLET DISPERSIBLE	Tier 1	Select OTC
WAL-VERT	Tier 1	Select OTC
<i>wal-zyr childrens oral solution 1 mg/ml</i>	Tier 1	LGC
XYZAL	NC	N5
XYZAL ALLERGY 24HR	Tier 1	Select OTC
XYZAL ALLERGY 24HR CHILDRENS	Tier 1	Select OTC
ZYRTEC ALLERGY ORAL TABLET	Tier 1	Select OTC
ZYRTEC CHILDRENS ALLERGY ORAL SYRUP	NC	N5
Antihyperlipidemics		
ALTOPREV	Tier 3	QL
ANTARA ORAL CAPSULE 30 MG, 90 MG	Tier 3	QL
<i>atorvastatin calcium oral tablet 10 mg</i>	CE	QL
<i>atorvastatin calcium oral tablet 20 mg, 40 mg, 80 mg</i>	Tier 1	QL
<i>cholestyramine light oral powder</i>	Tier 1	
COLESTID	NC	N5
COLESTID FLAVORED	NC	N5
<i>colestipol hcl oral granules</i>	Tier 1	
CRESTOR	Tier 3	ST; #; QL
<i>ezetimibe</i>	Tier 1	QL
<i>ezetimibe-simvastatin</i>	Tier 1	QL
<i>fenofibrate micronized</i>	Tier 1	QL
<i>fenofibrate oral capsule</i>	Tier 1	QL
<i>fenofibrate oral tablet 120 mg, 40 mg</i>	NC	
<i>fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg</i>	Tier 1	QL
<i>fenofibric acid oral capsule delayed release</i>	Tier 1	
<i>fenofibric acid oral tablet</i>	Tier 1	QL
FENOGLIDE	NC	
FIBRICOR	Tier 3	QL
<i>flolipid</i>	NC	

Drug	Status	Notes
<i>fluvastatin sodium</i>	Tier 1	QL
<i>fluvastatin sodium er</i>	Tier 1	
<i>gemfibrozil oral</i>	Tier 1	LGC
JUXTAPID	Tier 4	PA; ST; SP; QL
KYNAMRO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier 4	PA; ST; SP; QL
LESCOL ORAL CAPSULE 20 MG	NC	N5
LESCOL XL	NC	N5
LIPITOR	NC	N5
LIPOFEN	Tier 3	QL
LIVALO	Tier 3	ST; QL
LOFIBRA ORAL CAPSULE 134 MG, 67 MG	NC	N5
LOFIBRA ORAL TABLET 54 MG	NC	N5
<i>lovastatin</i>	Tier 1	LGC; QL
LOVAZA	NC	N5
MEVACOR ORAL TABLET 40 MG	NC	N5
<i>niacin er (antihyperlipidemic)</i>	Tier 1	
NIACOR	Tier 3	
NIASPAN	NC	N5
<i>omega-3-acid ethyl esters</i>	Tier 1	QL
PRAVACHOL ORAL TABLET 20 MG, 40 MG, 80 MG	NC	N5
<i>pravastatin sodium</i>	Tier 1	LGC; QL
<i>prevalite oral packet</i>	Tier 1	
QUESTRAN LIGHT ORAL POWDER	NC	N5
<i>rosuvastatin calcium</i>	Tier 1	QL
<i>simvastatin oral tablet 10 mg, 5 mg</i>	CE	LGC; QL
<i>simvastatin oral tablet 20 mg, 40 mg, 80 mg</i>	Tier 1	LGC; QL
TRICOR	NC	N5
TRIGLIDE ORAL TABLET 160 MG	NC	N5
TRILIPIX	NC	N5
VASCEPA ORAL CAPSULE 0.5 GM, 1 GM	Tier 2	QL
VYTORIN	Tier 3	ST; #; QL
WELCHOL	Tier 3	#

Drug	Status	Notes
ZETIA	Tier 3	ST; QL
ZOCOR	NC	N5
Antihypertensives		
ACCUPRIL ORAL TABLET 10 MG, 20 MG, 5 MG	NC	N5
ACCUPRIL ORAL TABLET 40 MG	NC	
ACCURETIC	NC	N5
ACEON ORAL TABLET 4 MG, 8 MG	NC	N5
ALTACE ORAL CAPSULE	NC	N5
<i>amlodipine besy-benazepril hcl</i>	Tier 1	
<i>amlodipine besylate-valsartan</i>	Tier 1	QL
<i>amlodipine-olmesartan</i>	Tier 1	QL
<i>amlodipine-valsartan-hctz</i>	Tier 1	QL
ATACAND HCT	NC	N5
ATACAND ORAL TABLET 16 MG, 4 MG, 8 MG	NC	N5
ATACAND ORAL TABLET 32 MG	Tier 3	QL
<i>atenolol-chlorthalidone</i>	Tier 1	LGC
AVALIDE ORAL TABLET 150-12.5 MG, 300-12.5 MG	NC	N5
AVAPRO	NC	N5
AZOR	Tier 3	ST; QL
<i>benazepril hcl oral</i>	Tier 1	LGC
<i>benazepril-hydrochlorothiazide</i>	Tier 1	LGC
BENICAR	Tier 3	ST; QL
BENICAR HCT	Tier 3	ST; QL
<i>bisoprolol-hydrochlorothiazide</i>	Tier 1	LGC
<i>candesartan cilexetil oral tablet 16 mg, 4 mg, 8 mg</i>	Tier 1	QL
<i>candesartan cilexetil-hctz</i>	Tier 1	QL
<i>captopril oral</i>	Tier 1	LGC
<i>captopril-hydrochlorothiazide</i>	Tier 1	
CARDURA	NC	N5
CATAPRES	NC	N5
CATAPRES-TTS-1	NC	N5
CATAPRES-TTS-2	NC	N5

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
CATAPRES-TTS-3	NC	N5
<i>clonidine hcl oral</i>	Tier 1	LGC
<i>clonidine hcl transdermal</i>	Tier 1	
CLORPRES ORAL TABLET 0.1-15 MG	Tier 3	
CORZIDE	NC	N5
COZAAR	NC	N5
DEMSER	Tier 3	
DIBENZYLINE	NC	N5
DIOVAN	NC	N5
DIOVAN HCT	NC	N5
<i>doxazosin mesylate</i>	Tier 1	LGC
DUTOPROL	NC	
EDARBI	Tier 3	ST; QL
EDARBYCLOR	Tier 3	ST; QL
<i>enalapril maleate oral</i>	Tier 1	LGC
<i>enalapril-hydrochlorothiazide</i>	Tier 1	LGC
EPANED ORAL SOLUTION	Tier 3	PA; QL
<i>eplerenone</i>	Tier 1	
<i>eprosartan mesylate</i>	Tier 1	QL
EXFORGE	NC	N5
EXFORGE HCT	Tier 3	
<i>fosinopril sodium</i>	Tier 1	
<i>fosinopril sodium-hctz</i>	Tier 1	
<i>guanfacine hcl oral</i>	Tier 1	
<i>hydralazine hcl oral tablet 10 mg, 100 mg, 50 mg</i>	Tier 1	
<i>hydralazine hcl oral tablet 25 mg</i>	Tier 1	LGC
HYZAAR	NC	N5
INSPRA	NC	N5
<i>irbesartan</i>	Tier 1	QL
<i>irbesartan-hydrochlorothiazide</i>	Tier 1	QL
<i>lisinopril oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg</i>	Tier 1	LGC
<i>lisinopril oral tablet 30 mg, 40 mg</i>	Tier 1	
<i>lisinopril-hydrochlorothiazide</i>	Tier 1	LGC
LOPRESSOR HCT ORAL TABLET 50-25 MG	NC	N5

Drug	Status	Notes
<i>losartan potassium oral tablet 100 mg</i>	Tier 1	LGC
<i>losartan potassium oral tablet 25 mg, 50 mg</i>	Tier 1	LGC; QL
<i>losartan potassium-hctz</i>	Tier 1	LGC
LOTENSIN HCT ORAL TABLET 10-12.5 MG, 20-12.5 MG, 20-25 MG	NC	N5
LOTENSIN ORAL TABLET 10 MG, 20 MG, 40 MG	NC	N5
LOTREL ORAL CAPSULE 10-20 MG, 10-40 MG, 5-10 MG, 5-20 MG	NC	N5
<i>methyldopa oral</i>	Tier 1	
<i>methyldopa-hydrochlorothiazide</i>	Tier 1	
<i>methyldopate hcl</i>	Tier 1	
<i>metoprolol-hctz er</i>	NC	
<i>metoprolol-hydrochlorothiazide</i>	Tier 1	
MICARDIS	NC	N5
MICARDIS HCT	NC	N5
MINIPRESS	NC	N5
<i>minoxidil oral</i>	Tier 1	
<i>moexipril hcl</i>	Tier 1	
<i>moexipril-hydrochlorothiazide</i>	Tier 1	
<i>nadolol-bendroflumethiazide</i>	Tier 1	
<i>olmesartan medoxomil oral</i>	Tier 1	QL
<i>olmesartan medoxomil-hctz</i>	Tier 1	QL
<i>olmesartan-amlodipine-hctz</i>	Tier 1	QL
<i>perindopril erbumine</i>	Tier 1	
<i>phenoxybenzamine hcl oral</i>	Tier 4	PA
<i>prazosin hcl oral</i>	Tier 1	
PRESTALIA	Tier 3	
PRINIVIL	NC	N5
<i>propranolol-hctz</i>	Tier 1	
QBRELIS	Tier 3	PA
<i>quinapril hcl oral tablet 10 mg, 20 mg, 5 mg</i>	Tier 1	
<i>quinapril-hydrochlorothiazide</i>	Tier 1	
<i>ramipril</i>	Tier 1	
TARKA	NC	N5

Drug	Status	Notes
TEKTURNA	Tier 3	ST; QL
TEKTURNA HCT	Tier 3	ST; QL
<i>telmisartan</i>	Tier 1	QL
<i>telmisartan-amlodipine</i>	Tier 1	ST; QL
<i>telmisartan-hctz</i>	Tier 1	QL
<i>terazosin hcl oral</i>	Tier 1	LGC
<i>trandolapril</i>	Tier 1	
<i>trandolapril-verapamil hcl er</i>	Tier 1	
TRIBENZOR	Tier 3	ST; #; QL
TWYNSTA	NC	N5
<i>valsartan</i>	Tier 1	QL
<i>valsartan-hydrochlorothiazide</i>	Tier 1	QL
VASERETIC	NC	N5
VASOTEC	NC	
VECAMYL	Tier 4	PA; ST; SP; QL
ZESTRIL ORAL TABLET 10 MG, 20 MG, 5 MG	NC	N5
ZIAC	NC	N5
Anti-Infective Agents - Misc.		
ALINIA ORAL SUSPENSION RECONSTITUTED	Tier 3	#; QL
ALINIA ORAL TABLET	Tier 3	#; QL
<i>atovaquone oral</i>	Tier 1	
AZACTAM	NC	N5
AZACTAM IN DEXTROSE	NC	
<i>aztreonam</i>	Tier 4	
BACTRIM	NC	N5
BACTRIM DS	Tier 3	
CAYSTON	Tier 4	SP; QL
CLEOCIN IN D5W	NC	
CLEOCIN ORAL CAPSULE 150 MG, 300 MG	NC	N5
CLEOCIN ORAL CAPSULE 75 MG	NC	
CLEOCIN ORAL SOLUTION RECONSTITUTED	NC	N5
CLEOCIN PHOSPHATE INJECTION	NC	N5

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
CLEOCIN PHOSPHATE INTRAVENOUS SOLUTION 600 MG/4ML, 900 MG/6ML	NC	
<i>clindamycin hcl oral</i>	Tier 1	
<i>clindamycin palmitate hcl</i>	Tier 1	
<i>clindamycin phosphate injection</i>	Tier 4	
<i>clindamycin phosphate intravenous solution 150 mg/ml, 900 mg/6ml</i>	Tier 4	
<i>colistimethate sodium injection</i>	Tier 4	SP
COLY-MYCIN M	NC	N5; SP
<i>dapsone oral</i>	Tier 1	
FLAGYL ORAL CAPSULE	NC	N5
FLAGYL ORAL TABLET 250 MG	NC	N5
FLAGYL ORAL TABLET 500 MG	Tier 3	
IMPAVIDO	Tier 3	PA; QL
<i>linezolid oral suspension reconstituted</i>	Tier 1	QL
<i>linezolid oral tablet</i>	Tier 1	QL
MEPRON	NC	N5
<i>metronidazole in nacl intravenous solution 500-0.79 mg/100ml-%</i>	Tier 1	
<i>metronidazole oral capsule</i>	Tier 1	
<i>metronidazole oral tablet 250 mg</i>	Tier 1	
NEBUPENT	Tier 4	
PRIMSOL	Tier 3	
SIVEXTRO ORAL	Tier 3	QL
<i>sulfamethoxazole-trimethoprim intravenous</i>	Tier 1	
<i>sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml</i>	Tier 1	LGC
<i>sulfamethoxazole-trimethoprim oral tablet</i>	Tier 1	LGC
TINDAMAX ORAL TABLET 500 MG	NC	N5
<i>tinidazole oral</i>	Tier 1	
<i>trimethoprim oral</i>	Tier 1	
<i>trimpex</i>	Tier 3	
<i>vancomycin hcl oral</i>	Tier 1	
XIFAXAN ORAL TABLET 200 MG	Tier 3	QL
XIFAXAN ORAL TABLET 550 MG	Tier 2	PA; QL
ZYVOX ORAL	NC	N5

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
Antimalarials		
<i>atovaquone-proguanil hcl</i>	Tier 1	
<i>chloroquine phosphate oral</i>	Tier 1	
COARTEM	Tier 3	
DARAPRIM	Tier 2	
<i>hydroxychloroquine sulfate oral</i>	Tier 1	
MALARONE	NC	N5
<i>mefloquine hcl</i>	Tier 1	
PLAQUENIL	NC	N5
<i>primaquine phosphate oral</i>	Tier 1	
QUALAQUIN	NC	N5
<i>quinine sulfate oral</i>	Tier 1	
Antimyasthenic Agents		
<i>guanidine hcl oral</i>	Tier 1	
MESTINON ORAL SYRUP	Tier 3	
MESTINON ORAL TABLET	NC	N5
MESTINON ORAL TABLET EXTENDED RELEASE	NC	N5
<i>pyridostigmine bromide er</i>	Tier 1	
<i>pyridostigmine bromide oral</i>	Tier 1	
REGONOL INTRAVENOUS	Tier 3	
Antimyasthenic/Cholinergic Agents		
<i>guanidine hcl oral</i>	Tier 1	
MESTINON ORAL SYRUP	Tier 3	
MESTINON ORAL TABLET	NC	N5
MESTINON ORAL TABLET EXTENDED RELEASE	NC	N5
<i>pyridostigmine bromide er</i>	Tier 1	
<i>pyridostigmine bromide oral</i>	Tier 1	
REGONOL INTRAVENOUS	Tier 3	
Antimycobacterial Agents		
CAPASTAT SULFATE	Tier 4	
<i>cycloserine oral</i>	Tier 1	
<i>ethambutol hcl oral</i>	Tier 1	
<i>isoniazid injection</i>	Tier 1	

Drug	Status	Notes
<i>isoniazid oral</i>	Tier 1	
MYAMBUTOL	NC	N5
MYCOBUTIN	NC	N5
PASER	Tier 3	
PRIFTIN	Tier 3	
<i>pyrazinamide oral</i>	Tier 1	
<i>rifabutin</i>	Tier 1	
RIFADIN ORAL	NC	N5
RIFAMATE	Tier 3	
<i>rifampin oral</i>	Tier 1	
RIFATER	Tier 3	
SIRTURO	Tier 4	PA; SP; QL
TRECTOR	Tier 3	
*Antineoplastic - Bcl-2 Inhibitors***		
VENCLEXTA ORAL TABLET 10 MG, 100 MG, 50 MG	Tier 4	PA; SP; QL
VENCLEXTA STARTING PACK	Tier 4	PA; SP; QL
Antineoplastics And Adjunctive Therapies		
ACTIMMUNE	Tier 4	PA; SP
<i>adrucil intravenous solution 5 gm/100ml</i>	Tier 1	
AFINITOR	Tier 4	PA; SP; QL
AFINITOR DISPERZ	Tier 4	PA; SP; QL
ALECENSA	Tier 4	PA; SP; QL
ALFERON N	Tier 4	SP
ALKERAN	Tier 3	
ALUNBRIG	Tier 4	PA; SP; QL
<i>anastrozole oral</i>	Tier 1	
ARIMIDEX	NC	N5
AROMASIN	NC	N5
ARZERRA	Tier 4	PA
<i>bexarotene</i>	Tier 4	PA; SP
<i>bicalutamide</i>	Tier 1	QL
BOSULIF	Tier 4	PA; ST; SP; QL
BUSULFEX	Tier 4	
CABOMETYX	Tier 4	PA; SP; QL

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
CAMPTOSAR	NC	N5
<i>capecitabine</i>	Tier 1	PA; SP
CAPRELSA ORAL TABLET 100 MG, 300 MG	Tier 4	PA; SP; QL
CASODEX	NC	N5
COMETRIQ (100 MG DAILY DOSE)	Tier 4	PA; SP; QL
COMETRIQ (140 MG DAILY DOSE)	Tier 4	PA; SP; QL
COMETRIQ (60 MG DAILY DOSE)	Tier 4	PA; SP; QL
COTELLIC	Tier 4	PA; SP; QL
<i>cyclophosphamide injection</i>	Tier 1	
<i>cyclophosphamide oral capsule</i>	Tier 1	
DEPO-PROVERA INTRAMUSCULAR SUSPENSION 400 MG/ML	Tier 3	
ELIGARD	Tier 4	PA; SP
EMCYT	Tier 2	
ERIVEDGE	Tier 4	PA; SP; QL
ETHYOL	Tier 4	
<i>etoposide intravenous solution 1 gm/50ml, 100 mg/5ml, 500 mg/25ml</i>	Tier 4	
<i>etoposide oral</i>	Tier 1	
<i>exemestane</i>	Tier 1	
FARESTON	Tier 2	
FARYDAK	Tier 4	PA; SP; QL
FASLODEX INTRAMUSCULAR SOLUTION 250 MG/5ML	Tier 4	PA; SP
FEMARA	NC	N5
FIRMAGON	Tier 4	PA; SP
<i>fluorouracil intravenous solution 5 gm/100ml</i>	Tier 1	
<i>flutamide</i>	Tier 1	
GILOTRIF	Tier 4	PA; SP; QL
GLEEVEC	NC	N5; #; SP
GLEOSTINE	Tier 3	
HEXALEN	Tier 4	
HYCAMTIN ORAL	Tier 4	PA; SP
HYDREA	Tier 3	
<i>hydroxyurea oral</i>	Tier 1	

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
ICLUSIG ORAL TABLET 15 MG, 45 MG	Tier 4	PA; ST; SP; QL
<i>imatinib mesylate oral tablet 100 mg, 400 mg</i>	Tier 1	PA; SP; QL
IMBRUVICA	Tier 4	PA; ST; SP; QL
INLYTA	Tier 4	PA; SP; QL
INTRON A	Tier 3	PA; SP
IRESSA	Tier 4	PA; QL
<i>irinotecan hcl</i>	Tier 4	
JAKAFI	Tier 4	PA; SP; QL
JEVTANA	Tier 4	PA
KEPIVANCE	Tier 4	PA
KISQALI FEMARA 200 DOSE	Tier 4	PA; SP; QL
KISQALI FEMARA 400 DOSE	Tier 4	PA; SP; QL
KISQALI FEMARA 600 DOSE	Tier 4	PA; SP; QL
LENVIMA 10 MG DAILY DOSE	Tier 4	PA; ST; SP; QL
LENVIMA 14 MG DAILY DOSE	Tier 4	PA; ST; SP; QL
LENVIMA 18 MG DAILY DOSE	Tier 4	PA; SP; QL
LENVIMA 20 MG DAILY DOSE	Tier 4	PA; ST; SP; QL
LENVIMA 24 MG DAILY DOSE	Tier 4	PA; ST; SP; QL
LENVIMA 8 MG DAILY DOSE	Tier 4	PA; SP; QL
<i>letrozole oral</i>	Tier 1	
<i>leucovorin calcium injection solution reconstituted 350 mg, 500 mg</i>	Tier 1	
<i>leucovorin calcium oral</i>	Tier 1	
LEUKERAN	Tier 4	
<i>leuprolide acetate injection</i>	Tier 4	PA; SP
LONSURF ORAL TABLET 15-6.14 MG, 20-8.19 MG	Tier 4	PA; ST; QL
LUPRON DEPOT (1-MONTH)	Tier 4	PA; #; SP
LUPRON DEPOT (3-MONTH)	Tier 4	PA; #; SP
LUPRON DEPOT (4-MONTH)	Tier 4	PA; #; SP
LUPRON DEPOT (6-MONTH)	Tier 4	PA; #; SP
LYSODREN	Tier 2	
MATULANE	Tier 4	
<i>megestrol acetate oral suspension 40 mg/ml, 400 mg/10ml</i>	Tier 1	

Drug	Status	Notes
<i>megestrol acetate oral tablet</i>	Tier 1	
MEKINIST ORAL TABLET 0.5 MG, 2 MG	Tier 4	PA; SP; QL
<i>melphalan</i>	Tier 1	
<i>melphalan hcl</i>	Tier 4	
<i>mercaptopurine oral</i>	Tier 1	
MESNEX ORAL	Tier 4	
<i>methotrexate oral</i>	Tier 1	
<i>methotrexate sodium (pf) injection solution 1 gm/40ml, 100 mg/4ml, 250 mg/10ml, 50 mg/2ml</i>	Tier 1	
<i>mitoxantrone hcl</i>	Tier 1	
MYLERAN	Tier 3	
NERLYNX	Tier 4	PA; SP; QL
NEXAVAR	Tier 4	PA; ST; SP; QL
NILANDRON	Tier 2	
<i>nilutamide</i>	Tier 1	
NINLARO	Tier 4	PA; ST; QL
ODOMZO	Tier 4	PA; QL
POMALYST	Tier 4	PA; ST; SP; QL
PURIXAN	Tier 4	PA; ST; SP; QL
RITUXAN INTRAVENOUS SOLUTION	Tier 4	PA; ST
RYDAPT	Tier 4	PA; SP; QL
SPRYCEL ORAL TABLET 100 MG, 140 MG, 20 MG, 50 MG, 70 MG, 80 MG	Tier 4	PA; ST; SP; QL
STIVARGA	Tier 4	PA; ST; SP; QL
SUTENT ORAL CAPSULE 12.5 MG, 25 MG, 37.5 MG, 50 MG	Tier 2	PA; ST; SP; QL
SYLATRON SUBCUTANEOUS KIT 200 MCG, 300 MCG, 600 MCG	Tier 4	PA; SP
SYNRIBO	Tier 4	PA; ST
TABLOID	Tier 2	
TAFINLAR	Tier 4	PA; SP; QL
TAGRISO	Tier 4	PA; SP; QL
<i>tamoxifen citrate oral</i>	CE	
TARCEVA	Tier 3	PA; SP; QL
TARGRETIN ORAL	NC	N5; SP
TASIGNA	Tier 4	PA; ST; SP; QL

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
TEMODAR ORAL	NC	N5; SP
<i>temozolomide</i>	Tier 1	PA; SP
<i>toposar intravenous solution 1 gm/50ml, 100 mg/5ml, 500 mg/25ml</i>	Tier 4	
TORISEL	Tier 4	
TRELSTAR MIXJECT	Tier 4	PA; #; SP
<i>tretinoin oral</i>	Tier 1	SP
TREXALL	Tier 3	
TYKERB	Tier 4	PA; ST; SP
UVADEX	Tier 3	
VANTAS	Tier 4	PA; SP
VORAXAZE	Tier 4	
VOTRIENT	Tier 4	PA; SP; QL
XALKORI	Tier 4	PA; SP; QL
XATMEP	Tier 3	PA
XELODA	NC	N5; SP
XTANDI	Tier 4	PA; ST; SP; QL
YERVOY	Tier 4	PA
ZALTRAP	Tier 4	PA
ZANOSAR	Tier 4	
ZELBORAF	Tier 4	PA; ST; SP; QL
ZOLADEX	Tier 4	PA; SP
ZOLINZA	Tier 4	PA; ST; SP; QL
ZYKADIA	Tier 4	PA; ST; SP; QL
ZYTIGA ORAL TABLET 250 MG	Tier 2	PA; SP; QL
ZYTIGA ORAL TABLET 500 MG	Tier 2	PA; QL
Antiparkinson Agents		
<i>amantadine hcl oral</i>	Tier 1	
AZILECT	Tier 3	QL
<i>benztropine mesylate injection</i>	Tier 4	
<i>benztropine mesylate oral</i>	Tier 1	LGC
<i>bromocriptine mesylate oral</i>	Tier 1	
<i>carbidopa oral</i>	Tier 1	
<i>carbidopa-levodopa er oral tablet extended release 25-100 mg, 50-200 mg</i>	Tier 1	

Drug	Status	Notes
<i>carbidopa-levodopa oral tablet</i>	Tier 1	
<i>carbidopa-levodopa oral tablet dispersible 10-100 mg, 25-250 mg</i>	Tier 1	
COMTAN	NC	N5
ELDEPRYL	NC	N5
<i>entacapone</i>	Tier 1	
GOCOVRI	NC	
LODOSYN	NC	N5
MIRAPEX	NC	N5
MIRAPEX ER	NC	N5
NEUPRO	Tier 3	#; QL
<i>pramipexole dihydrochloride</i>	Tier 1	
<i>pramipexole dihydrochloride er</i>	Tier 1	QL
<i>rasagiline mesylate oral</i>	Tier 1	QL
REQUIP	NC	N5
REQUIP XL	NC	N5
<i>ropinirole hcl</i>	Tier 1	
<i>ropinirole hcl er oral tablet extended release 24 hour 12 mg, 2 mg, 4 mg, 6 mg, 8 mg</i>	Tier 1	QL
RYTARY	Tier 3	
<i>selegiline hcl oral</i>	Tier 1	
SINEMET	NC	N5
SINEMET CR	NC	N5
STALEVO 100	Tier 3	
STALEVO 125	Tier 3	
STALEVO 150	Tier 3	
STALEVO 200	Tier 3	
STALEVO 50	Tier 3	
STALEVO 75	Tier 3	
TASMAR ORAL TABLET 100 MG	NC	N5
<i>tolcapone</i>	Tier 1	
<i>trihexyphenidyl hcl oral elixir</i>	Tier 1	
<i>trihexyphenidyl hcl oral tablet 2 mg</i>	Tier 1	LGC
<i>trihexyphenidyl hcl oral tablet 5 mg</i>	Tier 1	
XADAGO	Tier 3	PA; ST; QL

Drug	Status	Notes
ZELAPAR	NC	
Antipsychotics/Antimanic Agents		
ABILIFY ORAL TABLET	NC	N5
<i>aripiprazole oral solution</i>	Tier 1	QL
<i>aripiprazole oral tablet</i>	Tier 1	QL
<i>aripiprazole oral tablet dispersible</i>	Tier 1	QL
<i>chlorpromazine hcl injection solution 25 mg/ml</i>	Tier 1	
<i>chlorpromazine hcl oral</i>	Tier 1	
<i>clozapine oral tablet 100 mg, 200 mg, 25 mg, 50 mg</i>	Tier 1	QL
<i>clozapine oral tablet dispersible 100 mg, 12.5 mg, 150 mg, 200 mg, 25 mg</i>	Tier 1	QL
CLOZARIL	NC	N5
<i>compro</i>	Tier 1	
EQUETRO	Tier 3	
FANAPT	Tier 3	ST; QL
FANAPT TITRATION PACK	Tier 3	ST
FAZACLO ORAL TABLET DISPERSIBLE 100 MG, 12.5 MG, 25 MG	NC	N5
FAZACLO ORAL TABLET DISPERSIBLE 150 MG, 200 MG	NC	
<i>fluphenazine decanoate injection</i>	Tier 1	
<i>fluphenazine hcl injection</i>	Tier 1	
<i>fluphenazine hcl oral</i>	Tier 1	
GEODON INTRAMUSCULAR	Tier 3	
GEODON ORAL	NC	N5
HALDOL	Tier 3	
HALDOL DECANOATE INTRAMUSCULAR SOLUTION 100 MG/ML	Tier 3	
HALDOL DECANOATE INTRAMUSCULAR SOLUTION 50 MG/ML	NC	
<i>haloperidol decanoate intramuscular solution 100 mg/ml</i>	Tier 1	
<i>haloperidol decanoate intramuscular solution 50 mg/ml</i>	NC	

Drug	Status	Notes
<i>haloperidol lactate</i>	Tier 1	
<i>haloperidol oral</i>	Tier 1	
INVEGA	NC	N5
INVEGA SUSTENNA	Tier 3	
LATUDA ORAL TABLET 120 MG, 20 MG, 40 MG, 80 MG	Tier 2	ST; QL
LATUDA ORAL TABLET 60 MG	Tier 2	ST
<i>lithium</i>	Tier 1	
<i>lithium carbonate er</i>	Tier 1	
<i>lithium carbonate oral</i>	Tier 1	
<i>loxapine succinate oral</i>	Tier 1	
NUPLAZID	Tier 4	PA; SP; QL
<i>olanzapine intramuscular</i>	Tier 1	
<i>olanzapine oral tablet 10 mg, 15 mg, 2.5 mg, 20 mg, 5 mg, 7.5 mg</i>	Tier 1	QL
<i>olanzapine oral tablet dispersible</i>	Tier 1	QL
<i>paliperidone er oral tablet extended release 24 hour 1.5 mg, 3 mg, 6 mg, 9 mg</i>	Tier 1	QL
<i>perphenazine oral</i>	Tier 1	
<i>prochlorperazine</i>	Tier 1	
<i>prochlorperazine maleate oral</i>	Tier 1	
<i>quetiapine fumarate er oral tablet extended release 24 hour 150 mg, 200 mg, 300 mg, 400 mg, 50 mg</i>	Tier 1	QL
<i>quetiapine fumarate oral tablet 100 mg, 200 mg, 25 mg, 300 mg, 400 mg, 50 mg</i>	Tier 1	QL
REXULTI	Tier 3	PA; ST; QL
RISPERDAL	NC	N5
RISPERDAL M-TAB ORAL TABLET DISPERSIBLE 0.5 MG, 1 MG, 3 MG, 4 MG	NC	N5
RISPERIDONE M-TAB ORAL TABLET DISPERSIBLE 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG	Tier 1	QL
<i>risperidone oral solution</i>	Tier 1	
<i>risperidone oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</i>	Tier 1	QL
<i>risperidone oral tablet dispersible 0.25 mg</i>	Tier 1	

Drug	Status	Notes
<i>risperidone oral tablet dispersible 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</i>	Tier 1	QL
SAPHRIS	Tier 3	ST; QL
SEROQUEL	NC	N5
SEROQUEL XR ORAL TABLET EXTENDED RELEASE 24 HOUR 150 MG, 200 MG, 300 MG, 400 MG, 50 MG	Tier 3	PA; ST; #; QL
<i>thioridazine hcl oral</i>	Tier 1	
<i>thiothixene oral</i>	Tier 1	
<i>trifluoperazine hcl oral</i>	Tier 1	
VERSACLOZ	Tier 3	ST
VRAYLAR ORAL CAPSULE 1.5 MG, 3 MG, 4.5 MG, 6 MG	Tier 3	ST; QL
VRAYLAR ORAL CAPSULE THERAPY PACK	Tier 3	ST
<i>ziprasidone hcl</i>	Tier 1	QL
ZYPREXA ORAL	NC	
ZYPREXA ZYDIS	NC	
*Antiretrovirals Adjuvants***		
TYBOST	Tier 3	QL
Antiseptics & Disinfectants		
<i>formadon</i>	Tier 1	
<i>formaldehyde external solution 10 %</i>	Tier 1	
IODOSORB	Tier 3	
KERR TRIPLE DYE SWABS	Tier 3	
Antivirals		
<i>abacavir sulfate</i>	Tier 1	
<i>abacavir sulfate-lamivudine</i>	Tier 1	
<i>abacavir-lamivudine-zidovudine</i>	Tier 1	
<i>acyclovir oral capsule</i>	Tier 1	LGC
<i>acyclovir oral suspension</i>	Tier 1	
<i>acyclovir oral tablet 400 mg</i>	Tier 1	LGC
<i>acyclovir oral tablet 800 mg</i>	Tier 1	
<i>adefovir dipivoxil</i>	Tier 1	SP; QL
APTIVUS	Tier 2	
ATRIPLA	Tier 3	QL

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
BARACLUDE ORAL SOLUTION	Tier 4	SP
BARACLUDE ORAL TABLET	NC	N5; SP
<i>cidofovir intravenous</i>	Tier 4	SP
COMBIVIR	NC	N5
COMPLERA	Tier 3	QL
COPEGUS	NC	N5; SP
CRIXIVAN ORAL CAPSULE 200 MG, 400 MG	Tier 2	
CYTOVENE	NC	N5; SP
DAKLINZA	Tier 4	PA; ST; SP; QL
DESCOVY	Tier 3	PA; QL
<i>didanosine</i>	Tier 1	
EDURANT	Tier 2	QL
EMTRIVA ORAL CAPSULE	Tier 2	QL
EMTRIVA ORAL SOLUTION	Tier 2	
<i>entecavir</i>	Tier 4	SP; QL
EPIVIR	NC	N5
EPIVIR HBV ORAL SOLUTION	NC	
EPIVIR HBV ORAL TABLET	NC	N5
EPZICOM	Tier 3	#
EVOTAZ	Tier 3	
<i>famciclovir oral tablet 125 mg, 250 mg, 500 mg</i>	Tier 1	QL
FAMVIR ORAL TABLET 500 MG	NC	N5
FLUMADINE	NC	N5
<i>fosamprenavir calcium</i>	Tier 1	
FUZEON SUBCUTANEOUS SOLUTION RECONSTITUTED	Tier 4	PA; #; SP
<i>ganciclovir sodium</i>	Tier 4	SP
GENVOYA	Tier 4	PA; QL
HEPSERA	NC	N5; SP
INTELENCE ORAL TABLET 100 MG, 200 MG, 25 MG	Tier 2	QL
INVIRASE	Tier 3	
ISENTRESS HD	Tier 3	QL
ISENTRESS ORAL PACKET	Tier 3	

Drug	Status	Notes
ISENTRESS ORAL TABLET	Tier 3	QL
ISENTRESS ORAL TABLET CHEWABLE	Tier 3	QL
KALETRA ORAL SOLUTION	NC	N5; #
KALETRA ORAL TABLET	Tier 2	#
<i>lamivudine</i>	Tier 1	
<i>lamivudine-zidovudine</i>	Tier 1	
LEXIVA ORAL SUSPENSION	Tier 2	#
LEXIVA ORAL TABLET	Tier 3	#
<i>lopinavir-ritonavir</i>	Tier 1	
MODERIBA 1200 DOSE PACK	Tier 3	SP
MODERIBA 800 DOSE PACK	Tier 3	SP
<i>moderiba oral tablet 200 mg</i>	Tier 1	SP
<i>nevirapine er oral tablet extended release 24 hour 100 mg, 400 mg</i>	Tier 1	QL
<i>nevirapine oral tablet</i>	Tier 1	
NORVIR ORAL CAPSULE	Tier 2	#
NORVIR ORAL SOLUTION	Tier 2	
NORVIR ORAL TABLET	Tier 2	
ODEFSEY	Tier 3	QL
OLYSIO	Tier 4	PA; ST; SP; QL
<i>oseltamivir phosphate oral capsule</i>	Tier 1	QL
PEGASYS PROCLICK	Tier 2	PA; SP
PEGASYS SUBCUTANEOUS SOLUTION	Tier 2	PA; SP
PEGINTRON	Tier 3	PA; SP
PREZCOBIX	Tier 2	
PREZISTA ORAL SUSPENSION	Tier 2	QL
PREZISTA ORAL TABLET 150 MG, 600 MG, 75 MG, 800 MG	Tier 2	QL
REBETOL ORAL CAPSULE	NC	N5; SP
REBETOL ORAL SOLUTION	Tier 3	SP; QL
RELENZA DISKHALER	Tier 3	QL
RESCRIPTOR	Tier 3	
RETROVIR INTRAVENOUS	Tier 3	
RETROVIR ORAL CAPSULE	NC	N5
RETROVIR ORAL SYRUP	NC	N5

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
REYATAZ ORAL CAPSULE 150 MG, 200 MG, 300 MG	Tier 3	#; QL
REYATAZ ORAL PACKET	Tier 3	#
<i>ribasphere</i>	Tier 1	SP
<i>ribasphere ribapak oral tablet 400 mg, 600 mg</i>	Tier 3	SP
<i>ribavirin oral capsule</i>	Tier 1	SP
<i>ribavirin oral tablet 200 mg</i>	Tier 1	SP
<i>rimantadine hcl</i>	Tier 1	
SELZENTRY ORAL SOLUTION	Tier 2	QL
SELZENTRY ORAL TABLET 150 MG, 25 MG, 75 MG	Tier 2	QL
SELZENTRY ORAL TABLET 300 MG	Tier 2	
SITAVIG	NC	
SOVALDI	Tier 4	PA; SP; QL
<i>stavudine oral capsule</i>	Tier 1	
STRIBILD	Tier 4	PA; QL
SUSTIVA	Tier 3	#
TAMIFLU ORAL CAPSULE	Tier 3	QL
TAMIFLU ORAL SUSPENSION RECONSTITUTED 6 MG/ML	Tier 3	#; QL
TIVICAY	Tier 3	QL
TRIUMEQ	Tier 2	QL
TRIZIVIR	NC	N5
TRUVADA	Tier 3	PA
<i>valacyclovir hcl oral</i>	Tier 1	
VALCYTE ORAL SOLUTION RECONSTITUTED	Tier 4	PA; SP
VALCYTE ORAL TABLET	NC	N5; SP
<i>valganciclovir hcl oral solution reconstituted</i>	Tier 4	PA; SP; QL
<i>valganciclovir hcl oral tablet</i>	Tier 4	PA; SP; QL
VALTREX	NC	N5
VEMLIDY	Tier 4	PA; ST; SP; QL
VIDEX	Tier 2	
VIDEX EC	NC	N5
VIRACEPT ORAL TABLET	Tier 3	
VIRAMUNE ORAL SUSPENSION	NC	

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
VIRAMUNE ORAL TABLET	NC	N5
VIRAMUNE XR	NC	N5
VIREAD ORAL POWDER	Tier 3	#
VIREAD ORAL TABLET	Tier 3	#, QL
ZERIT	NC	N5
ZIAGEN	NC	N5
<i>zidovudine</i>	Tier 1	
ZOVIRAX ORAL	NC	
Assorted Classes		
ASTAGRAF XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR 0.5 MG, 1 MG	Tier 4	SP; QL
ASTAGRAF XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR 5 MG	Tier 4	SP
ATGAM	Tier 4	SP
AZASAN	Tier 4	
<i>azathioprine oral</i>	Tier 1	
BENLYSTA INTRAVENOUS	Tier 4	PA; ST; SP
BENLYSTA SUBCUTANEOUS	Tier 4	PA; ST; SP; QL
CELLCEPT	Tier 4	SP
CELLCEPT INTRAVENOUS	Tier 4	
CUPRIMINE ORAL CAPSULE 250 MG	Tier 4	PA; ST
<i>cyclosporine intravenous</i>	Tier 1	SP
<i>cyclosporine modified</i>	Tier 1	
<i>cyclosporine oral capsule</i>	Tier 1	
DEPEN TITRATABS	Tier 4	PA
ENVARUSUS XR	Tier 4	
<i>engraf oral capsule 100 mg, 25 mg</i>	Tier 1	
GENGRAF ORAL CAPSULE 50 MG	Tier 1	
<i>engraf oral solution</i>	Tier 1	
HYLAFEM	NC	
IMURAN	NC	N5
<i>kionex oral powder</i>	Tier 1	
<i>morcin</i>	NC	
<i>mycophenolate mofetil</i>	Tier 1	SP

Drug	Status	Notes
MYFORTIC	Tier 4	SP
NEORAL	Tier 4	SP
NULOJIX	Tier 4	SP
<i>physiolyte</i>	Tier 1	
PROGRAF	Tier 4	SP
RAPAMUNE	Tier 4	SP
REVLIMID	Tier 4	PA; SP; QL
SANDIMMUNE	Tier 4	SP
SIMULECT	Tier 4	SP
<i>sirolimus oral</i>	Tier 1	SP
<i>sodium polystyrene sulfonate oral powder</i>	Tier 1	
<i>sterile water for irrigation</i>	Tier 1	
SYPRINE	Tier 4	PA; ST; #
<i>tacrolimus oral</i>	Tier 1	SP
THALAMUS COMPOSITUM SUBLINGUAL	NC	
THALOMID	Tier 2	PA; SP
THYMOGLOBULIN	Tier 4	SP
<i>tis-u-sol</i>	Tier 1	
TRAUMEEL EXTERNAL OINTMENT	NC	
VELTASSA	Tier 4	PA; QL
XIAFLEX	Tier 4	SP
ZORTRESS	Tier 4	SP
*Atopic Dermatitis - Monoclonal Antibodies***		
DUPIXENT	Tier 4	PA; SP; QL
*Beta Blocker & Angiotensin II Receptor Antagonist Comb***		
BYVALSON	Tier 3	PA; ST; QL
Beta Blockers		
<i>acebutolol hcl oral</i>	Tier 1	
<i>atenolol oral</i>	Tier 1	LGC
BETAPACE AF ORAL TABLET 80 MG	Tier 3	
<i>betaxolol hcl oral</i>	Tier 1	
<i>bisoprolol fumarate</i>	Tier 1	LGC

Drug	Status	Notes
BYSTOLIC ORAL TABLET 10 MG, 2.5 MG, 20 MG, 5 MG	Tier 3	PA; ST; QL
<i>carvedilol</i>	Tier 1	LGC
COREG	NC	N5
COREG CR	Tier 3	#; QL
CORGARD	NC	N5
HEMANGEOL	Tier 2	PA
INDERAL LA	NC	N5
INDERAL XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR 80 MG	Tier 3	QL
INNOPRAN XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 80 MG	Tier 3	QL
<i>labetalol hcl intravenous</i>	Tier 1	
<i>labetalol hcl oral</i>	Tier 1	
LOPRESSOR ORAL	NC	N5
<i>metoprolol succinate er oral tablet extended release 24 hour 100 mg, 200 mg, 25 mg, 50 mg</i>	Tier 1	QL
<i>metoprolol tartrate intravenous solution 5 mg/5ml</i>	Tier 1	
<i>metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg</i>	Tier 1	LGC
<i>metoprolol tartrate oral tablet 37.5 mg, 75 mg</i>	Tier 1	
<i>nadolol oral tablet 20 mg, 40 mg, 80 mg</i>	Tier 1	
<i>pindolol</i>	Tier 1	
<i>propranolol hcl er</i>	Tier 1	
<i>propranolol hcl intravenous</i>	Tier 1	
<i>propranolol hcl oral solution</i>	Tier 1	
<i>propranolol hcl oral tablet 10 mg, 20 mg, 40 mg, 80 mg</i>	Tier 1	LGC
<i>propranolol hcl oral tablet 60 mg</i>	Tier 1	
<i>sorine oral tablet 120 mg, 80 mg</i>	Tier 1	LGC
<i>sorine oral tablet 160 mg, 240 mg</i>	Tier 1	
<i>sotalol hcl (af) oral tablet 120 mg</i>	Tier 1	LGC
<i>sotalol hcl (af) oral tablet 160 mg</i>	Tier 1	
<i>sotalol hcl intravenous</i>	Tier 1	

Drug	Status	Notes
<i>sotalol hcl oral tablet 120 mg, 80 mg</i>	Tier 1	LGC
<i>sotalol hcl oral tablet 240 mg</i>	Tier 1	
SOTYLIZE	Tier 3	
<i>timolol maleate oral</i>	Tier 1	
TOPROL XL	NC	N5
*Bile Acid Synthesis Disorder Agents***		
CHOLBAM	Tier 4	PA
Biologicals Misc		
ADAGEN	Tier 4	PA; SP
<i>mixed vespid venom protein injection solution reconstituted</i>	Tier 4	
VENOMIL MIXED VESPID VENOM	Tier 4	
*Bulk Chemicals - Ny***		
<i>nystatin</i>	Tier 1	
Calcium Channel Blockers		
ADALAT CC	NC	N5
<i>afeditab cr oral tablet extended release 24 hour 30 mg, 60 mg</i>	Tier 1	QL
<i>amlodipine besylate oral</i>	Tier 1	LGC
CALAN SR	NC	N5
CARDENE IV INTRAVENOUS SOLUTION 20-4.8 MG/200ML-%, 40-5 MG/200ML-%	Tier 3	
CARDIZEM CD ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 180 MG, 240 MG, 360 MG	NC	
CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HOUR 120 MG	Tier 3	QL
CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HOUR 180 MG, 240 MG, 300 MG, 360 MG	NC	N5
CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HOUR 420 MG	NC	
<i>cartia xt oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg</i>	Tier 1	QL
<i>diltiazem cd oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg</i>	Tier 1	QL

Drug	Status	Notes
<i>diltiazem hcl er beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	Tier 1	QL
<i>diltiazem hcl er coated beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg, 360 mg</i>	Tier 1	QL
<i>diltiazem hcl er coated beads oral tablet extended release 24 hour 420 mg</i>	Tier 1	
<i>diltiazem hcl er oral capsule extended release 12 hour 120 mg</i>	Tier 1	QL
<i>diltiazem hcl er oral capsule extended release 12 hour 60 mg, 90 mg</i>	Tier 1	
<i>diltiazem hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg</i>	Tier 1	QL
<i>diltiazem hcl intravenous solution 50 mg/10ml</i>	Tier 1	
<i>diltiazem hcl intravenous solution reconstituted</i>	Tier 1	
<i>diltiazem hcl oral</i>	Tier 1	LGC
<i>dilt-xr oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg</i>	Tier 1	QL
<i>felodipine er</i>	Tier 1	QL
ISOPTIN SR ORAL TABLET EXTENDED RELEASE 240 MG	NC	N5
<i>isradipine</i>	Tier 1	
<i>matzim la oral tablet extended release 24 hour 180 mg, 240 mg, 300 mg, 360 mg</i>	Tier 1	QL
<i>matzim la oral tablet extended release 24 hour 420 mg</i>	Tier 1	
<i>nicardipine hcl intravenous</i>	Tier 1	
<i>nicardipine hcl oral</i>	Tier 1	
<i>nifediac cc oral tablet extended release 24 hour 30 mg</i>	Tier 1	QL
<i>nifedical xl oral tablet extended release 24 hour 60 mg</i>	Tier 1	QL
<i>nifedipine er oral tablet extended release 24 hour 30 mg, 60 mg, 90 mg</i>	Tier 1	QL
<i>nifedipine er osmotic release oral tablet extended release 24 hour 30 mg, 60 mg, 90 mg</i>	Tier 1	QL
<i>nifedipine oral</i>	Tier 1	

Drug	Status	Notes
<i>nimodipine oral</i>	Tier 1	
<i>nisoldipine er oral tablet extended release 24 hour 17 mg, 20 mg, 25.5 mg, 30 mg, 34 mg, 40 mg, 8.5 mg</i>	Tier 1	QL
NORVASC	NC	N5
NYMALIZE ORAL SOLUTION 60 MG/20ML	Tier 3	QL
PROCARDIA XL	NC	N5
SULAR ORAL TABLET EXTENDED RELEASE 24 HOUR 17 MG, 34 MG, 8.5 MG	NC	N5
<i>taztia xt oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg, 360 mg</i>	Tier 1	QL
TIAZAC	NC	N5
<i>verapamil hcl er oral capsule extended release 24 hour 100 mg, 200 mg, 300 mg</i>	Tier 1	QL
<i>verapamil hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 360 mg</i>	Tier 1	
<i>verapamil hcl er oral tablet extended release 120 mg</i>	Tier 1	LGC
<i>verapamil hcl er oral tablet extended release 180 mg, 240 mg</i>	Tier 1	
<i>verapamil hcl intravenous</i>	Tier 1	
<i>verapamil hcl oral</i>	Tier 1	LGC
VERELAN	NC	N5
Cardiotonics		
<i>digox</i>	Tier 1	LGC
<i>digoxin oral solution</i>	Tier 1	
<i>digoxin oral tablet</i>	Tier 1	LGC
LANOXIN ORAL TABLET 125 MCG	NC	N5
LANOXIN ORAL TABLET 250 MCG	NC	
Cardiovascular Agents - Misc.		
ADCIRCA	Tier 4	PA; ST; SP; QL
ADEMPAS	Tier 4	PA; ST; SP; QL
<i>amlodipine-atorvastatin</i>	NC	
BIDIL	Tier 3	

Drug	Status	Notes
CADUET ORAL TABLET 10-10 MG, 10-20 MG, 10-40 MG, 10-80 MG, 5-10 MG, 5-20 MG, 5-40 MG, 5-80 MG	NC	
CIALIS ORAL TABLET 2.5 MG, 5 MG	Tier 2	PA; N1; QL
<i>epoprostenol sodium</i>	Tier 1	PA; SP
FLOLAN	Tier 4	PA; SP
<i>isoxsuprine hcl oral tablet 10 mg</i>	Tier 1	
LETAIRIS	Tier 4	PA; SP
OPSUMIT	Tier 4	PA; SP; QL
ORENITRAM	Tier 4	PA; SP
REMODULIN	Tier 4	PA; SP
REVATIO INTRAVENOUS	Tier 4	PA; SP
REVATIO ORAL SUSPENSION RECONSTITUTED	Tier 4	PA; ST; #; SP
REVATIO ORAL TABLET	NC	N5; SP
<i>sildenafil citrate oral</i>	Tier 1	PA; SP; QL
TRACLEER	Tier 4	PA; #; SP
TYVASO	Tier 4	PA; SP; QL
TYVASO REFILL	Tier 4	PA; SP; QL
TYVASO STARTER	Tier 4	PA; SP; QL
VELETRI	Tier 4	PA; SP
VENTAVIS	Tier 4	PA; SP
Cephalosporins		
CEDAX ORAL CAPSULE	Tier 3	
CEDAX ORAL SUSPENSION RECONSTITUTED 180 MG/5ML	Tier 3	
<i>cefaclor</i>	Tier 1	
<i>cefaclor er</i>	Tier 1	
<i>cefadroxil oral suspension reconstituted</i>	Tier 1	
<i>cefadroxil oral tablet</i>	Tier 1	
<i>cefazolin sodium injection</i>	Tier 4	
<i>cefazolin sodium intravenous solution reconstituted</i>	Tier 4	
<i>cefazolin sodium-dextrose intravenous solution reconstituted</i>	Tier 1	
<i>cefdinir</i>	Tier 1	

Drug	Status	Notes
<i>cefditoren pivoxil</i>	Tier 1	
<i>cefepime hcl</i>	Tier 4	
<i>cefepime-dextrose</i>	Tier 4	
<i>cefixime</i>	Tier 1	
<i>cefotaxime sodium injection solution reconstituted 1 gm, 10 gm, 2 gm, 500 mg</i>	Tier 4	
<i>cefotetan disodium</i>	Tier 4	
<i>cefotetan disodium-dextrose</i>	Tier 1	
<i>cefoxitin sodium</i>	Tier 4	
<i>cefoxitin sodium-dextrose</i>	Tier 4	
<i>cefpodoxime proxetil</i>	Tier 1	
<i>cefprozil</i>	Tier 1	
<i>ceftazidime and dextrose</i>	Tier 1	
<i>ceftazidime injection solution reconstituted 1 gm, 2 gm, 6 gm</i>	Tier 4	
CEFTIN ORAL SUSPENSION RECONSTITUTED	Tier 3	
CEFTIN ORAL TABLET	NC	N5
<i>ceftriaxone sodium in dextrose</i>	Tier 1	
<i>ceftriaxone sodium injection solution reconstituted 1 gm, 2 gm, 250 mg, 500 mg</i>	Tier 4	
<i>ceftriaxone sodium intravenous</i>	Tier 4	
<i>ceftriaxone sodium-dextrose</i>	Tier 1	
<i>cefuroxime axetil oral tablet</i>	Tier 1	
<i>cefuroxime sodium injection solution reconstituted 1.5 gm, 7.5 gm, 750 mg</i>	Tier 4	
<i>cefuroxime sodium intravenous solution reconstituted 1.5 gm</i>	Tier 4	
<i>cephalexin oral capsule 250 mg, 500 mg</i>	Tier 1	LGC
<i>cephalexin oral suspension reconstituted</i>	Tier 1	
<i>cephalexin oral tablet</i>	Tier 1	
DAXBIA	NC	
KEFLEX	NC	N5
MAXIPIME INJECTION SOLUTION RECONSTITUTED 1 GM, 2 GM	NC	N5
MAXIPIME INTRAVENOUS	NC	

Drug	Status	Notes
ROCEPHIN INJECTION SOLUTION RECONSTITUTED 1 GM	Tier 4	
SPECTRACEF ORAL TABLET 400 MG	Tier 3	
SUPRAX ORAL CAPSULE	Tier 3	#
SUPRAX ORAL SUSPENSION RECONSTITUTED	Tier 3	
SUPRAX ORAL TABLET CHEWABLE	Tier 3	#
<i>tazicef injection</i>	Tier 4	
<i>tazicef intravenous solution reconstituted</i>	Tier 4	
TEFLARO	Tier 4	
Chemicals		
<i>cholestyramine</i>	Tier 1	
<i>pentylene glycol</i>	Tier 1	
<i>quinidine sulfate dihydrate</i>	Tier 1	
<i>sodium hydroxide pellet</i>	Tier 1	
<i>testosterone cypionate</i>	Tier 1	
<i>testosterone powder</i>	Tier 1	
<i>triacetin</i>	Tier 1	
<i>zinc acetate powder</i>	Tier 1	
*Cic Agents - Guanylate Cyclase-C (Gc-C) Agonists***		
TRULANCE	NC	
Contraceptives		
<i>altavera</i>	CE	
<i>alyacen 1/35</i>	CE	
<i>alyacen 7/7/7</i>	CE	
<i>amethia</i>	CE	
<i>amethia lo</i>	CE	
<i>apri</i>	CE	
<i>aranelle</i>	CE	
<i>aviane</i>	CE	
<i>azurette</i>	CE	
<i>balziva</i>	CE	
BEYAZ	Tier 3	
BREVICON (28)	Tier 3	

Drug	Status	Notes
<i>briellyn</i>	CE	
<i>camila</i>	CE	
<i>camrese</i>	CE	
<i>camrese lo</i>	CE	
<i>caziant</i>	CE	
<i>cesia</i>	CE	
<i>chateal</i>	CE	
<i>cryselle-28</i>	CE	
<i>cyclafem 1/35</i>	CE	
<i>cyclafem 7/7/7</i>	CE	
CYCLESSA	Tier 3	
<i>dasetta 1/35</i>	CE	
<i>dasetta 7/7/7</i>	CE	
<i>daysee</i>	CE	
DEBLITANE	CE	
DEPO-PROVERA INTRAMUSCULAR SUSPENSION 150 MG/ML	Tier 3	
DESOGEN	Tier 3	
<i>desogestrel-ethinyl estradiol oral tablet 0.15-30 mg-mcg</i>	CE	
<i>drospirenone-ethinyl estradiol oral tablet 3-0.03 mg</i>	CE	
<i>elinest</i>	CE	
ELLA	CE	
<i>emoquette</i>	CE	
<i>enpresse-28</i>	CE	
<i>errin</i>	CE	
ESTROSTEP FE	Tier 3	
FALESSA ORAL KIT 20-1-0.1 MCG-MG	CE	QL
<i>falmina</i>	CE	
FAYOSIM	CE	
GENERESS FE	Tier 3	
<i>gianvi</i>	CE	
<i>gildagia</i>	CE	
<i>gildess fe 1.5/30</i>	CE	

Drug	Status	Notes
<i>gildess fe 1/20</i>	CE	
<i>heather</i>	CE	QL
<i>introvale</i>	CE	
<i>jolessa</i>	CE	
<i>jolivette</i>	CE	QL
<i>junel 1.5/30</i>	CE	
<i>junel 1/20</i>	CE	
<i>junel fe 1.5/30</i>	CE	
<i>junel fe 1/20</i>	CE	
<i>kariva</i>	CE	
<i>kelnor 1/35</i>	CE	
<i>kurvelo</i>	CE	
KYLEENA	CE	
LARIN FE 1.5/30	CE	QL
<i>leena</i>	CE	
<i>lessina</i>	CE	
<i>levonest</i>	CE	
<i>levonorgest-eth estrad 91-day oral tablet 0.1-0.02 & 0.01 mg, 0.15-0.03 mg</i>	CE	
<i>levonorgestrel-ethinyl estrad</i>	CE	
<i>levora 0.15/30 (28)</i>	CE	
LO LOESTRIN FE	Tier 3	
LOESTRIN 1.5/30 (21)	Tier 3	
LOESTRIN 1/20 (21)	Tier 3	
LOESTRIN FE 1.5/30	Tier 3	
LOESTRIN FE 1/20	Tier 3	
<i>lomedica 24 fe</i>	CE	
<i>loryna</i>	CE	
LOSEASONIQUE	Tier 3	
<i>low-ogestrel</i>	CE	
<i>lutra</i>	CE	
LYZA	CE	QL
<i>marlissa</i>	CE	
<i>medroxyprogesterone acetate intramuscular suspension</i>	CE	

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary
Last Update 12/2017
Next Update

Drug	Status	Notes
MIBELAS 24 FE	CE	
<i>microgestin 1.5/30</i>	CE	
<i>microgestin 1/20</i>	CE	
<i>microgestin fe 1.5/30</i>	CE	
<i>microgestin fe 1/20</i>	CE	
MINASTRIN 24 FE	Tier 3	#
MIRCETTE	NC	N5
MIRENA (52 MG)	CE	#
<i>mono-linyah</i>	CE	
<i>mononessa</i>	CE	
<i>myzilra</i>	CE	QL
NATAZIA	Tier 3	
<i>necon 0.5/35 (28)</i>	CE	
<i>necon 1/35 (28)</i>	CE	
<i>necon 1/50 (28)</i>	CE	
NEXPLANON	CE	QL
<i>next choice one dose</i>	CE	QL
NIKKI	CE	QL
<i>nora-be</i>	CE	QL
<i>norethin ace-eth estrad-fe</i>	CE	
<i>norethindrone oral</i>	CE	
<i>norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg</i>	CE	
<i>norgestim-eth estrad triphasic oral tablet 0.18/0.215/0.25 mg-35 mcg</i>	CE	
NORLYROC	CE	QL
<i>nortrel 0.5/35 (28)</i>	CE	
<i>nortrel 1/35 (21)</i>	CE	
<i>nortrel 1/35 (28)</i>	CE	
<i>nortrel 7/7/7</i>	CE	
NUVARING	CE	#; QL
<i>ocella</i>	CE	
<i>ogestrel</i>	CE	
OPTION 2	CE	
<i>orsythia</i>	CE	

Drug	Status	Notes
ORTHO MICRONOR	Tier 3	
ORTHO TRI-CYCLEN (28)	Tier 3	
ORTHO TRI-CYCLEN LO	Tier 3	
ORTHO-CYCLEN (28)	Tier 3	
ORTHO-NOVUM 1/35 (28)	Tier 3	
ORTHO-NOVUM 7/7/7 (28)	Tier 3	
PARAGARD INTRAUTERINE COPPER	CE	
<i>philith</i>	CE	
PLAN B ONE-STEP	Tier 3	
<i>portia-28</i>	CE	
<i>previfem</i>	CE	
QUARTETTE	CE	#
<i>quasense</i>	CE	
RAJANI	CE	
<i>reclipsen</i>	CE	
RIVELSA	CE	
SAFYRAL	Tier 3	#
SEASONIQUE	NC	N5
SHAROBEL	CE	QL
SKYLA	CE	QL
<i>solia</i>	CE	QL
<i>sprintec 28</i>	CE	
<i>sronyx</i>	CE	
<i>syeda</i>	CE	
<i>take action</i>	CE	QL
TAYTULLA	Tier 3	
<i>tilia fe</i>	CE	
<i>tri-legest fe</i>	CE	
<i>tri-linyah</i>	CE	
<i>trinessa (28)</i>	CE	
TRI-NORINYL (28)	Tier 3	
<i>tri-previfem</i>	CE	
<i>tri-sprintec</i>	CE	
<i>trivora (28)</i>	CE	
<i>velivet</i>	CE	

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
<i>vestura</i>	CE	
<i>viorele</i>	CE	QL
<i>wera</i>	CE	
<i>wymzya fe</i>	CE	
XULANE	CE	QL
YASMIN 28	Tier 3	
YAZ	Tier 3	
<i>zarah</i>	CE	
<i>zenchent</i>	CE	
<i>zovia 1/35e (28)</i>	CE	
<i>zovia 1/50e (28)</i>	CE	
Corticosteroids		
<i>budesonide oral</i>	Tier 1	
CORTEF	NC	N5
DEPO-MEDROL	Tier 3	
DEXAMETHASONE INTENSOL	Tier 2	
<i>dexamethasone oral elixir</i>	Tier 1	
<i>dexamethasone oral tablet</i>	Tier 1	
<i>dexamethasone sod phosphate pf</i>	Tier 1	
<i>dexamethasone sodium phosphate injection solution 10 mg/ml, 100 mg/10ml</i>	Tier 1	
EMFLAZA	NC	
ENTOCORT EC ORAL CAPSULE DELAYED RELEASE PARTICLES	NC	N5
<i>fludrocortisone acetate oral</i>	Tier 1	
<i>hydrocortisone oral</i>	Tier 1	
LOCORT 11-DAY	NC	
LOCORT 7-DAY	NC	
MEDROL ORAL TABLET	NC	N5
<i>methylprednisolone oral tablet</i>	Tier 1	
<i>methylprednisolone sodium succ injection solution reconstituted 40 mg</i>	Tier 1	
MILLIPRED ORAL SOLUTION	Tier 3	
ORAPRED ODT	NC	N5
PEDIAPRED	NC	N5

Drug	Status	Notes
<i>prednisolone sodium phosphate oral solution 10 mg/5ml, 15 mg/5ml, 20 mg/5ml, 25 mg/5ml, 6.7 (5 base) mg/5ml</i>	Tier 1	
<i>prednisolone sodium phosphate oral tablet dispersible</i>	Tier 1	
PREDNISONO INTENSOL	Tier 2	
<i>prednisone oral solution</i>	Tier 1	
<i>prednisone oral tablet 1 mg, 10 mg, 2.5 mg, 20 mg, 5 mg</i>	Tier 1	LGC
<i>prednisone oral tablet 50 mg</i>	Tier 1	
RAYOS	Tier 3	ST
SOLU-CORTEF INJECTION SOLUTION RECONSTITUTED 100 MG, 500 MG	Tier 3	
SOLU-MEDROL INJECTION SOLUTION RECONSTITUTED 2 GM, 500 MG	Tier 3	
UCERIS ORAL	Tier 3	ST; #; QL
ZODEX 12-DAY	NC	
ZONACORT 11 DAY	NC	
ZONACORT 7 DAY	NC	
Cough/Cold/Allergy		
<i>acetylcysteine inhalation</i>	Tier 1	
<i>alavert allergy/sinus</i>	Tier 1	Select OTC
ALLEGRA-D ALLERGY & CONGESTION	Tier 1	Select OTC
<i>benzonatate</i>	Tier 1	
<i>cetirizine-pseudoephedrine er</i>	Tier 1	Select OTC
CLARINEX-D 12 HOUR	Tier 3	QL
CLARITIN-D 12 HOUR	Tier 1	Select OTC
CLARITIN-D 24 HOUR	NC	N5; Select OTC
<i>fexofenadine-pseudoephed er oral tablet extended release 24 hour</i>	Tier 1	Select OTC
<i>guaifenesin ac</i>	NC	
HYCOFENIX	Tier 3	
<i>hydromet</i>	Tier 1	
<i>loratadine-d 12hr</i>	Tier 1	Select OTC
<i>loratadine-d 24hr</i>	Tier 1	Select OTC

Drug	Status	Notes
LORTUSS EX ORAL LIQUID 30-10-100 MG/5ML	Tier 3	
<i>mm loratadine-d 24 hour</i>	Tier 1	Select OTC
<i>nebusal inhalation nebulization solution 3 %</i>	Tier 1	
NEBUSAL INHALATION NEBULIZATION SOLUTION 6 %	Tier 2	
OBREDON	Tier 3	
<i>promethazine vclcodeine</i>	Tier 1	
<i>promethazine-dm</i>	Tier 1	
<i>pseudoeph-chlorphen-hydrocod</i>	Tier 1	
SEMPREX-D	Tier 3	
<i>sodium chloride inhalation nebulization solution 10 %, 7 %</i>	Tier 1	
TESSALON PERLES	NC	N5
TUSNEL C	NC	
TUSSICAPS	Tier 3	QL
TUZISTRA XR ORAL SUSPENSION EXTENDED RELEASE	Tier 3	
<i>wal-fex d allergy & congestion oral tablet extended release 24 hour</i>	Tier 1	Select OTC
ZUTRIPRO	NC	
ZYRTEC-D ALLERGY & CONGESTION	NC	N5; Select OTC
*Cyclin-Dependent Kinases (Cdk) Inhibitors***		
IBRANCE	Tier 4	PA; SP; QL
KISQALI 200 DOSE	Tier 4	PA; SP; QL
KISQALI 400 DOSE	Tier 4	PA; SP; QL
KISQALI 600 DOSE	Tier 4	PA; SP; QL
VERZENIO	Tier 4	PA; SP; QL
*Cystic Fibrosis Agent - Combinations***		
ORKAMBI	Tier 4	PA; QL
Dermatologicals		
ABREVA	Tier 1	Select OTC
ABSORICA	NC	
ACANYA	NC	
<i>acitretin</i>	Tier 1	QL
<i>acyclovir external</i>	Tier 1	

Drug	Status	Notes
ACZONE	Tier 3	ST; #
<i>adapalene external cream</i>	Tier 1	
<i>adapalene external gel 0.1 %</i>	NC	
<i>adapalene external gel 0.3 %</i>	Tier 1	
<i>adapalene external lotion</i>	Tier 1	
<i>adapalene-benzoyl peroxide</i>	Tier 1	
AKTIPAK	Tier 3	
ALA SCALP	Tier 3	
ALA-QUIN	NC	
<i>alclometasone dipropionate</i>	Tier 1	
ALCORTIN A	NC	
ALDARA	NC	N5
ALOQUIN	NC	
ALTABAX	Tier 3	
<i>amcinonide</i>	Tier 1	
AMELUZ	Tier 3	
<i>ammonium lactate external</i>	Tier 1	
<i>amnestem</i>	Tier 3	PA; ST; QL
APEXICON E	Tier 3	
ASTERO	NC	
ATRALIN	NC	
AVAGE	Tier 3	
<i>avar cleanser</i>	Tier 1	
AVAR LS CLEANSER	NC	N5
<i>avar-e emollient</i>	Tier 1	
<i>avar-e green</i>	Tier 1	
AVAR-E LS	NC	N5
<i>avita external cream</i>	Tier 1	PA; QL
<i>avita external gel</i>	Tier 1	PA
AVO CREAM	Tier 3	
AZELEX	Tier 3	
BACTROBAN EXTERNAL CREAM	NC	N5
BENSAL HP	NC	
BENZACLIN	NC	
BENZACLIN WITH PUMP	NC	#

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
<i>benzoyl peroxide-erythromycin</i>	Tier 1	
<i>betamethasone dipropionate aug external cream</i>	Tier 1	
<i>betamethasone dipropionate aug external gel</i>	Tier 1	QL
<i>betamethasone dipropionate aug external lotion</i>	Tier 1	QL
<i>betamethasone dipropionate aug external ointment</i>	Tier 1	QL
<i>betamethasone dipropionate external</i>	Tier 1	
<i>betamethasone valerate external</i>	Tier 1	
BIAFINE	Tier 3	
BIONECT EXTERNAL CREAM	Tier 3	
BIONECT EXTERNAL GEL	Tier 3	
BOTOX COSMETIC INTRAMUSCULAR SOLUTION RECONSTITUTED 100 UNIT	NC	N5
BOTOX COSMETIC INTRAMUSCULAR SOLUTION RECONSTITUTED 50 UNIT	Tier 4	PA
BP CLEANSING WASH	Tier 1	
<i>calcipotriene external cream</i>	Tier 1	ST
<i>calcipotriene external ointment</i>	Tier 1	ST
<i>calcipotriene external solution</i>	Tier 1	
<i>calcipotriene-betameth diprop</i>	NC	
<i>calcitrene</i>	Tier 1	ST
<i>calcitriol external</i>	Tier 1	
<i>cantharidin</i>	Tier 1	
CAPEX	NC	
CARAC	NC	
CEM-UREA	NC	
CENTANY	NC	N5
CENTANY AT	Tier 3	
CICLODAN CREAM	NC	
CICLODAN EXTERNAL SOLUTION	Tier 1	PA
CICLODAN SOLUTION	NC	
<i>ciclopirox external gel</i>	Tier 1	
<i>ciclopirox external shampoo</i>	Tier 1	
<i>ciclopirox external solution</i>	Tier 1	PA
<i>ciclopirox olamine external</i>	Tier 1	

Drug	Status	Notes
<i>ciclopirox treatment</i>	NC	
<i>claravis</i>	Tier 1	QL
CLEOCIN-T	NC	N5
CLINDACIN ETZ EXTERNAL KIT	NC	
CLINDACIN PAC	NC	
CLINDAGEL	NC	N5
<i>clindamycin phos-benzoyl perox</i>	NC	
<i>clindamycin phosphate external</i>	Tier 1	
<i>clindamycin-tretinoin</i>	Tier 1	
<i>clobetasol propionate e</i>	Tier 1	QL
<i>clobetasol propionate emulsion</i>	Tier 1	QL
<i>clobetasol propionate external cream</i>	Tier 1	QL
<i>clobetasol propionate external foam</i>	Tier 1	QL
<i>clobetasol propionate external gel</i>	Tier 1	QL
<i>clobetasol propionate external liquid</i>	Tier 1	QL
<i>clobetasol propionate external lotion</i>	Tier 1	QL
<i>clobetasol propionate external ointment</i>	Tier 1	QL
<i>clobetasol propionate external shampoo</i>	Tier 1	QL
<i>clobetasol propionate external solution</i>	Tier 1	QL
CLOBEX	NC	N5
CLOBEX SPRAY	NC	N5
<i>clocortolone pivalate</i>	Tier 1	
<i>clodan external shampoo</i>	Tier 1	QL
CLODERM	Tier 3	
<i>clotrimazole-betamethasone</i>	Tier 1	
<i>coal tar external solution</i>	Tier 1	
<i>collagenase</i>	Tier 1	
CONDYLOX EXTERNAL GEL	Tier 3	
CORDRAN EXTERNAL CREAM	Tier 3	#
CORDRAN EXTERNAL LOTION	Tier 3	
CORDRAN EXTERNAL OINTMENT	Tier 3	#
CORDRAN EXTERNAL TAPE	Tier 3	#, QL
CORMAX SCALP APPLICATION	Tier 1	QL
CORTISPORIN EXTERNAL	Tier 2	
COSENTYX	Tier 4	PA; ST; SP

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
COSENTYX SENSOREADY PEN SUBCUTANEOUS SOLUTION AUTO- INJECTOR 150 MG/ML	Tier 4	PA; ST; SP
CUTIVATE EXTERNAL CREAM	NC	N5
CUTIVATE EXTERNAL LOTION	NC	N5
<i>dapsone external</i>	Tier 1	QL
DENAVIR	Tier 3	
DERMA-SMOOTH/FS BODY	NC	
DERMASORB TA	Tier 3	
DESONATE	Tier 3	
<i>desonide external</i>	Tier 1	
DESOWEN EXTERNAL CREAM	NC	N5
DESOWEN EXTERNAL LOTION	NC	N5
<i>desoximetasone external</i>	Tier 1	
<i>diclofenac sodium transdermal gel 1 %</i>	Tier 1	QL
<i>diclofenac sodium transdermal gel 3 %</i>	NC	
<i>diclofenac sodium transdermal solution</i>	NC	
DICLOFEX DC	NC	
DIFFERIN EXTERNAL CREAM	NC	
DIFFERIN EXTERNAL GEL 0.1 %	Tier 1	Select OTC
DIFFERIN EXTERNAL GEL 0.3 %	NC	
DIFFERIN EXTERNAL LOTION	Tier 3	ST
<i>diflorasone diacetate external</i>	Tier 1	
DIPROLENE	NC	N5
DIPROLENE AF	NC	N5
DOVONEX EXTERNAL CREAM	NC	N5
<i>doxepin hcl external</i>	Tier 1	QL
<i>doxycycline</i>	NC	
DRITHO-CREME HP	Tier 3	
DUAC	NC	
DUROLANE	Tier 4	PA
<i>econazole nitrate external</i>	Tier 1	QL
ECOZA	NC	
EFUDEX EXTERNAL CREAM	NC	N5
ELIDEL	Tier 3	PA; ST

Drug	Status	Notes
ELOCON EXTERNAL CREAM	NC	N5
ELOCON EXTERNAL OINTMENT	NC	N5
ENSTILAR	Tier 3	QL
EPICERAM	Tier 3	
EPIDUO	Tier 2	#
EPIDUO FORTE	Tier 2	#
EPIFOAM	Tier 3	
ERTACZO	NC	
<i>ery</i>	Tier 1	
ERYGEL	NC	N5
<i>erythromycin external</i>	Tier 1	
EURAX	Tier 3	
EXELDERM	NC	
EXODERM EXTERNAL LOTION	Tier 1	
EXTINA	NC	N5
FABIOR	Tier 3	ST
FINACEA	Tier 3	#
<i>finasteride oral tablet 1 mg</i>	Tier 1	
FIRST-HYDROCORTISONE	Tier 3	
FLECTOR	NC	
<i>fluocinolone acetonide</i>	Tier 1	
<i>fluocinolone acetonide body</i>	Tier 1	
<i>fluocinolone acetonide external</i>	Tier 1	
<i>fluocinonide external cream 0.05 %</i>	Tier 1	ST; QL
<i>fluocinonide external cream 0.1 %</i>	Tier 1	QL
<i>fluocinonide external gel</i>	Tier 1	QL
<i>fluocinonide external ointment</i>	Tier 1	QL
<i>fluocinonide external solution</i>	Tier 1	QL
FLUOROPLEX	NC	
<i>fluorouracil external cream 0.5 %</i>	NC	
<i>fluorouracil external cream 5 %</i>	Tier 1	
<i>fluorouracil external solution</i>	Tier 1	
<i>flurandrenolide</i>	Tier 1	
<i>fluticasone propionate external cream</i>	Tier 1	ST
<i>fluticasone propionate external lotion</i>	Tier 1	

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
<i>fluticasone propionate external ointment</i>	Tier 1	
GEBAUERS PAIN EASE	Tier 3	
GEBAUERS SPRAY AND STRETCH	Tier 3	
GENADUR EXTERNAL	Tier 3	
<i>gentamicin sulfate external cream</i>	Tier 1	
<i>gentamicin sulfate external ointment</i>	Tier 1	LGC
<i>geri-hydrolac 12 external cream</i>	Tier 1	
HALAC	NC	
<i>halobetasol propionate</i>	Tier 1	QL
HALOG	Tier 3	
HALOTIN	NC	
<i>hydrocortisone ace-pramoxine external cream 2.5-1 %</i>	NC	
<i>hydrocortisone butyr lipo base</i>	Tier 1	
<i>hydrocortisone butyrate external ointment</i>	Tier 1	
<i>hydrocortisone butyrate external solution</i>	Tier 1	
<i>hydrocortisone external cream 2.5 %</i>	Tier 1	
<i>hydrocortisone external lotion 2.5 %</i>	Tier 1	
<i>hydrocortisone external ointment 2.5 %</i>	Tier 1	
<i>hydrocortisone valerate</i>	Tier 1	
HYLATOPIC PLUS EXTERNAL CREAM	Tier 3	
<i>imiquimod external</i>	Tier 1	QL
INOVA 4/1 ACNE CONTROL THERAPY	Tier 3	
INOVA 8/2 ACNE CONTROL THERAPY	Tier 3	
JUBLIA	Tier 3	PA; ST
KENALOG EXTERNAL	NC	N5
KERALYT SCALP	Tier 3	
<i>ketoconazole external cream</i>	Tier 1	
<i>ketoconazole external foam</i>	NC	
<i>ketoconazole external shampoo</i>	Tier 1	
KETODAN EXTERNAL KIT	NC	
KLARON	NC	N5
KLOFENSAID II	NC	
<i>lactic acid e</i>	Tier 1	
<i>lactic acid external lotion</i>	Tier 1	

Drug	Status	Notes
LATISSE	Tier 3	
LDO PLUS	NC	
LEVULAN KERASTICK	Tier 3	QL
<i>lidocaine external ointment</i>	Tier 1	PA; QL
<i>lidocaine external patch 5 %</i>	Tier 1	PA; ST
<i>lidocaine hcl external solution</i>	Tier 1	
<i>lidocaine pak</i>	Tier 1	QL
<i>lidocaine-prilocaine external cream</i>	Tier 1	PA; QL
<i>lidocaine-tetracaine</i>	Tier 1	QL
LIDODERM	NC	N5
<i>lidovin</i>	NC	
<i>lidozol</i>	NC	
<i>lindane external shampoo</i>	Tier 1	
LOCOID EXTERNAL CREAM	NC	N5
LOCOID EXTERNAL LOTION	Tier 3	
LOCOID LIPOCREAM	NC	N5
LOPROX EXTERNAL CREAM	NC	N5
LOPROX EXTERNAL KIT 0.77 %	NC	
LOPROX EXTERNAL SHAMPOO	NC	N5
LOTRISONE EXTERNAL CREAM	NC	N5
LUXIQ	NC	N5
LUZU	NC	
LYCELLE	Tier 3	
<i>malathion external</i>	Tier 1	
<i>melpaque hp</i>	Tier 1	
<i>methoxsalen rapid</i>	Tier 1	
METROCREAM	Tier 3	
METROGEL EXTERNAL GEL	NC	N5
METROLOTION	Tier 3	
<i>metronidazole external gel</i>	Tier 1	
MICORT-HC	NC	
MIRVASO	Tier 3	
<i>mometasone furoate external</i>	Tier 1	
<i>mupirocin calcium</i>	Tier 1	QL
<i>mupirocin external</i>	Tier 1	QL

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
<i>myorisan oral capsule 10 mg, 20 mg, 40 mg</i>	Tier 1	QL
MYORISAN ORAL CAPSULE 30 MG	Tier 1	QL
<i>naftifine hcl external cream 2 %</i>	NC	
NAFTIN EXTERNAL CREAM 2 %	NC	
NAFTIN EXTERNAL GEL 1 %	NC	
NAFTIN EXTERNAL GEL 2 %	NC	#
<i>napro external</i>	NC	
NATROBA	Tier 3	
NEOSALUS CP	Tier 3	
NEOSALUS EXTERNAL FOAM	Tier 3	
NEOSALUS EXTERNAL LOTION	Tier 3	
NEO-SYNALAR EXTERNAL CREAM	Tier 3	
NEUAC EXTERNAL GEL	NC	
NIZORAL	NC	N5
NORITATE	Tier 3	
NUCORT	NC	
<i>nyamyc</i>	Tier 1	
<i>nystatin external</i>	Tier 1	
<i>nystatin-triamcinolone</i>	Tier 1	
<i>nystop</i>	Tier 1	
OLUX	NC	N5
OLUX-E	NC	N5
ONEXTON	NC	
ORACEA	NC	
OVACE PLUS EXTERNAL SHAMPOO	NC	N5
OVACE PLUS WASH	NC	N5
OVACE WASH	NC	N5
OVIDE	NC	N5
<i>oxiconazole nitrate</i>	NC	
OXISTAT	NC	
OXSORALEN ULTRA	NC	N5
PANDEL	Tier 3	
PANRETIN	Tier 2	
PENLAC	NC	N5

Drug	Status	Notes
PENNSAID TRANSDERMAL SOLUTION 2 %	NC	
<i>permethrin external cream</i>	Tier 1	
PICATO EXTERNAL GEL 0.015 %, 0.05 %	Tier 3	QL
PLEXION	NC	N5
PLEXION CLEANSER EXTERNAL LIQUID	NC	N5
PLEXION CLEANSING CLOTH EXTERNAL PAD	Tier 3	ST
PODOCON	Tier 3	
PRAMOSONE EXTERNAL CREAM 1-1 %	Tier 3	
PRAMOSONE EXTERNAL LOTION 1-2.5 %	Tier 3	
PRAMOSONE EXTERNAL OINTMENT 1-2.5 %	Tier 3	
<i>prednicarbate</i>	Tier 1	
PROMISEB	Tier 3	
PROPECIA	Tier 3	
PROTOPIC	NC	N5
PRUDOXIN	Tier 3	QL
PRUTECT	Tier 3	
<i>psorcon</i>	Tier 3	
RADIAGEL	Tier 3	
RADIAPLEXRX	Tier 3	
REFISSA	Tier 3	
REGENECARE	Tier 3	
REGRANEX	Tier 3	PA; QL
RENOVA	Tier 3	
RETIN-A	NC	N5
RETIN-A MICRO	NC	N5; #
RETIN-A MICRO PUMP EXTERNAL GEL 0.04 %, 0.1 %	NC	N5; #
RETIN-A MICRO PUMP EXTERNAL GEL 0.08 %	Tier 3	PA; ST
RHOFADE	Tier 3	QL
<i>rosadan external gel</i>	Tier 1	

Drug	Status	Notes
ROSADAN EXTERNAL KIT	NC	
<i>rosanil cleanser</i>	Tier 1	
<i>rynoderm</i>	NC	
<i>salacyn</i>	Tier 1	
SALEX	Tier 3	
<i>salicylic acid external cream</i>	Tier 1	
<i>salicylic acid external liquid</i>	Tier 1	
<i>salicylic acid external lotion</i>	Tier 1	
<i>salicylic acid external shampoo</i>	Tier 1	
<i>salicylic acid wart remover</i>	Tier 1	
SANTYL	Tier 3	QL
<i>scalacort</i>	Tier 1	
<i>seb-prev wash</i>	Tier 1	
<i>selenium sulfide external lotion</i>	Tier 1	
<i>selenium sulfide external shampoo</i>	NC	
<i>selenium sulf-pyrithione-urea</i>	NC	
SELRX	NC	
SERNIVO	Tier 3	
SILIQ	Tier 4	PA; ST; SP; QL
SILVADENE	NC	N5
<i>silver nitrate external</i>	Tier 1	
<i>silver sulfadiazine external</i>	Tier 1	
SKLICE	Tier 3	
<i>sodium sulfacetamide external shampoo</i>	Tier 1	
SOLARAZE	NC	
SONAFINE	Tier 3	
SOOLANTRA	Tier 3	ST
SORIATANE ORAL CAPSULE 10 MG, 17.5 MG, 25 MG	NC	N5
SORILUX	NC	
<i>spinosad</i>	Tier 1	
<i>sss 10-5 external cream</i>	Tier 1	
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier 4	PA; ST; SP; QL
<i>sulfacetamide sodium (acne)</i>	Tier 1	

Drug	Status	Notes
<i>sulfacetamide sodium external gel</i>	Tier 1	
<i>sulfacetamide sodium external liquid</i>	Tier 1	
<i>sulfacetamide sodium-sulfur external cream</i>	Tier 1	
<i>sulfacetamide sodium-sulfur external emulsion</i>	Tier 1	
<i>sulfacetamide sodium-sulfur external liquid 10-2 % , 9.8-4.8 %</i>	Tier 1	
<i>sulfacetamide sodium-sulfur external lotion</i>	Tier 1	
<i>sulfacetamide sodium-sulfur external pad 10-4 %</i>	Tier 1	
<i>sulfacetamide sodium-sulfur external suspension</i>	NC	
<i>sulfacetamide sod-sulfur wash external kit</i>	NC	
<i>sulfacleanse 8/4</i>	NC	
SULFAMYLON	Tier 3	
SUMADAN	NC	
SUMAXIN CP	NC	
SUMAXIN TS	NC	
SYNALAR (CREAM)	NC	
SYNALAR (OINTMENT)	NC	
SYNALAR EXTERNAL CREAM	Tier 3	
SYNALAR EXTERNAL OINTMENT	Tier 1	
SYNALAR TS	NC	
SYNERA	Tier 3	QL
TACLONEX EXTERNAL OINTMENT	NC	N5
TACLONEX EXTERNAL SUSPENSION	Tier 3	QL
<i>tacrolimus external</i>	Tier 1	PA; ST
TALTZ	Tier 4	PA; ST; SP
TARGRETIN EXTERNAL	Tier 4	PA; SP
<i>tazarotene external</i>	Tier 1	PA
TAZORAC	Tier 3	PA; ST; #
TEMOVATE EXTERNAL CREAM	Tier 3	QL
TEMOVATE EXTERNAL GEL	NC	N5; #
TEMOVATE EXTERNAL OINTMENT	NC	N5; #
TEMOVATE EXTERNAL SOLUTION	NC	N5; #
TEXACORT	Tier 2	
TOLAK	NC	
TOPICORT EXTERNAL CREAM	NC	N5

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
TOPICORT EXTERNAL GEL	NC	N5
TOPICORT EXTERNAL OINTMENT	NC	N5
TOPICORT SPRAY	NC	
TREMFYA	Tier 4	PA; ST; SP; QL
<i>tretinoin (emollient)</i>	Tier 1	
<i>tretinoin external cream</i>	Tier 1	PA
<i>tretinoin external gel 0.01 %, 0.025 %</i>	Tier 1	PA
<i>tretinoin external gel 0.05 %</i>	Tier 1	
<i>tretinoin microsphere</i>	Tier 1	PA
<i>tretinoin microsphere pump</i>	Tier 1	PA
TRETIN-X EXTERNAL CREAM 0.075 %	Tier 3	PA; ST
<i>triamcinolone acetonide external aerosol solution</i>	Tier 1	
<i>triamcinolone acetonide external cream</i>	Tier 1	LGC
<i>triamcinolone acetonide external lotion</i>	Tier 1	
<i>triamcinolone acetonide external ointment 0.025 %</i>	Tier 1	LGC
<i>triamcinolone acetonide external ointment 0.1 %, 0.5 %</i>	Tier 1	LGC
<i>triderm external cream 0.1 %</i>	Tier 1	LGC
TRIDERM EXTERNAL CREAM 0.5 %	Tier 1	LGC
TRIDESILON	NC	N5
TRI-LUMA	Tier 3	
ULESFIA	Tier 3	QL
ULTRAVATE EXTERNAL CREAM	NC	N5
ULTRAVATE EXTERNAL LOTION	Tier 3	QL
ULTRAVATE EXTERNAL OINTMENT	NC	N5
URAMAXIN EXTERNAL FOAM	NC	
<i>urea nail external kit</i>	NC	
<i>urea nail external stick</i>	NC	
UTOPIC	NC	
VALCHLOR	Tier 4	PA; SP; QL
VANIQA	Tier 3	
VANOS	NC	
VECTICAL	Tier 3	

Drug	Status	Notes
VELTIN	Tier 3	ST
VENIPUNCTURE CPI	NC	
VERDESO	NC	
VIRASAL	Tier 3	
VOLTAREN TRANSDERMAL	Tier 3	#; QL
VUSION	Tier 3	
XELITRAL	NC	
XERESE	Tier 3	
XOLEGEL	NC	
XYLOCAINE EXTERNAL	NC	N5
<i>zenatane oral capsule 10 mg, 20 mg, 40 mg</i>	Tier 1	QL
ZENATANE ORAL CAPSULE 30 MG	Tier 1	QL
ZIANA	Tier 3	ST
ZONALON	Tier 3	QL
ZOVIRAX EXTERNAL OINTMENT	NC	
ZYCLARA	NC	
ZYCLARA PUMP	NC	
Diagnostic Products		
ACCU-CHEK AVIVA PLUS IN VITRO	NC	
ACCU-CHEK COMPACT PLUS	NC	
ACCU-CHEK SMARTVIEW	NC	
ACCUTREND GLUCOSE	NC	
ADVANCE INTUITION TEST	NC	
ADVANCE MICRO-DRAW TEST	NC	
ADVOCATE REDI-CODE IN VITRO	NC	
ADVOCATE REDI-CODE+ TEST	NC	
ADVOCATE TEST	NC	
AGAMATRIX AMP TEST	NC	
AGAMATRIX JAZZ TEST	NC	
AGAMATRIX KEYNOTE TEST	NC	
AGAMATRIX PRESTO TEST	NC	
ASSURE 3 TEST	NC	
ASSURE 4 TEST	NC	
ASSURE II	NC	
ASSURE II CHECK	NC	

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
ASSURE PLATINUM	NC	
ASSURE PRISM MULTI TEST	NC	
ASSURE PRO TEST	NC	
AT LAST TEST	NC	
BAYER BREEZE 2 TEST	NC	
BAYER CONTOUR NEXT TEST	NC	
BAYER CONTOUR TEST	NC	
BIOSCANNER GLUCOSE TEST	NC	
<i>blood glucose test</i>	NC	
CARESENS N GLUCOSE TEST	NC	
CHEMSTRIP K	Tier 3	
CLEVER CHEK AUTO-CODE TEST	NC	
CLEVER CHEK AUTO-CODE VOICE IN VITRO	NC	
CLEVER CHEK TEST	NC	
CLEVER CHOICE AUTO-CODE TEST	NC	
CLEVER CHOICE MICRO TEST	NC	
COOL BLOOD GLUCOSE TEST STRIPS	NC	
CVS ADVANCED GLUCOSE TEST	NC	
<i>diatrue plus test</i>	NC	
DUO-CARE TEST	NC	
<i>easy plus blood glucose test</i>	NC	
<i>easy plus ii glucose test</i>	NC	
EASY STEP TEST	NC	
<i>easy talk blood glucose test</i>	NC	
EASY TOUCH HEALTHPRO TEST	NC	
EASY TOUCH TEST	NC	
<i>easy trak blood glucose test</i>	NC	
EASYGLUCO IN VITRO	NC	
EASYGLUCO PLUS IN VITRO	NC	
EASYMAX 15 TEST	NC	
EASYMAX TEST	NC	
<i>easyplus blood glucose test</i>	NC	
EASYPRO BLOOD GLUCOSE TEST	NC	
EASYPRO PLUS IN VITRO	NC	

Drug	Status	Notes
<i>element compact test</i>	NC	
ELEMENT TEST	NC	
EMBRACE BLOOD GLUCOSE TEST	NC	
EMBRACE EVO BLOOD GLUCOSE TEST	NC	
EMBRACE PRO GLUCOSE TEST	NC	
EVENCARE + BLOOD GLUCOSE TEST	NC	
EVENCARE BLOOD GLUCOSE TEST	NC	
EVENCARE G2 TEST	NC	
EVENCARE G3 TEST	NC	
EVENCARE MINI GLUCOSE TEST	NC	
EVOLUTION AUTOCODE IN VITRO	NC	
EZ SMART BLOOD GLUCOSE TEST	NC	
EZ SMART PLUS GLUCOSE TEST	NC	
FIFTY50 GLUCOSE TEST 2.0	NC	
FORA D15G BLOOD GLUCOSE TEST	NC	
FORA D20 BLOOD GLUCOSE TEST	NC	
FORA D40/G31 BLOOD GLUCOSE	NC	
FORA G20 BLOOD GLUCOSE TEST	NC	
FORA G30A BLOOD GLUCOSE TEST	NC	
FORA GD20 TEST	NC	
FORA GD50 BLOOD GLUCOSE TEST	NC	
FORA TN'G/TN'G VOICE	NC	
FORA V10 BLOOD GLUCOSE TEST	NC	
FORA V12 BLOOD GLUCOSE TEST	NC	
FORA V20 BLOOD GLUCOSE TEST	NC	
FORA V30A BLOOD GLUCOSE TEST	NC	
FORACARE GD40 TEST	NC	
FORACARE PREMIUM V10 TEST	NC	
FORACARE TEST N GO TEST	NC	
FORTISCARE TEST	NC	
FREESTYLE INSULINX TEST	Tier 2	QL
FREESTYLE LITE TEST	Tier 2	QL
FREESTYLE PRECISION NEO TEST	Tier 2	QL
FREESTYLE TEST	Tier 2	QL
GASTROGRAFIN	NC	N5

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
<i>ge100 blood glucose test</i>	NC	
GENSTRIP 50	NC	
<i>ght test</i>	NC	
GLUCAGEN DIAGNOSTIC	Tier 3	QL
GLUCO PERFECT 3 TEST	NC	
GLUCOCARD 01 SENSOR PLUS	NC	
GLUCOCARD EXPRESSION TEST	NC	
GLUCOCARD SHINE TEST	NC	
GLUCOCARD VITAL TEST	NC	
GLUCOCARD X-SENSOR	NC	
GLUCOCOM TEST	NC	
GLUCONAVII BLOOD GLUCOSE TEST	NC	
IN TOUCH BLOOD GLUCOSE TEST	NC	
INFINITY BLOOD GLUCOSE TEST	NC	
KETOCARE	Tier 3	
KETOSTIX	Tier 3	
<i>kroger blood glucose test</i>	NC	
<i>kroger test</i>	NC	
LIBERTY NEXT GENERATION TEST	NC	
<i>liberty test</i>	NC	
<i>md-gastroview</i>	Tier 1	
<i>meijer blood glucose test</i>	NC	
MEIJER TRUETEST TEST	NC	
MEIJER TRUETRACK TEST	NC	
METOPIRONE	Tier 3	
MICRODOT TEST	NC	
MYGLUCOHEALTH TEST	NC	
NEUTEK 2TEK TEST	NC	
NEXGEN TEST	NC	
NOVA MAX GLUCOSE TEST	NC	
ON CALL EXPRESS BLOOD GLUCOSE	NC	
ON CALL PLUS BLOOD GLUCOSE	NC	
ON CALL VIVID BLOOD GLUCOSE	NC	
ONETOUCH ULTRA BLUE	Tier 2	QL
ONETOUCH VERIO IN VITRO STRIP	Tier 2	QL

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
OPTUMRX BLOOD GLUCOSE TEST	NC	
POCKETCHEM EZ TEST	NC	
PRECISION PCX	Tier 2	QL
PRECISION PCX PLUS TEST	Tier 2	QL
PRECISION POINT OF CARE TEST	Tier 2	QL
PRECISION QID TEST	Tier 2	QL
PRECISION SOF-TACT TEST	Tier 2	QL
PRECISION XTRA BLOOD GLUCOSE	Tier 2	QL
PRECISION XTRA KETONE	Tier 3	
PRODIGY NO CODING BLOOD GLUC	NC	
PTS PANELS GLUCOSE TEST	NC	
QUICKTEK TEST	NC	
QUINTET AC BLOOD GLUCOSE TEST	NC	
QUINTET BLOOD GLUCOSE TEST	NC	
RA TRUETEST TEST	NC	
REFUAH PLUS BLOOD GLUCOSE TEST	NC	
REVEAL BLOOD GLUCOSE TEST	NC	
RIGHTEST GS100 BLOOD GLUCOSE	NC	
RIGHTEST GS300 BLOOD GLUCOSE	NC	
RIGHTEST GS550 BLOOD GLUCOSE	NC	
SMART SENSE VALUE TEST	NC	
SMARTEST BLOOD GLUCOSE TEST	NC	
SOLUS V2 TEST	NC	
SUPREME TEST	NC	
SURE EDGE TEST	NC	
SURECHEK BLOOD GLUCOSE TEST	NC	
SURE-TEST EASYPLUS MINI TEST	NC	
TELCARE BLOOD GLUCOSE TEST	NC	
THYROGEN	Tier 4	SP
TRUE METRIX BLOOD GLUCOSE TEST	NC	
TRUETEST TEST	NC	
TRUETRACK TEST	NC	
ULTIMA TEST	NC	
ULTRATRAK PRO TEST	NC	
ULTRATRAK ULTIMATE TEST	NC	

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
UNISTRIP1 GENERIC	NC	
VICTORY AGM-4000 TEST	NC	
VOCAL POINT BLOOD GLUCOSE TEST	NC	
WAVESENSE PRESTO	NC	
Dietary Products/Dietary Management Products		
APPTRIM	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
APPTRIM-D	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
AVAILNEX	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
AXONA	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; Tier 3
CARDIOTEK RX ORAL TABLET	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; Tier 3
CEREFOLIN	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; Tier 3
CEREFOLIN NAC	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
DEPLIN 15	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
DEPLIN 7.5	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
ENLYTE	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; Tier 3
ENTERAGAM	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3

Drug	Status	Notes
<i>folbic</i>	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; Tier 3
FOLBIC RF	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
FOLTANX	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; Tier 3
FOLTANX RF	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
FOLTX ORAL TABLET 1.13-25-2 MG	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
FOSTEUM	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
FOSTEUM PLUS	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
FOVEX	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
GABADONE	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
HYPERTENSA	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
LIMBREL	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; Tier 3
LIMBREL250	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
LIMBREL500	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; Tier 3

Drug	Status	Notes
LIPICHOL 540	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
LISTER-V	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
L-METHYLFOLATE CA ME-CBL NAC	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
L-METHYLFOLATE FORMULA 15	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
L-METHYLFOLATE FORMULA 7.5	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
L-METHYLFOLATE FORTE	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
<i>l-methylfolate-algae-b12-b6</i>	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 1
<i>l-methylfolate-b6-b12</i>	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 1
L-METHYL-MC	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
L-METHYL-MC NAC	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
LUKAID GLA	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
MACUTEK	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
METAFOLBIC	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3

Drug	Status	Notes
METAFOLBIC PLUS	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; Tier 3
METAFOLBIC PLUS RF	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
METANX ORAL CAPSULE	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
PERCURA	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
PROTEOLIN DS	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
PROTEOLIN ORAL TABLET	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
PULMONA	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
SENTRA AM	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
SENTRA PM	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
THERAMINE	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; Tier 3
THERAMINE PLUS	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
TREPADONE	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
VASCAZEN	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3

Drug	Status	Notes
VASCULERA	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
VAYACOG	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
VAYARIN	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
VAYAROL	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
<i>virt-vite forte</i>	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 1
VP-GSTN	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
VSL#3 JUNIOR	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
VSL#3 ORAL PACKET	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
ZYTAZE	M	Only covered in states: CT, DE, IN, KY, LA and TX and excluded elsewhere; TIER 3
Digestive Aids		
CREON	Tier 2	
PANCREAZE	Tier 3	ST
PERTZYE	Tier 3	ST
SUCRAID	Tier 4	SP
VIOKACE	Tier 3	ST
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 10000 UNIT, 25000 UNIT, 40000 UNIT, 5000 UNIT	Tier 2	
*Direct-Acting P2y12 Inhibitors***		
BRILINTA	Tier 2	QL

Drug	Status	Notes
Diuretics		
<i>acetazolamide er</i>	NC	
<i>acetazolamide oral</i>	Tier 1	
ALDACTAZIDE	NC	N5
ALDACTONE	NC	N5
<i>amiloride hcl oral</i>	Tier 1	
<i>amiloride-hydrochlorothiazide</i>	Tier 1	LGC
<i>bumetanide injection</i>	Tier 1	
<i>bumetanide oral tablet 0.5 mg, 1 mg</i>	Tier 1	LGC
<i>bumetanide oral tablet 2 mg</i>	Tier 1	
CAROSPIR	NC	
<i>chlorothiazide oral</i>	Tier 1	
<i>chlorothiazide sodium</i>	Tier 1	
<i>chlorthalidone oral tablet 25 mg, 50 mg</i>	Tier 1	
DEMADEX ORAL TABLET 10 MG, 20 MG	NC	N5
DIAMOX SEQUELS	NC	N5
DIURIL	Tier 3	
DYAZIDE	NC	N5
DYRENIUM	Tier 3	
EDECRIN	Tier 3	
<i>ethacrynic acid oral</i>	Tier 1	
<i>furosemide oral solution 10 mg/ml, 8 mg/ml</i>	Tier 1	
<i>furosemide oral tablet</i>	Tier 1	LGC
<i>hydrochlorothiazide oral tablet 12.5 mg</i>	Tier 1	
<i>hydrochlorothiazide oral tablet 25 mg, 50 mg</i>	Tier 1	LGC
<i>indapamide oral</i>	Tier 1	
KEVEYIS	Tier 4	PA; QL
LASIX	NC	N5
MAXZIDE	NC	N5
MAXZIDE-25	NC	N5
<i>methazolamide oral tablet 25 mg</i>	Tier 1	
<i>methyclothiazide oral</i>	Tier 1	
<i>metolazone</i>	Tier 1	
SODIUM EDECRIN	Tier 3	#
<i>spironolactone oral tablet 100 mg, 50 mg</i>	Tier 1	

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
<i>spironolactone oral tablet 25 mg</i>	Tier 1	LGC
<i>spironolactone-hctz</i>	Tier 1	
<i>toremide oral</i>	Tier 1	
<i>triamterene-hctz oral capsule 37.5-25 mg</i>	Tier 1	LGC
<i>triamterene-hctz oral capsule 50-25 mg</i>	Tier 1	
<i>triamterene-hctz oral tablet</i>	Tier 1	LGC
Endocrine And Metabolic Agents - Misc.		
ACTONEL ORAL TABLET 150 MG, 30 MG, 35 MG, 5 MG	NC	N5
ALDURAZYME	Tier 4	PA; SP
<i>alendronate sodium oral solution</i>	Tier 1	
<i>alendronate sodium oral tablet 10 mg, 35 mg, 40 mg, 5 mg</i>	Tier 1	QL
<i>alendronate sodium oral tablet 70 mg</i>	Tier 1	LGC; QL
AMMONUL	Tier 4	SP
AELVIA	NC	N5
BINOSTO	NC	
BONIVA INTRAVENOUS	NC	N5; SP
BONIVA ORAL TABLET 150 MG	NC	N5
BRAVELLE	M	PA; Only covered in states: CT,IL, KS, MD, NC, and WV and excluded elsewhere; Tier 4; SP
BUPHENYL ORAL POWDER 3 GM/TSP	NC	N5; SP
BUPHENYL ORAL TABLET	NC	SP
<i>cabergoline</i>	Tier 1	
<i>calcitonin (salmon)</i>	Tier 1	QL
<i>calcitriol oral</i>	Tier 1	
CARBAGLU	Tier 4	PA; #; SP
CARNITOR ORAL SOLUTION	Tier 3	
CARNITOR SF	Tier 3	
CETROTIDE SUBCUTANEOUS KIT 0.25 MG	M	PA; Only covered in states: CT,IL, KS, MD, NC, and WV and excluded elsewhere; TIER 4; SP
<i>chorionic gonadotropin intramuscular</i>	Tier 4	PA; SP

Drug	Status	Notes
<i>clomiphene citrate oral</i>	M	Only covered in states: CT,IL, KS, MD, NC, and WV and excluded elsewhere; TIER 4
CYSTADANE	Tier 4	PA; SP
DDAVP INJECTION SOLUTION 4 MCG/ML	NC	N5
DDAVP ORAL	NC	N5
DDAVP RHINAL TUBE	NC	N5
<i>desmopressin ace spray refrig</i>	Tier 1	
<i>desmopressin acetate injection</i>	Tier 4	
<i>desmopressin acetate oral</i>	Tier 1	
<i>doxercalciferol intravenous</i>	NC	
<i>doxercalciferol oral</i>	Tier 1	QL
EGRIFTA SUBCUTANEOUS SOLUTION RECONSTITUTED 1 MG	NC	N5
ELAPRASE	Tier 4	PA; SP
<i>etidronate disodium</i>	Tier 1	
EVISTA	Tier 3	
FABRAZYME	Tier 4	PA; SP
FOLLISTIM AQ INJECTION SOLUTION 75 UNT/0.5ML	M	PA; ST; Only covered in states: CT,IL, KS, MD, NC, and WV and excluded elsewhere; Tier 4; SP
FOLLISTIM AQ SUBCUTANEOUS	M	PA; ST; Only covered in states: CT,IL, KS, MD, NC, and WV and excluded elsewhere; Tier 4; SP
FORTEO SUBCUTANEOUS SOLUTION 600 MCG/2.4ML	Tier 4	PA; ST; SP
FOSAMAX ORAL TABLET 70 MG	NC	N5
FOSAMAX PLUS D	Tier 3	QL
<i>ganirelix acetate</i>	M	PA; Only covered in states: CT,IL, KS, MD, NC, and WV and excluded elsewhere; TIER 4; SP
GENOTROPIN	Tier 4	PA; ST; SP
GENOTROPIN MINIQUICK	Tier 4	PA; ST; SP

Drug	Status	Notes
GONAL-F	M	PA; Only covered in states: CT,IL, KS, MD, NC, and WV and excluded elsewhere; Tier 4; SP
GONAL-F RFF	M	PA; Only covered in states: CT,IL, KS, MD, NC, and WV and excluded elsewhere; Tier 4; SP
GONAL-F RFF REDIJECT	M	PA; Only covered in states: CT,IL, KS, MD, NC, and WV and excluded elsewhere; Tier 4; SP
HECTOROL INTRAVENOUS SOLUTION 2 MCG/ML	NC	
HECTOROL INTRAVENOUS SOLUTION 4 MCG/2ML	NC	N5
HECTOROL ORAL	NC	N5
HP ACTHAR	Tier 4	PA; SP
HUMATROPE	Tier 4	PA; ST; SP
<i>ibandronate sodium intravenous solution 3 mg/3ml</i>	Tier 4	ST; SP
<i>ibandronate sodium oral</i>	Tier 1	ST; QL
INCRELEX	Tier 4	PA; SP
KUVAN	Tier 4	PA; SP
<i>levocarnitine oral solution</i>	Tier 1	
LUMIZYME	Tier 4	PA; SP
LUPRON DEPOT-PED (1-MONTH)	Tier 4	PA; #; SP
LUPRON DEPOT-PED (3-MONTH)	Tier 4	PA; #; SP
MENOPUR	M	PA; ST; Only covered in states: CT,IL, KS, MD, NC, and WV and excluded elsewhere; Tier 4; SP
MIACALCIN INJECTION	Tier 4	PA; ST
MIACALCIN NASAL	NC	N5
NAGLAZYME	Tier 4	PA; SP
NATPARA	Tier 4	PA; QL
NITYR	Tier 4	PA; SP
NORDITROPIN FLEXPPO	Tier 4	PA; ST; SP

Drug	Status	Notes
<i>novarel intramuscular solution reconstituted 10000 unit</i>	M	PA; Only covered in states: CT,IL, KS, MD, NC, and WV and excluded elsewhere; Tier 4; SP
NUTROPIN AQ NUSPIN 10	Tier 4	PA; ST; SP
NUTROPIN AQ NUSPIN 20	Tier 4	PA; ST; SP
NUTROPIN AQ NUSPIN 5	Tier 4	PA; ST; SP
<i>octreotide acetate injection solution 100 mcg/ml, 1000 mcg/ml, 200 mcg/ml, 50 mcg/ml, 500 mcg/ml</i>	Tier 4	PA; SP
OMNITROPE	Tier 4	PA; SP
ORFADIN ORAL CAPSULE 10 MG, 2 MG, 5 MG	Tier 4	PA; SP
ORFADIN ORAL CAPSULE 20 MG	Tier 4	PA
ORFADIN ORAL SUSPENSION	Tier 4	PA; SP
OSPHENA	Tier 3	QL
OVIDREL	M	PA; Only covered in states: CT,IL, KS, MD, NC, and WV and excluded elsewhere; Tier 4; SP
<i>pamidronate disodium</i>	Tier 4	SP
<i>paricalcitol intravenous</i>	NC	
<i>paricalcitol oral</i>	Tier 1	QL
<i>pregnyl</i>	M	PA; Only covered in states: CT,IL, KS, MD, NC, and WV and excluded elsewhere; Tier 4; SP
PROLIA	Tier 4	PA; ST; SP
<i>raloxifene hcl</i>	CE	
RAVICTI	Tier 4	PA; ST; SP; QL
RAYALDEE	Tier 3	PA; ST; QL
RECLAST	NC	N5; SP
<i>risedronate sodium oral tablet 150 mg</i>	Tier 1	ST; QL
<i>risedronate sodium oral tablet 30 mg, 35 mg, 5 mg</i>	Tier 1	QL
<i>risedronate sodium oral tablet delayed release</i>	Tier 1	QL
ROCALTROL ORAL CAPSULE	NC	N5
SAIZEN	Tier 4	PA; ST; SP

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
SAIZEN CLICK.EASY	Tier 4	PA; ST
SAMSCA ORAL TABLET 15 MG, 30 MG	Tier 4	PA; SP; QL
SANDOSTATIN	NC	N5; SP
SANDOSTATIN LAR DEPOT	Tier 4	PA; #; SP
SENSIPAR	Tier 3	PA; #; QL
SEROSTIM SUBCUTANEOUS SOLUTION RECONSTITUTED 4 MG, 5 MG, 6 MG	Tier 4	PA; SP
SIGNIFOR	Tier 4	PA; SP; QL
<i>sod benz-sod phenylacet</i>	Tier 1	
<i>sodium phenylbutyrate oral powder 3 gmltsp</i>	Tier 4	PA; SP
<i>sodium phenylbutyrate oral tablet</i>	Tier 4	PA; SP
SOMATULINE DEPOT	Tier 4	PA; SP
SOMAVERT	Tier 4	PA; #; SP
STIMATE	Tier 4	
SUPPRELIN LA	Tier 4	PA; SP
SYNAREL	Tier 4	PA; SP
TRIPTODUR	Tier 4	PA; SP
TYMLOS	Tier 4	PA; ST; SP; QL
XGEVA	Tier 4	PA; ST; SP
ZEMPLAR INTRAVENOUS	NC	N5
ZEMPLAR ORAL CAPSULE 1 MCG, 2 MCG	NC	N5
<i>zoledronic acid intravenous concentrate</i>	Tier 4	ST; SP
<i>zoledronic acid intravenous solution</i>	Tier 4	ST; SP
ZOMACTON	Tier 4	PA; ST; SP
ZOMETA	NC	SP
ZORBTIVE	Tier 4	PA; SP
Estrogens		
ACTIVELLA	NC	N5
ALORA TRANSDERMAL PATCH TWICE WEEKLY 0.025 MG/24HR, 0.075 MG/24HR	NC	N5
ALORA TRANSDERMAL PATCH TWICE WEEKLY 0.05 MG/24HR, 0.1 MG/24HR	NC	
ANGELIQ	Tier 3	
CLIMARA	NC	N5; #
CLIMARA PRO	Tier 3	#; QL

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
COMBIPATCH	Tier 3	QL
DELESTROGEN INTRAMUSCULAR OIL 10 MG/ML, 40 MG/ML	Tier 3	
DELESTROGEN INTRAMUSCULAR OIL 20 MG/ML	NC	N5
DEPO-ESTRADIOL	Tier 3	
ELESTRIN	Tier 3	QL
ESTRACE ORAL	NC	N5
<i>estradiol oral</i>	Tier 1	LGC
<i>estradiol transdermal patch twice weekly</i>	Tier 1	QL
<i>estradiol transdermal patch weekly</i>	Tier 1	QL
<i>estradiol valerate intramuscular oil 20 mg/ml</i>	Tier 1	
<i>estradiol-norethindrone acet</i>	Tier 1	QL
ESTROGEL	Tier 3	QL
<i>estropipate oral</i>	Tier 1	
EVAMIST	Tier 3	QL
FEMHRT LOW DOSE	Tier 3	
FYAVOLV	Tier 1	
<i>jinteli</i>	Tier 1	QL
MENEST ORAL TABLET 0.3 MG, 0.625 MG, 1.25 MG	Tier 3	
MENOSTAR	Tier 3	#; QL
<i>mimvey</i>	Tier 1	QL
MINIVELLE TRANSDERMAL PATCH TWICE WEEKLY 0.025 MG/24HR, 0.0375 MG/24HR, 0.075 MG/24HR	NC	N5
MINIVELLE TRANSDERMAL PATCH TWICE WEEKLY 0.05 MG/24HR, 0.1 MG/24HR	NC	
<i>norethindrone-eth estradiol</i>	Tier 1	
PREFEST	Tier 3	QL
PREMARIN INJECTION	Tier 3	
PREMARIN ORAL	Tier 3	QL
PREMPHASE	Tier 3	QL
PREMPRO	Tier 3	QL

Drug	Status	Notes
VIVELLE-DOT TRANSDERMAL PATCH TWICE WEEKLY 0.025 MG/24HR, 0.0375 MG/24HR, 0.075 MG/24HR	NC	N5
VIVELLE-DOT TRANSDERMAL PATCH TWICE WEEKLY 0.05 MG/24HR, 0.1 MG/24HR	NC	
*Estrogen-Selective Estrogen Receptor Modulator Comb***		
DUAVEE	Tier 2	QL
*Farnesoid X Receptor (Fxr) Agonists***		
OCALIVA ORAL TABLET 5 MG	Tier 4	PA; ST; SP; QL
Fluoroquinolones		
AVELOX INTRAVENOUS	Tier 3	
AVELOX ORAL	NC	N5
BAXDELA ORAL	Tier 3	PA; QL
CIPRO ORAL SUSPENSION RECONSTITUTED	Tier 3	
CIPRO ORAL TABLET 250 MG, 500 MG	NC	N5
CIPRO XR	NC	N5
<i>ciprofloxacin hcl oral tablet 100 mg, 750 mg</i>	Tier 1	
<i>ciprofloxacin hcl oral tablet 250 mg, 500 mg</i>	Tier 1	LGC
<i>ciprofloxacin in d5w intravenous solution 400 mg/200ml</i>	Tier 1	
<i>ciprofloxacin intravenous solution 400 mg/40ml</i>	Tier 1	
<i>ciprofloxacin-ciproflox hcl er</i>	Tier 1	
FACTIVE	Tier 3	#
LEVAQUIN ORAL TABLET	NC	
<i>levofloxacin in d5w intravenous solution 750 mg/150ml</i>	Tier 1	
<i>levofloxacin oral</i>	Tier 1	
<i>moxifloxacin hcl oral</i>	Tier 1	
<i>ofloxacin oral tablet 400 mg</i>	Tier 1	
Gastrointestinal Agents - Misc.		
ACTIGALL	NC	N5
<i>alosetron hcl</i>	Tier 1	PA; ST
AMITIZA	Tier 2	QL

Drug	Status	Notes
APRISO	Tier 2	QL
ASACOL HD	Tier 3	ST; QL
AZULFIDINE	NC	N5
AZULFIDINE EN-TABS	NC	N5
<i>balsalazide disodium</i>	Tier 1	QL
CANASA	Tier 3	QL
CHENODAL	Tier 4	PA
CIMZIA PREFILLED	Tier 4	PA; ST; SP; QL
CIMZIA STARTER KIT	Tier 4	PA; ST; SP; QL
CIMZIA SUBCUTANEOUS KIT 2 X 200 MG	Tier 4	PA; ST; SP; QL
COLAZAL	NC	N5
<i>cromolyn sodium oral</i>	Tier 1	
DELZICOL	Tier 3	QL
DIPENTUM	Tier 3	ST; QL
<i>enulose</i>	Tier 1	LGC
FOSRENOL ORAL PACKET	Tier 3	
FOSRENOL ORAL TABLET CHEWABLE 1000 MG, 500 MG, 750 MG	Tier 3	
GASTROCROM	NC	N5
GATTEX	Tier 4	PA; SP; QL
<i>generlac</i>	Tier 1	LGC
GIAZO	Tier 3	PA; ST; #; QL
INFLECTRA	Tier 4	PA; ST; SP
<i>lactulose encephalopathy</i>	Tier 1	LGC
<i>lanthanum carbonate</i>	Tier 1	
LIALDA	Tier 3	#; QL
LINZESS	Tier 2	QL
LOTRONEX	NC	N5
<i>mesalamine oral tablet delayed release 1.2 gm, 800 mg</i>	Tier 1	QL
<i>mesalamine rectal</i>	Tier 1	
<i>mesalamine-cleanser</i>	NC	
<i>metoclopramide hcl oral solution 10 mg/10ml, 5 mg/5ml</i>	Tier 1	LGC
<i>metoclopramide hcl oral tablet 10 mg</i>	Tier 1	LGC

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
<i>metoclopramide hcl oral tablet 5 mg</i>	Tier 1	
<i>metoclopramide hcl oral tablet dispersible</i>	Tier 1	
MOVANTI	Tier 2	
PENTASA ORAL CAPSULE EXTENDED RELEASE 250 MG, 500 MG	Tier 3	QL
PHOSLO	Tier 3	
PHOSLYRA	Tier 3	
REGLAN ORAL	NC	N5
RELISTOR ORAL	Tier 3	PA; QL
RELISTOR SUBCUTANEOUS SOLUTION 12 MG/0.6ML, 8 MG/0.4ML	Tier 3	PA; QL
REMICADE	Tier 4	PA; ST; SP
RENAGEL	Tier 3	#
RENFLEXIS	Tier 4	PA; ST; SP
REVELA	Tier 2	
ROWASA RECTAL	NC	N5
<i>sevelamer carbonate</i>	Tier 1	
SFROWASA	Tier 3	
<i>sulfasalazine oral</i>	Tier 1	QL
<i>sulfazine</i>	Tier 1	QL
SYMPROIC	Tier 3	PA; ST; QL
URSO 250	NC	N5
URSO FORTE	NC	N5
<i>ursodiol oral</i>	Tier 1	
VELPHORO	Tier 3	#
Genitourinary Agents - Miscellaneous		
<i>acetic acid irrigation</i>	Tier 1	
<i>alfuzosin hcl er</i>	Tier 1	QL
<i>argyle sterile saline</i>	Tier 1	
AVODART	NC	N5
CARDURA XL	Tier 3	QL
CYSTAGON	Tier 3	PA
<i>cytra-2</i>	NC	
<i>dutasteride</i>	Tier 1	QL
<i>dutasteride-tamsulosin hcl</i>	Tier 1	

Drug	Status	Notes
ELMIRON	Tier 2	QL
<i>finasteride oral tablet 5 mg</i>	Tier 1	PA
FLOMAX	NC	N5
JALYN	NC	N5
LITHOSTAT	Tier 2	
<i>neomycin-polymyxin b gu</i>	Tier 1	
NEOSPORIN GU IRRIGANT	NC	N5
<i>phenazopyridine hcl oral tablet 100 mg</i>	Tier 1	
<i>potassium citrate er oral tablet extended release 10 meq (1080 mg), 15 meq (1620 mg)</i>	Tier 1	
<i>potassium citrate-citric acid oral solution</i>	Tier 1	
PROCYSBI ORAL CAPSULE DELAYED RELEASE 25 MG, 75 MG	Tier 4	PA; ST; SP; QL
PROSCAR	NC	N5
PYRIDIUM ORAL TABLET 100 MG	Tier 1	
RAPAFLO	Tier 2	
RENACIDIN	Tier 2	
SHOHL'S MODIFIED	NC	
<i>sod citrate-citric acid</i>	NC	
<i>sodium chloride irrigation solution 0.9 %</i>	Tier 1	
<i>tamsulosin hcl</i>	Tier 1	LGC
THIOLA	Tier 4	PA; ST
UROCIT-K 10	NC	N5
UROCIT-K 15	NC	N5
UROCIT-K 5	NC	N5
Gout Agents		
<i>allopurinol oral</i>	Tier 1	LGC
ALOPRIM	Tier 3	
<i>colchicine oral</i>	Tier 1	QL
<i>colchicine-probenecid</i>	Tier 1	
COLCRYS	NC	
DUZALLO	Tier 3	PA; ST; QL
KRYSTEXXA	Tier 4	PA; ST; SP
MITIGARE	Tier 2	QL
<i>probenecid oral</i>	Tier 1	

Drug	Status	Notes
ULORIC	Tier 3	QL
ZURAMPIC	Tier 3	PA; ST; QL
ZYLOPRIM	Tier 3	
Hematological Agents - Misc.		
ADVATE	Tier 4	PA; SP
<i>adynovate intravenous solution reconstituted 1000 unit, 2000 unit, 250 unit, 500 unit</i>	Tier 4	PA
<i>adynovate intravenous solution reconstituted 1500 unit, 3000 unit, 750 unit</i>	Tier 4	PA; SP
AFSTYLA	Tier 4	PA; SP
AGGRENOX	Tier 3	
ALPHANATE/VWF COMPLEX/HUMAN	NC	N5
ALPHANINE SD	NC	N5; SP
ALPROLIX	NC	N5; SP
<i>anagrelide hcl</i>	Tier 1	
<i>aspirin-dipyridamole er</i>	Tier 1	
BEBULIN	NC	N5; SP
BERINERT	Tier 4	PA; ST; SP
BRILINTA	Tier 2	QL
<i>cilostazol</i>	Tier 1	
CINRYZE	Tier 4	PA; ST; SP
<i>clopidogrel bisulfate oral</i>	Tier 1	QL
COAGADEX	Tier 4	PA
CORIFACT	NC	SP
<i>dipyridamole oral</i>	Tier 1	
DURLAZA	Tier 3	
EFFIENT	Tier 3	PA; #; QL
ELOCTATE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT, 750 UNIT	NC	N5; SP
ELOCTATE INTRAVENOUS SOLUTION RECONSTITUTED 4000 UNIT, 5000 UNIT, 6000 UNIT	NC	N5
FEIBA	Tier 4	
FIRAZYR	NC	N5

Drug	Status	Notes
HAEGARDA	Tier 4	PA; ST; SP; QL
HELIXATE FS INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 500 UNIT	NC	N5
HELIXATE FS INTRAVENOUS KIT 3000 UNIT	Tier 4	PA; SP
HEMOFIL M INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1700 UNIT, 250 UNIT, 500 UNIT	NC	N5; SP
HUMATE-P INTRAVENOUS SOLUTION RECONSTITUTED 1000-2400 UNIT, 500-1200 UNIT	NC	N5; SP
IDELVION	Tier 4	PA; SP
IXINITY	Tier 4	PA; N5
KALBITOR	Tier 4	PA; ST; SP
KOATE	NC	N5
KOATE-DVI	NC	N5; SP
KOGENATE FS BIO-SET INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 500 UNIT	NC	N5
KOGENATE FS BIO-SET INTRAVENOUS KIT 3000 UNIT	Tier 4	PA; SP
KOGENATE FS INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 500 UNIT	NC	N5
KOGENATE FS INTRAVENOUS KIT 3000 UNIT	Tier 4	PA; SP
KOVALTRY	NC	N5; SP
MONOCLATE-P INTRAVENOUS KIT 1000 UNIT, 1500 UNIT	NC	N5; SP
MONONINE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT	Tier 4	PA; SP
NOVOEIGHT	NC	N5; SP
NOVOSEVEN RT	NC	N5; SP
NUWIQ INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 500 UNIT	NC	N5; SP
NUWIQ INTRAVENOUS KIT 2500 UNIT, 3000 UNIT, 4000 UNIT	NC	
NUWIQ INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 250 UNIT, 500 UNIT	NC	N5; SP

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
NUWIQ INTRAVENOUS SOLUTION RECONSTITUTED 2500 UNIT, 3000 UNIT, 4000 UNIT	NC	
<i>pentoxifylline er</i>	Tier 1	
PLAVIX	NC	N5
<i>prasugrel hcl</i>	Tier 1	PA; QL
PROFILNINE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 500 UNIT	NC	N5; SP
PROFILNINE INTRAVENOUS SOLUTION RECONSTITUTED 1500 UNIT	NC	N5
PROFILNINE SD	NC	N5; SP
RECOMBINATE	NC	N5; SP
RIASTAP	NC	N5; SP
RIXUBIS	Tier 4	PA; SP
RUCONEST	Tier 4	PA; SP
TRETTEN	NC	N5; SP
VONVENDI	Tier 4	PA
WILATE INTRAVENOUS KIT	NC	N5; SP
XYNTHA INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 500 UNIT	NC	N5; SP
XYNTHA SOLOFUSE INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 500 UNIT	NC	SP
XYNTHA SOLOFUSE INTRAVENOUS KIT 3000 UNIT	NC	N5; SP
YOSPRALA	NC	
Hematopoietic Agents		
ABANEU-SL	NC	
<i>active fe</i>	NC	
AIRAVITE	NC	
ANIMI-3	NC	
ANIMI-3/VITAMIN D	NC	
ARANESP (ALBUMIN FREE) INJECTION SOLUTION 100 MCG/ML, 200 MCG/ML, 25 MCG/ML, 300 MCG/ML, 40 MCG/ML, 60 MCG/ML	Tier 4	PA; SP

Drug	Status	Notes
ARANESP (ALBUMIN FREE) INJECTION SOLUTION PREFILLED SYRINGE 100 MCG/0.5ML, 150 MCG/0.3ML, 200 MCG/0.4ML, 25 MCG/0.42ML, 300 MCG/0.6ML, 40 MCG/0.4ML, 500 MCG/ML, 60 MCG/0.3ML	Tier 4	PA; SP
<i>av-vite fb</i>	NC	
<i>b-6 folic acid</i>	NC	
BIFERARX	NC	
BP VIT 3	NC	
CENFOL	NC	
CENTRATEX	NC	
CERDELGA	Tier 2	PA; SP; QL
CEREZYME INTRAVENOUS SOLUTION RECONSTITUTED 400 UNIT	Tier 4	PA; SP
CIFEREX	NC	
CORVITA 150	NC	
CORVITE 150 ORAL TABLET 150-1.25 MG	NC	
CORVITE FE	Tier 3	
<i>cyanocobalamin injection</i>	Tier 1	
DIVISTA	NC	
DROXIA	Tier 3	
<i>durachol</i>	NC	
ELELYSO	Tier 4	PA; SP
EPOGEN INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML	Tier 4	PA; SP
<i>fabb</i>	NC	
<i>fa-vitamin b-6-vitamin b-12</i>	NC	
FERIVA	NC	
FERIVA 21/7	NC	
<i>ferocon</i>	NC	
<i>ferotrinsic</i>	NC	
FERRAPLUS 90	NC	
FERRLECIT	NC	N5; SP
<i>ferrocite plus oral tablet</i>	NC	

Drug	Status	Notes
FERRO-PLEX HEMATINIC	NC	
FERROTRIN	NC	
<i>folbee</i>	NC	
FOLGARD RX	NC	N5
<i>folic acid oral tablet 1 mg</i>	Tier 1	LGC
<i>folic acid oral tablet 400 mcg, 800 mcg</i>	CE	
FOLIVANE-F	NC	
FOLIVANE-PLUS	NC	
<i>folplex 2.2</i>	NC	
<i>foltrin</i>	NC	
FUSION PLUS	NC	
<i>gnp folic acid</i>	CE	
GRANIX	Tier 4	PA; SP
<i>hematinic plus vit/minerals</i>	NC	
<i>hematinic/folic acid</i>	NC	
HEMATOGEN FA	NC	
<i>hematogen forte</i>	NC	
HEMETAB	NC	
HEMOCYTE PLUS	NC	
<i>hemocyte-f oral tablet</i>	NC	
<i>hemocyte-plus oral tablet 106-1 mg</i>	NC	
INTEGRA F	NC	
INTEGRA PLUS	NC	
IROSPAN 24/6	NC	
IS 24/6	NC	
K-TAN PLUS	NC	
LEUKINE INTRAVENOUS	Tier 4	PA; SP
MAXFE ORAL TABLET	NC	
MIRCERA INJECTION SOLUTION PREFILLED SYRINGE 100 MCG/0.3ML, 200 MCG/0.3ML, 50 MCG/0.3ML, 75 MCG/0.3ML	Tier 4	PA
MIRCERA INJECTION SOLUTION PREFILLED SYRINGE 150 MCG/0.3ML, 30 MCG/0.3ML	Tier 4	PA; SP
MOZOBIL	Tier 4	PA

Drug	Status	Notes
MULTIGEN	NC	
MULTIGEN FOLIC	NC	
MULTIGEN PLUS	NC	
<i>na ferric gluc cplx in sucrose</i>	Tier 4	SP
NASCOBAL	NC	
NEPHRON FA	NC	
NEULASTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier 4	PA
NEUPOGEN INJECTION SOLUTION 300 MCG/ML, 480 MCG/1.6ML	Tier 4	PA; SP
NEUPOGEN INJECTION SOLUTION PREFILLED SYRINGE	Tier 4	PA
<i>neurin-sl</i>	NC	
NPLATE	Tier 4	SP
NUFOL	NC	
<i>ortho d</i>	NC	
PRE-FOLIC	NC	
PROCRIT	Tier 4	PA; SP
PROFERRIN-FORTE	NC	
PROMACTA	Tier 4	PA; SP; QL
PROTECTIRON	NC	
<i>purefe plus</i>	NC	
<i>purevit dualfe plus</i>	NC	
REVESTA	NC	
<i>se-tan plus</i>	NC	
TANDEM F	NC	
TANDEM PLUS	NC	
<i>taron forte</i>	NC	
<i>tl gard rx</i>	NC	
<i>tl icon</i>	NC	
<i>tricon</i>	NC	
<i>trigels-f forte</i>	NC	
VENOFER	Tier 4	SP
VIRT-GARD	NC	
<i>virt-vite</i>	NC	

Drug	Status	Notes
VPRIV	Tier 4	PA; SP
ZARXIO	Tier 4	PA
<i>zavara</i>	NC	
ZAVESCA	Tier 4	PA; SP; QL
ZOLATE	NC	
Hemostatics		
AMICAR ORAL SOLUTION	Tier 3	
AMICAR ORAL TABLET 1000 MG	Tier 2	
LYSTEDA	NC	N5
<i>tranexamic acid oral</i>	Tier 1	QL
*Hepatitis C Agent - Combinations***		
EPCLUSA	Tier 4	PA; SP; QL
HARVONI	Tier 4	PA; SP
MAVYRET	Tier 4	PA; ST; SP; QL
TECHNIVIE	Tier 4	PA; ST; QL
VIEKIRA PAK	Tier 4	PA; ST; SP; QL
VIEKIRA XR	Tier 4	PA; ST; QL
VOSEVI	Tier 4	PA; ST; SP; QL
ZEPATIER	Tier 4	PA; SP; QL
*Hereditary Orotic Aciduria Treatment - Agents**		
XURIDEN	Tier 4	PA; SP; QL
Hypnotics		
AMBIEN	NC	N5
AMBIEN CR	NC	N5
BUTISOL SODIUM ORAL TABLET 30 MG	Tier 3	
DORAL	Tier 3	
EDLUAR	NC	
<i>estazolam</i>	Tier 1	
<i>eszopiclone</i>	Tier 1	QL
<i>flurazepam hcl</i>	Tier 1	
HALCION	NC	N5
HETLIOZ	Tier 4	PA; SP; QL
INTERMEZZO	NC	
LUNESTA	NC	N5

Drug	Status	Notes
<i>midazolam hcl oral</i>	Tier 1	
<i>phenobarbital oral elixir</i>	Tier 1	
<i>phenobarbital oral tablet</i>	Tier 1	
<i>quazepam</i>	Tier 1	
RESTORIL	NC	N5
ROZEREM	Tier 3	ST; QL
SECONAL	Tier 3	
SILENOR	NC	
SONATA	NC	N5
<i>temazepam oral capsule 15 mg, 30 mg</i>	Tier 1	
<i>temazepam oral capsule 22.5 mg, 7.5 mg</i>	Tier 1	QL
<i>triazolam</i>	Tier 1	
<i>zaleplon</i>	Tier 1	QL
<i>zolpidem tartrate er</i>	Tier 1	QL
<i>zolpidem tartrate oral</i>	Tier 1	QL
<i>zolpidem tartrate sublingual</i>	NC	
ZOLPIMIST	NC	
*Hypophosphatasia (Hpp) Agents***		
STRENSIQ	Tier 4	PA; SP
*Ibs Agent - Mu-Opioid Receptor Agonists***		
VIBERZI	Tier 2	PA; QL
*Insulin-Incretin Mimetic Combinations***		
SOLIQUA	Tier 2	ST
XULTOPHY	Tier 2	ST; QL
*Integrin Receptor Antagonists***		
ENTYVIO	Tier 4	PA; ST; SP
*Interleukin Antagonists***		
STELARA INTRAVENOUS	Tier 4	PA; ST; SP
*Interleukin-5 Antagonists (Igg1 Kappa)***		
NUCALA	Tier 4	PA; SP; QL
*Interleukin-5 Antagonists (Igg4 Kappa)***		
CINQAIR	Tier 4	PA; SP
*Isocitrate Dehydrogenase-2 (Idh2) Inhibitors***		
IDHIFA	Tier 4	PA; SP; QL

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
Laxatives		
<i>clearlax oral powder</i>	CE	LGC
<i>constulose</i>	Tier 1	LGC
CVS PURELAX	CE	
<i>dulcolax balance</i>	CE	LGC
EQ CLEARLAX	CE	
EQL CLEARLAX	CE	
<i>gavilax oral packet</i>	CE	
<i>gavilax oral powder</i>	CE	LGC
<i>gavilyte-c</i>	Tier 1	QL
<i>gavilyte-g</i>	Tier 1	QL
GAVILYTE-H	CE	
<i>gavilyte-n with flavor pack</i>	Tier 1	
<i>gentlelax oral powder</i>	CE	LGC
GIALAX	CE	
<i>glycolax</i>	CE	LGC
GNP CLEARLAX ORAL POWDER	CE	
GOLYTELY ORAL SOLUTION RECONSTITUTED 227.1 GM	Tier 3	
GOLYTELY ORAL SOLUTION RECONSTITUTED 236 GM	NC	N5
<i>healthylax</i>	CE	
HM CLEARLAX	CE	
<i>kls laxaclear</i>	CE	LGC
KRISTALOSE	Tier 3	
<i>lactulose oral</i>	Tier 1	LGC
MIRALAX ORAL PACKET	NC	N5
MIRALAX ORAL POWDER	CE	Select OTC
MOVIPREP	CE	Only covered in states: CT,GA,IL,MI,NV,PA,TN,TX and excluded elsewhere
NULYTELY WITH FLAVOR PACKS	NC	N5
OSMOPREP	CE	Only covered in states: CT,GA,IL,MI,NV,PA,TN,TX and excluded elsewhere
<i>peg 3350</i>	CE	

Drug	Status	Notes
<i>peg 3350/electrolytes</i>	CE	Only covered in states: CT,GA,IL,MI,NV,PA,TN,TX and excluded elsewhere; QL
<i>peg 3350-kcl-na bicarb-nacl</i>	Tier 1	Only covered in states: CT,GA,IL,MI,NV,PA,TN,TX and excluded elsewhere
<i>peg-3350/electrolytes</i>	Tier 1	Only covered in states: CT,GA,IL,MI,NV,PA,TN,TX and excluded elsewhere; QL
PEG-PREP	CE	
PEGYLAX	CE	
<i>polyethylene glycol 3350 oral packet</i>	CE	
<i>polyethylene glycol 3350 oral powder</i>	CE	Select OTC
PREPOPIK	CE	#; Only covered in states: CT,GA,IL,MI,NV,PA,TN,TX and excluded elsewhere
<i>qc natura-lax</i>	CE	
<i>ra laxative oral packet</i>	CE	
<i>ra laxative oral powder</i>	CE	
<i>sb polyethylene glycol 3350</i>	CE	
SM CLEARLAX	CE	
SMOOTH LAX ORAL POWDER	CE	
SUPREP BOWEL PREP KIT	CE	Only covered in states: CT,GA,IL,MI,NV,PA,TN,TX and excluded elsewhere
SW CLEARLAX	CE	
TGT POWDERLAX	CE	
<i>trilyte</i>	CE	
*Leptin Analogues***		
MYALEPT	Tier 4	PA; SP; QL
*Lhrh/Gnrh Agonist Analog Combinations***		
LUPANETA PACK	Tier 4	PA; SP
Local Anesthetics-Parenteral		
<i>lidocaine hcl (pf) injection solution 0.5 %, 1 %</i>	Tier 1	
<i>lidocaine hcl injection solution 0.5 %</i>	Tier 1	

Drug	Status	Notes
*Lymphocyte Function-Associated Antigen-1 (Lfa-1) Antag***		
XIIDRA	Tier 2	
*Lysosomal Acid Lipase (Lal) Deficiency - Agents***		
KANUMA	Tier 4	PA; SP
Macrolides		
<i>azithromycin intravenous solution reconstituted 500 mg</i>	Tier 1	
<i>azithromycin oral packet</i>	Tier 1	
<i>azithromycin oral suspension reconstituted</i>	Tier 1	
<i>azithromycin oral tablet 250 mg, 500 mg, 600 mg</i>	Tier 1	
BIAXIN ORAL TABLET	NC	N5
BIAXIN XL	NC	N5
BIAXIN XL PAC	NC	N5
<i>clarithromycin er</i>	Tier 1	
<i>clarithromycin oral</i>	Tier 1	
DIFICID	Tier 3	QL
E.E.S. 400 ORAL TABLET	Tier 2	
E.E.S. GRANULES	Tier 3	
ERYPED 200	Tier 3	
ERYPED 400	Tier 3	
ERY-TAB	Tier 3	
ERYTHROCIN LACTOBIONATE INTRAVENOUS SOLUTION RECONSTITUTED 500 MG	Tier 3	
ERYTHROCIN STEARATE ORAL TABLET 250 MG	Tier 2	
<i>erythromycin base oral capsule delayed release particles</i>	Tier 1	
<i>erythromycin base oral tablet</i>	Tier 1	
<i>erythromycin ethylsuccinate oral tablet</i>	Tier 1	
PCE	Tier 3	
ZITHROMAX ORAL PACKET	Tier 3	
ZITHROMAX ORAL SUSPENSION RECONSTITUTED	NC	N5

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
ZITHROMAX ORAL TABLET	NC	N5
ZITHROMAX TRI-PAK	NC	N5
ZITHROMAX Z-PAK	NC	N5
ZMAX	Tier 3	
Medical Devices		
ACCU-CHEK AVIVA PLUS	Tier 3	PA; QL
ACCU-CHEK COMPACT PLUS CARE	Tier 3	PA; QL
ACCU-CHEK FASTCLIX LANCETS	Tier 3	
ACCU-CHEK MULTICLIX LANCET DEV	Tier 3	PA; QL
ACCU-CHEK MULTICLIX LANCETS	Tier 3	
ACCU-CHEK NANO SMARTVIEW	Tier 3	PA; QL
ACCU-CHEK SOFT TOUCH LANCETS	Tier 3	
ACCU-CHEK SOFTCLIX LANCETS	Tier 3	
ACTIVE 1ST BLOOD LANCETS 30G	Tier 3	
ADVOCATE DUO DEVICE	Tier 3	QL
AGAMATRIX PRESTO	Tier 3	PA; QL
ASSURE LANCETS	Tier 3	
BAYER CONTOUR LINK MONITOR	Tier 3	PA; QL
BAYER CONTOUR MONITOR KIT	Tier 3	PA; QL
BAYER CONTOUR NEXT EZ	Tier 3	PA; QL
BAYER CONTOUR NEXT LINK	Tier 3	PA; QL
BAYER CONTOUR NEXT MONITOR	Tier 3	PA; QL
BAYER MICROLET LANCETS	Tier 3	
BD AUTOSHIELD 29G X 5MM , 29G X 8MM	Tier 2	
BD INSULIN SYRINGE 25G X 1" 1 ML, 25G X 5/8" 1 ML, 26G X 1/2" 1 ML, 29G X 1/2" 1 ML, 30G X 1/2" 0.5 ML, 31G X 5/16" 0.3 ML, U-100 1 ML	Tier 2	
BD INSULIN SYRINGE HALF-UNIT	Tier 2	
BD INSULIN SYRINGE MICROFINE 28G X 1/2" 0.5 ML	Tier 2	
BD INSULIN SYRINGE ULTRAFINE 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 0.3 ML, 30G X 1/2" 1 ML, 31G X 15/64" 0.3 ML, 31G X 15/64" 1 ML	Tier 2	

Drug	Status	Notes
BD LANCET ULTRAFINE 30G	Tier 3	
BD LANCET ULTRAFINE 33G	Tier 3	
BD MICROTAINER LANCETS	Tier 3	
BD PEN	Tier 2	
BD PEN MINI	Tier 2	
BD PEN NEEDLE MINI U/F	Tier 2	
BD PEN NEEDLE NANO U/F	Tier 2	
BD PEN NEEDLE SHORT U/F	Tier 2	
BD PEN NEEDLE ULTRAFINE	Tier 2	
BD SAFETYGLIDE INSULIN SYRINGE 30G X 5/16" 0.5 ML	Tier 2	
<i>bullseye mini safety lancets</i>	Tier 3	
BULLSEYE SAFETY LANCETS	Tier 3	
CLEVER CHEK AUTO-CODE	Tier 3	QL
CLEVER CHOICE MICRO SYSTEM	Tier 3	PA; QL
COAGUCHEK LANCETS	Tier 3	
<i>comfort assured lancets 28g</i>	Tier 3	
<i>comfort assured lancets 33g</i>	Tier 3	
DRUG MART UNIFINE PENTIPS 31G X 5 MM	Tier 3	
EASY COMFORT INSULIN SYRINGE 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML	Tier 3	
EASY TOUCH INSULIN SYRINGE 31G X 5/16" 1 ML	Tier 3	
EASY TOUCH LANCETS 21G	Tier 3	
EASY TOUCH LANCETS 23G	Tier 3	
EASY TOUCH LANCETS 26G	Tier 3	
EASY TOUCH LANCETS 26G/TWIST	Tier 3	
EASY TOUCH LANCETS 28G	Tier 3	
EASY TOUCH LANCETS 28G/TWIST	Tier 3	
EASY TOUCH LANCETS 30G	Tier 3	
EASY TOUCH LANCETS 30G/TWIST	Tier 3	
EASY TOUCH LANCETS 32G	Tier 3	
EASY TOUCH LANCETS 32G/TWIST	Tier 3	
EASY TOUCH LANCETS 33G/TWIST	Tier 3	
EASY TOUCH LANCING DEVICE	Tier 3	

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
EASY TOUCH SAFETY LANCETS 21G	Tier 3	
EASY TOUCH SAFETY LANCETS 23G	Tier 3	
EASY TOUCH SAFETY LANCETS 26G	Tier 3	
EASY TOUCH SAFETY LANCETS 28G	Tier 3	
EASY TWIST & CAP LANCETS	Tier 3	
FC2 FEMALE CONDOM	CE	
FINGERSTIX LANCETS	Tier 3	
FORA D10 2-IN-1 MONITOR	Tier 3	QL
FORA D15G 2-IN-1 MONITOR	Tier 3	QL
FORA D20 2-IN-1 MONITOR	Tier 3	QL
FREESTYLE FLASH SYSTEM	Tier 3	PA; QL
FREESTYLE FREEDOM LITE	Tier 3	PA; QL
FREESTYLE INSULINX SYSTEM	Tier 3	PA; QL
FREESTYLE LANCETS	Tier 3	
FREESTYLE PRECISION INS SYR 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	Tier 3	
FREESTYLE SYSTEM	Tier 3	PA; QL
FREESTYLE UNISTICK II LANCETS	Tier 3	
GLOBAL INJECT EASE INSULIN SYR 28G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	Tier 3	
GNP CLICKFINE PEN NEEDLES 31G X 8 MM	Tier 3	
GNP INSULIN SYRINGE 28G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 31G X 5/16" 0.5 ML	Tier 3	
GNP ULTRA COM INSULIN SYRINGE 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML	Tier 3	
HEALTHY ACCENTS UNIFINE PENTIP 31G X 5 MM , 31G X 6 MM	Tier 3	
<i>insulin syringe 31g x 5/16" 0.3 ml</i>	Tier 1	
INSULIN SYRINGE/NEEDLE 28G X 1/2" 0.5 ML	Tier 3	
KROGER BLOOD GLUCOSE KIT W/DEVICE	Tier 3	PA; QL

Drug	Status	Notes
KROGER INSULIN SYRINGE 29G X 1/2" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	Tier 3	
KROGER PREMIUM BLOOD GLUCOSE	Tier 3	PA; QL
<i>lancets</i>	Tier 1	
<i>lancets super thin 28g</i>	Tier 3	
LANCETS ULTRA THIN	Tier 3	
<i>lancets ultra thin 30g</i>	Tier 3	
LIFESCAN UNISTIK 2	Tier 3	
LIFESCAN UNISTIK II LANCETS	Tier 3	
<i>lite touch lancets</i>	Tier 3	
LITETOUCH LANCETS	Tier 3	
MAGELLAN INSULIN SAFETY SYR 29G X 1/2" 1 ML	Tier 3	
MEIJER BLOOD GLUCOSE	Tier 3	PA; QL
MEIJER PREMIUM BLOOD GLUCOSE	Tier 3	PA; QL
MICROLET LANCETS	Tier 3	
MICROTAINER SAFETY FLOW LANCET	Tier 3	
NEUTEK 2TEK GLUCOSE/PRESSURE	Tier 3	QL
NOVOFINE	Tier 3	
NOVOTWIST 32G X 5 MM	Tier 3	
ONETOUCH CLUB LANCETS FINE PT	Tier 3	
ONETOUCH COMBO PACK	Tier 3	
ONETOUCH DELICA LANCETS 33G	Tier 3	
ONETOUCH DELICA LANCETS FINE	Tier 3	
ONETOUCH DELICA LANCING DEV	Tier 3	
ONETOUCH FINEPOINT LANCETS	Tier 3	
ONETOUCH LANCETS	Tier 3	
ONETOUCH ULTRA 2	Tier 2	QL
ONETOUCH ULTRA MINI	Tier 2	QL
ONETOUCH ULTRASOFT LANCETS	Tier 3	
ONETOUCH VERIO IQ SYSTEM	Tier 2	QL
PRECISION SUREDOSE PLUS SYR 29G X 1/2" 1 ML	Tier 3	
PRECISION SURE-DOSE SYRINGE 28G X 1/2" 0.5 ML	Tier 3	

Drug	Status	Notes
PRODIGY AUTOCODE BLOOD GLUCOSE KIT	Tier 3	PA; QL
RELION INSULIN SYRINGE 29G X 1/2" 1 ML	Tier 3	
RELI-ON INSULIN SYRINGE 29G X 1/2" 1 ML	Tier 3	
RELION PEN NEEDLES 31G X 8 MM	Tier 3	
SAFETY LET LANCETS	Tier 3	
<i>sapscore twist top lancets</i>	Tier 3	
SIMPLE DIAGNOSTICS LANCING DEV	Tier 3	
<i>super thin lancets</i>	Tier 3	
TGT BLOOD GLUCOSE MONITORING	Tier 3	PA; QL
TRUEPLUS INSULIN SYRINGE 29G X 1/2" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	Tier 3	
TRUEPLUS LANCETS 26G	Tier 3	
TRUEPLUS LANCETS 30G	Tier 3	
TRUEPLUS SAFETY LANCETS 28G	Tier 3	
TRUERESULT BLOOD GLUCOSE	Tier 3	PA; QL
TRUETRACK BLOOD GLUCOSE KIT	Tier 3	PA; QL
TRUETRACK SMART SYSTEM	Tier 3	PA; QL
ULTICARE INSULIN SYRINGE 28G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	Tier 3	
ULTICARE SHORT PEN NEEDLES	Tier 3	
UNIFINE PENTIPS PLUS 31G X 5 MM	Tier 3	
VANISHPOINT INSULIN SYRINGE 30G X 3/16" 0.5 ML, 30G X 3/16" 1 ML	Tier 3	
VIDA MIA UNIFINE PENTIPS 31G X 6 MM	Tier 3	
WIDE-SEAL DIAPHRAGM 60	CE	
WIDE-SEAL DIAPHRAGM 65	CE	
WIDE-SEAL DIAPHRAGM 70	CE	
WIDE-SEAL DIAPHRAGM 75	CE	
WIDE-SEAL DIAPHRAGM 80	CE	

Drug	Status	Notes
WIDE-SEAL DIAPHRAGM 85	CE	
WIDE-SEAL DIAPHRAGM 90	CE	
WIDE-SEAL DIAPHRAGM 95	CE	
Migraine Products		
<i>almotriptan malate</i>	Tier 1	QL
AMERGE	NC	N5
AXERT	NC	N5
CAFERGOT	Tier 3	
CAMBIA	NC	
D.H.E. 45	NC	N5
<i>dihydroergotamine mesylate injection</i>	Tier 1	
<i>dihydroergotamine mesylate nasal</i>	Tier 1	ST; QL
<i>eletriptan hydrobromide</i>	Tier 1	QL
ERGOMAR	Tier 3	
FROVA	Tier 3	#; QL
<i>frovatriptan succinate</i>	Tier 1	QL
IMITREX NASAL SOLUTION 20 MG/ACT, 5 MG/ACT	Tier 3	QL
IMITREX ORAL	NC	N5
IMITREX STATDOSE REFILL SUBCUTANEOUS SOLUTION CARTRIDGE 4 MG/0.5ML	NC	N5
IMITREX STATDOSE SYSTEM SUBCUTANEOUS SOLUTION AUTO-INJECTOR 4 MG/0.5ML	NC	N5
IMITREX STATDOSE SYSTEM SUBCUTANEOUS SOLUTION AUTO-INJECTOR 6 MG/0.5ML	Tier 3	N5; QL
IMITREX SUBCUTANEOUS	NC	N5
MAXALT	NC	N5
MAXALT-MLT	NC	N5
MIGERGOT	Tier 3	
MIGRANAL	NC	
<i>naratriptan hcl</i>	Tier 1	QL
ONZETRA XSAIL	Tier 3	ST; QL
PRODRIN ORAL TABLET 65-20-325 MG	NC	N5

Drug	Status	Notes
RELPAK	Tier 3	#; QL
<i>rizatriptan benzoate</i>	Tier 1	QL
<i>sumatriptan nasal</i>	Tier 1	QL
<i>sumatriptan succinate oral</i>	Tier 1	QL
<i>sumatriptan succinate refill subcutaneous solution cartridge</i>	Tier 1	QL
<i>sumatriptan succinate subcutaneous solution 6 mg/0.5ml</i>	Tier 1	QL
<i>sumatriptan succinate subcutaneous solution auto-injector 4 mg/0.5ml, 6 mg/0.5ml</i>	Tier 1	QL
SUMAVEL DOSEPRO SUBCUTANEOUS SOLUTION JET-INJECTOR	NC	
TREXIMET	NC	
ZEMBRACE SYMTOUCH	Tier 3	ST; QL
<i>zolmitriptan oral tablet 2.5 mg, 5 mg</i>	Tier 1	QL
<i>zolmitriptan oral tablet dispersible 2.5 mg, 5 mg</i>	Tier 1	QL
ZOMIG NASAL SOLUTION 5 MG	Tier 3	QL
ZOMIG ORAL	NC	
ZOMIG ZMT	NC	
Minerals & Electrolytes		
EFFER-K ORAL TABLET EFFERVESCENT 20 MEQ	Tier 2	
<i>effe-k oral tablet effervescent 25 meq</i>	Tier 1	
FLUORABON	CE	
<i>fluor-a-day oral solution</i>	CE	
FLUOR-A-DAY ORAL TABLET CHEWABLE 0.25 (F)-236.79 MG	CE	
<i>fluoritab oral tablet chewable 0.55 (0.25 f) mg</i>	Tier 1	LGC
<i>fluoritab oral tablet chewable 1.1 (0.5 f) mg</i>	CE	
FLURA-DROPS ORAL SOLUTION 0.55 (0.25 F) MG/DROP	CE	
GALZIN	Tier 3	
<i>iodine strong oral</i>	Tier 1	
ISOLYTE-S	Tier 3	
ISOLYTE-S PH 7.4	Tier 3	
<i>k-effervescent</i>	Tier 1	

Drug	Status	Notes
<i>klor-con 10</i>	Tier 1	
<i>klor-con m10</i>	Tier 1	LGC
<i>klor-con m20</i>	Tier 1	
K-PHOS	Tier 2	
K-PHOS-NEUTRAL	Tier 2	
K-TAB ORAL TABLET EXTENDED RELEASE 10 MEQ	NC	N5
<i>k-vescent oral tablet effervescent</i>	Tier 1	
<i>ludent oral tablet chewable 0.55 (0.25 f) mg</i>	Tier 1	LGC
<i>ludent oral tablet chewable 1.1 (0.5 f) mg, 2.2 (1 f) mg</i>	CE	
MAGNEBIND 400	Tier 3	
<i>magnesium sulfate injection solution 50 %</i>	Tier 1	
MICRO-K	NC	N5
<i>monoject sodium chloride flush intravenous</i>	Tier 1	
NORMOSOL-R	Tier 3	
NORMOSOL-R PH 7.4	Tier 3	
<i>phospha 250 neutral</i>	Tier 1	
PLASMA-LYTE 148	Tier 3	
PLASMA-LYTE A	Tier 3	
<i>pot bicarb-pot chloride</i>	Tier 1	
<i>potassium bicarbonate oral</i>	Tier 1	
<i>potassium chloride crys er oral tablet extended release 10 meq</i>	Tier 1	LGC
<i>potassium chloride crys er oral tablet extended release 20 meq</i>	Tier 1	
<i>potassium chloride er oral capsule extended release 10 meq</i>	Tier 1	LGC
<i>potassium chloride er oral capsule extended release 8 meq</i>	Tier 1	
<i>potassium chloride er oral tablet extended release 10 meq, 20 meq</i>	Tier 1	
<i>potassium chloride er oral tablet extended release 8 meq</i>	Tier 1	LGC
<i>potassium chloride in nacl intravenous solution 20-0.45 meq/l-%, 20-0.9 meq/l-%, 40-0.9 meq/l-%</i>	Tier 1	

Drug	Status	Notes
<i>potassium chloride intravenous solution 0.4 meq/ml, 10 meq/100ml, 10 meq/50ml, 2 meq/ml, 20 meq/100ml, 20 meq/50ml, 40 meq/100ml</i>	Tier 1	
<i>potassium chloride oral packet</i>	Tier 1	
<i>potassium chloride oral solution 40 meq/15ml (20%)</i>	Tier 1	
<i>sodium chloride injection solution 2.5 meq/ml</i>	Tier 1	
<i>sodium chloride intravenous solution 0.45 %, 0.9 %, 3 %, 5 %</i>	Tier 1	
<i>sodium fluoride oral solution</i>	CE	
<i>sodium fluoride oral tablet chewable 0.55 (0.25 f) mg</i>	Tier 1	LGC
<i>sodium fluoride oral tablet chewable 1.1 (0.5 f) mg, 2.2 (1 f) mg</i>	CE	
SSKI	Tier 3	
<i>swabflush saline flush</i>	Tier 1	
Mouth/Throat/Dental Agents		
<i>cevimeline hcl</i>	Tier 1	QL
<i>chlorhexidine gluconate mouth/throat</i>	Tier 1	
<i>clotrimazole mouth/throat lozenge</i>	Tier 1	
DEBACTEROL	Tier 3	
<i>denta 5000 plus</i>	Tier 1	
EVOXAC	NC	N5
FIRST-MOUTHWASH BLM	Tier 3	
<i>nystatin mouth/throat</i>	Tier 1	
<i>oralone</i>	Tier 1	
ORAMAGICRX	Tier 3	
ORAVIG	Tier 3	QL
PAROEX	Tier 1	
PERIOGARD	Tier 1	
<i>periomed</i>	Tier 1	
<i>pilocarpine hcl oral</i>	Tier 1	
SALAGEN	NC	N5
<i>triamcinolone acetonide mouth/throat</i>	Tier 1	

Drug	Status	Notes
*Mucopolysaccharidosis Iv (Mps Iv) - Agents***		
VIMIZIM	Tier 4	PA; SP
Multivitamins		
<i>bp folinatal plus b</i>	Tier 1	
CITRANATAL 90 DHA ORAL 90-1 & 300 MG	Tier 3	
CITRANATAL ASSURE ORAL 35-1 & 300 MG	Tier 3	
CITRANATAL B-CALM	Tier 3	
CITRANATAL DHA	Tier 3	
CITRANATAL HARMONY ORAL CAPSULE 27-1-260 MG	Tier 3	
CITRANATAL RX	Tier 3	
<i>co-natal fa</i>	Tier 1	
CONCEPT DHA	Tier 3	
CONCEPT OB	Tier 3	
<i>corvita</i>	Tier 1	
CORVITE	Tier 3	
DIALYVITE 5000	Tier 3	
DIALYVITE SUPREME D	Tier 3	
HEMENATAL OB	Tier 2	
LEVOMEFOLATE DHA	Tier 3	
MARNATAL-F	Tier 3	
<i>multi-vit/fluorideliron</i>	Tier 1	
<i>multivitamin/fluoride oral tablet chewable 0.5 mg, 1 mg</i>	Tier 1	
<i>multi-vitamin/fluorideliron</i>	Tier 1	
<i>multivitamins/fluoride oral tablet chewable 0.5 mg, 1 mg</i>	Tier 1	
MYNATAL ADVANCE	Tier 1	
MYNATAL ORAL TABLET	Tier 1	
<i>mynatal plus</i>	Tier 1	
<i>mynatal-z</i>	Tier 1	
NEPHPLEX RX	Tier 2	
NESTABS	Tier 3	

Drug	Status	Notes
NEXA PLUS	Tier 3	
NICOMIDE ORAL TABLET 750-25-1.5-0.5 MG	Tier 3	
OB COMPLETE GOLD	Tier 3	
OB COMPLETE ONE	Tier 3	
OB COMPLETE PREMIER	Tier 3	
OB COMPLETE/DHA	Tier 3	
O-CAL FA	Tier 3	
O-CAL PRENATAL	Tier 3	
OCUVEL ORAL CAPSULE 0.5 MG	Tier 3	
<i>pnv-dha</i>	Tier 1	
PNV-OMEGA	Tier 2	
<i>pnv-select</i>	Tier 1	
POLY-VI-FLOR	Tier 2	
POLY-VI-FLOR FS ORAL STRIP 1 MG	Tier 3	
POLY-VI-FLOR/IRON ORAL SUSPENSION	Tier 2	
PRENATA	Tier 3	
<i>prenatabs rx</i>	Tier 1	
<i>prenatal 19 oral tablet</i>	Tier 1	
<i>prenatal 19 oral tablet chewable</i>	Tier 1	
PRENATAL PLUS IRON	Tier 2	
PRENATE DHA ORAL CAPSULE 18-0.6-0.4-300 MG, 28-0.6-0.4-300 MG	Tier 3	
PRENATE ELITE ORAL TABLET 26-0.6-0.4 MG	Tier 3	
PRENATE ESSENTIAL ORAL CAPSULE 29-0.6-0.4-340 MG	Tier 3	
PRENATE MINI ORAL CAPSULE 29-0.6-0.4-350 MG	Tier 3	
QUFLORA FE PEDIATRIC	Tier 3	
<i>renal oral capsule</i>	Tier 1	
<i>reno caps</i>	Tier 1	
<i>se-natal 19 oral tablet chewable</i>	Tier 1	
SYNAGEX	NC	
SYNATEK	NC	

Drug	Status	Notes
TARON-C DHA	Tier 2	
<i>tricare</i>	Tier 1	
TRICARE PRENATAL DHA ONE ORAL CAPSULE 27-1-500 MG	Tier 3	
<i>triphrocaps</i>	Tier 1	
TRIVEEN-DUO DHA	Tier 2	
TRI-VIT/FLUORIDE/IRON	Tier 1	
UDAMIN SP	Tier 3	
VIRT-PN	Tier 2	
VIRT-PN DHA	Tier 2	
VITAFOL FE+	Tier 3	
VITAFOL GUMMIES	Tier 3	
VITAFOL-OB+DHA	Tier 2	
VITAFOL-ONE	Tier 3	
VITAL-D RX	Tier 3	
VOL-PLUS	Tier 2	
VOL-TAB RX	Tier 2	
ZATEAN-PN DHA	Tier 2	
ZATEAN-PN PLUS	Tier 2	
Musculoskeletal Therapy Agents		
AMRIX	NC	
<i>baclofen oral tablet 10 mg</i>	Tier 1	LGC
<i>baclofen oral tablet 20 mg</i>	Tier 1	
<i>carisoprodol oral tablet 250 mg</i>	NC	
<i>carisoprodol oral tablet 350 mg</i>	Tier 1	
<i>carisoprodol-aspirin</i>	Tier 1	
<i>carisoprodol-aspirin-codeine</i>	Tier 1	
<i>chlorzoxazone oral tablet 250 mg</i>	NC	
<i>chlorzoxazone oral tablet 500 mg</i>	Tier 1	
<i>cyclobenzaprine hcl oral tablet 10 mg, 5 mg</i>	Tier 1	LGC
<i>cyclobenzaprine hcl oral tablet 7.5 mg</i>	Tier 1	
<i>dantrolene sodium oral</i>	Tier 1	
EUFLEXXA INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	Tier 4	PA; SP
FEXMID	NC	N5

Drug	Status	Notes
GABLOFEN INTRATHECAL SOLUTION 10000 MCG/20ML, 20000 MCG/20ML, 40000 MCG/20ML	Tier 4	
GEL-ONE INTRA-ARTICULAR PREFILLED SYRINGE	Tier 4	PA; ST; SP
GELSYN-3	Tier 4	PA; ST
GENVISC 850	Tier 4	PA; ST
HYALGAN	Tier 4	PA; ST; SP
HYMOVIS	Tier 4	PA; ST; SP
LORZONE	NC	
<i>metaxalone</i>	Tier 1	
<i>methocarbamol oral</i>	Tier 1	
MONOVISC	Tier 4	PA; SP
<i>orphenadrine citrate er</i>	Tier 1	
ORTHOVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	Tier 4	PA; SP
PARAFON FORTE DSC	NC	N5
ROBAXIN INJECTION SOLUTION 1000 MG/10ML	Tier 3	
SKELAXIN	NC	N5
SOMA ORAL TABLET 250 MG	NC	
SOMA ORAL TABLET 350 MG	NC	N5
SUPARTZ FX	Tier 4	PA; ST
SUPARTZ INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	Tier 4	PA; ST; SP
SYNVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	Tier 4	PA; ST; SP
SYNVISC ONE INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	Tier 4	PA; ST; SP
TIZANIDINE COMFORT PAC	NC	
<i>tizanidine hcl oral capsule</i>	NC	
<i>tizanidine hcl oral tablet</i>	Tier 1	
ZANAFLEX ORAL CAPSULE	NC	
ZANAFLEX ORAL TABLET	NC	N5
Nasal Agents - Systemic And Topical		
ADRENALIN NASAL	Tier 2	

Drug	Status	Notes
ASTEPRO NASAL SOLUTION 0.15 %	NC	N5
<i>azelastine hcl nasal solution 0.1 %, 0.15 %</i>	Tier 1	
BACTROBAN NASAL	Tier 2	SP
BECONASE AQ	Tier 3	ST
<i>budesonide nasal</i>	NC	
DYMISTA	NC	
FLONASE	NC	
FLONASE ALLERGY RELIEF	Tier 1	Select OTC
<i>flunisolide nasal solution 25 mcglact (0.025%)</i>	Tier 1	
<i>fluticasone propionate nasal</i>	Tier 1	Select OTC
<i>ipratropium bromide nasal</i>	Tier 1	QL
<i>mometasone furoate nasal</i>	Tier 1	
NASACORT ALLERGY 24HR	Tier 1	Select OTC
NASACORT ALLERGY 24HR CHILDREN	Tier 1	Select OTC
<i>nasal allergy 24 hour</i>	Tier 1	Select OTC
NASONEX	Tier 3	ST; #
<i>olopatadine hcl nasal</i>	Tier 1	
OMNARIS	Tier 3	ST
PATANASE	NC	N5
QNASL	Tier 3	ST
QNASL CHILDRENS	Tier 3	ST
RHINOCORT ALLERGY	Tier 1	Select OTC
RHINOCORT AQUA	NC	
<i>triamcinolone acetonide nasal aerosol</i>	Tier 1	Select OTC
XHANCE	NC	
ZETONNA	Tier 3	ST
*Nepriylsin Inhib (Arni)-Angiotensin II Recept Antag Comb***		
ENTRESTO	Tier 2	PA; QL
*Neurogenic Orthostatic Hypotension (Noh) - Agents***		
NORTHERA ORAL CAPSULE 100 MG, 200 MG, 300 MG	Tier 4	PA; SP; QL
Neuromuscular Agents		
BOTOX	Tier 4	PA; ST; SP

Drug	Status	Notes
DYSPORT	Tier 4	PA; SP
MYOBLOC INTRAMUSCULAR SOLUTION 2500 UNIT/0.5ML, 5000 UNIT/ML	Tier 4	PA
RILUTEK	NC	N5
<i>riluzole</i>	Tier 2	PA
XEOMIN	Tier 4	PA; SP
Ophthalmic Agents		
ACULAR	NC	N5
ACULAR LS	NC	N5
ACUVAIL	Tier 3	
AKTEN	NC	
<i>alaway</i>	Tier 1	Select OTC
ALAWAY CHILDRENS ALLERGY	Tier 1	Select OTC
ALCAINE	NC	N5
<i>allergy eye drops</i>	Tier 1	Select OTC
ALOCRIAL	Tier 3	
ALOMIDE	Tier 3	
ALPHAGAN P OPHTHALMIC SOLUTION 0.1 %	Tier 3	
ALPHAGAN P OPHTHALMIC SOLUTION 0.15 %	NC	N5
ALREX	Tier 2	
<i>altacaine</i>	Tier 1	
<i>altafluor</i>	Tier 1	
<i>altafrin ophthalmic solution 10 %</i>	Tier 1	
<i>apraclonidine hcl</i>	Tier 1	
<i>atropine sulfate ophthalmic</i>	Tier 1	
AZASITE	Tier 3	
<i>azelastine hcl ophthalmic</i>	Tier 1	
AZOPT	Tier 2	
<i>bacitracin ophthalmic</i>	Tier 1	
<i>bacitracin-polymyxin b ophthalmic ointment 500-10000 unit/gm</i>	Tier 1	
<i>bacitra-neomycin-polymyxin-hc</i>	Tier 1	
BEPREVE	Tier 3	

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
BESIVANCE	Tier 3	
BETADINE OPHTHALMIC PREP	Tier 3	
BETAGAN	NC	N5
<i>betaxolol hcl ophthalmic</i>	Tier 1	
BETIMOL	Tier 3	
BETOPTIC-S	Tier 3	
<i>bimatoprost ophthalmic</i>	Tier 1	PA; ST
<i>bio glo</i>	Tier 1	
BLEPH-10	NC	N5
BLEPHAMIDE	Tier 3	
BLEPHAMIDE S.O.P.	Tier 3	
<i>brimonidine tartrate ophthalmic</i>	Tier 1	
<i>bromfenac sodium (once-daily)</i>	Tier 1	
BROMSITE	Tier 3	
<i>carteolol hcl</i>	Tier 1	
CILOXAN OPHTHALMIC OINTMENT	Tier 3	
CILOXAN OPHTHALMIC SOLUTION	NC	N5
<i>ciprofloxacin hcl ophthalmic</i>	Tier 1	
CLARITIN EYE	Tier 1	Select OTC
COMBIGAN	Tier 2	
<i>cromolyn sodium ophthalmic</i>	Tier 1	
<i>cvs allergy eye drops</i>	Tier 1	Select OTC
CYCLOGYL OPHTHALMIC SOLUTION 0.5 %, 2 %	NC	N5
CYCLOGYL OPHTHALMIC SOLUTION 1 %	NC	
CYCLOMYDRIL	Tier 3	
<i>cyclopentolate hcl ophthalmic solution 0.5 %, 2 %</i>	Tier 1	
CYSTARAN	Tier 4	PA; SP; QL
<i>dexamethasone sodium phosphate ophthalmic</i>	Tier 1	
<i>diclofenac sodium ophthalmic</i>	Tier 1	
<i>dorzolamide hcl ophthalmic</i>	Tier 1	
<i>dorzolamide hcl-timolol mal</i>	Tier 1	
DUREZOL	Tier 2	#

Drug	Status	Notes
ELESTAT	NC	N5
EMADINE	Tier 3	
<i>epinastine hcl</i>	Tier 1	
<i>eq itchy eye drops</i>	Tier 1	Select OTC
<i>eye itch relief</i>	Tier 1	Select OTC
FLAREX	Tier 3	
<i>flucaine</i>	Tier 1	
<i>fluorescein-benoxinate</i>	Tier 1	
<i>fluor-i-strips a.t.</i>	Tier 1	
<i>fluorometholone ophthalmic</i>	Tier 1	
FLURA-SAFE	Tier 3	
<i>flurbiprofen sodium</i>	Tier 1	
<i>flurox</i>	Tier 1	
FML	Tier 3	
FML FORTE	Tier 3	
FML LIQUIFILM	NC	N5
FUL-GLO OPHTHALMIC STRIP 0.6 MG	Tier 3	
<i>ful-glo ophthalmic strip 1 mg</i>	Tier 1	
<i>gatifloxacin ophthalmic</i>	Tier 1	
<i>gentak ophthalmic ointment</i>	Tier 1	
<i>gentamicin sulfate ophthalmic solution</i>	Tier 1	
<i>homatropaire</i>	Tier 1	
<i>homatropine hbr ophthalmic</i>	Tier 1	
ILEVRO	Tier 3	
IOPIDINE OPHTHALMIC SOLUTION 0.5 %	NC	N5
IOPIDINE OPHTHALMIC SOLUTION 1 %	Tier 3	
ISOPTO HOMATROPINE OPHTHALMIC SOLUTION 5 %	NC	N5
ISTALOL	Tier 3	
JETREA INTRAVITREAL SOLUTION 0.375 MG/0.3ML	Tier 4	PA; SP
<i>ketorolac tromethamine ophthalmic</i>	Tier 1	QL
<i>ketotifen fumarate ophthalmic</i>	Tier 1	Select OTC
LACRISERT	Tier 3	

Drug	Status	Notes
LASTACAFT	Tier 3	
<i>latanoprost ophthalmic</i>	Tier 1	
<i>levobunolol hcl ophthalmic solution 0.5 %</i>	Tier 1	
<i>levofloxacin ophthalmic</i>	Tier 1	
LOTEMAX OPHTHALMIC GEL	Tier 2	#
LOTEMAX OPHTHALMIC OINTMENT	Tier 2	
LOTEMAX OPHTHALMIC SUSPENSION	Tier 2	
LUCENTIS INTRAVITREAL SOLUTION PREFILLED SYRINGE	Tier 4	PA; SP
LUMIGAN OPHTHALMIC SOLUTION 0.01 %	Tier 3	PA; ST
MACUGEN	Tier 4	PA; SP
MAXIDEX	Tier 3	
MOXEZA	Tier 3	
<i>moxifloxacin hcl ophthalmic</i>	Tier 1	
MYDRIACYL	NC	N5
NATACYN	Tier 3	
<i>neomycin-bacitracin zn-polymyx</i>	Tier 1	
<i>neomycin-polymyxin-dexameth ophthalmic ointment</i>	Tier 1	
<i>neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1</i>	Tier 1	
<i>neomycin-polymyxin-gramicidin ophthalmic solution 1.75-10000-.025</i>	Tier 1	
<i>neomycin-polymyxin-hc ophthalmic suspension 3.5-10000-1</i>	Tier 1	
NEVANAC	Tier 3	
OCUFLOX	NC	N5
<i>ofloxacin ophthalmic</i>	Tier 1	
<i>olopatadine hcl ophthalmic</i>	Tier 1	
OMNIPRED	NC	N5
PATADAY	Tier 3	#
PATANOL	NC	N5
PAZEO	Tier 3	
<i>phenylephrine hcl ophthalmic solution 2.5 %</i>	Tier 1	
PHOSPHOLINE IODIDE	Tier 2	

Drug	Status	Notes
<i>pilocarpine hcl ophthalmic solution 1 %, 2 %, 4 %</i>	Tier 1	
<i>polymyxin b-trimethoprim</i>	Tier 1	
POLYTRIM	NC	N5
PRED FORTE	NC	N5
PRED MILD	Tier 3	
PRED-G	Tier 3	
PRED-G S.O.P.	Tier 3	
<i>prednisolone acetate ophthalmic</i>	Tier 1	
<i>prednisolone sodium phosphate ophthalmic</i>	Tier 1	
PROLENSA	Tier 3	
<i>proparacaine hcl ophthalmic</i>	Tier 1	
<i>proparacaine-fluorescein</i>	Tier 1	
RESCULA	Tier 3	PA; ST
RESTASIS	Tier 2	
SIMBRINZA	Tier 3	
<i>sulfacetamide sodium ophthalmic</i>	Tier 1	
<i>sulfacetamide-prednisolone ophthalmic solution</i>	Tier 1	
<i>tetcaine</i>	Tier 1	
<i>tetracaine hcl ophthalmic</i>	Tier 1	
<i>tetravisc</i>	Tier 1	
<i>timolol maleate ophthalmic</i>	Tier 1	
TIMOPTIC	NC	N5
TIMOPTIC OCUDOSE	Tier 3	
TIMOPTIC-XE	NC	N5
TOBRADEX OPHTHALMIC OINTMENT	Tier 3	
TOBRADEX OPHTHALMIC SUSPENSION	NC	N5
TOBRADEX ST	Tier 3	
<i>tobramycin-dexamethasone</i>	Tier 1	
TOBREX OPHTHALMIC OINTMENT	Tier 3	
TRAVATAN Z	Tier 2	#
<i>trifluridine ophthalmic</i>	Tier 1	
<i>tropicamide ophthalmic</i>	Tier 1	
TRUSOPT	NC	N5

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary
Last Update 12/2017
Next Update

Drug	Status	Notes
VIGAMOX	Tier 3	#
VISIONBLUE	Tier 3	
VISUDYNE	Tier 4	#; SP
WAL-ZYR OPHTHALMIC	Tier 1	Select OTC
XALATAN	NC	N5
ZADITOR	NC	N5; Select OTC
ZIOPTAN	Tier 3	PA; ST
ZIRGAN	Tier 3	#
ZYLET	Tier 3	
ZYMAXID	NC	
*Orexin Receptor Antagonists***		
BELSOMRA	Tier 3	ST; QL
Otic Agents		
<i>acetazol hc</i>	Tier 1	
<i>acetic acid otic</i>	Tier 1	
CETRAXAL	Tier 3	
CIPRO HC	Tier 3	#
CIPRODEX	Tier 2	
<i>ciprofloxacin hel otic</i>	Tier 1	
COLY-MYCIN S	Tier 3	
DERMOTIC	NC	N5
FLOXIN OTIC	NC	
<i>fluocinolone acetonide otic</i>	Tier 1	
<i>hydrocortisone-acetic acid</i>	Tier 1	
<i>neomycin-polymyxin-hc otic solution 3.5-10000-1</i>	Tier 1	
<i>neomycin-polymyxin-hc otic suspension</i>	Tier 1	
<i>ofloxacin otic</i>	Tier 1	
OTOVEL	Tier 3	
*Oxaborole-Related Antifungals - Topical***		
KERYDIN	Tier 3	PA; ST
Oxytocics		
METHERGINE ORAL	Tier 1	QL
*Passive Immunizing Agents - Combinations***		
HYQVIA	Tier 4	PA; ST; SP

Drug	Status	Notes
Passive Immunizing Agents		
BIVIGAM	NC	N5; SP
CARIMUNE NF INTRAVENOUS SOLUTION RECONSTITUTED 12 GM, 6 GM	NC	N5; SP
CUVITRU	NC	N5
CYTOGAM	NC	N5; SP
FLEBOGAMMA DIF	Tier 4	PA; SP
GAMASTAN S/D INTRAMUSCULAR INJECTABLE	Tier 4	SP
GAMMAGARD INJECTION SOLUTION 1 GM/10ML	Tier 3	PA; ST; N5; SP
GAMMAGARD INJECTION SOLUTION 10 GM/100ML, 2.5 GM/25ML, 20 GM/200ML, 30 GM/300ML, 5 GM/50ML	NC	N5; SP
GAMMAGARD S/D LESS IGA	NC	N5; SP
GAMMAKED	NC	N5; SP
GAMMAPLEX INTRAVENOUS SOLUTION 10 GM/200ML, 20 GM/400ML, 5 GM/100ML	Tier 4	PA; SP
GAMUNEX-C	Tier 4	PA; SP
HIZENTRA SUBCUTANEOUS SOLUTION 1 GM/5ML, 10 GM/50ML, 2 GM/10ML, 4 GM/20ML	NC	N5; SP
HYPERHEP B S/D	NC	N5; SP
HYPERRAB S/D INTRAMUSCULAR INJECTABLE 150 UNIT/ML	NC	N5; SP
HYPERRHO S/D INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	NC	N5; SP
HYPERTET S/D	NC	N5; SP
IMOGAM RABIES-HT	NC	N5; SP
MICRHOGAM ULTRA-FILTERED PLUS INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	NC	N5; SP
NABI-HB	NC	N5; SP
OCTAGAM	Tier 4	PA; SP
PRIVIGEN	NC	N5; SP

Drug	Status	Notes
RHOGAM ULTRA-FILTERED PLUS INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	NC	N5; SP
RHOPHYLAC INJECTION SOLUTION PREFILLED SYRINGE	NC	N5; SP
SYNAGIS	Tier 4	PA; SP
WINRHO SDF	NC	N5; SP
*Pcsk9 Inhibitors***		
PRALUENT SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier 4	PA; ST; QL
REPATHA	Tier 4	PA; ST; QL
REPATHA PUSHTRONEX SYSTEM	Tier 4	PA; ST; QL
REPATHA SURECLICK	Tier 4	PA; ST; QL
Penicillins		
<i>amoxicillin oral capsule</i>	Tier 1	LGC
<i>amoxicillin oral suspension reconstituted</i>	Tier 1	LGC
<i>amoxicillin oral tablet</i>	Tier 1	
<i>amoxicillin oral tablet chewable 125 mg, 250 mg</i>	Tier 1	
<i>amoxicillin-pot clavulanate er</i>	Tier 1	
<i>amoxicillin-pot clavulanate oral suspension reconstituted</i>	Tier 1	
<i>amoxicillin-pot clavulanate oral tablet</i>	Tier 1	
<i>amoxicillin-pot clavulanate oral tablet chewable 200-28.5 mg</i>	Tier 1	
<i>ampicillin oral capsule 500 mg</i>	Tier 1	
<i>ampicillin sodium injection</i>	Tier 4	
<i>ampicillin sodium intravenous</i>	Tier 4	
<i>ampicillin-sulbactam sodium injection</i>	Tier 4	
<i>ampicillin-sulbactam sodium intravenous solution reconstituted 1.5 (1-0.5) gm, 15 (10-5) gm</i>	Tier 4	
AUGMENTIN ORAL SUSPENSION RECONSTITUTED 125-31.25 MG/5ML	Tier 3	
AUGMENTIN ORAL SUSPENSION RECONSTITUTED 250-62.5 MG/5ML	NC	N5
AUGMENTIN ORAL TABLET 500-125 MG, 875-125 MG	NC	N5

Drug	Status	Notes
AUGMENTIN XR	NC	N5
BACTOCILL IN DEXTROSE	Tier 3	
<i>dicloxacillin sodium</i>	Tier 1	
MOXATAG	Tier 3	
<i>penicillin g pot in dextrose</i>	Tier 1	
<i>penicillin v potassium oral solution reconstituted 125 mg/5ml</i>	Tier 1	LGC
<i>penicillin v potassium oral solution reconstituted 250 mg/5ml</i>	Tier 1	
<i>penicillin v potassium oral tablet 250 mg</i>	Tier 1	LGC
<i>penicillin v potassium oral tablet 500 mg</i>	Tier 1	
<i>piperacillin sod-tazobactam so intravenous solution reconstituted 2.25 (2-0.25) gm, 3.375 (3-0.375) gm, 4.5 (4-0.5) gm, 40.5 (36-4.5) gm</i>	Tier 4	
UNASYN INJECTION SOLUTION RECONSTITUTED 15 (10-5) GM, 3 (2-1) GM	Tier 3	
ZOSYN INTRAVENOUS SOLUTION RECONSTITUTED	NC	
Pharmaceutical Adjuvants		
<i>saline bacteriostatic</i>	Tier 1	
<i>saline-benzyl alcohol</i>	Tier 1	
<i>sodium chloride bacteriostatic</i>	Tier 1	
*Phosphatidylinositol 3-Kinase (Pi3k) Inhibitors***		
ZYDELIG	Tier 4	PA; SP; QL
*Phosphodiesterase 4 (Pde4) Inhibitors - Topical***		
EUCRISA	NC	
*Phosphodiesterase 4 (Pde4) Inhibitors***		
OTEZLA ORAL TABLET	Tier 4	PA; ST; SP; QL
OTEZLA ORAL TABLET THERAPY PACK	Tier 4	PA; ST; SP; QL
*Poly (Adp-Ribose) Polymerase (Parp) Inhibitors**		
LYNPARZA ORAL CAPSULE	Tier 4	PA; ST; SP; QL
LYNPARZA ORAL TABLET	Tier 4	PA; SP; QL

Drug	Status	Notes
RUBRACA ORAL TABLET 200 MG, 300 MG	Tier 4	PA; QL
RUBRACA ORAL TABLET 250 MG	Tier 4	PA; SP; QL
ZEJULA	Tier 4	PA; SP; QL
*Poly (Adp-Ribose) Polymerase (Parp) Inhibitors***		
LYNPARZA ORAL CAPSULE	Tier 4	PA; ST; SP; QL
LYNPARZA ORAL TABLET	Tier 4	PA; SP; QL
RUBRACA ORAL TABLET 200 MG, 300 MG	Tier 4	PA; QL
RUBRACA ORAL TABLET 250 MG	Tier 4	PA; SP; QL
ZEJULA	Tier 4	PA; SP; QL
*Potassium Removing Agents***		
<i>kionex oral powder</i>	Tier 1	
<i>sodium polystyrene sulfonate oral powder</i>	Tier 1	
VELTASSA	Tier 4	PA; QL
Progestins		
AYGESTIN	NC	N5
MAKENA	Tier 4	PA; SP
<i>medroxyprogesterone acetate oral</i>	Tier 1	LGC
MEGACE ES	NC	N5
<i>megestrol acetate oral suspension 625 mg/5ml</i>	Tier 1	
<i>norethindrone acetate oral</i>	Tier 1	
<i>progesterone micronized oral</i>	Tier 1	QL
PROMETRIUM	NC	N5
PROVERA	NC	N5
*Protease-Activated Receptor-1 (Par-1) Antagonists***		
ZONTIVITY	Tier 3	PA; QL
Psychotherapeutic And Neurological Agents - Misc.		
<i>acamprosate calcium</i>	Tier 1	QL
AMPYRA	Tier 4	PA; SP; QL
ANTABUSE	NC	N5
ARICEPT	NC	N5
AUBAGIO	Tier 4	PA; ST; SP; QL

Drug	Status	Notes
AUSTEDO	Tier 4	PA; ST; SP; QL
AVONEX	Tier 4	PA; ST; SP; QL
AVONEX PEN INTRAMUSCULAR AUTO-INJECTOR KIT	Tier 4	PA; ST; SP; QL
AVONEX PREFILLED INTRAMUSCULAR PREFILLED SYRINGE KIT	Tier 4	PA; ST; SP; QL
BETASERON SUBCUTANEOUS KIT	Tier 4	PA; ST; SP; QL
BRISDELLE	Tier 3	PA; QL
<i>bupropion hcl er (smoking det)</i>	CE	QL
CHANTIX	CE	QL
CHANTIX CONTINUING MONTH PAK	CE	QL
CHANTIX STARTING MONTH PAK	CE	QL
<i>chlordiazepoxide-amitriptyline</i>	Tier 1	
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/ML	NC	N5; SP
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/ML	Tier 4	PA; #; SP
<i>cvs nicotine polacrilex mouth/throat lozenge 4 mg</i>	Tier 1	QL
<i>cvs nicotine transdermal patch 24 hour</i>	CE	QL
<i>cvs nts step 1</i>	CE	QL
<i>disulfiram oral</i>	Tier 1	
<i>donepezil hcl oral tablet 10 mg</i>	Tier 1	PA; QL
<i>donepezil hcl oral tablet 23 mg</i>	Tier 3	PA
<i>donepezil hcl oral tablet 5 mg</i>	Tier 1	PA
<i>donepezil hcl oral tablet dispersible</i>	Tier 1	PA
<i>eq nicotine transdermal</i>	CE	QL
<i>ergoloid mesylates oral</i>	Tier 1	
EXELON TRANSDERMAL	NC	N5
EXTAVIA SUBCUTANEOUS KIT	Tier 4	PA; ST; SP; QL
<i>fluoxetine hcl (pmdd)</i>	Tier 1	
<i>galantamine hydrobromide er</i>	Tier 1	PA
<i>galantamine hydrobromide oral solution</i>	Tier 1	PA

Drug	Status	Notes
<i>galantamine hydrobromide oral tablet</i>	Tier 3	PA
GILENYA	Tier 4	PA; SP; QL
<i>glatopa</i>	Tier 4	PA
GRALISE ORAL TABLET 300 MG, 600 MG	Tier 3	ST; QL
GRALISE STARTER	Tier 3	ST; QL
<i>hm nicotine</i>	CE	QL
<i>hm nicotine polacrilex mouth/throat lozenge 2 mg</i>	Tier 1	QL
HORIZANT ORAL TABLET EXTENDED RELEASE 300 MG, 600 MG	Tier 3	PA; ST; QL
INGREZZA ORAL CAPSULE 40 MG	Tier 4	PA; SP; QL
INGREZZA ORAL CAPSULE 80 MG	Tier 4	PA; QL
LEMTRADA	Tier 4	PA; ST; SP; QL
<i>memantine hcl oral tablet 10 mg, 5 mg</i>	Tier 1	QL
<i>memantine hcl oral tablet 5 (28)-10 (21) mg</i>	Tier 1	
NAMENDA ORAL TABLET	NC	N5
NAMENDA TITRATION PAK	NC	N5
NAMENDA XR	Tier 2	PA; #
NAMENDA XR TITRATION PACK	Tier 3	#
NICODERM CQ	CE	QL
<i>nicorelief mouth/throat gum</i>	Tier 1	QL
NICORETTE MOUTH/THROAT GUM	CE	QL
NICORETTE MOUTH/THROAT LOZENGE	CE	
<i>nicotine polacrilex mouth/throat gum 4 mg</i>	Tier 1	
<i>nicotine step 1</i>	CE	QL
<i>nicotine step 2</i>	CE	QL
<i>nicotine step 3</i>	CE	QL
<i>nicotine transdermal patch 24 hour</i>	CE	QL
NICOTROL	CE	QL
NICOTROL NS	CE	QL
NUEDEXTA	Tier 2	QL
<i>olanzapine-fluoxetine hcl</i>	Tier 1	QL
ORAP	NC	N5
<i>paroxetine mesylate</i>	Tier 1	QL

Drug	Status	Notes
<i>perphenazine-amitriptyline</i>	Tier 1	
<i>pimozide</i>	Tier 1	
PLEGRIDY STARTER PACK SUBCUTANEOUS SOLUTION PEN- INJECTOR	Tier 4	PA; ST; SP; QL
PLEGRIDY STARTER PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier 4	PA; ST; SP
PLEGRIDY SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier 4	PA; ST; SP; QL
PLEGRIDY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier 4	PA; ST; SP
<i>ra nicotine transdermal</i>	CE	QL
RAZADYNE ER	NC	N5
RAZADYNE ORAL TABLET	NC	N5
REBIF REBIDOSE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier 4	PA; SP; QL
REBIF REBIDOSE TITRATION PACK SUBCUTANEOUS SOLUTION AUTO- INJECTOR	Tier 4	PA; SP; QL
REBIF SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier 4	PA; SP; QL
REBIF TITRATION PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier 4	PA; SP; QL
<i>rivastigmine</i>	Tier 1	PA
<i>rivastigmine tartrate</i>	Tier 1	PA
SARAFEM ORAL TABLET 10 MG, 20 MG	Tier 3	
SAVELLA	Tier 3	ST; QL
SAVELLA TITRATION PACK	Tier 3	ST; QL
<i>sm nicotine transdermal</i>	CE	QL
SYMBYAX	NC	N5
TECFIDERA	Tier 4	PA; ST; SP; QL
<i>tetrabenazine oral tablet 12.5 mg, 25 mg</i>	Tier 4	PA; QL
<i>tgt nicotine step one</i>	CE	QL
<i>tgt nicotine step three</i>	CE	QL
<i>tgt nicotine step two</i>	CE	QL

Drug	Status	Notes
<i>thrive mouth/throat gum 2 mg</i>	Tier 1	QL
TYSABRI	Tier 4	PA; ST; SP
XENAZINE	NC	N5; SP
XYREM	Tier 4	PA; SP
ZINBRYTA	Tier 4	PA; ST; QL
ZYBAN	CE	QL
*Pulmonary Fibrosis Agents - Kinase Inhibitors***		
OFEV	Tier 4	PA; SP; QL
*Pulmonary Fibrosis Agents***		
ESBRIET ORAL CAPSULE	Tier 4	PA; SP; QL
ESBRIET ORAL TABLET 267 MG, 801 MG	Tier 4	PA; SP; QL
*Pulmonary Hypertension - Prostacyclin Receptor Agonist***		
UPTRAVI ORAL TABLET 1000 MCG, 1200 MCG, 1400 MCG, 1600 MCG, 400 MCG, 600 MCG, 800 MCG	Tier 4	PA; SP; QL
UPTRAVI ORAL TABLET 200 MCG	Tier 4	PA; SP
UPTRAVI ORAL TABLET THERAPY PACK	Tier 4	PA; SP
Respiratory Agents - Misc.		
ARALAST NP INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG, 500 MG	Tier 4	PA; SP
GLASSIA	Tier 4	PA; SP
KALYDECO	Tier 4	PA; SP; QL
PROLASTIN-C INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG	Tier 4	PA; SP
PULMOZYME	Tier 4	PA; SP; QL
ZEMAIRA	Tier 4	PA; SP
*Serotonin Modulators***		
<i>nefazodone hcl</i>	Tier 1	
<i>trazodone hcl oral tablet 100 mg, 150 mg, 50 mg</i>	Tier 1	LGC
<i>trazodone hcl oral tablet 300 mg</i>	Tier 1	
TRINTELLIX	Tier 3	PA; ST; QL
VIIBRYD ORAL TABLET	Tier 3	QL

Drug	Status	Notes
VIIBRYD STARTER PACK	Tier 3	
*SglT2 Inhibitor - Dpp-4 Inhibitor Combinations***		
GLYXAMBI	Tier 3	ST; QL
*Sinus Node Inhibitors**		
CORLANOR	Tier 3	PA; ST
*Sodium-Glucose Co-Transporter 2 Inhibitor-Biguanide Comb***		
INVOKAMET	Tier 2	QL
INVOKAMET XR	Tier 2	QL
SYNJARDY	Tier 3	QL
SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-1000 MG, 12.5-1000 MG, 25-1000 MG, 5-1000 MG	Tier 3	QL
XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-1000 MG, 10-500 MG, 5-1000 MG, 5-500 MG	Tier 3	QL
Sulfonamides		
<i>sulfadiazine oral</i>	Tier 1	
Tetracyclines		
ACTICLATE	NC	
ADOXA ORAL CAPSULE	NC	
<i>avidoxy</i>	NC	
AVIDOXY DK	NC	
<i>demeclocycline hcl oral</i>	Tier 1	
DORYX MPC	NC	
DORYX ORAL TABLET DELAYED RELEASE 200 MG, 50 MG	NC	
<i>doxy 100</i>	Tier 1	
<i>doxycycline hyclate intravenous</i>	Tier 1	
<i>doxycycline hyclate oral capsule</i>	Tier 1	
<i>doxycycline hyclate oral tablet 100 mg, 20 mg</i>	Tier 1	
<i>doxycycline hyclate oral tablet 150 mg, 75 mg</i>	NC	
<i>doxycycline hyclate oral tablet delayed release</i>	NC	
<i>doxycycline monohydrate oral capsule 150 mg, 75 mg</i>	NC	

Drug	Status	Notes
<i>doxycycline monohydrate oral capsule 50 mg</i>	Tier 1	
<i>doxycycline monohydrate oral tablet</i>	NC	
MINOCIN ORAL CAPSULE 100 MG, 50 MG	NC	N5
<i>minocycline hcl er</i>	NC	
<i>minocycline hcl oral capsule 100 mg, 75 mg</i>	Tier 1	
<i>minocycline hcl oral capsule 50 mg</i>	NC	
<i>minocycline hcl oral tablet</i>	NC	
MONDOXYNE NL ORAL CAPSULE 75 MG	NC	
MONODOX ORAL CAPSULE 100 MG	Tier 3	
MONODOX ORAL CAPSULE 75 MG	NC	
MORGIDOX COMBINATION	NC	
MORGIDOX ORAL CAPSULE 100 MG	Tier 1	
SOLODYN ORAL TABLET EXTENDED RELEASE 24 HOUR 105 MG, 115 MG, 55 MG, 65 MG, 80 MG	NC	
TARGADOX	NC	
<i>tetracycline hcl oral</i>	Tier 1	
VIBRAMYCIN ORAL CAPSULE	NC	N5
VIBRAMYCIN ORAL SUSPENSION RECONSTITUTED	Tier 3	
VIBRAMYCIN ORAL SYRUP	Tier 3	
XIMINO	NC	
Thyroid Agents		
ARMOUR THYROID ORAL TABLET 120 MG, 15 MG, 180 MG, 240 MG, 30 MG, 300 MG, 90 MG	Tier 3	
ARMOUR THYROID ORAL TABLET 60 MG	NC	N5
CYTOMEL	NC	N5
<i>levothyroxine sodium oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg</i>	Tier 1	LGC
<i>levothyroxine sodium oral tablet 300 mcg</i>	Tier 1	
<i>levoxyl</i>	Tier 1	LGC
<i>liothyronine sodium intravenous</i>	Tier 1	

Drug	Status	Notes
<i>liothyronine sodium oral</i>	Tier 1	
<i>methimazole oral</i>	Tier 1	
NATURE-THROID ORAL TABLET 113.75 MG, 130 MG, 146.25 MG, 162.5 MG, 195 MG, 260 MG, 325 MG, 81.25 MG	Tier 3	
NATURE-THROID ORAL TABLET 16.25 MG, 32.5 MG, 48.75 MG, 65 MG, 97.5 MG	Tier 2	
<i>np thyroid oral tablet 60 mg</i>	Tier 1	
<i>propylthiouracil oral</i>	Tier 1	
SYNTHROID	NC	N5
TAPAZOLE ORAL TABLET 5 MG	NC	N5
THYROLAR-1	Tier 3	
THYROLAR-1/2	Tier 3	
THYROLAR-1/4	Tier 3	
THYROLAR-2	Tier 3	
THYROLAR-3	Tier 3	
TIROSINT	Tier 3	QL
<i>unithroid direct</i>	Tier 1	
<i>unithroid oral tablet 100 mcg, 112 mcg, 125 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg</i>	Tier 1	LGC
WESTHROID ORAL TABLET 130 MG, 195 MG, 32.5 MG, 65 MG, 97.5 MG	Tier 3	
WP THYROID ORAL TABLET 113.75 MG, 16.25 MG, 32.5 MG, 48.75 MG, 65 MG, 81.25 MG, 97.5 MG	Tier 3	
WP THYROID ORAL TABLET 130 MG	Tier 2	
Toxoids		
ADACEL	Tier 2	
BOOSTRIX INTRAMUSCULAR SUSPENSION 5-2.5-18.5	Tier 2	
*Tryptophan Hydroxylase Inhibitors***		
XERMELO	Tier 4	PA; QL
Ulcer Drugs		
<i>acid control</i>	NC	
<i>acid reducer oral tablet 150 mg</i>	NC	
ACIPHEX	NC	N5

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
ACIPHEX SPRINKLE	Tier 3	PA; ST; #; QL
<i>amoxicill-clarithro-lansopraz</i>	Tier 1	
ANASPAZ	NC	N5
<i>belladonna alkaloids-opium</i>	Tier 1	
<i>belladonna-opium</i>	Tier 1	
BENTYL INTRAMUSCULAR	Tier 3	
BENTYL ORAL CAPSULE	NC	N5
BENTYL ORAL TABLET	NC	N5
CARAFATE ORAL SUSPENSION	Tier 3	
CARAFATE ORAL TABLET	NC	N5
<i>cimetidine oral tablet 300 mg, 400 mg, 800 mg</i>	Tier 1	
CUVPOSA	Tier 3	
<i>cvs lansoprazole</i>	Tier 1	Select OTC
DEXILANT	Tier 3	PA; ST; QL
<i>dicyclomine hcl oral capsule</i>	Tier 1	LGC
<i>dicyclomine hcl oral solution</i>	Tier 1	
<i>dicyclomine hcl oral tablet</i>	Tier 1	LGC
DONNATAL ORAL TABLET	Tier 3	
<i>eq lansoprazole</i>	Tier 1	Select OTC
<i>esomeprazole magnesium oral capsule delayed release 40 mg</i>	Tier 1	QL
<i>esomeprazole strontium</i>	NC	
<i>famotidine oral suspension reconstituted</i>	Tier 1	
<i>famotidine oral tablet 20 mg, 40 mg</i>	Tier 1	LGC
<i>famotidine premixed</i>	Tier 1	
<i>glycopyrrolate injection solution 4 mg/20ml</i>	Tier 1	
<i>glycopyrrolate oral tablet 1 mg, 2 mg</i>	Tier 1	
<i>gnp lansoprazole</i>	Tier 1	Select OTC
<i>heartburn treatment 24 hour</i>	Tier 1	Select OTC
<i>hm lansoprazole</i>	Tier 1	Select OTC
<i>kls lansoprazole</i>	Tier 1	Select OTC
<i>lansoprazole oral capsule delayed release 15 mg</i>	Tier 1	Select OTC
<i>lansoprazole oral capsule delayed release 30 mg</i>	NC	
LEVBID	NC	N5
LEVSIN ORAL TABLET	NC	N5

Drug	Status	Notes
LEVSIN/SL	NC	N5
<i>methscopolamine bromide oral</i>	Tier 1	
<i>misoprostol oral</i>	Tier 1	
NEXIUM 24HR	Tier 1	Select OTC; QL
NEXIUM I.V. INTRAVENOUS SOLUTION RECONSTITUTED 40 MG	Tier 3	
NEXIUM ORAL CAPSULE DELAYED RELEASE 40 MG	NC	N5
NEXIUM ORAL PACKET	Tier 3	#; QL
<i>nizatidine</i>	Tier 1	
OMECLAMOX-PAK	Tier 3	
<i>omeprazole magnesium</i>	Tier 1	Select OTC
<i>omeprazole oral capsule delayed release 10 mg, 40 mg</i>	Tier 1	
<i>omeprazole oral capsule delayed release 20 mg</i>	NC	
<i>omeprazole oral tablet delayed release</i>	Tier 1	Select OTC
<i>omeprazole-sodium bicarbonate oral capsule 20-1100 mg</i>	Tier 1	Select OTC
<i>omeprazole-sodium bicarbonate oral capsule 40-1100 mg</i>	NC	
<i>omeprazole-sodium bicarbonate oral packet</i>	NC	
<i>pantoprazole sodium oral</i>	Tier 1	
PEPCID ORAL SUSPENSION RECONSTITUTED	NC	N5
PREVACID	NC	
PREVACID 24HR	NC	
PREVACID SOLUTAB	Tier 3	PA; ST; QL
PREVPAC	NC	N5
PRILOSEC ORAL CAPSULE DELAYED RELEASE 20 MG	NC	N5
PRILOSEC ORAL PACKET	NC	
PRILOSEC OTC	Tier 1	Select OTC; QL
<i>propantheline bromide oral</i>	Tier 1	
PROTONIX INTRAVENOUS	Tier 3	
PROTONIX ORAL PACKET	Tier 3	

Drug	Status	Notes
PROTONIX ORAL TABLET DELAYED RELEASE	NC	N5
PYLERA	Tier 3	
<i>ra lansoprazole</i>	Tier 1	Select OTC
<i>ra omeprazole-sodium bicarb</i>	Tier 1	Select OTC
<i>rabeprazole sodium</i>	Tier 1	PA; QL
<i>ranitidine hcl injection solution 50 mg/2ml</i>	Tier 1	
<i>ranitidine hcl oral capsule</i>	Tier 1	
<i>ranitidine hcl oral syrup 75 mg/5ml</i>	Tier 1	
<i>ranitidine hcl oral tablet 300 mg</i>	Tier 1	LGC
ROBINUL ORAL	NC	N5
ROBINUL-FORTE	NC	N5
<i>sm lansoprazole</i>	Tier 1	Select OTC
<i>sucralfate oral tablet</i>	Tier 1	
SYMAX DUOTAB	NC	
ZANTAC INJECTION SOLUTION 1000 MG/40ML	Tier 3	
ZANTAC ORAL TABLET 300 MG	NC	N5
ZEGERID	NC	
ZEGERID OTC	Tier 1	Select OTC; QL
Urinary Anti-Infectives		
FURADANTIN	NC	N5
HIPREX	NC	N5
MACROBID	NC	N5
MACRODANTIN ORAL CAPSULE 100 MG	NC	N5
MACRODANTIN ORAL CAPSULE 25 MG, 50 MG	NC	N5; #
<i>methenamine hippurate</i>	Tier 1	
<i>methenamine mandelate oral tablet 0.5 gm</i>	Tier 1	
<i>nitrofurantoin macrocrystal oral capsule 50 mg</i>	Tier 1	
<i>nitrofurantoin monohyd macro</i>	Tier 1	
<i>nitrofurantoin oral suspension</i>	Tier 1	
Urinary Antispasmodics		
<i>bethanechol chloride oral tablet 10 mg, 5 mg, 50 mg</i>	Tier 1	

Drug	Status	Notes
<i>darifenacin hydrobromide er</i>	Tier 1	QL
DETROL	NC	N5
DETROL LA	NC	N5
DITROPAN XL	NC	N5
ENABLEX	Tier 3	ST; #; QL
<i>flavoxate hcl</i>	Tier 1	
GELNIQUE TRANSDERMAL GEL 10 %	Tier 3	ST
MYRBETRIQ	Tier 2	ST; QL
<i>oxybutynin chloride er oral tablet extended release 24 hour 10 mg, 15 mg, 5 mg</i>	Tier 1	QL
<i>oxybutynin chloride oral syrup</i>	Tier 1	
<i>oxybutynin chloride oral tablet</i>	Tier 1	LGC; QL
OXYTROL	NC	
OXYTROL FOR WOMEN	Tier 1	#; Select OTC
<i>tolterodine tartrate</i>	Tier 1	
<i>tolterodine tartrate er</i>	Tier 1	QL
TOVIAZ	Tier 3	ST; QL
<i>trospium chloride</i>	Tier 1	QL
<i>trospium chloride er</i>	Tier 1	QL
URECHOLINE	NC	N5
VESICARE	Tier 2	ST; #; QL
Vaginal Products		
AVC VAGINAL	Tier 3	
CLEOCIN VAGINAL CREAM	NC	N5
CLEOCIN VAGINAL SUPPOSITORY	Tier 3	
<i>clindamycin phosphate vaginal</i>	Tier 1	
CRINONE	Tier 3	
ENDOMETRIN	Tier 3	
ESTRACE VAGINAL	Tier 3	
ESTRING	Tier 3	
FEM PH	Tier 3	
FEMRING	Tier 3	#; QL
GYNAZOLE-1	Tier 3	
INTRAROSA	Tier 3	QL
METROGEL-VAGINAL	NC	N5

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

Drug	Status	Notes
<i>metronidazole vaginal</i>	Tier 1	
<i>miconazole 3 vaginal suppository</i>	Tier 1	
PREMARIN VAGINAL	Tier 2	
RELAGARD	Tier 3	
<i>terconazole</i>	Tier 1	
VAGIFEM VAGINAL TABLET 10 MCG	Tier 3	
<i>vandazole</i>	Tier 1	
YUVAFEM	Tier 1	
Vasopressors		
ADRENALIN INJECTION	NC	
ADYPHREN	Tier 3	QL
ADYPHREN AMP II	Tier 3	QL
ADYPHREN II	Tier 3	QL
AUVI-Q INJECTION SOLUTION AUTO-INJECTOR	NC	
<i>epinephrine injection solution auto-injector</i>	Tier 1	QL
EPIPEN 2-PAK INJECTION SOLUTION AUTO-INJECTOR	Tier 2	QL
EPIPEN JR 2-PAK INJECTION SOLUTION AUTO-INJECTOR	Tier 2	QL
EPISNAP	Tier 3	QL
<i>midodrine hcl</i>	Tier 1	SP
Vitamins		
<i>aqueous vitamin d</i>	CE	
BIO-D-MULSION FORTE	NC	
CALCIDOL	NC	
CALCIFEROL	NC	
<i>cvs d3 oral capsule 2000 unit, 5000 unit</i>	NC	
<i>d 10000</i>	NC	
<i>d 5000 oral capsule</i>	NC	
<i>d-2000 maximum strength</i>	NC	
<i>d2000 ultra strength</i>	NC	
D3 DOTS	NC	
<i>d3 maximum strength</i>	NC	
<i>d3 super strength</i>	NC	

Drug	Status	Notes
<i>d3-1000 oral capsule</i>	CE	
<i>d-3-5</i>	NC	
<i>d-5000</i>	NC	
DDROPS ORAL LIQUID 2000 UNT/0.03ML, 2000 UT/0.028ML	NC	
DECARA	NC	
<i>delta d3</i>	CE	
DIALYVITE VITAMIN D 5000	NC	
DIALYVITE VITAMIN D3 MAX	NC	
DRISDOL ORAL CAPSULE	NC	N5
D-VI-SOL	CE	
<i>eql vitamin d3 oral capsule 2000 unit, 5000 unit</i>	NC	
<i>ergocal</i>	Tier 3	
<i>ergocalciferol oral capsule</i>	Tier 1	
<i>gnp vitamin d maximum strength</i>	NC	
<i>gnp vitamin d oral tablet 1000 unit</i>	CE	
<i>gnp vitamin d super strength</i>	NC	
<i>hm vitamin d3</i>	NC	
MAXIMUM D3	NC	
MEPHYTON	Tier 2	QL
<i>nat-rul vitamin d oral tablet 2000 unit, 5000 unit</i>	NC	
<i>natural vitamin d-3</i>	NC	
OPTIMAL D3 M	NC	
OPTIMAL-D	NC	
OPURITY VITAMIN D	NC	
<i>pa vitamin d-3 oral capsule 5000 unit</i>	NC	
POTABA ORAL CAPSULE	Tier 3	
<i>ra vitamin d-3 oral capsule 5000 unit</i>	NC	
REPLESTA	NC	
REPLESTA CHILDRENS	NC	
REPLESTA NX	NC	
<i>sm vitamin d3 oral capsule</i>	NC	
<i>super daily d3 oral liquid 2000 ut/0.028ml</i>	NC	
THERA-D 2000	NC	
THERA-D 4000	NC	

Drug	Status	Notes
THERA-D RAPID REPLETION	NC	
<i>vitamin d (ergocalciferol)</i>	Tier 1	
<i>vitamin d oral capsule 2000 unit</i>	NC	
<i>vitamin d oral tablet 2000 unit</i>	NC	
<i>vitamin d2 oral tablet 2000 unit</i>	NC	
<i>vitamin d3 maximum strength</i>	NC	
<i>vitamin d3 oral capsule 10000 unit, 5000 unit, 50000 unit</i>	NC	
<i>vitamin d3 oral liquid 5000 unit/ml</i>	NC	
<i>vitamin d3 oral tablet 10000 unit, 3000 unit, 5000 unit, 50000 unit</i>	NC	
<i>vitamin d3 oral tablet 400 unit</i>	CE	
<i>vitamin d3 oral tablet chewable 2000 unit, 5000 unit</i>	NC	
<i>vitamin d3 super strength oral tablet</i>	NC	

Index

<i>abacavir sulfate</i>	55	<i>acid control</i>	149	ADVOCATE DUO.....	119
<i>abacavir sulfate-lamivudine</i>	55	<i>acid reducer</i>	149	ADVOCATE REDI-CODE... 87	
<i>abacavir-lamivudine-zidovudine</i>	55	ACIPHEX.....	149	ADVOCATE REDI-CODE+	
ABANEU-SL.....	110	ACIPHEX SPRINKLE.....	150	TEST.....	87
ABILIFY.....	53	<i>acitretin</i>	74	ADVOCATE TEST.....	87
ABREVA.....	74	ACTEMRA.....	8	<i>adynovate</i>	108
ABSORICA.....	74	ACTICLATE.....	147	ADYPHREN.....	154
ABSTRAL.....	12	ACTIGALL.....	104	ADYPHREN AMP II.....	154
<i>acamprosate calcium</i>	142	ACTIMMUNE.....	47	ADYPHREN II.....	154
ACANYA.....	74	ACTIQ.....	13	ADZENYS XR-ODT.....	5
<i>acarbose</i>	30	ACTIVE 1ST BLOOD		AEROSPAN.....	21
ACCOLATE.....	21	LANCETS 30G.....	119	<i>afeditab cr</i>	62
ACCU-CHEK AVIVA PLUS		<i>active fe</i>	110	AFINITOR.....	47
.....	87, 119	ACTIVELLA.....	102	AFINITOR DISPERZ.....	47
ACCU-CHEK COMPACT		ACTONEL.....	98	AFREZZA.....	31
PLUS.....	87	ACTOPLUS MET.....	30	AFSTYLA.....	108
ACCU-CHEK COMPACT		ACTOPLUS MET XR.....	30	AGAMATRIX AMP TEST... 87	
PLUS CARE.....	119	ACTOS.....	30	AGAMATRIX JAZZ TEST...87	
ACCU-CHEK FASTCLIX		ACULAR.....	133	AGAMATRIX KEYNOTE	
LANCETS.....	119	ACULAR LS.....	133	TEST.....	87
ACCU-CHEK MULTICLIX		ACUVAIL.....	133	AGAMATRIX PRESTO.....	119
LANCET DEV.....	119	<i>acyclovir</i>	55, 74	AGAMATRIX PRESTO	
ACCU-CHEK MULTICLIX		ACZONE.....	75	TEST.....	87
LANCETS.....	119	ADACEL.....	149	AGGRENOX.....	108
ACCU-CHEK NANO		ADAGEN.....	62	AIRAVITE.....	110
SMARTVIEW.....	119	ADALAT CC.....	62	AIRDUO RESPICLICK	
ACCU-CHEK		<i>adapalene</i>	75	113/14.....	21
SMARTVIEW.....	87	<i>adapalene-benzoyl peroxide</i>	75	AIRDUO RESPICLICK	
ACCU-CHEK SOFT		ADCIRCA.....	64	232/14.....	21
TOUCH LANCETS.....	119	ADDERALL.....	5	AIRDUO RESPICLICK	
ACCU-CHEK SOFTCLIX		ADDERALL XR.....	5	55/14.....	21
LANCETS.....	119	<i>adefovir dipivoxil</i>	55	AKTEN.....	133
ACCUPRIL.....	41	ADEMPAS.....	64	AKTIPAK.....	75
ACCURETIC.....	41	ADLYXIN.....	30	AKYNZEO.....	36
ACCUTREND GLUCOSE...87		ADLYXIN STARTER		ALA SCALP.....	75
<i>acebutolol hcl</i>	60	PACK.....	30	ALA-QUIN.....	75
ACEON.....	41	ADOXA.....	147	ALAVERT.....	37
<i>acetaminophen-codeine</i>	12, 13	ADRENALIN.....	131, 154	<i>alavert</i>	37
<i>acetaminophen-codeine #2</i>	12	<i>adrucil</i>	47	<i>alavert allergy/sinus</i>	73
<i>acetaminophen-codeine #3</i>	12	ADVAIR DISKUS.....	21	<i>alaway</i>	133
<i>acetaminophen-codeine #4</i>	12	ADVAIR HFA.....	21	ALAWAY CHILDRENS	
<i>acetazolamide</i>	138	ADVANCE INTUITION		ALLERGY.....	133
<i>acetazolamide</i>	97	TEST.....	87	ALBENZA.....	19
<i>acetazolamide er</i>	97	ADVANCE MICRO-DRAW		<i>albuterol sulfate</i>	21
<i>acetic acid</i>	106, 138	TEST.....	87	<i>albuterol sulfate er</i>	21
<i>acetylcysteine</i>	73	ADVATE.....	108	ALCAINE.....	133

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

<i>alclometasone dipropionate</i>	75	<i>altavera</i>	67	ANAFRANIL.....	28
ALCORTIN A.....	75	ALTOPREV.....	39	<i>anagrelide hcl</i>	108
ALDACTAZIDE.....	97	ALUNBRIG.....	47	ANA-LEX.....	18
ALDACTONE.....	97	ALVESCO.....	21	ANALPRAM-HC.....	18
ALDARA.....	75	<i>alyacen 1/35</i>	67	ANAPROX DS.....	8
ALDURAZYME.....	98	<i>alyacen 7/7/7</i>	67	ANASPAZ.....	150
ALECENSA.....	47	<i>amantadine hcl</i>	51	<i>anastrozole</i>	47
<i>alendronate sodium</i>	98	AMARYL.....	31	ANCOBON.....	37
ALFERON N.....	47	AMBIEN.....	114	ANDRODERM.....	17
<i>alfuzosin hcl er</i>	106	AMBIEN CR.....	114	ANDROGEL.....	18
ALINIA.....	44	AMBISOME.....	36	ANDROGEL PUMP.....	17
ALKERAN.....	47	<i>amcinonide</i>	75	ANDROID.....	18
ALLEGRA ALLERGY.....	37	AMELUZ.....	75	ANGELIQ.....	102
ALLEGRA ALLERGY		AMERGE.....	124	ANIMI-3.....	110
CHILDRENS.....	37	<i>amethia</i>	67	ANIMI-3/VITAMIN D.....	110
ALLEGRA-D ALLERGY &		<i>amethia lo</i>	67	ANORO ELLIPTA.....	22
CONGESTION.....	73	AMICAR.....	114	ANTABUSE.....	142
<i>allergy eye drops</i>	133	<i>amikacin sulfate</i>	8	ANTARA.....	39
<i>allergy relief</i>	37	<i>amiloride hcl</i>	97	ANUSOL-HC.....	18
<i>allopurinol</i>	107	<i>amiloride-hydrochlorothiazide</i> ..	97	ANZEMET.....	36
ALLZITAL.....	12	<i>aminophylline</i>	22	<i>apap-caff-dihydrocodeine</i>	13
<i>almotriptan malate</i>	124	<i>amiodarone hcl</i>	21	APEXICON E.....	75
ALOCRIL.....	133	AMITIZA.....	104	APIDRA.....	31
<i>alogliptin benzoate</i>	31	<i>amitriptyline hcl</i>	28	APIDRA SOLOSTAR.....	31
<i>alogliptin-metformin hcl</i>	31	<i>amlodipine besy-benazepril hcl</i> ..	41	ALENZIN.....	28
<i>alogliptin-pioglitazone</i>	31	<i>amlodipine besylate</i>	62	APPTRIM.....	92
ALOMIDE.....	133	<i>amlodipine besylate-valsartan</i> ...	41	APPTRIM-D.....	92
ALOPRIM.....	107	<i>amlodipine-atorvastatin</i>	64	<i>apraclonidine hcl</i>	133
ALOQUIN.....	75	<i>amlodipine-olmesartan</i>	41	<i>aprepitant</i>	36
ALORA.....	102	<i>amlodipine-valsartan-hctz</i>	41	<i>apri</i>	67
<i>alosetron hcl</i>	104	<i>ammonium lactate</i>	75	APRISO.....	105
ALOXI.....	36	AMMONUL.....	98	APTENSIO XR.....	6
ALPHAGAN P.....	133	<i>amnesteem</i>	75	APTIOM.....	24
ALPHANATE/VWF		<i>amoxapine</i>	28	APTIVUS.....	55
COMPLEX/HUMAN.....	108	<i>amoxicill-clarithro-lansopraz</i> ..	150	<i>aqueous vitamin d</i>	154
ALPHANINE SD.....	108	<i>amoxicillin</i>	140	ARALAST NP.....	146
<i>alprazolam</i>	20	<i>amoxicillin-pot clavulanate</i>	140	<i>aranelle</i>	67
<i>alprazolam er</i>	20	<i>amoxicillin-pot clavulanate er</i> ..	140	ARANESP (ALBUMIN	
ALPRAZOLAM INTENSOL	20	<i>amphetamine-dextroamphet er</i> ... 6		FREE).....	110, 111
<i>alprazolam xr</i>	20	<i>amphetamine-</i>		ARAVA.....	8
ALPROLIX.....	108	<i>dextroamphetamine</i>	6	ARCALYST.....	8
ALREX.....	133	<i>ampicillin</i>	140	ARCAPTA NEOHALER.....	22
ALTABAX.....	75	<i>ampicillin sodium</i>	140	<i>argyle sterile saline</i>	106
<i>altacaine</i>	133	<i>ampicillin-sulbactam sodium</i> ... 140		ARICEPT.....	142
ALTACE.....	41	AMPYRA.....	142	ARIMIDEX.....	47
<i>altafluor</i>	133	AMRIX.....	130	<i>aripiprazole</i>	53
<i>altafrin</i>	133	ANADROL-50.....	17	ARIXTRA.....	24

<i>armodafinil</i>	6	<i>atomoxetine hcl</i>	6	AZOPT.....	133
ARMONAIR RESPICLICK		<i>atorvastatin calcium</i>	39	AZOR.....	41
113.....	22	<i>atovaquone</i>	44	<i>aztreonam</i>	44
ARMONAIR RESPICLICK		<i>atovaquone-proguanil hcl</i>	46	AZULFIDINE.....	105
232.....	22	ATRALIN.....	75	AZULFIDINE EN-TABS....	105
ARMONAIR RESPICLICK		ATRIPLA.....	55	<i>azurette</i>	67
55.....	22	<i>atropine sulfate</i>	133	<i>b-6 folic acid</i>	111
ARMOUR THYROID.....	148	ATROVENT HFA.....	22	<i>bacitracin</i>	133
ARNUITY ELLIPTA.....	22	AUBAGIO.....	142	<i>bacitracin-polymyxin b</i>	133
AROMASIN.....	47	AUGMENTIN.....	140	<i>bacitra-neomycin-polymyxin-</i>	
ARTHROTEC.....	8	AUGMENTIN XR.....	141	<i>hc</i>	133
ARYMO ER.....	13	AUSTEDO.....	143	<i>baclofen</i>	130
ARZERRA.....	47	AUVI-Q.....	154	BACTOCILL IN	
ASACOL HD.....	105	AVAGE.....	75	DEXTROSE.....	141
<i>ascomp-codeine</i>	13	AVAILNEX.....	92	BACTRIM.....	44
ASMANEX 120 METERED		AVALIDE.....	41	BACTRIM DS.....	44
DOSES.....	22	AVANDIA.....	31	BACTROBAN.....	75
ASMANEX 14 METERED		AVAPRO.....	41	BACTROBAN NASAL.....	132
DOSES.....	22	<i>avar cleanser</i>	75	<i>balsalazide disodium</i>	105
ASMANEX 30 METERED		AVAR LS CLEANSER.....	75	<i>balziva</i>	67
DOSES.....	22	<i>avar-e emollient</i>	75	BANZEL.....	24
ASMANEX 60 METERED		<i>avar-e green</i>	75	BARACLUDGE.....	56
DOSES.....	22	AVAR-E LS.....	75	BASAGLAR KWIKPEN.....	31
ASMANEX HFA.....	22	AVC VAGINAL.....	153	BAXDELA.....	104
<i>aspir-81</i>	12	AVELOX.....	104	<i>bayer aspirin ec low dose</i>	12
<i>aspirin-dipyridamole er</i>	108	<i>aviane</i>	67	BAYER BREEZE 2 TEST.....	88
<i>aspir-low</i>	12	<i>avidoxy</i>	147	BAYER CONTOUR LINK	
ASSURE 3 TEST.....	87	AVIDOXY DK.....	147	MONITOR.....	119
ASSURE 4 TEST.....	87	<i>avita</i>	75	BAYER CONTOUR	
ASSURE II.....	87	AVO CREAM.....	75	MONITOR.....	119
ASSURE II CHECK.....	87	AVODART.....	106	BAYER CONTOUR NEXT	
ASSURE LANCETS.....	119	AVONEX.....	143	EZ.....	119
ASSURE PLATINUM.....	88	AVONEX PEN.....	143	BAYER CONTOUR NEXT	
ASSURE PRISM MULTI		AVONEX PREFILLED.....	143	LINK.....	119
TEST.....	88	<i>av-vite fb</i>	111	BAYER CONTOUR NEXT	
ASSURE PRO TEST.....	88	AXERT.....	124	MONITOR.....	119
ASTAGRAF XL.....	59	AXONA.....	92	BAYER CONTOUR NEXT	
ASTEPRO.....	132	AYGESTIN.....	142	TEST.....	88
ASTERO.....	75	AZACTAM.....	44	BAYER CONTOUR TEST...88	
AT LAST TEST.....	88	AZACTAM IN DEXTROSE.....	44	<i>bayer low dose</i>	12
ATACAND.....	41	AZASAN.....	59	BAYER MICROLET	
ATACAND HCT.....	41	AZASITE.....	133	LANCETS.....	119
AELVIA.....	98	<i>azathioprine</i>	59	BD AUTOSHIELD.....	119
<i>atenolol</i>	60	<i>azelastine hcl</i>	132, 133	BD INSULIN SYRINGE.....	119
<i>atenolol-chlorthalidone</i>	41	AZELEX.....	75	BD INSULIN SYRINGE	
ATGAM.....	59	AZILECT.....	51	HALF-UNIT.....	119
ATIVAN.....	20	<i>azithromycin</i>	118		

BD INSULIN SYRINGE MICROFINE.....	119	<i>betamethasone dipropionate</i>	76	BREVICON (28).....	67
BD INSULIN SYRINGE ULTRAFINE.....	119	<i>betamethasone dipropionate</i> <i>aug</i>	76	<i>briellyn</i>	68
BD LANCET ULTRAFINE 30G.....	120	<i>betamethasone valerate</i>	76	BRILINTA.....	96, 108
BD LANCET ULTRAFINE 33G.....	120	BETAPACE AF.....	60	<i>brimonidine tartrate</i>	134
BD MICROTAINER LANCETS.....	120	BETASERON.....	143	BRISDELLE.....	143
BD PEN.....	120	<i>betaxolol hcl</i>	60, 134	BRIVIACT.....	24
BD PEN MINI.....	120	<i>bethanechol chloride</i>	152	<i>bromfenac sodium (once-daily)</i>	134
BD PEN NEEDLE MINI U/F.....	120	BETHKIS.....	8	<i>bromocriptine mesylate</i>	51
BD PEN NEEDLE NANO U/F.....	120	BETIMOL.....	134	BROMSITE.....	134
BD PEN NEEDLE SHORT U/F.....	120	BETOPTIC-S.....	134	BROVANA.....	22
BD PEN NEEDLE ULTRAFINE.....	120	BEVESPI AEROSPHERE.....	22	<i>budesonide</i>	22, 72, 132
BD SAFETYGLIDE INSULIN SYRINGE.....	120	BEVYXXA.....	24	<i>bullseye mini safety lancets</i>	120
BEBULIN.....	108	<i>bexarotene</i>	47	BULLSEYE SAFETY LANCETS.....	120
BECONASE AQ.....	132	BEYAZ.....	67	<i>bumetanide</i>	97
BELBUCA.....	13	BIAFINE.....	76	BUNAVAIL.....	13
<i>belladonna alkaloids-opium</i>	150	BIAXIN.....	118	BUPHENYL.....	98
<i>belladonna-opium</i>	150	BIAXIN XL.....	118	<i>buprenorphine</i>	13
BELSOMRA.....	138	BIAXIN XL PAC.....	118	<i>buprenorphine hcl</i>	13
<i>benazepril hcl</i>	41	<i>bicalutamide</i>	47	<i>buprenorphine hcl-naloxone hcl</i>	13
<i>benazepril-hydrochlorothiazide</i>	41	BIDIL.....	64	<i>bupropion hcl</i>	28
BENICAR.....	41	BIFERARX.....	111	<i>bupropion hcl er (smoking det)</i>	143
BENICAR HCT.....	41	BILTRICIDE.....	19	<i>bupropion hcl er (sr)</i>	28
BENLYSTA.....	59	<i>bimatoprost</i>	134	<i>bupropion hcl er (xl)</i>	28
BENSAL HP.....	75	BINOSTO.....	98	<i>buspirone hcl</i>	20
BENTYL.....	150	<i>bio glo</i>	134	BUSULFEX.....	47
BENZAFLIN.....	75	BIO-D-MULSION FORTE.....	154	<i>butalbital-acetaminophen</i>	12
BENZAFLIN WITH PUMP.....	75	BIONECT.....	76	<i>butalbital-apap-caff-cod</i>	13
<i>benzonatate</i>	73	BIOSCANNER GLUCOSE TEST.....	88	<i>butalbital-apap-caffeine</i>	12
<i>benzoyl peroxide-erythromycin</i>	76	<i>bisoprolol fumarate</i>	60	<i>butalbital-asa-caff-codeine</i>	13
<i>benzphetamine hcl</i>	6	<i>bisoprolol-hydrochlorothiazide</i>	41	<i>butalbital-aspirin-caffeine</i>	12
<i>benztropine mesylate</i>	51	BIVIGAM.....	139	BUTISOL SODIUM.....	114
BEPREVE.....	133	BLEPH-10.....	134	<i>butorphanol tartrate</i>	13
BERINERT.....	108	BLEPHAMIDE.....	134	BUTRANS.....	13
BESIVANCE.....	134	BLEPHAMIDE S.O.P.....	134	BYDUREON.....	31
BETADINE OPHTHALMIC PREP.....	134	<i>blood glucose test</i>	88	BYETTA 10 MCG PEN.....	31
BETAGAN.....	134	BONIVA.....	98	BYETTA 5 MCG PEN.....	31
		BOOSTRIX.....	149	BYSTOLIC.....	61
		BOSULIF.....	47	BYVALSON.....	60
		BOTOX.....	132	<i>cabergoline</i>	98
		BOTOX COSMETIC.....	76	CABOMETYX.....	47
		BP CLEANSING WASH.....	76	CADUET.....	65
		<i>bp folinatal plus b</i>	128	CAFERGOT.....	124
		BP VIT 3.....	111	<i>caffeine citrate</i>	6
		BRAVELLE.....	98	CALAN SR.....	62
		BREO ELLIPTA.....	22		

CALCIDOL.....	154	CAROSPIR.....	97	CENTANY AT.....	76
CALCIFEROL.....	154	<i>carteolol hcl</i>	134	CENTRATEx.....	111
<i>calcipotriene</i>	76	<i>cartia xt</i>	62	<i>cephalexin</i>	66
<i>calcipotriene-betameth diprop</i> ...76		<i>carvedilol</i>	61	CERDELGA.....	111
<i>calcitonin (salmon)</i>	98	CASODEX.....	48	CEREByX.....	25
<i>calcitrene</i>	76	CATAPRES.....	41	CEREFOLIN.....	92
<i>calcitriol</i>	76, 98	CATAPRES-TTS-1.....	41	CEREFOLIN NAC.....	92
CAMBIA.....	124	CATAPRES-TTS-2.....	41	CEREZYME.....	111
<i>camila</i>	68	CATAPRES-TTS-3.....	42	CESAMET.....	36
CAMPTOSAR.....	48	CAYSTON.....	44	<i>cesia</i>	68
<i>camrese</i>	68	<i>caziant</i>	68	<i>cetirizine hcl</i>	38
<i>camrese lo</i>	68	CEDAX.....	65	<i>cetirizine-pseudoephedrine er</i> ...73	
CANASA.....	105	<i>cefaclor</i>	65	CETRAXAL.....	138
<i>candesartan cilexetil</i>	41	<i>cefaclor er</i>	65	CETROTIDE.....	98
<i>candesartan cilexetil-hctz</i>	41	<i>cefadroxil</i>	65	<i>cevimeline hcl</i>	127
<i>cantharidin</i>	76	<i>cefazolin sodium</i>	65	CHANTIX.....	143
<i>capacet</i>	12	<i>cefazolin sodium-dextrose</i>	65	CHANTIX CONTINUING	
CAPASTAT SULFATE.....	46	<i>cefazolin sodium-dextrose</i>	65	MONTH PAK.....	143
<i>capecitabine</i>	48	<i>cefdinir</i>	65	CHANTIX STARTING	
CAPEX.....	76	<i>cefditoren pivoxil</i>	66	MONTH PAK.....	143
CAPRELSA.....	48	<i>cefepime hcl</i>	66	<i>chateal</i>	68
<i>captopril</i>	41	<i>cefepime-dextrose</i>	66	CHEMET.....	35
<i>captopril-hydrochlorothiazide</i> ...41		<i>cefexime</i>	66	CHEMSTRIP K.....	88
CARAC.....	76	<i>cefotaxime sodium</i>	66	CHENODAL.....	105
CARAFATE.....	150	<i>cefotetan disodium</i>	66	<i>childrens aspirin</i>	12
CARBAGLU.....	98	<i>cefotetan disodium-dextrose</i>....66		<i>childrens loratadine</i>	38
<i>carbamazepine</i>	24	<i>cefoxitin sodium</i>	66	<i>chlordiazepoxide hcl</i>	20
<i>carbamazepine er</i>	24	<i>cefoxitin sodium-dextrose</i>	66	<i>chlordiazepoxide-amitriptyline</i> 143	
CARBATROL.....	24	<i>cefpodoxime proxetil</i>	66	<i>chlorhexidine gluconate</i>	127
<i>carbidopa</i>	51	<i>cefprozil</i>	66	<i>chloroquine phosphate</i>	46
<i>carbidopa-levodopa</i>	52	<i>ceftazidime</i>	66	<i>chlorothiazide</i>	97
<i>carbidopa-levodopa er</i>	51	<i>ceftazidime and dextrose</i>	66	<i>chlorothiazide sodium</i>	97
<i>carbinoxamine maleate</i>	37, 38	CEFTIN.....	66	<i>chlorpromazine hcl</i>	53
CARDENE IV.....	62	<i>ceftriaxone sodium</i>	66	<i>chlorpropamide</i>	31
CARDIOTEK RX.....	92	<i>ceftriaxone sodium in dextrose</i> .66		<i>chlorthalidone</i>	97
CARDIZEM CD.....	62	<i>ceftriaxone sodium-dextrose</i>....66		<i>chlorzoxazone</i>	130
CARDIZEM LA.....	62	<i>cefuroxime axetil</i>	66	CHOLBAM.....	62
CARDURA.....	41	<i>cefuroxime sodium</i>	66	<i>cholestyramine</i>	67
CARDURA XL.....	106	CELEBREX.....	9	<i>cholestyramine light</i>	39
CARESENS N GLUCOSE		<i>celecoxib</i>	9	<i>chorionic gonadotropin</i>	98
TEST.....	88	CELEXA.....	28	CIALIS.....	65
CARIMUNE NF.....	139	CELLCEPT.....	59	CICLODAN.....	76
<i>carisoprodol</i>	130	CELLCEPT		CICLODAN CREAM.....	76
<i>carisoprodol-aspirin</i>	130	INTRAVENOUS.....	59	CICLODAN SOLUTION.....	76
<i>carisoprodol-aspirin-codeine</i> ...130		CELONTIN.....	25	<i>ciclopirox</i>	76
CARNITOR.....	98	CEM-UREA.....	76	<i>ciclopirox olamine</i>	76
CARNITOR SF.....	98	CENFOL.....	111	<i>ciclopirox treatment</i>	77
		CENTANY.....	76		

<i>cidofovir</i>	56	CLEVER CHEK TEST.....	88	COLESTID.....	39
CIFEREX.....	111	CLEVER CHOICE AUTO- CODE TEST.....	88	COLESTID FLAVORED.....	39
<i>cilostazol</i>	108	CLEVER CHOICE MICRO SYSTEM.....	120	<i>colestipol hcl</i>	39
CILOXAN.....	134	CLEVER CHOICE MICRO TEST.....	88	<i>colistimethate sodium</i>	45
<i>cimetidine</i>	150	CLIMARA.....	102	<i>collagenase</i>	77
CIMZIA.....	105	CLIMARA PRO.....	102	<i>colocort</i>	18
CIMZIA PREFILLED.....	105	CLINDACIN ETZ.....	77	COLY-MYCIN M.....	45
CIMZIA STARTER KIT....	105	CLINDACIN PAC.....	77	COLY-MYCIN S.....	138
CINQAIR.....	115	CLINDAGEL.....	77	COMBIGAN.....	134
CINRYZE.....	108	<i>clindamycin hcl</i>	45	COMBIPATCH.....	103
CIPRO.....	104	<i>clindamycin palmitate hcl</i>	45	COMBIVENT RESPIMAT....	22
CIPRO HC.....	138	<i>clindamycin phos-benzoyl perox</i>	77	COMBIVIR.....	56
CIPRO XR.....	104	<i>clindamycin phosphate</i>	45, 77, 153	COMETRIQ (100 MG DAILY DOSE).....	48
CIPRODEX.....	138	<i>clindamycin tretinoin</i>	77	COMETRIQ (140 MG DAILY DOSE).....	48
<i>ciprofloxacin</i>	104	<i>clindamycin-phos-benzoyl perox</i>	77	COMETRIQ (60 MG DAILY DOSE).....	48
<i>ciprofloxacin hcl</i>	104, 134, 138	<i>clobetasol propionate</i>	77	<i>comfort assured lancets 28g</i>	120
<i>ciprofloxacin in d5w</i>	104	<i>clobetasol propionate e</i>	77	<i>comfort assured lancets 33g</i>	120
<i>ciprofloxacin-ciproflox hcl er</i> ..	104	<i>clobetasol propionate emulsion</i> ..	77	COMPLERA.....	56
<i>citalopram hydrobromide</i>	28	CLOBEX.....	77	<i>compro</i>	53
CITRANATAL 90 DHA.....	128	CLOBEX SPRAY.....	77	COMTAN.....	52
CITRANATAL ASSURE....	128	<i>clocortolone pivalate</i>	77	<i>co-natal fa</i>	128
CITRANATAL B-CALM....	128	<i>clodan</i>	77	CONCEPT DHA.....	128
CITRANATAL DHA.....	128	CLODERM.....	77	CONCEPT OB.....	128
CITRANATAL HARMONY	128	<i>clomiphene citrate</i>	99	CONCERTA.....	6
CITRANATAL RX.....	128	<i>clomipramine hcl</i>	28	CONDYLOX.....	77
<i>claravis</i>	77	<i>clonazepam</i>	25	<i>constulose</i>	116
CLARINEX.....	38	<i>clonidine hcl</i>	42	CONZIP.....	13
CLARINEX-D 12 HOUR.....	73	<i>clonidine hcl er</i>	6	COOL BLOOD GLUCOSE TEST STRIPS.....	88
<i>clarithromycin</i>	118	<i>clopidogrel bisulfate</i>	108	COPAXONE.....	143
<i>clarithromycin er</i>	118	<i>clorazepate dipotassium</i>	20	COPEGUS.....	56
CLARITIN.....	38	CLORPRES.....	42	CORDRAN.....	77
CLARITIN EYE.....	134	<i>clotrimazole</i>	127	COREG.....	61
CLARITIN REDITABS.....	38	<i>clotrimazole-betamethasone</i>	77	COREG CR.....	61
CLARITIN-D 12 HOUR.....	73	<i>clozapine</i>	53	CORGARD.....	61
CLARITIN-D 24 HOUR.....	73	CLOZARIL.....	53	CORIFACT.....	108
<i>clearlax</i>	116	COAGADEX.....	108	CORLANOR.....	147
CLEOCIN.....	44, 153	COAGUCHEK LANCETS..	120	CORMAX SCALP APPLICATION.....	77
CLEOCIN IN D5W.....	44	<i>coal tar</i>	77	CORTEF.....	72
CLEOCIN PHOSPHATE.....	44, 45	COARTEM.....	46	CORTENEMA.....	18
CLEOCIN-T.....	77	<i>codeine sulfate</i>	13	CORTIFOAM.....	19
CLEVER CHEK AUTO- CODE.....	120	COLAZAL.....	105	CORTISPORIN.....	77
CLEVER CHEK AUTO- CODE TEST.....	88	<i>colchicine</i>	107	<i>corvita</i>	128
CLEVER CHEK AUTO- CODE VOICE.....	88	<i>colchicine-probenecid</i>	107		
		COLCRYS.....	107		

CORVITA 150.....	111	CYSTADANE.....	99	DEPAKENE.....	25
CORVITE.....	128	CYSTAGON.....	106	DEPAKOTE.....	25
CORVITE 150.....	111	CYSTARAN.....	134	DEPAKOTE ER.....	25
CORVITE FE.....	111	CYTOGAM.....	139	DEPAKOTE SPRINKLES....	25
CORZIDE.....	42	CYTOMEL.....	148	DEPEN TITRATABS.....	59
COSENTYX.....	77	CYTOVENE.....	56	DEPLIN 15.....	92
COSENTYX		<i>cytra-2</i>	106	DEPLIN 7.5.....	92
SENSOREADY PEN.....	78	<i>d 10000</i>	154	DEPO-ESTRADIOL.....	103
COTELLIC.....	48	<i>d 5000</i>	154	DEPO-MEDROL.....	72
COTEMPLA XR-ODT.....	6	D.H.E. 45.....	124	DEPO-PROVERA.....	48, 68
COUMADIN.....	24	<i>d-2000 maximum strength</i>	154	DEPO-TESTOSTERONE.....	18
COZAAR.....	42	<i>d2000 ultra strength</i>	154	DERMA-SMOOTHIE/FS	
CREON.....	96	D3 DOTS.....	154	BODY.....	78
CRESEMBA.....	37	<i>d3 maximum strength</i>	154	DERMASORB TA.....	78
CRESTOR.....	39	<i>d3 super strength</i>	154	DERMOTIC.....	138
CRINONE.....	153	<i>d3-1000</i>	155	DESCOVY.....	56
CRIXIVAN.....	56	<i>d-3-5</i>	155	DESFERAL.....	35
<i>cromolyn sodium</i>	22, 105, 134	<i>d-5000</i>	155	<i>desipramine hcl</i>	28
<i>cryselle-28</i>	68	DAKLINZA.....	56	<i>desloratadine</i>	38
CUPRIMINE.....	59	DALIRESP.....	22	<i>desmopressin ace spray refrig</i> ...	99
CUTIVATE.....	78	<i>danazol</i>	18	<i>desmopressin acetate</i>	99
CUVITRU.....	139	<i>dantrolene sodium</i>	130	DESOGEN.....	68
CUVPOSA.....	150	<i>dapsone</i>	45, 78	<i>desogestrel-ethinyl estradiol</i>	68
CVS ADVANCED		DARAPRIM.....	46	DESONATE.....	78
GLUCOSE TEST.....	88	<i>darifenacin hydrobromide er</i> ...	153	<i>desonide</i>	78
<i>cvs allergy eye drops</i>	134	<i>dasetta 1/35</i>	68	DESOWEN.....	78
<i>cvs d3</i>	154	<i>dasetta 7/7/7</i>	68	<i>desoximetasone</i>	78
<i>cvs lansoprazole</i>	150	DAXBIA.....	66	DESOXYN.....	6
<i>cvs nicotine</i>	143	DAYPRO.....	9	<i>desvenlafaxine er</i>	28
<i>cvs nicotine polacrilex</i>	143	<i>daysee</i>	68	<i>desvenlafaxine succinate er</i>	28
<i>cvs nts step 1</i>	143	DAYTRANA.....	6	DETROL.....	153
CVS PURELAX.....	116	DDAVP.....	99	DETROL LA.....	153
<i>cyanocobalamin</i>	111	DDAVP RHINAL TUBE.....	99	<i>dexamethasone</i>	72
<i>cyclafem 1/35</i>	68	DDROPS.....	155	DEXAMETHASONE	
<i>cyclafem 7/7/7</i>	68	DEBACTEROL.....	127	INTENSOL.....	72
CYCLESSA.....	68	DEBLITANE.....	68	<i>dexamethasone sod phosphate</i>	
<i>cyclobenzaprine hcl</i>	130	DECARA.....	155	<i>pf</i>	72
CYCLOGYL.....	134	<i>deferoxamine mesylate</i>	35	<i>dexamethasone sodium</i>	
CYCLOMYDRIL.....	134	DELESTROGEN.....	103	<i>phosphate</i>	72, 134
<i>cyclopentolate hcl</i>	134	<i>delta d3</i>	155	DEXEDRINE.....	6
<i>cyclophosphamide</i>	48	DELZICOL.....	105	DEXILANT.....	150
<i>cycloserine</i>	46	DEMADEX.....	97	<i>dexmethylphenidate hcl</i>	6
CYCLOSET.....	31	<i>demeclocycline hcl</i>	147	<i>dexmethylphenidate hcl er</i>	6
<i>cyclosporine</i>	59	DEMEROL.....	13	<i>dextroamphetamine sulfate</i>	6
<i>cyclosporine modified</i>	59	DEMSEER.....	42	<i>dextroamphetamine sulfate er</i>	6
CYMBALTA.....	28	DENAVIR.....	78	DIALYVITE 5000.....	128
<i>cyproheptadine hcl</i>	38	<i>denta 5000 plus</i>	127	DIALYVITE SUPREME D.	128

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

DIALYVITE VITAMIN D 5000.....	155	<i>dipyridamole</i>	108	<i>duramorph</i>	14
DIALYVITE VITAMIN D3 MAX.....	155	<i>disopyramide phosphate</i>	21	DUREZOL.....	134
DIAMOX SEQUELS.....	97	<i>disulfiram</i>	143	DURLAZA.....	108
DIASTAT ACUDIAL.....	25	DITROPAN XL.....	153	DUROLANE.....	78
DIASTAT PEDIATRIC.....	25	DIURIL.....	97	<i>dutasteride</i>	106
<i>diatrue plus test</i>	88	<i>divalproex sodium</i>	25	<i>dutasteride-tamsulosin hcl</i>	106
<i>diazepam</i>	20, 25	<i>divalproex sodium er</i>	25	DUTOPROL.....	42
<i>diazepam intensol</i>	20	DIVISTA.....	111	DUZALLO.....	107
DIBENZYLINE.....	42	<i>dofetilide</i>	21	D-VI-SOL.....	155
DICLEGIS.....	36	DOLOPHINE.....	13	DYANAVEL XR.....	6
<i>diclofenac potassium</i>	9	<i>donepezil hcl</i>	143	DYAZIDE.....	97
<i>diclofenac sodium</i>	9, 78, 134	DONNATAL.....	150	DYMISTA.....	132
<i>diclofenac sodium er</i>	9	DORAL.....	114	DYRENIUM.....	97
<i>diclofenac-misoprostol</i>	9	DORYX.....	147	DYSPORT.....	133
DICLOFEX DC.....	78	DORYX MPC.....	147	E.E.S. 400.....	118
<i>dicloxacillin sodium</i>	141	<i>dorzolamide hcl</i>	134	E.E.S. GRANULES.....	118
<i>dicyclomine hcl</i>	150	<i>dorzolamide hcl-timolol mal</i>	134	EASY COMFORT	
<i>didanosine</i>	56	DOVONEX.....	78	INSULIN SYRINGE.....	120
<i>diethylpropion hcl</i>	6	<i>doxazosin mesylate</i>	42	<i>easy plus blood glucose test</i>	88
<i>diethylpropion hcl er</i>	6	<i>doxepin hcl</i>	28, 78	<i>easy plus ii glucose test</i>	88
DIFFERIN.....	78	<i>doxercalciferol</i>	99	EASY STEP TEST.....	88
DIFICID.....	118	<i>doxy 100</i>	147	<i>easy talk blood glucose test</i>	88
<i>diflorasone diacetate</i>	78	<i>doxycycline</i>	78	EASY TOUCH	
DIFLUCAN.....	37	<i>doxycycline hyclate</i>	147	HEALTHPRO TEST.....	88
<i>diflunisal</i>	12	<i>doxycycline monohydrate</i>	147, 148	EASY TOUCH INSULIN	
<i>digox</i>	64	DRISDOL.....	155	SYRINGE.....	120
<i>digoxin</i>	64	DRITHO-CREME HP.....	78	EASY TOUCH LANCETS	
<i>dihydroergotamine mesylate</i>	124	<i>dronabinol</i>	36	21G.....	120
DILANTIN.....	25	<i>drospirenone-ethinyl estradiol</i>	68	EASY TOUCH LANCETS	
DILANTIN INFATABS.....	25	DROXIA.....	111	23G.....	120
DILATRATE-SR.....	19	DRUG MART UNIFINE		EASY TOUCH LANCETS	
DILAUDID.....	13	PENTIPS.....	120	26G.....	120
<i>diltiazem cd</i>	62	DUAC.....	78	EASY TOUCH LANCETS	
<i>diltiazem hcl</i>	63	DUAVEE.....	104	26G/TWIST.....	120
<i>diltiazem hcl er</i>	63	DUETACT.....	31	EASY TOUCH LANCETS	
<i>diltiazem hcl er beads</i>	63	DUEXIS.....	9	28G.....	120
<i>diltiazem hcl er coated beads</i>	63	<i>dulcolax balance</i>	116	EASY TOUCH LANCETS	
<i>dilt-xr</i>	63	DULERA.....	22	28G/TWIST.....	120
DIOVAN.....	42	<i>duloxetine hcl</i>	28	EASY TOUCH LANCETS	
DIOVAN HCT.....	42	DUO-CARE TEST.....	88	30G.....	120
DIPENTUM.....	105	DUPIXENT.....	60	EASY TOUCH LANCETS	
<i>diphenhydramine hcl</i>	38	<i>durachol</i>	111	30G/TWIST.....	120
<i>diphenoxylate-atropine</i>	35	DURAGESIC-100.....	13	EASY TOUCH LANCETS	
DIPROLENE.....	78	DURAGESIC-12.....	13	32G.....	120
DIPROLENE AF.....	78	DURAGESIC-25.....	13	EASY TOUCH LANCETS	
		DURAGESIC-50.....	13	32G/TWIST.....	120
		DURAGESIC-75.....	13		

EASY TOUCH LANCETS 33G/TWIST.....	120	ELESTAT.....	135	ENVARUSUS XR.....	59
EASY TOUCH LANCING DEVICE.....	120	ELESTRIN.....	103	EPANED.....	42
EASY TOUCH SAFETY LANCETS 21G.....	121	<i>eletriptan hydrobromide</i>	124	EPCLUSA.....	114
EASY TOUCH SAFETY LANCETS 23G.....	121	ELIDEL.....	78	EPICERAM.....	79
EASY TOUCH SAFETY LANCETS 26G.....	121	ELIGARD.....	48	EPIDUO.....	79
EASY TOUCH SAFETY LANCETS 28G.....	121	<i>elinet</i>	68	EPIDUO FORTE.....	79
EASY TOUCH TEST.....	88	ELIQUIS.....	24	EPIFOAM.....	79
<i>easy trak blood glucose test</i>	88	ELIXOPHYLLIN.....	22	<i>epinastine hcl</i>	135
EASY TWIST & CAP LANCETS.....	121	ELLA.....	68	<i>epinephrine</i>	154
EASYGLUCO.....	88	ELMIRON.....	107	EPIPEN 2-PAK.....	154
EASYGLUCO PLUS.....	88	ELOCON.....	79	EPIPEN JR 2-PAK.....	154
EASYMAX 15 TEST.....	88	ELOCTATE.....	108	EPISNAP.....	154
EASYMAX TEST.....	88	EMADINE.....	135	<i>epitol</i>	25
<i>easyplus blood glucose test</i>	88	EMBEDA.....	14	EPIVIR.....	56
EASYPRO BLOOD GLUCOSE TEST.....	88	EMBRACE BLOOD GLUCOSE TEST.....	89	EPIVIR HBV.....	56
EASYPRO PLUS.....	88	EMBRACE EVO BLOOD GLUCOSE TEST.....	89	<i>eplerenone</i>	42
<i>ec-81 aspirin</i>	12	EMBRACE PRO GLUCOSE TEST.....	89	EPOGEN.....	111
EC-NAPROSYN.....	9	EMCYT.....	48	<i>epoprostenol sodium</i>	65
<i>econazole nitrate</i>	78	EMEND.....	36	<i>eprosartan mesylate</i>	42
ECOTRIN.....	12	EMFLAZA.....	72	EPZICOM.....	56
<i>ecotrin low strength</i>	12	<i>emoquette</i>	68	EQ CLEARLAX.....	116
ECOZA.....	78	EMSAM.....	28	<i>eq itchy eye drops</i>	135
<i>ecpirin</i>	12	EMTRIVA.....	56	<i>eq lansoprazole</i>	150
EDARBI.....	42	EMVERM.....	19	<i>eq nicotine</i>	143
EDARBYCLOR.....	42	ENABLEX.....	153	EQL CLEARLAX.....	116
EDECRIIN.....	97	<i>enalapril maleate</i>	42	<i>eq1 vitamin d3</i>	155
EDLUAR.....	114	<i>enalapril-hydrochlorothiazide</i>	42	EQUETRO.....	53
EDURANT.....	56	ENBREL.....	9	<i>ergocal</i>	155
EFFER-K.....	125	ENBREL MINI.....	9	<i>ergocalciferol</i>	155
<i>effe-r-k</i>	125	ENBREL SURECLICK.....	9	<i>ergoloid mesylates</i>	143
EFFEXOR XR.....	28	<i>endocet</i>	14	ERGOMAR.....	124
EFFIENT.....	108	ENDOCET.....	14	ERIVEDGE.....	48
EFUDEX.....	78	ENDOMETRIN.....	153	<i>errin</i>	68
EGRIFTA.....	99	ENLYTE.....	92	ERTACZO.....	79
ELAPRASE.....	99	<i>enoxaparin sodium</i>	24	<i>ery</i>	79
ELDEPRYL.....	52	<i>enpresse-28</i>	68	ERYGEL.....	79
ELELYSO.....	111	ENSTILAR.....	79	ERYPED 200.....	118
<i>element compact test</i>	89	<i>entacapone</i>	52	ERYPED 400.....	118
ELEMENT TEST.....	89	<i>entecavir</i>	56	ERY-TAB.....	118
		ENTERAGAM.....	92	ERYTHROCIN LACTOBIONATE.....	118
		ENTOCORT EC.....	72	ERYTHROCIN STEARATE	118
		ENTRESTO.....	132	<i>erythromycin</i>	79
		ENTYVIO.....	115	<i>erythromycin base</i>	118
		<i>enulose</i>	105	<i>erythromycin ethylsuccinate</i>	118
				ESBRIET.....	146

<i>escitalopram oxalate</i>	28	EXJADE.....	35	<i>fentanyl citrate</i>	14
<i>esgic</i>	12	EXODERM.....	79	FENTORA.....	14
ESGIC.....	12	EXTAVIA.....	143	FERIVA.....	111
<i>esomeprazole magnesium</i>	150	EXTINA.....	79	FERIVA 21/7.....	111
<i>esomeprazole strontium</i>	150	<i>eye itch relief</i>	135	<i>ferocon</i>	111
<i>estazolam</i>	114	EZ SMART BLOOD		<i>ferotinsic</i>	111
ESTRACE.....	103, 153	GLUCOSE TEST.....	89	FERRAPLUS 90.....	111
<i>estradiol</i>	103	EZ SMART PLUS		FERRIPROX.....	35
<i>estradiol valerate</i>	103	GLUCOSE TEST.....	89	FERRLECIT.....	111
<i>estradiol-norethindrone acet...</i>	103	<i>ezetimibe</i>	39	<i>ferrocite plus</i>	111
ESTRING.....	153	<i>ezetimibe-simvastatin</i>	39	FERRO-PLEX	
ESTROGEL.....	103	<i>fabb</i>	111	HEMATINIC.....	112
<i>estropipate</i>	103	FABIOR.....	79	FERROTRIN.....	112
ESTROSTEP FE.....	68	FABRAZYME.....	99	FETZIMA.....	28
<i>eszopiclone</i>	114	FACTIVE.....	104	FETZIMA TITRATION.....	28
<i>ethacrynic acid</i>	97	FALESSA.....	68	FEXMID.....	130
<i>ethambutol hcl</i>	46	<i>falmina</i>	68	<i>fexofenadine hcl</i>	38
<i>ethosuximide</i>	25	<i>famciclovir</i>	56	<i>fexofenadine hcl childrens</i>	38
ETHYOL.....	48	<i>famotidine</i>	150	<i>fexofenadine-pseudoephed er...</i>	73
<i>etidronate disodium</i>	99	<i>famotidine premixed</i>	150	FIASP.....	31
<i>etodolac</i>	9	FAMVIR.....	56	FIASP FLEXTOUCH.....	31
<i>etodolac er</i>	9	FANAPT.....	53	FIBRICOR.....	39
<i>etoposide</i>	48	FANAPT TITRATION		FIFTY50 GLUCOSE TEST	
EUCRISA.....	141	PACK.....	53	2.0.....	89
EUFLEXXA.....	130	FARESTON.....	48	FINACEA.....	79
EURAX.....	79	FARXIGA.....	31	<i>finasteride</i>	79, 107
EVAMIST.....	103	FARYDAK.....	48	FINGERSTIX LANCETS...	121
EVEKEO.....	6	FASLODEX.....	48	FIORICET/CODEINE.....	14
EVENCARE + BLOOD		<i>fa-vitamin b-6-vitamin b-12</i>	111	FIORINAL.....	12
GLUCOSE TEST.....	89	FAYOSIM.....	68	FIORINAL/CODEINE #3.....	14
EVENCARE BLOOD		FAZACLO.....	53	FIRAZYR.....	108
GLUCOSE TEST.....	89	FC2 FEMALE CONDOM...	121	FIRMAGON.....	48
EVENCARE G2 TEST.....	89	FEIBA.....	108	FIRST-	
EVENCARE G3 TEST.....	89	<i>felbamate</i>	25	HYDROCORTISONE.....	79
EVENCARE MINI		FELBATOL.....	25	FIRST-MOUTHWASH	
GLUCOSE TEST.....	89	FELDENE.....	9	BLM.....	127
EVISTA.....	99	<i>felodipine er</i>	63	FLAGYL.....	45
EVOLUTION AUTOCODE..	89	FEM PH.....	153	FLAREX.....	135
EVOTAZ.....	56	FEMARA.....	48	<i>flavoxate hcl</i>	153
EVOXAC.....	127	FEMHRT LOW DOSE.....	103	FLEBOGAMMA DIF.....	139
EVZIO.....	35	FEMRING.....	153	<i>flecainide acetate</i>	21
EXALGO.....	14	<i>fenofibrate</i>	39	FLECTOR.....	79
EXELDERM.....	79	<i>fenofibrate micronized</i>	39	FLOLAN.....	65
EXELON.....	143	<i>fenofibric acid</i>	39	<i>flolipid</i>	39
<i>exemestane</i>	48	FENOGLIDE.....	39	FLOMAX.....	107
EXFORGE.....	42	<i>fenoprofen calcium</i>	9	FLONASE.....	132
EXFORGE HCT.....	42	<i>fentanyl</i>	14		

FLONASE ALLERGY RELIEF.....	132	<i>folbee</i>	112	FORFIVO XL.....	29
FLOVENT DISKUS.....	22	<i>folbic</i>	93	<i>formadon</i>	55
FLOVENT HFA.....	22	FOLBIC RF.....	93	<i>formaldehyde</i>	55
FLOXIN OTIC.....	138	FOLGARD RX.....	112	FORTAMET.....	31
<i>flucaine</i>	135	<i>folic acid</i>	112	FORTEO.....	99
<i>fluconazole</i>	37	FOLIVANE-F.....	112	FORTESTA.....	18
<i>fluconazole in sodium chloride</i> ..	37	FOLIVANE-PLUS.....	112	FORTISCARE TEST.....	89
<i>flucytosine</i>	37	FOLLISTIM AQ.....	99	FOSAMAX.....	99
<i>fludrocortisone acetate</i>	72	<i>folplex 2.2</i>	112	FOSAMAX PLUS D.....	99
FLUMADINE.....	56	FOLTANX.....	93	<i>fosamprenavir calcium</i>	56
<i>flunisolide</i>	132	FOLTANX RF.....	93	<i>fosinopril sodium</i>	42
<i>fluocinolone acetonide</i>	79, 138	<i>foltrin</i>	112	<i>fosinopril sodium-hetz</i>	42
<i>fluocinolone acetonide body</i>	79	FOLTIX.....	93	<i>fosphenytoin sodium</i>	25
<i>fluocinonide</i>	79	<i>fondaparinux sodium</i>	24	FOSRENOL.....	105
FLUORABON.....	125	FORA D10 2-IN-1		FOSTEUM.....	93
<i>fluor-a-day</i>	125	MONITOR.....	121	FOSTEUM PLUS.....	93
FLUOR-A-DAY.....	125	FORA D15G 2-IN-1		FOVEX.....	93
<i>fluorescein-benoxinate</i>	135	MONITOR.....	121	FRAGMIN.....	24
<i>fluor-i-strips a.t.</i>	135	FORA D15G BLOOD		FREESTYLE FLASH	
<i>fluoritab</i>	125	GLUCOSE TEST.....	89	SYSTEM.....	121
<i>fluorometholone</i>	135	FORA D20 2-IN-1		FREESTYLE FREEDOM	
FLUOROPLEX.....	79	MONITOR.....	121	LITE.....	121
<i>fluorouracil</i>	48, 79	FORA D20 BLOOD		FREESTYLE INSULINX	
<i>fluoxetine hcl</i>	29	GLUCOSE TEST.....	89	SYSTEM.....	121
<i>fluoxetine hcl (pmdd)</i>	143	FORA D40/G31 BLOOD		FREESTYLE INSULINX	
<i>fluphenazine decanoate</i>	53	GLUCOSE.....	89	TEST.....	89
<i>fluphenazine hcl</i>	53	FORA G20 BLOOD		FREESTYLE LANCETS.....	121
FLURA-DROPS.....	125	GLUCOSE TEST.....	89	FREESTYLE LITE TEST.....	89
<i>flurandrenolide</i>	79	FORA G30A BLOOD		FREESTYLE PRECISION	
FLURA-SAFE.....	135	GLUCOSE TEST.....	89	INS SYR.....	121
<i>flurazepam hcl</i>	114	FORA GD20 TEST.....	89	FREESTYLE PRECISION	
<i>flurbiprofen</i>	9	FORA GD50 BLOOD		NEO TEST.....	89
<i>flurbiprofen sodium</i>	135	GLUCOSE TEST.....	89	FREESTYLE SYSTEM.....	121
<i>flurox</i>	135	FORA TN'G/TN'G VOICE...	89	FREESTYLE TEST.....	89
<i>flutamide</i>	48	FORA V10 BLOOD		FREESTYLE UNISTICK II	
<i>fluticasone propionate</i> . 79, 80, 132		GLUCOSE TEST.....	89	LANCETS.....	121
<i>fluticasone-salmeterol</i>	22	FORA V12 BLOOD		FROVA.....	124
<i>fluvastatin sodium</i>	40	GLUCOSE TEST.....	89	<i>frovatriptan succinate</i>	124
<i>fluvastatin sodium er</i>	40	FORA V20 BLOOD		FUL-GLO.....	135
<i>fluvoxamine maleate</i>	29	GLUCOSE TEST.....	89	<i>ful-glo</i>	135
<i>fluvoxamine maleate er</i>	29	FORA V30A BLOOD		FURADANTIN.....	152
FML.....	135	GLUCOSE TEST.....	89	<i>furosemide</i>	97
FML FORTE.....	135	FORACARE GD40 TEST....	89	FUSION PLUS.....	112
FML LIQUIFILM.....	135	FORACARE PREMIUM		FUZEON.....	56
FOCALIN.....	6	V10 TEST.....	89	FYAVOLV.....	103
FOCALIN XR.....	6	FORACARE TEST N GO		FYCOMPA.....	25
		TEST.....	89	GABADONE.....	93

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

<i>gabapentin</i>	25	GENVOYA.....	56	<i>glyburide</i>	32
GABITRIL.....	25	GEODON.....	53	<i>glyburide micronized</i>	32
GABLOFEN.....	131	<i>geri-hydrolac 12</i>	80	<i>glyburide-metformin</i>	32
<i>galantamine hydrobromide</i>	143, 144	<i>ght test</i>	90	<i>glycolax</i>	116
<i>galantamine hydrobromide er</i> ..	143	GIALAX.....	116	<i>glycopyrrolate</i>	150
GALZIN.....	125	<i>gianvi</i>	68	GLYNASE.....	32
GAMASTAN S/D.....	139	GIAZO.....	105	GLYSET.....	32
GAMMAGARD.....	139	<i>gildagia</i>	68	GLYXAMBI.....	147
GAMMAGARD S/D LESS		<i>gildess fe 1.5/30</i>	68	GNP CLEARLAX.....	116
IGA.....	139	<i>gildess fe 1/20</i>	69	GNP CLICKFINE PEN	
GAMMAKED.....	139	GILENYA.....	144	NEEDLES.....	121
GAMMAPLEX.....	139	GILOTRIF.....	48	<i>gnp folic acid</i>	112
GAMUNEX-C.....	139	GLASSIA.....	146	GNP INSULIN SYRINGE..	121
<i>ganciclovir sodium</i>	56	<i>glatopa</i>	144	<i>gnp lansoprazole</i>	150
<i>ganirelix acetate</i>	99	GLEEVEC.....	48	GNP ULTRA COM	
GASTROCROM.....	105	GLEOSTINE.....	48	INSULIN SYRINGE.....	121
GASTROGRAFIN.....	89	<i>glimepiride</i>	31	<i>gnp vitamin d</i>	155
<i>gatifloxacin</i>	135	<i>glipizide</i>	31	<i>gnp vitamin d maximum</i> <i>strength</i>	155
GATTEX.....	105	<i>glipizide er</i>	31	<i>gnp vitamin d super strength</i> ...	155
<i>gavilax</i>	116	<i>glipizide xl</i>	31	GOCOVRI.....	52
<i>gavilyte-c</i>	116	<i>glipizide-metformin hcl</i>	31	GOLYTELY.....	116
<i>gavilyte-g</i>	116	GLOBAL INJECT EASE		GONAL-F.....	100
GAVILYTE-H.....	116	INSULIN SYR.....	121	GONAL-F RFF.....	100
<i>gavilyte-n with flavor pack</i>	116	GLUCAGEN		GONAL-F RFF REDIJECT	100
<i>ge100 blood glucose test</i>	90	DIAGNOSTIC.....	90	GONITRO.....	19
GEBAUERS PAIN EASE.....	80	GLUCAGEN HYPOKIT.....	31	GRALISE.....	144
GEBAUERS SPRAY AND		GLUCAGON		GRALISE STARTER.....	144
STRETCH.....	80	EMERGENCY.....	32	<i>granisetron hcl</i>	36
GELNIQUE.....	153	GLUCO PERFECT 3 TEST..	90	GRANIX.....	112
GEL-ONE.....	131	GLUCOCARD 01 SENSOR		<i>griseofulvin microsize</i>	37
GELSYN-3.....	131	PLUS.....	90	<i>griseofulvin ultramicrosize</i>	37
<i>gemfibrozil</i>	40	GLUCOCARD		GRIS-PEG.....	37
GENADUR.....	80	EXPRESSION TEST.....	90	<i>guaifenesin ac</i>	73
GENERESS FE.....	68	GLUCOCARD SHINE		<i>guanfacine hcl</i>	42
<i>generlac</i>	105	TEST.....	90	<i>guanfacine hcl er</i>	6
<i>gengraf</i>	59	GLUCOCARD VITAL		<i>guanidine hcl</i>	46
GENGRAF.....	59	TEST.....	90	GYNAZOLE-1.....	153
GENOTROPIN.....	99	GLUCOCARD X-SENSOR..	90	HAEGARDA.....	109
GENOTROPIN		GLUCOCOM TEST.....	90	HALAC.....	80
MINIQUICK.....	99	GLUCONAVII BLOOD		HALCION.....	114
GENSTRIP 50.....	90	GLUCOSE TEST.....	90	HALDOL.....	53
<i>gentak</i>	135	GLUCOPHAGE.....	32	HALDOL DECANOATE.....	53
<i>gentamicin in saline</i>	8	GLUCOPHAGE XR.....	32	<i>halobetasol propionate</i>	80
<i>gentamicin sulfate</i>	8, 80, 135	GLUCOTROL.....	32	HALOG.....	80
<i>gentlelax</i>	116	GLUCOTROL XL.....	32	<i>haloperidol</i>	54
GENVISC 850.....	131	GLUCOVANCE.....	32	<i>haloperidol decanoate</i>	53
		GLUMETZA.....	32		

<i>haloperidol lactate</i>	54	HUMATROPE.....	100	HYPERRAB S/D.....	139
HALOTIN.....	80	HUMIRA.....	9	HYPERRHO S/D.....	139
HARVONI.....	114	HUMIRA PEDIATRIC		HYPERTENSA.....	93
HEALTHY ACCENTS		CROHNS START.....	9	HYPERTET S/D.....	139
UNIFINE PENTIP.....	121	HUMIRA PEN.....	9	HYQVIA.....	138
<i>healthylax</i>	116	HUMIRA PEN-CROHNS		HYSINGLA ER.....	14
<i>heartburn treatment 24 hour</i> ...	150	STARTER.....	9	HYZAAR.....	42
<i>heather</i>	69	HUMIRA PEN-PSORIASIS		<i>ibandronate sodium</i>	100
HECTOROL.....	100	STARTER.....	9	IBRANCE.....	74
HELIXATE FS.....	109	HUMULIN 70/30.....	32	IBUDONE.....	14
HEMANGEOL.....	61	HUMULIN 70/30		<i>ibudone</i>	14
<i>hematinic plus vit/minerals</i>	112	KWIKPEN.....	32	<i>ibuprofen</i>	10
<i>hematinic/folic acid</i>	112	HUMULIN N.....	32	IBUPROFEN COMFORT	
HEMATOGEN FA.....	112	HUMULIN N KWIKPEN.....	33	PAC.....	10
<i>hematogen forte</i>	112	HUMULIN R.....	33	IC 400.....	10
HEMENATAL OB.....	128	HUMULIN R U-500		IC 800.....	10
HEMETAB.....	112	(CONCENTRATED).....	33	ICLUSIG.....	49
HEMOCYTE PLUS.....	112	HUMULIN R U-500		IDELVION.....	109
<i>hemocyte-f</i>	112	KWIKPEN.....	33	IDHIFA.....	115
<i>hemocyte-plus</i>	112	HYALGAN.....	131	ILARIS.....	10
HEMOFIL M.....	109	HYCAMTIN.....	48	ILARIS (150MG	
<i>heparin sodium (porcine)</i>	24	HYCET.....	14	DELIVERED).....	10
<i>heparin sodium (porcine) pf</i>	24	HYCOFENIX.....	73	ILEVRO.....	135
HEPSERA.....	56	<i>hydralazine hcl</i>	42	<i>imatinib mesylate</i>	49
HETLIOZ.....	114	HYDREA.....	48	IMBRUVICA.....	49
HEXALEN.....	48	<i>hydrochlorothiazide</i>	97	<i>imipramine pamoate</i>	29
HIPREX.....	152	<i>hydrocodone-acetaminophen</i>	14	<i>imiquimod</i>	80
HIZENTRA.....	139	<i>hydrocodone-ibuprofen</i>	14	IMITREX.....	124
HM CLEARLAX.....	116	<i>hydrocortisone</i>	19, 72, 80	IMITREX STATDOSE	
<i>hm fexofenadine hcl</i>	38	<i>hydrocortisone ace-pramoxine</i>		REFILL.....	124
<i>hm lansoprazole</i>	150	.....	19, 80	IMITREX STATDOSE	
<i>hm nicotine</i>	144	<i>hydrocortisone butyr lipo base</i> ..	80	SYSTEM.....	124
<i>hm nicotine polacrilex</i>	144	<i>hydrocortisone butyrate</i>	80	IMOGAM RABIES-HT.....	139
<i>hm vitamin d3</i>	155	<i>hydrocortisone valerate</i>	80	IMPAVIDO.....	45
<i>homatropaire</i>	135	<i>hydrocortisone-acetic acid</i>	138	IMURAN.....	59
<i>homatropine hbr</i>	135	<i>hydromet</i>	73	IN TOUCH BLOOD	
HORIZANT.....	144	<i>hydromorphone hcl</i>	14	GLUCOSE TEST.....	90
HP ACTHAR.....	100	<i>hydromorphone hcl er</i>	14	INCRELEX.....	100
HUMALOG.....	32	<i>hydromorphone hcl pf</i>	14	<i>indapamide</i>	97
HUMALOG KWIKPEN.....	32	<i>hydroxychloroquine sulfate</i>	46	INDERAL LA.....	61
HUMALOG MIX 50/50.....	32	<i>hydroxyurea</i>	48	INDERAL XL.....	61
HUMALOG MIX 50/50		<i>hydroxyzine hcl</i>	20	INDOCIN.....	10
KWIKPEN.....	32	<i>hydroxyzine pamoate</i>	20	<i>indomethacin</i>	10
HUMALOG MIX 75/25.....	32	HYLAFEM.....	59	<i>indomethacin er</i>	10
HUMALOG MIX 75/25		HYLATOPIC PLUS.....	80	INFINITY BLOOD	
KWIKPEN.....	32	HYMOVIS.....	131	GLUCOSE TEST.....	90
HUMATE-P.....	109	HYPERHEP B S/D.....	139	INFLECTRA.....	105

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

INFUMORPH 200.....	14	<i>isosorbide dinitrate</i>	19	KERALYT SCALP.....	80
INFUMORPH 500.....	15	<i>isosorbide dinitrate er</i>	19	KERR TRIPLE DYE	
INGREZZA.....	144	<i>isosorbide mononitrate</i>	19	SWABS.....	55
INLYTA.....	49	<i>isosorbide mononitrate er</i>	19	KERYDIN.....	138
INNOPRAN XL.....	61	<i>isoxsuprine hcl</i>	65	KETOCARE.....	90
INOVA 4/1 ACNE		<i>isradipine</i>	63	<i>ketoconazole</i>	37, 80
CONTROL THERAPY.....	80	ISTALOL.....	135	KETODAN.....	80
INOVA 8/2 ACNE		<i>itraconazole</i>	37	<i>ketoprofen</i>	10
CONTROL THERAPY.....	80	<i>ivermectin</i>	19	<i>ketoprofen er</i>	10
INSPIRA.....	42	IXINITY.....	109	<i>ketorolac tromethamine</i>	10, 135
<i>insulin syringe</i>	121	JADENU.....	35	KETOSTIX.....	90
INSULIN		JADENU SPRINKLE.....	35	<i>ketotifen fumarate</i>	135
SYRINGE/NEEDLE.....	121	JAKAFI.....	49	KEVEYIS.....	97
INTEGRA F.....	112	JALYN.....	107	KEVZARA.....	10
INTEGRA PLUS.....	112	<i>jantoven</i>	24	KHEDEZLA.....	29
INTELENCE.....	56	JANUMET.....	33	KINERET.....	10
INTERMEZZO.....	114	JANUMET XR.....	33	<i>kionex</i>	59, 142
INTRAROSA.....	153	JANUVIA.....	33	KISQALI 200 DOSE.....	74
INTRON A.....	49	JARDIANCE.....	33	KISQALI 400 DOSE.....	74
<i>introvale</i>	69	JENTADUETO.....	33	KISQALI 600 DOSE.....	74
INTUNIV.....	6	JENTADUETO XR.....	33	KISQALI FEMARA 200	
INVEGA.....	54	JETREA.....	135	DOSE.....	49
INVEGA SUSTENNA.....	54	JEVTANA.....	49	KISQALI FEMARA 400	
INVIRASE.....	56	<i>jinteli</i>	103	DOSE.....	49
INVOKAMET.....	147	<i>jolessa</i>	69	KISQALI FEMARA 600	
INVOKAMET XR.....	147	<i>jolivette</i>	69	DOSE.....	49
INVOKANA.....	33	JUBLIA.....	80	KITABIS PAK.....	8
<i>iodine strong</i>	125	<i>junel 1.5/30</i>	69	KLARON.....	80
IODOSORB.....	55	<i>junel 1/20</i>	69	KLOFENSAID II.....	80
IOPIDINE.....	135	<i>junel fe 1.5/30</i>	69	KLONOPIN.....	25
<i>ipratropium bromide</i>	22, 132	<i>junel fe 1/20</i>	69	<i>klor-con 10</i>	126
<i>ipratropium-albuterol</i>	22	JUXTAPID.....	40	<i>klor-con m10</i>	126
IPRIVASK.....	24	KADIAN.....	15	<i>klor-con m20</i>	126
<i>irbesartan</i>	42	KALBITOR.....	109	<i>kls aller-tec childrens</i>	38
<i>irbesartan-hydrochlorothiazide</i>	42	KALETRA.....	57	<i>kls lansoprazole</i>	150
IRESSA.....	49	KALYDECO.....	146	<i>kls laxaclear</i>	116
<i>irinotecan hcl</i>	49	KANUMA.....	118	KOATE.....	109
IROSPAN 24/6.....	112	KAPVAY.....	7	KOATE-DVI.....	109
IS 24/6.....	112	<i>kariva</i>	69	KOGENATE FS.....	109
ISENTRESS.....	56, 57	KAZANO.....	33	KOGENATE FS BIO-SET...	109
ISENTRESS HD.....	56	<i>k-effervescent</i>	125	KOMBIGLYZE XR.....	33
ISOLYTE-S.....	125	KEFLEX.....	66	KORLYM.....	33
ISOLYTE-S PH 7.4.....	125	<i>kelnor 1/35</i>	69	KOVALTRY.....	109
<i>isoniazid</i>	46, 47	KENALOG.....	80	K-PHOS.....	126
ISOPTIN SR.....	63	KEPIVANCE.....	49	K-PHOS-NEUTRAL.....	126
ISOPTO HOMATROPINE..	135	KEPPRA.....	25	KRISTALOSE.....	116
ISORDIL TITRADOSE.....	19	KEPPRA XR.....	25		

KROGER BLOOD	LATISSE.....	81	<i>levothyroxine sodium</i>	148
GLUCOSE.....	LATUDA.....	54	<i>levoxyl</i>	148
<i>kroger blood glucose test</i>	LAZANDA.....	15	LEVSIN.....	150
KROGER INSULIN	LDO PLUS.....	81	LEVSIN/SL.....	151
SYRINGE.....	<i>leena</i>	69	LEVULAN KERASTICK.....	81
KROGER PREMIUM	<i>leflunomide</i>	10	LEXAPRO.....	29
BLOOD GLUCOSE.....	LEMTRADA.....	144	LEXIVA.....	57
<i>kroger test</i>	LENVIMA 10 MG DAILY		LIALDA.....	105
KRYSTEXXA.....	DOSE.....	49	LIBERTY NEXT	
K-TAB.....	LENVIMA 14 MG DAILY		GENERATION TEST.....	90
K-TAN PLUS.....	DOSE.....	49	<i>liberty test</i>	90
<i>kurvelo</i>	LENVIMA 18 MG DAILY		<i>lidocaine</i>	81
KUVAN.....	DOSE.....	49	<i>lidocaine hcl</i>	81, 117
<i>k-vescent</i>	LENVIMA 20 MG DAILY		<i>lidocaine hcl (cardiac)</i>	21
KYLEENA.....	DOSE.....	49	<i>lidocaine hcl (pf)</i>	117
KYNAMRO.....	LENVIMA 24 MG DAILY		<i>lidocaine in d5w</i>	21
<i>labetalol hcl</i>	DOSE.....	49	<i>lidocaine pak</i>	81
LACRISERT.....	LENVIMA 8 MG DAILY		<i>lidocaine-hydrocortisone ace</i>	19
<i>lactic acid</i>	DOSE.....	49	<i>lidocaine-prilocaine</i>	81
<i>lactic acid e</i>	LESCOL.....	40	<i>lidocaine-tetracaine</i>	81
<i>lactulose</i>	LESCOL XL.....	40	LIDODERM.....	81
<i>lactulose encephalopathy</i>	<i>lessina</i>	69	<i>lidovin</i>	81
LAMICTAL.....	LETAIRIS.....	65	<i>lidozol</i>	81
LAMICTAL ODT.....	<i>letrozole</i>	49	LIFESCAN UNISTIK 2.....	122
LAMICTAL STARTER.....	<i>leucovorin calcium</i>	49	LIFESCAN UNISTIK II	
LAMICTAL XR.....	LEUKERAN.....	49	LANCETS.....	122
LAMISIL.....	LEUKINE.....	112	LIMBREL.....	93
<i>lamivudine</i>	<i>leuprolide acetate</i>	49	LIMBREL250.....	93
<i>lamivudine-zidovudine</i>	<i>levabuterol hcl</i>	22	LIMBREL500.....	93
<i>lamotrigine</i>	LEVAQUIN.....	104	<i>lindane</i>	81
<i>lamotrigine er</i>	LEVBID.....	150	<i>linezolid</i>	45
<i>lamotrigine starter kit-blue</i>	LEVEMIR.....	33	LINZESS.....	105
<i>lamotrigine starter kit-green</i>	LEVEMIR FLEXTOUCH.....	33	<i>liothyronine sodium</i>	148, 149
<i>lamotrigine starter kit-orange</i>	<i>levetiracetam</i>	26	LIPICHOL 540.....	94
<i>lancets</i>	<i>levetiracetam er</i>	26	LIPITOR.....	40
<i>lancets super thin 28g</i>	<i>levetiracetam in nacl</i>	26	LIPOFEN.....	40
LANCETS ULTRA THIN... 122	<i>levobunolol hcl</i>	136	<i>lisinopril</i>	42
<i>lancets ultra thin 30g</i>	<i>levocarnitine</i>	100	<i>lisinopril-hydrochlorothiazide</i> ...	42
LANOXIN.....	<i>levocetirizine dihydrochloride</i> ...	38	LISTER-V.....	94
<i>lansoprazole</i>	<i>levofloxacin</i>	104, 136	<i>lite touch lancets</i>	122
<i>lanthanum carbonate</i>	<i>levofloxacin in d5w</i>	104	LITETOUCH LANCETS.....	122
LANTUS.....	LEVOMEFOLATE DHA... 128		<i>lithium</i>	54
LANTUS SOLOSTAR.....	<i>levonest</i>	69	<i>lithium carbonate</i>	54
LARIN FE 1.5/30.....	<i>levonorgest-eth estrad 91-day</i> ...	69	<i>lithium carbonate er</i>	54
LASIX.....	<i>levonorgestrel-ethinyl estrad</i>	69	LITHOSTAT.....	107
LASTACAFT.....	<i>levora 0.15/30 (28)</i>	69	LIVALO.....	40
<i>latanoprost</i>	<i>levorphanol tartrate</i>	15		

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

L-METHYLFOLATE CA	LOTENSIN HCT.....	43	<i>malathion</i>	81
ME-CBL NAC.....	LOTREL.....	43	<i>maprotiline hcl</i>	29
L-METHYLFOLATE	LOTRISONE.....	81	MARINOL.....	36
FORMULA 15.....	LOTRONEX.....	105	<i>marlissa</i>	69
L-METHYLFOLATE	<i>lovastatin</i>	40	MARNATAL-F.....	128
FORMULA 7.5.....	LOVAZA.....	40	MARPLAN.....	29
L-METHYLFOLATE	LOVENOX.....	24	<i>marten-tab</i>	12
FORTE.....	<i>low-ogestrel</i>	69	MATULANE.....	49
<i>l-methylfolate-algae-b12-b6</i>	<i>loxapine succinate</i>	54	<i>matzim la</i>	63
<i>l-methylfolate-b6-b12</i>	LUCENTIS.....	136	MAVYRET.....	114
L-METHYL-MC.....	<i>ludent</i>	126	MAXALT.....	124
L-METHYL-MC NAC.....	LUKOID GLA.....	94	MAXALT-MLT.....	124
LO LOESTRIN FE.....	LUMIGAN.....	136	MAXFE.....	112
LOCOID.....	LUMIZYME.....	100	MAXIDEX.....	136
LOCOID LIPOCREAM.....	LUNESTA.....	114	MAXIMUM D3.....	155
LOCORT 11-DAY.....	LUPANETA PACK.....	117	MAXIPIME.....	66
LOCORT 7-DAY.....	LUPRON DEPOT (1-		MAXZIDE.....	97
LODOSYN.....	MONTH).....	49	MAXZIDE-25.....	97
LOESTRIN 1.5/30 (21).....	LUPRON DEPOT (3-		<i>md-gastroview</i>	90
LOESTRIN 1/20 (21).....	MONTH).....	49	<i>meclizine hcl</i>	36
LOESTRIN FE 1.5/30.....	LUPRON DEPOT (4-		<i>meclofenamate sodium</i>	10
LOESTRIN FE 1/20.....	MONTH).....	49	MEDROL.....	72
LOFIBRA.....	LUPRON DEPOT (6-		<i>medroxyprogesterone acetate</i>	
<i>lomedica 24 fe</i>	MONTH).....	49	.....	69, 142
LOMOTIL.....	LUPRON DEPOT-PED (1-		<i>mefenamic acid</i>	10
LONSURF.....	MONTH).....	100	<i>mefloquine hcl</i>	46
<i>lopinavir-ritonavir</i>	LUPRON DEPOT-PED (3-		MEGACE ES.....	142
LOPRESSOR.....	MONTH).....	100	<i>megestrol acetate</i>	49, 50, 142
LOPRESSOR HCT.....	<i>luteru</i>	69	MEIJER BLOOD	
LOPROX.....	LUXIQ.....	81	GLUCOSE.....	122
<i>loratadine</i>	LUZU.....	81	<i>meijer blood glucose test</i>	90
<i>loratadine allergy relief</i>	LYCELLE.....	81	MEIJER PREMIUM	
<i>loratadine childrens</i>	LYNPARZA.....	141, 142	BLOOD GLUCOSE.....	122
<i>loratadine-d 12hr</i>	LYRICA.....	26	MEIJER TRUETEST TEST..	90
<i>loratadine-d 24hr</i>	LYSODREN.....	49	MEIJER TRUETRACK	
<i>lorazepam</i>	LYSTEDA.....	114	TEST.....	90
LORCET.....	LYZA.....	69	MEKINIST.....	50
LORCET HD.....	MACROBID.....	152	<i>meloxicam</i>	10
LORCET PLUS.....	MACRODANTIN.....	152	<i>melpaque hp</i>	81
LORTUSS EX.....	MACUGEN.....	136	<i>melphalan</i>	50
<i>loryna</i>	MACUTEK.....	94	<i>melphalan hcl</i>	50
LORZONE.....	MAGELLAN INSULIN		<i>memantine hcl</i>	144
<i>losartan potassium</i>	SAFETY SYR.....	122	MENEST.....	103
<i>losartan potassium-hctz</i>	MAGNEBIND 400.....	126	MENOPUR.....	100
LOSEASONIQUE.....	<i>magnesium sulfate</i>	126	MENOSTAR.....	103
LOTEMAX.....	MAKENA.....	142	<i>meperidine hcl</i>	15
LOTENSIN.....	MALARONE.....	46	MEPHYTON.....	155

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

<i>meprobamate</i>	20	<i>methylprednisolone sodium succ</i>	72	MINOCIN.....	148
MEPRON.....	45	<i>methyltestosterone</i>	18	<i>minocycline hcl</i>	148
<i>mercaptapurine</i>	50	<i>metoclopramide hcl</i>	105, 106	<i>minocycline hcl er</i>	148
<i>mesalamine</i>	105	<i>metolazone</i>	97	<i>minoxidil</i>	43
<i>mesalamine-cleanser</i>	105	METOPIRONE.....	90	MIRALAX.....	116
MESNEX.....	50	<i>metoprolol succinate er</i>	61	MIRAPEX.....	52
MESTINON.....	46	<i>metoprolol tartrate</i>	61	MIRAPEX ER.....	52
METADATE ER.....	7	<i>metoprolol-hctz er</i>	43	MIRCERA.....	112
METAFOBIC.....	94	<i>metoprolol-hydrochlorothiazide</i>	43	MIRCETTE.....	70
METAFOBIC PLUS.....	95	METROCREAM.....	81	MIRENA (52 MG).....	70
METAFOBIC PLUS RF.....	95	METROGEL.....	81	<i>mirtazapine</i>	29
METANX.....	95	METROGEL-VAGINAL.....	153	MIRVASO.....	81
<i>metaproterenol sulfate</i>	22	METROLOTION.....	81	<i>misoprostol</i>	151
<i>metaxalone</i>	131	<i>metronidazole</i>	45, 81, 154	MITIGARE.....	107
<i>metformin hcl</i>	33	<i>metronidazole in nacl</i>	45	<i>mitoxantrone hcl</i>	50
<i>metformin hcl er</i>	33	MEVACOR.....	40	<i>mixed vespid venom protein</i>	62
<i>metformin hcl er (mod)</i>	33	<i>mexiletine hcl</i>	21	<i>mm loratadine-d 24 hour</i>	74
<i>metformin hcl er (osm)</i>	33	MIACALCIN.....	100	MOBIC.....	10
<i>methadone hcl</i>	15	MIBELAS 24 FE.....	70	<i>modafinil</i>	7
<i>methadone hcl intensol</i>	15	MICARDIS.....	43	<i>moderiba</i>	57
METHADOSE.....	15	MICARDIS HCT.....	43	MODERIBA 1200 DOSE	
METHADOSE SUGAR-FREE.....	15	<i>miconazole 3</i>	154	PACK.....	57
<i>methamphetamine hcl</i>	7	MICORT-HC.....	81	MODERIBA 800 DOSE	
<i>methazolamide</i>	97	MICRHOGAM ULTRA-FILTERED PLUS.....	139	PACK.....	57
<i>methenamine hippurate</i>	152	MICRODOT TEST.....	90	<i>moexipril hcl</i>	43
<i>methenamine mandelate</i>	152	<i>microgestin 1.5/30</i>	70	<i>moexipril-hydrochlorothiazide</i> ..	43
METHERGINE.....	138	<i>microgestin 1/20</i>	70	<i>mometasone furoate</i>	81, 132
<i>methimazole</i>	149	<i>microgestin fe 1.5/30</i>	70	MONDOXYNE NL.....	148
METHITEST.....	18	<i>microgestin fe 1/20</i>	70	MONOCLATE-P.....	109
<i>methocarbamol</i>	131	MICRO-K.....	126	MONODOX.....	148
<i>methotrexate</i>	50	MICROLET LANCETS.....	122	<i>monoject sodium chloride flush</i>	126
<i>methotrexate sodium (pf)</i>	50	FLOW LANCET.....	122	<i>mono-lyyah</i>	70
<i>methoxsalen rapid</i>	81	<i>midazolam hcl</i>	115	<i>mononessa</i>	70
<i>methscopolamine bromide</i>	151	<i>midodrine hcl</i>	154	MONONINE.....	109
<i>methylclothiazide</i>	97	MIGERGOT.....	124	MONOVISC.....	131
<i>methyldopa</i>	43	<i>miglitol</i>	33	<i>montelukast sodium</i>	22
<i>methyldopa-hydrochlorothiazide</i>	43	MIGRANAL.....	124	<i>morcin</i>	59
<i>methyldopate hcl</i>	43	MILLIPRED.....	72	MORGIDOX.....	148
METHYLIN.....	7	<i>mimvey</i>	103	MORPHABOND ER.....	15
<i>methylphenidate hcl</i>	7	MINASTRIN 24 FE.....	70	<i>morphine sulfate</i>	15, 16
<i>methylphenidate hcl er</i>	7	MINIPRESS.....	43	<i>morphine sulfate (concentrate)</i> ..	15
<i>methylphenidate hcl er (cd)</i>	7	<i>miniprin low dose</i>	12	<i>morphine sulfate (pf)</i>	15
<i>methylphenidate hcl er (la)</i>	7	<i>minitran</i>	19	<i>morphine sulfate er</i>	15
<i>methylprednisolone</i>	72	MINIVELLE.....	103	<i>morphine sulfate er beads</i>	15
				MOTOFEN.....	35
				MOVANTIK.....	106
				MOVIPREP.....	116

MOXATAG.....	141	NAMENDA.....	144	<i>neomycin-polymyxin-</i>	
MOXEZA.....	136	NAMENDA TITRATION		<i>gramicidin.....</i>	136
<i>moxifloxacin hcl.....</i>	104, 136	PAK.....	144	<i>neomycin-polymyxin-hc..</i>	136, 138
MOZOBIL.....	112	NAMENDA XR.....	144	NEORAL.....	60
MS CONTIN.....	16	NAMENDA XR		NEOSALUS.....	82
MULTAQ.....	21	TITRATION PACK.....	144	NEOSALUS CP.....	82
MULTIGEN.....	113	NAMZARIC.....	27, 28	NEOSPORIN GU	
MULTIGEN FOLIC.....	113	NAPRELAN.....	10	IRRIGANT.....	107
MULTIGEN PLUS.....	113	<i>napro.....</i>	82	NEO-SYNALAR.....	82
<i>multi-vit/fluoride/iron.....</i>	128	NAPROSYN.....	10	NEPHPLEX RX.....	128
<i>multivitamin/fluoride.....</i>	128	<i>naproxen.....</i>	10	NEPHRON FA.....	113
<i>multi-vitamin/fluoride/iron.....</i>	128	<i>naproxen dr.....</i>	10	NERLYNX.....	50
<i>multivitamins/fluoride.....</i>	128	<i>naproxen sodium.....</i>	11	NESINA.....	34
<i>mupirocin.....</i>	81	<i>naproxen sodium er.....</i>	11	NESTABS.....	128
<i>mupirocin calcium.....</i>	81	<i>naratriptan hcl.....</i>	124	NEUAC.....	82
MYALEPT.....	117	NARCAN.....	35	NEULASTA.....	113
MYAMBUTOL.....	47	NARDIL.....	29	NEUPOGEN.....	113
MYCOBUTIN.....	47	NASACORT ALLERGY		NEUPRO.....	52
<i>mycophenolate mofetil.....</i>	59	24HR.....	132	<i>neurin-sl.....</i>	113
MYDAYIS.....	7	NASACORT ALLERGY		NEURONTIN.....	26
MYDRIACYL.....	136	24HR CHILDREN.....	132	NEUTEK 2TEK	
MYFORTIC.....	60	<i>nasal allergy 24 hour.....</i>	132	GLUCOSE/PRESSURE.....	122
MYGLUCOHEALTH TEST.....	90	NASCOBAL.....	113	NEUTEK 2TEK TEST.....	90
MYLERAN.....	50	NASONEX.....	132	NEVANAC.....	136
MYNATAL.....	128	NATACYN.....	136	<i>nevirapine.....</i>	57
MYNATAL ADVANCE.....	128	NATAZIA.....	70	<i>nevirapine er.....</i>	57
<i>mynatal plus.....</i>	128	<i>nateglinide.....</i>	34	NEXA PLUS.....	129
<i>mynatal-z.....</i>	128	NATESTO.....	18	NEXAVAR.....	50
MYOBLOC.....	133	NATPARA.....	100	NEXGEN TEST.....	90
<i>myorisan.....</i>	82	NATROBA.....	82	NEXIUM.....	151
MYORISAN.....	82	<i>nat-rul vitamin d.....</i>	155	NEXIUM 24HR.....	151
MYRBETRIQ.....	153	<i>natural vitamin d-3.....</i>	155	NEXIUM I.V.....	151
MYSOLINE.....	26	NATURE-THROID.....	149	NEXPLANON.....	70
MYTESI.....	35	NEBUPENT.....	45	<i>next choice one dose.....</i>	70
<i>myzilra.....</i>	70	<i>nebusal.....</i>	74	NEXTERONE.....	21
<i>na ferric gluc cplx in sucrose... </i>	113	NEBUSAL.....	74	<i>niacin er (antihyperlipidemic) ..</i>	40
NABI-HB.....	139	<i>necon 0.5/35 (28).....</i>	70	NIACOR.....	40
<i>nabumetone.....</i>	10	<i>necon 1/35 (28).....</i>	70	NIASPAN.....	40
<i>nadolol.....</i>	61	<i>necon 1/50 (28).....</i>	70	<i>nicardipine hcl.....</i>	63
<i>nadolol-bendroflumethiazide.....</i>	43	<i>nefazodone hcl.....</i>	29, 146	NICODERM CQ.....	144
<i>naftifine hcl.....</i>	82	<i>neomycin sulfate.....</i>	8	NICOMIDE.....	129
NAFTIN.....	82	<i>neomycin-bacitracin zn-</i>		<i>nicorelief.....</i>	144
NAGLAZYME.....	100	<i>polymyx.....</i>	136	NICORETTE.....	144
<i>nalbuphine hcl.....</i>	16	<i>neomycin-polymyxin b gu.....</i>	107	<i>nicotine.....</i>	144
NALFON.....	10	<i>neomycin-polymyxin-dexameth</i>		<i>nicotine polacrilex.....</i>	144
<i>naloxone hcl.....</i>	35	.....	136	<i>nicotine step 1.....</i>	144
<i>naltrexone hcl.....</i>	35			<i>nicotine step 2.....</i>	144

<i>nicotine step 3</i>	144	<i>nortrel 7/7/7</i>	70	<i>nystatin-triamcinolone</i>	82
NICOTROL.....	144	<i>nortriptyline hcl</i>	29	<i>nystop</i>	82
NICOTROL NS.....	144	NORVASC.....	64	OB COMPLETE GOLD.....	129
<i>nifediac cc</i>	63	NORVIR.....	57	OB COMPLETE ONE.....	129
<i>nifedical xl</i>	63	NOVA MAX GLUCOSE		OB COMPLETE PREMIER	129
<i>nifedipine</i>	63	TEST.....	90	OB COMPLETE/DHA.....	129
<i>nifedipine er</i>	63	<i>novarel</i>	101	OBREDON.....	74
<i>nifedipine er osmotic release</i>	63	NOVOEIGHT.....	109	O-CAL FA.....	129
NIKKI.....	70	NOVOFINE.....	122	O-CAL PRENATAL.....	129
NILANDRON.....	50	NOVOLIN 70/30.....	34	OCALIVA.....	104
<i>nilutamide</i>	50	NOVOLIN 70/30 RELION.....	34	<i>ocella</i>	70
<i>nimodipine</i>	64	NOVOLIN N.....	34	OCTAGAM.....	139
NINLARO.....	50	NOVOLIN N RELION.....	34	<i>octreotide acetate</i>	101
<i>nisoldipine er</i>	64	NOVOLIN R.....	34	OCUFLOX.....	136
NITRO-BID.....	19	NOVOLIN R RELION.....	34	OCUVEL.....	129
NITRO-DUR.....	19	NOVOLOG.....	34	ODEFSEY.....	57
<i>nitrofurantoin</i>	152	NOVOLOG FLEXPEN.....	34	ODOMZO.....	50
<i>nitrofurantoin macrocrystal</i>	152	NOVOLOG MIX 70/30.....	34	OFEV.....	146
<i>nitrofurantoin monohyd macro</i>	152	NOVOLOG MIX 70/30		<i>ofloxacin</i>	104, 136, 138
<i>nitroglycerin</i>	19, 20	FLEXPEN.....	34	<i>ogestrel</i>	70
<i>nitroglycerin in d5w</i>	19	NOVOLOG PENFILL.....	34	<i>olanzapine</i>	54
NITROLINGUAL.....	20	NOVOSEVEN RT.....	109	<i>olanzapine-fluoxetine hcl</i>	144
NITROMIST.....	20	NOVOTWIST.....	122	<i>olmesartan medoxomil</i>	43
NITROSTAT.....	20	NOXAFIL.....	37	<i>olmesartan medoxomil-hctz</i>	43
<i>nitro-time</i>	20	<i>np thyroid</i>	149	<i>olmesartan-amlodipine-hctz</i>	43
NITYR.....	100	NPLATE.....	113	<i>olopatadine hcl</i>	132, 136
<i>nizatidine</i>	151	NUCALA.....	115	OLUX.....	82
NIZORAL.....	82	NUCORT.....	82	OLUX-E.....	82
<i>nora-be</i>	70	NUCYNTA.....	16	OLYSIO.....	57
NORCO.....	16	NUCYNTA ER.....	16	OMECLAMOX-PAK.....	151
NORDITROPIN FLEXPRO	100	NUEDEXTA.....	144	<i>omega-3-acid ethyl esters</i>	40
<i>norethin ace-eth estrad-fe</i>	70	NUFOL.....	113	<i>omeprazole</i>	151
<i>norethindrone</i>	70	NULOJIX.....	60	<i>omeprazole magnesium</i>	151
<i>norethindrone acetate</i>	142	NULYTELY WITH		<i>omeprazole-sodium</i>	
<i>norethindrone-eth estradiol</i>	103	FLAVOR PACKS.....	116	<i>bicarbonate</i>	151
<i>norgestimate-eth estradiol</i>	70	NUPLAZID.....	54	OMNARIS.....	132
<i>norgestim-eth estrad triphasic</i> ...	70	NUTROPIN AQ NUSPIN 10		OMNIPRED.....	136
NORITATE.....	82	.....	101	OMNITROPE.....	101
NORLYROC.....	70	NUTROPIN AQ NUSPIN 20		ON CALL EXPRESS	
NORMOSOL-R.....	126	.....	101	BLOOD GLUCOSE.....	90
NORMOSOL-R PH 7.4.....	126	NUTROPIN AQ NUSPIN 5	101	ON CALL PLUS BLOOD	
NORPACE CR.....	21	NUVARING.....	70	GLUCOSE.....	90
NORPRAMIN.....	29	NUVIGIL.....	7	ON CALL VIVID BLOOD	
NORTHERA.....	132	NUWIQ.....	109, 110	GLUCOSE.....	90
<i>nortrel 0.5/35 (28)</i>	70	<i>nyamyc</i>	82	<i>ondansetron</i>	36
<i>nortrel 1/35 (21)</i>	70	NYMALIZE.....	64	<i>ondansetron hcl</i>	36
<i>nortrel 1/35 (28)</i>	70	<i>nystatin</i>	37, 62, 82, 127		

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

ONETOUCH CLUB	ORFADIN.....	101	<i>pacerone</i>	21
LANCETS FINE PT.....	ORKAMBI.....	74	<i>paliperidone er</i>	54
ONETOUCH COMBO	<i>orphenadrine citrate er</i>	131	PAMELOR.....	29
PACK.....	<i>orsythia</i>	70	<i>pamidronate disodium</i>	101
ONETOUCH DELICA	<i>ortho d</i>	113	PANCREAZE.....	96
LANCETS 33G.....	ORTHO MICRONOR.....	71	PANDEL.....	82
ONETOUCH DELICA	ORTHO TRI-CYCLEN (28)..	71	PANRETIN.....	82
LANCETS FINE.....	ORTHO TRI-CYCLEN LO... 71		<i>pantoprazole sodium</i>	151
ONETOUCH DELICA	ORTHO-CYCLEN (28).....	71	PARAFON FORTE DSC....	131
LANCING DEV.....	ORTHO-NOVUM 1/35 (28)..	71	PARAGARD	
ONETOUCH FINEPOINT	ORTHO-NOVUM 7/7/7 (28)..	71	INTRAUTERINE COPPER..	71
LANCETS.....	ORTHOVISC.....	131	<i>paricalcitol</i>	101
ONETOUCH LANCETS....	<i>oseltamivir phosphate</i>	57	PARNATE.....	29
ONETOUCH ULTRA 2.....	OSENI.....	34	PAROEX.....	127
ONETOUCH ULTRA	OSMOPREP.....	116	<i>paromomycin sulfate</i>	8
BLUE.....	OSPHENA.....	101	<i>paroxetine hcl</i>	29
ONETOUCH ULTRA MINI	OTEZLA.....	141	<i>paroxetine hcl er</i>	29
.....	OTOVEL.....	138	<i>paroxetine mesylate</i>	144
ONETOUCH ULTRASOFT	OTREXUP.....	11	PASER.....	47
LANCETS.....	OVACE PLUS.....	82	PATADAY.....	136
ONETOUCH VERIO.....	OVACE PLUS WASH.....	82	PATANASE.....	132
ONETOUCH VERIO IQ	OVACE WASH.....	82	PATANOL.....	136
SYSTEM.....	OVIDE.....	82	PAXIL.....	29
ONEXTON.....	OVIDREL.....	101	PAXIL CR.....	29
ONFI.....	OXANDRIN.....	18	PAZEO.....	136
ONGLYZA.....	<i>oxandrolone</i>	18	PCE.....	118
ONMEL.....	<i>oxaprozin</i>	11	PEDIAPRED.....	72
ONZETRA XSAIL.....	OXAYDO.....	16	<i>peg 3350</i>	116
OPANA.....	<i>oxazepam</i>	20	<i>peg 3350/electrolytes</i>	117
OPANA ER.....	<i>oxcarbazepine</i>	26	<i>peg 3350-kcl-na bicarb-nacl</i>	117
<i>opium</i>	<i>oxiconazole nitrate</i>	82	<i>peg-3350/electrolytes</i>	117
OPSUMIT.....	OXISTAT.....	82	PEGANONE.....	26
OPTIMAL D3 M.....	OXSORALEN ULTRA.....	82	PEGASYS.....	57
OPTIMAL-D.....	OXTELLAR XR.....	26	PEGASYS PROCLICK.....	57
OPTION 2.....	<i>oxybutynin chloride</i>	153	PEGINTRON.....	57
OPTUMRX BLOOD	<i>oxybutynin chloride er</i>	153	PEG-PREP.....	117
GLUCOSE TEST.....	<i>oxycodone hcl</i>	16	PEGYLAX.....	117
OPURITY VITAMIN D.....	<i>oxycodone hcl er</i>	16	<i>penicillin g pot in dextrose</i>	141
ORACEA.....	<i>oxycodone-acetaminophen</i>	16	<i>penicillin v potassium</i>	141
<i>oralone</i>	<i>oxycodone-aspirin</i>	16	PENLAC.....	82
ORAMAGICRX.....	<i>oxycodone-ibuprofen</i>	16	PENNSAID.....	83
ORAP.....	OXYCONTIN.....	16	PENTASA.....	106
ORAPRED ODT.....	<i>oxymorphone hcl</i>	16	<i>pentazocine-naloxone hcl</i>	16
ORAVIG.....	<i>oxymorphone hcl er</i>	16	<i>pentoxifylline er</i>	110
ORENCIA.....	OXYTROL.....	153	<i>pentylene glycol</i>	67
ORENCIA CLICKJECT.....	OXYTROL FOR WOMEN..	153	PEPCID.....	151
ORENITRAM.....	<i>pa vitamin d-3</i>	155	PERCOCET.....	16

PERCURA.....	95	PLEXION.....	83	PRECISION SUREDOSE	
PERFOROMIST.....	22	PLEXION CLEANSER.....	83	PLUS SYR.....	122
<i>perindopril erbumine</i>	43	PLEXION CLEANSING		PRECISION SURE-DOSE	
PERIOGARD.....	127	CLOTH.....	83	SYRINGE.....	122
<i>periomed</i>	127	<i>pnv-dha</i>	129	PRECISION XTRA BLOOD	
<i>permethrin</i>	83	PNV-OMEGA.....	129	GLUCOSE.....	91
<i>perphenazine</i>	54	<i>pnv-select</i>	129	PRECISION XTRA	
<i>perphenazine-amitriptyline</i>	145	POCKETCHEM EZ TEST.....	91	KETONE.....	91
PERTZYE.....	96	PODOCON.....	83	PRECOSE.....	34
PEXEVA.....	29	<i>polyethylene glycol 3350</i>	117	PRED FORTE.....	137
<i>phenadoz</i>	38	<i>polymyxin b-trimethoprim</i>	137	PRED MILD.....	137
<i>phenazopyridine hcl</i>	107	POLYTRIM.....	137	PRED-G.....	137
<i>phendimetrazine tartrate</i>	7	POLY-VI-FLOR.....	129	PRED-G S.O.P.....	137
<i>phendimetrazine tartrate er</i>	7	POLY-VI-FLOR FS.....	129	<i>prednicarbate</i>	83
<i>phenelzine sulfate</i>	29	POLY-VI-FLOR/IRON.....	129	<i>prednisolone acetate</i>	137
<i>phenobarbital</i>	115	POMALYST.....	50	<i>prednisolone sodium phosphate</i>	
<i>phenoxybenzamine hcl</i>	43	PONSTEL.....	11	.....	73, 137
<i>phentermine hcl</i>	7	<i>portia-28</i>	71	<i>prednisone</i>	73
<i>phenylephrine hcl</i>	136	<i>pot bicarb-pot chloride</i>	126	PREDNISONE INTENSOL..	73
PHENYTEK.....	26	POTABA.....	155	PREFEST.....	103
<i>phenytoin</i>	26, 27	<i>potassium bicarbonate</i>	126	PRE-FOLIC.....	113
<i>phenytoin infatabs</i>	26	<i>potassium chloride</i>	127	<i>pregnyl</i>	101
<i>phenytoin sodium</i>	27	<i>potassium chloride crys er</i>	126	PREMARIN.....	103, 154
<i>phenytoin sodium extended</i>	27	<i>potassium chloride er</i>	126	PREMPHASE.....	103
<i>philith</i>	71	<i>potassium chloride in nacl</i>	126	PREMPRO.....	103
PHOSLO.....	106	<i>potassium citrate er</i>	107	PRENATA.....	129
PHOSLYRA.....	106	<i>potassium citrate-citric acid</i>	107	<i>prenatabs rx</i>	129
<i>phospha 250 neutral</i>	126	PRADAXA.....	24	<i>prenatal 19</i>	129
PHOSPHOLINE IODIDE...	136	PRALUENT.....	140	PRENATAL PLUS IRON..	129
<i>physiolyte</i>	60	<i>pramcort</i>	19	PRENATE DHA.....	129
PICATO.....	83	<i>pramipexole dihydrochloride</i>	52	PRENATE ELITE.....	129
<i>pilocarpine hcl</i>	127, 137	<i>pramipexole dihydrochloride er</i> ..	52	PRENATE ESSENTIAL.....	129
<i>pimozide</i>	145	PRAMOSONE.....	83	PRENATE MINI.....	129
<i>pindolol</i>	61	PRANDIN.....	34	PREPOPIK.....	117
<i>pioglitazone hcl</i>	34	<i>prasugrel hcl</i>	110	PRESTALIA.....	43
<i>pioglitazone hcl-glimepiride</i>	34	PRAVACHOL.....	40	PREVACID.....	151
<i>pioglitazone hcl-metformin hcl</i> ..	34	<i>pravastatin sodium</i>	40	PREVACID 24HR.....	151
<i>piperacillin sod-tazobactam so</i>	141	<i>prazosin hcl</i>	43	PREVACID SOLUTAB.....	151
<i>piroxicam</i>	11	PRECISION PCX.....	91	<i>prevalite</i>	40
PLAN B ONE-STEP.....	71	PRECISION PCX PLUS		<i>previfem</i>	71
PLAQUENIL.....	46	TEST.....	91	PREVPAC.....	151
PLASMA-LYTE 148.....	126	PRECISION POINT OF		PREZCOBIX.....	57
PLASMA-LYTE A.....	126	CARE TEST.....	91	PREZISTA.....	57
PLAVIX.....	110	PRECISION QID TEST.....	91	PRIALT.....	12
PLEGRIDY.....	145	PRECISION SOF-TACT		PRIFTIN.....	47
PLEGRIDY STARTER		TEST.....	91	PRILOSEC.....	151
PACK.....	145			PRILOSEC OTC.....	151

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

<i>primaquine phosphate</i>	46	PROPECIA.....	83	<i>quetiapine fumarate</i>	54
<i>primidone</i>	27	<i>propranolol hcl</i>	61	<i>quetiapine fumarate er</i>	54
PRIMLEV.....	16	<i>propranolol hcl er</i>	61	QUFLORA FE PEDIATRIC	
PRIMSOL.....	45	<i>propranolol-hctz</i>	43	.....	129
PRINIVIL.....	43	<i>propylthiouracil</i>	149	QUICKTEK TEST.....	91
PRISTIQ.....	29, 30	PROSCAR.....	107	QUILLICHEW ER.....	7
PRIVIGEN.....	139	PROTECTIRON.....	113	QUILLIVANT XR.....	7
PROAIR HFA.....	22	PROTEOLIN.....	95	<i>quinapril hcl</i>	43
<i>probenecid</i>	107	PROTEOLIN DS.....	95	<i>quinapril-hydrochlorothiazide</i> ... 43	
<i>procainamide hcl</i>	21	PROTONIX.....	151, 152	<i>quinidine gluconate</i>	21
PROCARDIA XL.....	64	PROTOPIC.....	83	<i>quinidine gluconate er</i>	21
PROCENTRA.....	7	<i>protriptyline hcl</i>	30	<i>quinidine sulfate</i>	21
<i>prochlorperazine</i>	54	PROVENTIL HFA.....	23	<i>quinidine sulfate dihydrate</i>	67
<i>prochlorperazine maleate</i>	54	PROVERA.....	142	<i>quinine sulfate</i>	46
PROCRIT.....	113	PROVIGIL.....	7	QUINTET AC BLOOD	
PROCTOCORT.....	19	PROZAC.....	30	GLUCOSE TEST.....	91
PROCTOFOAM HC.....	19	PRUDOXIN.....	83	QUINTET BLOOD	
<i>procto-pak</i>	19	PRUTECT.....	83	GLUCOSE TEST.....	91
<i>proctosol hc</i>	19	<i>pseudoeph-chlorphen-hydrocod</i> . 74		QVAR.....	23
<i>proctozone-hc</i>	19	<i>psorcon</i>	83	<i>ra lansoprazole</i>	152
PROCYSBI.....	107	PTS PANELS GLUCOSE		<i>ra laxative</i>	117
PRODIGY AUTOCODE		TEST.....	91	<i>ra nicotine</i>	145
BLOOD GLUCOSE.....	123	PULMICORT.....	23	<i>ra omeprazole-sodium bicarb.</i> .. 152	
PRODIGY NO CODING		PULMICORT		RA TRUETEST TEST.....	91
BLOOD GLUC.....	91	FLEXHALER.....	23	<i>ra vitamin d-3</i>	155
PRODRIN.....	124	PULMONA.....	95	<i>rabeprazole sodium</i>	152
PROFERRIN-FORTE.....	113	PULMOZYME.....	146	RADIAGEL.....	83
PROFILNINE.....	110	<i>purefe plus</i>	113	RADIAPLEXRX.....	83
PROFILNINE SD.....	110	<i>purevit dualfe plus</i>	113	RAJANI.....	71
<i>progesterone micronized</i>	142	PURIXAN.....	50	<i>raloxifene hcl</i>	101
PROGLYCEM.....	34	PYLERA.....	152	<i>ramipril</i>	43
PROGRAF.....	60	<i>pyrazinamide</i>	47	RANEXA.....	20
PROLASTIN-C.....	146	PYRIDIDIUM.....	107	<i>ranitidine hcl</i>	152
PROLENSA.....	137	<i>pyridostigmine bromide</i>	46	RAPAFLO.....	107
PROLIA.....	101	<i>pyridostigmine bromide er</i>	46	RAPAMUNE.....	60
PROMACTA.....	113	QBRELIS.....	43	<i>rasagiline mesylate</i>	52
<i>promethazine hcl</i>	38	<i>qc allergy relief childrens</i>	38	RASUVO.....	11
<i>promethazine vclcodeine</i>	74	<i>qc aspirin low dose</i>	12	RAVICTI.....	101
<i>promethazine-dm</i>	74	<i>qc natura-lax</i>	117	RAYALDEE.....	101
<i>promethegan</i>	38	QNASL.....	132	RAYOS.....	73
PROMETRIUM.....	142	QNASL CHILDRENS.....	132	RAZADYNE.....	145
PROMISEB.....	83	QUALAQUIN.....	46	RAZADYNE ER.....	145
<i>propafenone hcl</i>	21	QUARTETTE.....	71	REBETOL.....	57
<i>propafenone hcl er</i>	21	<i>quasense</i>	71	REBIF.....	145
<i>propantheline bromide</i>	151	<i>quazepam</i>	115	REBIF REBIDOSE.....	145
<i>proparacaine hcl</i>	137	QUDEXY XR.....	27	REBIF REBIDOSE	
<i>proparacaine-fluorescein</i>	137	QUESTRAN LIGHT.....	40	TITRATION PACK.....	145

REBIF TITRATION PACK 145	RESTORIL..... 115	<i>rivastigmine tartrate</i> 145
RECLAST..... 101	RETIN-A..... 83	RIVELSA..... 71
<i>reclipsen</i> 71	RETIN-A MICRO..... 83	RIXUBIS..... 110
RECOMBINATE..... 110	RETIN-A MICRO PUMP..... 83	<i>rizatriptan benzoate</i> 125
RECTIV..... 19	RETROVIR..... 57	ROBAXIN..... 131
REFISSA..... 83	REVATIO..... 65	ROBINUL..... 152
REFUAH PLUS BLOOD	REVEAL BLOOD	ROBINUL-FORTE..... 152
GLUCOSE TEST..... 91	GLUCOSE TEST..... 91	ROCALTROL..... 101
REGENECARE..... 83	REVESTA..... 113	ROCEPHIN..... 67
REGIMEX..... 7	REVLIMID..... 60	<i>ropinirole hcl</i> 52
REGLAN..... 106	REXULTI..... 54	<i>ropinirole hcl er</i> 52
REGONOL..... 46	REYATAZ..... 58	<i>rosadan</i> 83
REGRANEX..... 83	RHINOCORT ALLERGY.. 132	ROSADAN..... 84
RELAGARD..... 154	RHINOCORT AQUA..... 132	<i>rosanil cleanser</i> 84
RELENZA DISKHALER..... 57	RHOFADE..... 83	<i>rosuvastatin calcium</i> 40
RELION INSULIN	RHOGAM ULTRA-	ROWASA..... 106
SYRINGE..... 123	FILTERED PLUS..... 140	ROXICODONE..... 16
RELI-ON INSULIN	RHOPHYLAC..... 140	ROZEREM..... 115
SYRINGE..... 123	RIASTAP..... 110	RUBRACA..... 142
RELION PEN NEEDLES... 123	<i>ribasphere</i> 58	RUCONEST..... 110
RELISTOR..... 106	<i>ribasphere ribapak</i> 58	RYDAPT..... 50
RELPAK..... 125	<i>ribavirin</i> 58	<i>rynoderma</i> 84
REMERON..... 30	RIDAURA..... 11	RYTARY..... 52
REMERON SOLTAB..... 30	<i>rifabutin</i> 47	RYTHMOL SR..... 21
REMICADE..... 106	RIFADIN..... 47	RYVENT..... 38
REMODULIN..... 65	RIFAMATE..... 47	SABRIL..... 27
RENACIDIN..... 107	<i>rifampin</i> 47	SAFETY LET LANCETS... 123
RENAGEL..... 106	RIFATER..... 47	SAFYRAL..... 71
<i>renal</i> 129	RIGHTEST GS100 BLOOD	SAIZEN..... 101
RENFLEXIS..... 106	GLUCOSE..... 91	SAIZEN CLICK.EASY..... 102
<i>reno caps</i> 129	RIGHTEST GS300 BLOOD	<i>salacyn</i> 84
RENOVA..... 83	GLUCOSE..... 91	SALAGEN..... 127
REVELA..... 106	RIGHTEST GS550 BLOOD	SALEX..... 84
<i>repaglinide</i> 34	GLUCOSE..... 91	<i>salicylic acid</i> 84
<i>repaglinide-metformin hcl</i> 34	RILUTEK..... 133	<i>salicylic acid wart remover</i> 84
REPATHA..... 140	<i>riluzole</i> 133	<i>saline bacteriostatic</i> 141
REPATHA PUSHTRONEX	<i>rimantadine hcl</i> 58	<i>saline-benzyl alcohol</i> 141
SYSTEM..... 140	RIOMET..... 34	SAMSCA..... 102
REPATHA SURECLICK... 140	<i>risedronate sodium</i> 101	SANCUSO..... 36
REPLESTA..... 155	RISPERDAL..... 54	SANDIMMUNE..... 60
REPLESTA CHILDRENS... 155	RISPERDAL M-TAB..... 54	SANDOSTATIN..... 102
REPLESTA NX..... 155	<i>risperidone</i> 54, 55	SANDOSTATIN LAR
REQUIP..... 52	RISPERIDONE M-TAB..... 54	DEPOT..... 102
REQUIP XL..... 52	RITALIN..... 7	SANTYL..... 84
RESCRIPTOR..... 57	RITALIN LA..... 8	SAPHRIS..... 55
RESCULA..... 137	RITUXAN..... 50	<i>sapsicare twist top lancets</i> 123
RESTASIS..... 137	<i>rivastigmine</i> 145	SARAFEM..... 145

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

Last Update 12/2017

Next Update

SAVAYSA.....	24	SINEMET CR.....	52	SOTYLIZE.....	62
SAVELLA.....	145	SINGULAIR.....	23	SOVALDI.....	58
SAVELLA TITRATION		<i>sirolimus</i>	60	SPECTRACEF.....	67
PACK.....	145	SIRTURO.....	47	<i>spinosad</i>	84
<i>sb polyethylene glycol 3350</i>	117	SITAVIG.....	58	SPIRIVA HANDIHALER.....	23
<i>scalacort</i>	84	SIVEXTRO.....	45	SPIRIVA RESPIMAT.....	23
<i>scopolamine</i>	36	SKELAXIN.....	131	<i>spironolactone</i>	97, 98
SEASONIQUE.....	71	SKLICE.....	84	<i>spironolactone-hctz</i>	98
<i>seb-prev wash</i>	84	SKYLA.....	71	SPORANOX.....	37
SECONAL.....	115	SM CLEARLAX.....	117	SPORANOX PULSEPAK.....	37
SEEBRI NEOHALER.....	23	<i>sm lansoprazole</i>	152	<i>sprintec 28</i>	71
<i>selegiline hcl</i>	52	<i>sm nicotine</i>	145	SPRITAM.....	27
<i>selenium sulfide</i>	84	<i>sm vitamin d3</i>	155	SPRIX.....	11
<i>selenium sulf-pyrrithione-urea</i>	84	SMART SENSE VALUE		SPRYCEL.....	50
SELRX.....	84	TEST.....	91	<i>sronyx</i>	71
SELZENTRY.....	58	SMARTEST BLOOD		SSKI.....	127
SEMPREX-D.....	74	GLUCOSE TEST.....	91	<i>sss 10-5</i>	84
<i>se-natal 19</i>	129	SMOOTH LAX.....	117	<i>st joseph aspirin</i>	12
SENSIPAR.....	102	<i>sod benz-sod phenylacet</i>	102	STALEVO 100.....	52
SENTRA AM.....	95	<i>sod citrate-citric acid</i>	107	STALEVO 125.....	52
SENTRA PM.....	95	<i>sodium chloride</i>	74, 107, 127	STALEVO 150.....	52
SEREVENT DISKUS.....	23	<i>sodium chloride bacteriostatic</i>	141	STALEVO 200.....	52
SERNIVO.....	84	SODIUM EDECIN.....	97	STALEVO 50.....	52
SEROQUEL.....	55	<i>sodium fluoride</i>	127	STALEVO 75.....	52
SEROQUEL XR.....	55	<i>sodium hydroxide</i>	67	STARLIX.....	34
SEROSTIM.....	102	<i>sodium phenylbutyrate</i>	102	<i>stavudine</i>	58
<i>sertraline hcl</i>	30	<i>sodium polystyrene sulfonate</i>		STELARA.....	84, 115
<i>se-tan plus</i>	113	.....	60, 142	<i>sterile water for irrigation</i>	60
<i>sevelamer carbonate</i>	106	<i>sodium sulfacetamide</i>	84	STIMATE.....	102
SFROWASA.....	106	SOLARAZE.....	84	STIOLTO RESPIMAT.....	23
SHAROBEL.....	71	<i>solia</i>	71	STIVARGA.....	50
SHOHL'S MODIFIED.....	107	SOLIQUA.....	115	STRATTERA.....	8
SIGNIFOR.....	102	SOLODYN.....	148	STRENSIQ.....	115
<i>sildenafil citrate</i>	65	SOLU-CORTEF.....	73	<i>streptomycin sulfate</i>	8
SILENOR.....	115	SOLU-MEDROL.....	73	STRIANT.....	18
SILIQ.....	84	SOLUS V2 TEST.....	91	STRIBILD.....	58
SILVADENE.....	84	SOMA.....	131	STRIVERDI RESPIMAT.....	23
<i>silver nitrate</i>	84	SOMATULINE DEPOT.....	102	STROMECTOL.....	19
<i>silver sulfadiazine</i>	84	SOMAVERT.....	102	SUBOXONE.....	17
SIMBRINZA.....	137	SONAFINE.....	84	SUBSYS.....	17
SIMPLE DIAGNOSTICS		SONATA.....	115	SUCRAID.....	96
LANCING DEV.....	123	SOOLANTRA.....	84	<i>sucralfate</i>	152
SIMPONI.....	11	SORIATANE.....	84	SULAR.....	64
SIMPONI ARIA.....	11	SORILUX.....	84	<i>sulfacetamide sodium</i>	85, 137
SIMULECT.....	60	<i>sorine</i>	61	<i>sulfacetamide sodium (acne)</i>	84
<i>simvastatin</i>	40	<i>sotalol hcl</i>	61, 62	<i>sulfacetamide sodium-sulfur</i>	85
SINEMET.....	52	<i>sotalol hcl (af)</i>	61	<i>sulfacetamide sod-sulfur wash</i>	85

<i>sulfacetamide-prednisolone</i>	137	SYNALAR TS.....	85	TEKTURNA HCT.....	44
<i>sulfacleanse 8/4</i>	85	SYNALGOS-DC.....	17	TELCARE BLOOD	
<i>sulfadiazine</i>	147	SYNAREL.....	102	GLUCOSE TEST.....	91
<i>sulfamethoxazole-trimethoprim</i>	45	SYNATEK.....	129	<i>telmisartan</i>	44
SULFAMYLON.....	85	SYNDROS.....	36	<i>telmisartan-amlodipine</i>	44
<i>sulfasalazine</i>	106	SYNERA.....	85	<i>telmisartan-hctz</i>	44
<i>sulfazine</i>	106	SYNJARDY.....	147	<i>temazepam</i>	115
<i>sulindac</i>	11	SYNJARDY XR.....	147	TEMODAR.....	51
SUMADAN.....	85	SYNRIBO.....	50	TEMOVATE.....	85
<i>sumatriptan</i>	125	SYNTHROID.....	149	<i>temozolomide</i>	51
<i>sumatriptan succinate</i>	125	SYNVISC.....	131	<i>terazosin hcl</i>	44
<i>sumatriptan succinate refill</i>	125	SYNVISC ONE.....	131	<i>terbinafine hcl</i>	37
SUMAVEL DOSEPRO.....	125	SYPRINE.....	60	<i>terbutaline sulfate</i>	23
SUMAXIN CP.....	85	TABLOID.....	50	<i>terconazole</i>	154
SUMAXIN TS.....	85	TACLONEX.....	85	TESSALON PERLES.....	74
SUPARTZ.....	131	<i>tacrolimus</i>	60, 85	TESTIM.....	18
SUPARTZ FX.....	131	TAFINLAR.....	50	<i>testosterone</i>	18, 67
<i>super daily d3</i>	155	TAGRISSE.....	50	<i>testosterone cypionate</i>	18, 67
<i>super thin lancets</i>	123	<i>take action</i>	71	<i>testosterone enanthate</i>	18
SUPPRELIN LA.....	102	TALTZ.....	85	TESTRED.....	18
SUPRAX.....	67	TALWIN.....	17	<i>tetcaine</i>	137
SUPREME TEST.....	91	TAMIFLU.....	58	<i>tetrabenazine</i>	145
SUPREP BOWEL PREP KIT		<i>tamoxifen citrate</i>	50	<i>tetracaine hcl</i>	137
.....	117	<i>tamsulosin hcl</i>	107	<i>tetracycline hcl</i>	148
SURE EDGE TEST.....	91	TANDEM F.....	113	<i>tetravisc</i>	137
SURECHEK BLOOD		TANDEM PLUS.....	113	TEXACORT.....	85
GLUCOSE TEST.....	91	TANZEUM.....	34	<i>tgt aspirin</i>	12
SURE-TEST EASYPLUS		TAPAZOLE.....	149	TGT BLOOD GLUCOSE	
MINI TEST.....	91	TARCEVA.....	50	MONITORING.....	123
SURMONTIL.....	30	TARGADOX.....	148	<i>tgt nicotine step one</i>	145
SUSTIVA.....	58	TARGRETIN.....	50, 85	<i>tgt nicotine step three</i>	145
SUTENT.....	50	TARKA.....	43	<i>tgt nicotine step two</i>	145
SW CLEARLAX.....	117	<i>taron forte</i>	113	TGT POWDERLAX.....	117
<i>swabflush saline flush</i>	127	TARON-C DHA.....	130	THALAMUS	
<i>syeda</i>	71	TASIGNA.....	50	COMPOSITUM.....	60
SYLATRON.....	50	TASMAR.....	52	THALOMID.....	60
SYMAX DUOTAB.....	152	TAYTULLA.....	71	THEO-24.....	23
SYMBICORT.....	23	<i>tazarotene</i>	85	<i>theochron</i>	23
SYMBYAX.....	145	<i>tazicef</i>	67	<i>theophylline</i>	23
SYMLINPEN 120.....	34	TAZORAC.....	85	<i>theophylline er</i>	23
SYMLINPEN 60.....	34	<i>taztia xt</i>	64	THERA-D 2000.....	155
SYMPROIC.....	106	TECFIDERA.....	145	THERA-D 4000.....	155
SYNAGEX.....	129	TECHNIVIE.....	114	THERA-D RAPID	
SYNAGIS.....	140	TEFLARO.....	67	REPLETION.....	156
SYNALAR.....	85	TEGRETOL.....	27	THERAMINE.....	95
SYNALAR (CREAM).....	85	TEGRETOL-XR.....	27	THERAMINE PLUS.....	95
SYNALAR (OINTMENT).....	85	TEKTURNA.....	44	THIOLA.....	107

<i>thioridazine hcl</i>	55	TOPAMAX SPRINKLE.....	27	<i>triazolam</i>	115
<i>thiothixene</i>	55	TOPICORT.....	85, 86	TRIBENZOR.....	44
<i>thrive</i>	146	TOPICORT SPRAY.....	86	<i>tricare</i>	130
THYMOGLOBULIN.....	60	<i>topiramate</i>	27	TRICARE PRENATAL	
THYROGEN.....	91	<i>toposar</i>	51	DHA ONE.....	130
THYROLAR-1.....	149	TOPROL XL.....	62	<i>tricon</i>	113
THYROLAR-1/2.....	149	TORISEL.....	51	TRICOR.....	40
THYROLAR-1/4.....	149	<i>torseamide</i>	98	<i>triderm</i>	86
THYROLAR-2.....	149	TOUJEO SOLOSTAR.....	35	TRIDERM.....	86
THYROLAR-3.....	149	TOVIAZ.....	153	TRIDESILON.....	86
<i>tiagabine hcl</i>	27	TRACLEER.....	65	<i>trifluoperazine hcl</i>	55
TIAZAC.....	64	TRADJENTA.....	35	<i>trifluridine</i>	137
TIGAN.....	36	<i>tramadol hcl</i>	17	<i>trigels-f forte</i>	113
TIKOSYN.....	21	<i>tramadol hcl er</i>	17	TRIGLIDE.....	40
<i>tilia fe</i>	71	<i>tramadol hcl er (biphasic)</i>	17	<i>trihexyphenidyl hcl</i>	52
<i>timolol maleate</i>	62, 137	<i>tramadol-acetaminophen</i>	17	<i>tri-legest fe</i>	71
TIMOPTIC.....	137	<i>trandolapril</i>	44	TRILEPTAL.....	27
TIMOPTIC OCUDOSE.....	137	<i>trandolapril-verapamil hcl er</i>	44	<i>tri-linyah</i>	71
TIMOPTIC-XE.....	137	<i>tranexamic acid</i>	114	TRILIPIX.....	40
TINDAMAX.....	45	TRANSDERM-SCOP (1.5		TRI-LUMA.....	86
<i>tinidazole</i>	45	MG).....	36	<i>trilyte</i>	117
TIROSINT.....	149	TRANXENE-T.....	20	<i>trimethobenzamide hcl</i>	36
<i>tis-u-sol</i>	60	<i>tranlycypromine sulfate</i>	30	<i>trimethoprim</i>	45
TIVICAY.....	58	TRAUMEEL.....	60	<i>trimpex</i>	45
TIVORBEX.....	11	TRAVATAN Z.....	137	<i>trinessa (28)</i>	71
TIZANIDINE COMFORT		<i>trazodone hcl</i>	30, 146	TRI-NORINYL (28).....	71
PAC.....	131	TRECTOR.....	47	TRINTELLIX.....	30, 146
<i>tizanidine hcl</i>	131	TRELEGY ELLIPTA.....	23	<i>triphrocaps</i>	130
<i>tl gard rx</i>	113	TRELSTAR MIXJECT.....	51	<i>tri-previfem</i>	71
<i>tl icon</i>	113	TREMFYA.....	86	TRIPTODUR.....	102
TOBI.....	8	TREPADONE.....	95	<i>tri-sprintec</i>	71
TOBI PODHALER.....	8	TRESIBA FLEXTOUCH.....	35	TRIUMEQ.....	58
TOBRADEX.....	137	<i>tretinoin</i>	51, 86	TRIVEEN-DUO DHA.....	130
TOBRADEX ST.....	137	<i>tretinoin (emollient)</i>	86	TRI-VIT/FLUORIDE/IRON	
<i>tobramycin</i>	8	<i>tretinoin microsphere</i>	86	.....	130
<i>tobramycin sulfate</i>	8	<i>tretinoin microsphere pump</i>	86	<i>trivora (28)</i>	71
<i>tobramycin-dexamethasone</i>	137	TRETIN-X.....	86	TRIZIVIR.....	58
TOBREX.....	137	TRETTEN.....	110	TROKENDI XR.....	27
TOFRANIL.....	30	TREXALL.....	51	<i>tropicamide</i>	137
TOLAK.....	85	TREXIMET.....	125	<i>trospium chloride</i>	153
<i>tolazamide</i>	34	TREZIX.....	17	<i>trospium chloride er</i>	153
<i>tolbutamide</i>	34	<i>triacetin</i>	67	TRUE METRIX BLOOD	
<i>tolcapone</i>	52	<i>triamcinolone acetonide</i>		GLUCOSE TEST.....	91
<i>tolmetin sodium</i>	11	.....	86, 127, 132	TRUEPLUS INSULIN	
<i>tolterodine tartrate</i>	153	TRIAMINIC		SYRINGE.....	123
<i>tolterodine tartrate er</i>	153	ALLERCHEWS.....	39	TRUEPLUS LANCETS 26G123	
TOPAMAX.....	27	<i>triamterene-hctz</i>	98	TRUEPLUS LANCETS 30G123	

TRUEPLUS SAFETY	UNISTRIP1 GENERIC.....	92	<i>velivet</i>	71
LANCETS 28G.....	<i>unithroid</i>	149	VELPHORO.....	106
TRUERESULT BLOOD	<i>unithroid direct</i>	149	VELTASSA.....	60, 142
GLUCOSE.....	UPTRAVI.....	146	VELTIN.....	87
TRUETEST TEST.....	URAMAXIN.....	86	VEMLIDY.....	58
TRUETRACK BLOOD	<i>urea nail</i>	86	VENCLEXTA.....	47
GLUCOSE.....	URECHOLINE.....	153	VENCLEXTA STARTING	
TRUETRACK SMART	UROCIT-K 10.....	107	PACK.....	47
SYSTEM.....	UROCIT-K 15.....	107	VENIPUNCTURE CPI.....	87
TRUETRACK TEST.....	UROCIT-K 5.....	107	<i>venlafaxine hcl</i>	30
TRULANCE.....	URSO 250.....	106	<i>venlafaxine hcl er</i>	30
TRULICITY.....	URSO FORTE.....	106	VENOFER.....	113
TRUSOPT.....	<i>ursodiol</i>	106	VENOMIL MIXED VESPID	
TRUVADA.....	UTIBRON NEOHALER.....	23	VENOM.....	62
TUDORZA PRESSAIR.....	UTOPIC.....	86	VENTAVIS.....	65
TUSNEL C.....	UVADEX.....	51	VENTOLIN HFA.....	23
TUSSICAPS.....	VAGIFEM.....	154	<i>verapamil hcl</i>	64
TUZISTRA XR.....	<i>valacyclovir hcl</i>	58	<i>verapamil hcl er</i>	64
TWYNSTA.....	VALCHLOR.....	86	VERDESO.....	87
TYBOST.....	VALCYTE.....	58	VERDROCET.....	17
TYKERB.....	<i>valganciclovir hcl</i>	58	VERELAN.....	64
TYLENOL WITH	VALIUM.....	20	VERSACLOZ.....	55
CODEINE #3.....	<i>valproate sodium</i>	27	VERZENIO.....	74
TYLENOL WITH	<i>valproic acid</i>	27	VESICARE.....	153
CODEINE #4.....	<i>valsartan</i>	44	<i>vestura</i>	72
TYMLOS.....	<i>valsartan-hydrochlorothiazide</i>	44	VFEND.....	37
TYSABRI.....	VALTREX.....	58	VIBERZI.....	115
TYVASO.....	VANATOL LQ.....	12	VIBRAMYCIN.....	148
TYVASO REFILL.....	<i>vancomycin hcl</i>	45	<i>vicodin</i>	17
TYVASO STARTER.....	<i>vandazole</i>	154	<i>vicodin es</i>	17
UCERIS.....	VANIQA.....	86	<i>vicodin hp</i>	17
UDAMIN SP.....	VANISHPOINT INSULIN		VICTORY AGM-4000 TEST.....	92
ULESFIA.....	SYRINGE.....	123	VICTOZA.....	35
ULORIC.....	VANOS.....	86	VIDA MIA UNIFINE	
ULTICARE INSULIN	VANTAS.....	51	PENTIPS.....	123
SYRINGE.....	VARUBI.....	36	VIDEX.....	58
ULTICARE SHORT PEN	VASCAZEN.....	95	VIDEX EC.....	58
NEEDLES.....	VASCEPA.....	40	VIEKIRA PAK.....	114
ULTIMA TEST.....	VASCULERA.....	96	VIEKIRA XR.....	114
ULTRACET.....	VASERETIC.....	44	<i>vigabatrin</i>	27
ULTRAM.....	VASOTEC.....	44	VIGAMOX.....	138
ULTRATRAK PRO TEST....	VAYACOG.....	96	VIIBRYD.....	30, 146
ULTRATRAK ULTIMATE	VAYARIN.....	96	VIIBRYD STARTER PACK	
TEST.....	VAYAROL.....	96	.....	30, 147
ULTRAVATE.....	VECAMYL.....	44	VIMIZIM.....	128
UNASYN.....	VECTICAL.....	86	VIMOVO.....	11
UNIFINE PENTIPS PLUS..	VELETRI.....	65	VIMPAT.....	27

VIOKACE.....	96	VSL#3 JUNIOR.....	96	XELJANZ.....	11
<i>viorele</i>	72	VUSION.....	87	XELJANZ XR.....	11
VIRACEPT.....	58	VYTORIN.....	40	XELODA.....	51
VIRAMUNE.....	58, 59	VYVANSE.....	8	XENAZINE.....	146
VIRAMUNE XR.....	59	<i>wal-fex d allergy & congestion</i> ..	74	XENICAL.....	8
VIRASAL.....	87	WAL-ITIN.....	39	XEOMIN.....	133
VIREAD.....	59	WAL-ITIN CHILDRENS.....	39	XERESE.....	87
VIRT-GARD.....	113	WAL-VERT.....	39	XERMELO.....	149
VIRT-PN.....	130	WAL-ZYR.....	138	XGEVA.....	102
VIRT-PN DHA.....	130	<i>wal-zyr childrens</i>	39	XHANCE.....	132
<i>virt-vite</i>	113	<i>warfarin sodium</i>	24	XIAFLEX.....	60
<i>virt-vite forte</i>	96	WAVESENSE PRESTO.....	92	XIFAXAN.....	45
VISIONBLUE.....	138	WELCHOL.....	40	XIGDUO XR.....	147
VISTARIL.....	20	WELLBUTRIN SR.....	30	XIIDRA.....	118
VISTOGARD.....	35	WELLBUTRIN XL.....	30	XIMINO.....	148
VISUDYNE.....	138	<i>vera</i>	72	XODOL.....	17
VITAFOL FE+.....	130	WESTHROID.....	149	XOLAIR.....	23
VITAFOL GUMMIES.....	130	WIDE-SEAL DIAPHRAGM		XOLEGEL.....	87
VITAFOL-OB+DHA.....	130	60.....	123	XOPENEX.....	23
VITAFOL-ONE.....	130	WIDE-SEAL DIAPHRAGM		XOPENEX	
VITAL-D RX.....	130	65.....	123	CONCENTRATE.....	23
<i>vitamin d</i>	156	WIDE-SEAL DIAPHRAGM		XOPENEX HFA.....	23
<i>vitamin d (ergocalciferol)</i>	156	70.....	123	XTAMPZA ER.....	17
<i>vitamin d2</i>	156	WIDE-SEAL DIAPHRAGM		XTANDI.....	51
<i>vitamin d3</i>	156	75.....	123	XULANE.....	72
<i>vitamin d3 maximum strength</i>	156	WIDE-SEAL DIAPHRAGM		XULTOPHY.....	115
<i>vitamin d3 super strength</i>	156	80.....	123	XURIDEN.....	114
VIVELLE-DOT.....	104	WIDE-SEAL DIAPHRAGM		XYLOCAINE.....	87
VIVITROL.....	35	85.....	124	XYLON.....	17
VIVLODEX.....	11	WIDE-SEAL DIAPHRAGM		XYNTHA.....	110
VOCAL POINT BLOOD		90.....	124	XYNTHA SOLOFUSE.....	110
GLUCOSE TEST.....	92	WIDE-SEAL DIAPHRAGM		XYREM.....	146
VOGELXO.....	18	95.....	124	XYZAL.....	39
VOGELXO PUMP.....	18	WILATE.....	110	XYZAL ALLERGY 24HR....	39
VOL-PLUS.....	130	WINRHO SDF.....	140	XYZAL ALLERGY 24HR	
VOL-TAB RX.....	130	WP THYROID.....	149	CHILDRENS.....	39
VOLTAREN.....	87	<i>wymzya fe</i>	72	YASMIN 28.....	72
VONVENDI.....	110	XADAGO.....	52	YAZ.....	72
VORAXAZE.....	51	XALATAN.....	138	YERVOY.....	51
<i>voriconazole</i>	37	XALKORI.....	51	YOSPRALA.....	110
VOSEVI.....	114	XANAX.....	20	YUVAFEM.....	154
VOTRIENT.....	51	XANAX XR.....	20	ZADITOR.....	138
VP-GSTN.....	96	XARELTO.....	24	<i>zafirlukast</i>	23
VPRIV.....	114	XARELTO STARTER		<i>zaleplon</i>	115
VRAYLAR.....	55	PACK.....	24	ZALTRAP.....	51
VSL#3.....	96	XATMEP.....	51	ZANAFLEX.....	131
VSL#3 DS.....	35	XELITRAL.....	87	ZANOSAR.....	51

ZANTAC.....	152	ZOLATE.....	114	ZYTIGA.....	51
<i>zarah</i>	72	<i>zoledronic acid</i>	102	ZYVOX.....	45
ZARONTIN.....	27	ZOLINZA.....	51		
ZARXIO.....	114	<i>zolmitriptan</i>	125		
ZATEAN-PN DHA.....	130	ZOLOFT.....	30		
ZATEAN-PN PLUS.....	130	<i>zolpidem tartrate</i>	115		
<i>zavara</i>	114	<i>zolpidem tartrate er</i>	115		
ZAVESCA.....	114	ZOLPIMIST.....	115		
ZEGERID.....	152	ZOMACTON.....	102		
ZEGERID OTC.....	152	ZOMETA.....	102		
ZEJULA.....	142	ZOMIG.....	125		
ZELAPAR.....	53	ZOMIG ZMT.....	125		
ZELBORAF.....	51	ZONACORT 11 DAY.....	73		
ZEMAIRA.....	146	ZONACORT 7 DAY.....	73		
ZEMBRACE SYMTOUCH.....	125	ZONALON.....	87		
ZEMPLAR.....	102	ZONEGRAN.....	27		
<i>zenatane</i>	87	<i>zonisamide</i>	27		
ZENATANE.....	87	ZONTIVITY.....	142		
<i>zenchent</i>	72	ZORBTIVE.....	102		
ZENPEP.....	96	ZORTRESS.....	60		
ZENZEDI.....	8	ZORVOLEX.....	11		
ZEPATIER.....	114	ZOSYN.....	141		
ZERIT.....	59	<i>zovia 1/35e (28)</i>	72		
ZESTRIL.....	44	<i>zovia 1/50e (28)</i>	72		
ZETIA.....	41	ZOVIRAX.....	59, 87		
ZETONNA.....	132	ZUBSOLV.....	17		
ZIAC.....	44	ZUPLENZ.....	36		
ZIAGEN.....	59	ZURAMPIC.....	108		
ZIANA.....	87	ZUTRIPRO.....	74		
<i>zidovudine</i>	59	ZYBAN.....	146		
<i>zileuton er</i>	23	ZYCLARA.....	87		
ZINBRYTA.....	146	ZYCLARA PUMP.....	87		
<i>zinc acetate</i>	67	ZYDELIG.....	141		
ZIOPTAN.....	138	ZYFLO.....	23		
<i>ziprasidone hcl</i>	55	ZYFLO CR.....	23		
ZIPSOR.....	11	ZYKADIA.....	51		
ZIRGAN.....	138	ZYLET.....	138		
ZITHROMAX.....	118, 119	ZYLOPRIM.....	108		
ZITHROMAX TRI-PAK.....	119	ZYMAXID.....	138		
ZITHROMAX Z-PAK.....	119	ZYPREXA.....	55		
ZMAX.....	119	ZYPREXA ZYDIS.....	55		
ZOCOR.....	41	ZYRTEC ALLERGY.....	39		
ZODEX 12-DAY.....	73	ZYRTEC CHILDRENS			
ZOFRAN.....	36	ALLERGY.....	39		
ZOFRAN ODT.....	36	ZYRTEC-D ALLERGY &			
ZOHYDRO ER.....	17	CONGESTION.....	74		
ZOLADEX.....	51	ZYTAZE.....	96		

2017 Aetna Pharmacy Drug Guide - MD, WV Four Tier Open Value Plus Small Group Formulary

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Next Update